

Welcome to our new look newsletter

You will hopefully have noticed that we have changed the format of our quarterly report drastically. Instead of our usual report, we have produced a newsletter, which hopefully still provides you with the information that you would like to see, but in a format that is more accessible and interesting. This newsletter still contains information on the data collected through the different schemes between April and June 2019.

We observed some interesting cases in the last quarter, including two cases of laryngeal obstruction. Furthermore this newsletter includes an item on the Industrial Injuries Disablement Benefit.

We hope to welcome many of you at the Lane Lecture on 5th November!

Inside this newsletter:

Summary statistics this quarter

Emerging themes in THOR

Information update from IIDB

Publications / events

Contacts

Summary of all cases reported to THOR April—June 2019

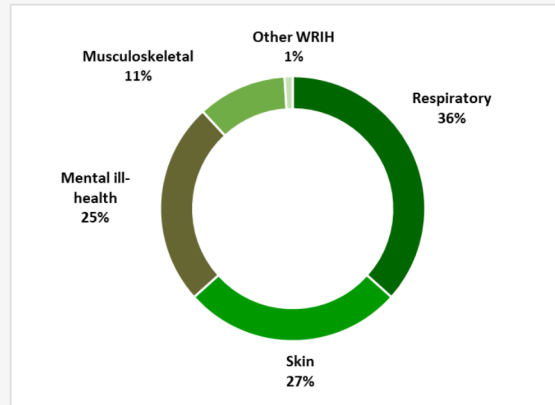
313 diagnoses of work-related ill-health (WRIH) were reported to THOR in the quarter April-June 2019

119 diagnoses reported by occupational physicians to OPRA

114 diagnoses reported by chest physicians to SWORD

73 diagnoses reported by consultant dermatologists to EPIDERM

7 diagnoses reported by general practitioners to THOR-GP

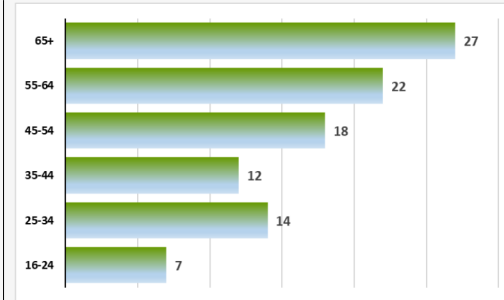


40%



60%

34% Healthcare
17% Construction
6% Education



Age, sex and most frequently reported industries/occupation vary by scheme:

- e.g. 70% of long latency respiratory cases reported to SWORD were seen in patients > 60 years (11% for OPRA and 26% for EPIDERM)

Sex breakdown can vary by diagnostic category:

- e.g. proportions for respiratory cases reported to SWORD are 87% male and 13% female

Emerging Themes in THOR



84% of the skin disease cases were reported as **contact dermatitis**



60% of mental ill-health cases were reported as **work-related stress**



64% of respiratory diseases were reported as long latency diseases such as **pleural plaques**, **pneumoconiosis** and **mesothelioma**



42% of musculoskeletal diseases were reported as **hand arm vibration syndrome (HAVS)**

One of the key functions of voluntary surveillance schemes such as THOR is to generate information on emerging occupational diseases or their causative factors. In this quarter it was interesting to note the first cases of inducible laryngeal obstruction (ILO) being reported to THOR. Both cases were females aged between 45 and 55, the first being a teacher with the reported suspected agent being whiteboard cleaner and the second attributed to perfumes in a clerical officer.

ILO was not described in the literature until 1983 but since then it has been a widely researched condition. [1] Symptoms may include episodic dyspnoea, wheeze, tightness of throat and voice changes due to paroxysmal laryngeal closure as a result of inappropriate adduction of vocal cords which can be demonstrated laryngoscopically. Recognised triggers include exercise, irritants and emotional factors and it is not surprising therefore that it has been reported to mimic work-related asthma. [2] ILO is a condition of growing interest amongst chest physicians, particularly those with an interest in occupational respiratory disease. It is also important that occupational physicians, and general practitioners consider it in the differential diagnosis of workers presenting with breathing difficulties that they attribute to work.

1. Halvorsen T, Walsted ES, Bucca C et al. Inducible laryngeal obstruction: an official joint European Respiratory Society and European Laryngological Society statement. Eur Respir J 2017;50:1602221

2. Feary J, Fitzgerald B, Szram J et al. Inducible laryngeal obstruction masquerading as work-related asthma: a new approach. Thorax 2016;71(Suppl 3):A1-A288

Are your patients potentially eligible for Industrial Injuries Disablement Benefit?

