

# Drop dead

It is the thoroughly modern way to die at work. Major occupational diseases of the 21st century will be heart attacks, suicide and strokes. *Hazards* editor Rory O'Neill looks at why so many of us are being worked into the ground.

## HEART ATTACK ★ STROKE ★ SUICIDE



It couldn't happen here?

In May 2003, the British Medical Association advised senior hospital doctors to ensure they are not working more than 48 hours a week.

A BMA survey of almost 11,000 consultants found that 77 per cent worked more than 50 hours a week for the NHS, and 46 per cent more than 60 hours a week – well within the karoshi risk zone.

The call came after a coroner has criticised the "crazy" hours worked by Dr Sid Watkins who was found dead in a toilet at Southampton General Hospital. The 44-year-old paediatric consultant often worked 100 hours a week, and died after he apparently injected himself with the drug Fentanyl to help him cope with his workload.

In March 1998, UNISON secured £25,000 compensation for the family of mental health nurse Richard Pocock, who took his own life after being subjected to a macho management regime (*Hazards* 62).

Teaching union NASUWT said the 2001 suicide of assistant head teacher Patrick Stack, 45, could be linked to his "Herculean workload."



Teacher Pamela Relf, who killed herself in January 2000 after being told by Ofsted her lessons "lacked pace," left a suicide note saying: "I am now finding the stress of my job too much. The pace of work and the long days are more than I can do."

In March 2001, an inquest heard that 29-year-old teacher James Patton hanged himself because he was worried about a forthcoming Ofsted inspection at his Birmingham primary school.



In July 2002, postal union CWU called for a campaign to make the industry harassment free after a report showed a black Birmingham Mail Centre worker, 26-year-old Jermaine Lee (above), took his own life after enduring constant racist bullying.

Well, the cases aren't rare. They are just not statistics. Doctor Sid Watkins died when his body could no longer stand the "crazy" hours.

Stressed out teacher Pamela Relf killed herself. So did mental health nurse Richard Pocock. All died because their jobs were just too much to bear.

But these cases, and hundreds like them each year, are not recorded as "work-related deaths." Dying because the job was beyond a human's capabilities is, in Britain at least, not a workplace problem.

In the real world it is a problem that is getting worse. The 2003 *Stressed Out* survey by the Samaritans found: "People's jobs are the single biggest cause of stress... with over a third (36 per cent) of Briton's citing it as one of their biggest stressors."

And it is worse at work. The survey found 23 per cent of people working full time get stressed every day compared to just 16 per cent of those who aren't working.

### Work until you drop

Our hearts and minds can face intolerable pressures from work.

Japan and China each have a word for death by overwork – *karoshi* and *guolaosi*. And both Japan<sup>1</sup> and Korea recognise suicide as an official, compensatable work-related condition.

The problem may not be quite so bad in the UK – yet. But the number of people suffering from work related stress has more than doubled since 1990. HSE says the estimated prevalence rose from 829 cases per 100,000 workers in 1990, to 1,700 per 100,000 in 2001/02 (*Hazards* 81).

HSE figures show that last year 13.4 million lost working days were attributed to stress, anxiety or depression,

with an estimated 265,000 new cases of stress. It says stress, depression or anxiety now affects 1.3 per cent of the workforce.<sup>2</sup>

### Death from overwork

In Japan, "management by stress" (*Hazards* 51) led to the emergence of karoshi – death from overwork – as an official occupational disease, with the dependants of workers dying from overwork related stroke (cerebrovascular disease) or heart disease eligible for state payouts.

In 2001/02, there was a record 690 claims leading to 143 confirmed cases, 47 related to sudden deaths from heart disease and 96 from stroke. In 2002/03, the number of cases was higher still, with 160 of the 819 claimants receiving compensation.

The increase is in part explained by a rule change to take account of cumulative fatigue. A worker dying after regularly working overtime of 80 plus hours per month would now qualify, for example.<sup>3</sup>

Less than 45 hours overtime in each month prior to death is considered "weak" evidence, but the association is assumed to get stronger as overtime increases.

The rules say karoshi risk factors include extremely long hours, long-term excessive work, irregular work hours, long hours with inadequate breaks, shiftwork and nightwork and work-related stress.

About two-thirds of the karoshi deaths are in men in their 40s or 50s.

### Karoshi in the UK

A government survey published last year found there had been a steep rise in the number of people working excessive hours – taking millions of UK workers into the karoshi zone.

The DTI research found 16 per cent of the workers surveyed – 1 in every 6

workers – were working over 60 hours a week, up from 12 per cent in 2000.

