

The health of the healthcare workers

A healthcare worker is one who delivers care and services to the sick and ailing either directly as doctors and nurses or indirectly as aides, helpers, laboratory technicians, or even medical waste handlers. There are approximately 59 million healthcare workers worldwide. Recognizing the vital role played by health care workers as "the most valuable resource for health" the World Health Organization (WHO) had declared the years 2006 to 2015 as the "The decade of the human resources for health."

Do these millions of workers who toil every day to provide healthcare to the ailing population enjoy good health themselves? In other words, are the healthcare workers healthier than their patients? As those who care daily for the sick and injured, healthcare workers are often viewed to be immune to injury or illness. Ideally, the very fact that the health facility is within their reach would make one believe so. However, the picture is not as rosy as it seems.

Healthcare industry is one of the most hazardous environments to work in. Employees in this industry are constantly exposed to a complex variety of health and safety hazards in the course of their work. Hazards range from biological exposure to disease causing organisms such as tuberculosis and human immunodeficiency virus (HIV) or exposure to chemicals such as glutaraldehyde and ethylene dioxide. Apart from physical hazards such as exposure to radiation and noise, there are also ergonomic issues such as heavy lifting and standing for long periods. Long working hours and shift work add to the stress of work.

A healthcare worker is in need of protection from these workplace hazards just as much as any other category of workers such as miners or construction workers. The World Health Report 2006 – Working Together for Health – reported a severe healthcare workforce shortage especially in 57 countries, mostly in Africa and Asia. Fear of contracting infectious diseases is primarily responsible for high attrition rates among health care workers.

In a report published by the WHO, the disease burden caused by percutaneous sharps injuries among healthcare workers was found to be three million per year. Moreover, 40% of hepatitis B, 40% of hepatitis C, and 4.4% of HIV among healthcare workers were due to needle stick injuries. It is very unfortunate that approximately 1000 healthcare workers die annually from occupational HIV, which can and should have been prevented. Despite this, almost 80% of healthcare workers remain unimmunized (against Hepatitis B) in many parts of the world.

Another example of a serious occupational hazard would be that of tuberculosis among healthcare professionals. In the pre-antibiotic era, there were a number of health professionals who fell prey to the disease, however, with the advent of antibiotics, these numbers have substantially reduced. Now, however, we find a resurgence in the number of cases of tuberculosis infection and disease, especially among technicians, pathologists, and physicians. Reasons for this are varied ranging from heavy exposure to the pathogen at the workplace to poor infection control measures implemented at the hospitals and laboratories.

This trend is not restricted to infectious diseases alone. Several studies have found that healthcare workers fare no better than the general population when it comes to non-communicable diseases such as diabetes and hypertension, as well as cardiovascular diseases. We continue to smoke, consume alcohol, eat junk food, sleep erratically, and remain obese with little physical exercise despite knowing the health risks that they pose. This shows that we do not always "practise what we preach."

Several action points come to mind. It is important that we devote adequate time to education – not only of ourselves but of those who work at different levels of the healthcare industry. Our approach to preventive programs, such as vaccinations, requires special attention and may need to be undertaken on a warfooting. There is a paucity of research into the hazards faced by healthcare workers in our country and we need to expand the scope of this research from single centre studies to the analysis of data from multiple centres. This alone will provoke interventions that are designed for large scale implementation.

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The need of the hour is to prioritize occupational health of health workers and ensure that the workforce is adequately trained and healthy. As humanitarians, it is our duty to help the most vulnerable sections but we should not end up paying the price of our lives for it. The way forward is no longer "Physician heal thyself" but "Physician protect thyself."

Medicus custodiat te!

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