# research alert

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## ABOUT RESEARCH ALERT

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Journal articles marked with an asterisk indicate an IWH scientist or adjunct scientist is included in the list of authors.

**Ahammer A and Packham A. Disability insurance screening and worker health. Journal of Health Economics. 2025; 101:102986.**
**https://doi.org/10.1016/j.jhealeco.2025.102986** **[open access]**
Abstract: We provide new evidence on the returns to more targeted disability insurance (DI) programs in terms of labor force participation, program spillovers, and worker health. To do so, we analyze Austrian workers after a workplace injury that experience differential levels of application screening. We find that when workers face stricter screening, they are more likely to remain in the labor force. However, we estimate no statistical differences in any physical or mental health outcomes, and can rule out large effects on overall healthcare utilization. Our findings imply that imposing stricter DI screening can yield large fiscal benefits, on the margin

**Baek SU, Yoon JH, and Won JU. Gender discrimination in the workplace and the onset of problematic alcohol use among female wage workers: a longitudinal study in Korea. Social Science & Medicine. 2025; 379:118183.**
**https://doi.org/10.1016/j.socscimed.2025.118183**
Abstract: This study explored the association between workplace gender discrimination (WGD) and the onset of problematic alcohol use among female wage workers. This longitudinal study analyzed data from a nationwide sample of 4654 women, with 11,484 observations collected between 2012 and 2020. The participants reported their experiences with WGD across six dimensions: hiring practices, promotion opportunities, wage disparities, work assignments, access to training opportunities, and termination procedures. Participants were categorized into three groups based on the number of these WGD dimensions they experienced: no WGD (no experiences in any dimension), moderate WGD (experiences in 1-3 dimensions), and severe WGD (experiences in 4-6 dimensions).

Problematic alcohol use was evaluated using the Cutting Down, Annoyance by Criticism, Guilty Feeling, and Eye-openers questionnaire. Generalized estimating equations were utilized to assess the relationship between the experience of WGD and the development of problematic alcohol use over a two-year period. The relative risk (RR) and its 95 % confidence interval (CI) were calculated. Among the participants, 68.8 %, 18.0 %, and 13.2 % experienced no, moderate, and severe WGD at the baseline, respectively. Compared with no experience of WGD, the RRs (95 % CI) for the onset of problematic alcohol use were 0.93 (0.50-1.71) and 2.08 (1.23-3.50) for moderate and severe WGD experience, respectively. For each WGD dimension, WGD related to promotion (RR: 1.66, 95 % CI: 1.01-2.72), wages (RR: 1.71, 95 % CI: 1.05-2.78), and termination (RR: 1.88, 95 % CI: 1.13-3.13) were related to the development of problematic alcohol use during the follow-up. WGD was associated with the onset of problematic alcohol use during the follow-up period. These findings underscore the necessity of proactive governmental and organizational initiatives to promote a gender-equitable work environment and mitigate WGD to protect women's health.

