



GOOD PRACTICE POLAND NIOM

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Name and organisation

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General information about the MOGP

Name of organisation and short description

The Nofer Institute of Occupational Medicine (NIOM) in Poland is an independent multi-disciplinary research and development centre covering various areas of occupational and environmental health. NIOM provides background research and expertise to the Ministry of Health and serves as an advisory body to the Ministry of Environmental Protection and numerous governmental agencies.

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Information on the good practice “Development of projects for prevention of cardiovascular disease and Return to work after the first myocardial infarction”

Aims

- Finding out the occupational factors accounting for the risk of myocardial infarction, which allows for the identification of occupational groups being at a higher risk as well as for developing programmes aimed at the reduction of occupational risks. (First phase)
- To assess factors determining the process and to develop a system of returning to work after the first acute myocardial infarction. (Second phase)

Target group

- Both phases of the practice involve people being at risk or suffering from Cardio Vascular Diseases (CVD), their employers and occupational medicine specialists.

Description

1. First Phase. A questionnaire-based study was conducted on all patients (1053 subjects) hospitalized during the period of one calendar year at the Medicinal University of Lodz because of a first myocardial infarction.

Two tools were developed: the first one filled out by physicians based on medical records and the second one filled out by occupational hygiene specialists concerning the status of the patient, his/her behaviour and job characteristics.

The most frequent occupational risk factors identified in the study were: work-related stress, occupational noise, dust and various chemical factors. The study group linked the cardiac infarction with stress and physical effort.

2. Second Phase. To establish factors determining the process of returning to work, a questionnaire-based study will be developed. It will be conducted among those participants of the first study who were employed before the first myocardial infarction.

This will be the basis for designing a series of trainings addressed to

- 1) employees planning to return to work after myocardial infarction;
- 2) employers facing the problem of hiring people with such a disease;
- 3) occupational medicine physicians taking care of such employees.

The data gathered within the framework of the project will be the scientific basis for designing rehabilitation programmes tailored to the needs of employees with different kinds of jobs (with emotional, physical and/or mental workload).

This will include programmes addressed to patients / employees after myocardial infarction, their employers and occupational health specialists.



Why is it a good practice?

The described practice focuses on CVD responsible for about 50% of total fatal cases in Poland with mortality being twice as high as in other EU countries. CVD are a cause of ca. 40% of cases of inability to work in Poland. Work is continued after myocardial intervention only by 50-60% of employees who don't work on average for 9 months.

The practice in question allows for the recognition of factors, which have an influence on the continuation of work after myocardial infarction.

The practice also has an innovative character: both studies conducted within its framework haven't been performed in Poland before.

Results

Evaluation

The first phase was monitored in order to verify its implantation and it produced following deliverables:

- A book entitled "Cardiovascular diseases in the occupational context. The manual for physicians." Ed. A. Bortkiewicz
- A book entitled "Labour vs. cardiovascular diseases. The manual for safety inspectors, specialists of labour and sanitary inspections, employees and employers." Ed. A. Bortkiewicz
- Conferences, trainings / seminars and training materials.

The second phase is on going.

Incentives for success

The implementation of the first phase of the good practice was possible with partial financial support of the European Union (under the European Social Fund: Human Capital Programme).

Barriers for success

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