



## ADVOCATE'S GATEWAY

### Occupational Health Clinics for Ontario Workers (OHCOW), Sudbury, Ontario

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## Heat & Humidity Equals Danger for Young Workers

Many young workers this summer will be attaining employment that requires them to work outside. As parents and employers, there are precautions we should be aware of for protecting our youth from suffering from the effects of working in the sun and humidity.

Working outside on hot and humid summer days or working in a hot building can cause heat stress. Heat stress occurs when the body overheats and is unable to effectively cool itself down. A rise in temperature of only a couple of degrees celsius may cause ill effects as the body is very sensitive to temperature changes. When working, your muscles generate heat. Therefore, working in hot conditions does not always allow the body to cool itself down.

The body copes with an increase in body temperature by releasing heat to the environment. This is done by the body increasing the blood flow to the skin which allows perspiration to occur. If the environment is cooler or if there is a breeze, the perspiration will evaporate which pulls heat away from the body. Problems begin to occur when these conditions do not occur. It is actually a combination of high temperature and humidity that increases the risk of heat stress. This combination is known as the Humidex.

It is important to watch the temperature, humidity and workers to ensure there are no effects of heat stress. If either the temperature or humidity climbs very high or workers seem to be having some difficulty, action needs to be taken immediately. Workers should take a break. If anyone seems dizzy or unusually tired, loosen or remove their

clothing and give them cool water to drink.

Some early signs and symptoms to watch for are: feeling tired, headache, dizziness, feeling faint and difficulty concentrating.

Mild symptoms include swelling of the hands or feet, heat rash and muscle cramps.

More serious symptoms include fainting, heat exhaustion, and the most serious effect of heat - heat stroke.

Early and mild symptoms can usually be controlled with in an hour of removing the worker from the heat to a cool, shaded area, providing fluids to drink and allowing the worker to rest. If after one hour the symptoms persist, medical attention should be obtained.

The more serious symptoms require immediate medical attention. Emergency services should be contacted for transportation to a medical facility.

As well, more aggressive treatment of the condition should be initiated while waiting for the emergency response team. This may include the above treatments as well as bathing the worker in cool water. It is not advisable to provide fluids to a worker who has fainted or is in heat stroke as it could cause vomiting or choking to occur.

There are four key elements to preventing heat stress: water, acclimatization, rest breaks and monitoring. Anyone who will be out in the sun for long periods needs to have plenty of clean cool water available to drink regularly.

## HEAT — CONT'D

The human body has the ability to adapt to working in the heat through a gradual process known as acclimatization. This is usually achieved in about seven days. A person becomes unacclimatized when out of the heat in about seven days as well. So if a worker goes on vacation, he/she will have to re-acclimatize themselves when returning to hot working conditions.

The Occupational Health Clinics for Ontario Workers (OHCOW), has developed a heat stress advisory system to help workplaces avoid heat stress and what actions need to be taken under variable Humidex measures.

The values obtained, apply to employees wearing regular summer clothing who are working indoors and are not exposed to radiant heat (ovens, molten metal etc). Modifications can be made to the system by adding two degrees for radiant heat sources.

If the Humidex is:

<b>30-33°C:</b>	Encourage workers to drink extra water and begin measuring temperatures and relative humidity hourly;
<b>34-37°C:</b>	Notify employees that they need to drink more water and ensure workers have received appropriate heat stress training in the last three months;
<b>38-39°C:</b>	Provide employees with a 15-minute rest relief per hour; ensure adequate water is being supplied to each employee (at least one cup or eight oz. of cool water every 20 minutes). Any employee with symptoms should seek medical attention.
<b>40-42°C:</b>	Employees should be provided with 30 minutes of rest relief per hour in addition to the previous provisions;
<b>43-44°C:</b>	Provide employees with 45 minutes of rest relief per hour, in addition to the provisions listed for 38-39°C. If relief is not feasible, then stop work until the Humidex is 42°C or less;
<b>45°C or over:</b>	Stop work until Humidex is 44°C or less.

Workers should be taught the signs, symptoms and

treatment of heat stress so they can look after themselves if working alone and look out for their co-workers when working in a group.

Workers who have health concerns should seek the advice of their doctor prior to working in hot conditions.

Another important issue to consider when working outside is to wear sunscreen with at least an SPF of 15. Hats should also be worn to provide shade.

Working in hot conditions is possible and safe providing care and caution are exercised.

For more information please contact the Occupational Health Clinics for Ontario Workers at (705) 523-2330

## OHCOW FILE REVIEW UPDATES

Did OHCOW provide a report or information (hygiene, ergonomic or medical) for your client? Do you know if the case won or lost? We are always striving to improve our services; therefore, we want to know if OHCOW assisted with a file whether it won or lost. The outcome is very important to OHCOW, you, and the workers you represent. This will allow us to maintain high standards

while providing quality reports and information for you and your clients. Please send file updates by email at [sudbury@ohcow.on.ca](mailto:sudbury@ohcow.on.ca) or via fax (705)523-2606. To maintain confidentiality, we ask that you leave out the client's name unless you have a signed consent. Thank you for your help.

