Health-related quality of life and occupation

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BACKGROUND

Traditional physical and chemical exposures have been reduced among workers in the industrial countries the past years. An increased focus has been put on various psychosocial occupational stressors that leads to health problems that are difficult to observe, such as musculoskeletal symptoms and mental health problems.

METHOD

The Hordaland Health Study, conducted 1997-99, included all individuals in Hordaland County born 1950-51 and 1953-57. The response rate was 60% for men and 72% for women, including a total of 10,261 men and 12,051 women.

Self-rated health was estimated in 7 defined occupational groups using the physical (PCS) and mental (MCS) component summary scales of the SF-12 Health Survey. Mean scores were adjusted for the effect of sex, level of education, smoking, alcohol consumption, body mass index and physical activity using a 6-way analysis of covariance.

RESULTS

Legislators, senior officials and managers scored highest on both the physical and the mental component. Workers in transport scored lowest on the physical scale probably reflecting known physical stressors for this type of work. Farmers and fishers scored lowest on the mental scale.

All results were statistically significant with p < 0.001

CONCLUSION

The marked differences found in the SF-12 scales probably reflect the effect of various occupational health stressors. The low scores of mental health among farmers and physical health among workers in transport can be related to known risk factors in these occupations.

The SF-12 seems to be a responsive and an adequate measure of the accumulation of the health effects caused by such stressors.