

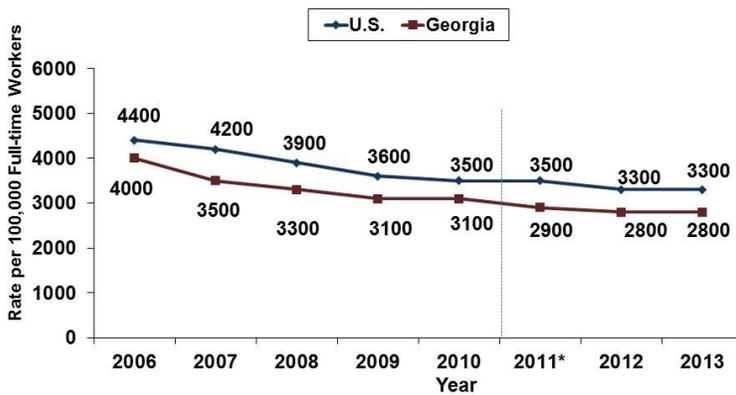
# 2013 Georgia Occupational Health Indicators: A Look at Key Trends

The Council of State and Territorial Epidemiologists (CSTE), in association with the National Institute of Occupational Safety and Health (NIOSH), recommends that states conduct surveillance for a set of 24 occupational health indicators (OHIs) across five main categories: health effects, exposures, hazards, interventions, and socioeconomic impact.

Detailed data and examination of key annual trends among some of the OHIs of special interest in Georgia are reported below. These detailed analyses examine not only data from 2013, but allow for assessment of ongoing health trends in the state. Demographic, as well as basic information for all the recommended indicators are available in Part 1 of this data summary series.

## Non-fatal Work-related Injuries and Illnesses Reported by Employers

Figure 1. Annual incidence rate of total non-fatal work-related injuries and illnesses, Georgia and U.S., 2006-2013

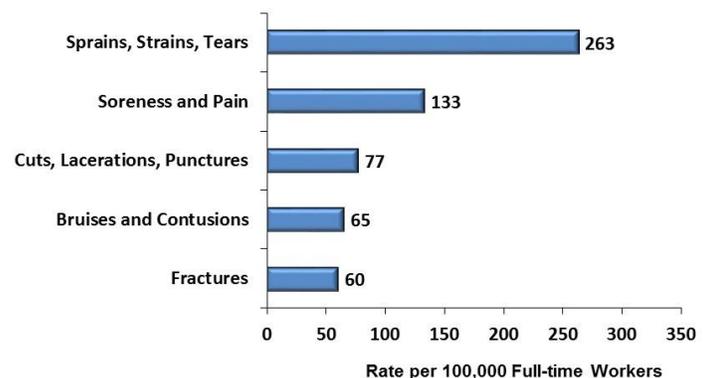


Source: Survey of Occupational Injuries and Illnesses (SOII)  
\*Data for 2011 - 2013 may not be directly comparable to data from previous years due to changes in coding structures for injuries and illnesses

- During 2013, an estimated 77,500 work-related injuries and illnesses occurred among workers in Georgia (approximately 212 work-related injuries/illnesses per day<sup>1</sup>).
- The overall work-related injury/illness rate in 2013 was about 2,800 per 100,000 full-time workers in Georgia (Figure 1).<sup>1</sup>
- The 2013 incidence rate of work-related injuries involving days away from work was 800 per 100,000 full-time workers.<sup>1</sup>
- During 2013, about 716 per 100,000 full-time workers in Georgia suffered from a work-related traumatic injury or disorder.<sup>1</sup>

- Non-fatal work-related injuries were most commonly due to overexertion and bodily reaction (247 per 100,000), contact with objects and equipment (176 per 100,000), and falls on the same level (136 per 100,000).<sup>1</sup>
- Non-fatal work-related injuries most commonly resulted in sprains, strains, and tears (263 per 100,000 full-time workers) (Figure 2).<sup>1</sup>
- During 2013, non-fatal work-related injuries/illnesses resulted in a median of 7 days lost from work.<sup>1</sup>
- Georgia industries with the highest incidence of non-fatal injury/illness per 100,000 full-time workers during 2013 included: agriculture, forestry, fishing and hunting (4,900 per 100,000), and transportation and warehousing (4,900 per 100,000).<sup>1</sup>

