

Bulletin

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In this issue:

Chairman's letter: a view from Bari
Announcement of EASOM Summer School 2006
in Bari, Italy

Rehabilitation – Case Management:
an interdisciplinary approach at ETH Zurich /
IST Lausanne *(by Angela Ensslin)*

Teaching of occupational medicine to
undergraduates in French schools of medicine *(by*
Jean-François Gehanno)

New EASOM members present themselves
Czech Society of Occup Medicine *(by Milan Tuček)*
University Pompeu Fabra *(by Consol Serra)*

Forthcoming events

New members

A request from the Board of EASOM

More information about EASOM: <http://www.easom.org>

For comments and questions about this Bulletin and contributions and suggestions for the next Bulletin, please send an e-mail to EASOM's Secretary:

andre.weel@mediforce.nl

Chairman's letter - A view from Bari



It is with pleasant memories of the Bari countryside that I write this contribution to the latest EASOM bulletin. We have just returned from Italy having had a board meeting to discuss and plan this year's Summer School. As you will know, 2006 is the centenary year for ICOH and the triennial congress will be held in Milan, in June. Our Summer School will be a satellite meeting, to be held at the end of August. Visit the web site for more information, as well as reading this bulletin. This year we will be beginning an exciting new project to develop a European teaching module in practical occupational epidemiology. This will, we hope, be the first of many such modules that could combine to produce a common European training curriculum. Members of EASOM will have access to the module as a benefit of membership and will, of course, have the opportunity to contribute to the module either at the Summer School or thereafter when we circulate it for comment.

This is the second tangible example of how EASOM is evolving to give members added value at a European level. The first was the re-launching of the web site, which we will continue to develop. The site could be the launch pad of other exciting developments to promote communication and assist training. The time is ripe for refocusing the vision for EASOM for the next few years. I am keen to play my part in this, but not as your chairman. This is my last year in post, as I will have served for 8 years on the EASOM board. The General Assembly in Bari will decide my successor and I encourage you to participate. I am grateful for the help and support that I

have received from the board members and I can reassure you that EASOM is fortunate to have such able and committed people serving its interests. There will be two vacancies on the board and nominations for the posts will be welcomed.

I look forward to seeing you in Bari at the end of August.



**WELCOME
TO BARI!**

**John Harrison
Chairman of EASOM**

Announcement of EASOM Summer School 2006 in Bari, Italy

The Board of EASOM is happy to announce the sixth EASOM Summer School:

TEACHING PRACTICAL OCCUPATIONAL EPIDEMIOLOGY

**The Summer School will take place in Bari, Italy,
from August 31 till September 2, 2006.**

Preliminary programme (some lecturers still to be confirmed)

Thursday, 31st of August: WHY and WHAT to teach

09:00 – 10:00 Registration of participants
10:00 – 10:30 Opening Ceremony
10:30 – 11:15 Keynote lecture by prof. Pier Alberto Bertazzi (Milano):
The importance of occupational and environmental epidemiology for the
occupational health practice
11:15 – 11:45 Coffee break
11:45 – 12:15 Presentation of example by Audi Germany
12:15 – 13:00 Discussion guided by statements
13:00 – 14:00 Lunch
17:00 – 20:00 Presentations from countries about the national situation
in training of occupational epidemiology. Prof. Giorgio Assennato (Bari)
will start explaining the Italian situation. Participants are invited to
present their own national situations. There will be 30 minutes discussion
time at the end of the session.

Friday: 1st of September: HOW to teach

08:30 – 09:15 Keynote lecture by prof. Guido Moens (Leuven):
How to teach basics in occupational epidemiology.
09:15 – 09:45 Timo Kauppinen (Helsinki): How to teach exposure
assessment, using the Job Exposure Matrix.
09:45 – 10:15 Discussion
10:15 – 10:45 Coffee break
10:45 – 11:15 Dario Consonni: Software for epidemiology
11:15 – 12:15 Wolfgang Hien (Bremen): How to teach to read a paper.
Demonstration of a training.
12:15 – 13:00 Discussion
13:00 – 14:00 Lunch
16:30 – 18:00 Round table about causality, one or two presentations
18:00 – 20:00 EASOM General Assembly

21:00 – 23:00 Summer School Dinner

Saturday, 2nd of September: synthesis of WHY, WHAT, and HOW to teach: towards a European teaching module

09:00 – 11:00 Discussion in three groups
11:00 – 11:30 Coffee break
11:30 – 12:45 Reports from the groups and discussion
12:45 – 13:00 Closing Ceremony.

