In this issue of Occupational Medicine

The current economic climate and recent recession affecting many European countries has provided an opportunity to assess the impact of these changes on workers’ health. In this issue, Houdmont and colleagues [1] used the Northern Ireland Stormont Study to investigate how the economic climate might impact on the health of the workforce. They examined the self-reported mental health of civil servants and also measured workplace psychosocial risk factors using the HSE management standards. The first survey of 17 000 employees was carried out in 2005 prior to the UK economy entering recession and the second survey of almost 10 000 employees was carried out in 2009 after the economic crisis had begun to develop. Exposure to six out of the seven psychosocial hazards was worse in the second survey, self-reported cases of work-related stress increased from 18% to 26% and there was a significant increase in absence for work-related stress. Not surprisingly, the authors call for a concerted focus on psychosocial risk-management activities during austere economic times as a means to promote worker health and minimize sickness absence. However, the practicality of such measures and their effectiveness in difficult economic times are not known.

The administration and processing of pre-employment health questionnaires are a core function of many occupational health providers and are also a function commonly requested by occupational health service users. They are also open to misuse in that if they are not administered correctly they can allow inappropriate access to personal health data by non-medical personnel and their real purpose may be poorly understood by employers. Legislation including the Data Protection Act and the Equality Act has led to improved awareness and a move towards the concept of pre-placement health assessment as opposed to pre-employment screening, but ultimately how effective are pre-employment health questionnaires? Madan and colleagues [2] carried out a systematic review to establish whether health questions asked before employment are effective in predicting health and employment outcomes. They identified seven papers, including two MFOM dissertations, but little actual evidence that pre-employment health screening by questionnaire is effective in determining future health or occupational outcomes for prospective employees. They recommend that all jobs should be risk assessed before applicants are appointed and that where pre-employment health screening does take place it must be based on clear health standards with explicit criteria for rejection.

The health and occupation reporting network, or THOR, continues to produce a huge amount of research data and has now produced over 75 peer-reviewed research papers, of which a fifth have been published in Occupational Medicine. THOR-GP was established in 2005 and is providing an additional source of information from a different perspective about work-related disease compared with the longer established occupational physician and clinical specialist reporting networks. In this issue, Hussey and colleagues [3] report on work-related sickness absence as reported by general practitioners reporting to the THOR-GP network. THOR-GP consists of around 300 general practitioners who have the Diploma of Occupational Medicine. Between 2006 and 2009, they reported almost 6000 cases of work-related disease, of which about half were musculoskeletal and a third were mental ill-health. Over half the cases (56%) were associated with sickness absence with a mean duration of 24 days. Absence was more likely and of longer duration if the case was female, older, had mental ill-health and worked in the public sector. Those cases from workforce sectors with higher rates of self-employment were less likely to have associated sickness absence. The authors state that this data provides useful triangulation against other sources such as the survey of Self-reported Work-related Illness (SWI) and the Labour Force Survey, and provides further evidence to help understand the personal and societal factors that contribute to sickness absence. It also provides powerful evidence of how often a work-related condition is going to result in long-term absence from work and suggests that these are costly conditions.

Remaining on the subject of THOR, the second Occupational Medicine podcast has interviews with Jill Stocks and Professor Raymond Agius from the Centre for Occupational and Environmental Health at the University of Manchester. Jill discusses research from THOR concerning construction workers which was published in Occupational Medicine last year [4] and Raymond talks about THOR in general. The podcast can be accessed through the Society of Occupational Medicine website and contains a review of some of the research we published last year as well as a fascinating interview with Mike McKiernan about his art and occupation series. Have a listen and let us know what you think!

John Hobson
Honorary Editor

References