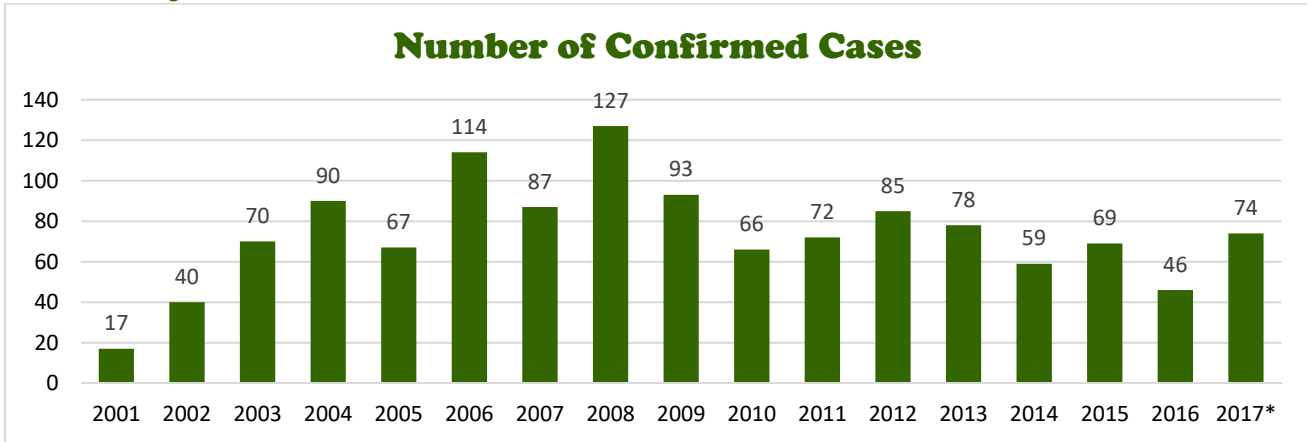


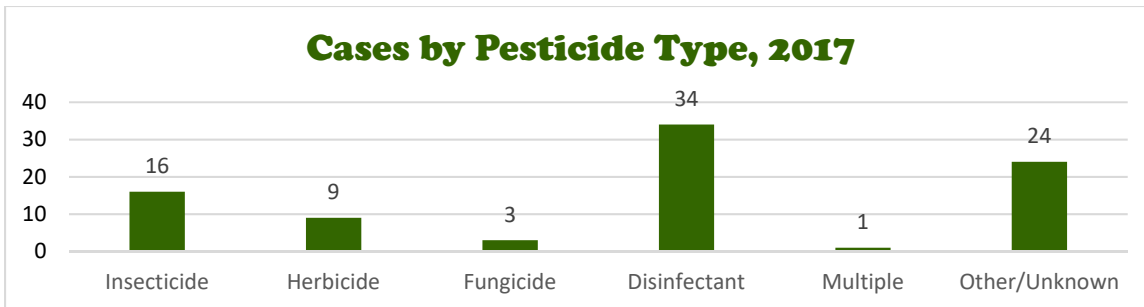
Occupational Pesticide-related Illnesses and Injuries in Michigan, 2017

Summary Statistics

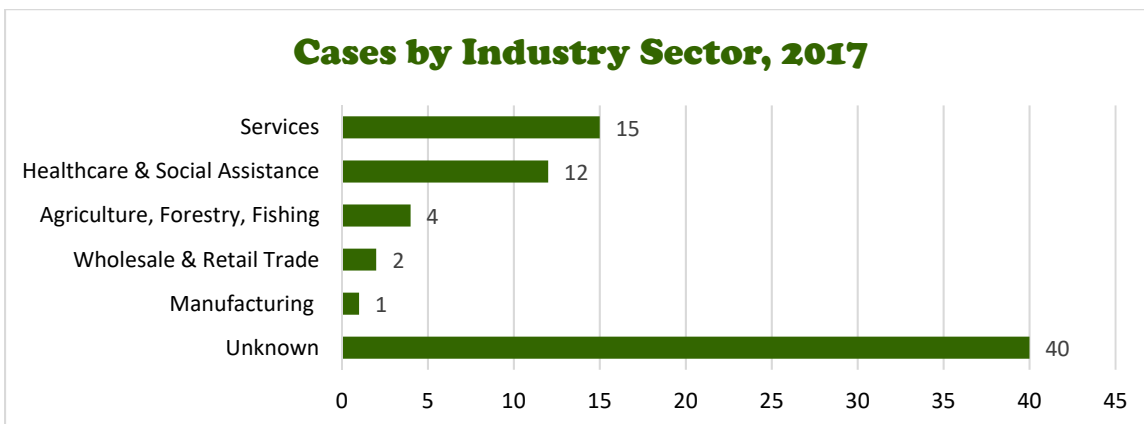


* 2017 preliminary data as of 1/31/2018

surveillance system became fully operational in 2003, ranging from 46 to 127. Overall 55% of the cases were men.



