Other respiratory diseases in Great Britain 2016

Allergic alveolitis, rhinitis and byssinosis in 2015/16

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Summary

The document can be found at: www.hse.gov.uk/statistics/causdis/other-respiratory/

Farmer’s lung and other allergic alveolitis

- The estimated number of new cases reported by respiratory physicians (THOR-SWORD) each year has fluctuated, averaging 38 per year over the last 10 years.
- Estimated numbers were somewhat lower in the latest two years with 14 cases in 2014 and 10 cases in 2015.
- Numbers of annual deaths and Industrial Injuries Disablement Benefit cases have typically been similar in recent years with an average of 8 per year over the last decade.

Allergic rhinitis

- Numbers of new cases assessed for IIDB each year have reduced over the last decade.
- There were 15 new cases assessed for IIDB in 2015. The average number of new cases each year over the last 10 years was 32.

Byssinosis

- Annual deaths and Industrial Injuries Disablement Benefit cases continue to be very low: there were on average less than 5 deaths and IIDB cases per year over the last 10 years. There are now relatively few workers employed within cotton processing in Britain.
Farmer's lung and other allergic alveolitis

Extrinsic allergic alveolitis is inflammation of the alveoli within the lungs caused by an allergic reaction to inhaled material\(^1\). Farmer's lung, which arises from the inhalation of dust or spores arising from mouldy hay, grain and straw, is the most 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 were, on average, 8 new cases assessed for disablement benefit each year during the period 2006-2015 (Table IIDB05 www.hse.gov.uk/statistics/tables/iidb05.xlsx).

Annual deaths where farmer's lung (or a similar condition) was recorded as the underlying cause are of a similar number, again with an average of 8 deaths per year over the last decade (Table DC01 www.hse.gov.uk/statistics/tables/dc01.xlsx). The disease only rarely progresses to a life-threatening level, and this suggests that there are substantially more cases than those receiving compensation.

Evidence from THOR-SWORD (www.hse.gov.uk/statistics/sources.htm#thor) supports this with the estimated number of new cases identified by chest physicians averaging 38 per year over the last 10 years, although numbers were somewhat lower in the latest two years with 14 cases in 2014 and 10 cases in 2015 (Table THORR01 www.hse.gov.uk/statistics/tables/thorr01.xlsx). 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 extrinsic allergic alveolitis identified by chest physicians in 2010-2014 with cases identified in an earlier period 1996-2000 using THOR-SWORD data\(^2\). The estimated annual incidence was similar in both periods with about 75% of cases among men. 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”.

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 such, but without a fever.

The annual number of cases assessed for IIDB has fallen over the last 10 years with 15 cases in 2015 compared with an average of 32 per year over the last 10 years (Table IIDB02 www.hse.gov.uk/statistics/tables/iidb02.xlsx).

Byssinosis

Byssinosis is an illness associated with exposure to cotton dust with both acute and, in some cases, longer 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 period 2006-2015 (Table IIDB05 www.hse.gov.uk/statistics/tables/iidb05.xlsx). The number of deaths per year with byssinosis recorded as the 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 19 for the decade (8 male and 11 female). There was 1 byssinosis death in 2014 (Table DC01 www.hse.gov.uk/statistics/tables/dc01.xlsx).
References


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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 Authority 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].

For information regarding the quality guidelines used for statistics within HSE see [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/].

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

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