

ICOH COMMITTEE

OCCUPATIONAL HEALTH

FOR HEALTH CARE WORKERS

NEWSLETTER 6 12/2004

Dear members of the committee,

we have returned from the 6th international conference on Occupational Health for Health Care Workers in Kitakyushu. In this newsletter we mainly report about this conference including a protocol of the Committee meeting.

With best wishes for the coming year

Gustav Wickström and Hans-Martin Hasselhorn

The chairman's report from the 6th conference

The conference in Japan turned out to be both nice and fruitful. Our Japanese colleagues had worked very hard to arrange the conference and they succeeded in every respect. All the arrangements worked smoothly, even if the photographer had some troubles climbing the ladder to reach the roof of the entrance to the Ramazzini hall. We passed this Italian gentleman every day. Rain or shine, he waited bronze ted for us outside the hall given his name. The lecture halls were technically very well equipped, making it easy for everybody both to hear and see the presentations. The poster hall was by the side of the luncheon restaurant, which made it easy to get acquainted with the poster presentations.

Over 300 participants from more than 40 countries took part in the conference. As the ICOH board happened to have their meeting in Kitakyushu, we were joint not only by the two vice-presidents which are members of our committee, Prof Alain Cantineau and Prof Ruddy Facci, but also by the President Jorma Rantanen and the Secretary General Sergio Iavicoli. In the group portrait taken outside the hall you can also see Professor Jean-Luc Marié, chairman of ISSA.

Not only did we learn a lot about the experiences from various parts of the world. Many of us also met old friends and everybody made new ones. For all this we are most grateful to

Professor Toshiteru Okubo

Professor Susumu Oda

Professor Toshiaki Higashi

and their "all stars" colleagues. Thanks you once more for a very nice experience!



Participants of the 6th ICOH CONFERENCE OH FOR HCW IN KITAKYUSHU JAPAN, Oct 8-10 2004

**6th ICOH CONFERENCE OH FOR
HCW IN KITAKYUSHU JAPAN, Oct
8-10 2004**

<http://www.hcw2004uoeh.jp/>

Business Meeting:

Committee OH for HCW

Friday October 8, 18.00-20.00.

31 people were present:

Attendance:

Committee members

Ferdinand Smith
Ian Symington
Toshiaki Higashi
Susumu Oda
Abdeljalil el Kholti
Antoon de Schryver
Jean-Francois Gehanno
Ruddy Facci
Alain Cantineau
Philippa Momah
Robert Orford
Gustav Wickstöm
Hans-Martin Hasselhorn

Guests:

Marjukka Laine (Finland)
Esther van der Schoot (Netherlands)

Jorman Rantanen (Finland)
Annie Leprince (France, ISSA)
Jean Luc Marié (France, ISSA)
Janine Cantineau (France)
Ken Takahashi (Japan)
Kazutaka Kogi (Japan)
Kazuhiro Uchida (Japan)
Toru Yoshikawa (Japan)
Antoinette Ofili (Nigeria)
Obehi Okojie (Nigeria)
Ava Novanete (Chile)
Graziela Gonzalez (Paraguay)
Naesine Chaiear (Thailand)
Gerry Eijkemans (WHO, Geneva)
Ronaldo K. Fujii (Japan, Brazil)

1. Opening of the meeting

Introductory round, 2 representatives from ISSA (Annie Leprince and Jean-Luc Marié) and one from the WHO (Gerry Eijkemans) present.

2. Cooperation with the Work Group on Biological Agents and Infectious Diseases

Ruddy Facci informed about the new ICOH work group on Biological Agents. The main aim of the committee is to cover all upcoming oc-

cupational microbiological problems. As the first focus, the group has chosen the occurrence and prevention of infectious diseases among health care workers and travelling workers. Close cooperation with our committee is desired. It was decided that a smaller subgroup (Ruddy, Robert, Antoon, Jean-Francois G., Gustav) would meet during the present conference and develop further plans for activities (see separate report in this newsletter).

3. Joint statement on protection of health care workers by ICOH and ISSA

After several minor modifications the statement (enclosed below) was agreed upon and publicly declared on Saturday. Philippa wondered about the dissemination of the statement: several ways were proposed such as the ICOH newsletter and ICOH internet page. Robert might get it on the NIOSH newsletter. Philippa emphasised the need to have this declaration supported by WHO and/or ILO in order to have significant impact in all countries.

4. Milano conference

Jorma Rantanen reported that the Milano ICOH 2006 conference (celebrating 100 years of ICOH) shall cover a) the past, b) the presence, and c) the future. We should remember this when we are planning our activities.

