

Seminar on Climate Change and Health
4th May 2017

Prevalence and Associated Factors of Moderate to Severe Heat Related Illness Among Solid Waste Management Workers in Negeri Sembilan, Malaysia.

Dr. Zawiah bt Mansor

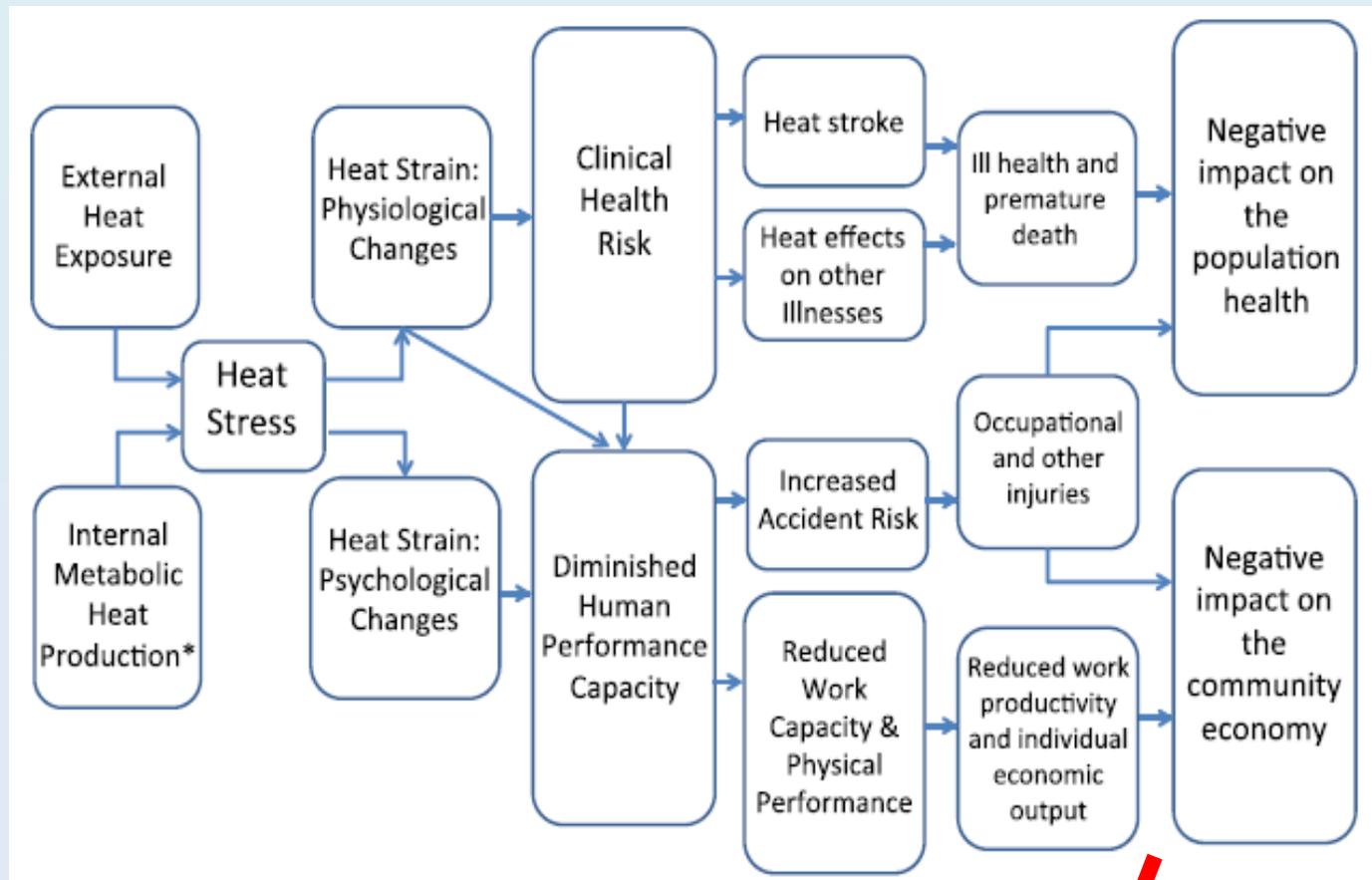
SUPERVISOR

Prof. Dr. Norhassim bin Ismail
Prof Dr. Jamal Hisham Hashim
Dr. Rosnah bt Ismail

INTRODUCTION

- Intergovernmental Panel on Climate Change (IPCC) concern regarding the increment in average global temperature of 1.4°C-3.1°C (estimated average 3.0°C) in year 2100
- Among occupational groups, higher risk of heat illness are :
 - those who are working outdoor
 - Indoor workers in factories or other workplaces with inadequate cooling facilities.

Impact of Occupational Heat related Illness



WHAT THIS STUDY WILL ADD?

- Heat exposure at outdoor workplace.
- Heat related illness among solid waste workers
- Factors associated with heat related illness among workers.
- Prevention action that can protect workers from heat related illness.

General objective

- To determine moderate to severe heat related illness and factors affecting it among solid waste management workers in Negeri Sembilan.