Figure 2. Most common non-fatal work-related injuries and illnesses, Georgia, 2013



Source: Survey Occupational Injuries and Illnesses (SOII)

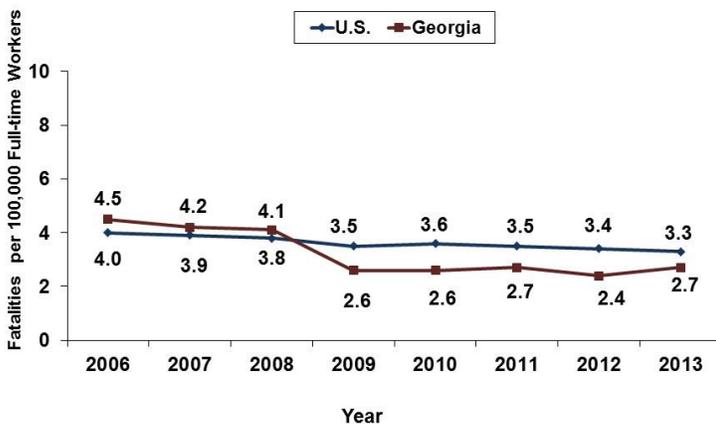


## Work-related Hospitalizations

- Work-related hospitalizations represent some of the most severe and costly work-related injuries and illnesses.<sup>2</sup>
- Georgia had 2,485 work-related hospitalizations in 2013, corresponding to a hospitalization rate of 57.0 per 100,000 employed persons.<sup>3</sup>
- The majority of work-related hospitalizations in Georgia during 2013 were due to injuries and poisonings (46%) and musculoskeletal disorders (36%).<sup>3</sup>

## Fatal Work-related Injuries

Figure 3. Rate of fatal work-related injuries, Georgia and U.S., 2006-2013

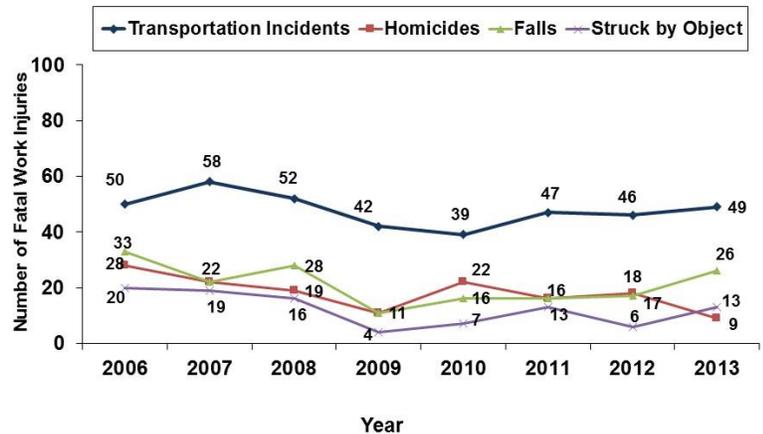


Source: Census of Fatal Occupational Injuries (CFOI)

- A total of 117 fatal work-related injuries were reported by Georgia employers during 2013.<sup>4</sup>
- The rate of fatal work-related injuries in Georgia during 2013 was 2.7 per 100,000 full-time workers, a slight increase from the rate observed in 2012 (Figure 3).<sup>4</sup>
- The rate of fatal work-related injuries in Georgia was slightly greater than the national rate during 2006-2008 and remained lower than the national rate during 2009-2013.<sup>4</sup>

- The highest rates of fatal injuries in Georgia during 2013 occurred among workers in the agriculture, forestry, fishing and hunting industry (14.0 per 100,000), followed by the transportation and utilities (9.2 per 100,000), and construction industries (8.2 per 100,000).<sup>4</sup>
- The most frequent causes of fatal work-related injuries in Georgia were transportation incidents, falls, being struck by an object, and homicide (Figure 4).<sup>4</sup>

