

Bulletin

April 2008

Eighth issue

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in Amsterdam, 28 – 30 August 2008**

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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:

a.weel@nvab-online.nl

**Eighth EASOM Summer School:
Teaching Evidence-Based Occupational Medicine
Amsterdam, Academic Medical Centre AMC
28 – 30 August 2008**

Programme

THURSDAY 28 AUGUST

- 09:00** Registration of participants
- 10:00** Opening Ceremony
 Prof. M. Džoljić, Board of AMC
 Prof. Frank van Dijk, Coronel Institute
 Dr Rob Scholten, Dutch Cochrane Centre
 Dr Kristiina Mukala, president of EASOM
- 10:30** Challenges for application of evidence-based occupational
 medicine
 Plenary lecture by Prof. Frank van Dijk
- 11:15** Coffee break
- 11:30** Workshops Searching databases (parallel)
- Workshop for Users: Searching guidelines and Cochrane databases
 - Workshop for experts: Strategies for searching original articles
- 12:30** Lunch
- 13:30** Presentations from countries: state of the art (plenary)
- 15:00** Tea break
- 15:30** Comments and discussion (plenary)
 Dr Carel Hulshof
- 16:00** E-lesson in evidence-based occupational medicine: a contribution
 to training and professionalization
 Plenary presentation by Dr Nathalie Hugenholtz
- 16:45** Break
- 17:00** EASOM General Assembly

FRIDAY 29 AUGUST

- 09:30** **Cochrane Reviews, how to read, how to start?**
Plenary interactive workshop by Dr Jos Verbeek
- 11:00** **Coffee break**
- 11:15** **Evidence-based guidelines in Occupational Health, how to teach?**
Plenary presentation by Dr Carel Hulshof
Group work by Dr Noks Nauta
- 12:45** **Lunch**
- 13:45** **Application of EBM in the daily practice of occupational physicians**
Plenary lecture by Dr Frederieke Schaafsma
- 14:30** **Tea break**
- 14:45** **Workshops Critical Appraisal of scientific articles**
Group work
- 16:15** **Feedback from groups**
- 19:00** **Guided city walk through Amsterdam City Centre**
- 20:00** **Summer School Dinner**

SATURDAY 30 AUGUST

- 09:30** **The E-lesson in evidence-based occupational medicine, and other tools for training**
Plenary lecture by Frans Vlek MSc
- 10:45** **Demonstration of the assessment tool: participants doing the test**
- 11:15** **Coffee break**
- 11:30** **Testing knowledge and skills in evidence-based medicine**
Plenary presentation by Dr Nathalie Hugenholtz
- 12:00** **Closing of Summer School**
- 12:30** **Lunch and farewell**

For more information and registration (starting 1st of May 2008), please visit our web site www.easom.org

Memories of Prof. Raphael Masschelein

by Piet Kroon

Summer 2008, Raphael Masschelein will retire as a professor in occupational medicine at the Catholic University of Leuven. Piet Kroon, Secretary General of EASOM from 1993 till 2001, describes his personal memories of Raf.

Although Raf Masschelein has the reputation to be one of the founding fathers of EASOM, this is not the case. The first activities to realise an organisation like EASOM go back to the year 1988, long before the moment Raf became chairman. However, at the first official EASOM event, the opening conference in Berlin March 1993, Raf was present, and, of course, very active with a high profile. Therefore it was not surprising that Raf became the first elected chairman at the second official EASOM meeting during the ICOH Conference in Amsterdam in 1994.

As a secretary, I had the honour to cooperate with him from 1994 until 2001. And I must confess, he was suited for the job, developing the right agenda, and with a good sense for the need for EASOM to become a strong, viable organisation. He was keen to attract new members, especially from the countries in transition of Eastern Europe. To improve the position of EASOM he put a lot of energy in tendering projects, like the Leonardo da Vinci project we got in 1999. He considered this type of projects as an opportunity to enhance the cooperation between the members, and to provide EASOM with the resources to grow. Leuven is close to the capital of the European Union, Brussels, so Raf was well aware of the consequences the EU has for occupational physicians and for their education. Due to Raf the Dutch authorities took action to get the Dutch diploma of occupational physicians recognized.

Despite his election as a Board member of the Catholic University of Leuven, he found time and energy to continue his work for EASOM. As a citizen of Belgium he had the advantage that he was aware of the habits of both the 'Anglosaxons' of Northern and Western Europe and the 'Latino's' from Southern Europe. With intelligence and humour he could solve problems before they arose.

