



İrlanda Meslek Hastalıkları Sistemi- AB Örnekleri

Uzm. Dr. Sultan Pınar Çetintepe
İş ve Meslek Hastalıkları BD.

İş Sağlığı Sürveyans Sistemleri

- İş sağlığı surveyansı tanımlama ve raporlamadan öte bir kavramdır.
- Analiziyle işyerinde koruyucu önlem tasarlanabilen dinamik bir sistemdir.
- Epidemiyolojik, çalışan sağlığı (sağlık gözetimi) ve çalışma ortamı sürveyansını da kapsar.



İş Kazası Bildirim Sistemleri-AB

- Avrupa Birliği üye devletlerde 2 tip iş kazası bildirim sistemi mevcuttur:
 - 1) Sigorta kaynaklı sistemler
 - 2) Ulusal yetkili kuruma işveren tarafından bildirim (Eurostat, 2001)
- İrlanda'da 2 numaralı sistem uygulanmaktadır.



İş Kazası Bildirim Sistemleri-AB

- Sigorta kaynaklı sistemlerde, veriler özel veya devlet sigortacıları tarafından toplanır. Bu sistemlerde raporlama başına verilen ekonomik teşvikler nedeniyle bildirim % 100'dür.
- İşveren tarafından bildirim zorunlu olan sistemlerde ise iş kazası bildirimi %30-50'dir. İrlanda'da ortalama bildirim oranı ise %38'dir.
- AB ülkelerinde uyumlu bir sistem kurmak adına European Statistics on Accidents at Work (ESAW) projesi hayata geçirilmiştir. (EC, 2001)

Meslek Hastalıkları Neden Az Bildiriliyor?

- **Tanımlamada zorluk:** Oluşan bir hastalığın meslekle ilişkisini kurmak klinik tecrübe ve teorik bilgi birikimi gerektirir.
- **Maruziyet:** Bir işyerinde tehlikeli madde kullanılması çalışanın o maddeye maruz kalacağı anlamına gelmez. Etkilenim düzeyi herkeste farklı olabilir.
- **Latens periyodun uzunluğu:** Maruziyet ve hastalık başlangıcı arasındaki süre çok uzun olabilir.
- **Kayıt saklanması:** Eksik ve uygunsuz koşullarda.
- **Birden fazla maruziyet:** Çevre etkilenimi de hastalıkların oluşumunda etkili.
- **Anamnez:** Mesleki anamnez alınmıyor.
- **Veri toplamada zorluk:** Eksik veya hatalı bildirim.





Meslek Hastalıkları Bildirim Sistemleri-AB

- İş kazası bildirim sistemlerinde olduğu gibi sigorta kaynaklı bildirim olup olmaması bildirim düzeyinde belirleyici.
- Ekonomik teşvik veri toplanmasını arttırıyor.
- 15 AB ülkesinde yapılan bir anket çalışmasında meslek hastalıklarının az bildiriminin ilk üç nedeni olarak çalışanların farkındalık düzeyinde azlık, doktorların meslek hastalığı tanısı koymaması ve çalışanların işini kaybetme korkusu saptanmış (Eurogip, 2002a).
- İrlanda'da meslek hastalığı bildirim oranı 100.000 bin sigortalı kişide 12'dir. Ancak Eurostat tarafından öngörülen rakamlar bundan %50-80 daha fazladır (Eurogip, 2002a).



Meslek Hastalıkları Sınıflandırılması-AB

- AB’de üye 15 ülke tarafından gerçekleştirilen EODS (European Occupational Disease Statistics) projesinde 68 mesleki hastalık tanısının sadece 31’i tüm ülkelerin tanı listesinde mevcuttu.
- Bir ülkenin bile birkaç adet meslek hastalıkları listesi olabilir.
- Ulusal düzeyde kabul edilen tazminat almak amaçlı tanımlanmış meslek hastalıkları listesi bunlardan biridir (prescribed diseases).
- Şu anda İrlanda’da kullanılan listeler:
 1. Tazminat için tanımlanmış meslek hastalıkları listesi (prescribed diseases)
 2. ILO meslek hastalıkları listesi
 3. EODS (European Occupational Disease Statistics) projesi için tanımlı liste

Tazminat amaçlı meslek hastalıkları listesi (prescribed diseases)



- İrlanda'da bu liste sistemi Aile ve Sosyal Politikalar Bakanlığı tarafından İş Kazası ve engellilik tazminat şemasıyla uygulanır.
- Vergisini PAYE (Pay As You Earn) ödeyen çalışan eğer listede olan herhangi bir hastalığa yakalanıp yine listede olan işte çalışıyorsa tazminat isteyebilir.
- Ek olarak kişi bu hastalığından dolayı 3 günden fazla işe gelemeyecek halde olmalıdır.