**Cherry N, Beach J, and Galarneau JM. The relation of musculoskeletal disorders to ergonomic work demands in welders and electrical workers: a prospective Canadian cohort study. Annals of Work Exposures and Health. 2025; [epub ahead of print].**
**https://doi.org/10.1093/annweh/wxaf029**
Abstract: INTRODUCTION: Musculoskeletal disorders are known to result from physical demands at the workplace. Identification of risks specific to particular trades may encourage work modification to prevent new onset conditions. METHODS: In a Canadian cohort study of male and female welders and electrical workers, we collected self-reports of low-back pain, shoulder pain, and symptoms suggestive of vibration white finger (VWF) at each 6-monthly contact for up to 5 yr. Physician records of back and shoulder/joint disorders and Raynaud's syndrome were extracted from the Alberta administrative health database (AHDB). At each contact, participants completed questions on ergonomic work factors. We computed cumulative hours exposed for 6 factors: whole-body vibration, hand-arm vibration, manipulating heavy objects, working at or above shoulder height, working while crouching or kneeling, and work in cold environments. The relation of current and log cumulative exposures to health outcomes was identified by proportional hazards regression, adjusting for sex, age, body mass index, smoking, anxiety, and depression. RESULTS: Of 1,885 workers recruited January 2011 to September 2017, 872 welders and 812 electrical workers recorded symptoms and workplace demands on at least one occasion, with 693 welders and 567 electrical workers matched to the AHDB. In final models, whole-body vibration was related overall to each self-reported health outcome with backpain risk most in evidence for male welders (HR = 1.10 log increase/h of exposure: 95% CI, 1.05 to 1.15, P < 0.001). Working in a crouching position and in cold temperatures also contributed to back pain in welders. Cumulative hours working at or above shoulder height increased welders' risk of shoulder pain (HR = 1.07 log increase/h of exposure: 95% CI, 1.03 to 1.11, P = 0.001). Working at or above shoulder height was related to both back and shoulder pain in the electrical trades, where cumulative exposure to hand-arm vibration was an additional factor for shoulder pain (HR = 1.06 log increase/h of exposure: 95% CI, 1.01 to 1.10, P = 0.007). Manipulating heavy loads was a further risk factor for back and shoulder pain for women in electrical work. There were only 3 incident cases of Raynaud's syndrome in physician records: symptoms suggestive of VWF related strongly to work in cold environments but not to hand-arm vibration. Physician records of back pain did not reflect specific workplace demands, but physician records of shoulder/joint conditions were greater, overall,

in those with longer exposure to whole-body vibration and to current hand-arm vibration in electrical workers. CONCLUSION: Vibration, a well-recognized hazard, was a risk factor for all outcomes but with whole-body vibration more evidently a risk for welders and hand-arm vibration for electrical workers. The final models of risk factors differed importantly between the two trades, suggesting specific targets for intervention

**Cunningham S, Russell AM, Lidington E, and Shiely F. Lack of data collection in clinical trials prevents us from evaluating inclusion of people with disabilities. Journal of Clinical Epidemiology. 2025; 181:111715.**
**https://doi.org/10.1016/j.jclinepi.2025.111715 [open access]**
Abstract: OBJECTIVES: Improving clinical trial inclusivity for diverse populations, including people with disabilities, is crucial. Ethical considerations emphasize the need for trial enrollment to mirror the potential trial users' diversity, yet underrepresentation persists due to direct and indirect exclusions. The purpose of our study was to determine if trial teams collect data on people with disabilities for diversity monitoring purposes. We also examined how they collect disability and report it. STUDY DESIGN AND SETTING: We reviewed trial reports for randomized controlled trials published in the UK National Institute of Health Research library from 2016 to 2021. We extracted data on disability, including if, how and when it was collected, who collected it, the measurements used, and the results presented. RESULTS: We extracted data from 407 trial reports. Disability was not collected as a demographic characteristic in any trial. 27% (109/407) collected some disability data for other purposes, eg, eligibility, a measure of functional outcome or serious adverse events. Disability was most commonly assessed through questionnaires (65%; 71/109), clinical assessment (17%; 19/109), and interviews (8%; 9/109). A variety of measures were used to collect disability information. In 109 trial reports, the most common was a measure of cognitive function, the Mini Mental State Examination, which accounted for 15% overall. CONCLUSION: Disability is not just under recorded or underreported, it is ignored, in trials. As disability is not collected as a demographic characteristic, people with disabilities remain underserved in trials. Given 16% of the global population live with a disability, it is a threat to the generalizability of all trials and risks exacerbating health inequalities of people with a disability