Specific Objective

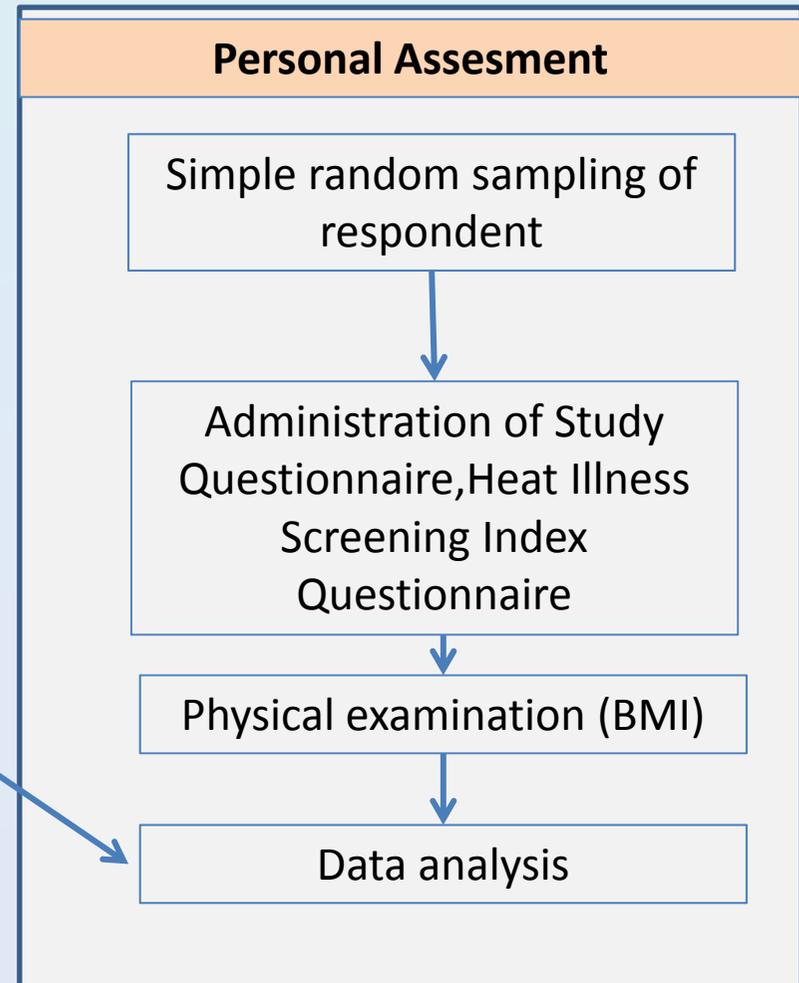
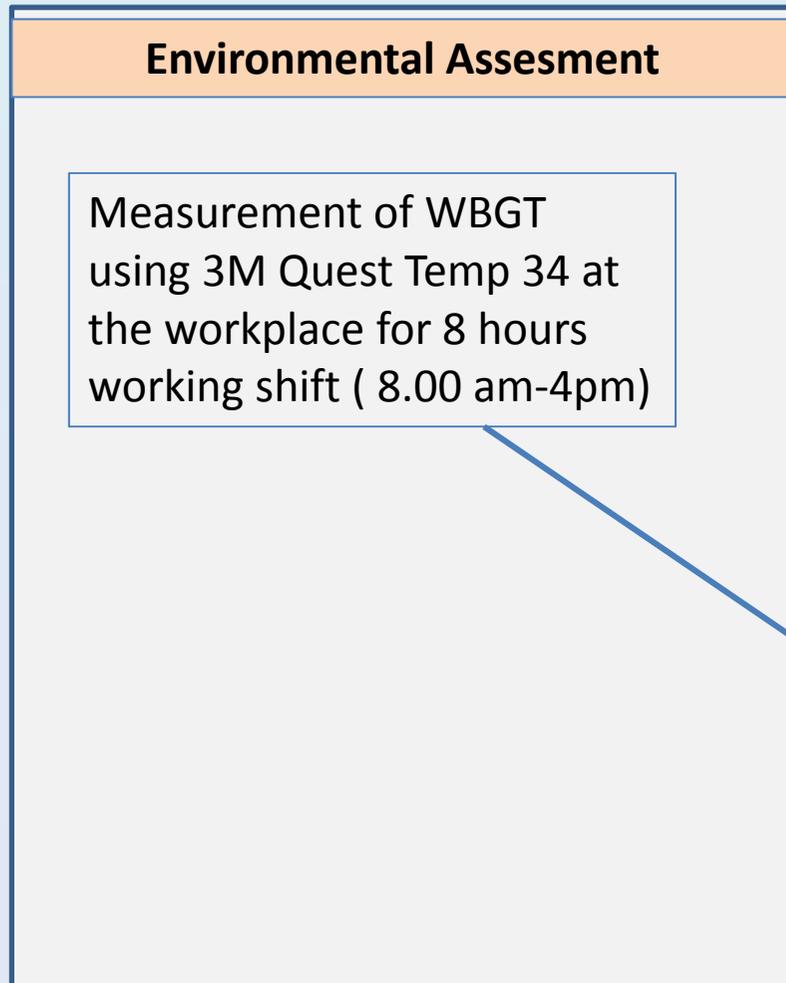
1. To determine the **environmental heat exposure level** in Seremban district, Negeri Sembilan.
2. To determine **prevalence of moderate to severe heat related illness** among solid waste management worker in Seremban, Negeri Sembilan.
3. To determine **factors associated with moderate to severe heat related illness** among solid waste management worker in Seremban, Negeri Sembilan.

METHODOLOGY

- Cross sectional study
- Solid waste workers in Seremban District, Negeri Sembilan
- March – April 2016

