The interval of the occupational physicals is longer than a year: change of regulations in Switzerland

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Program

Swiss system of medical screening

Overview

Change of regulation

Reasons for this evaluation and change
Swiss system of medical surveillance

- Suva is the Swiss National Accident Insurance Fund (Suva)
- an organization under public law
- responsible for prevention of occupational diseases and accidents
Swiss system of medical screening

- Legal basis:

  Articles 70 – 89 of the Regulation on the Prevention of Accidents and Occupational Diseases (VUV)

- Suva: responsible for occupational disease prevention in all companies in Switzerland:
  - Technical occupational disease prevention
  - Occupational medical disease prevention:
    Suva’s Department of Occupational Medicine
Swiss system of medical screening

Legal basis:

Article 70 of the Regulation on the Prevention of Accidents and Occupational Diseases

- For the prevention of occupational diseases that are characteristic of certain company categories or types of work

- For the prevention of certain hazards in the person of the employee

- Suva can, by administrative order, make a company, a part of the company or an employee subject to the regulations governing preventive occupational medical care
Suva - AMV

Order and Medical forms

Feed back and result, Compensation of costs (salary, expenses)

Suva - AMV

Suva Occupational Physician

Med. forms

Data on forms (electronic) + honorary note

company XY

Med. service provider

Radiology, lab

Med. forms
Program

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Reasons for this evaluation and change
Overview

- The first medical surveillance programmes were offered to workers at high risk for Silicosis and later for Asbestosis.

- Programs for other risks were introduced later.

- Since 1984 the program is legally based on the Regulation on the Prevention of Accidents and Occupational Diseases (VUV).

- Currently 82,000 examinations are performed annually.

285,000 employees
19,000 companies
Overview
Trends and Changes

- Strategy of occupational disease is focused on high-risk

- New legal regulations on serial X-ray

- In international guidelines serial X-rays are no more recommended for the health surveillance of workers with current or former exposure to Asbestos

- Audit results of Suva's low-dose CT lung cancer screening program

- The value of "Check-up's" for healthy persons is generally discussed
Program

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Medical Screening: Systematic and systemic approach

By law, all companies have to screen their processes for:

- Substances and exposure conditions (hazards)
- Production conditions (quantities etc.)
- Technical and organisational protection measures

Risk-evaluation
Reasons to establish a Medical Screening Program

- exposure exceeding action levels
- cancerogenic exposures
- exposures with other special hazards (substances, working conditions)
- Multiple exposures (ex.: foundry)
- Unknown effects of new exposures (nanomaterial)

No general health check up but evaluation of target parameters
Concept

Program for workers in the chemical or pharmaceutical industry:

- Before 2016:
  - Examination with clinical examination, laboratory, lung function test, ECG
  - Interval: 3 year

- Change on March 2016:
  - First exam: History and clinical exam, laboratory, lung function test, ECG, explanation of findings to the worker
  - Interval: Now 4 years
  - Follow-up exam: History and clinical exam, counselling on risk and protective measures, further test only on specific indication
Concept

- Risk assessment of workplaces and workflows
  - Selection of the appropriate prevention programme
  - Scope of the investigation, monitoring intervals, biological monitoring
  - Definition of the staff collective (specification)
  - Determination of the examining physician

- Decision lies with Suva Occupational Medicine
Concept

- Ionizing Radiation:
  - A- and B- Worker: surveillance with dosimetry

- Dosimetry can trigger further exams:
  only if limit values are exceeded
    --> medical examination

- Radiation protection supervisor or employer can demand an individual medical evaluation of fitness by the Suva
Program

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- Evaluation of the statistics on occupational diseases:
  - A large number of employees are in the program
  - Only few occupational diseases are detected during the regular medical surveillance examination - most are detected between the exams
  - The workplaces in Switzerland have generally a high (technical, organizational) safety standard
  - The companies have applied the standard for current Good Manufacturing Practice (cGMP)
Example one

- **Company based in Switzerland** (manufactures chemical and pharmaceutical products, approx. 4500 workers at risk)

- **Analysis of the 59 filed compensation claims between 2008 and 2012** (5 years) for **Occupational diseases (OD)**:
  
  - Claimed pathology
  - Coded diagnosis
  - Acceptance or rejection of the claim
  - In case of rejection: Reason

- **Analysis of the Medical surveillance data, related to 48 cases of acknowledged occupational diseases in the same period**:
  
  - Latest medical surveillance before the compensation claim
  - Noted pathology by anamnestic data or clinical finding
  - If yes: which
  - Judgement: was the noted pathology related to the future OD: yes or no
  - Have been there any OD claims directly out of the medical surveillance?
11 of 59 claims were not acknowledged as ODs:

- 7/11 no attributable causality of 75% by occupational exposure (ex.: MSD like epicondylitis, preexisting obstructive airway disease only moderately influenced by work-place conditions, tinnitus without any hazardous noise at work)
- 3/11 other illness, independent of professional exposure (pollinosis, Pityriasis)
- 1/11 withdrawal of the claim
Example one

48 of 59 claims have been acknowledged as OD: Diagnosis

- Allergic rhinitis or asthma: 10
- Irritative mucosal effects: 4
- Acute toxicity: 12
- Allergic dermatitis: 5
- Toxic dermatitis: 7
- Other 7 (MSD, hearing loss)
- Urothelial neoplasm: 3

Other 7 (MSD, hearing loss)
Example one

- 35 persons of the 48 accepted claims were in a medical surveillance program before diagnosis of a OD - no OD claim was generated by the program itself.

- In 17/35 examinations the occupational physician noted a pathological finding which he/she regarded as not relevant to the job in all 17 cases.

- Retrospective analysis found that in 5 cases of OD (4 allergies, 1 skin condition) there were "warning signs" in the medical screening exam before.

- All 35 persons were cleared for their task by the occupational physician on occasion of the last screening examination before the OD-claim was filed.
Example two

- 547 employees in the program for medical surveillance
- 108 claims between 1994 bis 2012 (89 persons involved)
- 97 were acknowledged as OD
- 11 were not acknowledged
Example two

- Acute contact dermatitis 55
- Intoxication, burn 14
- Intoxication 9
- Urticaria 2
- Erythema 2
- Conjunctivitis 1
- Keratitis 1
Example two

Evaluation of 84 OD:

No claim for OD from the Suva Program with medical screening in the last 18 years!
Points to take home

- Focus on the high-risk population for OD
- Focus on information and sensibilisation and less on technical medical examination
- Ionizing radiation:
  - Change:
    - from medical examination to measurement of the absorbed dose
Thank you for your attention!!