

THOR ROI

The Health and Occupation Research network in the Republic of Ireland

Centre for Occupational and Environmental Health

The University of Manchester

<http://www.medicine.manchester.ac.uk/oeh/research/thor/schemes/ireland>

Dr Melanie Carder, Dr Annemarie Money, & Prof Raymond Agius

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INTERIM REPORT, covering the period: July 2016 to September 2016

Dear colleague,

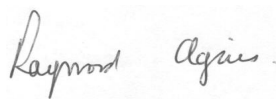
Your quarterly input to THOR in the Republic of Ireland (ROI) is summarised in this report. My colleagues and I are grateful for your continuing support.

We also greatly appreciate the continued funding by the Health and Safety Authority (HSA) of the Republic of Ireland. The case reports received from the ROI are understandably fewer than those received from the UK, because of the much smaller population. Nevertheless both we and the HSA recognize that better case ascertainment is needed in the ROI and we shall be making further collaborative efforts to achieve this. However this aim can only be fulfilled with your continuing involvement through case reporting, as well as through encouraging other colleagues to join the schemes. To illustrate what can be achieved with higher numbers of case reports, we are attaching the corresponding quarterly THOR UK report for your information. Please let us know by emailing [Annemarie.money@manchester.ac.uk] whether you feel that this is useful or informative, or whether it is unnecessary, so we can gauge whether we should do so again.

Please remember that your participation in OPRA-ROI and THOR-GP ROI entitles you to participate in the free accredited CPD resource entitled EELAB (Electronic Experiential Learning, Audit and Benchmarking) that is available through your THOR portal.

I close with my best wishes for the festive season and for 2017, and look forward to emailing you again in three months' time. In the meantime, if you have any queries or comments please do not hesitate to contact us via the details provided in Table 1 in the report.

Yours sincerely



Raymond Agius

Professor of Occupational and Environmental Medicine

BACKGROUND

Chest physicians and dermatologists in the Republic of Ireland (ROI) have been reporting voluntarily to The Health and Occupation Research network (THOR-ROI) since January 2005, whilst occupational physicians have been reporting since January 2007, and general practitioners since 2015. The policy within all the THOR schemes is to work on a three month lag to enable thorough data cleaning procedures to be carried out. Therefore, this document provides a brief update of the cases reported during the period July to September 2016, inclusive. This report should not be viewed as a 'stand alone' document but as a supplement to previous interim quarterly reports and 'substantive' annual reports (the most recent of which was submitted in September 2016).

OVERVIEW OF CASE REPORTS

OPRA-ROI

The 27 occupational physicians currently reporting to OPRA-ROI returned a total of 17 case reports (19 diagnoses) between July and September 2016, (total ever cases up to September 2016 = 1494). Figure 1 shows the proportion of work-related ill-health diagnoses reported by major diagnostic category.