**Solid waste workers included : Sweeping roadside, drain cleaning & grass cutting only*

DATA COLLECTION



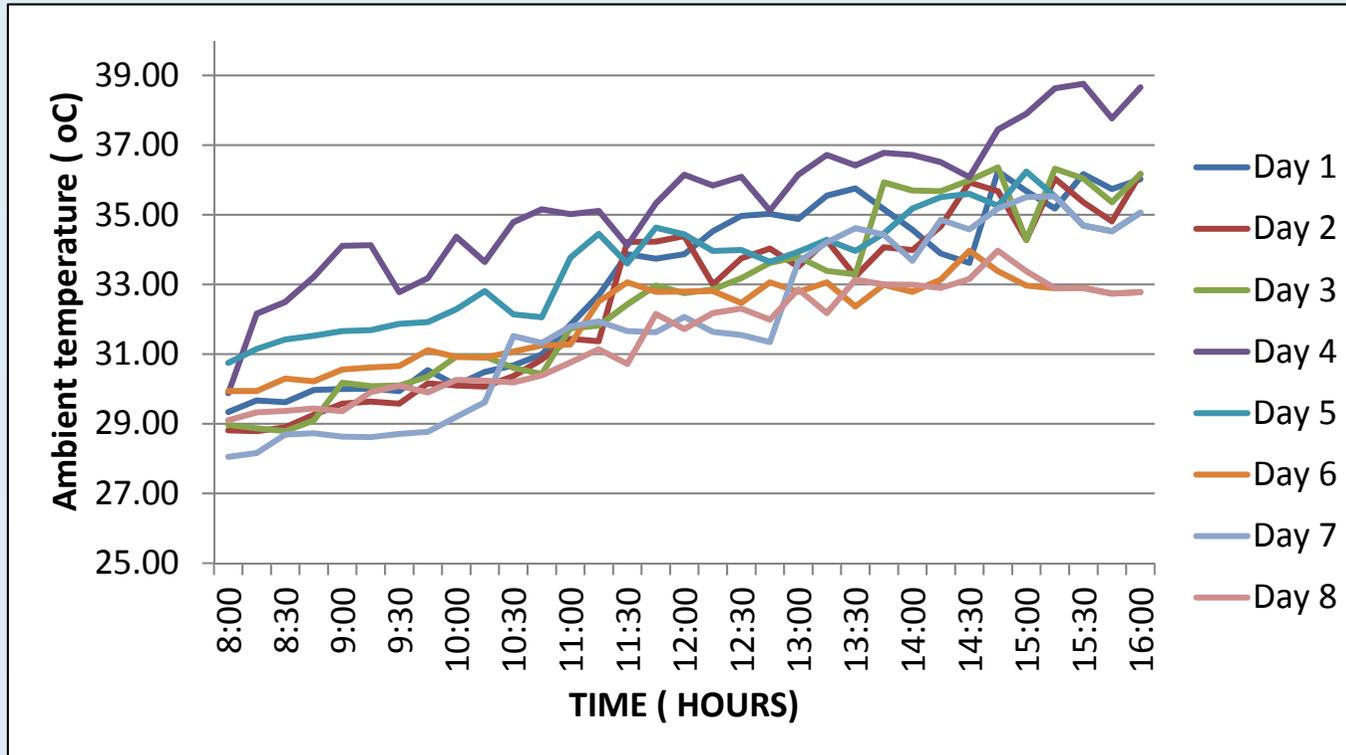
DATA ANALYSIS

Data were analyzed using

1. Rasch model analysis – to develop categorical dependant variable based on person- item variable map
2. Statistical Package for Service Solution (SPSS) version 22.0.