**de Geus CJC, Huysmans MA, van Rijssen HJ, de Maaker-Berkhof M, Schoonmade LJ, and Anema JR. Elements of return-to-work interventions for workers on long-term sick leave: a systematic literature review. Journal of Occupational Rehabilitation. 2025; 35(2):159-180.**
**https://doi.org/10.1007/s10926-024-10203-0 [open access]**
Abstract: Purpose: The aim of this systematic review is to identify vocational rehabilitation (VR) interventions that are effective to enhance return-to-work (RTW) for people on long-term sick leave (> 90 days) and to identify main elements of these interventions. Methods: Six electronic databases were searched for peer-reviewed studies published up to February 2022. Each article was screened independently by two different reviewers. Thereafter, one author performed the data-extraction which was checked by another author. The EPHPP quality assessment tool was used to appraise the methodological quality of the studies. Results: 11.837 articles were identified. 21 articles were included in the review, which described 25 interventions. Results showed that ten interventions were more effective than usual care on RTW. Two interventions had mixed results. The effective interventions varied widely in content, but were often more extensive than usual care. Common

elements of the effective interventions were: coaching, counseling and motivational interviewing, planning return to work, placing the worker in work or teaching practical skills and advising at the workplace. However, these elements were also common in interventions that were not effective on RTW compared to usual care and can therefore not explain why certain interventions are effective and others are not. Conclusion: The effective interventions included in this study were often quite extensive and aimed at multiple phases of the RTW-process of the worker. In the future, researchers need to describe the population and the content of the investigated interventions more elaborate to be able to better compare VR interventions and determine what elements make interventions effective.

**Hammond S, Jones A, Claus N, and Heaton K. Emergency preparedness for the occupational health nurse are you prepared? Workplace Health & Safety. 2025; [epub ahead of print].**
**https://doi.org/10.1177/21650799251339583**
Abstract: In the U.S., there are approximately 4.6 million workplace injuries that require emergency medical care. Worksite emergencies can occur at any point of the workday and employers and workers need to be prepared to manage them. Providing additional training to workers regarding potential emergencies is essential and could save lives. Teaching life-saving skills is an important part of worksite training now due to increase in violence at work and in preparation for natural and man-made disasters. The occupational health nurse (OHN), through education and skills training, can prepare the worksite for such events. While OSHA requires an emergency action plan for worksite, the OHN should provide additional training in Cardiopulmonary Resuscitation (CPR), Stop the Bleed®, and active shooter preparedness. According to the American Heart Association, doubling the number of individuals trained in CPR would double the survival rate for cardiac arrest events inside and outside the hospital. Trauma related hemorrhages can lead to death in a matter of minutes. Stop the Bleed® training empowers bystanders to administer aid during a life-threatening emergency. Workplace violence has increased and being prepared with active shooter training is essential to reduce worker fatalities. These additional life-saving skills are essential to worksite emergency preparation. The OHN is in a crucial position to provide lifesaving skills to their worksite.

**Kalski L, Clauben L, Hofmann MA, and Wolfarth B. Health-related risk factors for subsequent work disability: a systematic literature review. Work. 2025; 80(3):998-1012.**
**https://doi.org/10.1177/10519815241290109**
Abstract: Background Work disability is a major public health challenge, with various health conditions leading to long-term sickness and early retirement, placing a substantial burden on individuals and society. Objective This systematic review aimed to identify key health-related risk factors for work disabilities, highlighting the importance of early prevention strategies. Methods A systematic literature search was conducted in 06/2023 using MEDLINE via PubMed, EMBASE via OVID, and CINAHL via Cochrane Library Trials. Two independent reviewers screened abstracts and reviewed full-text articles describing risk factors for work disabilities. Data extraction followed PRISMA guidelines, with the databases searched using synonymous keywords for "risk factors" and "work disability". Results Of the 61,872 articles identified, 17 met the inclusion criteria. The studies identified several health-related risk factors leading to work disabilities. The most frequently reported conditions were common mental disorders and musculoskeletal disorders, often leading to short- or long-term sick leave. The review highlighted that health-related risk factors frequently co-occur and interact,

suggesting that work disability is rarely due to a single factor. The quality of the included studies varied, and many relied on self-reported data, which can introduce bias. Conclusion(Chronic) conditions, particularly mental and musculoskeletal disorders, are significant risk factors for work disability. Primary and secondary prevention measures, such as rehabilitation are crucial to mitigate the need for disability retirement. Future research should focus on prospective cohort studies and a thorough scientific investigation of potential intervention factors to provide decision-makers with information on cost-effective prevention programs. Prospero ID: CRD42023422118