In the personal field it was always a pleasure to work with Raf, not in the last place because we used to convene more often in Leuven than in Amsterdam. Having lunch at 'his' university was quite a different experience than at 'my' university. Excellent food with exquisite wine is somewhat different from an old sandwich cheese with a glass of milk. Besides that, he was interested in the personal and family life of all board members, supporting them when necessary. In my case, I found his sympathy when my first son was born, really heart-warming. In my opinion Raf is too young to retire, because his mind is agile, and because EASOM still needs personalities like Raf Masschelein!

A working visit to Colombia

by Kristiina Mukala and Paula Melart

Visit to Colombia 23.05 - 29.05.2007 - a travelogue

We have made a visit to the capital of Colombia, Bogota and a beautiful City Cartagena in May 2007 by the invitation of Julietta Rodrigues-Guzman. During the visit we had the opportunity to visit many interesting places: Universidad el Bosque, the Ministry of Social Protection, Center for the workers (Occupational Health Services), Rehabilitation Centre – Avance, Roche and Flores el Tandil, a market garden.

In Cartagena we participated in the first International meeting in Education and Training in OH in Latin America and gave there lectures on Occupational Health in Finland and Training Occupational Health Physicians and Nurses.

General

As our hosts and hostesses during the visit served Maria Teresa Espinosa Restrepo, Director of Occupational Health Graduate Program, Julietta Rodrigues-Guzman, Assistant Professor of Occupational Health Graduate Programme and Carlos Julio Ramirez, Coordinator of the Occupational Health Graduate Programme.

Visit to El Bosque University

The University is grounded thirty years ago as a Medical Faculty. It is a private university owned by a non-profit foundation. Nowadays El Bosque university has 65 000 students in different faculties e.g. medical, dental, psychological, nursing, technical, arts, pedagogical, and administrative faculties.

All universities, public and private ones, have a tuition fee. This fee varies between universities and faculties. In El Bosque university the fee was 2 500 USD per year for the medical faculty in 2007. El Bosque University has besides graduating programmes also scientific, master and doctoral programmes. Education and training is well supported by a modern and versatile library, run by experienced informatics. All activities of the universities in Colombia are strictly regulated and controlled by the Ministry of Education.

During our visit we had an opportunity to discuss with Jaime Escobar Triana, Principal, Erix Bozon Martinez, Academic Vice Principal, Martha Galindo, Director of International Affairs, Guillermo Marin Arias, President of the Directive Council, Enrique Gutierrez Sanchez, president of the Claustrom and Luis Arturo Rodrigues Buitrago, Secretary General. They were very interested in common projects and open for

suggestions. We visited the departments of Occupational Health and the Occupational Hygiene and the Centre of Information. Unfortunately we didn't have time to see the experimental medical laboratories.

The Ministry of Social Protection

In the afternoon of the 24th of May we visited the Ministry of Social Protection. It gives the guidelines and makes the action programmes in the labour and health sector. The social insurance system controlled by the ministry has three separate sectors: health, pension and employees compensation. This insurance system applies to all employees who have a written contract of employment. In these cases the employer has the responsibility to arrange and finance the insurance with the help of an insurance company. Coverage is not very huge, only 5,8 million employees have a written contract of employment and are included in the system. Some 11,2 million are excluded, most of them being self-employed persons, entrepreneurs and domestic workers. Altogether in Colombia there are some 45 million inhabitants, of whom some 25 million are aged from 16 to 65 years.

The insurance fees paid by enterprises are dependent on the estimated risk of the line of business. The risk is divided into five categories. In one category the fee is predetermined in three grades by the actions taken by the enterprise in order to control the risk. The fees vary between 0,34 % and 8,7 % of the total wage costs of the enterprise. The fees are based on the statutory risk assessment.

The Ministry has created a programme "Worker's Health Promotion / Healthy School Programme" in order to take the Occupational Health and Occupational Safety ideas to all grades of the school. This programme has just started and there are no results of the programme so far. The teaching material we saw was very interesting and it was specially designed for each grade.

Occupational health clinics

On Friday 25th of May, we visited an Occupational Health Service Clinic. We had an opportunity to learn about the practice of Occupational Health Services in Colombia, which are based on an insurance system. The clinics take care of medical check-ups when one starts in a new employment, the work accidents and professional diseases. At the work places they take care of regular health check-ups by buying them from health professionals. Regular health check-ups take place. Insurance companies also maintain rehabilitation clinics, where work accident victims and people suffering from professional diseases are rehabilitated mostly by the means of physiotherapy and of occupational therapy.