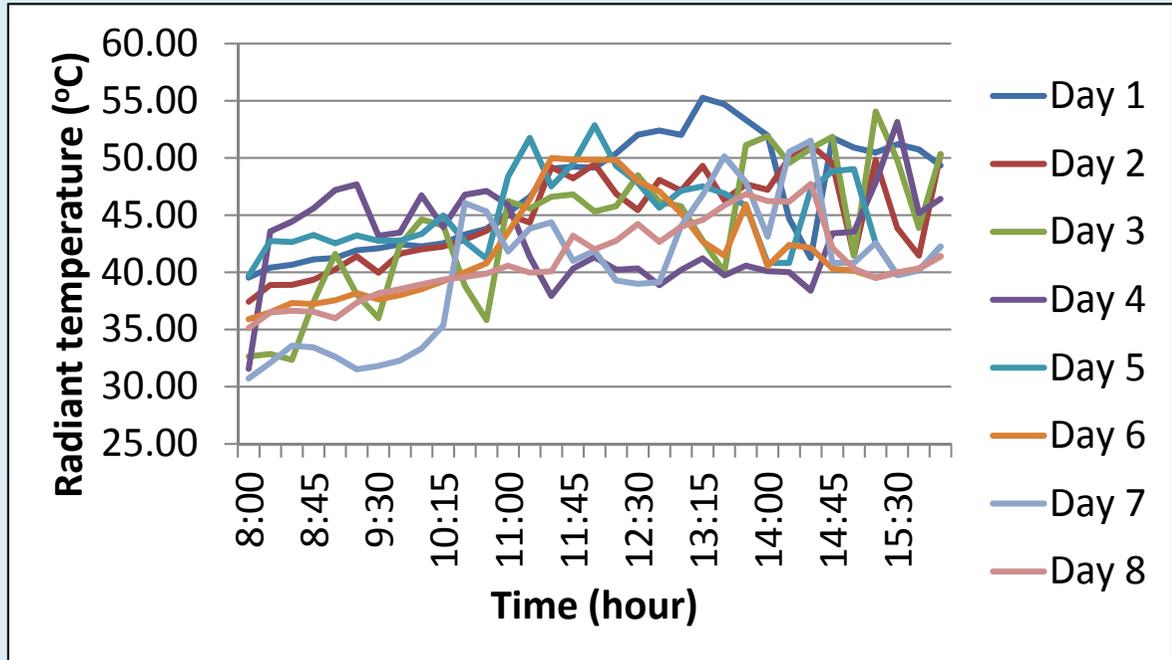
RESULT

HEAT EXPOSURE AT WORKPLACE



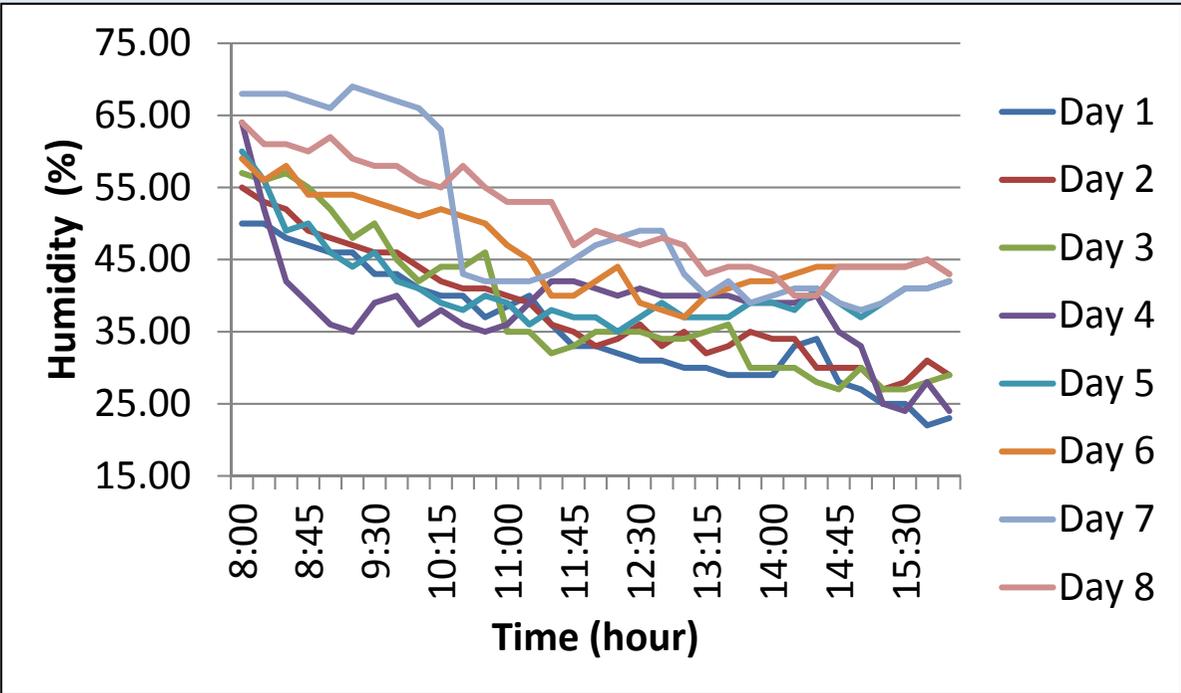
Ambient Temperature

- Mean: 32.84 °C (SD:1.21)
- Max : 38.76 °C (Day 4)
- Min: 28.05 °C (Day 7)



Radiant temperature

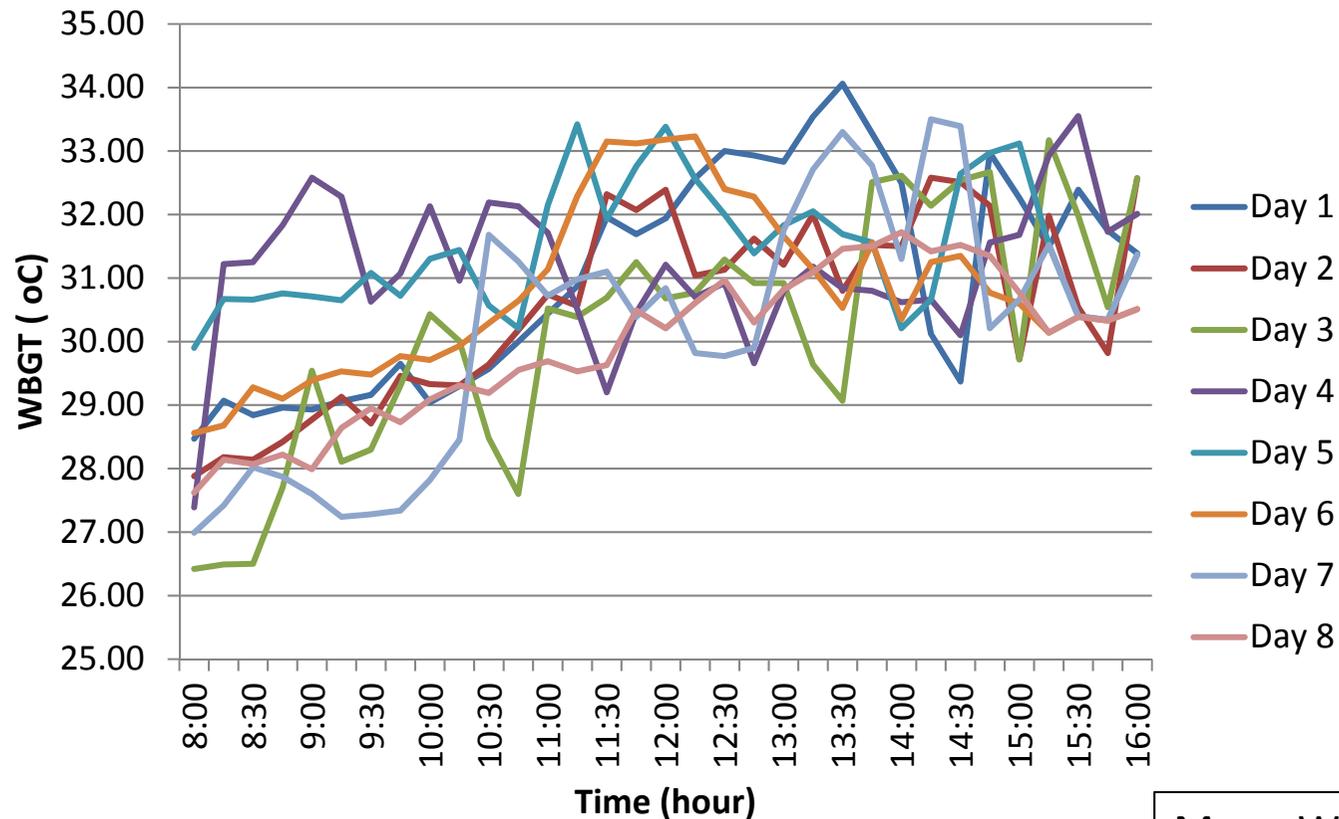
- Mean: 44.64 °C (SD:4.11)
- Max : 55.26 °C (Day 1)
- Min: 30.72 °C (Day 7)



Humidity

- Mean: 40.47% (SD:8.73)
- Max : 68.0 % (Day 7)
- Min: 22.0 °C % (Day 1)

