

# HEALTH OF MEDICAL WORKERS AND RISK FACTORS AFFECTING THEM (LITERATURE REVIEW)

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## Abstract

Currently, it has been proven that one of the main reasons for the high morbidity of medical workers is the specificity of professional activity. Today, in domestic and foreign research, the interest in interaction with professional activity, people's behavior and health has increased significantly. Health care behavior of medical personnel is observed as the ability of the body to maintain and activate compensatory, protective, regulatory mechanisms that ensure work efficiency in all conditions of professional activity. Therefore, the issues of strengthening the health of doctors in modern healthcare institutions are fully raised.

**Keywords:** disease rate of medical workers.

## Introduction

The results of scientific research, mainly related to the health of medical workers, show that their work increases the risk of developing various diseases. Research data shows that when comparing the morbidity of doctors and nurses, we can see a higher prevalence of some diseases than the incidence of other occupational groups.

Studies show that the rate of occupational disease of medical workers has a tendency to increase. Only 2 percent of doctors are considered healthy. There are good reasons to believe it has spread. Occupational diseases among medical workers are significantly higher than officially registered [1, 2]

The purpose of the article is to analyze the publications devoted to the study of the health of medical professionals.

## Materials and Methods

It is an analysis of publications from scientific medical literature devoted to the study of the level of illness of medical workers.

According to official data, doctors live 15 years less than patients do. On the one hand, a combination of specific factors that constitute occupational stress plays a role; on the other hand, doctors are exposed to the same risk factors for chronic non-communicable diseases as the general population [3].



However, for many years, the lack of special statistical data did not allow us to fully imagine the state of health of medical workers. The few studies available in this area have shown that morbidity among health care workers remains high in recent years. 76% of doctors have chronic diseases, and only 40% of them are in dispensary accounts [4].

Medical workers take the first place in occupational diseases. Infectious diseases are the first (from 75.0 to 83.8%, average - 80.2%), second - allergic diseases (from 6.5 to 18.8%, average -12.3%), third intoxication and diseases of the locomotors system take the place. Chronic pathology was found in 60% of doctors and 50% of secondary medical workers [5]

N.H. Amirova and others. (2014), with increasing professional experience of medical personnel, diseases of the cardiovascular system, digestive organs, and vertebrogenic pathologies at the cervical and lumbosacral level are increasing.

Pathology of the female reproductive system is often noted with work experience up to 9 years, the majority of women are women of reproductive age.

According to statistics, every year in Russia 320,000 medical workers do not go to work due to illness and take the 5th place in the prevalence of occupational diseases, and even ahead of chemical industry workers. People with tuberculosis are especially at risk, because tuberculosis accounts for 40% of occupational diseases. At the same time, the detection rate of occupational diseases does not exceed 10% of their total number [6]. According to some local authors, the number of such medical workers is 80% [7]

As a rule, medical workers are diagnosed only with diseases that cannot be hidden, and a significant proportion of occupational patients consists of people working in work conditions of categories 3.3 and 3.4, which in itself is permanent disability, especially viral hepatitis and leads to the formation of clear, severe forms that cause tuberculosis [7].

The working conditions and nature of different categories and professional groups of medical workers are of course important from the point of view of health. While performing their duties, many doctors are exposed to unfavorable factors, in particular, high neuro-emotional stress and unfavorable microclimate, harmful chemical and biological agents, noise and ultrasound, laser exposure and ionizing radiation, insufficient lighting of workplaces.

The use of many drugs used for chemotherapy in medical practice, especially in oncology and hematology, is associated with an increase in the number of occupational diseases among medical workers. The incidence of occupational dermatitis among medical workers is 3-4 times higher than among workers in other fields. Contact with all types of drugs is possible. The most dangerous method of administration of drugs is injection. Because of many studies, the effects of anesthetics, antibiotics and antitumor antibiotics on the body of medical workers have been proven [8].

In the process of working with antibiotics, nurses often develop candidiasis or candidiasis in various organs, allergic diseases, as well as systemic toxic effects. In about 30% of inpatient departments, 40% of doctors and nurses are sensitive to the main groups of drugs.