DTI found one in five men (19 per cent) had visited the doctor because of stress, rising to one quarter (23 per cent) of over 40s (*Hazards* 80).

That's not the only evidence we are feeling the strain. TUC figures show unions started almost 9,000 new stress compensation cases in the years 2000 and 2001, accounting for about 10 per cent of all union personal injury cases and far outstripping the number of asbestos claims.

And things could be about to get worse. In July 2003 the government proposed abolishing the mandatory retirement age of 65 years. The old notion that "we work to live, not live to work" could soon be superseded by "we work until we drop."

We all have to die of something, of course – and circulatory disorders are Britain's top killer. But even if your job does not determine what kills you, it could be why it gets you that bit sooner.

### Driven to suicide

A 2003 analysis by the Samaritans reports: "It is commonly accepted that high stress, together with easy access to means, are important factors which put people in certain occupations at greater risk of dying by suicide."

Evidence suggests workplace problems could explain a shockingly high

proportion. A November 2002 study in the Australian state of Victoria, found work was a significant factor in 109 suicides in the years 1989-2000.<sup>4</sup>

Applied to the UK, this would suggest there are well over 100 cases of work-related suicide each year, making it one of the UK's top work-related killers. The authors say their total is likely to be an under-estimate because coroner's data is not designed to make work links.

In 2002/03 Japan compensated the dependants of a record 46 victims of karojisatsu, suicide resulting from overwork.

Official statistics suggest about five per cent of all suicide deaths in Japan are "company related," *The Japan Times* reported on 10 May 2003.

In July 2003, the widow of a 35-year-old Toyota Motor Corp employee who took his own life in 1988 as a result of overwork became the latest recipient of karojisatsu compensation.

Multinationals like Toyota operate similar management regimes worldwide. Earlier this year auto union CAW fought off a bid by the company to force compulsory overtime on workers at a Canadian plant (*Hazards* 82).

### References

1. *More mental disorders or suicide may be certified as occupation-related*, JOSHRC newsletter, No.22, page 57, January 2001. [www.jca.apc.org/joshrc/index\\_e.html](http://www.jca.apc.org/joshrc/index_e.html)
2. *Self-reported work-related illness in 2001/02: Results from a household survey*, (SWI01/02), HSE. [www.hse.gov.uk/statistics](http://www.hse.gov.uk/statistics)
3. *Factors contributing to Karoshi other than working hours*, Japan Labour Bulletin, vol.41, no.2, 1 February 2002.
4. *Work factors in suicide*, Urban Ministry Network, November 2002.

### Resources

*Hazards* Get a life! webpages: [www.hazards.org/getalife](http://www.hazards.org/getalife)  
UK National Work Stress Network: [www.workstress.net](http://www.workstress.net)  
BullyOnline: [www.bullyonline.org](http://www.bullyonline.org)  
Samaritans: [www.samaritans.org](http://www.samaritans.org)  
National Defense Counsel for Victims of Karoshi, Japan: [www.bekkoame.ne.jp/i/karoshi/english/e-top.htm](http://www.bekkoame.ne.jp/i/karoshi/english/e-top.htm)  
Job Stress Network, USA: [www.workhealth.org](http://www.workhealth.org)

## WORKED INTO THE GROUND

**Mind blowing: Poor work design and organisation causes heart disease. When workloads change, resulting in higher demands, less direct control and reduced support, an individual's mental health deteriorates.**

*Work environment, alcohol consumption and ill health. The Whitehall III study, HSE Contract Research Report 422/2002, 2002.*

**Heart stopper: Workers with stressful jobs are more than twice as likely to die from heart disease.**

*Kivimäki M and others. Work stress and risk of cardiovascular mortality: prospective cohort study of industrial employees, British Medical Journal, vol.325, page 857, 19 October 2002.*

**Under pressure: A UK study shows working for unreasonable and unfair bosses leads to dangerously high blood pressure.**

*Wager N and others. The effect on ambulatory blood pressure of working*

*under favourably and unfavourably perceived supervisors, Occupational and Environmental Medicine, vol.60, pages 468-474, 2003.*

**Fat chance: Long-term job strain is worse for your heart than gaining 40lbs in weight or aging 30 years (see pages 4-5).**

*Landsbergis P and others. Life course exposure to job strain and ambulatory blood pressure among men. American Journal of Epidemiology, vol.157 (11), pages 998-1006, 2003.*

**Bored rigid: Research published last year showed that workers doing meaningless work with little opportunity for any input were more likely to die young.**

*Amick BC and others. Relationship between all-cause mortality and cumulative working life course psychosocial and physical exposures in the United States labor market from 1968 to 1992, Psychosomatic Medicine, vol.64, pages 370-381, 2002.*