WBGT VALUE AT WORKPLACE

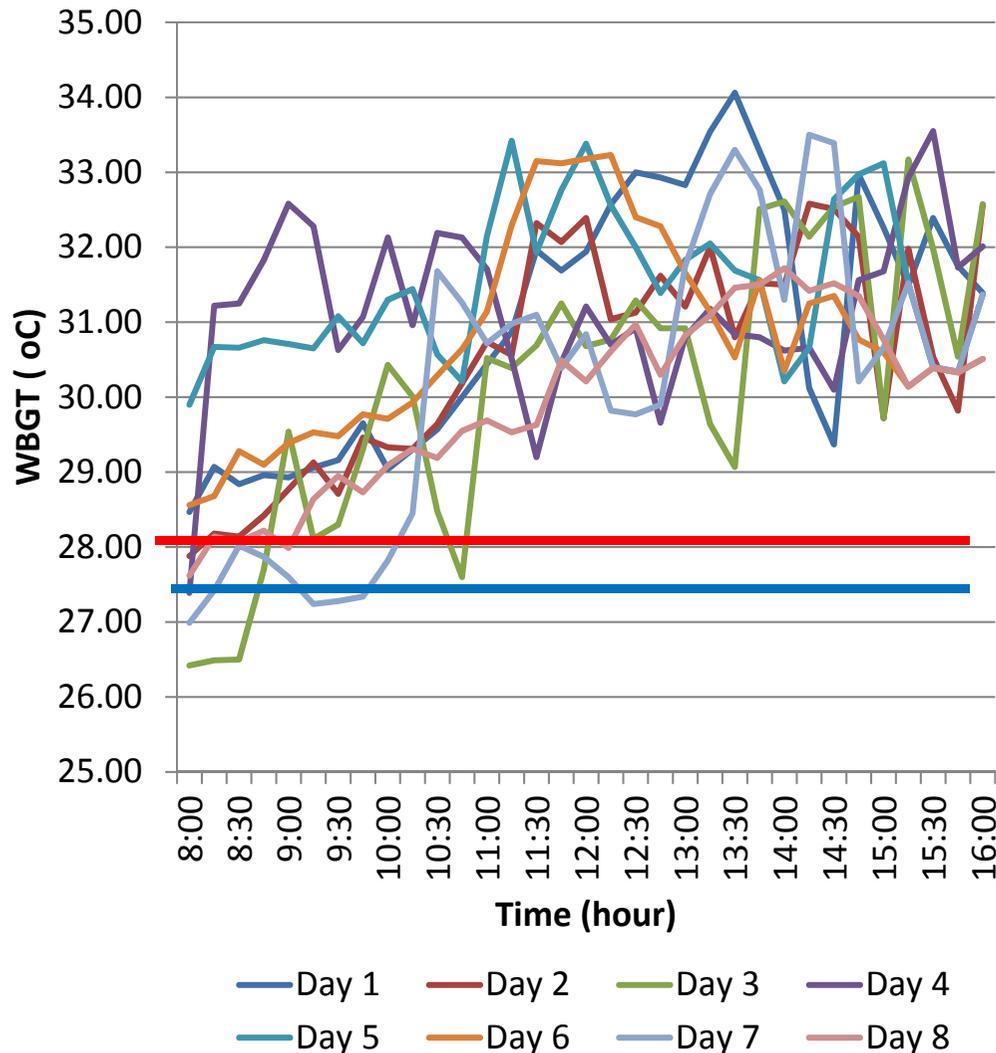


$$\text{WBGT (outdoor)} = 0.7T_w + 0.1T_a + 0.2T_g$$

Mean WBGT

- Mean: 30.5°C (SD:0.5)
- Max : 34.06 °C (Day 1)
- Min: 26.42 °C (Day 3) ¹²

WBGT VALUE AND THRESHOLD BY ACGIH 2006



TLV [®] (WBGT values in °C)			
Allocation of work in a cycle of work and recovery	Light	Moderate	Heavy
75 to 100%	31.0	28.0	-
50 to 75%	31.0	29.0	27.5
25 to 50%	32.0	30.0	29.0
0 to 25%	32.5	31.5	30.5

- Moderate : sweeping roadside & drain cleaning
- Heavy : Grass cutting

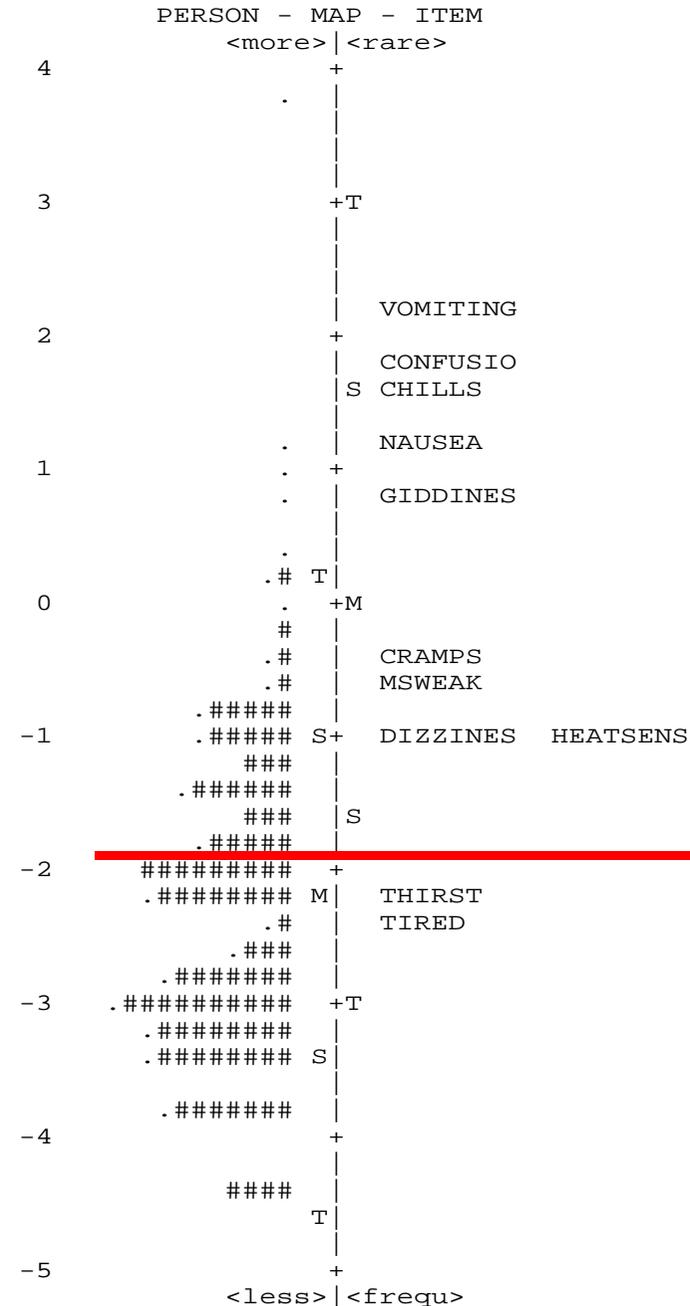
Conclusion:
 Respondent exposed to above TLV since early hour of working shift → high risk of heat illness.¹³

