ORIGINAL ARTICLE

Prevalence of Impaired Lung Function and Quality of Life in Flour Mill Workers in Ahmednagar City: An Observational Study

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ABSTRACT:

Background: A major problem in developing countries is indoor air pollution and in India a major problem is the lack of awareness. A study says that flour mill workers, on average are exposed to such an environment for 8-10 hrs. a day. This prolongs exposure to flour mill dust and poor ventilation leads to respiratory complications. St. George's respiratory questionnaire is one of the reliable methods to quantify health status in patients with chronic airflow limitation and also, peak expiratory flow rate (PEFR) has been proven to be a useful tool in assessing airway obstruction⁹ which is common in flour mill workers. **Procedure:** The 50 flour mill workers was selected for study according to the inclusion and exclusion criteria. The PEFR values and St. George Questionnaire was taken and the domains affected were seen. **Result:** The prevalence of respiratory problems in flour mill workers was 71%. **Conclusion:** There is a higher prevalence of respiratory problems in flour mill workers was to flour mill dust and poor ventilation.

Key words: Flour mill workers, Respiratory problems, PEFR, St. George Questionnaire.

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INTRODUCTION

lution. This indoor air pollution is increasing day by day against flour mill dust were excluded. The PEFR values due to swift in industrialization and unproductive pollution were taken by using the peak flow meter and St. George control measures. A major problem with developing coun- Questionnaire was filled by the workers and data were coltries like India is lack of awareness. This leads to an in- lected for the analysis. creased impact of indoor air pollutants on human health. **RESULT**: The study was conducted on 50 flour mill workstudy says that flour mill workers, on average are exposed the flour mill workers. to such an environment for 8-10hours a day. This leads to poor ventilation leading to the accumulation of flour dust in the workplace environment. This prolongs the exposure of workers to fine dust leads to respiratory and pulmonary problems.² The most sensitive amongst this population includesindividuals with COPD, CVD and ones suffering from influenza and asthama.^{2,3,4}

Chronic lung problem is a result of prolonged exposure to dust.⁵ Hence, in order to investigate the health effects of flour dust exposures, it is necessary to predict the risk fac- Fig 1: Prevalence of Resp. problems in flour mill workers amongst these workers. St. George's respiratory question- In the present study, the flour mill workers showed respirous domains like-dyspnea, fatigue and persistent cough symptoms were more prevalent among flour mill workwith excessive sputum⁸.

be a useful tool in assessing airway obstruction⁹ which is tivitis, allergic and baker's asthma, wheezing, febrile reaccommon in flour mill workers.9

cumulation of flour dust in the workplace environment. monary disease.¹³ Long-term exposure of workers to this flour mill dust leads The mechanism of these respiratory problems was suggestto respiratory and pulmonary problems so this study was ed by J. Minov et al. in 2006. He said that the flour dust parconducted to find out the impaired lung function and quali- ticles easily enter the respiratory tract of an exposed perty of life in flour mill workers. So the main of the study was son. These particles attach to the inner wall of the respirato find the prevalence of impaired lung function and quality tory tract and disturb the process of inhalation and exhalaof life in flour mill workers.

study was conducted on 50 flour mill workers in Ahmedna- irritation in the respiratory tract.¹⁴ gar. The workers who had to work in a flour mill in the last

5 years for 8-10 hours per day, 6 days in a week were se-A major problem in developing countries is indoor air pol- lected and the workers who had using protective measures

Flour mill workers are one victim of indoor air pollutants. ers. The unpaired t test was used and p-value <0.001 is The American Conference of Governmental Industrial Hy- considered statistically significant. This study shows pgienists (ACIGH) defines 'flour' as organic dust containing value greater than 0.01 i.e. 0.69 so it not statistically significereals.¹Flour mills produce a large amount of flour dust. A cant but the clinically study shows reduce values of PEFR in



tors that can cause asthmatic response.⁶ There are various **DISCUSSION**: The present study shows reduce values of measures available for measuring discomfort experienced PEFR and affected domains of the St. George questionnaire. naire is one of the reliable method to quantify health status atory problems due to the prolonged exposure of flour in patients with chronic airflow limitation.⁷ which has vari- dust. The C. Gimenezallet al. in 1995 said that respiratory ers10,11,12 and flour mill workers have been reported to ex-Also, peak expiratory flow rate (PEFR) has been proven to hibit a variety of clinical manifestations, including conjunctions, grain fever, lung fibrosis, rhinitis, allergic alveolitis, **NEED FOR STUDY**: The poor ventilation leading to the ac- impairment of lung function, and chronic obstructive pul-

tion of air. The inner cell wall of the respiratory tract does MATERIAL AND METHODOLOGY: This observational not accept the foreign particles (flour dust), causing a slight

CONCLUSION

There is a higher prevalence of respiratory problems in flour mill workers due to prolonged exposure to flour mill dust and poor ventilation.

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