Tazminat amaçlı meslek hastalıkları listesi (prescribed diseases)-İrlanda



A. Conditions due to physical agents

Conditions	Occupation Type
1. (a) Bursitis or subcutaneous cellulitis arising at or about the elbow or the knee due to severe or prolonged external friction or pressure at or about the elbow or the knee respectively (<i>Beat elbow</i> or <i>Beat knee</i>)	Manual labour causing severe or prolonged external friction or pressure at or about the elbow or the knee respectively.
1. (b) Subcutaneous cellulitis of the hand (<i>Beat hand</i>)	Manual labour causing severe or prolonged friction or pressure on the hand.
2. Byssinosis	Work in any room where any process up to and including the weaving process is performed in a factory in which the spinning or manipulation of raw or waste cotton or flax or the weaving of cotton or flax takes place
3. Carcinoma of the nasal cavity or associated air sinuses (<i>nasal carcinoma</i>)	Attendance for work: (a) in or about a building where wooden goods are manufactured or repaired, or (b) in a building used for manufacturing footwear or components of footwear made wholly or partly of leather or fibre board (c) at a place used wholly or mainly for repairing footwear made wholly or partly of leather or fibre board

Tazminat amaçlı meslek hastalıkları listesi (prescribed diseases)-İrlanda



4. Cramp of the hand or forearm due to repetitive movements	Work involving prolonged periods of handwriting, typing or other repetitive movements of the fingers, hand or arm
5. Disease or injury caused by electromagnetic or ionising radiations	Work involving exposure to electro-magnetic or ionising radiations
6. Dysbarism , including decompression sickness , barotrauma and osteonecrosis	Work involving subjection to compressed or rarefied air or other respirable gases or gaseous mixtures
7. Pneumoconiosis	See below.
8. Heat Cataract	Work involving frequent or prolonged exposure to rays from molten or redhot material
9. Miner's nystagmus	Work in or about a mine.
10. Diffuse mesothelioma (primary neoplasm of the mesothelium of the pleura or of the pericardium or of the peritoneum)	Work that involves: (a) working or handling asbestos or any admixture of asbestos, or (b) manufacturing or repairing asbestos textiles or other articles containing or composed of asbestos, or (c) cleaning of any machinery or plant used in any of the above operations and of any chambers, fixtures or appliances for the collection of asbestos dust, or (d) substantial exposure to the dust arising from any of the above operations

B. Conditions due to biological agents	
Conditions	Occupation Type
1. Ankylostomiasis	Work in or about a mine.
2. Anthrax	Work involving contact with animals infected with anthrax or with such animal products or residues or handling (including loading or unloading or transport) of merchandise contaminated by such animals, products or residues
3. Glanders	Work involving contact with equine animals or their carcasses.
4. Infection by <i>Leptospira</i>	(a) Work in places that are or are liable to be infested by rats or field mice, voles or other small mammals, or (b) Work at dog kennels or the care or handling of dogs, or (c) Work involving contact with bovine animals or their meat products or pigs or their meat products
5. Infection by organisms of the genus <i>Brucella</i>	Work involving contact with: (a) animals infected by brucella or their carcasses or parts thereof or their untreated products, or (b) laboratory specimens or vaccines of, or containing brucella.
6. Infection by <i>Streptococcus suis</i>	Work involving contact with pigs infected by streptococcus suis or with the carcasses, products or residues of pigs so infected
7. Extrinsic allergic alveolitis (including farmer's lung)	Work that involves exposure to moulds or fungal spores or heterologous proteins due to employment in: (a) agriculture or horticulture, forestry, cultivation of edible fungi or malting, or (b) loading or unloading or handling in storage mouldy vegetable matter or edible fungi, or (c) caring for or handling birds, or (d) handling bagasse
8. Tuberculosis	Work involving close and frequent contact with a source of tuberculosis infection
9. Viral hepatitis	Work that involves contact with: (a) human blood or human blood products, or (b) a source of viral hepatitis