Figure 4. Most frequent work-related fatal injury events, Georgia, 2006-2013



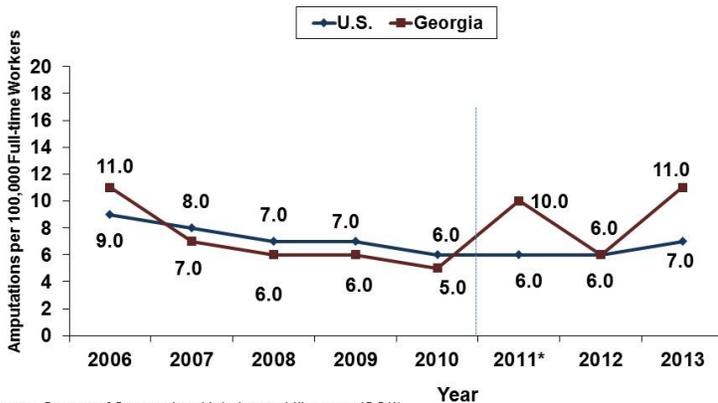
Source: Census of Fatal Occupational Injuries (CFOI)

There were 117 fatal work-related injuries in Georgia in 2013. The majority (42%) of these fatalities were caused by transportation incidents.

## Work-related Amputations with Days Away from Work, Reported by Employers

- Work-related amputations are serious and preventable injuries usually resulting from occupational hazards or improper use of equipment.<sup>2</sup>
- In 2013, there were 310 work-related amputations in Georgia that involved days away from work.<sup>1</sup>

Figure 5. Rate of work-related amputations with days away from work, Georgia and U.S., 2006-2013



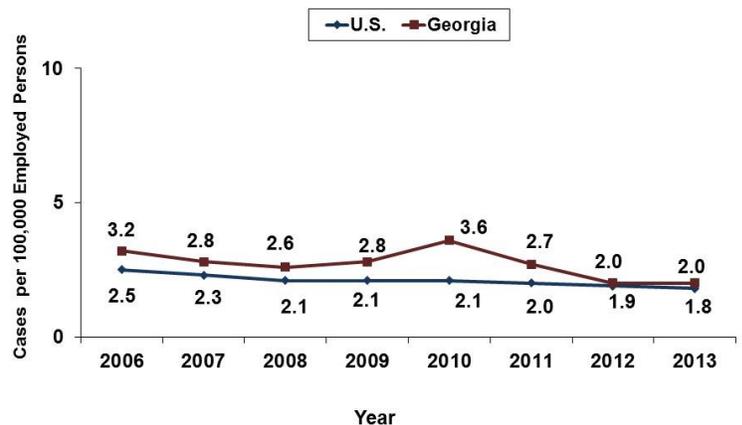
Source: Survey of Occupational Injuries and Illnesses (SOII)  
 \*Data from 2011 – 2013 may not be directly comparable to data from previous years due to changes in coding structures for injuries and illnesses

- The incidence rate of work-related amputations in Georgia in 2013 was 11.0 per 100,000 full-time workers, which was more than the national rate of 7.0 (Figure 5).<sup>1</sup>
- During 2013, work-related amputations resulted in a median of 16 days away from work.<sup>1</sup>
- The majority of amputations were among workers in the wholesale trade industry.<sup>1</sup>
- Most work-related amputations resulted from being caught in an object, equipment, or material<sup>1</sup>; the hand was the most common body part affected.<sup>1</sup>

## Acute Work-related Pesticide Poisonings Reported to Poison Control Centers

- Workers who handle pesticides are at an increased risk for exposure which can result in both short-term and long-term adverse health effects, such as eye and skin irritation, headache, difficulty breathing, asthma, cancer, and Parkinson’s disease.<sup>5</sup>
- A total of 87 work-related pesticide poisonings/exposures were reported to the Georgia Poison Center during 2013 (Table 1).<sup>6</sup>

Figure 6. Annual incidence rate of reported pesticide poisonings, Georgia and U.S., 2006-2013