Some months ago our committee has announced to the organizers that we are willing to arrange at least 2 sessions and to have one key lecture covering health care.

The discussion has brought the following proposals:

- a) working conditions for HCW OH in developing countries, OH for HCW in developing countries,
- b) Physical load in patient handling
- c) Psychosocial factors in HC work.

Topic a) might be arranged together with the ICOH committee for development and WHO collaborating network (proposal by Gerry Eijkemans) and topic Philippa, Abdeljalil el Kholti and Kazutaka Kogi will coordinate further evaluation of topic "a".

b) with the International Ergonomic Association (IEA); Sue Hignett, chair of the working group on patient handling, had approached Gustav because of that.

Most probably, there will be money available for some participants from developing countries.

5. Future conferences arranged by the committee

The committee has been approached to conduct an ICOH conference together with the ICOH committees on a) ageing and b) shift work. To have a joint conference is explicitly appreciated by the ICOH board. During the forthcoming conference on work ability in Verona (Oct. 18-20) HM will discuss this with Giovanni Costa and Juhani Ilmarinen.

Organisers, time and location are still open. Both Alain Cantineau (Strasbourg) and Abdeljalil el Kholti (Casablanca) said they might be able to arrange the conference.

6. Procedure electing committee chairman

Alain reported that there shortly will be new guidelines on the procedures of choosing the committee chairs. Candidates would have to announce their willingness to act as chair at least 6 months prior to the election.

7. Membership situation

The committee has at present 43 members. During the Kitakyushu conference, several participants announced that they would like to join the committee.

8. Other questions

Jorma Rantanen mentioned that ICOH would appreciate ICOH committees to produce guidelines on matters of special interest in their field.

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Joint declaration

The (enclosed) "Joint declaration of the International Commission on Occupational Health (ICOH) and the International Social Security Association (ISSA): Recommendations for protecting Health Care Workers' Health" was presented to the public on Oct 9 by the president of ICOH, *Jorma Rantanen*, and the president of ISSA *Jean-Luc Marié*.

Presentations

You can download several of the presentations (covering results of the European NEXT-Study) from the NEXT web sites: www.next-study.net.

HOMEPAGE

This is the internet link to our committee homepage.

www.arbmed.uni-wuppertal.de/icoh-sc-hcw.

MEMBERS

We are welcoming two new members, of the committee Dr. Choy and Dr. Machtelinckx and are looking forward to an active participation.

On the other hand, Pierre Robillard (Canada) who has organised our Montreal Conference has left the committee because he is working in another field. We acknowledge and thank for his substantial contribution to the committee's work.

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Joint declaration of the International Commission on Occupational Health (ICOH) and the International Social Security Association (ISSA):

Recommendations for protecting Health Care Workers' Health Facts

- Health care facilities' main "resource" is the staff comprising different professional groups. Whatever the group, health care professionals are highly committed to their work and emphasize care quality given to patients, sometimes to their own health detriment.
- Occupational health risks in health care work are numerous. They are related to exposure to the following: infectious agents, various chemicals (including drugs), allergens, radiation, heavy musculoskeletal loads, shift work, physical violence, various forms of mental charge and psychological stress.

- Occupational risks prevention for health care workers varies from country to country. In some countries preventive measures are fairly well developed, in others they are practically non-existent.
- Health care workers often have little knowledge of their occupational risks as well as preventive means.
- Regarding infectious risks, prevention is mostly insufficient in countries where these diseases are highly prevalent.

Recommendations for policy makers, managers, health care professionals and occupational health and safety specialists

- Occupational risks prevention needs to be an integral part of management, administration and assessment processes, particularly health care procedures and health care quality assessment.
- Occupational health and safety services must be available for all health care workers (HCWs) whatever health care facilities.
- All HCWs occupational risks must be regularly assessed, covering physical, chemical, ergonomic, biological and psychosocial work environment.
- Systematic occupational risks prevention programmes must be defined, allocating specific means required. HCW must actively participate in planning and implementation of these programs.
- All health care staff must receive information and training on occupational risks and preventive means, including hygiene.
- Collective protective measures, including those related to hand washing and other personal hygiene facilities, must be implemented. Appropriate personal protective equipment must be provided to staff.
- Occupational infectious risks prevention must be integrated into each organization's hygiene policy: nosocomial infections' fight includes protective measures for health care workers.
- Health care staff immunization programmes' implementation is necessary. Access to medical advice, vaccination and, if needed, post-exposure prophylaxis must be provided free of charge.
- Prevention programmes must be reviewed, and risks regularly reassessed to improve prevention.

ICOH Committee Occupational Health for Health Care Workers

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