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COSTE SANITARIO DEL ASMA, CÁNCER DE
VEJIGA, TUNEL CARPIANO Y OTRA
PATOLOGÍA OSTEOARTICULAR ATRIBUIBLE
AL TRABAJO EN ESPAÑA EN 2008

Executive Summary

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Executive summary

Employment is a major influential social factor on people's health. However, current policies for the prevention of occupational hazards include more safety than health elements. Despite the overwhelming scientific evidence on the burden of disease which is attributable to the nature of employment and working conditions, preventive policies tend to focus on the fight against labour accidents, instead of using available information for preventing illness and monitoring workers' health.

Statistics on occupational diseases are basically used to record those work-related damages that have been financially compensated by Social Security. Thus, it is easy to find a significant under-reporting associated to most occupational diseases. However, the identification of these diseases is critical for workers' health, and also for workers' pocket. If a disease is diagnosed as work-related, the subsidy received by workers is 75% of their base salary (only 60% if not). Moreover, pharmacological and medical treatments are fully covered by Social Security if health care problems are diagnosed as work-related.

Further, we should note another relevant aspect. From the financing perspective, health care costs derived from occupational diseases should be funded by Social Security through social contributions and not by the National Health System (NHS) through taxes. Work-related diseases do not disappear when they are not recognized by the Social Security system, but they are treated in NHS' network without any financial compensation.

In this context, the aim of the study is to estimate, for different types of diseases, the number of cases due to labour conditions in Spain, and also to compute the health care costs associated to their treatment. In particular, we analyse asthma, bladder cancer, carpal tunnel syndrome and a diverse set of musculoskeletal disorders. We try to properly size the problem of occupational diseases and, ultimately, to highlight the need for public actions aimed at improving working conditions and preventing illness.

The proportion of occupational diseases is estimated from international studies, since information needed to calculate Spanish risk rates attributable to work was not available. Direct health costs are based on data from the NHS' accounts, as well as on secondary sources.

With respect to asthma, we estimate that the number of work-related cases in 2008 would range from 1,993 to 2,418. Secondly, in regard to bladder cancer, work-related hospital admissions would exceed the 3,900 in the same year. Thirdly, the number of carpal tunnel surgeries related to labour in 2008 would range from 1,455 to 2,169. Finally we estimate that, for the rest of musculoskeletal diseases, the number of work-related cases in 2008 receiving inpatient care would range from 13,684 to 21,601.

According to our estimations, NHS' inpatient care costs for occupational asthma would range from 5.5 to 6.7 million euros in 2008, and total costs from 486.7 to 544.4 million euros. Inpatient care costs linked to work-related bladder cancer (highly underreported) would be close to 16.5 million euros.

Moreover, the work-related carpal tunnel syndrome would generate a cost to public hospitals ranging from 3.5 to 5.3 million euros in 2008, and total health care costs linked to underreporting of incident cases would range from 22.6 to 80 million euros. Finally, the rest of work-related musculoskeletal diseases would be responsible of 69.8-110.2 million euros afforded by NHS' hospitals. Total health care costs of these diseases are estimated to be close to 3,500 million euros.

The figures above are only a proxy of the total amount of health care costs driven by occupational diseases. However, the magnitude revealed is high enough to stress the need of promoting public health actions and policies aimed to guarantee the sustainability of social protection systems.