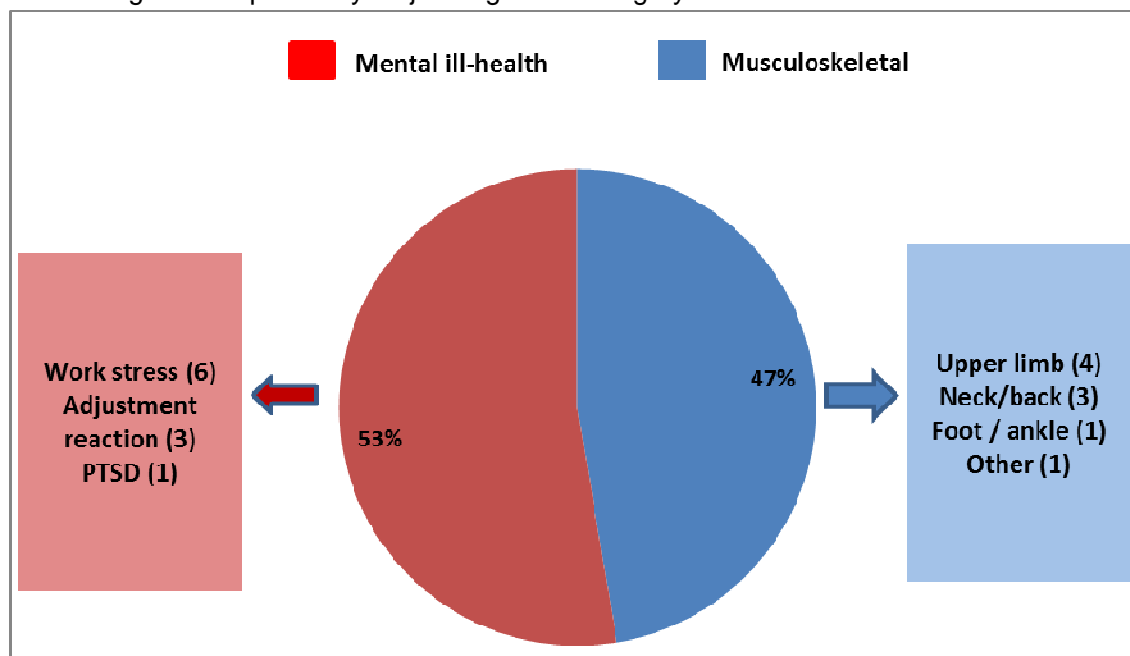


Figure 1 Proportion of work-related ill-health diagnoses reported by occupational physicians to OPRA-ROI by diagnostic category (July – Sept 2016)

Cases were predominantly female (71%) and the age range (all cases) was 26 to 56 years (mean age = 42 years). 11/17 (65%) of the cases reported this quarter were reported in the health and social care sector, 2/17 cases (12%) reported in the retail trade sector (except motor vehicles), and 1 case each reported in the land transport

sector, security activities, accounting and legal services sector, and financial services. Occupations reported in the health and social care sector this quarter included nurses, midwives, paramedics, medical and dental technicians, ambulance staff, nursing auxiliaries and care assistants.

The cases reported under the mental ill-health category comprised 6 diagnoses of work-related stress, 3 diagnoses of other work-related stress (adjustment disorder) and 1 diagnosis of post-traumatic stress disorder (cases may have more than one diagnosis). The precipitating events (as recorded by the physicians) associated with the mental ill-health cases included assault, bullying, role clarity, traumatic events, work overload and demand-control imbalance.

The musculoskeletal cases reported by OPs this quarter related to upper limb disorders (4 diagnoses), neck / back disorder (3 diagnoses), ankle / foot disorders (1 diagnosis) and other musculoskeletal disorders (specified as chest, 1 diagnosis). The tasks and movements associated with the musculoskeletal cases (as recorded by the physicians) included 'manual handling', posture, repetition, accidents and keyboard work.

EPIDERM-ROI

The 13 dermatologists currently participating in EPIDERM-ROI reported 5 cases of work-related skin disease this quarter (total ever cases up to Sept 2016 = 447). All were reported as contact dermatitis (3 diagnosed as allergic and 2 as irritant). The industry sectors reported were other personal service activities (hairdressing and beauty (3 cases)) health and social care (1 case) and other manufacturing (1 case). 3/5 cases were reported in females and the age range of all cases was 23-48 years (mean age = 33 years). The suspected agents reported included P-Phenylenediamine (PPD), ammonium persulphate, HEMA (2-hydroxyethylmethacrylate), soaps and water, and sweating under gloves.

SWORD-ROI

3 cases of work-related respiratory disease were reported by chest physicians during the third quarter of 2016. All cases were reported in males and were diagnosed as non-malignant pleural disease (construction labourer attributed to asbestos), asthma (farm worker attributed to feed stuffs) and bronchitis / emphysema (carpenter attributed to wood dust). In total (January 2005 to Sept 2016), chest physicians have reported 159 case reports.

