Indicator #7: Work-Related Musculoskeletal Disorders Involving Days Away from Work Reported by Employers

**Background & Public Health Significance**

Work-related musculoskeletal disorders are injuries or disorders of muscles, tendons, nerves, ligaments, joints, or spinal discs that are caused or aggravated by work activities. Workplace risk factors for musculoskeletal disorders include repetitive forceful motions, awkward positions, use of vibrating tools or equipment, and manual handing of heavy, awkward loads. These disorders also can be caused by single, traumatic events such as falls.

In 2014, about one-third of all lost workday cases reported by private sector employers in the United States were due to musculoskeletal disorders. This equates to a rate of 319 musculoskeletal disorder cases per 100,000 full-time workers. Forty percent of all musculoskeletal disorder cases involved an injury to the back and almost one third involved injury to the upper extremities (BLS, 2016).

Data Source: Annual Bureau of Labor Statistics (BLS) Survey of Occupational Injuries and Illnesses (SOII)

Rationale:

Work-related musculoskeletal disorders are preventable and control of occupational hazards is the most effective means of prevention. Estimating the burden and tracking these injuries helps target prevention programs and activities. Information on reported cases can be used to identify contributory factors and develop improved or new prevention strategies or regulations to protect workers.
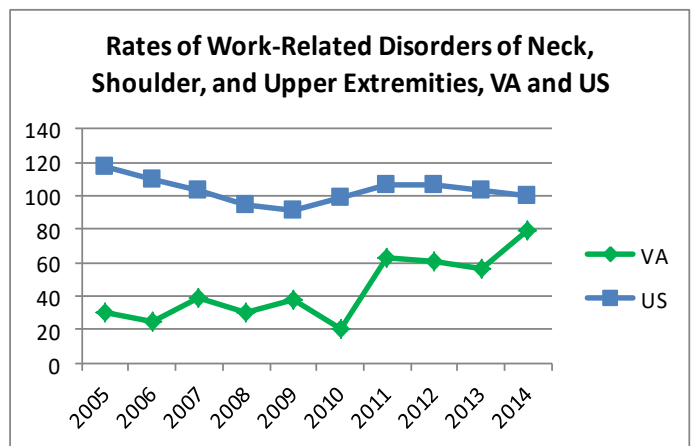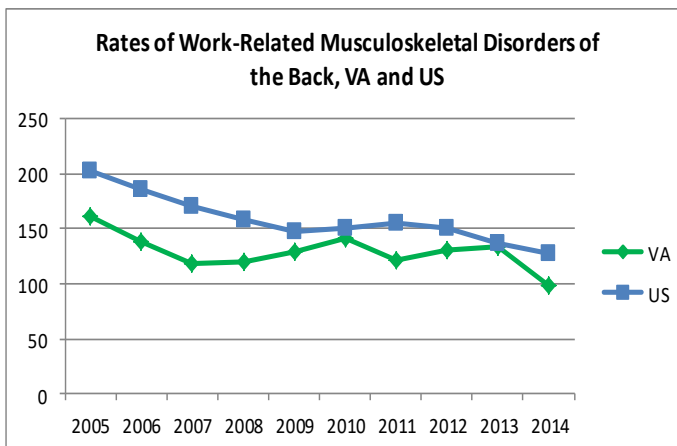

Rate of Work-Related Musculoskeletal Disorders Involving Days Away from Work, VA and US
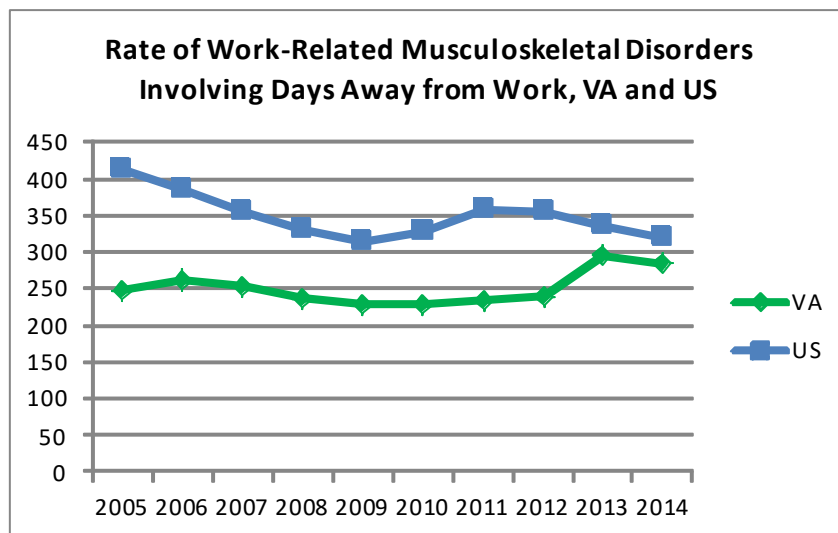
Limitations

The Survey of Occupational Injuries and Illnesses is conducted by the Bureau of Labor Statistics using a probability sample and not a census of all employers. It is based on injury and illness data maintained by employers and is subject to sampling error. There is a potential for additional sampling error if an employer has more than 30 cases with days away from work as an employer is only required to report on 30 such cases. Military, self-employed individuals, farms with fewer than 11 employees, and Federal agencies are excluded from the survey.

Indicator #7: Musculoskeletal Disorders cont.

	7.1 All Musculoskeletal Disorders		7.2 Disorders of the Neck, Shoulder, and Upper Extremities		7.3 Carpal Tunnel Syndrome Cases		7.4 Disorders of the Back	
	Number	Incidence Rate	Number	Incidence Rate	Number	Incidence Rate	Cases	Incidence Rate
2005	7,370	296*	760	30*	70	30*	4,000	161*
2006	6,120	240*	640	25*	-	-	3,510	138*
2007	6,010	234*	1,000	39*	-	-	3,060	119*
2008	5,770	228*	770	30*	20	10*	3,050	120*
2009	5,700	230*	940	38*	330	130*	3,180	129*
2010	5,640	236*	470	20*	20	10*	3,350	141*
2011	6,180	254*	1,530	63*	-	-	2,950	121*
2012	6,440	262*	1,510	61*	-	-	3,190	130*
2013	6,140	249*	1,380	56*	30	10*	3,310	134*
2014	6,480	267*	1,910	79*	-	-	2,400	99*

* Rate per 100,000 full time workers - Data not available

Rates of Work-Related Musculoskeletal Disorders of the Back, VA and US

Rates of Work-Related Disorders of Neck, Shoulder, and Upper Extremities, VA and US

Limitations cont.

Note: Carpal tunnel syndrome graph is not listed cue to lack of available Virginia data.

Employers are required to follow OSHA regulations for recording work-related cases of injuries and illnesses. Cases are recordable if they result in death, loss of consciousness, days away from work, restricted work activity or job transfer, or medical treatment beyond first aid. Employers are only required to report the detailed case characteristics (e.g. nature of the disabling condition, body part affected, and event/source producing the condition) when the injury or illness results in at least one day away from work beyond the day of injury or onset of illness. Employers do not always record all relevant events. Also, employers are often unaware of work-related conditions for which employees have obtained medical care from their personal healthcare providers, as well as conditions that have long latencies and develop or worsen long after the workplace exposure. Musculoskeletal disorders-related cases, for instance, may develop too late for inclusion in the SOII's collection of data or may be reported less frequently to the SOII because of great difficulty in determining whether or not they are work-related.