

Industrial dermatitis in Northern Ireland

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Industrial injuries and disablement benefits paid for industrial dermatitis (PD 42) in Northern Ireland are analyzed by age, industry and substance responsible. The most significant trend is a decrease in the number of cases due to cement and an increase in the number of nickel cases.

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Accurate information about the incidence of skin disease in industry is difficult to find. There are two main sources: (1) Government figures based on claims for compensation, and (2) Analysis of cases attending skin clinics. National dermatitis statistics can be unreliable because of under-reporting and inaccurate diagnosis, and unless the figures are taken in relation to the number of people in an industry they do not give any indication of the risk in any particular employment. While the diagnosis may be more accurate in those attending skin clinics only a small proportion of those affected attend skin clinics. The figures reported in this paper are of successful claims for Industrial Injuries Benefit and Disablement Pensions for Contact Dermatitis (PD 42) in Northern Ireland and were supplied to us by the Department of Health & Social Services. They are divided as in the Standard Industrial Classification (United Kingdom 1968). The importance of these figures is that they come from a relatively compact area with a working population of half a million employed in a cross-section of industry. There is good liaison between dermatologists and the Benefits Branch of the Department of Health with nearly all the

cases having been seen by a dermatologist at some stage.

Materials and Methods

The figures in this paper have all been obtained either from the Ministry of Health & Social Services, Medical Referees Branch, based on claims for Industrial Injuries Benefit and Disablement Pension or from "Digest of Statistics", Statistics and Economic Unit, Department of Finance, Northern Ireland.

Discussion

Newhouse (1972) using figures of Industrial Injuries Benefit in Great Britain showed that, while there has been a steady decline of all non-dermatological industrial diseases from 1953 to 1969, industrial dermatitis after a period of decrease from 1953 to 1963 had shown a substantial increase again up to 1969. This increase in the number of cases of industrial dermatitis has been confirmed by others, (Neubert 1971, Kurzawa et al. 1971). Neubert (1971) showed an increase from 293 to 346 cases per million of the population in German Trade Union fig-

Table 1. Initial awards of disablement pensions for dermatitis analyzed by industry and sex

	1970	1971	1972	1973	1974
Male	98	149	116	112	102
Female	42	50	41	36	46
Total	140	199	157	148	148
Total employees in industry (thousands)	486.6	473.2	470.5	479.4	493.6

The files of all successful claims for the year July 1974/June 1975 were examined by one of us with particular reference to the substance causing dermatitis and the industry involved. In the case of the substance causing the dermatitis this was compared with the figures when last analyzed in detail (Burrows 1972).

ures from 1953 to 1968, and perhaps from a prognosis point of view a more sinister aspect was that the percentage of chrome cases increased from 9.1% to 24.6%. Northern Ireland has a slightly lower rate (100 per million) for all cases than Germany. However, as most workmen who claim Industrial Injuries Benefit only do so when they have a spell off work, the figures in this paper may tend to reflect the more serious cases of contact dermatitis in industry and this together with the higher proportion of the population in agriculture would explain the apparent difference in incidence in Germany and Northern Ireland.

Fregert (1976) has recently observed a decrease in dermatitis among building workers and in chrome sensitivity in Sweden and the figures in this paper confirm his finding. This decrease is confirmed in these figures and is important because of the bad prognosis found in this type of dermatitis (Neubert 1971, Burrows 1972). The cause for it is not obvious. It does not correspond with a period of building recession or reduction in the number of employees in the industry. The most likely explanation is a greater awareness of the problem within the industry and improvement in general facilities on building sites with washing facilities,

Table 2. Substances causing dermatitis in claims for industrial injuries benefit

Cause	Northern Ireland 1969/1970 (Burrows 1972)		Northern Ireland 1974/1975	
	Male	Female	Male	Female
Oil	27	12	27	2
Primary irritants (others)	15	6	16	9
Rubber	13	1	12	3
Detergents	0	20	1	11
Nickel	0	0	2	8
Cement	35	0	9	1
Chrome (non-cement)	5	0	2	0
Shampoo/hair dyes	0	0	0	8
Fibre	1	6	5	1
Epoxy	0	0	4	0
Others	0	0	24	3

Table 3. Industrial injuries benefit awards for 1974/1975 classified by S.I.C. (1968)

Order group	Number	Employees in industry	Number of cases per thousand employees
Agriculture, forestry, fishing	1	46,600	0.02
Food, drink and tobacco	19	26,600	0.73
Chemicals and allied industries	2	2,600	0.77
Metal manufacture	3	400	7.5
Mechanical engineering	13	11,700	1.1
Instrument engineering	1	2,000	0.5
Electrical engineering	6	13,100	0.45
Shipbuilding and marine engineering	4	10,200	0.40
Vehicles	1	8,700	0.11
Textiles	16	39,700	0.40
Bricks, pottery, glass, cement, etc.	10	5,900	1.70
Timber, furniture, etc.	2	5,500	0.37
Paper, printing and publishing	3	6,600	0.45
Other manufacturing industries	18	7,800	2.31
Construction	10	46,600	0.21
Transport and communication	5	24,000	0.22
Professional and scientific services	1	83,700	0.012
Miscellaneous services	32	43,100	0.74
Public administration and defence	1	44,800	0.022

etc. During the period under study there has been no change in cement supply or manufacture or regulations in the building industry. However, insuring legal claims in the building industry in Northern Ireland has become so costly that it may have led to a tightening up in working conditions. The increase in the number of cases of nickel dermatitis probably simply reflects an increased awareness that nickel sensitization may be a complicating factor in oil and detergent dermatitis and a greater use of routine battery patch testing in all skin clinics in the province.

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