

## E D I T O R I A L

**Preventive medicine for health care workers***La medicina preventiva per i lavoratori della sanità*

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I am grateful to the Editors of this issue of *La Medicina del Lavoro* for asking me to write a brief introduction to this highly valuable collection of selected articles dedicated to fitness for work in health care workers. In fact, this topic was considered to be of major importance by the Preventive Medicine for Health Care Workers Section of the Italian Society of Occupational Medicine and Industrial Hygiene (SIMLII). This collection of scientific papers was coordinated by our Section and prepared by specific working groups composed of experts who have vast experience in these topics. The papers should be of particular interest since they address aspects of fitness for work related to five different situations of risk, which indeed frequently occur in health care settings. Moreover, I believe that this initiative, via articles with opinions reflecting the state of the art concerning these peculiar problems, will be particularly useful at the present time, both because the topic of fitness for work in general is still the subject

of only a very limited number of publications and because the issue is specifically addressed to workers who belong to a work sector that in the vast majority of cases includes the major employers (at least by number of employees) at local level in the economic and social structure of Italy, and where it is likely that workers be exposed to both traditional and emerging risk factors that need to be taken into account in occupational medicine.

The formulation of fitness for work for a specific task is the final stage of health surveillance and risk assessment and is intended to protect the physical and mental health of workers, while at the same time respecting their professional capacities.

The difficulties that occupational physicians must face when assessing fitness for work are numerous. This is especially true in the case of health care workers: in this area, the risk factors that workers may face are many and may occur in association. Furthermore, workers may have lifestyle and physio-

logical or pathological conditions of greater susceptibility that can significantly affect their performance. Moreover, in this field, considering the fact that assistance is the primary activity, the objective is not only prevention for workers but also the assessment of "risk for third parties". The primary aim is to support people with health problems and disabilities and help them to remain in, or wherever possible, to return to work, which is economically and socially important for individuals and the community.

In the formulation of fitness for work, the occupational physician must be able to practise his profession with absolute authority and impartiality, always acting in accordance with the most advanced technical knowledge, but also observing the Hippocratic Oath and the Code of Ethics of the International Commission of Occupational Health (ICOH) (7).

In addition to the general remarks on fitness for work in health care workers and specific reports about workers exposed to biological, chemical-allergological and biomechanical risks and with substance abuse problems, opinions have been collected by Stefano Porru (of the Preventive Medicine for Health Care Workers Section) from the relevant stakeholders in health care settings, such as General Manager, Medical Director, Workers' Safety Representative, Prevention and Protection Service and Occupational Physician, in order to fully appraise the theme of the organization of health and safety activities for prevention in health care settings.

In this latter respect, the Italian Association of Preventive Medicine for Health Care Workers already expressed its view in two documents published in this journal (1, 8); it now seems that the issue must be addressed in the light of changes introduced by Legislative Decree 81/2008, in order to provide additional guidelines for better organization of prevention activities involving health care workers, which should be applied in an homogeneous way throughout the country.

This issue can be considered the final initiative of the outgoing members of the Section, which was chaired in the latter years by Prof. Lorenzo Alessio, University of Brescia, thus continuing the activity initiated in 1991 with the establishment of the Italian Association of Preventive Medicine for Health

Care Workers, which was subsequently merged in 2007 with the SIMLII, as a National Theme Section; countless initiatives were carried out in this period (1, 8, 4), including Consensus Documents on risk associated with the use of latex gloves (3, 6) and handling of antineoplastic drugs (2, 5).

Through this series of actions, the aims that were set have been achieved, which were mainly to promote prevention and safety of health care workers in order to develop scientific research in a specific field, to enhance prevention services, and to ensure regular updating of staff. In the future, it will be necessary to continue such cultural activity and the promotion of information, including the activity of working groups dedicated to specific topics such as biological risk, biomechanical overload, work-related stress, developing multicenter trials involving large number of workers with the cooperation of professional figures in prevention.

## REFERENCES

1. Alessio L, Apostoli P, Bartolucci GB, et al: Application of the Legislative Decree 626/94 in local health centers and hospitals: proposal for organization of preventive activity. *Med Lav* 1995; 86: 352-359
2. Alessio L, Apostoli P, Draicchio F, et al: Prevention of risks from occupational exposures to antineoplastic drugs. Consensus Document. *Int J Occup Environ Health* 1997; 3: 84-87
3. Alessio L, Baruffini A, Biscaldi G, et al: Allergic and irritant glove-related diseases in health care workers and their prevention. *Int J Occup Environ Health* 1997; 3: 300-303
4. Alessio L, Campagna M: Introduction to the Congress. *G Ital Med Lav Erg* 2010; 32: 199-204
5. Apostoli P, Bartolucci GB, Draicchio F, et al: Summary of indications for a rational application of the Ministerial Guidelines on the prevention of occupational risks in the handling of antineoplastic drugs. *Med Lav* 2001; 92: 137-148
6. Crippa M, Balbiani L, Baruffini A, et al: Consensus Document "Update on latex exposure and use of gloves in Italian health care settings". *Med Lav* 2008; 99: 387-399
7. ICOH - International Commission on Occupational Health: International Code of Ethics for Occupational Health Professionals. Italian Edition by Foà V, Iavicoli S, Manno M. ISPEL, 2002 [icohsg@iol.it](mailto:icohsg@iol.it)
8. Saia B, Alessio L, Apostoli P, et al: Organization of health and safety activities in health care centers. *Med Lav* 2000; 91: 61-72