Rasch Analysis

Person-item variable map

HEAT ILLNESS CATEGORY	Logit score
Mild	≤ 2.18
Moderate to severe	> 2.18

- *Mild : Thirst and /or tired only*
- *Moderate to severe : Thirst and/or tired **plus** other symptoms*



Profile	Mean (SD)	n	%
Heat illness category			
Mild		179	55.9
Moderate to severe		141	44.1
Age group (years)	43 (9.49)		
<29		29	9.1
30-39		78	24.4
40-49		121	37.8
50+		92	28.8
Gender			
Male		148	46.3
Female		172	53.8
Race			
Malay		95	29.7
Chinese		6	1.9
Indian		216	67.5
Others		3	.9
Education level			
No formal education		20	6.3
Primary education		120	37.5
Secondary education		180	56.3
Type of work			
Sweeping roadside		232	72.5
Grass cutting		46	14.4
Drain cleaning		42	13.1
Duration of service (months)	51 (42)		

Prevalence

Characteristic	Mean (SD)	n	%
WBGT (°C)	30.5 (0.53)		
Metabolic rate			
Moderate		274	85.6
Heavy		46	14.4
History of heat illness			
Yes		152	47.5
No		168	52.5
Medical illness			
Present		98	30.6
Absent		222	69.4
Medication intake			
Yes		105	32.8
No		215	67.2
Alcohol intake			
Yes		6	1.9
No		314	98.1
Total volume of water intake during working shift. (mL)	2150.50 (953.09)		
Time of water intake			
When feeling thirsty		286	89.4
Fixed timing		34	10.6
Type of drink			
Plain water		258	80.6
Sweetened drink		13	4.1
Tea/coffee		49	15.3
Hydration status			
Adequate hydration		181	56.6
Dehydrated		139	43.4
Body mass index			
Underweight		20	6.3
Normal		62	19.4
Overweight		106	33.1
Obese		132	41.3

Variable	Heat illness category		Type of analysis	P value
	Light(%)	Moderate to severe (%)		
Age group				
<29	20(69.0%)	9(31.0%)	$\chi^2 = 11.17$	0.011
30-39	44(56.4%)	34(43.6%)		
40-49	76(62.8%)	45 (37.2%)		
50+	39(42.4%)	53(57.6%)		
Gender				
Male	7 (50.0%)	74 (50.0%)	$\chi^2 = 3.94$	0.047
Female	105 (61.0%)	67 (39.0%)		
History of heat illness				
Yes	69 (45.4%)	83 (54.6%)	$\chi^2 = 13.06$	0.0001
No	110(65.5%)	58 (34.5%)		
Time of water intake				
When feeling thirsty	148 (51.7%)	138 (48.3%)	$\chi^2 = 19.17$	0.0001
Fixed timing	31(91.2%)	3(8.8%)		
Type of drink				
Plain water	163(63.2%)	95 (36.8%)	$\chi^2 = 30.52$	0.0001
Sweetened drinks	1(7.7%)	12(92.3%)		
Tea/ coffee	15(30.6%)	34(69.4%)		
Hydration status				
Adequate hydration	127(70.2%)	54(29.8%)	$\chi^2 = 34.23$	0.0001
Dehydration	52(37.4%)	87(62.6%)		

Variable	Simple Logistic Regression			Multiple Logistic Regression			
	Crude OR	95%CI	p value	Adj. OR	95%CI	X2 stat (df) ^a	P value
WBGT	1.19	(0.78;1.80)	0.421	1.76	(1.04;2.97)	4.61	0.034
Age group			0.012			13.85 (3) ^b	0.003
30-39	1.72	(0.70;4.25) ^b	0.242	3.00	(0.96;9.40)	4.21(1) ^b	0.059
40-49	1.32	(0.55;3.14) ^b	0.536	2.69	(0.88;8.11)	3.06(1) ^b	0.080
50+	3.02	(1.24;7.35) ^b	0.015	→ 6.77	(2.15;21.29)	10.68 (1) ^b	0.001
<29	1.00			1.00			
Gender							
Male	1.57	(1.01;2.45)	0.047	-	-	-	-
Female	1.00						
History of heat illness							
Yes	2.28	(1.45;3.58)	0.001	→ 2.25	(1.31;3.87)	8.76(1)	0.003
No	1.00			1.00			
Time of water intake							
When feeling thirsty	9.64	(2.88;32.23)	0.001	→ 14.76	(3.89;55.94)	23.09(1)	<0.001
Fixed timing	1.00			1.00			
Type of drink			<0.001			17.30(2) ^b	<0.001
Sweetened drink	20.59	(2.64;160.84) ^b	0.004	→ 27.23	(2.80;264.49)	8.11(1) ^b	0.004
Tea/Coffee	3.89	(2.01;7.51) ^b	<0.001	3.77	(1.76;8.09)	11.65(1) ^b	0.001
Plain water	1.00			1.00			
Hydration status							
Dehydrated	3.94	(2.46;6.27)	<0.001	→ 3.51	(2.04;6.07)	21.26(1)	<0.001
Adequate hydration	1.00			1.00			

a : Likelihood ratio

b : Wald test

Adj OR : Adjusted odd ratio

Backward LR method used for multiple logistic regression

(r²=0.38; the model is reasonably fits well; model assumptions are met; no multicollinearity problem)

DISCUSSION

- Solid waste workers in Negeri Sembilan was exposed to heat above TLV and at high risk of developing heat related illness.
- Prevalence of heat related illness among solid waste workers was 44%. It was higher than other studies among outdoor workers in other studies (Mirabelli et al 2010, Tawatsupa et al 2012, Xiang et al 2016)

DISCUSSION

- WBGT, heat illness history, hydration status, type of drink and time of fluid intake associated with occurrence of heat illness was similar with **previous study** (Bethel et al (2014), Deghan et. al (2012), Lundgren et al(2013), Montazer et al (2013))
- Soft drinks, sweetened drink and caffeinated drinks will result in hyperosmolarity which will increase metabolic rate and additional body heat and increase the risk of having heat illness (Tonelli et al, 2011) .

