

Occupational Diseases

They are the diseases which arise out of or in the course of employment. They are grouped as under.

1) Diseases due to Physical agents:

1. Heat - Hyperpyrexia, Exhaustion, Syncope, Champs, Burns, Prickly heat.
2. Cold - trenchfoot, chilblains, Frost bite.
3. Light - Cataract, Miners' nystagmus.
4. Pressure - Carbonic disease, Air embolism.
5. Noise - Deafness.
6. Radiation - Cancer, leukemia, Aplastic anemia, Porphyria.
7. Mechanical - Injuries, Accidents.
8. Electricity - Burns.

2) Diseases due to chemical agents:

1. Gases: CO_2 , CO , HCN , NH_3 , N_2 , H_2S , HCl , SO_2

2. Dusts (Pneumoconiosis).

i) Inorganic dusts

- a) Coal - Anthracosis
- b) Silica - Silicosis
- c) Asbestos - Asbestosis
- d) Iron - Siderosis

ii) Organic dust

- a) Cane fibre - Bagassosis
- b) Cotton dust - Byrrinosis
- c) Tobacco - Tobaccosis
- d) Hay or grain dust - Lung.

3. Metals: Lead, Mercury, Cadmium, Arsenic, Chromium

4. Chemicals: Acid, Alkalies, pesticides.

5. Solvents: Chloroform, Trichloroethylene, Benzene

3) Disease due to biological agents.

- Brucellosis, leptospirosis, Anthrax, actinomycosis, Tetanus, Encephalitis, Fungal infection etc.

- 4) ~~Disease~~ due to Occupational Cancer - CA skin, lung, Bladder

- 5) Occupational dermatosis - Dermatitis, Eczema.

- 6) Diseases of Psychological origin - Neurosis, Psychosis.

PNEUMOCONIOSIS

It constitutes a group of Interstitial lung disease (ILD) caused by occupational inhalation of dusts.

Inorganic - Coal, Silica, Asbestos.

Organic - Cotton dust, Cane fibre, Hay grain

- Dusts are finely divided solid particles with size ranging from 0.1 to 150 microns. They are released into atmosphere by crushing, grinding, abrading, loading and unloading.
- Dusts are produced in mines, foundry, quarry, pottery, textile, stone or wood industries.
- Dusts of larger than 10 microns settle down rapidly and smaller than 5 microns are suspended in air and directly inhaled into lungs and retained there. They are called "respirable dust" causing pneumoconiosis.
- The hazardous effects of dusts depend upon factors such as
 - 1) chemical composition
 - 2) Fineness
 - 3) Concentration of dust
 - 4) Period of exposure
 - 5) Health status of the person.
- There may be superinfection like TB.
- The important dust Diseases are.
 - 1) Silicosis -
 - 2) Anthracosis -
 - 3) Byssinosis -
 - 4) Berylliosis -
 - 5) Asbestosis -
 - 6) Farmer's lung -

1) Silicosis:

- ① It is the irreversible fibrosis of the lung caused by inhalation of free silica dust (silicon dioxide).
- ② People working in mining, ceramic, pottery industry, sand blasting, metal grinding, building and construction, slate pencil industry, Iron and steel industry.
- ③ It depends upon the chemical composition, fineness, concentration, exposure and susceptibility.
- ④ It may coexist with anthracosis.
- ⑤ Incubation period of few months to 6 years.
- ⑥ Pathology → The silica particles are ingested by phagocytes and block the lymph channels.
- ⑦ C/F → and produces "nodular" fibrosis.
- ⑧ C/F: Insidious onset, Tersistent cough, dyspnea on exertion, pain in chest, haemoptysis.
- ⑨ Investigation → X ray → Diffuse nodular lesion, "honey comb" appearance, Total lung capacity is impaired.
- ⑩ Complication → Prone to develop tuberculosis "Silico-Tuberculosis", But rarely ruptures shows Tubercular Bacilli.
- ⑪ Treatment and Prevention → No effective treatment. Fibrotic changes cannot be reversed. So controlled by i) Dust control measures ii) Regular physical Examination of workers.

2) Anthracoconiosis (Coal Worker's Pneumoconiosis)

① Previously is rare in India.

② Two phases.

1) Simple Pneumoconiosis associated with little ventilatory impairment. This phase requires 12 years of exposure to develop.

2) Progressive Massive Fibrosis ^{PMF} causes severe respiratory disability and premature death.

