



Work related musculoskeletal disorders in Europe

A European Priority

- Across Europe manual handling and repetitive movements are priority risks requiring attention (3)(4)(5)(6).
- Therefore "Turn your Back on Work Related Musculoskeletal Disorders" has been chosen for the theme of European Week for Safety and Health at Work which will be run by each Member State in October 2000.
- It is a priority because of the extent and cost of these disorders in Europe.
- It is a priority because much of the problem can be prevented or reduced by following existing health and safety laws and guidance on good practice (4).
- Europe wide reports show Member States urgency to tackle the issue (3)(5).

Extent of MSD ill health in Europe

- Musculoskeletal disorders (MSD) cover a broad range of health problems. The main groups are back pain/injuries and Work Related Upper Limb Disorders, commonly known as "repetitive strain injuries". Lower limbs can also be affected.
- Lifting, poor posture and repetitive movements are among the causes. Some types of disorders are associated with particular tasks or occupations.
- Every year millions of European workers in all types of jobs and employment sectors are affected by MSD through their work. European studies provide substantial evidence that MSD such as

back, neck and upper limb disorders are a significant ill health and cost problem and are on the increase (3)(4)(7).

- MSD are commonly reported work related health problem by European workers: 30% complain of backache; 17% complain of muscular pains in their arms and legs; 45% report working in painful or tiring positions; 33% are required to handle heavy loads in their work (7). A breakdown of some of these figures by country in the European Union is given in Box2.
- The figure quoted above of 30% who report suffering back pain each year amounts to a figure of 44 million European Workers (7).
- Health problems range from discomfort, minor aches and pains to more serious medical conditions requiring time off work, medical and hospital treatment.
- Treatment and recovery are often unsatisfactory especially in more chronic causes. So the end result can even be permanent disability, with loss of job.

Recognising MSD risks

There is clear evidence that MSD are strongly work related (4). The causes have been found to be related to the design of work systems (4) (7). The main risk factors are given in Box1.

Box 1-Factors that increase the risk of MSD

Physical aspects of work

loads
 poor posture
 highly repetitive movements
 forceful hand applications
 direct mechanical pressure on body tissues
 body vibrations

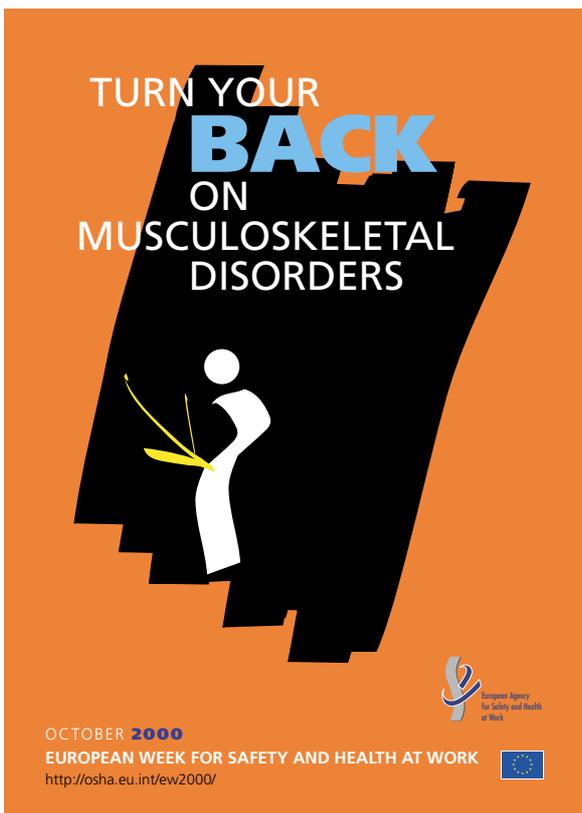
Work environment and work organisation

pace of work
 repetitive work
 time patterns
 payment systems
 monotonous work
 fatigue
 cold work environments
 how workers perceive the work organisation
 psychosocial work factors

These risk factors can be found in very many European workplaces. For example 7% of EU workers say that their work involves short, repetitive tasks; 57% say that it involves repetitive hand or arm movements; 56% are exposed to strict/tight deadlines; 54% are exposed to high speed work; 42% are not free to decide when to take break; 31% have no choice over their pace of work (7).

