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<sup>1</sup> Federal State Budgetary Scientific Institution "Izmerov Research Institute of Occupational Health», Department of Otorhinolaryngology, Moscow, Russian Federation, <sup>2</sup> Federal State Budgetary Scientific Institution "Izmerov Research Institute of Occupational Health», Therapeutic Department, Moscow, Russian Federation, <sup>3</sup> Federal State Budgetary Scientific Institution "Izmerov Research Institute of Occupational Health», Neurological Department, Moscow, Russian Federation

**Introduction:** The COVID-19 pandemic has affected the levels and structure of morbidity worldwide. The indicators of occupational morbidity in Russia are no exception.

**Material and Methods:** In order to identify the features of the impact of the pandemic on occupational pathology in the country, an analysis of the statistical data of the annual State reports "On the state of sanitary and epidemiological well-being of the population" has been carried out.

**Results and Conclusions:** In 2020 the level of occupational morbidity in the Russia was 0.78 per 10 thousand employees, which is significantly less than in the previous years. In 2011-2019 this indicator was 1.03-1.92. This is due to the fact that the COVID-19 pandemic required the involvement of reserves and the reorientation of medical services, including professional pathology centers, to combat mass cases of infection. Under these conditions, the expert work of the centers of professional pathology was suspended. Numerous cases of coronavirus infection among medical workers, including those that ended in fatal outcomes, required an examination of the connection of the facts of infection with working conditions. Occupational diseases from the influence of a biological factor for the first time took the second place in the structure of occupational pathology, reaching 20.2% and were mainly represented by cases of COVID-19 (92.6%). In 2018-2019 the share of occupational diseases from the impact of a biological factor varied from 1.73 to 1.99%. The analysis of the occupational incidence of COVID-19 in various regions of the country showed that the features of the industrial

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### **Study to Assess the Impacts of Heat Stress on Productivity Losses in India**

Vidhya Venugopal<sup>1</sup>, Wenjia Cai<sup>2</sup>, Rekha Shanmugam<sup>1</sup>, Mengzhen Zhao<sup>2</sup>, Latha PK<sup>1</sup>

<sup>1</sup> Sri Ramachandra Institute of Higher Education and Research, Department of Environmental Health Engineering, Chennai, India, <sup>2</sup> Tsinghua University, Department of Earth System Science, Beijing, China

**Introduction:** Heat-induced Productivity Loss (PL) is a significant economic cost, an undeniable consequence of Climate Change (CC). Sparse data on the unequal and unjust adverse impact of this climate-driven economic loss across nations, regions, and vulnerable populations demands evidence-based case studies better to understand climate impacts at the regional and local levels.

**Aim/Materials and Methods:** We aimed to quantify the risk of heat-induced health, PL, and wage loss (WL) to identify vulnerable occupations among the 17-sectors in 20 districts across South India. We collected data on heat stress, Heat-Related Illnesses (HRIs), wage loss, and PL from 2900 workers between 2013-2019 using a validated questionnaire. Furthermore, we estimated national economic loss from heat-related PL for three sectors for 2015 and 2017,

including direct cost and the corresponding indirect cost due to sectoral interdependence using an input-output (IO) model.

**Results:** Workers reported being impacted by 1) HRIs (84%), 2) PL (16%), and 3) WL (8%) and HRIs and PL were 1.9 times significantly higher during summer (95% CI:1.5-2.3) and among workers with heavy workloads (95% CI:1.6-2.1). Our estimates of the direct cost due to PL for the nation were an average of 1763 & 360 million \$/annum for outdoor and indoor sectors, respectively. The indirect cost amounts to about 280 for outdoor & 1380 million \$/annum for indoor sectors.

**Conclusion:** The humungous climate cost calls for urgent adaptation & prevention strategies and CC mitigation actions to improve regional economics and protect individual losses for a few million workers toiling in heat.

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### **Post COVID Syndrome in patients with COVID -19 : A Cross-Sectional study**

Vandana Shinde<sup>1</sup>, Mickey Master<sup>1</sup>, R. Rajesh<sup>2</sup>

<sup>1</sup> Reliance Industries Ltd, Public Health, Navi Mumbai, India,

<sup>2</sup> Reliance Industries Ltd, Group Medical Advisor, Navi Mumbai, India

**Background:** Long COVID is defined as the persistence of symptoms beyond 1 to 3 months after SARS-CoV-2 infection. To better understand the long-term course and etiology of symptoms we analysed data of COVID-19 patients post discharge prospectively.

**Methods:** A home care cell monitored COVID-19 patients post discharge. A paramedical staff interviewed the patient using the pretested questionnaire and refer the patient to doctor if required. The doctor spoke with these select cases and offered them treatment, counselling, referral to consultant/ hospital as per the need.

**Results:** We followed up with 4354 (2724 employees and 1630 dependents) patients for 3 months. 592 (13%) patients were hospitalized for COVID and others were under home isolation. 4108 (94%) patients did not have any symptoms post COVID and 239 (6%) were known to have either one or more post COVID symptoms. For 153 (64%) patients symptoms lasted for more than a month post discharge and 86 (36%) patients were symptomatic for more than 2 months post discharge. The most common symptoms identified were fatigue and weakness (69%), dry cough (39%) body ache (31%), fever (23%) shortness of breath (15%) etc.

**Interpretation:** Long COVID symptoms can persist for 1- 3 months after recovery, this may lead to long absenteeism and may reduce productivity and quality of life significantly. Post COVID syndrome can also have an adverse effect on the mental health of an individual. Post COVID complications can be severe leading to hospitalization and disability. The continued assessment of patients with PCS is an important and effective step to reduce complications.

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### **Occupational health and safety outcomes among municipal solid waste collectors in Grenada**

Martin Forde

St. George's University, Department of Public Health & Preventive Medicine, PO Box 7, St. George, Grenada (west Indies)