Fellow MOEMA Members:

I hope everyone is enjoying the spring. The Michigan Occupational Health Conference (MOHC) Planning Committee has been working diligently to ensure that Michigan and other regional Occupational Health physicians and nurses have quality CME near to home.

MOHC will be held this year on Friday & Saturday September 23 and 24th in Bay City, Michigan at the Doubletree Riverfront Hotel. This is a fantastic venue right on the Saginaw River in the heart of historic downtown Bay City. If you want to bring your significant other and make a weekend of it, Thursday night September 22nd right in Downtown is Bay City’s annual Wine Walk. The description on the website reads: “Enjoy and stroll with friends old and new while tasting some of the best in vintages throughout pubs and specialty shops in Downtown Bay City.” The Doubletree will be the perfect spot from which to enjoy this event.

We are for the second year being joined by the Michigan Association of Occupational Health Nurses for the fall conference. Last year’s inauguration of this event, planned by Dr. Peter Metropoulos in conjunction with the nurses, was successful, allowing for much-needed interaction between occupational health practitioners in the state. We are pleased that the nurses have chosen to join forces with us again this year.

Our meeting has been approved by ACOEM, thanks to efforts by Dr. Saima Siddiqui, for 13 hours of CME. The meeting is also approved for MOC credits by the American Board of Preventive Medicine. Providers should note that starting in August 2011, all ABMS member boards (including ABPM) will be required to report the MOC participation status of all diplomates, including those with lifetime certificates. This is your opportunity to obtain these credits close to home.
From the President — Continued

For this year’s meeting we are taking a new tack with half-day themes. We are excited to be bringing in many national experts for this year’s meeting. Topics for the meeting include:

1. **Work-Related Upper Extremity Conditions: Etiology, Diagnosis, Treatment, Causation Determination, and Application of the ACOEM Practice Guidelines.** Dr. Tony Burton is the course director. We are thrilled that Dr. Kurt Hegemann, Editor-In-Chief of ACOEM’s *Occupational Medicine Practice Guidelines* will be speaking.

2. **Current Topics in Environmental Health.** This will include our Carey-Pratt-McCord Lecture, planned by Dr. James Blessman. The speaker will be Industrial Hygienist Roger Wabeke, who will give his talk on Hobby Poisons. Other session topics will include Urban Gardening and Dioxin.

3. **First Responders.** Speakers will included Dr. Fabrice Czarnecki, one of the authors of the newly published *ACOEM Guidance for the Medical Evaluation of Law Enforcement Officers*. Additional speaker will be Jerold James, Chief of EMS for the City of Detroit.

As part of the meeting, ACOEM will be sponsoring a **Faculty Series** entitled *Shift Work and Sleep – Optimizing Health, Safety, and Performance*. ACOEM will be bringing in Dr. Phyllis Zee- Associate Director, Center for Sleep & Circadian Biology at Northwestern University- to present this program. A separate flyer for this program will be sent to you with the conference brochure. No separate registration is needed.

In addition to the MOHC, MOEMA will again be sponsoring a half-day session at the Michigan State Medical Society Annual Scientific Meeting on October 26, 2011. Dr. Patrick Stover is planning this meeting and has excellent speakers planned. More information to follow.

We are anticipating a large turnout at MOHC this year and hope each of you will be there to share in this exciting event.

We look forward to seeing you all in Bay City!

