



**WSIB Report
by Gary Majesky
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Hand Arm Vibration Syndrome (HAVS)

This month I wish to discuss the issue of HAVS in response to member concerns about this condition, and whether the IBEW has taken steps to address this health issue.

HAVS, formerly referred to as White Finger Syndrome and Raynaud's has been widely researched and many Local 353 members have been tested for this condition.

The WSIB adjudicates HAVS as an occupational disease under Operational Policy 16-01-09 as a medical condition that affects workers who use hand-held vibratory tools. HAVS primarily affects workers' hands, but can also affect the feet. The components to HAVS may be vascular, neurological and/or musculoskeletal. While it has been known since the beginning of the 20th century that vibration affects the hands and arms, it was not until 1983 that scientists agreed on the definition of HAVS that includes circulatory, nervous and musculoskeletal systems.

Symptoms for workers with HAVS:

1. Vascular symptoms include fingers turning white – accompanied by pain and numbness – upon exposure to cold and/or damp environments.
2. Neurological symptoms include diminished tactile sensitivity and manual dexterity.
3. Musculoskeletal symptoms include deteriorated grip strength and increase muscle fatigue.

To clarify any misunderstanding, Local 353 has taken steps to address the issue of HAVS. In 2005 the Hall launched a Repetitive Strain Injury (RSI) awareness campaign, in which the following risk factors were flagged i.e., vibration, cold temperatures, contract stress, forceful movements, pace of work & recovery time, awkward or fixed postures.

In 2005 our Local 353 Health and Safety Committee sponsored an Occupational Health Clinic for members where over 500 members attended and were screened for various exposures, injuries and diseases. Occupational health physicians at the Occupational Health Clinics for Ontario Workers recently completed their assessment of each participating member and will present their findings to the Ministry of Labour. A key finding to emerge from the data is that electricians

(and plumbers & fitters) present with a disproportionate number of musculoskeletal and occupational diseases compared to workers in other sectors, suggesting there are multiple endemic risk factors that our members are exposed to over the course of their working career.

As a follow-up to our Occupational Health Clinic, Local 353 took the lead on musculoskeletal issues, culminating in the publication of the Electrician Ergonomic Research Study in 2007. To remind, the purpose of this study was for each member to bring this study to their family doctor and have it placed in their patient file for future reference. In the section titled Hand & Power Tools, the researchers identified four common hand & wrist injuries (pathologies) related to the tools frequently used by electricians: Carpel Tunnel Syndrome, Tendonitis, Epicondylitis, and Hand Arm Vibration Syndrome or HAVS. In the HAVS section, we reported:

Hand-arm vibration syndrome (HAVS) is a disease that involves circulatory disturbances, sensory and motor disturbances and musculoskeletal disturbances. It is caused by daily exposure to hand and arm vibration by workers who use vibrating tools such as jackhammers and drills, which can cause physical damage to the hands and arms resulting

in tingling and numbness in the fingers, loss of grip strength and spasms.

While the Union has a long history in bringing forward member claims related to upper extremity disorders, it is important for members to receive proper testing to identify and delineate the underlying problem as different injuries can mimic the same symptoms (i.e. numbness and tingling in the hands).

If you suspect you are experiencing HAVS related symptoms described above, sufficient to cause abnormal discomfort and difficulty working due to these symptoms, please contact me and leave your name and phone number and I'll try to have you assessed at the OHCOW. It is also possible for your family physician to expedite specific screening tests and assessment by contacting:

St. Michael's Hospital,
Occupational Health Clinic, 30
Bond Street, Toronto, M5B 1W8,
T: (416) 864-5074
F: (416) 304-1902

Before a HAVS claim is submitted to the WSIB it is important that the following tests are conducted before a claim can be adjudicated:

Grip Strength – test the measure of your hand-grip strength

Cold Immersion Test (Cold Water Tank Test) – test looks at the way your blood flows through the small blood vessels of your hand by measuring the temperature of the skin at your fingertips.

Current Perception Threshold (CPT) – tests how much feeling you have in your fingers to low-level current.

Purdue Pegboard Test – is a hand dexterity test to see how fast and

accurately you can work with your hands, fingers and arms.

Digital Plethysmography and Arterial Peripheral Doppler Study

– Test is used to assess skin/finger blood flow at room temperature and after the fingers have been put into very cold water (2 minutes at 10°C) and records the digital blood pressures using a Doppler ultrasound instrument.

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