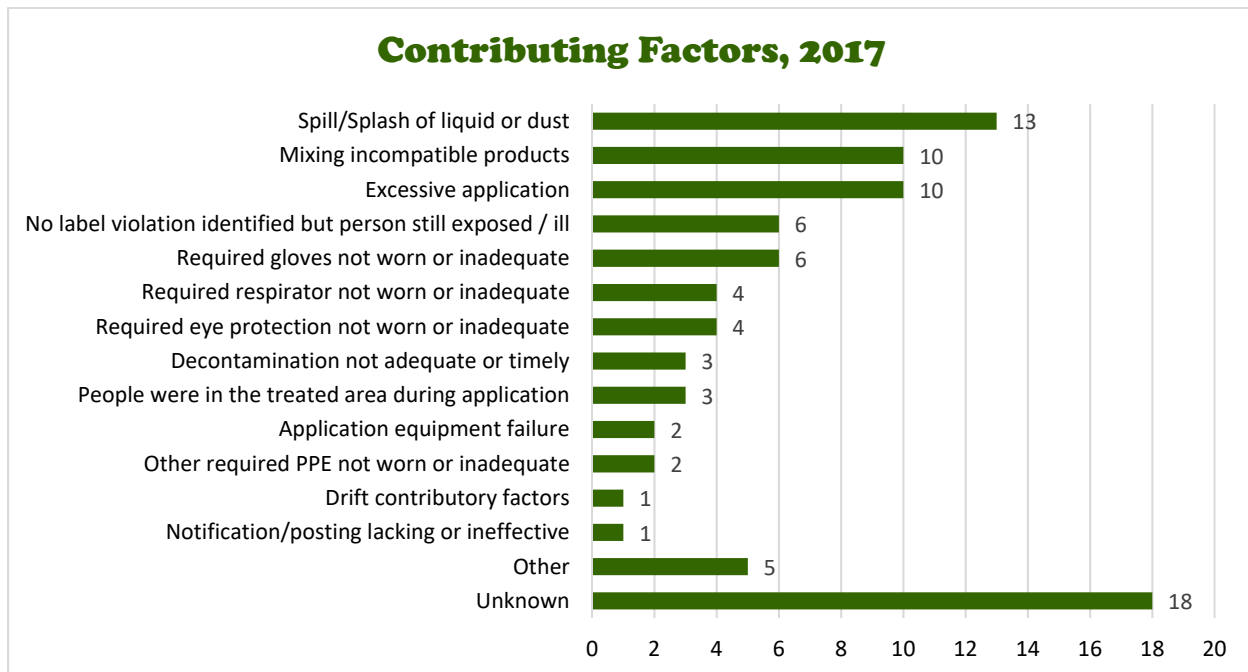
*Multiple means one product had more than one type of pesticide. A case could also be exposed to more than one product.



The “Services” sector includes “Services to Buildings and Dwellings”, such as structural pest control or landscaping, as well as “Accommodation and Food Services” such as hotels and restaurants, where many disinfectant exposures occurred.

Background

The Michigan Occupational Pesticide-related Illness and Injury Surveillance program began in 2001. The goals are to: 1) identify groups at risk for pesticide-related illnesses and injuries, 2) detect trends, 3) identify high-risk active ingredients, 4) identify and refer cases to regulatory agencies as appropriate, and 5) provide information for interventions including education and outreach programs. Pesticide-related Illness and Injury Surveillance is funded under a cooperative agreement with the National Institute for Occupational Safety and Health (NIOSH). A pesticide is any substance or mixture of substances intended to prevent, destroy, repel, or mitigate any pest. The term pesticide can refer to insecticides, herbicides, fungicides, rodenticides, disinfectants, and various other substances. Reported cases are classified based on criteria related to (1) documentation of exposure, (2) documentation of at least two adverse health effects, and (3) evidence supporting a causal relationship between pesticide exposure and health effects. Cases that meet all three criteria are considered confirmed cases.



*Each case may have more than one factor contributing to the exposure.

2017 Work-related Pesticide Illness and Injury Narratives

- A sorter for a laundry facility in her 50s was one of 14 employees exposed to disinfectants when something broke in the line and too much solution was going into the washing machine. She developed lung and throat irritation, dizziness, and asthma exacerbation. She used her inhaler and went to an emergency department.
- A motel maintenance worker in his 40s applied insecticide treatments to beds and floors when there were reports of bed bugs. He developed bloating, abdominal pain, nausea, fatigue, and a headache. He went to an outpatient health center.
- A dishwasher in his 30s had been washing dishes in a three part sink at work, using a disinfectant for a few months and developed dry itchy hands, a sinus headache and eye irritation. He called poison control.
- A field technician for a mosquito control company in his 20s was exposed to insecticides for about three weeks while wearing a particulate mask rather than a chemical mask. He developed shortness of breath, nausea, dizziness and a headache. He called poison control and went to the emergency department three times. He lost seven days of work.