Flores el Tandil

Early on the Saturday morning we travelled outside Bogota to visit a market garden Flores el Tandil and to get acquainted with the flower industry and the social and occupational health programmes run by a local enterprise. Our hostess was the director of the national flower producers association Maria Eugenia Diaz R. Flower industry employs directly approximately 100 000 workers and indirectly another 100 000 employees in Colombia. Colombia is the second greatest flower producer in the world. Flores el Tandil belongs to a consortium of 38 flower farms. Flores el Tandil develops and tests new plants for other flower farms. It employs 389 workers of which 36 per cent are men and 84 per cent live in nearby towns and villages. Flores el Tandil tries to employ mothers by preference. Ninety per cent of the employees have permanent contracts, but because of the characteristics of this professional field the turn over rate is high, about fifty per cent a year. Flores el Tandil aims to improve the educational level, living conditions and well-being of their workers by own social and occupational health programmes.

Cartagena

On Saturday evening 26th of May we left Bogota and its altitude of 2650 meters and landed to Caribians and Cartagena, where it was 32 degrees Celsius and approximately 90% relative humidity, in order to participate in the 1st International Meeting in Education and Training in Occupational Health in Latin America. It was a two-day congress and there were participants from United States, Italy, Spain, Argentina, Honduras, Dominican Republic, Costa Rica, Cuba and from twenty one Institutes of Colombia, and our Finnish institute. Some background information was also received from Canada, Chile, Uruguay, Guatemala, Peru, Ecuador, Nicaragua, Venezuela, Bolivia and Germany.

The specialisation in Occupational Health in different countries of Latin America, USA, Finland and some other European countries was considered in the congress. The discussion was based on the international report made on the education in occupational health by the request of WHO in 1990s (Delclos GL et al, Int J Occup Environ Health 2005;11:185-198). The essential question is what knowledge and competencies a specialized occupational physician should have. The core competencies and their definitions are extremely important for the arrangement of a successful education and training scheme. According to the presentations given at the congress the time needed for the specialisation in occupational health varied a lot ranging from a half a year to four years. All participants of the congress agreed on the importance of the development of the education and training

programmes. To promote the development on their continent an appeal was signed at the congress. The participants were enthusiastic and full of good and interesting ideas concerning the development of education and training in occupational health. They were very interested in and open for co-operation between countries in Latin America, North America and Europe. The problems in the occupational health system and in its content have been recognized and there exists a willingness to improve these matters, although the infrastructure in most countries does not strongly support it.

Special edition: Supporting health at work

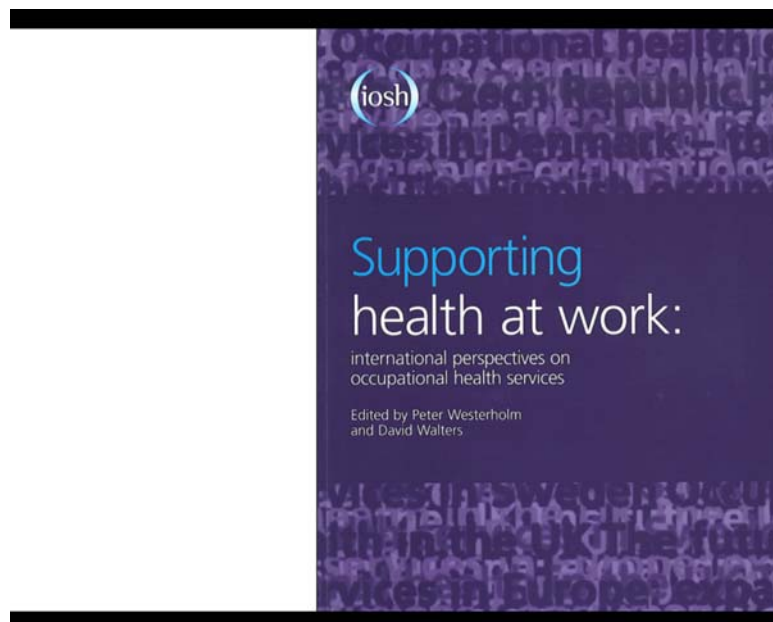
Supporting health at work: international perspectives on occupational health services