**Kuricova A, Hudakova M, Kockar S, and Holla K. An innovative approach to occupational risk assessment in OHS: a case study on the verification of the ALrisk model in manufacturing enterprises in Slovakia. International Journal of Environmental Research and Public Health. 2025; 22(5):757.**
**https://doi.org/10.3390/ijerph22050757 [open access]**
Abstract: The issue of occupational health and safety (OHS) is currently a pressing and essential challenge for improving production processes and workplace environments, particularly in manufacturing enterprises. With increasing demands for efficiency and workplace safety, it is crucial to implement innovative approaches that enhance accident prevention and safeguard employees' health. These approaches contribute to the long-term sustainability of enterprises and reduce costs associated with workplace injuries and occupational diseases. The core focus of this article is to present the ALrisk model for OHS risk assessment and management, outlining its key components, as well as the results and benefits of its verification in specific job positions within manufacturing enterprises in Slovakia. The study employed scientific methods, along with risk identification, analysis, and workplace condition assessment methods, in the development and verification of the ALrisk model. These methods contributed to a more precise identification of factors endangering employees' safety and health and enabled the formulation of solutions for their mitigation. The application results indicate that the proposed model provides a more effective method for assessing occupational risks, thereby enhancing prevention-reducing health hazards for employees and improving overall workplace safety. The article offers practical insights into the application of the ALrisk model as an innovative and systematic approach within the specific conditions of manufacturing enterprises. The findings of the study serve as a valuable resource for OHS managers and senior employees seeking to improve workplace safety and accident prevention within their production processes. Moreover, the results are beneficial for other professionals engaged in OHS, particularly in the assessment and management of occupational risks, not only in Slovakia but also across European countries

**Lieberum JL, Toews M, Metzendorf MI, Heilmeyer F, Siemens W, Haverkamp C, et al. Large language models for conducting systematic reviews: on the rise, but not yet ready for use: a scoping review. Journal of Clinical Epidemiology. 2025; 181:111746.**
**https://doi.org/10.1016/j.jclinepi.2025.111746 [open access]**
Abstract: BACKGROUND AND OBJECTIVES: Machine learning promises versatile help in the creation of systematic reviews (SRs). Recently, further developments in the form of large language models (LLMs) and their application in SR conduct attracted attention. We aimed at providing an overview of LLM applications in SR conduct in health research. METHODS: We systematically searched MEDLINE, Web of Science, IEEEXplore, ACM Digital Library, Europe PMC (preprints), Google Scholar, and conducted an additional hand search (last search: February 26, 2024). We included scientific articles in English or

German, published from April 2021 onwards, building upon the results of a mapping review that has not yet identified LLM applications to support SRs. Two reviewers independently screened studies for eligibility; after piloting, 1 reviewer extracted data, checked by another. RESULTS: Our database search yielded 8054 hits, and we identified 33 articles from our hand search. We finally included 37 articles on LLM support. LLM approaches covered 10 of 13 defined SR steps, most frequently literature search (n = 15, 41%), study selection (n = 14, 38%), and data extraction (n = 11, 30%). The mostly recurring LLM was Generative Pretrained Transformer (GPT) (n = 33, 89%). Validation studies were predominant (n = 21, 57%). In half of the studies, authors evaluated LLM use as promising (n = 20, 54%), one-quarter as neutral (n = 9, 24%) and one-fifth as nonpromising (n = 8, 22%). CONCLUSION: Although LLMs show promise in supporting SR creation, fully established or validated applications are often lacking. The rapid increase in research on LLMs for evidence synthesis production highlights their growing relevance. PLAIN LANGUAGE SUMMARY: Systematic reviews are a crucial tool in health research where experts carefully collect and analyze all available evidence on a specific research question. Creating these reviews is typically time- and resource-intensive, often taking months or even years to complete, as researchers must thoroughly search, evaluate, and synthesize an immense number of scientific studies. For the present article, we conducted a review to understand how new artificial intelligence (AI) tools, specifically large language models (LLMs) like Generative Pretrained Transformer (GPT), can be used to help create systematic reviews in health research. We searched multiple scientific databases and finally found 37 relevant articles. We found that LLMs have been tested to help with various parts of the systematic review process, particularly in 3 main areas: searching scientific literature (41% of studies), selecting relevant studies (38%), and extracting important information from these studies (30%). GPT was the most commonly used LLM, appearing in 89% of the studies. Most of the research (57%) focused on testing whether these AI tools actually work as intended in this context of systematic review production. The results were mixed: about half of the studies found LLMs promising, a quarter were neutral, and one-fifth found them not promising. While LLMs show potential for making the systematic review process more efficient, there is still a lack of fully tested and validated applications. However, the increasing number of studies in this field suggests that these AI tools are becoming increasingly important in creating systematic reviews