DISCUSSION

- Paced fluid replacement need to be emphasized in hydration practice at workplace rather than responding to thirst sensation (Brake, D. J., & Bates, G. P, 2003).
- American Conference of Governmental Industrial Hygienists (ACGIH) recommend replacing fluids frequently when exposed to heat stress, such as one cup (250 ml) every 20 minutes when working in warm environments.

CONCLUSION

- This study adds to the knowledge of heat exposure among outdoor workers in Malaysia.
- Predicting factors such as age group and heat illness history can be used to identify high risk individual of having heat illness at workplace.
- Fluid intake at workplace (type of fluid and time of intake) and monitoring of hydration status based on urine colour need to be emphasized in education and prevention of heat related illness among workers who expose to heat stress environment.

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Thank you

Zawiah Mansor

zara0784@gmail.com




The Art of Hydration : Heat Illness Severity And Hydration Practices among Outdoor Workers in Negeri Sembilan, Malaysia

Zawiah Mansor¹, Noor Hassim Ismail², Jamal Hisham Hashim³, Rosnah Ismail⁴
^{1,2}Department of Community Health – Faculty of Medicine, Universiti Kebangsaan Malaysia
³United Nation University – International Institute of Global Health

Introduction

Hydration practices are important factors in protecting workers from heat illness. However, the component of good hydration practice often neglected among outdoor workers thus exposed them to the danger of heat stroke. This study will explore into components hydration practices that associated with heat illness in the effort to reduce the vulnerability and enhancing the resilience to the impact of climate change.

Material and methods

A cross sectional study was conducted among outdoor workers in Negeri Sembilan, Malaysia from March to April 2016. Simple random sampling was done to sample the outdoor workers who involved in cleaning and solid waste disposal working sector.

Respondent was interviewed using a translated and validated Malay version of Heat Illness Symptom Index (used to score severity of heat illness) with socio-demographic profile, working activity, hydration practices questionnaires. Wet bulb globe temperature was measured using 3M QuestTempTM34 at the working area.

Bivariate and multivariate linear regression analyses was conducted to prove the relationship and to develop a predictive model of heat illness among outdoor workers.

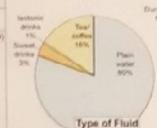
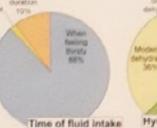
Objective

- To investigate the hydration practices of outdoor workers.
- To determine the relationship of hydration practices with severity of occupational heat illness among outdoor workers in Negeri Sembilan, Malaysia

Results

Total of 328 questionnaires completed and analysed. The mean ages of respondents were 43 years old. Mean Wet Bulb Globe Temperature at working site was 30.5°C. Mean score of heat illness symptom severity index was 20.48. After controlling other factors, heat illness severity score was significantly associated with age, fluid intake prior to work, type of drink and hydration by urine colour.

Characteristic	n	%	Mean (SD)
Age group (years)			43 (9.49)
Gender			
Male	153	46.6	
Female	175	53.4	
Race			
Malay	102	31.1	
Chinese	8	1.8	
Indian	218	66.5	
Others	2	0.6	
Education			
No formal	22	6.7	
Primary	123	37.5	
School			
Secondary	183	55.8	
School			
Heat illness history			
Yes	156	47.5	
No	173	52.7	
Duration of working (months)			52 (42.54)


Variable	General Linear Regression		
	Adj. b	95%CI	P value
Age (year)	0.091	(0.021, 0.160)	0.011
Fluid intake prior to work (mL)	-0.004	(-0.007, -0.002)	0.002
Fluid intake time (hour)	4.016	(1.864, 6.169)	0.0001
Type of Fluid (sweet drinks)	4.413	(0.732, 8.092)	0.019
Severe Dehydration by urine colour	14.579	(10.386, 18.769)	0.0001