C. Conditions due to chemical agents	
Conditions	Occupation Type
1. (a) Angiosarcoma of the liver (b) Osteolysis of the terminal phalanges of the fingers (c) Non-cirrhotic portal fibrosis	(a) Work in or about machinery or apparatus used for the polymerization of vinyl chloride monomer, a process that for the purposes of this provision, comprises all operations up to and including the drying of the slurry produced by the polymerization and the packaging of the dried product, or (b) Work in a building or structure in which any part of that process takes place.
2. (a) Carcinoma of the mucous membrane of the nose or associated air sinuses (b) Primary carcinoma of a bronchus or of a lung	Work in a factory where nickel is produced by decomposition of a gaseous nickel compound that necessitates working in or about a building or buildings where that process or any other industrial process connected or incidental to it takes place.
3. Dystrophy of the cornea , (including ulceration of the corneal surface) of the eye	Work that involves (a) using or handling or exposure to arsenic or tar, pitch, bitumen, mineral oil (including paraffin) or soot, or any compound, product or residue of any of these substances except quinone or hydroquinone, or (b) exposure to quinone or hydroquinone during their manufacture
4. (a) Localised new growth of the skin , papillomatous or keratotic (b) Squamous-celled carcinoma of the skin	Work that involves using or handling or exposure to, arsenic, tar, pitch, bitumen, mineral oil (including paraffin), soot or any compound, product or residue of any of these substances, except quinone or hydroquinone
5. Occupational vitiligo	Work that involves using or handling or exposure to, para-tertiary-butylphenol or para-tertiary-butylcatechol or para-amylphenol, hydroquinone or the monobenzyl or monobutyl ether of hydroquinone
6. Primary neoplasm (including papilloma, carcinoma-in-situ and invasive carcinoma) of the epithelial lining of the urinary tract (renal, pelvis, ureter, bladder and urethra)	(a) Work in a building in which any of the following substances is produced for commercial purposes: (i) alpha-naphthylamine or beta-naphthylamine or methylene-bis-orthochloroaniline (ii) diphenyl substituted by at least one nitro or primary amino group or by at least one nitro and primary amino group (including benzidine) (iii) any of the substances mentioned in sub-paragraph (ii) above if further ring substituted by halogeno, methyl or methoxy groups, but not by other groups (iv) the salts of any of the substances mentioned in sub-paragraphs i, ii, iii above (v) auramine or magenta, or (b) the use or handling or any of the substances mentioned in sub-paragraph (a) i to iv, or work in a process in which any such substance is used or handled or liberated, or (c) maintaining or cleaning any plant or machinery used in any such process as mentioned in sub-paragraph b), or cleaning clothing used in any building as mentioned in sub-paragraph a) if such clothing is cleaned within the works of which the building forms a part or in a laundry maintained and used solely in connection with such works

9. Poisoning by benzene or a homologue of benzene	Work that involves using or handling or exposure to the fumes of, or vapour containing, benzene or any of its homologues
10. Poisoning by beryllium or a compound of beryllium	Work that involves using or handling or exposure to the fumes, dust or vapour of, beryllium or a compound of beryllium or a substance containing beryllium
11. Poisoning by cadmium or its toxic compounds	Work that involves exposure to the dust or fumes of cadmium or its toxic compounds
12. Poisoning by carbon bisulphide	Work that involves using or handling or exposure to the fumes or vapour of, carbon bisulphide or a compound of carbon bisulphide or a substance containing carbon bisulphide
13. Poisoning by chlorinated naphthalen	Work that involves using or handling or exposure to the fumes of, or dust or vapour containing chlorinated naphthalene
14. Poisoning by chrome or its toxic compounds	Work that involves exposure to the risk of poisoning by chrome or its toxic compounds
15. Poisoning by diethylene dioxide (dioxan)	Work that involves using or handling or exposure to the fumes of, or vapour containing, diethylene dioxide (dioxan)
16. Poisoning by dinitrophenol or a homologue of dinitrophenol, or by substituted dinitrophenols or by the salts of such substances.	Work that involves using or handling or exposure to the fumes of, or vapour containing, dinitrophenol or a homologue or substituted dinitrophenols or the salts of such substances
17. Poisoning by <i>Gonioma kamassi</i> (African boxwood)	Work that involves manipulation of gonioma kamassi, or any process in or incidental to manufacturing articles from it
18. Poisoning by lead or a compound of lead.	Work that involves using or handling or exposure to the fumes, dust or vapour of, lead or a compound of lead or a substance containing lead
19. Poisoning by manganese or a compound of manganese	Work that involves using or handling or exposure to the fumes, dust or vapour of, manganese or a compound of manganese or a substance containing manganese