**Metcalfe JD, Bond GR, and Drake RE. Participation in individual placement support: ethnoracial differences in the supported employment demonstration. Psychiatric Rehabilitation Journal. 2025; 48(2):115-122.**
**https://doi.org/10.1037/prj0000631**
Abstract: OBJECTIVE: The Supported Employment Demonstration (SED), a large, multisite randomized controlled trial, provided evidence-based supported employment to help individuals recently denied Social Security disability benefits for reason of mental illness to gain competitive employment and avoid disability. Monthly, client-level measurement of participation in individual placement and support permitted the first detailed exploration of potential ethnoracial disparities in the IPS participation process, from enrollment to end of follow-along job supports, in a vulnerable population with ready access to the intervention. METHOD: Monthly participation data in a subsample of enrollees randomized to receive supported employment enabled decomposition of IPS service participation into take-up, effectiveness, and follow-along support phases, yielding times to participation duration milestones, job start, and end of follow-along supports for 614 non-Hispanic

White, non-Hispanic Black, and Hispanic SED enrollees. Cox proportional hazards models provided differences in the monthly hazard of each event by race and ethnicity. RESULTS: Black non-Hispanics (hazard ratio [HR] = 1.50) and Hispanics (HR = 1.52) were both more likely than White non-Hispanics to complete consecutive 3-month periods of supported employment participation. However, ethnoracial group was not significantly associated with either increased effectiveness, measured as the monthly likelihood of finding a job during IPS participation, or likelihood of ending follow-along job supports. CONCLUSIONS AND IMPLICATIONS FOR PRACTICE: Potential clients' race and ethnicity are associated with a differential willingness to engage IPS services. For this reason, ethnoracial differences in IPS penetration may persist even when structural barriers to IPS access are removed. (PsycInfo Database Record (c) 2025 APA, all rights reserved)

**Mohd Yusoff H, Yew SQ, Mohammed Nawi A, Htwe O, Mohd Tohit N, Mohamed Z, et al. Prevalence and symptoms of Long Covid-19 in the workplace. Occupational Medicine. 2025; 75(1):33-41.**
**https://doi.org/10.1093/occmed/kqae128** **[open access]**
Abstract: Background: The symptoms of Long coronavirus disease 2019 (Covid-19) are heterogeneous, creating uncertainty for employers regarding the diagnosis. The prevalence of Long Covid-19 in the workforce is also unknown. Furthermore, workers affected by Long Covid-19 encounter considerable difficulties in ensuring work safety and returning to their jobs due to this condition. Aims: This review is aimed to identify the prevalence of Long Covid-19 in the workplace and to determine the various symptoms of Long Covid-19 experienced by the workers. Methods: A meta-analysis was conducted to calculate the pooled estimates for the prevalence of Long Covid-19. Heterogeneity among the estimates was evaluated using the $I^2$ statistic. Results: The pooled prevalence of Long Covid-19 among workers across the 11 studies was 38% (95% CI 23-56). A total of 43 symptoms associated with Long Covid-19 were identified in the workplace, with the top five symptoms being dyspnoea at moderate activity (51%, 95% CI 39-62), mental symptoms (38%, 95% CI 6-87), dyspnoea at mild activity (35%, 95% CI 25-47), fatigue (26%, 95% CI 3-78) and effort intolerance (24%, 95% CI 15-35). Conclusions: The review indicates a significant burden of long-lasting symptoms within the workforce. The top five reported symptoms of Long Covid-19 were dyspnoea during mild and moderate activities, mental symptoms, fatigue and effort intolerance.