The maximum number of participants is 40.
The registration fee is 200 euro.

If you want to participate, please send an e-mail to mrs Tina Mongelli (University of Bari): t.mongelli@medlav.uniba.it
You will receive detailed information about the venue, hotel accommodation and the payment of the registration fee.

Rehabilitation – Case Management: an interdisciplinary approach at ETH Zurich / IST Lausanne

by Angela Ensslin

The postgraduate studies in work + health is a joint program at ETH Zurich and IST Lausanne. In an interdisciplinary approach physicians, natural scientists, engineers and psychologists are trained to become occupational health specialists.

The first block of the program covers the basics in work physiology, chemical, physical and biological risk factors, an introduction into occupational medicine, occupational hygiene and ergonomics, work psychology and legal issues. It is followed by a second block on management and entrepreneurial context. During the third block the students pursue their specialization in occupational medicine, occupational hygiene or ergonomics. The fourth block deals with epidemiology, public health, health promotion and a 2 week practical training in a company.

The 3 day module “rehabilitation and case management” is offered as part of the specialization in occupational medicine and ergonomics. The primary goal of the rehabilitation module is to train occupational physicians and ergonomists in work assessment and prepare them for their roles in the rehabilitation process. This requires a comprehensive and interdisciplinary approach involving physicians, ergonomists, physiotherapists, psychologists, social workers and insurances. Therefore they are also all involved in the teaching of this module.

The module consists of a more theoretical introduction into rehabilitation, followed by methods of work assessment with case studies, a visit to a rehabilitation center and an overview on the tasks and role of a case manager.

The introduction begins with the definition of medical, industrial and social rehabilitation and an overview on the general context. The Swiss society is facing a continuous increase of persons receiving disability pensions due to musculoskeletal disorders and psychological disabilities. Approximately 20% of the male population receives disability payments before retiring.

Subsequently, disability is not only an individual problem but also an increasing socioeconomic issue.

It is a common problem that most general practitioners are unable to evaluate work ability and work assessment as they lack specific knowledge on demands at work and possible remaining tasks. Furthermore, clear criteria for the evaluation of work ability are rare or unknown, resulting in subjective judgments. Thus, the students are introduced to the International Classification of Functioning, Disability and Health (ICF) of the WHO which describes how people live with an impaired health condition with respect to body functions and structures, activities and participation. It serves to understand the determination and the consequences of diseases/disability on an individual level as well as from a societal perspective including environmental factors.

In the following, different models of work assessment are presented. This includes an overview on psychodiagnostic methods, questionnaires (Roland Morris Questionnaire), self-rating of physical capacity (Performance Assessment Capacity Testing PACT, Matheson) and validated ergonomic assessment procedures. The main focus is on musculoskeletal disorders.

A useful practical tool for occupational physicians and ergonomists is the standardized “ergonomic work place analysis” developed by M. Ahonen et al. (1989) from the Finnish Institute of Occupational Health which has been adapted by the Swiss group of rehabilitation (Klipstein). It is used to assess demands and strain at work and to define goals within a rehabilitation process. The method is simple, not time-intensive and requires little technical equipment. It consists of an occupational history as well as the systematic observation and documentation of typical work tasks. Factors of interest are physical strain (physical activity, lifting of weights, postures and movements, repetitiveness), working equipment and environment (e.g. light, noise, indoor climate) and organizational conditions. In addition, the employee’s possibility to influence and change work processes as well as other stress factors are identified. Immediate simple adaptations can be made on site. The ratings are documented and a problem oriented report summarizes the work profile with recommendations on work equipment, working postures and necessary therapeutic treatment. The students are assigned case studies with videos from work activities which they need to analyze with respect to physical work load, psychosocial, organizational and individual factors and develop conditions for return to work. This is an opportunity for ongoing occupational physicians and ergonomists to truly exercise their interdisciplinarity. Other methods such as the Ovako Working Posture Analyzing System (OWAS), the Quick Exposure Check (QEC, Robens Centre for Health Ergonomics) and the Leitmerkmalmethode (LMM, Baua) are only briefly introduced since they are taught in depth in a specialization module in ergonomics.