D. Miscellaneous conditions	
Conditions	Occupation Type
<p>1. Asthma which is due to exposure to any of the following agents:</p> <p>(a) animals or insects used for the purposes of research or education or in laboratories</p> <p>(b) dusts due to sowing or cultivating, harvesting, drying, handling, milling, transporting or storing barley, oats, rye, wheat, or maize, or handling, milling, transporting or storing meal or flour made from them</p> <p>(c) fumes or dusts arising from manufacturing or transporting or using hardening agents (including epoxy resin curing agents) based on phthalic anhydride or tetrachlorophthalic anhydride, trimellitic anhydride or triethylene-tetramine</p> <p>(d) fumes arising from the use of resin as a soldering flux</p> <p>(e) isocyanates</p> <p>(f) platinum salts</p> <p>(g) proteolytic enzymes</p> <p>(h) red cedar wood dust</p> <p>(i) glutaraldehyde</p> <p>(j) latex in respect of work in human healthcare (occupational asthma)</p> <p>Condition for occupational asthma</p> <p>If you have left a prescribed occupation you must claim benefit within 10 years of leaving.</p>	<p>Work that involves exposure to any of the agents set out across</p>
<p>2. Inflammation or ulceration of the mucous membrane of the upper respiratory passages or mouth produced by dust or liquid or vapour</p>	<p>Work involving exposure to dust or liquid or vapour</p>
<p>3. Non-infective dermatitis of external origin (including chrome ulceration of the skin but excluding dermatitis due to ionising particles or electro-magnetic radiations other than radiant heat)</p>	<p>Work involving exposure to dust or liquid or vapour or any other external agent</p>

Type of employment for which Pneumoconiosis (A.7) is prescribed

Employment in any occupation:

- (a) involving mining, quarrying or working of silica rock or the working of dried quartzose sand or any dry deposit or dry residue of silica or any dry admixture containing such materials (including any occupation in which any of the above operations takes place incidentally to the mining or quarrying of other minerals or to the manufacture of articles containing crushed or ground silica rock)
- (b) involving handling of any of the materials specified in the above sub-paragraph in or incidental to any of the operations mentioned in it, or substantial exposure to the dust arising from such operations
2. involving breaking, crushing or grinding of flint or the working or handling of broken, crushed, or ground flint or materials containing such flint, or substantial exposure to the dust arising from any such operations
3. involving sand blasting by means of compressed air with the use of quartzose sand or crushed silica rock or flint, or substantial exposure to the dust arising from such sand blasting
4. involving work in a foundry or the performance of, or substantial exposure to the dust arising from, any of the following operations:
 - (a) the freeing of steel castings from adherent siliceous substance
 - (b) the freeing of metal castings from adherent siliceous substance: by blasting with an abrasive propelled by compressed air, by steam or by a wheel, or using power-driven tools
5. in or incidental to the manufacture of china or earthenware (including sanitary earthenware, electrical earthenware and earthenware tiles), and any occupation involving substantial exposure to the dust arising from it
6. involving the grinding of mineral graphite or substantial exposure to the dust arising from such grinding.
7. involving the dressing of granite or any igneous rock by masons, or the crushing of such materials, or substantial exposure to the dust arising from such operations.
8. involving use, or preparation for use, of a grindstone, or substantial exposure to the dust arising therefrom.
9. (a) involving the working or handling of asbestos or any admixture of asbestos
- (b) involving manufacture or repair of asbestos textiles or other articles containing or composed of asbestos
- (c) involving cleaning of any machinery or plant used in any of the above operations and of any chambers, fixtures and appliances for collecting asbestos dust
- (d) involving substantial exposure to the dust arising from any of the above operations.
10. (a) involving work underground in any mine in which one of the objects of the mining operations is the getting of any mineral
- (b) involving working or handling above ground at any coal or tin mine of any minerals extracted from the mine, or any operation incidental to it
- (c) involving trimming of coal in any ship, barge or lighter, or in any dock or harbour or at any wharf or quay
- (d) involving sawing, splitting or dressing of slate, or any operation incidental to it

