Occupational Exposure to Noise and Prevalence of Hearing Loss among Workers in Thamine Textile Mill, Myanmar

Aung Khin ZAW¹, Aung Min MYAT², Mya THANDAR³, Ye Minn HTUN⁴, Than Htut AUNG⁵, Kyaw Myo TUN⁶, Zaw Myo HAN⁷



¹ Department of Research and Development, Defence Services Medical School, Hmawbi, Myanmar ² Department of Public Health, Ministry of Health and Sports, Naypyidaw, Myanmar ³ Department of Environmental and Occupational Health, University of Public Health, Yangon, Myanmar ⁴ Outpatient Department, No.3 Military Hospital (300 bedded), Kyaing Tong, Myanmar ⁵ Department of Health Promotion, Health and Disease Control Unit, Naypyidaw, Myanmar ⁶ Department of Preventive and Social Medicine, Defence Services Medical Academy, Yangon, Myanmar ⁷ Defence Services Liver Hospital, Yangon, Myanmar



1.00

2.88 (1.13-7.37)

agkhnz86@gmail.com

Educational level #

Introduction

Objectives

- In developing countries, occupational noise exposure is a second most selfreported occupational illness with functional, social, emotional and economic impacts on industrial workers.
- Hearing loss is an occupational hazard especially facing by textile workers.

Variables		Hearing Loss <i>n</i> (%)		Bivariate analysis		Multivariate analysis ⁺	
		Absent	Present	p value	COR (95% CI)	p value	AOR (95% CI)
Demographic fa	actors						
Gende	r						
	Male	9 (60.0)	6 (40.0)		1.00		
	Female	159 (75.4)	52 (24.6)	0.20	0.49 (0.17-1.44)		
Age							
	< 35 years	118 (89.4)	14 (10.6)		1.00		1.00
	≥ 35 years	50 (53.2)	44 (46.8)	0.001	7.42 (3.73-14.73)	0.001	6.90 (3.45-13.82)
		00 (00.2)	(- 0.0)	0.001	1.42 (0.10 14.10)	0.001	

Main objectives of this study -

- to explore level of noise exposure
- to determine factors associated with hearing loss among textile workers

Materials and method

- A cross-sectional descriptive study was conducted at Textile Mill (Thamine), Yangon Region from April to December 2018.
- In total, 226 workers were selected using simple random sampling from three weaving sections and interviewed face-to-face by two interviewers using structured questionnaires.
- Noise exposure level was measured by a hygiene officer using digital sound level meter (Model – 407732) as a mean value of 15 measurements hourly during working time for eight hours and 8-hr TWA was recorded. Then, average noise exposure level of 8-hr TWA on five separate days was taken.
- The assessment of hearing loss was done by using pure-tone audiometer (Model – AS5-AOM, 08026 Barcelona-Spain, Sibelmed). Audiometric test was performed by a trained technician.
- To identify hearing loss, an otolaryngologist assessed the audiograms, and then an occupational physician confirmed the diagnosis of hearing loss.
- Logistic regression analysis was performed to determine the associated factors of hearing loss.

	≥ High school education level	132 (78.6)	36 (21.4)		1.00					
	< High school education level	36 (62.1)	22 (37.9)	0.01	2.24 (1.18-4.27)					
	Current weaving sections									
	Water jet loom	55 (73.3)	20 (26.7)		1.00					
	Towel loom	54 (72.0)	21 (28.0)	0.86	1.07 (0.52-2.19)					
	Bed sheet loom	59 (77.6)	17 (22.4)	0.54	0.79 (0.38-1.67)					
Risk beh	naviours									
	Smoking									
	No	163 (75.1)	54 (24.9)		1.00					
	Yes	5 (55.6)	4 (44.4)	0.20	2.42 (0.63-9.32)					
Alcohol drinking										
	No	167 (74.9)	56 (25.1)		1.00					
	Yes	1 (33.3)	2 (66.7)	0.15	5.96 (0.53-67.04)					
	Loud music listening									
	No	138 (73.0)	51 (27.0)		1.00					
	Yes	30 (81.1)	7 (18.9)	0.31	0.63 (0.26-1.53)					
Health p	roblems									
	Hearing difficulty									
	No	162 (77.1)	48 (22.9)		1.00					
	Yes	6 (37.5)	10 (62.5)	0.001	5.63 (1.95-16.27)					
	Tinnitus									
	No	156 (77.6)	45 (22.4)		1.00					
	Yes	12 (48.0)	13 (52.0)	0.01	3.76 (1.60-8.80)	0.03				
	Headache									
	No	155 (74.5)	53 (25.5)		1.00					



(n=226)

- The workers had poor awareness on NIHL and self-protective measure by using personal protective device (PPD) at workplace.
- Age related hearing loss was one of the most common causes of high frequency hearing loss and its effect began around the age of forty. A phenomenon of presbycusis which was loss of hearing that gradually occurs in older age.

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- A hearing conservation program should be immediately implemented for effective prevention and control of hearing loss when the workers exposed to equal and exceed 85 dB(A).
- Installing quieter equipment in work process, enforcing usage of PPD in workplaces, and applying work practices are the critical elements for noise control.
- Local national authority should focus on noise monitoring, occupational policies, providing education for NIHL, periodic audiometric safety assessments and follow up evaluation for hearing threshold shift.

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