

Reason for sickness absence can predict employee deaths

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Employees who take long spells of sick leave more than once in three years are at a higher risk of death than their colleagues who take no such absence, particularly if their absence is due to circulatory or psychiatric problems or for surgery, concludes a study on bmj.com today.

Previous research shows that medically certified sickness absences may well capture the full range of illnesses employees experience and that they could be a good global measure of health differentials between employees. It has been suggested that the specific reasons for absence such as psychiatric problems or heart disease may improve the prediction of premature death.

Jenny Head from University College London and colleagues investigated whether the reason for sickness absence improved the prediction of death compared with overall sickness absence irrespective of diagnosis.

They obtained sickness absence records for 6,478 British civil servants between 1985 and 1988 and analysed associations with death until 2004.

They found that deaths increased as the medically certified absence rates (spells of more than 7 days) increased. The almost 30% of men and women who had one or more medically certified absence in three years had a 66% increased risk of premature death than those with no such absence.

The authors report that by including the diagnosis for sickness absence



they significantly improved the prediction of the risk of death. For instance, employees taking sickness absences due to circulatory disease were four times more likely to die prematurely than their colleagues with no absence. Those who took absence due to psychiatric diseases were nearly twice as likely to die prematurely, and those with a surgical operation diagnosis were more than twice as likely.

Interestingly, one or more spells of absence with a psychiatric diagnosis was predictive of a two and a half fold increase in cancer related death.

However, employees taking spells of sickness absence with a musculoskeletal diagnosis were not at increased risk of death compared to their colleagues who took no absence.

The authors conclude that the monitoring of reasons for sickness absence could contribute to identifying groups at increased health risks and who need a targeted intervention.

In an accompanying editorial, Johannes Anema and Allard van der Beek from the VU University Medical Centre in the Netherlands, suggest that specific diagnostic information on sickness absence could provide general practitioners with "a useful biopsychosocial tool" to identify workers with an increased risk of serious illness or risk of death.

In addition, Anema and van der Beek say that this tool could also be used to identify employees with work related health problems such as stress and high job demands, for targeted intervention by occupational physicians.

Source: British Medical Journal



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