Since financial resources in health and social insurances are limited, it is important to recognize unfavorable developments in the rehabilitation of patients early on. Therefore a strong emphasis on “yellow flags” for high risk patients and predictive indicators (e.g. duration of disability, behavioral signs, step test, pseudo strength test, numeric pain rating scale etc.) for a positive outcome is made and research on evidence based measures are presented (Croft, Kool).

The visit to a rehabilitation center provides insight in a rehabilitation program, principles of work hardening, intensive physiotherapeutic treatment and strengthening exercises. The participants have the opportunity to actively participate in an ergonomic training program. They receive direct insight into the performance of work related physical tests for functional capacity evaluation (FCE Isernhagen work systems).

Last but not least the concept of case management through a neutral case management firm is presented. The goal of case management is to reduce costs and improve the quality of life of their clients. The case manager acts as a coach coordinating a structured rehabilitation procedure of assessment, planning measures and setting goals, monitoring progress and evaluation. Furthermore they provide assistance in the complex and often overwhelming insurance business.

In summary, the rehabilitation module aims at preparing ongoing occupational health specialists for a well-coordinated and interdisciplinary approach to rehabilitation. The final goal is a win-win situation for employees affected by disability as well as for insurances and society.

References

Ahonen M, Launis M, Kuorinka T. (edit) Ergonomic workplace analysis. Finnish Institute of Occupational Health. Helsinki 1989.

Croft PR. Prediction of chronicity in acute low back pain. Ann rheum dis 2004 (abstract no. SPO 158).

Kool JP, Oesch PR, de Bie RA. Predictive tests for non-return to work in patients with chronic low back pain. Eur Spine J 11: 258-266, 2002.

Isernhagen SJ (ed). Work injury. Management and prevention. Rockville, Maryland, Aspen Publishers 1988.

Klipstein A, Huwiler HJ, Widmer M. Die Behandlung unspezifischer muskuloskeletaler Beschwerden – die Rolle der Ergonomie. Therapeutische Umschau, 58 (8): 515-520, 2001

Matheson LN, Matheson ML. Spinal function sort. Rating of perceived capacity. Test booklet and examiners manual. Performance Assessment and Capacity Testing PACT, 1989/91.

<http://www3.who.int/icf/icftemplate.cfm>

Teaching of occupational medicine to undergraduates in French schools of medicine

by Jean-François Gehanno

Over the past 10 years, French national governmental bodies have strengthened the under recognition of occupational diseases and have reiterated the desirability of training in the discipline at medical undergraduate level. The purpose of this study was to assess the level and content of the teaching of occupational medicine in the French undergraduate medical curricula.

A questionnaire survey of the teaching of occupational medicine to undergraduates sent in 2004 to all the French medical schools (n = 37).

Thirty five French medical schools returned a completed questionnaire, giving a response rate of 95%. All of them had specific occupational medicine lectures but hours of lectures and seminars ranged from 2 to 18 hours with a mode of 9 hours. Lectures on the definitions of occupational diseases and workplace injuries were provided in all the medical schools, but the other topics varied widely between them. Due to a low level of attendance to the courses, nearly 30% of students finish their undergraduate studies without having followed any lecture in occupational medicine.

Despite the prominence given to issues related to occupational health in recent French government policy, this study suggests a declining commitment to occupational medicine on the part of French medical schools. Urgent action needs to be taken to address the lack of training in occupational medicine for future medical doctors.

