

Night work increases risk of cancer

An increasing amount of research has been published that suggests a link exists between night work and cancer. In several major studies, researchers have found that workers on the night shift show increased rates of cancer.

The research

Workers with atypical work schedules show a higher risk of developing cancer than people in the general population, according to research published by the International Agency for Research on Cancer (IARC), an agency of the World Health Organization, in the December 2007 issue of *The Lancet Oncology Medical Journal*. A team of 24 scientists found that atypical working hours disturbed the body's internal biological clock, which could be one cause for the appearance of cancer. They argued that more study was needed on this issue to confirm the cause and effect relationship.

Research in 2001 highlighted some similar findings for women with breast cancer. A study of 7,000 Danish women affected by primary breast cancer produced the following very disturbing results: Women



"Night shift causes cancer! It interrupts sleep patterns, weakens the immune system and disrupts our circadian clocks."

between 30 and 54 years of age who worked nights for at least half a year have a 50 per cent higher risk of developing primary breast cancer than women in the same age group who worked days. Among women who had worked night shifts for six years or more, the risk jumped to 70 per cent. This study was published in the journal *Epidemiology* (January 2001, Vol. 12, No. 1, pp 74 77).

CUPW was one of the only unions in Canada to underscore

the findings of this study in a front-page article that appeared in its March 2001 issue

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Night work

(Vol. 4, No. 1) of *The Rose*, a union publication that goes to all women members of CUPW.

Some of the studies theorized that the increased cancer rates were linked to the body's response to light. When the body is exposed to daylight and then to darkness, it produces melatonin, a natural hormone and antioxidant that protects DNA from damage that can lead to cancer and heart disease. Melatonin has also been shown to reduce tumour growth, and may help prevent the overproduction of estrogen. Since this hormone is mainly produced at night, night workers produce less of it and are more vulnerable to various health problems related to sleeping, diet, digestion, smoking and alcohol consumption.

Studies have also shown that night workers suffer greater cumulative fatigue than those who work days, and that this fatigue affects women more than men. In addition to the Danish study mentioned earlier, another study, published by a team from Seattle's Fred Hutchinson Cancer Research Institute, showed that night workers have a 60 per cent higher risk of developing breast cancer than women who work days.

In fact, the negative effects of night work have been documented for years. A 1977 International Labour Office study, called *Night Work*, looked at the effects of night work on individuals not only from a physiological and psychological point of view but from its effects on community, family and social life as well.

This study found:

"Since no organisational arrangement seems capable at present of eliminating the harmfulness of night work, the only measures that can be taken for the prevention of the medical disorders and social and family disturbances caused by that kind of work must consist in a very strict limitation of night work for all workers, both women and men, and in a substantial reduction of the duration of such work in cases where there are sufficiently good grounds for practicing it."

Compensation

In 2008, the government of Denmark decided to compensate some night workers who developed breast cancer. This was after Denmark's Occupational Diseases Committee recognized breast cancer linked to night work as an industrial injury after a review of the research. Denmark is one of the first governments in the world to recognize this problem and to compensate victims. In 2008, 38 out of 75 women who had applied received this type of compensation. Unfortunately, not all of night workers with breast cancer have been compensated. Those with previous family history of the disease had their claims rejected by the government. In the cases submitted, the worker had typically worked on the night shift for at least 20-30 years at least once



a week.

Other countries are looking at following Denmark's example. Labour leaders from several European countries are pressuring their respective governments to take a proactive approach. These leaders also recognize that night work can lead to other health problems, like fatigue and digestive problems, and that this kind of work is associated with a higher risk of work accidents.

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Researchers argued that night work was a way to pay for highly mechanised and expensive equipment that would soon become obsolete. The calculation of the benefits of night work might look impressive if looked at narrowly. However, the indirect costs are borne, not only by the "night workers themselves (threats to health, well-being and family and social responsibilities), but also by their families and by the community as a whole (public health expenditure, social security benefits, temporal disorganisation of community life...)."

Night Work, J. Carpentier and P. Cazamian, International Labour Office

Defibrillators being installed in some facilities

The life of a worker who suffers a cardiac arrest during his or her shift might well depend on an “automated external defibrillator” (AED) being nearby in the workplace. A defibrillator sends an electrical current through the chest directly to the heart, which significantly increases a worker’s chance of survival.