Deborah S. Heaney, MD, MPH, FACOEM
MOEMA President

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**NOTICE TO MOEMA MEMBERS**

- The MOEMA Annual Membership Business Meeting will be held on Friday, September 22, 2011 at 11:45 AM.
- The MOEMA Nominating Committee is in the process of finalizing the ballots for openings on the MOEMA Board. Look for ballots will be coming in the mail soon. If you didn’t volunteer to be nominated for service on the MOEMA board of directors this year, it isn’t too late to submit your name for next year.
- The CAREY PRATT MCCORD Educational Program will once again take place as part of the MOEMA Annual Scientific Meeting in September.
- MOEMA members are encouraged to submit news about themselves, articles pertinent to the membership, and other contributions for the next (Summer MOEMA UPDATE) newsletter.
- Monitor the MOEMA Web Site at www.moema.org for updates on all MOEMA activities, conference updates, and other MOEMA news.
MOEMA 2011 ASM
MOEMA Annual Scientific Meeting
Current Topics in Occupational & Environmental Medicine

Held jointly by the

MOEMA - Michigan Occupational & Environmental Medicine Association
MAOHN - Michigan Association of Occupational Health Nurses

CME / CEU Credits Pending

Friday & Saturday, September 23rd & 24th, 2010
at the
Doubletree Riverfront Hotel
Bay City, Michigan

DOWNTOWN BAY CITY “WINE WALK”

Arrive early on Thursday and attend the 12th annual Bay City Wine Walk. Enjoy an evening event that showcases all of Downtown Bay City's fantastic eateries and pubs. This event attracts hundreds each year who meet and make friends and enjoy a great feeling of community. The sounds of musical entertainment around every corner add to the pleasure of strolling historic Downtown Bay City on a beautiful fall evening.

Wine Tasting Admission: $30
Downtown Bay City, MI 48708
Thursday, September 22, 2011 from 5:00 pm to 10:00 pm
Visit us at: www.downtownbaycity.com

BAY CITY “RIVER OF TIME”, FRIDAY - SUNDAY, September 23 - 25.
Travel back in history to the time when the pioneers settled in Bay City.
The Michigan Occupational Health Conference
Educational Program

Friday, September 23rd, 2011

7:00 AM: Registration and Continental Breakfast
7:45 AM: Welcome Day 1
Deborah Heaney, MD, MPH,
President - MOEMA

8:00-11:45 AM: Session
9:45-10:00 AM: Break, Exhibits

Work-Related Upper Extremity Conditions:
Etiology, Diagnosis, Treatment, Causation
Determination, and Application of the
ACOEM Practice Guidelines

Anthony Burton, MD, MPH, Session Director -
Introduction to Session and Case Presentations
Kurt Hegmann, MD, MPH – Medical Aspects;
ACOEM Practice Guidelines/Strength of Evidence;
Case Discussions
Leonard M. Hickey, BA, JD – Legal Causation/Case
Discussions

11:45 AM:
MOEMA Annual Business Meeting
MAOHN Annual Business Meeting (and lunch)

12:15 PM: Luncheon MOEMA
Current Topics in Environmental Health

1:15-1:20 PM: James Blessman, MD, MPH
Introduction to Session

1:20-2:15 PM:
Carey Pratt McCord Lecture
Roger Wabeke: CIH, CHMM, PE – Hobby Poisons

2:15-3:15 PM: Shawn P. McElmurry, Ph.D., P.E
Urban Farming-Scientific Aspects of Soil Lead and
Bioavailability in Humans

3:15-3:30 PM: Break, Exhibits

3:30-4:30 PM:
James J. Collins, PhD, MS &
Catherine M. Bodnar, MD, MPH
Dow Epidemiology Studies Among Workers
with Exposure to Dioxins

4:30-5:30 PM: Panel Discussion
6:00 PM-7:30 PM
Reception For Attendees

Saturday, September 24th, 2011

7:00 AM: Registration & Continental Breakfast
7:45 AM: Welcome Day 2
Sheryl Ebaugh, RN, MPH
President - MAOHN

8:00-11:45 AM: Session
9:45-10:00 AM: Break, Exhibits
Saima Siddiqui, MD, MPH; James Blessman,
MD, MPH - Introduction to Session

12:15 PM: Luncheon
Current Topics in Occupational Health

1:15-2:15 PM: ACOEM Faculty Series:
Phyllis Zee, MD, PhD– Shift Work and Sleep:
Optimizing Health, Safety, and Performance