Source: American Association of Poison Control Centers

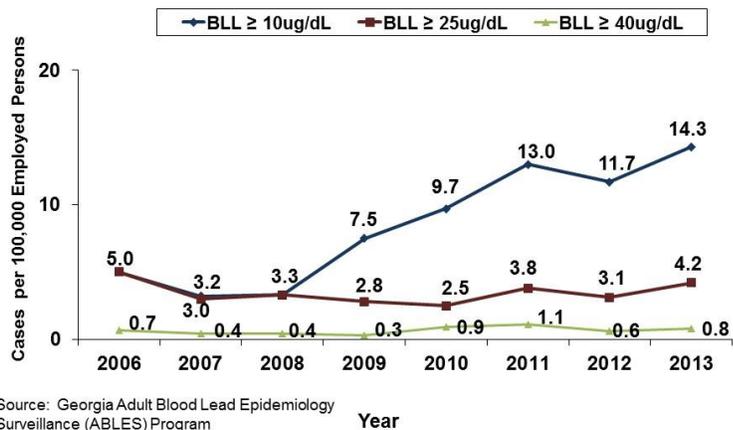
| Year | Reported Cases |
|------|----------------|
| 2006 | 111            |
| 2007 | 92             |
| 2008 | 82             |
| 2009 | 96             |
| 2010 | 151            |
| 2011 | 116            |
| 2012 | 88             |
| 2013 | 87             |

- Georgia’s rate of reported work-related pesticide poisonings was higher than the U.S. rate during 2006-2013 (Figure 6).<sup>6</sup>
- Georgia had the 26<sup>th</sup> highest incidence rate of reported work-related pesticide poisonings in the nation during 2013.<sup>6</sup>
- The annual incidence rate of work-related pesticide poisonings in Georgia declined from 3.2 per 100,000 employed persons in 2006 to 2.0 per 100,000 in 2013 (Figure 6).<sup>6</sup>

## Elevated Blood Lead Levels among Adults

- Lead is a toxic metal found in both the environment and the workplace.<sup>7</sup>
- Approximately 90% of elevated blood lead levels among adults are due to occupational exposures.<sup>2</sup>
- Industries at high risk for lead exposure among workers include: battery manufacturing, secondary smelting, refining of nonferrous metals, and painting and paper hanging.<sup>7</sup>
- The average blood lead level for the general population is less than 1.5 µg/dL.<sup>2</sup>
- Adult blood is considered elevated at 10 µg/dL; however, toxicity may occur at levels as low as 5 µg/dL.<sup>7</sup>
- Exposure to low doses of lead have been associated
- In 2013, 888 cases (aged 16 years and older) of elevated blood lead (levels of 10 µg/dL or greater) were reported to the Georgia Adult Blood Lead Epidemiology Surveillance (ABLES) Program; 625 of these cases were newly-identified or incident cases.<sup>8</sup>
- The incidence rate of reported elevated blood lead (levels of 10 µg/dL or greater) in Georgia increased from 11.7 per 100,000 employed persons in 2012 to 14.3 per 100,000 in 2013 (Figure 7).<sup>8</sup>

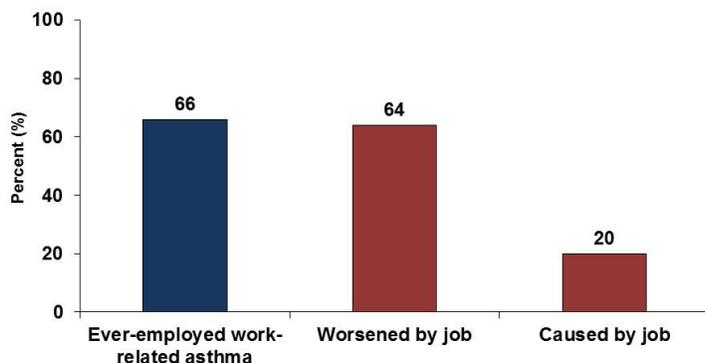
Figure 7. Annual incidence rate of elevated blood lead levels among persons aged 16 years and older, Georgia, 2006-2013



## Asthma among Adults Caused or Made Worse by Work

- Work-related asthma can be either existing asthma that is worsened by factors related to the environment or the workplace (work-exacerbated asthma) or a new onset of asthma attributed to the workplace environment.<sup>2</sup>
- An estimated 36 to 58 percent of adult asthma in the United States is caused or made worse by work-related exposures.<sup>2</sup>
- Work-related asthma commonly occurs among workers in industries such as healthcare, manufacturing, and farming, where there are frequent exposures to chemical fumes, dust, or other irritants.<sup>9</sup>

