Without the ability to cite and fine, the Division relies mainly on three methods to encourage action to abate hazards: diagnosis, direction and deceit. This paper will describe the strengths and weaknesses of this noncompliance approach to occupational health (with examples).

State-Specific Respiratory Disease Mortality Surveillance of Agricultural Workers

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Death certificates represent a largely untapped resource for occupational mortality surveillance. We used national multiple-cause-of-death data to generate leads as to potential occupational respiratory disease problems in 14 states with industry and occupation information for each of the years 1985-1988.

Previous studies have shown agricultural workers to be at increased risk of developing respiratory diseases. However, most mortality studies have considered only crude mortality using underlying cause of death and may therefore underestimate the public health importance of contributing causes of death. Furthermore, crude mortality data is a poor measure of premature mortality in the working age population.

We utilized multiple-cause-of-death data to estimate the years of working life lost (YWLL, ages 20-64) for agricultural workers in each of the 14 states. Standardized rates for YWLL were derived across 11 respiratory disease categories using the 1980 Census to obtain estimates of the "population at risk".

Occupational mortality surveillance based on death certificates is particularly useful where cohort studies may be difficult. This applies to occupational groups in agriculture where small non-unionized work units are commonplace. However, inaccuracies in death certificate occupation and industry statements and inability to control for confounding variables such as smoking suggest that results should be interpreted with care.

Maine Occupational Health Surveillance Program

Ellen Naor, D. R. Lemieux, Maine Department of Human Services, Augusta, ME

This paper demonstrates the use of mortality data in a surveillance program for monitoring potential occupational health problems. Information on death certificates is used to profile causes of death among workers in the leather and pulp/paper industries, using proportionate mortality ratios (PMR's) and occupational sentinel health events.

In 1980, an estimated 20,000 persons were employed in the leather and leather products industry in Maine; over half operated shoe machines. Shoe machine operators have a potential exposure to a variety of hazardous chemical agents including arsenic, benzene and lead. Mortality profiles for 1984-1986 revealed significantly high PMRs for lung cancer, ischemic heart disease and suicide among male workers. Excess deaths from selected cancers, heart disease, and chronic obstructive pulmonary disease, were observed among females. Further analyses revealed five



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