③ Once simple pneumoconiosis occurs then PMF occurs with or without further exposure.

④ Pathology → Coal exposure (blackish appearance to the lesions) → Alveolar macrophages → Fibrosis → Centrilobular emphysema.

⑤ C/F → Dyspnea with cough and purulent expectoration of blackish sputum.

⑥ ^{X-ray} ~~at~~ Nodular lesions where Caplan's syndrome.

⑦ Notifiable in Indian Mines Act 1952 and compensatable in Workmen's Compensation Act 1959.

3) Bysinosis

① Inhalation of cotton fibre.

② 35% of textile workers develop this.

③ Usually occupational lung disease not as pneumoconiosis.

④ Pathology → Stimulates histamine from macrophages.

⑤ C/F → Cough, dyspnea, which > weekend < after work.

⑥ No Radiological evidences.

⑦ Withdrawal from work.

4) Asbestosis ? Inhalation of Asbestos.

① Asbestos are certain type of fibrous material made up of silicates. Silica may be combined with Mg, Fe, Ca, Al.

② Two types - ① Serpentine → Hydrated mg 90%
② Amphibole → little mg

③ Asbestos are used in current industry, roof tiling, Brake lining, gaskets.

④ Path → Asbestos in alveoli → Fibrosis.

Fibrosis is due to mechanical irritation, diffuse, ~~nodular~~
Basal in location. Contrasts to silicosis.

⑤ C/F: - Dyspnea out of proportion to symptoms.
- BC → cyanosis, clubbing.
Cardiac distress.

⑥ Investigation

Sputum - Asbestos bodies

Asbestos coated with fibrin

x-ray - Ground glass appearance in lower two third.

⑦ Complication

- Respiratory insufficiency and death.

- CA Bronchus. (when combined with cigarette smoking)

- Mesothelioma of pleura and peritoneum.

- CA of GIT.

⑧ Prevention: - Use of safer asbestos, Rigorous dust control, Periodic examination of workers.

Asbestosis	Silicosis
Cause - Asbestos	SiO ₂
Mechanism - Irritation	Lymph Blockage
Type - Diffuse of fibrosis	Nodular
Situation - Basal	Upper part.

5) Bagassiosis

- ① Inhalation of Bagasse or sugarcane dust.
- ② Sugarcane fibre which went to waste earlier are now used for the paper, cardboard, rayon.
- ③ Occurs due to Thermophilic actinomycetes Sacchari.
- ④ Symptoms $\rightarrow$ Breathlessness, Cough, Haemoptysis, fever.
- ⑤ Investigation $\rightarrow$ Skiagram shows Mottling of in lungs, Impaired Pulmonary function test.
- ⑥ Treatment $\rightarrow$ If treated early reversible if not fibrosis, emphysema, Bronchiectasis.
- ⑦ Prevention $\rightarrow$ ① Dust control, $\rightarrow$ Wet process, Exhaust ② Personal $\rightarrow$ Mask ③ Medical $\rightarrow$ check up, Examination ④ Bagasse control $\rightarrow$ Keeping the moisture above 20.

⑥ Farmers lung:

- ① Inhalation of mouldy hay or grain dust which has high moisture content so Bacteria and fungus grow easily.

$\downarrow$
Rapid $\uparrow$ in temp of 40 to 50 deg.

$\downarrow$
Thermophilic actinomycetes (Mainly Micropolyspora faeni).

- ② C/F $\rightarrow$ Respiratory symptoms and signs.
- ③ Complication $\rightarrow$ Pulmonary Fibrosis and con pulmonary.
- ④ In India bulk of population is agricultural work so high risk.

EMPLOYEE STATE INSURANCE ACT

The ESI act was passed in 1948 (amended in 1975, 1984, 1989, 2010).

- It is important measure of social security and health insurance in this country.
- It provides unfair cash and medical benefits to industrial employees in case of sickness, maternity and employment injury.

Scope

- The act extends to whole of India.

① The ESI act of 1948 covers all the power using factories other than seasonal factories where 10 or more persons are employed (excluding mines, railways and defense establishments).

② The ESI act of 1975 was extended to cover new classes -

- a) small factories of 10 or more persons, where power is used in manufacturing or not.
- b) shops c) hotels d) Cinema theatres
- e) Road-motor transport establishment f) Newspaper establishment g) Private medical or educational institution employing 20 or more persons.