Gehanno JF, Choudat D, Caillard JF. Enseignement de la médecine du travail en deuxième cycle des études médicales en France. Archives des Maladies Professionnelles et de l'Environnement 2005;66(4):313-7.

New EASOM members present themselves

CZECH SOCIETY OF OCCUPATIONAL MEDICINE

The Czech Society of Occupational Medicine (Společnost pracovního lékařství) is continuator of former Czechoslovak Society of Occupational Medicine (established in 1946). This society gathers specialists in the field of occupational medicine. Occupational medicine studies the impact of work and working conditions on the health of workers. It deals with the prevention, diagnostics, treatment, and medicolegal aspects of diseases caused or exacerbated by working conditions. Occupational medicine comprehensively deals with relations between work and health. It

prescribes procedures for building a safe and healthy working environment, handles the problem of adapting the work to the abilities of workers with regard to their physical and mental health, it is concerned about health promotion in workers, including evaluation and promotion of their working capacity, and studies the impact of work and working conditions on the occurrence of chronic non-infectious diseases, the progression of which may be significantly influenced by work and working conditions. The information obtained by studying the level of exposure to adverse factors in working settings, and their impact on the health and well-being of workers is used for setting regulatory measures aimed at ensuring health protection at work, optimization of working conditions and preservation of working capacity.

Czech Society of Occupational Medicine is one of 103 professional societies associated in The Czech Medical Association of J.E.Purkyně (CzMA) , voluntary independent association of physical and legal entities - doctors, pharmacists, other workers and companies active in health care. To the date of November 1, 2005, Czech Society of Occupational Medicine comprised 223 members, of them 206 physicians, 15 non-medical professionals, and 4 occupational nurses.

CzMA is a legal entity which operates in Czech Republic and is seated in Prague.

CzMA has its own Articles, which were accepted at the Congress of Delegates 11.11.1992 and improved at Congresses of Delegates in years 1994 and 1996.

Mission and Aims of CzMA

- To care about the development and promotion of scientifically based information from medical science and its related branches; aiming to its use in public health care with special emphasis on preventative action.
- To participate in the increasement in standards of the professional medical knowledge (and such related branches) of its members, and to propagate medical understanding among the public.
- To support professional research into the health service area and to help to create the ideal conditions for informing specialists and also the public of its results and to put such results into practice.
- To participate in the versatile solving of issues concerning management and organization and also in the realization of diagnostical processes including therapeutical and preventative care and its related activities.
- To create the conditions for information exchange and development in all forms of cooperation among its members and also within organizations and institutions with a professional line in the Czech Republic and abroad.
- To effectively support the activity of professional companies, medical associations and further associations of workers in health care and its related branches.

- To care about the observance of ethical principles during the tenure of the medical profession.
- To care about the use of only such diagnostical, preventative and therapeutical methods whose character and effect are based on current established scientific evidence.

Czech Medical Association of J.E.Purkyně is accredited since January 2001 by Czech Medical Chamber for continuous medical education (CME).

In organizational structure of the Czech Society of Occupational Medicine there are seven panels, two working groups and one expert committee established in the Society:

PANELS

- Occupational diseases (Prof. Daniela Pelclová, M.D., Ph.D.)
- Industrial hygiene (Ivan Kučera, M.D.)
- Preventive occupational health care in the enterprises (Petr Svačinka, M.D.)
- Quality control (Milan Tuček, M.D., Ph.D.)
- Ergonomics (Ivanka Soukupová, M.D.)
- Information technologies (Assoc.Prof.Pavel Urban, M.D., Ph.D.)
- Genotoxic exposures (Prof. Lubomír Dobiáš, M.S., Ph.D.)

WORKING GROUPS

- Industrial toxicology (Prof. Miroslav Cikrt, M.D., D.Sc.)
- Industrial physiology and psychology (Jana Hlávková, M.D.)

EXPERT COMMITTEE

- Evaluation of health ability for work (Petr Svačinka, M.D.)

