Occupational Health Hazards Related to Chemotherapy among Healthcare Providers

Thesis

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By

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I would like to dedicate this thesis to my family to whom I will never Find adequate words to express my gratitude

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List of Contents

Title Page	
List of Abbreviations	I
List of Tables	II
List of Figures	VI
Abstract	VII
Introduction	1
Significance of the study	4
Aim of the study	6
Review of literature	
Part I: Chemotherapy and health hazards	7
- Classification of Chemotherapeutic Agents	7
- Routes of exposure to Chemotherapy	9
- Health hazards of chemotherapy	11
-Occupational health issues related to handle of l	hazard
drugs	14
Part II: Chemotherapy and safety measures	19
- The health care providers in chemotherapy field	19
- Health and safety measures to chemotherapy	20
- Personal Protective Equipment for Hazardous	Drug
Handling	21
-Managing the risk of occupational exposu	ire to
chemotherapy	33
Part III: Heath team compliance to safety measures	36



Part IV: Role of Nurse toward chemotherapy hazar	ds control
among health care providers	38
Subjects and methods	49
Limitations of the study	56
Results	57
Discussion	86
Conclusion	102
Recommendations	103
Summary	104
References	111
Arabic Summary	

List of Abbreviation

Abbreviation	Mean of abbreviation
AHFS	American Hospital Formulary Service
CBC	Complete Blood Count
CFR	Code of Federal Regulations
CDC	Centers for Disease Control.
CDs	Chemotherapy Drug
CM	Centimeter
CNS	Central Nervous System
DNA	Deoxyribonucleice Acid
DOSH	Drug Organization Safety and Health.
EPA	Environmental Protection Agency
HCPs	Health Care Provide
HCWs	Health Care Worker

€List of Tables &

HD Hazard Drugs

IV Intra Venous

MRSA Methicillin and

Aminoglycoside

Resistant

Staphylococcus

Aureus.

NIOSH National Institute for

Occupational Safety

and Health

OH Occupational Health

OHN Occupational Health

Nurse

OSHA Occupational Safety

and Health Agency

PPE Personal Protective

Equipment

RCRA Resource

Conservation and

Recovery Act

RNA Ribonucleic Acid

USA United states of

America

WHO World Health

Organization

List of Tables

Title	Page			
Review				
Routes of Exposure to Hazardous Drugs.	10			
Personal Protective Equipment for Hazar	dous			
ing	22			
Management of Accidental Exposure to				
Drugs	35			
Results				
Distribution of the studied health ca	re			
providers according to their socie	0-			
demographic characteristic	58			
Distribution of health care provide	rs			
according to their working condition	on			
during handling of chemotherapy	60			
Distribution of health care provide	rs			
according to thier obstetrical history	61			
Distribution of health care provider	c's			
according to their satisfactory sco	re			
level of knowledge abo	ut			
chemotherapy& health hazards				
Table (5): Distribution of the health care provider's				
according to their satisfactory sco	re			
	Routes of Exposure to Hazardous Drugs. Personal Protective Equipment for Hazarding			

€List of Tables ∠

	level of knowledge about medical	
	examinations required for workers at	
	risk of dealing with the chemotherapy	
	drugs.	63
Table (6):	Distribution of health care provider's	
	according to stated health problems	
	relevant to exposure of chemotherapy	
	drugs and productive health	64
Table (7):	Distribution of health care providers	
	according to total satisfactory score level	
	of knowledge about hospital	
	administration rules	65
Table (8):	Percentage distribution of the health care	
	provider's according to availability of	
	safety measures during preparation	66
Table (9):	Percentage distribution of the health care	
	provider's according to their satisfactory	
	score level of knowledge about	
	medication safety according to the	
	standards of quality and safety of the	
	drug	67
Table (10):	Percentage distribution of the health care	
, ,	providers according to their satisfactory	
	score level of knowledge about	
	characteristics working environment	
	related to chemotherapy drugs	68

