

Consumo di alcool, idoneità complesse e responsabilità verso terzi: l'esperienza di una coorte di addetti al trasporto pubblico urbano

L. BORDINI, L. PATRINI, MARIA GRAZIA RICCI*, A. VERGA**, L. RIBOLDI

Clinica del Lavoro "Luigi Devoto", Fondazione IRCCS - Ospedale Maggiore Policlinico, Mangiagalli e Regina Elena

*CEMOC, Fondazione IRCCS - Ospedale Maggiore Policlinico, Mangiagalli e Regina Elena

** Ospedale San Raffaele - Resnati

KEY WORDS

Alcohol; public transport drivers; carbohydrate-deficient transferrin (CDT)

SUMMARY

«Alcohol intake, complex ability and responsibility towards others: experience on a cohort of personnel employed to public transport services». *Background.* The excessive intake or the abuse of alcoholic substances represent an important hazard's source for the individual health and for the carrying out of any complex working activities, above all if characterized by elevated responsibility toward other people. In this context the recent Provision of 16 March 2006 of the Permanent Lecture for the Relationships among the State the Regions and the Autonomous Provinces of Trento and Bolzano, has individualized bus driver among the activities or tasks of which is forbidden the assumption of alcoholic drinks at work and can performed alcoholic controls by the competent physician (art. 15 of the Law March 30 th 2001, n. 125). Within the normative considering the DM 23 February 1999 n. 88s (Rule bringing norms dealing about the check and the control of the physical and psycho-aptitude ability of the personnel employed to public transport services), we introduced experience growing up in the period from January 2005 to August 2006, on about 1500 employees, for over 90% of men, employed in a public transport company of the Lombardy as bus driver or railwayman. *Methods.* In order to assess driver's alcoholic abuse the analytical determination of carbohydrate-deficient transferrin (CDT) has been used as a marker of alcohol intake. Within the visits of hiring in service (equal to 10% of the total one of the effected visits) the determination of the CDT has always been performed, while in revision visits (equal to 90% of the total one) this analytical determination has been performed only if possible alcohol abuse has been hypothesized by elevated values of gamma-GT before the Provision March 16th 2006 (and eventually of MCV, AST and ALT) and of routine from April 2006. *Conclusions.* This experience on this large population has confirmed the importance of a careful behaviours of abuse monitoring in workers with high responsibility toward other people. The CDT values reflect high alcoholic consumption, while is poorly remarkable the contribution furnished by anamnestic questionnaire.