Groups at risk

- Manual workers both skilled and unskilled are most at risk.
- Upper limb disorders affect women workers more than men (4) (7) largely because of the type of work they do. For example 35% of EU female workers do permanent repetitive work compared to 31% of EU male workers (7).



- Older workers in Europe report more MSD problems. For example the EU average for reports of backache is 30%, for 15-24 year olds it is 25%, for 55 plus it is 35% (7). Many older workers will have spent more time working in MSD risky situations. In addition jobs are generally designed for young and healthy male workers (7).
- Workers in precarious employment, such as those on fixed-duration or employment agency contracts, are significantly more exposed to repetitive work and working in painful/tiring positions (7).

Reducing the economic costs

- Work related MSD cause pain and suffering for those affected both at work and in their home life.
- Although precise figures do not exist, estimates from Member States of the economic costs of all work related ill health range from 2.6 to 3.8% of Gross National Product (8).
- A high proportion - maybe up to 40-50% - of the costs will be for musculoskeletal disorders(7). Available cost estimates of MSD put the cost at between 0.5% and 2% of GNP (4).
- More than 600 million working days are lost due to work related ill health each year in Europe (7).
- The costs to European business include: Lost production; staff sickness, compensation and insurance costs; losing experienced staff and costs of recruiting and training new ones; effect of discomfort or ill health on the quality of work of employees.
- Prevention of these work related disorders is good business.

Preventing MSD

Many MSD can be prevented using ergonomic interventions-to modify work and workplaces based on assessment of risk factors (4). This principle is already enshrined in current European directives and Member State legislation (10). Practical guidelines and preventive tools are also available. See Fact Sheet "Preventing Musculoskeletal Disorders" for more information.

Getting more information

More information about the European Week for Safety and Health at Work and preventing musculoskeletal disorders can be found on the Agency website, <http://osha.eu.int>, where the full text of publications can be downloaded free of charge. Link <http://osha.eu.int/ew2000/> takes you to the special feature on European Week.

Bibliography/References

- "Turn your back on work related musculo skeletal disorders"- Agency information leaflet European Week 2000
- Agency Factsheet "Preventing work related musculoskeletal disorders"
- "The State of Occupational Safety and Health in the Member Sates"- Agency report, 2000
- "Work-related neck and upper limb musculoskeletal disorders" - Agency report and factsheet "WRULD : summary of Agency report", 2000
- "Repetitive Strain Injuries" - Agency report, 2000
- "Priorities and strategies in Occupational safety and health Policy in the Member States of the European Union"- Agency report, 1997
- P. Paoli, Data from the European survey on working conditions - European Foundation for the Improvement in Living and Working Conditions, unpublished article, June 1999
- "Economic impact of occupational safety and health in the Member States of the European Union" - Agency report, 1998
- Working conditions in the European Union (summary of Survey 1996)- European Foundation for the Improvement in Living and Working Conditions
- The Agency website provides a link to EU legislation and to Member State sites where national legislation and guidelines may be found.

Box 2

	AU	B	DK	FIN	FR	GE	GR	IRL	IT	LU	PT	SP	SW	NL	UK	EU
OCCUPATIONAL RISKS AND HEALTH PROBLEMS																
Backache	31	21	30	33	29	34	44	13	32	32	39	35	31	17	23	30
Muscular pains in arms or legs	14	9	24	29	19	13	37	6	19	13	31	24	24	10	11	17
WORK RELATED ABSENCE																
% health related absence due to work over last 12 months	36	26	15	30	21	34	18	16	17	29	22	19	13	27	16	23

Sources: Second European Survey on Working Conditions (1996). European Foundation for the Improvement of Living and Working Conditions.