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A STUDY OF HEALTH STATUS OF PHYSICIANS AT WORK IN THE CITY OF BAGHDAD

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دراسة الحالة الصحية للأطباء العاملين بمدينة بغداد

الخلاصة:

أجريت دراسة مقطعية لبيان الحالة الصحية للأطباء العاملين أكثر من خمس سنوات في الدولة بمدينة بغداد. الشد النفسي، ارتفاع ضغط الدم وفرحة المعدة أو الاثنى عشر كانت أكثر الأمراض التي سجلها الأطباء. ان مثل هذه الأمراض يمكن ان تعتبر من الأمراض التي لها علاقة بالهبة كما لا يمكن ان نفسي تأثير الوضع الاقتصادي والحصار على تعرض الطبيب والمريض لمثل هذه الأمراض.

SUMMARY:

A cross-sectional survey of the health status of physicians working more than five years in the government services in Baghdad City were conducted. Mental stress, hypertension and ulcer diseases were found to be the most common work related diseases reported by physicians. These illnesses could also be related to the economic embargo on the Iraqi patients and the physicians alike.

INTRODUCTION:

We conducted a study to look at the health of physicians working within the city of Baghdad and its surrounding suburbs. Our goal was to assess the overall general health and well-being of medical professionals, and the diseases that affect them, either resulting from their professions, or diseases that affect the rest of the population according to age, gender, and hereditary factors. Our ultimate objective was to determine if medical professionals

living in the city of Baghdad and its surrounding suburbs have different health needs than the rest of the population. It so, perhaps special hospital or clinics are needed to take care of the medical professionals of the city of Baghdad and its surrounding suburbs.

It is well known that medical professionals are exposed to various illnesses depending on the nature of their work. These include infectious diseases when they treat patients during epidemics, various arthritic diseases and low-back pain diseases that affect surgeons and dentists performing long hours of surgery that require little mobility and change of body position^(3,4,5). Radiologists, radiotherapists, and physicians handling radioactive and nuclear material are often exposed to hazardous radiation which may result in delayed injury appearing many years later^(7,8). Doctors may also suffer from different stresses related to their jobs including excessive hours of work⁽⁹⁾, as well

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as changes in body weight and cholesterol levels related to lack of regular physical exercise⁽¹⁰⁻¹⁵⁾

MATERIALS AND METHODS:

Medical professionals of various specialties practicing in the city of Baghdad and its surrounding suburbs were surveyed for this study. To be included in the study physicians had to be in practice for at least five years. Thirty, Fourth-year medical students of the University of Baghdad, were divided into ten groups to match the ten geographical districts of the city of Baghdad and its suburbs. The medical students were asked to personally deliver and explain the contents of a survey to the physicians in their geographic area. These surveys requested information about the presence of chronic illnesses that the physicians are being treated for such as Diabetes or Hypertension. Also, whether the physician was exposed to, and inflicted by, a disease occurring as a result of his/her occupation during the past one year. Physicians were also surveyed as to their smoking, and drinking habits, as well as to their recreational habits. They were also asked about the number of work hours per week. The physicians were asked to complete the surveys and then return them to the medical students on their second visit.

RESULTS:

The total number of physicians receiving surveys was 1500. Of these, 1350 returned surveys. The total number of completed surveys was 1207. Table (1) shows the demographic breakdown of the participants in the study. There were twice as many men as there were women physicians in the study. 71.5% of the physicians were married, and of those 88% had at least one child. Over half of the married

physicians (66.2%) had spouses that were employed, and over 50% of those were in professional occupations (doctors, dentists, and pharmacists). 47.6% of the physicians surveyed had been in practice more than 10 years, and 65% were general practitioners, and 35% were specialists. With respect to recreational habits, 50% of the participants performed regular physical exercise or engaged in swimming as a form of exercise. Furthermore, 30.6% of them smoked, either regularly or smoked occasionally. In addition, 62.3% of them had never smoked, and 68.4% had never had an alcoholic drink before. Moreover, 25.1% of the physicians were currently drinking, either regularly or occasionally. Finally, 62% of the physicians surveyed had moonlighting jobs (emergency room, private clinics ... etc.) after the regular business hours. Table (2) shows the various chronic diseases that the participants had while enrolled in the study during the calendar year 1993. Table (3) shows the illness these physicians had contracted in the 12 months preceding the study. As can be noted from the table, every physician had at least one illness during the preceding year. The most common reported illness was mental stress, followed by skin cut, and needle stick.