Ulusal Yasal Düzenlemeler-İrlanda



1) Sosyal Refah Yasası: Meslek hastalıkları bildirimini denetleyen yasa 2005 tarihli Sosyal Refah Yasasının 13. bölümünün 2.ci kısmında yer alır.

- 2007'de aynı yasada yapılan revizyonla birlikte meslek hastalığı tanısı olan çalışanlarda listede belirtilmeyen mesleğe sahip olsa da tazminat alma hakkı verilmiştir.
- Çalışan tarafından istenen tazminat başvurusu işveren, doktor ve idare tarafından karara bağlanır.

2) İş Sağlığı ve Güvenliği Yasası: İşte Sağlık, Güvenlik ve Refah Yasası (2005; Bölüm 1, Kısım 2) değişiklikle meslek hastalıkları ve işle ilişkili hastalık tanımı ve bu nedenlerle tazminat hakkı ilk defa yasada tanımlandı.



Uluslararası Sistemler-Olgu Örnekleri

- **Avusturya:** Anket, çoklu veri akışı ve hastalık kayıt sistemi hakim.
- Avusturya Sosyal Güvenlik Enstitüsü halk sağlığı sigortası, kaza sigortası ve emeklilik sigortasının ana çatısını oluşturur.
- İş kazası ve meslek hastalığı sigorta sistemi halkın %99'unu kapsar.
- Veri toplanması yasalarla sıkı bir şekilde denetlenir.
- Meslek hastalıkları kaza sigortası şirketinin doktoru tarafından bildirilirken hastalığa bağlı istirahat işveren tarafından bildirilir.

Uluslararası Sistemler-Olgu Örnekleri



- **Almanya:** Meslek hastalığı şüphesi bulunan hastalar doktor ,çalışan, işveren veya sağlık sigortacısı tarafından kamu sigorta şirketine bildirilir.
- Yasa gereğince işveren ve doktor meslek hastalığını bildirmekle yükümlüdür.

Uluslararası Sistemler-Olgu Örnekleri



- **Birleşik Krallık:** Veri kaynaklarını: işgücü anketleri, işyeri güvenliği ve sağlığı anketleri, uzman doktorlar ve meslek hastalıkları uzmanlarından gelen veriler (THOR şeması), ölüm sertifikaları, vb. oluşturur.
- *İşle ilişkili Hastalık anketi:* Sağlık ve Güvenlik Dairesi [Health and Safety Executive (HSE)] tarafından yıllık olarak uygulanıp sonuçları yayınlanır.
- *İşyeri sağlık ve güvenlik anketi:* İşverene (cevap oranı %63) ve çalışanlara (cevap oranı %26) uygulanır.

Birleşik Krallık



- **The Health and Occupation Reporting network (THOR) şeması:**
- 2002 yılında Sağlık ve Güvenlik Dairesi (HSE) tarafından kuruldu ve bu sayede ülkede meslek hastalığı insidansı ortaya konuldu.
- Bu şema işle ilişkili hastalık tanısı koyan klinisyenlerin raporlarını toplayan bir sistemdir. İrlanda'da uygulanmaktadır.
- Bu sistem tamamen uzmanların kendi istekleriyle bildirimine dayanır.