Members of Czech Society of Occupational Medicine are active as tutors in CME in occupational medicine for physicians, other specialists and nurses. All accredited seminars, congresses etc. are available on the page www.pracovni-lekarstvi.cz. In the year 2006 there are prepared these 24 events for postgraduate education (workshops, seminars, courses, the 30th Bena's Day of Occupational Physiology, the 21th Teisinger's Day of Occupational Toxicology etc.).

4-years post-graduate training programme in occupational medicine is available (in Czech) as official document authorized by Ministry of Health of the Czech Republic (Bulletin of Ministry of Health No.4/April 2005, www.mzcr.cz).

The list, events and contact addresses of the Board of the Society members can be found at: <http://www.pracovni-lekarstvi.cz/>. Official journal of The Czech Society of Occupational Medicine is Czech Journal of Occupational Medicine (České pracovní lékařství) available at: <http://www.tigis.cz/prac/Index.htm> .

Milan Tuček, M.D.,Ph.D.
President of Czech Society of Occupational Medicine

New EASOM members present themselves

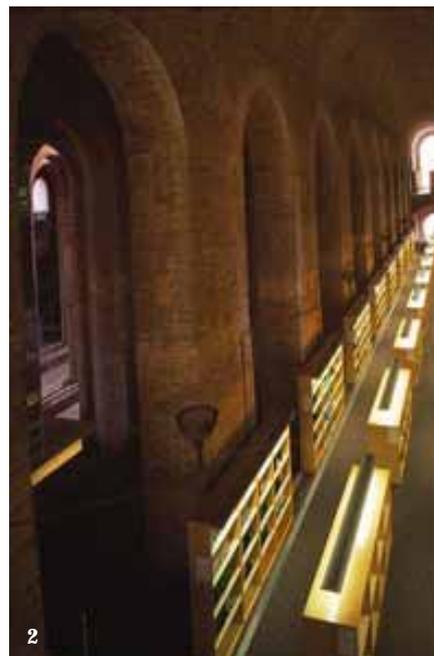
UNIVERSITY POMPEU FABRA, SCHOOL OF OCCUPATIONAL MEDICINE (Barcelona, Spain)

The training system for occupational medicine specialists is experiencing important changes in Spain, from a 3 year academic-based approach until last year to a 4 year professional-based one. Before 2005, trainees were considered as students and paid a yearly fee to get trained, whereas now they are full residents who receive a salary during the whole training period, as the rest of medical specialities. Before, there were five schools of occupational medicine in the whole country (Alicante, Barcelona, Granada, Madrid and Zaragoza) and two more were created in 2003, one each in Barcelona and Madrid. Now, training is organised by specialised units which include a school of occupational medicine, hospitals and primary health centres, prevention services and clinics for occupational injuries and other collaborating institutions, where residents rotate to get full practical and academic training. Since 2005 twelve training units have been created.



The University Pompeu Fabra (UPF) is a young public university in Barcelona, located in different buildings within the city's downtown and seaside. It was created in 1990 to contribute to the excellence, renovation and modernisation of the Catalan university system. It is based on quality, innovation and a strong technological component, research, internationalisation, and continuous evaluation. At present, it has more than 9,000 students and almost 1,000 faculty. The main knowledge areas are social sciences, biology and communication. It offers postdoctoral degrees in biomedicine, including a doctoral programme on health and life sciences and a master's degree in public health.

The Occupational Health Research Unit of the UPF was founded in 1994, within the Department of Experimental and Health Sciences. The unit is directed by Fernando G. Benavides MD, PhD, and is accredited as a research unit by the Department of Research and Universities of the Catalan Government. Presently, our main areas of research are occupational injuries, health inequalities, precarious work, evidence based occupational health surveillance, return to work, fitness for work, and occupational and preventive medicine competencies. The Unit also develops and offers training programs on occupational risk prevention, occupational nursing, occupational medicine and a masters degree in public health, and runs the training programmes for medical specialists in preventive medicine and public health, and in occupational medicine.