Edited by Peter Westerholm and David Walters

IOSH Services Limited 2007

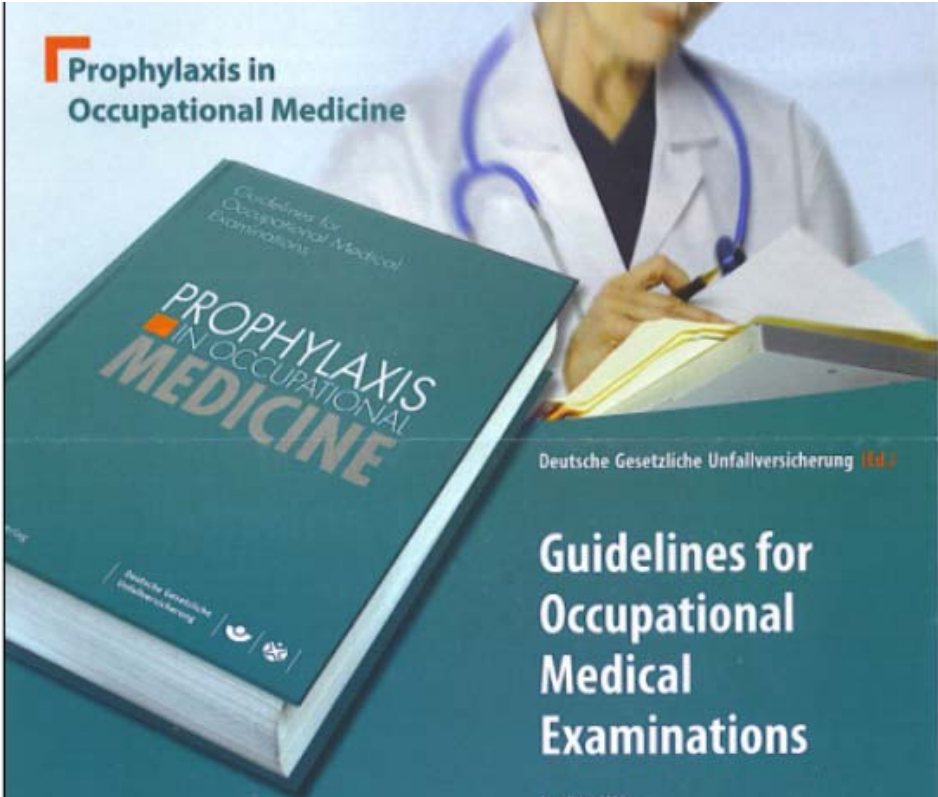
ISBN-13: 978 0 901357 39 7

This book consists of a series of contributions describing and analyzing developments in occupational health service provision in Austria, the Czech Republic, Denmark, Finland, France, Germany, the Netherlands, Norway, Sweden and the UK (where separate accounts are given for experiences in England and Scotland). There has also been included a contribution from Japan, which offers some interesting comparisons from outside Europe. There are two comparative and analytical chapters. In the first of these, Laurent Vogel presents some thoughts on the state of OH provision in Europe and on the wider implications of the national contributions. The volume concludes with an overview from Peter Westerholm, who played a major role in selecting and editing the national contributions, which offers further reflections on the range of issues addressed.



Special edition: Prophylaxis in occupational medicine

Guidelines for Occupational Medical Examinations



Prophylaxis in Occupational Medicine

Guidelines for Occupational Medical Examinations

PROPHYLAXIS IN OCCUPATIONAL MEDICINE

Deutsche Gesetzliche Unfallversicherung (DGU)


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Prophylaxis in Occupational Medicine

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- 1.3 Noise (with national limits)
- 1.4 Exposure to dust
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- 3 Alcohol consumption
- 4 Substances which cause skin cancer
- 5 Triphenyl methyl acetate and glucose hexamer
- 6 Carbon disulfide
- 7 Carbon monoxide
- 8 Benzene
- 9 Mercury and mercury compounds
- 10 Methanol
- 11 Hydrogen sulfide
- 12 Phosphorus (white, yellow)
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3. Guidelines G 1 to G 46
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5. Appendix II Diagnosis of musculoskeletal disorders

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Forthcoming events

Zürich, 28 April 2008: EASOM Board meeting

Amsterdam, 27 August 2008: EASOM Board meeting

**Amsterdam, 28 – 30 August 2008: Eighth EASOM Summer School
“Teaching evidence-based occupational medicine”**

Belgrade, 7 November 2008: EASOM Board meeting

Belgrade, 8 November 2008: Joint EASOM – UEMS meeting

**Linz, 27 – 29 August 2009: 9th EASOM Summer School
“The workplace as a teaching environment”**

A request from the Board of EASOM

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:

a.weel@nvab-online.nl

See you in Amsterdam!