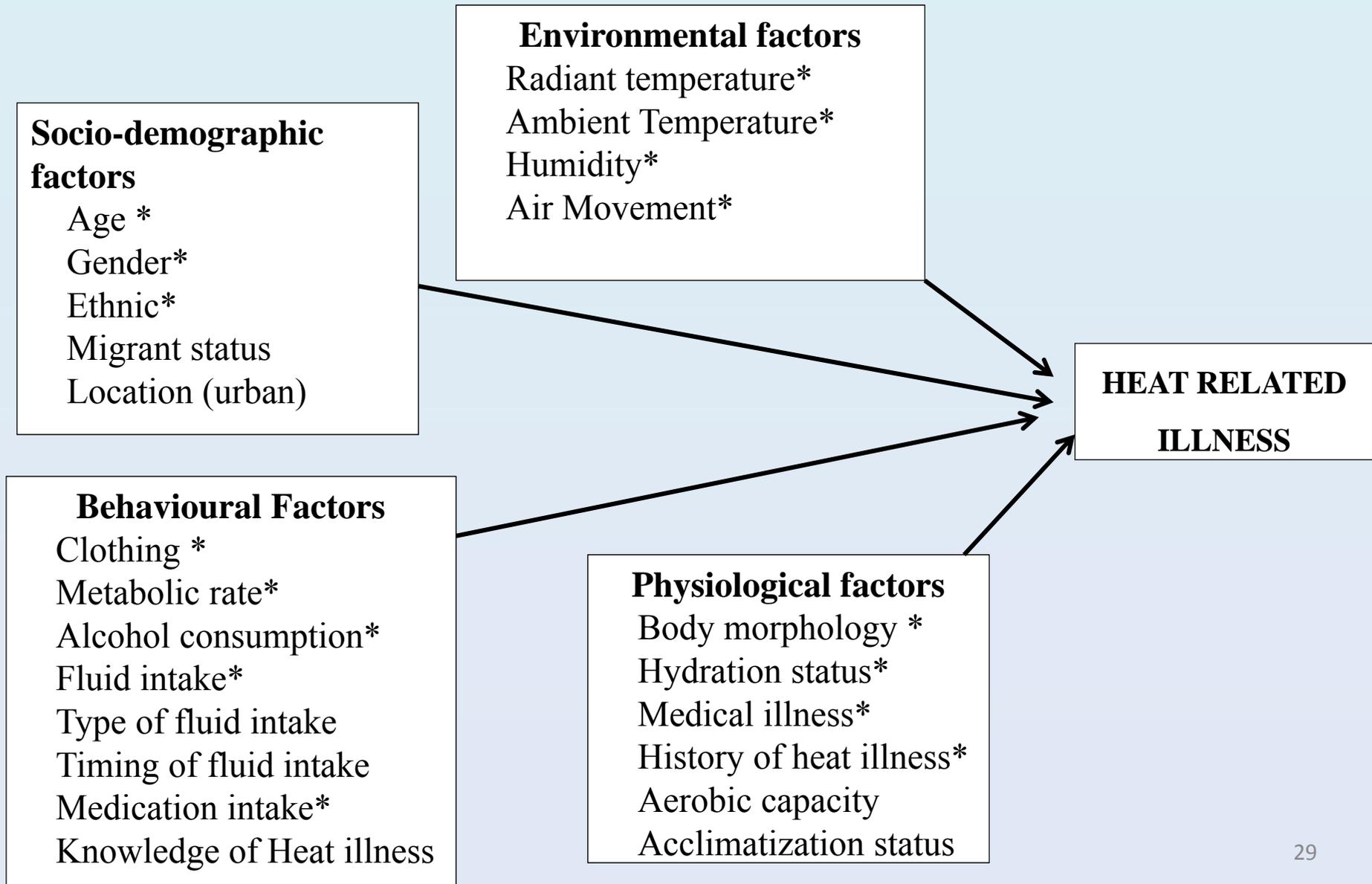
Conclusions

Important component of hydration practice which includes hydration prior to the working hours, type of fluid and the timing of fluid intake need to emphasized among outdoor workers. Monitoring of hydration status based on urine colour was also practical among the outdoor workers and can be self-monitored in which it was correlated with the severity of heat illness at the workplace. Heat illness symptoms index is also proven as a simple and useful tool to monitor occupational heat illness for further planning and prevention of heat illness at the workplace.

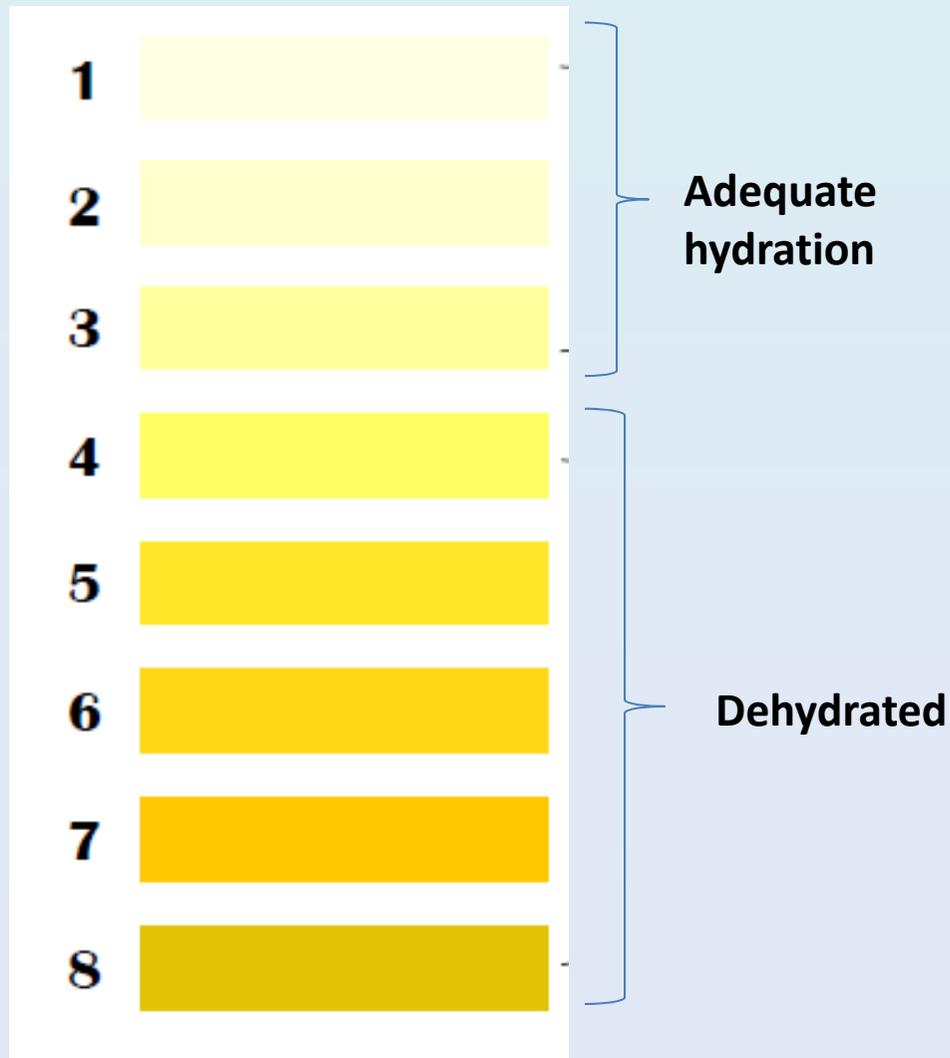
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CONCEPTUAL FRAMEWORK



8 scale Urine Colour Chart



- Developed by Armstrong et al. in 1994 to assess hydration status
- Had significant linear relationship with urine osmolality and urine specific gravity
- Specificity (97%) and sensitivity (81%)

Symptom or Sensation	None	Mild, did not interfere with work	Moderate, slowed my work down	Significant enough to take a break	Severe enough to stop work
Tired	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Cramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nausea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dizziness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thirst	<input type="checkbox"/>	<input type="checkbox"/>	☼	<input type="checkbox"/>	<input type="checkbox"/>
Vomiting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Confusion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Muscle Weakness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heat Sensation on Head or Neck	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lightheaded	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

RESEARCH JUSTIFICATION

Heat exposure level in outdoor setting in Malaysia

Solid waste management workers

Predictors of heat related illness

Heat Illness Screening tools

Heat stress prevention in Malaysia and globally