Figure 8. Proportion of ever-employed adults with current asthma who reported their asthma is work-related, Georgia, 2012-2013



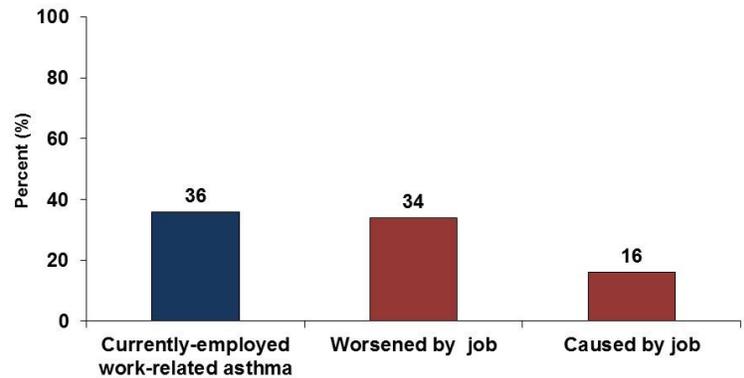
Source: Georgia BRFS Asthma Call-Back Survey

| Overall                  | 66% (57% - 76%) |
|--------------------------|-----------------|
| <b>Sex</b>               |                 |
| Male                     | 79% (65% - 93%) |
| Female                   | 60% (49% - 71%) |
| <b>Race/Ethnicity</b>    |                 |
| White, non-Hispanic      | 73% (63% - 83%) |
| Black, non-Hispanic      | 52% (35% - 70%) |
| Hispanic                 | ~               |
| <b>Age Group (years)</b> |                 |
| 18-34                    | ~               |
| 35-54                    | 70% (58% - 82%) |
| 55+                      | 64% (54% - 73%) |
| <b>Income (annual)</b>   |                 |
| ≤\$24,999                | 64% (48% - 79%) |
| \$25,000-\$49,999        | 68% (49% - 88%) |
| \$50,000+                | 62% (44% - 79%) |

~ Not shown due to sample size less than 50

- About 8 percent of adults in Georgia had current doctor-diagnosed asthma during 2012-2013.<sup>10</sup>
- During 2012-2013, about 66 percent (399,000) of adults in Georgia with current asthma who were ever employed reported that their asthma was caused or made worse by exposures at work (Figure 8).<sup>11</sup>
- Work-related asthma was higher among ever-employed adults who were male, non-Hispanic white, aged 35-54 years or who earned less than \$50,000 annually (Table 2).<sup>11</sup>
- About 34 percent of currently-employed adults say their asthma is made worse by their current job and 16 percent say that their asthma was caused by their current job (Figure 9).<sup>11</sup>

Figure 9. Proportion of currently-employed adults with current asthma who reported their asthma is work-related, Georgia, 2012-2013



Source: Georgia BRFSS Asthma Call-Back Survey

## About Public Health's Role in Occupational Health Surveillance:

The Georgia Department of Public Health has the legal authority to require disease reporting and to collect health data that play a central role in public health surveillance. National statistics on occupational injuries and illnesses have been collected largely outside of the public health infrastructure and rely almost entirely on data reported by employers. However, state health agencies that have access to a wide variety of public health data systems have an important role in the surveillance of occupational diseases, injuries and hazards.<sup>2</sup> With additional data sources, such as the Georgia Hospital Association's hospital discharge records and the Georgia Adult Blood Lead Epidemiology and Surveillance Program (ABLES), the Department of Public Health is able to link surveillance findings with intervention efforts both at statewide and local levels.

To access Part 1 of this data summary series or the full Georgia Occupational Health Indicators Surveillance Report visit:

<http://dph.georgia.gov/georgia-occupational-health-and-safety-surveillance-program>

### References:

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2. Council of State and Territorial Epidemiologists. Occupational Health Indicators: A Guide for Tracking Occupational Health Conditions and Their Determinants. June 2015.
3. Georgia Hospital Association.
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8. Georgia Adult Blood Lead Epidemiology and Surveillance (ABLES) Program.
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11. Georgia BRFSS Asthma Call-Back Survey (ACBS), 2012-2013.