Birleşik Krallık

- **Bu sistemin alt grupları:**
- İşle ilişkili ve mesleki akciğer hastalıklarının Sürveyansı [Surveillance of Work-Related and Occupational Respiratory Disease (**SWORD**)] (ie +)
- Konsültan dermatologlar tarafından mesleki cilt hastalıkları bildirimi Reporting of occupational skin disease by consultant dermatologists (**EPI-DERM**) (ie+)
- Meslek hastalıkları uzmanlarının bildirimi [Occupational Physicians Reporting Activity (**OPRA**)] (ie+)
- **THOR-GP** Meslek hastalıkları sertifikasına sahip olan pratisyenlerin meslek hastalıkları bildirim sistemi
- Romatologlar için kas iskelet sistemi mesleki surveyans şeması Musculoskeletal Occupational Surveillance Scheme for rheumatologists (**MOSS**)
- Mesleki stres ve mental hastalıkların surveyansı [Surveillance of Occupational Stress and Mental Illness (**SOSMI**)]

İrlanda Cumhuriyeti



- Doktorun veri toplamadaki yeri iki şekilde olur;
- 1) kişinin hastalık raporunu hazırlayarak,
- 2) gönüllü klinisyen surveyans sistemine bildirerek.
- Meslek hastalıkları uzmanı asla işverene çalışanın hastalığı hakkında bilgi vermez. Sadece talep edilirse o işe uygun olup olmadığını bildirir.
- Mesleki kanser, asbestosis ve mezotelyoma ise tüm hekimler tarafından Sağlık ve Güvenlik Kurumuna (HSA) bildirim zorunlu hastalıklardandır.

İrlanda Cumhuriyeti



- THOR şemasına ilk geçilen yıl olan 2005-2006 arasında 136 adet mesleki cilt hastalığı ve 32 adet mesleki akciğer hastalığı bildirildi.
- 14 dermatolog ve 12 göğüs hastalıkları uzmanı aktif olarak bildirim yaptı.
- Aynı dönemde, meslek hastalıkları uzmanları tarafından ise 13 mesleki kas-iskelet sistemi hastalığı ve 18 mesleki mental hastalık bildirdi (Turner et al, 2007).

