

Editorial

Occupational medicine and the dermatologist

Occupational medicine is a specialty that deals with the health of workers. The occupational physician must have a broad knowledge base in medicine so that he/she can recognise various illnesses arising from factors in the patient's occupation and manage them effectively. Besides knowledge and skills in clinical medicine, he/she must in addition be familiar with a wide spectrum of occupations and work environments, so that these can be associated with the patient's health problems. Occupational medicine emphasises disease prevention and health promotion in the workplace. Principles in primary prevention (removal of causative agents and risk factors of diseases) and secondary prevention (early detection through health screening and medical examination) are important aspects of the practice of occupational medicine. Another area concerns the assessment of disability and work rehabilitation – these fall within the domain of tertiary prevention. Where are the areas of common interest of the occupational physician and the dermatologist?

Occupational skin diseases are among the most common occupational diseases in most developed countries, contrary to the published statistics notified to these governments. The reason for the discrepancy is due to a gross under-notification, lack of understanding of the link between skin disease and occupation, and of the importance and need to notify such diseases by the doctor. In Hong Kong, the

official statistics typically only amount to tens of cases per year.* A second reason why occupational physicians should be interested in dermatology is that occupational causes of skin diseases are usually preventable, which fits the "prevention oriented" nature of occupational medicine. Why should the dermatologist, in turn, be interested in occupational medicine? An analysis of clinic attendance statistics in many dermatology clinics would show that contact dermatitis is one of the most common dermatological problems. A major cause of contact dermatitis is the exposure to some noxious agents in the course of the patient's work. An understanding on the nature of the patient's occupation aids the dermatologist to arrive at the correct diagnosis and he should therefore take a detailed occupational history. Bernardino Ramazzini, hailed as the father of occupational medicine, stressed the importance of taking an occupational history in any patient. Through careful history taking, a good understanding of the work process can often be obtained from the patient. Patch testing, an important diagnostic armamentarium for dermatologists is often employed to confirm or support a suspected contact dermatitis. However, the widely used standard European Standard Series may fail to recognise an allergen specific to an occupation in the local community. Research on developing a local test series reflecting exposure by local population including the workers is therefore required. Having successfully diagnosed an occupational

skin disease, the dermatologist is in a favourable position to advise the patient (or the employer) how to prevent and control the disease, by avoiding contact with the incriminated substance. Before resorting to this advice, it is often useful to seek the opinion of an occupational physician.

Occupational dermatitis is a notifiable occupational disease in Hong Kong. When a dermatologist notifies a case to the Occupational Health Department of the Labour Department, the occupational physician will investigate the problem and be responsible to make sure the work process or work environment is not detrimental to the worker. In this situation, the two disciplines will have to cooperate, share information about the patient and his/her work environment, and work together for the benefit of the patient (and that of his/her co-workers).

It is the preventable nature of occupational skin diseases that makes it all the more important for the dermatologist to notify the case, so that the occupational physician can follow-up on the work environment. Only through mutual cooperation between the dermatologist and the occupational physician can an occupational skin disease be managed effectively for an individual patient; and by the recognition and removal of the causative agent, the benefit might well include his co-workers.

**In 2002, 29 cases of occupational dermatitis were notified to the Labour Department, Government of Hong Kong SAR. This amounted to only 8.0% of all occupational disease notification.*

TW Wong
黃子惠