In addition to drugs, chemical laboratory reagents, disinfectant detergents, medicinal plants, and latex can cause occupational allergies. The most common form of latex allergy among healthcare workers is contact dermatitis, which is associated with glove powder, detergent solutions, and frequent hand washing [9, 10, 11].

Doctors are at high risk of contracting blood-borne infections, including hepatitis B and C viruses, as well as human immunodeficiency virus. This happens when the infected biological fluid of the patient falls on the mucous membrane of the medical worker, as well as when accidentally



punctured or cut with a sharp medical instrument. The risk of contracting HIV from an infected needle stick is about 0.3%, 10% with hepatitis C, and 30% with hepatitis B. About 350 health workers in the world are officially documented to be infected with HIV at work. As for viral hepatitis B and C, the number of victims is tens of thousands of people [12, 13].

It is known that the incidence of hepatitis B is higher among medical workers and the symptoms of hepatitis infection are more frequent than the general population who do not have professional contact with the blood of patients or patients themselves. In addition, the frequency of identified symptoms increases with age and/or length of service in medicine [10]. According to the same authors, the characteristic features of viral hepatitis in medical workers are the frequent development of mixed (mixed) forms of hepatitis (B + C), which increases the clinical appearance of the disease and its prognosis, the development of viral hepatitis. Against the background of previous poisoning, it is possible to add allergic liver damage, various levels of resistance to drug therapy, frequent development of hepatitis complications (liver failure, cirrhosis, liver cancer).

The occupational risk group for parenteral hepatitis includes only persons who have direct contact with the blood of patients (surgeons, resuscitators, operative and procedural nurses, etc.), as well as doctors in therapeutic specialties who occasionally perform parenteral procedures, almost none no measures are taken against the epidemic [10].

Professional nurses, surgeons and operating room nurses, obstetrician-gynecologists and pathologists who work in hospitals and wards providing care for HIV-infected patients are the most common occupational risk of HIV infection in the world. It is dangerous for healthcare workers to get infected with infected blood when they come into contact with wounds, cuts or mucous membranes. For example, when taking a blood sample from a vein, an intravenous injection. Puncture of gloves in medical practice occurs in 30% of cases during operations, injuries of hands with needles or other sharp objects.

In the composition of occupational diseases among doctors, diseases caused by biological and chemical factors are of great importance [2]. First, laboratory assistants, members of surgical teams, anesthesiologists, dentists, disinfectants, and pharmaceutical workers are exposed to the negative effects of various chemicals during their work. The most common way chemicals enter the body is through inhalation. Damage to the upper respiratory tract by irritating chemicals is typical for junior medical personnel and laboratory workers, and manifests itself in the form of a nonspecific catarrh of the mucous membrane. The duration of work affects the spread of damage: chronic rhinitis develops first, then chronic pharyngitis and laryngitis [14]. A large group of occupational diseases of medical workers related to the influence of biological factors includes infectious and parasitic diseases similar to the infection that workers meet during work: tuberculosis, toxoplasmosis, viral hepatitis, skin mycoses, syphilis, HIV. Infection [10, 14]. Toxic and toxic-allergic hepatitis can develop in medical workers due to poisoning and exposure to antibacterial drugs.

Among the harmful production factors of a physical nature (vibration, noise, various types of radiation), the causative factors of the development of occupational diseases in medical workers are, first of all, various types of ionizing and ionizing radiation. Ionizing radiation, ultrasound, laser radiation, microwave radiation can cause radiation sickness and local radiation damage; vegetative-vascular dystonia, asthenic, hypothalamic syndromes, local tissue damage by laser radiation; vegetative sensory polyneuropathy of the hands, cataract; neoplasms, skin tumors, leukemia [14, 15].



### Summary

1. One of the main reasons for the high incidence of diseases among medical workers is the specific nature of their professional activity. Many professionals face unfavorable factors in their work environment while performing their professional duties.
2. With increasing professional experience, medical workers experience an increase in diseases. The doctor and nurse profession can be included in the risk group in terms of the frequency of health problems and the severity of ongoing diseases.
3. It is of great importance to identify risk factors affecting health status in the prevention of diseases among medical personnel.

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