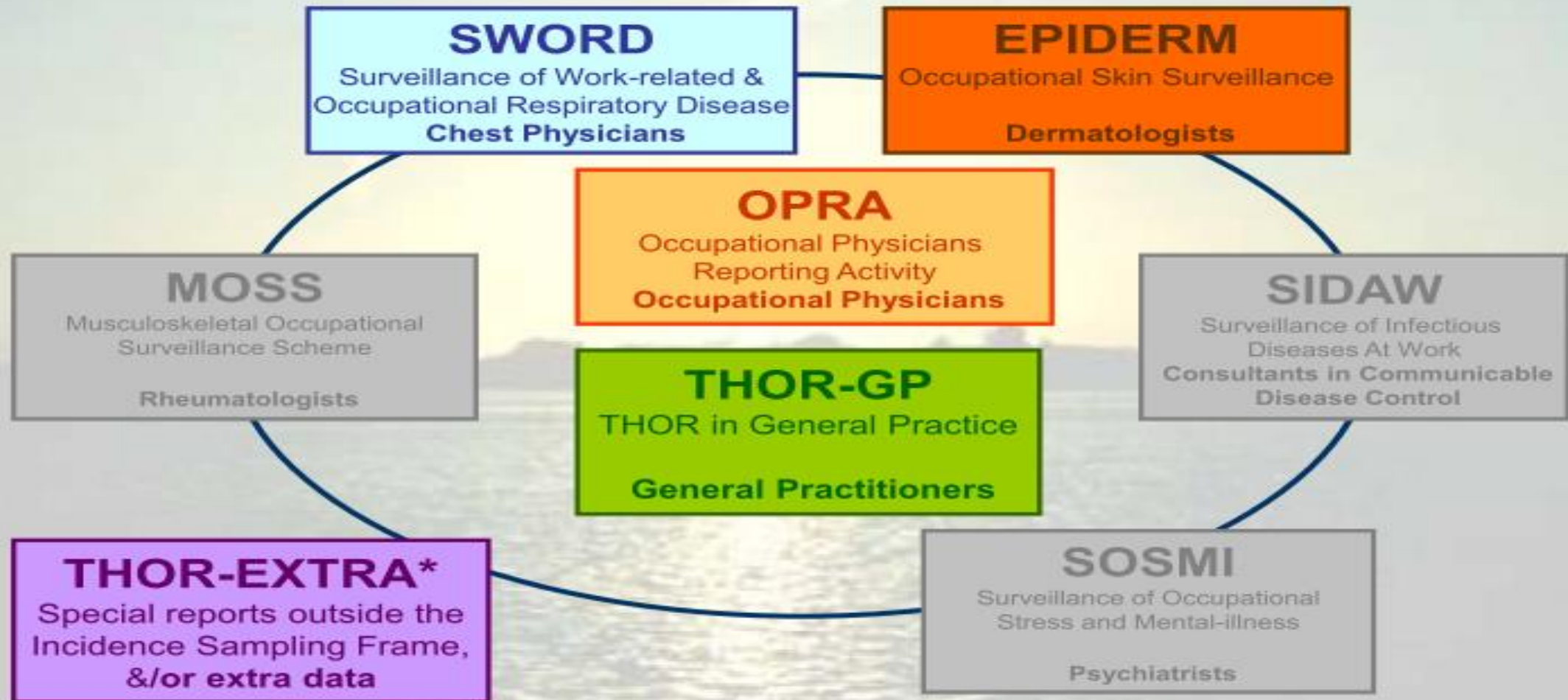
Referanslar

1. Addley, K., Toner, A., Erskine, R. and Duffy, U. (2006). Northern Ireland Civil Service Workforce Health and Well-Being Survey. Belfast: Northern Ireland Statistics and Research Agency.
2. Barrington, J. (1983). Report of the Commission of Inquiry on Safety, Health and Welfare at Work. Dublin: Stationery Office.
3. Benavides, F.G., Castejon, J., Gimeno, D., Porta, M., Mestres, J. and Simonet, P. (2005). Certification of Occupational Diseases as Common Diseases in a Primary Health Care Setting. American Journal of Industrial Medicine. 47 pp. 176-180.
4. Brenner, H. (2003). Report of a Study of Deaths in the Construction Industry. Dublin: Construction Workers Health Trust.

