Neo Scientific Peer Reviewed Journal
Volume 8, March. 2023 ISSN (E): 2949-7752
www.neojournals.com

HYGIENIC CHARACTERISTICS OF HARMFUL FACTORS OF WORKING CONDITIONS OF INFECTIOUS DISEASES DOCTORS

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Abstract:

The article considers possible risk factors affecting the health of infectious disease doctors in the course of their work, suggests solutions for health protection and improving the efficiency of infectious disease doctors. The article is devoted to the study of physical and chemical factors of the objects under study. It was revealed that in all the studied rooms the microclimate parameters were not within the established hygienic standards.

Keyword

medical workers, infectious diseases doctors, working conditions, occupational hazards, microclimate, illumination.

Introduction

Relevance of the Topic

Medical workers, as well as workers in other industries, are exposed to a complex of adverse production factors that have a negative impact on their health in the course of their work.

Among the main factors of occupational hazards in health care workers, there are almost all hazards that are typical for most disadvantaged industries. Factors of occupational hazard of medical personnel of various profiles can be divided into 5 groups: mechanical, physical, chemical, biological and psychogenic factors [1-8].

Also, a negative impact on the health of medical workers is provided by a sliding work schedule and night shifts that disrupt the normal course of daily biological rhythms [1, 9, 10-12].

The internal environment of the premises affects the body by a complex of factors: thermal, air, light, color, acoustic. Acting in combination, these factors determine the well-being and performance of a person in an enclosed space.

This circumstance determines the relevance of the presented study, which has not only medical, but also social significance.

Purpose of the Study

To give a hygienic description of the harmful factors of the working conditions of infectious disease doctors (on the example of the Republic of Karakalpakstan).

Research Methods

Research Results

The study was carried out by the main workplaces of infectious disease doctors - ward rooms, internships, treatment rooms.

During a visual examination of the indicated working premises, it was noted that the dimensions of the premises generally correspond to hygiene requirements. Hygienic requirements for the microclimate of industrial premises make it possible to maintain a healthy, favorable environment for the human body at the workplace. They are contained in a regulatory document approved by the Decree of the Ministry of Health of the Republic of Uzbekistan SanPiN No. 0324-16 "Sanitary norms for the microclimate of industrial premises" and SanPiN No. 0020-22 "Sanitary rules and norms for the design, construction and operation of medical institutions", these documents are mandatory for compliance all organizations, institutions, enterprises, regardless of their form of ownership and legal form.

The warm and cold period of the year, the optimal parameters of air temperature are as the main indicator of the microclimate, they have a place for the recovery of the sick and the activity of health workers.

In all the studied rooms, the air temperature was 2-3 degrees below the optimal values. As for air humidity, the parameters of this indicator in all cases were also higher within the established hygiene standards.

During the warm period of the year, the air humidity at the measured points was within acceptable values, but the air temperature was 1-6 degrees higher than the optimal parameters. The speed of air movement is 1-2 times lower than the established SanPiN 0324-16 limit. The specified parameters of the microclimate in the warm period of the year can cause some tension in the thermoregulation function and increase the already high level of emotional stress of health workers.

In the cold season, the temperature in the internship and treatment rooms decreased by 2-3°C lower. Such microclimatic conditions do not provide a normal level of heat exchange between the organism of doctors and the environment and comfortable heat sensations. In the subjective analysis, the doctors complained about the “heating” microclimate during the warm period and about the “cooling” one during the winter period of the year.

In the rooms we studied, the illumination parameters of the workplaces were determined both by the nature and purpose of the rooms, their orientation, and the time of day and year. The KEO value, as well as the level of combined illumination of the studied rooms, basically corresponded to hygiene standards, but the level of artificial lighting in 35% of cases was lower than hygiene requirements by 60-70 lx. This is due mainly to the fact that in some rooms there are faulty lamps

As for the department of infectious diseases of the Beruni RMO, we have studied the premises of the buildings, which are adapted for the treatment of infectious diseases. This was manifested by the fact that in the studied rooms the KEO value is 25% lower than the norm, in connection with which artificial lighting is widely used in these buildings, which makes it possible to bring the level of general lighting of the rooms to the hygiene standard.

In the absence of artificial lighting, the level of illumination is 90-120 lux, which greatly complicates the work of staff.

In the air of hospital rooms there is almost always a large number of various chemicals, as well as microorganisms. The cleanliness of indoor air is of great importance both for the well-being of people and for the prevention of various diseases, including infectious diseases. In this regard, it is necessary to systematically control the chemical and bacteriological purity of the air in rooms where people are the main source of air pollution (residential premises, children's and medical institutions, public buildings).

Chemical substances in the air of the wards are represented by various products of anthropogenic origin (ammonia, hydrogen sulfide, mercaptans, indole, etc.), as well as disinfectants and medicinal substances in small concentrations. Chemical pollution of the air in hospital wards due to low concentrations of chemicals does not cause poisoning, however, it affects the general well-being of patients, causing headaches, a feeling of fatigue and weakness, and sleep disturbance. Air pollution in hospital premises also affects the performance of medical personnel; in addition, air pollution by drugs can be one of the factors in the occurrence of allergic diseases in medical staff. As a rule, the level of anthropogenic air pollution in hospital rooms characterizes the quality of their ventilation.

As indicators of the purity of the air in hospital premises, such indicators as the content of carbon dioxide, as well as the number of microbes in 1 cubic meter, are most often used. m. of air. The concentration of CO2, indicating the absence of anthropogenic air pollution in residential and public premises, is taken equal to 0.1% and below.

According to our data, in the air of the ward rooms and the staff room, we detected an increased concentration of CO2 (up to 0.25%) in the process of research in almost all objects.

Poor ventilation of the premises is evidenced by an increase in the humidity of these premises. We know that the increased humidity of the premises creates favorable conditions for the development of microorganisms, as well as an increase in the number of positive ions in 1 m3 of air during the working day. These unfavorable factors increase the risk of exposure to biological factors on the health of medical workers.

Conclusion

Thus, an effective means of improving the working conditions of health workers is to optimize the regime of work and rest, with the organization of intra-shift rest in specially equipped rooms, which, combined with microclimatic comfort and psychophysical unloading, will relieve excessive emotional and mental stress and largely restore working capacity.

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