**Payne M, Roache D, Subero J, and Zhang GP. How safety leadership styles impact safety performance: a case study. Journal of Safety Research. 2025; 93:214-228.**
**https://doi.org/10.1016/j.jsr.2025.02.006**
Abstract: INTRODUCTION: Job-related injuries continue to be a salient problem facing many organizations. Prior research has examined the role of leadership in influencing and improving workplace safety. However, studies of safety leadership have focused on the styles or behaviors of leaders without taking into account the influence of context on leader activities or practices. Therefore, there is a need for examining how leadership styles impact safety performance within a specific context. Specifically, our research setting is an Indonesian manufacturing facility of a large consumer products company with an impeccable safety performance. METHOD: In this paper, we conduct a case study with an in-depth analysis on how different leadership styles impact safety performance. We adopt the LEAD model as a theoretical framework that unifies different theories of leadership for safety management. RESULTS: We find evidence that effective safety leadership entails multiple leadership styles such as transformational, transactional, and leader-member exchange

depending on the situation. Our findings support a multi-faceted situational approach for safety leadership and management advocated by the LEAD model. PRACTICAL APPLICATIONS: Because a multi-faceted leadership approach is most effective, leaders should not focus on one fixed leadership approach in managing safety. In addition, multiple leadership styles contribute to safety behaviors in different ways across different work situations. Future workplace safety performance interventions would be more effective if management is aware of the situation in which specific leadership styles or practices should be applied

**Reardon K, Unruh DK, and Rowe DA. Employer perspectives toward hiring and retaining individuals with disabilities: a national survey of entry-level employers. Journal of Vocational Rehabilitation. 2025; 62(3):310-324.**
**https://doi.org/10.1177/10522263251326524**

**Santos Lima LETD, Rodrigues WF, Freire Oliveira CJ, Kososki E, Silva E Dutra FCM, Cavalcanti A, et al. Occupational impact of COVID-19 social isolation on Brazilian mothers: a cross-sectional study. OTJR. 2025; 45(3):388-398.**
**https://doi.org/10.1177/15394492251316467**
Abstract: The COVID-19 pandemic lockdown impacted the occupational performance of all mothers. For those who were mothers of diversely developing children, it was even more difficult. To measure how the lockdown affected mothers in Brazil, comparing those with typically developing children (MTD) to those with children with disabilities or developmental disorders (MDD). This is a cross-sectional, exploratory, quantitative research realized using an online questionnaire; data were collected on sociodemographics and changes in occupational performance during lockdown. In total, 1,070 mothers of children aged 3 to 12 years (76.5% MTD, 23.5% MDD) reported diminished performance, especially in activities of daily living and instrumental activities of daily living. The decline was more significant in the MDD group. The lockdown negatively impacted the occupational performance of all mothers, with a greater effect on MDD, suggesting possibilities for interventions in occupational therapy to reduce maternal overload in similar situations

**von Thiele Schwarz U, Hedberg Rundgren E, Uvhagen H, and Hedberg Rundgren A. When academic impact is not enough: a concept mapping study characterising excellence in practice-based research. Evidence & Policy. 2025; 21(2):237-256.**
**https://doi.org/10.1332/17442648Y2024D000000039** **[open access]**
Abstract: Background: Research quality is often discussed in terms of excellence, emphasising replicability and trustworthiness. Practice-based research instead emphasises implementability and practical impact, and thus, may reflect other values and logics and challenge how high-quality practice-based research is defined. The aim of this study is to explore what characterises excellent practice-based research. Method: R&D staff at social and health care organisations in Sweden were invited to participate in a concept mapping study. Forty-eight participants were prompted to finish the sentence: 'Excellent practice-based research is characterised by …' in a brainstorming session. Next, participants (n=22) worked individually to sort statements by similarity and rate perceived importance (n=13) and experience (n=10). Data was analysed with multidimensional scaling, cluster analysis and t-tests. Lastly, a digital workshop with 50 participants was conducted to facilitate the interpretation of cluster solutions. Results: Eighty-three statements were distilled into 11 clusters from characteristics typical for traditional academic values (for example, 'deploying appropriate

