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Department for Occupational Medicine, Hazardous Substances and Health Sciences (AGG), Hamburg, Germany

Introduction: To prevent nosocomial transmission of SARS-CoV-2-Virus, an increased use of personal protective equipment (PPE) by healthcare workers (HCW) has become necessary. The aim of this study is to investigate the prevalence of adverse skin reactions in care staff associated with wearing of PPE in Germany during the COVID-19 pandemic.

Material and Methods: The study follows a mixed methods approach. In November 2020, a moderated focus group with healthcare experts was performed and qualitatively analyzed. In a second step, 15,959 members of the German Nurses Association (DBfK) were invited to participate in an online survey for care staff over the period from May to June 2021.

Results: 1,691 caregivers took part in the survey, included in the analysis were those who were actively working (n = 1,559). The sample consisted predominantly of women. Mean age was 45 years (\pm 12), and mainly nurses (84%) took part. More than half worked full-time (56%), mainly in hospitals (68%). Pre-existing skin diseases were reported by 17%. The prevalence of new adverse skin reactions was 60%. Of those, 94% involved the facial area. Wearing times of \geq 4 hours per shift were stated by 89% of respondents for FFP masks and 64% for surgical facemasks. Participants with wearing times \geq 4 hours of FFP masks were significantly more likely to develop facial skin reactions than participants with less wearing time (OR 1.6, CI 1.1; 2.1).

Conclusion: The prevalence of new skin reactions from PPE, especially from FFP masks, highlight the specific need for preventive measures for HCW during pandemic periods.

290

Physician Reported Work-Related COVID-19 cases in Norway 2020 — 2021

<u>Yogindra Samant</u> ¹, Morten Støver ¹, Ingrid Stette-Haarberg ¹, Signe Lohmann-Lafrenz ², Tonje Strømholm ¹

¹ Norwegian Labour Inspection Authority, Working Environment and Regulations, Trondheim, Norway, ² St.Olavs Hospital, Occupational Medicine, Trondheim, Norway

Aims: This study provides a profile of work-related Covid-19 cases reported by physicians to the Norwegian Labour Inspection Authority (NLIA)

Methods: Reported cases of work-related SARS-COV-2 viral infection by a physician to the NLIAs Registry for Work-Related Diseases (RAS) between February 2020 and June 2021 were included. Descriptive statistics for age, gender, industrial sector, and occupation were calculated. Further, the incidence rates (cases per 100 000 workers) were computed for age, gender and occupation.

Results: Physicians reported a total of 182 work-related Covid-19 cases during the study period. Sixty-four percent of the cases were females (n = 117) and 36 % (n = 65) were males. Eighty-six per cent of the cases were reported from the healthcare sector (n = 157). The remaining cases (n = 25) were distributed among other sectors. Doctors and nurses yielded higher incidence rates compared to other occupations in health care as well as non-healthcare occupations. Thirty physicians accounted for the 182 cases reported during the study period.

Conclusions: This study indicates that women in the age group 25-39 and employed in the healthcare sector had the highest reported incidence and numbers of work-related COVID-19 cases. Physician underreporting of work-related Covid-19 cases seems to be

prevalent for all occupations. The underreporting of cases is possibly greater for at-risk non-healthcare occupations such as waiters, bartenders, food couriers and taxi drivers compared to occupations in the healthcare sector.

291

Workplace Exposure to SARS-CoV-2 among Key Workers and Related Social Inequalities: Evidence from France during the First Lockdown

Narges Ghoroubi¹, Myriam Khlat², Emilie Counil²

¹ French Institute for Demographic Studies (INED) - Paris Saclay University, Doctoral School of Public Health (EDSP), Mortality, Health and Epidemiology research unit (UR05), Aubervilliers, France, ² French Institute for Demographic Studies (INED), Mortality, Health and Epidemiology research unit (UR05), Aubervilliers, France

Introduction: This study aims to assess potential occupational exposure to SARS-CoV-2 among key workers in France during the first lockdown and describe their socio-demographic profile to identify social inequalities in the occupation of these jobs. Material and Methods: Based on the 2019 edition of the population-based Working Conditions survey, we quantified potential work-related exposure to SARS-CoV-2 as: "exposure to infectious agents," "face-to-face contact with the public," and "working with colleagues". We then used the French list of essential jobs to identify the main groups of key worker occupations. Log-binomial regression models were performed to identify associated occupational and socio-demographic factors.

Results: Compared to other workers, key workers in all groups had greater exposure to infectious agents and more physical contact with others, however, working with colleagues differed among key worker groups. In general, women, employees and manual workers, people working on temporary contracts, those with low levels of education and income, and non-European immigrants were more likely to be key workers. Being female, born outside of metropolitan France, and working as a non-executives professional interacted in increasing the probability of occupying a key job.

Conclusions: Key workers are more likely to have low social status and precarious employment and to be exposed to SARS-CoV-2 through their work. This study contributes to a growing body of research providing evidence of accumulated disadvantages among key workers with regard to social background, geographical origin and exposure to SARS-CoV-2.

292

Interview With A Sample Of Occupational Health Physicians About Their Role During The Covid-19 Pandemic

<u>Maria Rosaria Marchetti,</u> Sara Calicchia, Angela Bagnato, Bruno Papaleo

INAIL, DiMEILA, ROME, Italy

Introduction. The COVID-19 pandemic legislation integrated the legislation already present in the workplace. The presence of the Occupational Health Physician (OHP) was essential in the company. The OHP, according to the D. Lgs. No 81/2008, is a physician with professional qualifications and requirements, who collaborates in the risk assessment and carries out health surveillance, to protect the health and safety of workers. During the pandemic his work has