DISCUSSION:

This study was a cross-sectional survey of the health status of Iraqi physicians working in the city of Baghdad and its suburbs. We found that high blood pressure was the most common chronic disease among the study participants followed by Peptic Ulcer diseases. Both diseases had a combined incidence of 16.1%. Both diseases are most likely caused by occupational stress and long working hours, and has been reported in other studies^(12,9). A high incidence of mental

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stress (77%) was reported by the physicians in this study. In general, western studies have reported that stress plays a

significant role in the lives of physicians, and that occupational retirement is associated with a positive influence on

Table 1: Demographics of the study population

Study Parameters	Number	%
Gender	843	69.8
Male	364	30.2
Female		
Marital Status	316	26.2
Single	863	71.5
Married	28	2.3
Other		
Number of children	110	12.3
None	358	40.2
1-2	317	35.6
3-4	106	11.9
5+		
Occupation of spouse	318	35.7
Medical	123	13.8
Dental	35	3.9
Other professional	415	34.0
Other		
Years in practice	632	52.4
5-9 yrs	316	26.2
10-14 yrs	259	21.4
15+		
Occupation	784	65.0
General practice	423	35.0
Specialist		
Recreational Hobbies	395	32.7
Exercise	209	17.3
Swimming	295	24.4
Reading	187	15.5
Music	65	5.4
Art	56	4.6
Other		
Smoking Status		62.3
Never smoked	752	7.2
Quit	87	12.3
Occasional	148	18.3
Active Smoker	221	
Alcohol Use		68.4
Never used	826	6.5
Quit	79	15.7
Occasional	189	9.4
Active drinker	113	
Moonlighting		50.5
Private practice	610	4.5
Public Hospital	53	2.7
Public Clinic	33	3.2
Private Hospital	39	1.0
Non-medical	12	38.1
None	460	

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health⁽¹⁶⁾. Back-pain, both lower back and neck pain, had a combined incidence of 9.7% in the study group. Although back pain is common among physicians, the rate in our study was higher than expected. A study⁽³⁾ reported an incidence of 0.74% of back pain among dentists and physicians. Since data is not available on the incidence of back pain in the general Iraqi population, it is difficult to make a comparison between Iraqi physicians and the general citizens of Baghdad. Although the prevalence of back pain and hand discomfort among the US working population (non-physicians) was reported to range between 6.7% in truck drivers, to as high 23.5% in operators of machines⁽¹⁷⁾. The incidence of Hepatitis-B in the study group was 2.2%. This was surprisingly similar to studies done in western countries. Another study⁽¹⁸⁾ reported an incidence of 2.2% among general health-care workers, but an incidence of 5.3% among workers directly involved in liver transplantation, who obviously are expected to have a higher incidence of Hepatitis-B. Dermatitis and hypersensitivity to safety gloves was seen in 8.7% of the study

population. This incidence was reported to be 5.6% in one study of US health care workers⁽¹⁷⁾.

In summary, this study was conducted to evaluate the general health and well being of physicians working in Baghdad and its suburbs. Although this population is not representative of the general Iraqi medical society, it is the first study of its kind looking at Iraqi physicians. We were able to determine that Iraqi physicians suffer from the same diseases, both chronic and industrial, as their colleagues in western societies. However, we found a surprisingly high number of physicians suffering from Hypertension, ulcer disease, and mental stress. We believe these diseases are directly caused by the day to day stresses of practicing medicine in Baghdad. This is not surprising given the economic embargo placed on the Iraqi physicians and its consequences both on the Iraqi patient and the physicians alike. Iraqi physicians are to be commended for their ability to deal with the economic and medical embargo, and their strive to adapt of the difficulties of everyday medical practice.

Table (2): The Incidence of Chronic diseases in the study population

	Number	% of total
Chronic illness	116	9.6
Hypertension	78	6.5
Peptic Ulcer	40	3.3
Respiratory infection	63	5.2
Other Heart Disease	59	4.9
Cervical pain	58	4.8
Low back pain	30	2.5
Knee pain	0	0.7
Hand pain	14	1.2
Other joint pain	10	0.8
Skin diseases	42	3.5
Diabetes	34	2.8
Hearing loss	21	1.7
Other	7	0.6
Total	115	9.5
	1207	100

Disease where the incidence is < 5 physicians in the population

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Table (3): The Incidence of Occupational diseases in the study population

Occupational illness	Number	% of total
Occupational illness	931	77.1
Mental stress	318	26.3
Minor skin abrasion	284	23.5
Needle stick	163	13.5
Eye inflammation	81	6.7
Moderate/deep skin injury	79	6.5
Electrical shock	63	5.2
Hand dermatitis	42	3.5
Skin dermatitis	27	2.2
Hepatitis B infection	19	1.6
Bronchial Asthma	17	1.4
Brucellosis	10	0.8
Other	1207	100

*Disease where the incidence is < 5 physicians in the population

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