

Conclusion: The prevalence of MSDs in the company was high. The etiology of MSDs is multifactorial. It is necessary to provide workers with screens guaranteeing good image stability, to alternate tasks in order to reduce the time spent on a display screen to reduce the MSDs Prevalence

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A Preliminary Survey on Musculoskeletal Symptoms among Filipino Esports Players

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Introduction: The number of professional esports players is increasing and it is known that intensive use of keyboard and pointing device contribute to musculoskeletal symptoms. This study investigated the characteristics and musculoskeletal symptoms of esports players in the Philippines.

Materials and Methods: An online survey questionnaire link was sent to the respondents and the data was then summarized and analyzed.

Results and Conclusions: A total of 51 respondents participated in the survey. Majority of the respondents were 18 to 21 years (n=33) and 22 to 26 years (n=14). More than half or 55% have played for 0-3 years, 26% played for 4-7 years, and 20% for 8 years and above. The top three devices used are smartphone/cellphone (94%), laptop (55%), and desktop computer (45%). Meanwhile, for the game genre, the top three are Multiplayer Online Battle Arena with 80%, First-Person Shooter Games with 75%, and Fighting Games with 47%. Almost half of the respondents (43%) play daily. Similarly, 45% usually plays 3 to 4 hours per session. For the musculoskeletal discomfort in the past seven days, body parts with the highest rating "quite uncomfortable" are: head, neck, shoulder, wrist, hand and fingers, upper and middle back, lower back, and buttocks. Likewise, respondents replied in the past six months, the highest rating is "quite uncomfortable" for the upper and middle back and lower back areas. This initial investigation has revealed a significant report of musculoskeletal symptoms among the esports players.

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Risk factors for rotator cuff syndrome among French workers: prospective cohort study

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Introduction: To explore the relationships between personal factors and occupational organisational, psychosocial and biomechanical

factors and the incidence of rotator cuff syndrome (RCS) in French workers.

Material and Methods: A total of 3,710 workers of a French region were randomly included by their occupational physician (OP) between 2002 and 2005. Between 2007 and 2010, 1,611 workers were re-examined by their OP. The 1,320 workers free of RCS at baseline were studied. At baseline, all workers completed a self-administered questionnaire about personal factors and work exposure. Using a standardised physical examination, OP diagnosed RCS at baseline and at follow-up. A conceptual model was developed in which direct and indirect relationships between organisational, psychosocial, biomechanical, and personal factors at baseline and the incidence of RCS were assumed. Structural equation modelling was used to test the model.

Results: RCS was directly associated with biomechanical factors and age but not with psychosocial factors. However, skill discretion and psychological demand influenced RCS through biomechanical factors. Exposure to a work pace dependent on an automatic rate and to a work pace dependent on customers' demands were associated with biomechanical and psychosocial factors.

Conclusions: This study identified the complex direct and indirect relationships between occupational factors and RCS. Our data confirmed the conceptual causation model: organisational and psychosocial factors were associated with biomechanical factors, while biomechanical factors were linked to the incidence of RCS.

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A four-jurisdiction qualitative analysis of workers' compensation healthcare policies

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Introduction: Very few projects have compared, at the policy level, the impact of workers' compensation policies on healthcare providers' work and their ripple effect on workers' care. Our project aimed to shed light on the distinct ways in which workers' compensation policies can affect the delivery and trajectories of care for injured workers across four jurisdictions.

Material and methods: We conducted a cross-jurisdiction policy analysis using key informant qualitative interviews. A purposive sampling strategy was used to recruit 42 participants from different 'social locations' across the provinces of Quebec and Ontario in Canada, the state of Victoria in Australia and the state of Washington in United States. Framework Analysis for policy review was used to support the analysis.

Results: First, our results show that workers' compensation boards use clinical guidelines, non-economic inducements, and monetary incentives to drive healthcare providers' behaviours with workers. Secondly, our findings present how WCBs' policies achieve control of the workers' trajectory of care via two key mechanisms: the standardization of care pathways and the power and autonomy vested in healthcare providers.

Conclusion: This study shed light on the different ways in which workers' compensation policies frame healthcare providers' day-to-day practices and how these policies can shape workers' care trajectories. A better understanding and nuanced portrait of