Industrial Injuries Disablement Benefit (IIBD) provides no-fault compensation for people who are employed earners (i.e. excludes the self-employed) who are disabled either as a result of an accident at work (industrial accident) or if they suffer from one of a list of 'prescribed diseases'. A prescribed disease is one where the link between the disease and work (industry, occupation, specific tasks etc.) has been established with 'reasonable certainty', i.e. it is more likely than not (double the risk) that the disease is due to a person's work.

The government is guided in this by recommendations from the Industrial Injuries Advisory Council (IIAC) which is an independent body, set up by Act of parliament (originally in 1948). The Council usually has about 17 members, including its chair, with its members being medical and scientific experts plus some members representing employees (often trade union officials) and employers (often occupational health and safety professionals).

Prescribed diseases are grouped into 4 causes - given below with select examples:

Physical: e.g. Leukaemia and benzene exposure; occupational deafness; HAVS; OA of hip in farmers

Biological: e.g. Leptospirosis and animal contact; TB in health workers; Hepatitis B/C

Chemical: e.g. Lung/bladder/skin cancers and arsenic; emphysema and cadmium; nasal cancer and chromate

Other: e.g. Asbestosis, mesothelioma, lung cancer with/without asbestosis and asbestos; Silicosis and lung cancer with silicosis and silica; nasal, sinus and nasopharyngeal cancers and wood dust; asthma and many different exposures; COPD and coal mining

More information about the work of IIAC, details of currently prescribed diseases and guidance on eligibility and how to apply for IIBD can be found at:

<https://www.gov.uk/government/publications/industrial-injuries-disablement-benefits-technical-guidance/industrial-injuries-disablement-benefits-technical-guidance>



Events — Lane Lecture 2019

This years Lane Lecture will be held at 3pm on the 5th of November. Our speaker will be Dr Jenny Hoyle with a talk entitled '30 years of SWORD: forging the links between research and practice to produce impact'.

Register for tickets by visiting:

<https://www.eventbrite.co.uk/e/lane-lecture-and-symposium-2019-tickets-72069641237>

Recent Publications from THOR

Carder M, Seed MJ, Money A, Agius RM, van Tongeren M. **Occupational and work-related respiratory disease attributed to cleaning products** Occupational and Environmental Medicine Published Online First: 05 June 2019. doi: 10.1136/oemed-2018-105646

Seed MJ, Carder M, Gittins M, Sen D, Money A, Fishwick D, Barber CM, van Tongeren M. **Emerging trends in the UK incidence of occupational asthma: should we be worried?** Occup Environ Med Published Online First: 01 April 2019. doi: 10.1136/oemed-2018-105414

Beck Report—Thank you

I am sure many of you will have found the Beck Reports both insightful and informative over the years, even if your specialty isn't dermatology.

We were very grateful when Dr Mark Wilkinson agreed to take on the task of continuing to provide a quarterly overview for THOR reporters when Dr Mike Beck retired, and now it is Dr Wilkinson's turn to retire from practice, and as an active reporter to THOR.

We would like to take this opportunity to thank him for his contribution over the years. We wish him well in his retirement and will miss his input on all things dermatological.

We hope you enjoy this new format newsletter — if you have any further questions about any of our schemes, then please get in touch via one of the contacts listed below — we are always happy to hear from you.

A reminder that we operate a data enquiry service for our reporting physicians, funding bodies, members of the public, research institutions and other interested parties. Opposite are just some of the requests we have answered to date in 2019:

HSE	Non-HSE
Cases of skin and respiratory disease within the rail industry	Occupational dermatitis attributed to acrylates
Respiratory disease attributed to aspergillus	Vitiligo cases
Occupational Asthma attributed to spices / seasoning	Pneumoconiosis attributed to cement / concrete
Respiratory disease caused by TIG/ MIG welding	Ill-health in waste recycling workers
Allergic alveolitis due to metal working fluids	Occupational asthma in plasterer technicians
Allergic contact dermatitis due to glove use or rubber accelerators in healthcare	Neurological disease in meat/animal-related industries
SWORD cases attributed to diacetyl	Sarcoidosis in dental technicians
	HAVS cases reported to OPRA

SCHEME	Email	Phone
EPIDERM / SWORD	Laura.byrne@manchester.ac.uk	0161 275 7103
OPRA / THOR-GP	Susan.taylor@manchester.ac.uk	0161 275 5531
DATA REQUESTS	Annemarie.money@manchester.ac.uk	0161 275 8492
GENERAL ENQUIRIES	Annemarie.money@manchester.ac.uk Ana.barradas@manchester.ac.uk	0161 275 8492