

# Other occupational lung disease in Great Britain, 2018

Allergic alveolitis, byssinosis and allergic rhinitis

## Contents

<b>Other respiratory diseases</b>	<b>2</b>
<b>Farmer's lung and other allergic alveolitis</b>	<b>2</b>
Figure 1: Allergic alveolitis in Great Britain, 2007-2017	2
<b>Byssinosis</b>	<b>2</b>
<b>Allergic rhinitis</b>	<b>3</b>

The document can be found at: [www.hse.gov.uk/statistics/causdis/](http://www.hse.gov.uk/statistics/causdis/)



# Other respiratory diseases

## Farmer's lung and other allergic alveolitis

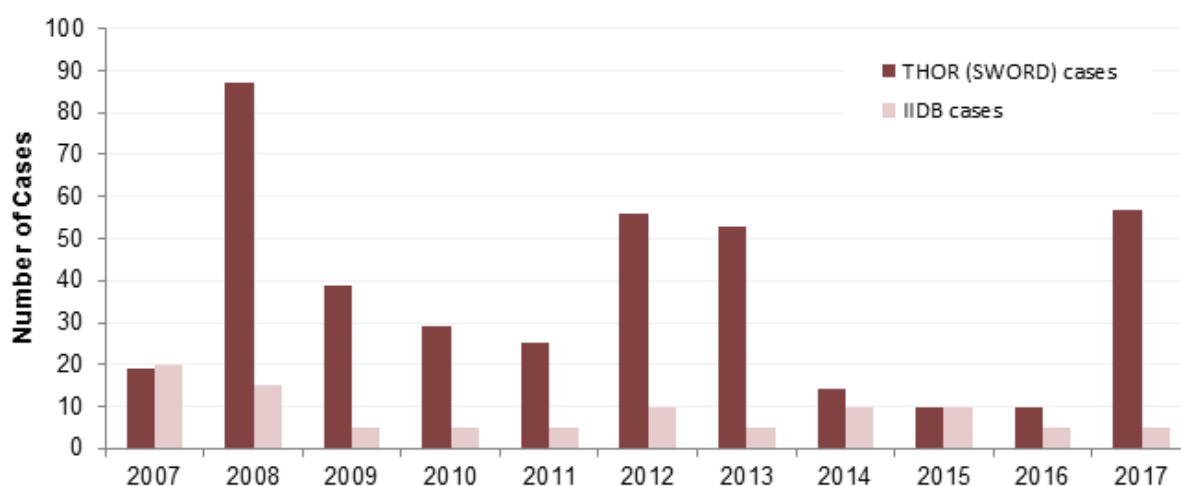
Extrinsic Allergic Alveolitis (EAA) is inflammation of the alveoli within the lungs caused by an allergic reaction to inhaled material. Farmer's lung, which arises from the inhalation of dust or spores arising from mouldy hay, grain and straw, is a common form of the disease. It is typically characterised by acute flu-like effects but can in some cases also lead to serious longer term effects on lung function.

There have typically been around 10 new cases assessed for Industrial Injuries Disablement Benefit (IIDB) each year over the last decade, with less than 10% of total cases among women (Table IIDB01 [www.hse.gov.uk/statistics/tables/iidb01.xlsx](http://www.hse.gov.uk/statistics/tables/iidb01.xlsx)).

There were 70 deaths where farmer's lung (or a similar condition) was recorded as the underlying cause over the last decade (Table DC01 [www.hse.gov.uk/statistics/tables/dc01.xlsx](http://www.hse.gov.uk/statistics/tables/dc01.xlsx)) of which 9 were women. As the disease only rarely progresses to a life-threatening level it is likely that there are substantially more cases than those receiving compensation.

Evidence from cases reported by chest physicians participating in SWORD scheme within The Health and Occupation Reporting (THOR) network supports this with the estimated number of new cases averaging 38 per year over the last 10 years, of which 30% were among women. In 2017 there were 57 cases; numbers were somewhat lower in the period 2014-2016 with 14 cases in 2014, and 10 cases in each of 2015 and 2016 (Table THORR01 [www.hse.gov.uk/statistics/tables/thorr01.xlsx](http://www.hse.gov.uk/statistics/tables/thorr01.xlsx)).