2:15-3:15 PM: Bengt Arnetz, MD, PhD–
Stress & Strategies for Employee Resiliency

3:15 PM: Wrap-up / Certificates / Adjournment

Conference Registration
Contact: Karen Carter at MOEMA
C/O Wayne County Medical Society
Phone: (313) 874-1360, Ext. 303
Email: kcarter@msms.org

MOEMA Members
One-Day Attendance: $170.00
(Either Friday or Saturday)
FULL Conference Attendance: $250.00

MAOHN & MIHS Members
Check with respective organizations for conference fees &
program details - MAOHN Conference $125, Full MOHC $200

Hotel Reservations
Contact the Hotel directly at:

Doubletree Hotel - Bay City Riverfront
One Wenonah Park Place
Bay City, Michigan 48708

Telephone: (989) 891-6000

Conference Room Rates: $ 115 per Night
(Mention the Michigan Occupational Health Conference to obtain
the conference rates, available until 09/01/2011.)
Looking Back at MOEMA ASM 2010

MOEMA President, Dr. Peter Metropoulos addresses the attendees at the 2010 MOHC in Port Huron, Michigan.

Above left, Doug Kalinowski, MIOSHA Director, and Dr. Kenneth Rosenman, Michigan State University CHM, prepare to speak. Right, the new MOEMA Board is introduced at the Annual Membership Business Meeting. Below, Dr. Dan Michael, President of the Michigan State Medical Society poses with Dr. Metropoulos, and addresses the conference attendees during lunch.
Thomas Edison Inn — Port Huron, Michigan

A view of the Thomas Edison Inn gardens on the St. Clair River with Past President, Dr. George Metropoulos on the right, and the MOEMA Board meeting below, as a lake freighter passes outside the Inn as it approaches the Bluewater Bridge heading into Lake Huron.

Left. Incoming MOEMA President, Dr. Deborah Heaney, accepts the president’s gavel from outgoing president, Dr. Peter Metropoulos. Right and below, the conference attendees enjoy Oktoberfest to the musical stylings on the grand piano. Below left are past presidents Dr. Cheryl Sulisz, Stan Miller, and Tony Burton.
First responders (e.g., law enforcement professionals, military personnel, and disaster relief workers) play a vital role defending the nation, participating in peacekeeping operations, and maintaining civil society (Benedek, Fullerton, & Ursano, 2007). They are, however, at risk of exposure to myriad traumatic stressors with potentially adverse effects on their mental and physical health, occupational and social functioning, and job performance (Marmar et al., 2006; Arnetz et al., 2009). But amidst all the high-intensity, job-derived stressors, they are also exposed to low-grade, stressors. The term low-grade stressor refers to non-life-threatening experiences. These may include stress caused by preparations for future critical incidents, concerns about a colleague’s or team’s ability to perform duties, organizational problems, and work-family conflict. Although common but far less dramatic than traumatic events, low-grade stressors can potentially be remedied with the help of organizational change or interventions. Furthermore, evidence is mounting that low-grade stressors may adversely affect the first responder’s mental well-being. The body’s psycho-physiological response system, which includes the cortisol-secreting adrenal glands, is designed to manage short-term and defined threats, not sustained, difficult-to-define, low-intensity stressors. First responders may prove less resilient when exposed to high-intensity, short-duration job stressors because their resources are drained by background low-grade stressors. Only a limited amount of data bearing on low-grade job-derived stressors among first responders is so far available. The little research that exists has targeted organizational and supervisory factors and, to a lesser degree, work-family conflict (Heart, Wearing, & Headey, 1993). Furthermore, despite many similar job duties among first responders, research has typically targeted specific groups (e.g., police or military) rather than examining stressor similarities across groups (McCreary & Thompson, 2006).