THOR-GP-ROI

22 general practitioners are currently enrolled in the scheme in ROI. In the third quarter of 2016, 1 case of work-related ill-health was submitted, total cases reported since the scheme commenced in 2015 = 12. The case was diagnosed as work-related stress and reported in a female cleaner in the retail sector, the precipitating events recorded were bullying, discrimination and unfair work load.

CASE OF THE QUARTER

If you have seen a case which you feel may be a potential “case of the quarter” we would ask you to summarise the information in about 250 words and send this to us. Important factors which we have to take into account include data protection, consent issues, and ethical considerations, so we need you to obtain the patient’s consent to allow release of information before sending your case of the quarter to THOR. In addition, it is prudent to try to minimise the amount of personal data you provide (i.e. that which would allow identification of an individual) if at all possible.

BECK REPORT

We are most grateful to Dr Mark Wilkinson for this quarter’s ‘Beck Report’, which provides a commentary for cases of work-related skin disease reported to THOR and THOR-GP UK this quarter.

BECK REPORT

The cases reported to EPIDERM this month again highlight that fewer cases of skin cancer appear to be reported from the armed forces and a greater number from other outdoor occupations. Of 17 cases, 9 were reported from farmers and agricultural workers, 2 postmen, 1 policeman, a bricklayer and an oil rig worker, and only 3 from the armed forces. I was interested to discover that actinic keratoses and squamous cell carcinoma are now recognised and compensated as occupational diseases in Germany¹. Actinic keratoses must cover an area of at least 4cm² or there must be at least 5 individual keratoses develop per annum. The tumour must develop in sun exposed areas, and to qualify the worker must have been exposed in their job to an additional 40% UV above the calculated exposure of an indoor worker. This 40% increase in sun exposure is assumed to double the risk of developing cutaneous squamous cell carcinoma. They calculate that at age 50 a worker would have had to have spent 15 years in an outdoor occupation (at 60 - 18 years; 70 - 21 years and at age 80 - 24 years) to meet their criteria.

Also, interesting to see were the number of more exotic perfume allergens causing contact allergy amongst the workforce. For the non-dermatologist; when testing for fragrance allergy we use a screen of 2 fragrance mixes, an extract of a tree used in perfumery (*Myroxylon pereirae*) and a synthetic fragrance hydroxyisohexyl 3-cyclohexene carboxaldehyde – better known as HICC! Of 9 fragrance allergic patients, only 4 reacted to a screening substance. Other fragrance chemicals reported included 2 to limonene & linalool and one each to majantol, geraniol, citral and lemon grass oil. That 5 of these patients would have been missed by our screening materials emphasises the need to test more widely for fragrance allergy and that the current fashion for ‘natural’ products isn’t without its risks.

¹ Diepgen TL, Brandenburg S, Aberer W, et al. Skin cancer induced by natural UV-radiation as an occupational disease—requirements for its notification and recognition. J Dtsch Dermatol Ges. 2014; 12: 1102-6

Two cases this quarter also highlighted why I think it's useful to list not just the allergen but also the exposure resulting in the dermatitis. Both were builders allergic to potassium dichromate with 2 exposures causing dermatitis; cement and leather gloves and potentially leather footwear.

The quirk this quarter was a bank cashier allergic to thiurams assumed to be present within the rubber bands she used in her job. Too much of the folding stuff!

**Dr Mark Wilkinson, Consultant Dermatologist,
Leeds General Infirmary**

REMINDER OF HOW WE CAN HELP YOU

We would again like to take this opportunity to encourage THOR-ROI reporters to contact us if they would like to present THOR-ROI or THOR-UK data at future meetings; simply email Annemarie.money@manchester.ac.uk

THOR CONTACTS

Many thanks for your continued support of THOR-ROI, please contact us (Table 1) if you have any queries or data requests.

Table 1 THOR Contact details

SCHEME	email	Phone
EPIDERM-ROI SWORD-ROI	Christina.O'Connor@manchester.ac.uk	+44 (0)161 275 7103
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