€List of Tables ∠

Table (11):	Percentage distribution of the health care	
	providers according to their satisfactory	
	knowledge score level about Safety	
	precautions to avoid hazards of	
	chemotherapy	70
Table (12):	Percentage distribution of the health care	
	provider's according to their correctly	
	done of safety measures during	
	transferring, spilling the chemotherapy	
	drugs& handling.	72
Table (13):	Percentage distribution of the health care	
	providers according to correctly done of	
	safety measures during collecting,	
	transporting & treating waste products	
	of Chemotherapy	74
Table (14):	Distribution of the health care provider's	
	according to non- compliance level	
	related to chemotherapy safety measures	76
Table (15):	Distribution of the health care provider's	
	according to causes and action of	
	administration toward non- compliance	
	related to safety measures	78
Table (16):	Relation between socio-demographic	
	data and knowledge of health care	
	providers.	81
Table (17):	Relation between soio-demographic	
	data and practices of health care	
	providers	83

€List of Tables €

Table	(18):	Correlation	between	knowledge	and
	p	ractices			8
Table (19): Correlation between compliance towards			vards		
	S	afety measure	es and pra	ctices	80

List of Figures

Figure No	o. Title	Page		
Figures o	f Review of Literature			
Fig. (1):	Personal Protective Equipment	21		
Fig. (2): (Count: Personal Protective Equipment	22		
Fig. (3): I	Preparation machine (Laminar flow)	25		
Fig. (4): H	Boxes of Chemotherapy wastes for			
	Transporting	26		
Figures o	f Results			
Fig. (1):	Total knowledge of the health care			
	providers	79		
Fig. (2):	Total practices of the health care			
	providers	80		
Fig. (3):	Correlation between total knowledge and			
	total practices of the health care providers	85		

Occupational Health Hazards Related to Chemotherapy among Healthcare Providers ABSTRACT

By

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Many antineoplastic drugs are known to be carcinogenic, teratogenic and mutagenic to humans. There is thus a potential occupational exposure risk to cytotoxic drugs (CDs). Health care workers are exposed to these drugs in patient care settings. Aim: Assess occupational health hazards related to chemotherapy among health care providers. Sample: purposive sample composed of 70 health care providers from ambulatory settings in oncology center at Nasser Institute Hospital for research and treatment. Tools: First tool, interviewing questionnaire to assess a) socio-demographic data, b)health care providers' knowledge, c) health care providers' practices. Second tool, Auditing medical records and assessing health status. Third tool, checklist to detect health care provider's compliance towards safety measures according to chemotherapy hazards. Results: 71.4 % of the studied subjects were females. Concerning age, 47.1% of subjects were 25 - < 35 years. More than two thirds of health care providers were had weak knowledge regarding chemotherapy& health hazards. Moreover, the majority of health care providers were had not done practice regarding safety measures of protection from health hazards related to chemotherapy. **Conclusion:** there is more than two thirds of health care providers were had weak knowledge regarding chemotherapy& health hazards, the majority of health care providers were non-compliance toward safety measures of protection of health hazards related to chemotherapy.

Recommendations: Further research studies are needed for ongoing assessment of effects of chemotherapy drugs on health care providers and methods of hazards prevention including large sample for generalization of results.

Key words: Occupational Health Hazards- Chemotherapy drugs- Healthcare Providers- Safety measures- Role of the occupational nurse.

Introduction

Worldwide, the healthcare workforce represents 12% of the working population. Healthcare workers operate in an environment that is considered to be one of the most hazardous occupational settings. Healthcare workers encounter diverse hazards due to their work related activities. In spite of this knowledge, the healthcare work environment continues to be neglected by governments and organizations (*Rawlance et al.*, 2015).

Health care workers (HCWs) define as all people engaged in actions whose primary intent to enhance health. They make important contributions and are critical to the functioning of most health systems. Health care workers face a wide range of hazards on the job; including needle stick injuries, back injuries, latex allergy, chemotherapy, violence, and stress. HCWs need protection from these workplace hazards just as much as do mining or construction workers (*Ghosh*, 2013).

Occupational health hazards put HCWs at risk of increased morbidity and mortality. Loss of skilled health personnel will adversely affect health care services which are already suboptimal in developing countries. The multiplying effects of occupational injuries and diseases