Defibrillators save lives

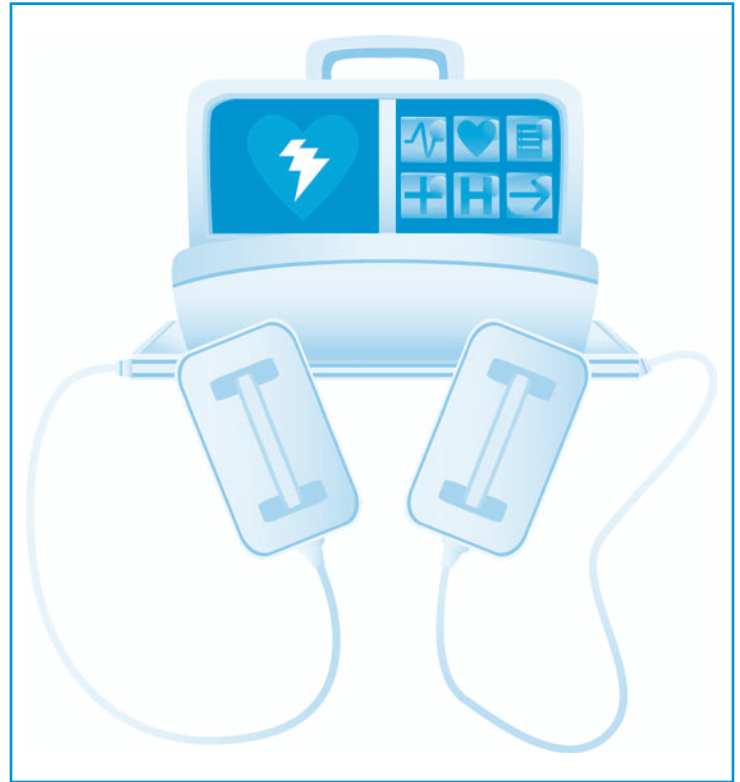
One of the main reasons why cardiac arrest is the major cause of death in adults is that survival depends on speedy medical activity. With every passing minute, the victim’s chance of survival decreases by 7 per cent. In Canada, 40,000 people suffer a cardiac arrest every year. Most of these cases occur in areas where immediate medical assistance is not available.

Cardiac arrest happens when the heart suddenly stops beating as a result of electrical cardiac activity failure. The only way to effectively treat cardiac arrest is to send an electrical current to the heart to make it start beating again. This is known as “defibrillation.” If it occurs within the first few minutes following cardiac arrest, defibrillation can increase the victim’s chance of survival by 30 per cent or more. The chances can go up by as much as 75 per cent if defibrillation is combined with cardiopulmonary resuscitation (CPR).

Bringing defibrillators to the workforce

Defibrillators are used more and more in daily life. They can be found in airports, shopping centres, arenas, amusement parks, major sports complexes and even in some public places. The new, portable types of defibrillators now on the market are designed to be used by front-line first aid providers like those trained at Canada Post. These defibrillators have software that analyzes the victim’s heart beat to determine whether an electric shock is required or not.

CUPW initiated discussion on this subject with Canada Post in 2007 through the National Joint Health and Safety Committee (NJHSC). Canada Post has agreed to install defibrillators only in the Montreal and Toronto mechanized plants. The local joint health and safety committees in both locations have been involved in the implementation process. The devices will be used by members who are



first aid attendants in the workplace and who have or will be receiving St-John’s Ambulance training.

The defibrillator program will have a medical director, Dr. Wasser, a St-John’s Ambulance physician, to oversee its functioning. Among other duties, he is responsible for general supervision and training, communicating medical instructions, reviewing all cases of defibrillator use and providing input to intervention team members after an AED is used. A response protocol has also been developed. The locations of defibrillators will be determined by the program’s medical officer in conjunction with the local joint health and safety committee in each postal installation. The defibrillators will be placed in areas that ensure there is no more than a three-minute response time between cardiac arrest and delivery of the initial electric shock.

Protecting our privacy

All the defibrillators have data capture capability. The ones used at Canada Post will collect the information on two cassettes. The union has made it clear to the employ-

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Defibrillators

er that all medical information collected by these defibrillators is confidential. The information will be sent to the program's medical officer and will be deleted as soon as receipt is confirmed.

If the trials at the two locations are successful, Canada Post has indicated it is possible that defibrillators will be installed in other facilities across the country. Discussions on this are continuing on the NJHSC. We'll keep you informed of developments in the coming months.



Night work and technological change

Our gains

Sadly, night work is a daily fact of life for many of our members at Canada Post. The union has been demanding better working conditions for these workers for a long time.

One of the principal gains we have made for urban members is certainly Night Workers' Leave (clause 33.18 in the urban unit's collective agreement). This type of leave, also called recovery leave, was introduced into the collective agreement in 1985. At the time, it consisted of one day of paid leave per four-month period. In 1995, it was improved to 2/3 of a day for each four-week period in which a person worked on the night shift on twelve occasions.

Other provisions of the urban collective agreement that deal with night work are found in clause 14.31 (Day-Shift Assignments). Under this clause, the employer recognizes that, as much as possible, the work is normally to be performed during the day, and that evening and night work should be minimized. The corporation also agreed to study the organization of its operations during the life of this agreement in order to review evening and night work, taking into account service levels, costs and other relevant factors.

Technological change

Despite the progress made by the union in the area of night work, the employer, with its Modern Post (or postal transformation) program and decision to implement sequencing, is triggering an increase in night work. It is also currently eliminating vacant day positions in its mechanized plants. This means that members working evening or night shifts will have to wait even longer to access day time positions.

In 2001, when the Danish study appeared, the International Federation of Chemical, Energy, Mine and General Worker's Union (ICEM), which reported on the study, noted that: "Trade unions have always insisted that jobs should be designed for people, rather than people for jobs." This is still true in 2009 and will be even more relevant when the time comes to develop our own demands for the next round of bargaining with Canada Post.

CUPW • Our Health Our Safety

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