In 2003, our Unit was accredited to implement training for occupational medicine specialists by the Spanish Ministry of Health, adding a new school of occupational medicine to the already existing five in Spain. This training program was initially developed through a formal collaboration with Mutual Cyclops, that includes the development of occupational medicine training programmes, related research projects in companies and the organisation of scientific seminars. In 2005, as the new training national system for our speciality was implemented, we created and coordinate the Training Unit of Occupational Medicine “Mateu Orfila” (1787-1853, considered the father of toxicology in Spain), which includes twenty different institutions where trainees rotate during the four years programme. The training programme includes a 6 month intensive academic course, 20 months in clinical practice (hospital and primary health care), 20 months in preventive services and 2 months in public administration institutions related to occupational health (occupational health units adjacent to primary health care centres, the Catalan institute for medical evaluations of the Health Department, the safety and occupational health centres of the Labour Department, and the occupational health department of the union Comisiones Obreras). Our official programme is driven by the competences of occupational medicine previously discussed and published in Spain¹. Our training unit currently offers 7 to 10 posts for occupational medicine trainees. Also, we host five additional trainees each year from the Training Unit of Mallorca, by providing them with the academic course. The course is organised in an intensive period of six months, where theoretical, practical, case-based learning, tutorials and site visits are combined, complemented with periodic critical reading sessions and special seminars organised

during the rest of the training period. A research project has also to be completed by the end of the third year.



International collaboration is also important, and a formal agreement on occupational medicine training and research has been established so far with the University of Texas School of Public Health, which includes reciprocal specific teaching and research activities, as well as short stays at its Southwest Center for Occupational and Environmental Health. Finally, as one of the main projects of our University currently involves the development of Bologna Masters, we are in the process of adjusting our Occupational Medicine Course to the Bologna requirements for 2007.

¹ Serra C, Brotons A, Plana M, Benavides FG, Maqueda J, on behalf of the Working Group on the professional competencies of Occupational Medicine. The professional competencies of Occupational Medicine. Barcelona: Mutual Cyclops, 2003. Available at: <http://www.upf.edu/cexs/mir/mt/>

Pictures:

1 Building on Las Ramblas promenade

2 The main Library, built under an old tank for watering the nearby park

3 The new building of Barcelona Biomedical Research Park that will soon host the biomedical teams of the University

Consol Serra, MD PhD

Director of the Training Programme of Occupational Medicine

Unit of Occupational Health Research

University Pompeu Fabra. Barcelona, Spain

consol.serra@upf.edu

www.upf.edu/cexs/ursl // www.upf.edu/cexs/mt

Forthcoming events

Oslo, 22 April 2006: UEMS meeting

Milano, 11 – 16 June 2006: ICOH Congress

**Bari, 31 August – 2 September 2006: Sixth EASOM Summer School
“Teaching practical occupational epidemiology”**

New members

Society of Occupational Medicine of the Czech Medical Association of
J. E. Purkyně (Czech Society of Occupational Medicine)

Representative: Dr Milan Tuček

Na Bojišti 1, 120 00 Praha (Prague) 2, CZECH REPUBLIC

Tel: + 420 606 334 732 , + 420 224 964 537, + 420 224 964 630

Fax: + 420 224 914 570

E-mail: tucek.m@post.cz

www.pracovni-lekarstvi.cz

A request from the Board of EASOM

Due to completion of their second four-year term, prof. Giorgio Assennato and EASOM chairman John Harrison will leave the Board of EASOM this year.

During the forthcoming Summer School, on Friday 1st of September, the General Assembly will have to appoint two new Board members.

If you are interested to serve EASOM as a Board member, please contact the secretary at andre.weel@mediforce.nl

Members schools are requested to provide us with information about their education and training programmes. We intend to put this information on the EASOM website. Please send this information and your www-links to the secretary.

Note: during the ICOH Congress in Milano, there will be no special EASOM session.

***EASOM wishes all its members, representatives,
associates and interested colleagues ...***

a pleasant Easter time !

See you in Bari!