

COST Action "StanDerm" Seminar on Etiology and Prevention of occupational contact dermatitis: New challenges Barcelona, 24 June 2014

Secondary prevention strategies: The Dutch experience

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Secondary prevention system of Occupational Skin Diseases in The Netherlands

None

for the time being

Secondary prevention system of Occupational Skin Diseases in The Netherlands

But, increasingly felt urge to develop such a cost-effective system

Currently, negotiations with political, employer and social partners

Hands4U:

The effectiveness of a multifaceted implementation strategy on behaviour related to the prevention of hand eczema

> A randomised controlled trial among healthcare workers



Baseline characteristics

Variable	Total (n)	Control group (n=773)	Intervention group (n=876)
Female, n (%)	1641	603 (78.3)	683 (78.4)
Education*, n (%)	1640		
Low/middle		372 (48.3)	371 (42.6)
High		398 (51.7)	499 (57.4)
Patient-related task, n (%)	1641	626 (81.2)	604 (69.4)
Hand eczema at baseline, n (%)	1649	80 (10.3)	64 (7.3)
Symptoms related to hand eczema at baseline, n (%)	1635	359 (46.7)	361 (41.6)
Age, mean (SD)	1635	40.8 (11.3)	40.7 (11.5)
Working hours per week, mean (SD)	1636	30.2 (8.8)	29.8 (8.1)
Colleague support, mean (SD)	1600	3.1 (0.4)	3.1 (0.4)
Decision authority, mean (SD)	1605	2.8 (0.5)	2.8 (0.4)

Intervention effects after 12 months of follow-up

	Adjusted†	
Outcome variables	B/OR (95% CI)	
Barriers for implementation		
Awareness ((totally) agree) (OR, 95% CI)	6.30 (3.41 to 11.63)	
Knowledge (B, 95% CI)	0.74 (0.54 to 0.95)	
Receiving information (yes) (OR, 95% CI)	9.81 (5.60 to 17.18)	
Behavioural determinants		
Attitude: Important to protect hands ((totally) agree) (OR, 95% CI)	1.12 (0.57 to 2.22)	
Attitude: Content with protective measures ((totally) agree) (OR, 95% CI)	1.37 (0.84 to 2.26)	
Social influence (B, 95% CI)	0.03 (-0.14 to 0.19)	
Self-efficacy (B, 95% CI)	0.04 (-0.07 to 0.15)	
Intention (B, 95% CI)	0.02 (-0.11 to 0.15)	
Behaviour		
Washing hands (B, 95% CI)	-0.40 (-0.51 to -0.29)	
Wet work (B, 95% CI)	-0.08 (-0.18 to 0.03)	
Use of moisturiser (B, 95% CI)	0.29 (0.20 to 0.38)	
Use of disinfectant (B, 95% CI)	0.05 (-0.06 to 0.16)	
Wearing gloves (B, 95% CI)	-0.22 (-0.60 to 0.15)	
Use of body lotion (no, never) (OR, 95% CI)	1.07 (0.64 to 1.79)	
Wearing jewellery (no, never) (OR, 95% CI)	1.03 (0.54 to 1.97)	
Wearing cotton under gloves (once in a while/daily) (OR, 95% CI)	3.94 (2.04 to 7.60)	
Compliance to guideline (B, 95% CI)	0.14 (0.02 to 0.26)	

Hands4you: Conclusions

Evidence based recommendations are available for the prevention of hand eczema in healthcare workers, but these are not implemented well into daily practice.

The multifaceted implementation strategy proved to be effective on behaviour related to the compliance of recommendations for the prevention of hand eczema.

Hands4you: Conclusions

The multifaceted implementation strategy was effective for knowledge and awareness related to hand eczema prevention. The strategy can be used in practice to enhance implementation of recommendations for the prevention of hand eczema among healthcare workers.

Important milestone creating political and public attention

SUSCEPTIBILITY TO

HAND ECZEMA

IN HIGH RISK OCCUPATIONS

Contribution of genetic and environmental factors

Maaike Visser

Prospective cohort study

ID Datum / / Afdeling				
X Dagdiens	Late dienst Nachtdienst			
A. Handen w	assen			
Alleen water	×××			
Water + zeep/ douchegel/ shampoo				
Water + iets anders, namelijk				
B. Handen d	esinfecteren			
Handalcohol X				

C. Werken met handschoenen					
< 5 min	5 – 15 min X — — — — — — — — — — — — — — — — — — —	15 - 30 min	> 30 min		
D. Gebruik van handcrème					

Onderzoek Handeczeem bij werk in de zorg en erfelijke factoren

E. Werkzaamheden waarbij de handen nat worden					
	Zeer kort (< 1 min)	1 – 15 min	> 15 min		
Alleen water					
Water + zeep/ douchegel/ shampoo					
Water + schoonmaak- middel					
F. Gebruik van 'Swash': (wasdoekjes voor magnetron)					
'Swash'					

Handcrème

Results: Wet work exposure





8-10 times /day → OR 2.2 (1.4 – 3.4)



Visser et al., Contact Dermatitis 2014

Results: risk factors

- Period prevalence of HE: 21% 31%
- Among not previously exposed, no history of HE >> 18% developed HE



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