methods') and practice-based research (for example, 'being actionable') to characteristics emphasising the unique blend between them, such as 'capturing and conveying reality' and 'embracing different agendas and perspectives', the latter rated as the most important quality of excellent practice-based research, followed by 'deploying appropriate methods' and 'being actionable'. Conclusions: Practice-based research is a complex field, addressing both 'why things are' and 'how they work'. This study offers insights into how excellent practice-based research can be defined, broadening the view of what excellence entails.

**Thorup L, Sorensen CLB, and Biering K. The association between work-life conflict and mental health: a cohort study. Journal of Occupational & Environmental Medicine. 2025; 67(5):313-321.**
**https://doi.org/10.1097/JOM.0000000000003313**
Abstract: OBJECTIVE: Mental health problems are increasing worldwide, and research has shown that it can be affected by work-life conflict (WLC). The aim of the present study is to examine the association between WLC and both stress and depressive symptoms in early adulthood. METHODS: A cross-sectional and a 4-year follow-up study was conducted using register data and questionnaire data from The West Jutland Cohort Study (VestLiv), Denmark. A total of 1296 individuals (age 28) were included in 2017, and 679 were included in 2021. Validated scales were used to measure both WLC, stress, and depressive symptoms. Linear and logistic regression were performed. RESULTS: An association was found between WLC and both stress and depressive symptoms in both genders. CONCLUSIONS: It is relevant to consider WLC a contributing factor for mental health of individuals in today's workforce

**Wu M, Wu P, Lu H, Han L, and Liu X. Global burden of occupational ergonomic factor-induced low back pain, 1990~2021: data analysis and projections of the global burden of disease. Frontiers in Public Health. 2025; 13:1573828.**
**https://doi.org/10.3389/fpubh.2025.1573828** **[open access]**
Abstract: Background: Low back pain (LBP) is a global epidemic that severely affects the quality of life and imposes a substantial economic burden worldwide. Occupational ergonomic factors are the most important modifiable contributors to LBP. In this study, we estimated the global burden of occupational ergonomic factor-induced LBP from 1990 to 2021 using the Global Burden of Disease, Injuries, and Risk Factors Study (GBD) 2021 database and projected future trends. Methods: Global years lived with disability (YLDs) and age-standardized YLD rate (ASYLDR) for occupational ergonomic factor-induced LBP by sex and Socio-demographic index (SDI) among individuals aged 15-64 from 1990 to 2021 were obtained from the GBD 2021. Long-term trends were evaluated by calculating the average annual percent change (AAPC) of ASYLDR using a Joinpoint model. A Nordpred model was applied to analyze temporal changes in overall and age-specific YLDs and ASYLDR between 1990 and 2021, and to project trends from 2022 to 2045. Results: From 1990 to 2021, global YLDs of occupational ergonomic factor-induced LBP increased by 40.63%. Projections indicated that all-age YLDs will exceed 15 million person-years by 2037. The ASYLDR of occupational ergonomic factor-induced LBP had shown a sustained decline since 1990, decreasing by 18.75% between 1990 and 2021, with an AAPC of -0.670% (95% confidence interval: -0.718 to -0.622). This downward trend is expected to persist until 2045. The SDI showed a negative correlation with ASYLDR ($R = -0.36$, $p < 0.001$). YLDs and ASYLDR were consistently higher in females than in males. Conclusion: While the disease burden of occupational ergonomic factor-induced LBP has decreased, the reduction remains

modest. Females, low SDI regions, and middle-aged/older adults (40-64 years) are the main contributors to the disease burden. Occupational ergonomic factor-induced LBP remains a critical public health problem that requires urgent attention to find global, comprehensive, effective, and targeted prevention strategies.

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