As part of a larger multi-year research effort concerning stress, health, and performance, my colleagues and I carried out structured focus-group interviews with a total of seventeen first-line, non-supervisory first responders representing all major branches of Swedish first response agencies, including police, defense, coast guard, and EMS. We wanted to find out a number of things about this sample:

- The extent to which they attributed a link between health and well-being, on one hand, and job-derived stress, on the other.
- How they defined job-induced, low-grade stress
- How stress is affected by number of years of experience and prior job- and non-work-related trauma as well as by partners’ perceived competence, and
- Strategies to recover from job stress

The focus-group interviews yielded major themes reflecting the job conditions that contribute to low-grade stress. Some of these themes were anticipated. For example, first responders were concerned about the impact of any organizational change that expands their duties. However, other themes were less obvious. For example, they mentioned the long hours when nothing happens, yet they must remain mentally sharp and prepared to manage the worst possible situation. A firefighter mentioned the challenge of being awakened in the middle of the night and having to go from “0 to 100” in a matter of seconds. Long periods of being physically inactive were also perceived as a stressor by first responders working in undercover surveillance. One respondent noted that “alarms make up 5% of my time….and that is the exciting part, the core of my job.” Others found the job exhausting when a whole day went by and nothing happened. Another theme concerned the setting of high self-imposed standards that frequently resulted in feelings of underperforming. Not being familiar with a partner’s skills was another source of low-grade stress. No good way exists for establishing the competence and likely behavior of a partner with whom a first responder has not previously worked. Gender was a topic the mixed-gender groups approached with some hesitation. Both firefighters and police reported many ongoing discussions in their departments about the sufficiency of admission tests. For example, were women firefighters strong enough to pull out a heavy male fire-
fighter in full protective equipment trapped in a burning house? Others argued that even male firefighters could not manage obese firefighters in such situations. Most police preferred mixed-gender teams because they perceived women officers to be better at applying verbal skills to de-escalate heated confrontations with the public. First responders also reported that they felt respect for their profession was decreasing. For example, they saw the public increasingly protesting and questioning their activities. The client/target population was also becoming more threatening, with crimes against first responders more violent. Threats to their families were not uncommon, which caused them to feel less secure. The unpredictability of the situations to which first responders were exposed was also mentioned as a low-grade stressor. First responders also discussed how job-induced stressors affected their health, well-being, and off-duty behavior. Difficulties winding down, poor sleep, lack of exercise, and compensatory eating and drinking were common complaints. Furthermore, many participants reported that job-derived stressors resulted in their being more irritable and on edge at home with their families. They also faced difficulties sharing their experiences with significant others who “had no idea about today’s realities.” Such difficulties further alienated first responders from their families and sources of social support.

A final area of interest was the strategies used by first responders to recover from job-induced, low-grade stressors. Defusing, i.e., reflecting over the past workday with colleagues, was very common. Exercise, spending time alone in nature, and being involved in various team sports, often as instructors, were also common. So was spending downtime with the family. Overall, themes that recurred in the focus-group interviews represented different aspects of security—physical, psychological, and professional. Low-grade stressors, perhaps typically not part of occupational stress research among first responders, nevertheless play an increasingly important role in the health and well-being of first responders. Most likely, occupational health and stress research involving workers in other industries would benefit by examining low-grade stressors, which potentially could worsen the effects of high-intensity stressors. We used the themes derived from the focus groups to design a survey of low- and high-grade stressors, health, and performance among first responders. We surveyed a larger and more representative sample of first responders. We hope that data from this ongoing survey will provide a better understanding of the complex interaction between high- and low-grade stressors, health, and performance. What we learn from such a study promises to be useful in designing intervention strategies to improve first responders’ health and performance. We are also incorporating these results into an ongoing NIH/NIMH funded study on the feasibility and efficacy of using imagery training to counteract stress and trauma-related mental and behavioral disorders. The study is done in close collaboration with the city of Detroit Police Department.