**Figure 1: Allergic alveolitis in Great Britain, 2007-2017**



One possible explanation for the smaller number of cases compensated than identified by chest physicians is that farmers, who constitute the largest group of sufferers, are often self-employed and therefore ineligible for compensation.

Recent research compared the causes of cases of EAA identified by chest physicians in 2010-2014 with cases identified in an earlier period 1996-2000 using SWORD data<sup>1</sup>. The estimated annual incidence was similar in both periods with about 25% of cases among women. The most commonly recorded agent in the most recent period was "metal working fluids, coolants and oil mist" which accounted for 33% of cases, whereas this accounted for only 2% of cases in the earlier period. Other commonly recorded agents – in both periods – were "Avian proteins", "Farming, hay, straw".

## Byssinosis

Byssinosis is an illness associated with exposure to cotton dust with both acute and, in some cases, long-term effects. It is typically characterised by asthma-like symptoms but can lead to irreversible reductions in lung function because of narrowed airways and lung scarring.

There are now relatively few workers employed within cotton processing in Britain and the number of cases assessed for IIDB has averaged less than 5 per year over the last decade (Table IIDB01 [www.hse.gov.uk/statistics/tables/iidb01.xlsx](http://www.hse.gov.uk/statistics/tables/iidb01.xlsx)). The number of deaths per year with byssinosis recorded as the

<sup>1</sup> CM Barber et al. (2015) *Epidemiology of Occupational Extrinsic Allergic Alveolitis reported to SWORD 1996–2014* Abstract P52, *Thorax*, 2015; 70 (Suppl 3) A102

underlying cause of death has been also low in the last decade; typically there have been five or fewer deaths a year, with a total of 13 for the decade (5 male and 8 female). There were no byssinosis deaths in 2016 (Table DC01 [www.hse.gov.uk/statistics/tables/dc01.xlsx](http://www.hse.gov.uk/statistics/tables/dc01.xlsx)).

## **Allergic rhinitis**

Allergic rhinitis is inflammation of the mucous membrane of the nasal airways produced by an allergic reaction. When caused by plant pollen it is typically referred to as hay fever, but it may be caused by a wide range of other substances that can be present in workplaces, substances that can also lead to occupational asthma. Allergic rhinitis is often characterised by common cold-like symptoms, but without a fever.

The annual number of cases assessed for IIDB has fallen over the last 10 years with 5 cases in 2017 compared with an average of around 25 per year over the last 10 years of which 12% were among women (Table IIDB02 [www.hse.gov.uk/statistics/tables/iidb02.xlsx](http://www.hse.gov.uk/statistics/tables/iidb02.xlsx)).

## National Statistics

National Statistics status means that statistics meet the highest standards of trustworthiness, quality and public value. They are produced in compliance with the Code of Practice for Statistics, and awarded National Statistics status following an assessment by the Office for Statistics Regulation (OSR). The OSR considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is Health and Safety Executive's responsibility to maintain compliance with the standards expected by National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the OSR promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.

An account of how the figures are used for statistical purposes can be found at [www.hse.gov.uk/statistics/sources.htm](http://www.hse.gov.uk/statistics/sources.htm).

For information regarding the quality guidelines used for statistics within HSE see [www.hse.gov.uk/statistics/about/quality-guidelines.htm](http://www.hse.gov.uk/statistics/about/quality-guidelines.htm)

A revisions policy and log can be seen at [www.hse.gov.uk/statistics/about/revisions/](http://www.hse.gov.uk/statistics/about/revisions/)

Additional data tables can be found at [www.hse.gov.uk/statistics/tables/](http://www.hse.gov.uk/statistics/tables/).

General enquiries: Statistician [Andrew.Darnton@hse.gov.uk](mailto:Andrew.Darnton@hse.gov.uk)

Journalists/media enquiries only: [www.hse.gov.uk/contact/contact.htm](http://www.hse.gov.uk/contact/contact.htm)

© *Crown copyright* If you wish to reuse this information visit [www.hse.gov.uk/copyright.htm](http://www.hse.gov.uk/copyright.htm) for details.  
First published 10/18.