In this issue of Occupational Medicine

We know that construction workers are at greatly increased risk of injury whilst at work and account for the highest number of occupational fatalities (42 in 2009/2010 of any of the major industry groups)[1]. Rightly they have been the focus of much interest from the Health and Safety Executive but we are becoming increasingly aware that construction health warrants just as much concern as construction safety. Research from the THOR database published in this issue shows just how at risk construction workers are and from a much larger variety of hazards and diseases than had been imagined. Stocks and colleagues [2] examined the THOR databases between 2002 and 2008, and were able to analyse more than 18000 actual case reports of work-related disease from 1400 clinical specialists and 300 general practitioners. Standardized incidence rate ratios (SRRs) compared against workers with similar skills, training and qualification were significantly raised for a large number of conditions including skin neoplasia (SRR 6.3 in roofers), musculoskeletal disorder (SRR 6.1 in road construction operatives), asthma (SRR 3.8 in welders) and long-latency respiratory disease including mesothelioma and lung cancer (SRR 4.5 in pipefitters). As a specific group, labourers in the building and construction trades were found to have a significantly increased incidence of work-related ill-health including respiratory, skin and musculoskeletal disorder when compared to a UK working population. Overall, this sector of the workforce represents 2.4 million workers, most of whom are unlikely to have access to occupational health, a familiar paradox. The THOR data reinforces the recent work from Rushton et al.[3] which shows that male construction workers account for 56% of all occupational cancer registrations, these being mesotheliomas, lung, bladder and non-melanotic skin cancers, with the latter accounting for about a quarter of all occupational cancer registrations in all construction workers. So the short report by Madgwick and colleagues [4] is a relevant and important investigation of the use of sun protection by construction workers. Three hundred and sixty male construction workers who reported that they worked outdoors for over 6 hours per day. Younger workers were particularly likely to avoid wearing shirts, but after appropriate training workers were more likely to adopt measures such as applying sun screen, wearing long-sleeved loose-fitting tops and regularly checking their skin for changes. This suggests that sun protection training needs to become as ubiquitous as dayglo jackets and hard hats within an industry renowned for its topless workers.

Also in this issue we have two research papers concerned with police work. Garbarino and colleagues [5] assessed job strain and effort–reward imbalance in a group of almost 300 police officers involved in policing the 2009 G8 summit in Italy. This event has been associated with significant social disturbance in recent years and would be seen by most as a stressful situation. The researchers found that measures of strain and effort–reward imbalance were significantly reduced when preparing for the summit compared to during more routine police beforehand. Other factors such as social support, recognized to be important in mitigating against known stressors, were seen to improve during what would be regarded as the more stressful preparatory work. This lends support to the maxim that the stress on the beat is less than the stress in the station? However, in a separate piece of research, Leino and colleagues [6] examined psychological distress in response to dealing with violence in almost 2000 police and security workers. The police were far more likely to experience violence in their working lives than the security workers and those police who reported exposure to violence were more likely to report psychological distress and this increased further in those who were anxious about experiencing violence in the future. The authors conclude that if the strong association between work-related violence and psychological distress in police officers’ work is causal, interventions should focus particularly on those who are frequently exposed to physical violence or threats as well on those who are uncertain about being able to cope with violence. So the stress on the beat can be very bad for some but for others who can cope or are not exposed the stress in station may still be worse. A further insight into the world of policing is provided by John Challenor[7] who recalls working in the shadow of a thin blue line.

Elsewhere in this issue, our research includes the use of a visual analogue scale to assess stress during the occupational health consultation [8], the development and validation of a questionnaire for noise-induced hearing loss [9] and a case report on acute life-threatening respiratory disease in a paint controller [10].

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Honorary Editor

References