Summary
First responders are exposed not only to high-intensity/stress, e.g., responding to a 911 call, but also sustained, low-grade stress. Low-grade stress occurs, for example, when first responders must be constantly prepared for a dramatic event that rarely or never occurs. Using focus groups, we were able to identify common low-intensity stressors among different first-responders, as well as how they perceived the impact of the stressors on their health and performance, and the means they used to recover. This knowledge was applied to the design of a questionnaire which we currently use to assess low- and high-grade stressors among first responders as well as health and performance. Occupational health and stress research involving other job sectors could benefit from considering not only the typical work and organizational stressors, but also the less dramatic, but important, low-grade stressors.

References:
WIM-Workability in Michigan Continues Efforts on Preventing Needless Work Disability in the State

WIM-Workability in Michigan is a state-based not-for-profit organization of volunteer experts whose mission is to prevent needless work disability by helping ill and injured people remain employed in Michigan. WIM-Workability in Michigan was inspired and fostered by The 60 Summits Project, which is taking a grass-roots approach to transforming North American disability benefits and workers’ compensation systems and the outcomes they produce.

The mission of WIM-Workability in Michigan is to prevent needless work disability by sharing educational opportunities and propagating the new work disability prevention paradigm as described in the guidance document *Preventing Needless Work Disability by Helping People Stay Employed* from the American College of Occupational and Environmental Medicine.

Following a feasibility meeting in September 2009, a planning committee was formed to focus statewide efforts on this issue. Several MOEMA members played important roles in this process. We held a multi-stakeholder meeting, The Michigan Summit on Workability, in Lansing on April 30 and May 1, 2009. MOEMA was one of many sponsors of this event. Over 100 participants, representing a cross-section of stakeholders were present at the meeting. As an outcome, WIM-Workability in Michigan formed several action groups, committed to implementing the goals of the organization; the group continues to meet on a regular monthly basis.

The current leadership of WIM-Workability in Michigan is:

Anthony Burton, MD; Chair
Dean Grace, DO; Co-chair
Ardon Schambers; Treasurer
Wendy Greene, RN, CCM, CPDM; Secretary

The 60 Summits Project has gained traction and has generated activity throughout North America. In fact, Jennifer Christian, MD MPH, founder and Chair of the 60 Summits Project, in recent years has received awards acknowledging this work. She was one of six to receive President’s Awards at the 94th Annual IAIABC (International Association of Industrial Accident Boards & Commissions) Convention in Vancouver, BC. was named as one of Risk & Insurance magazine’s 2008 Risk Innovators, and was also named as one of seven “Responsibility Leaders,” an award sponsored by Liberty Mutual.

WIM-Workability in Michigan has several Action Groups whose mission is to foster the implementation of the recommendations from the ACOEM statement. As in any volunteer not-for-profit organization, the work is a labor of love, driven by the desire to improve how stay-at-work and return-to-work processes are managed in Michigan. If you have an interest in the organization, please contact Dr. Burton (email: anthony.burton@gm.com), or visit the web sites listed below.

In recognition of the importance of the activities of WIM-Workability in Michigan, and its relevance to the work of MOEMA, the MOEMA Board of Directors, at its meeting in June 2011, voted to provide financial support to the organization.

Find out more:

- For Michigan information, go to: http://www.workabilityim.org/
- For information about The 60 Summits Project, go to: http://www.60summits.org/

Anthony Burton, MD, MPH
WIM-Workability in Michigan, Chair
Past President, MOEMA
2011 MOEMA SEMINAR
Afternoon Session
at the
146th MSMS Annual Scientific Meeting

Wednesday through Friday, October 26 - 29, 2011
at the
Somerset Inn
Troy, Michigan

COURSE DIRECTOR: Patrick Stover, MD, MPH
MOEMA Vice President

MSMS CONFERENCE REGISTRATION:
Phone: Call the MSMS Registrar at (517) 336-5785, or

EDUCATIONAL PROGRAM:
Psychiatric Return to Work Issues
Don Jones, MD
Psychiatrist

Teresa Bartlett, MD
Medical Director
Sedgwick CMS
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