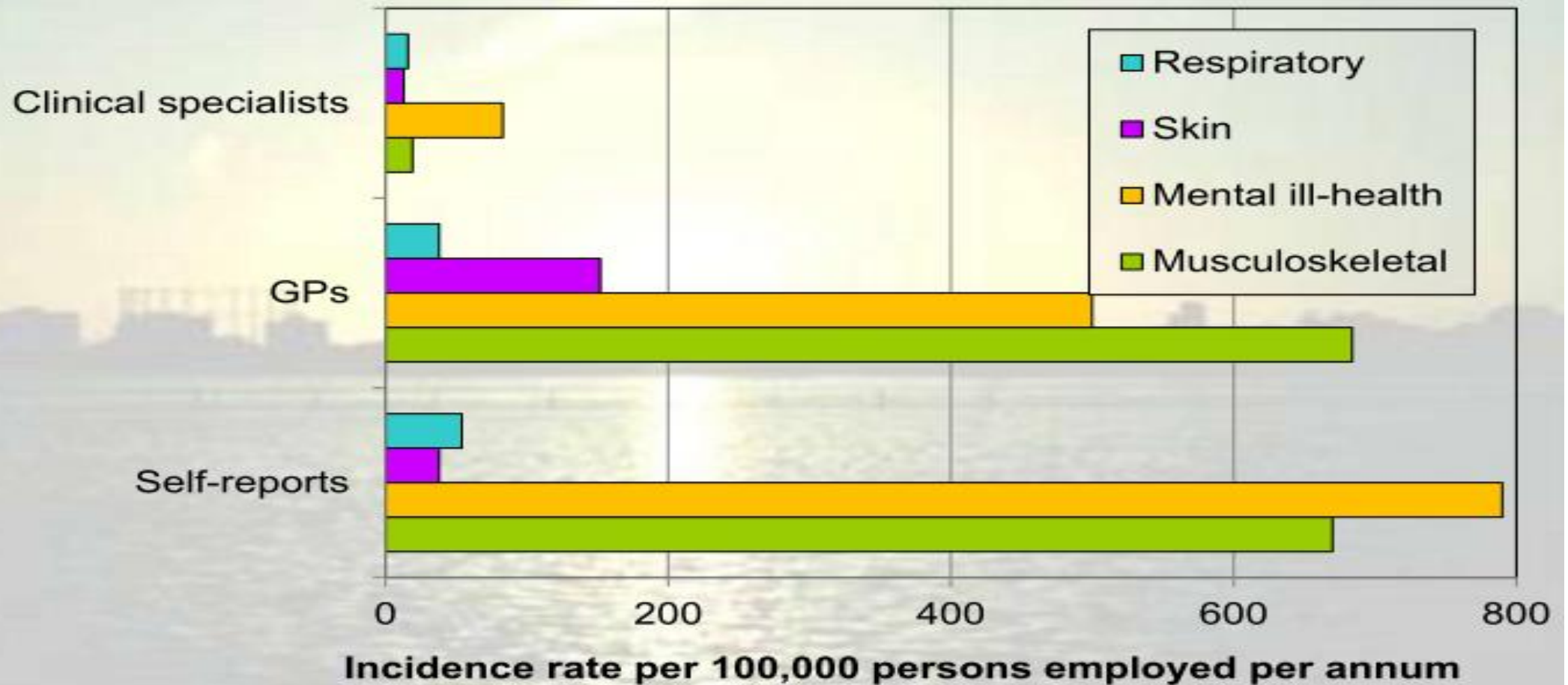
5. Central Statistics Office. (2006). Report on Vital Statistics 2004. Dublin: Stationery Office.
6. Central Statistics Office. (2007a). Quarterly National Household Survey, Quarter 2, 2007. Dublin: Stationery Office.
7. Central Statistics Office. (2007b). Small Business in Ireland. Dublin: Stationery Office.
8. Cherry, N. M. and McDonald, J.C. (2002). The Incidence of Work-Related Disease Reported by Occupational Physicians, 1996-2001. Occupational Medicine. 52 (7). pp. 407-411.
9. Civil Liability Act, 1961. No. 41 of 1961. Dublin: Stationery Office.
10. Civil Registration Act, 2004. No. 3 of 2004. Dublin: Stationery Office.
11. Coggins, D. (2001). Monitoring Trends in Occupational Illness. Occupational and Environmental Medicine. 58. pp. 691-692.

12. Construction Workers Health Trust. (2000). Patterns of Ill-Health in Irish Construction Workers. Dublin: CWHT.
13. Department for Work and Pensions. (2007a). Industrial Injuries Disablement Benefit Scheme; A Consultation Paper January 2007. London: Department for Work and Pensions.
14. Department for Work and Pensions. (2007b). Industrial Injuries Disablement Benefit Scheme; Consultation Report June 2007. London: Department for Work and Pensions.
15. Department of Labour. (2006). Report on the Notifiable Occupational Disease System. July 2000 – June 2005. Wellington: Department of Labour.
16. Department of Social and Family Affairs. (2003). Report of the Working Group on the Review of the Illness and Disability Payment Schemes. Dublin: Stationery Office.
17. Department of Social and Family Affairs. (2004). Prescribed Occupational Diseases under the Occupational Injuries Scheme. SW33. Dublin: Stationery Office.
18. Donnelly, T. (1997). Occupational Disease Reporting in Ireland. Dissertation for Licenciate Membership of the Faculty of Occupational Medicine. Unpublished
19. Driscoll, T., Takala, J., Steenland, K., Corvalan, C. and Fingerhut, M. (2005). Review of estimates of the global burden of injury and illness due to occupational exposures. American Journal of Industrial Medicine. 48 pp. 491-502.
20. A Review of the Occupational Diseases Reporting System in the Republic of Ireland :Prof.Dr Anne Drummond

The Health and Occupation Reporting (THOR) network



Incidence rate per 100,000 persons employed for work-related musculoskeletal, mental, skin and respiratory ill-health (2006 to 2009) as reported by clinical specialists, GPs & self-reports



Cliffs of Moher, Galway, Ireland