③ The ESI act of 2010 act covers all employees getting upto ₹15,000 per month, which is revised into ₹21,000 per month in 2016.

Administration

- The ESI scheme is under ESI corporation.

- The chief Executive officer is assisted by

- 1) Insurance Commissioner 2) Medical Commissioner
- 3) Financial Commissioner 4) Actuary.

FINANCE

- The scheme is run by employees and employers and from Central, State Government -
Employer - 4.75% of total wage bill
Employee - 1.75% of total wage -
State Government - $\frac{1}{8}$ of total cost of medical care
ESI Corporation - $\frac{1}{8}$ of total cost of medical care ^{below}
- Employees getting payment of ₹ 100 are exempted from payment of contribution.

Benefits to employees

- 1) Medical Benefit
- 2) Sickness Benefit
- 3) Maternity Benefit
- 4) Disablement Benefit
- 5) Dependents' Benefit
- 6) Funeral Expenses
- 7) Rehabilitation allowance -

1) Medical Benefit

- It consists of "Full medical care" including hospitalization, free of cost. It includes -

- ① OP
- ② IP treatment
- ③ Ambulance service
- ④ Investigation
- ⑤ Drugs and dressing
- ⑥ Emergency service
- ⑦ Antenatal, postnatal
- ⑧ Domestic help
- ⑨ Immunization
- ⑩ Family planning
- ⑪ Health education
- ⑫ Specialist service

- Medical care is provided Directly through agency of ESI hospitals or Indirectly through Panel of ^{private} medical practitioners -

- Medical care is also given to the family members like "Restricted Medical care" -

only outpatient & on Expanded Medical care

full medical care is given -

- Other Medical Facilities ① Dentures, Spectacles, Hearing aid

(2) Artificial limbs (3) Hernia belts, walking sticks, spinal braces and jackets.

(2) Sickness Benefit:

- It consists of periodical cash payment to an insured person in case of sickness.
- Payable for maximum period of 91 days or in any continuous 365 days, in a rate of 50% of daily wages.

- Extended Sickness benefit for 2 years for the 34 long term diseases.

1) Infectious Diseases → TB, Hepatitis, Empyema, AIDS.

2) Neoplasms → Malignant disease

3) Endocrine, Nutritional, Metabolic → Diabetes with neuropathy, nephropathy

4) CNS → Monoplegia, Hemiplegia, Paraplegia, Hemiparesis, Intracranial space occupying lesion, Spinal cord

Compression, Parkinson, Myasthenia, ~~Eye~~ Cataract, Detachment of Retina, ~~and~~ Glioma

5) CVS → Coronary artery disease - Congestive Heart Failure, Cardiomyopathies,

6) Chest → COPD, Interstitial lung disease, Bronchitis

7) GIT → Cirrhosis of liver with ascites.

8) Orthopaedic → TAVDP, Non-union of fracture, osteomyelitis.

9) Psychosis → Schizophrenia, Dementia, Depression

10) Others → ^{Morb.} 20% blindness, CKD, Raynaud's or Buerger's disease.

- Cash Benefit is also applicable for tubectomy and varicoxomy operation.

(3) Maternity Benefit:

- The benefit is payable in cash to an insured woman for confinement $\rightarrow$ 26 weeks,
miscarriage $\rightarrow$ 20 weeks,
sickness after confinement $\rightarrow$ 30 days.

(4) Disablement benefit

- Besides free medical treatment & in the temporary or permanent disablement from the employment injury.
- 90% of wages till the temporary disablement
- Life time pension in the total permanent disablement calculated by the loss of earning capacity.

(5) Dependants benefit

- In case of death due to employment injury
- 90% of wages which is shared in a fixed ratio
- Son or daughter gets upto age of 18.

(6) Funeral expenses

- Amount not exceeding Rs-10,000.

(7) Rehabilitation

on Monthly payment of Rs 10 to the insured person and his family members continue to get medical benefit even after permanent disablement or retirement.

Benefit to employers

- (1) Exemption from (1) Workmen's Compensation Act (2) Maternity Benefit Act (3) Income Tax Act
- (4) Medical allowance to employees for medical care (5) Health work force.

Rajiv Gandhi Shramik Kalyan Yojna

- It is new Yojna which is covered by ESIS.
- This scheme provides unemployment allowance to the employees who are rendered unemployed involuntarily due to closure of factory etc. after fulfilment of eligibility condition.
- Get unemployed allowance for 6 months.