## WSIB CLASSIFICATION FOR TONSIL CANCER

There are many questions around the classification for Tonsil Cancer as a primary cancer. The National Office recently reviewed the medical evidence in a case file to determine if, for purposes of being considered a specified cancer under the EEOICPA, tonsil cancer can be considered pharynx cancer.

*the tongue, and the tonsils". Based on this definition from NCI, we consider that a cancer of the tonsils is a cancer of the pharynx. As the tonsils are part of the pharynx, tonsil cancer should be considered a specified cancer for SEC cases."*

***"The information on the National Cancer Institute website...indicates that the pharynx has three parts. One of these parts is the oropharynx, which includes the soft palate (the back of the mouth), the base of***

For more information on this topic please visit the following link :

[http://www.dol.gov/owcp/energy/regs/compliance/PolicyandProcedures/finalbulletinshtml/bulletin\\_02-28\\_tonsil\\_cancer.htm](http://www.dol.gov/owcp/energy/regs/compliance/PolicyandProcedures/finalbulletinshtml/bulletin_02-28_tonsil_cancer.htm)

## OCCUPATIONAL DERMATITIS

An occupational skin disease is any disorder of the skin that is caused or made worse by environmental exposure in the workplace. Typically, skin problems from workplace exposure are due to contact with one particular substance which results in one of two forms of Contact Dermatitis; Irritant or Allergic. The Workplace Safety & Insurance Board (WSIB) states that over 1000 claims are made annually in Ontario for both irritant and allergic contact dermatitis. Despite these high percentages, it is still speculated that irritant and allergic contact dermatitis are among the most heavily under reported conditions in the workplace.

### What Happens?

Skin is a multi-functional organ that serves as a protective barrier against chemicals, ultraviolet radiation, microorganisms, and physical stress, in addition to mediating sensation and acting as a temperature and fluid regulator. Skin is comprised of three primary sections, the epidermis, dermis and hypodermis. Each of these has a series of sub-layers that have specific roles in skin function. The layer of primary importance with respect to dermatitis is the outermost layer of skin known as the stratum corneum. This is the principle protective barrier against chemicals and microorganisms that attempt to penetrate the skin from the outside. When substances penetrate this layer one of the two types of dermatitis results.

### Who is at Risk?

Each person will react differently to an irritant or allergen. Some may develop dermatitis whereas others, although exposed to the same working environment and chemicals, will not. Canadian and US statistics indicate that certain professions do represent a greater percentage of dermatitis cases than others. Examples of these professions include: cooks, dishwashers, nurses, hairdressers, painters, janitors/cleaners, auto mechanics, farm workers, health technicians, and construction labourers.

For more information please contact OHCOW at (705) 523-2330

## WHY DO THIS NEWSLETTER....?

In our catchment area, we are hearing from many advocates and OHCOW. It is hoped that OHCOW can provide more support to each advocate by providing up-to-date information and enhance communication networks amongst

## OHCOW — WHO WE ARE? HOW & WHO CAN WE HELP?

OHCOW is a valuable occupational health related resource that is available to your members at no cost. The Occupational Health Clinics for Ontario Workers

(OHCOW) were established in 1989 and are funded by the Workplace Safety and Insurance Board (WSIB). There are clinics in Hamilton, Toronto, Sarnia, Windsor, Sudbury, and Thunder Bay. Staffed by a multi-disciplinary team of specially trained occupational health doctors, occupational health nurses, occupational hygienists, ergonomists, researchers, and administrators, each OHCOW clinic provides comprehensive occupational health services and

information. Our mandate is the prevention of occupational illnesses and injuries. We do this through the identification of causes which have led to illnesses and injuries. This also provides us with a window into the workplace.

In order to carry out our work, we partner with, among others, public health officials; universities; the Ministry of Labour; the Ministry of Health; the Workplace Safety and Insurance Board (WSIB); and organizations such as cancer coalitions. OHCOW works with medical and nursing schools to provide occupational education to medical and nursing students. We also work with unions holding clinics for workers about illnesses which they think might be work related. In short, we have the experience, the knowledge and the credibility to assist you.

**We're on the web!**

<http://www.ohcow.on.ca/clinics/sudbury/>

occupational health doctors, occupational health nurses, occupational hygienists, ergonomists, researchers, and administrators, each OHCOW clinic provides comprehensive occupational health services and

## OHCOW SUDBURY WEBSITE

Did you know that OHCOW Sudbury updates its website on a monthly basis? Each month features a new article written by an OHCOW staff member on current issues within occupational health and safety.

studies, research projects, staff biographies, games & tests, past articles on health and safety issues, and information on education seminars that OHCOW offers.

Check it out!!!

The website also contains information regarding past case

<http://www.ohcow.on.ca/clinics/sudbury>

## WHAT DO YOU THINK?

We welcome feedback for generating topics that would be of interest to advocates. Please forward any questions or suggested topics to covered in future issues either by e-mail, phone or fax by using the contact information below.

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Occupational Health  
Clinics for Ontario  
Workers Inc.

Centres de santé  
des travailleurs (ses)  
de l'Ontario Inc.