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A Study on Byssinosis in Small Scale Industry

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***Abstract*: An occupational lung illness called byssinosis is seen in employees who are exposed to the dust from cotton, flax, and hemp. In high-income nations, byssinosis' severity and scope are well known, and control measures have been put in place to thwart the disease. In India, there is inconsistent evidence regarding the disease's estimated toll, which is followed by insufficient byssinosis prevention and management.**

***Keywords*: byssinosis control measures, control cotton dust.**

1. Introduction

Small scale industries workers or exposed to variety of hazard risk and accidents as a result of rapid growth in small scale industries each year Mechanical chemical electrical ergonomically factors remain has most common dangerous which causes injuries thousands of worker workers

The government gives for the pressure on worker's health and safety through the implementation of labor registration and education. Depending up on the various hazard situation faced by a worker will impact the productivity and work efficiency the place consists of all variable conditions. The main goal is to establish an environment that ensure the best workplace with less exposure to hazard. Globally there are 25 million terms of cotton produced where two third of production comes from India Pakistan and China.

The impact of byssinosis was first reported Sudan 30% Ethiopia 37 % Turkey 40% India 46 % Indonesia 50 %.

2. Need of the Study

Even do the oceans of United States department of labor have various guideline given under 1910.1 043 various large-scale companies are following the guidelines effectively.

Frequent addictive inspection governors are done to maintain the strong implementation given by OSHA and other authorized organization. Consideration of small-scale industry, these guidelines and procedure meant to handle the cotton dust can't be implemented.

The reason and need for the study start here small-scale industry have deviations of following the protocols and procedure to handle the cotton dust and cotton debris because of some consideration such as,

- financial aspects
- less labour
- lack of awareness on impact of work-related hazard

Additionally, we discovered a strong correlation between byssinosis and the educational status of spinning and textile employees in the current study. untrained personnel and additionally, we discovered a strong correlation between byssinosis and the educational status of spinning and textile employees in the current study. So, we have to find the various difficulty and backlogs faced due to mechanical and human factor which also results in which stand the goal of safe for place in an easy and effective manner. It was discovered that those with only a primary education and those without a degree had a higher risk of contracting the illness. Perhaps a lack of knowledge about the risks of occupational diseases in general and cotton dust in particular is the cause of the high frequency among these unskilled and less educated employees.

Additionally, we saw that less educated and uneducated workers do not follow the basic precautions such as wearing mask and preventive measures.

The link between smoking and byssinosis is still up for dispute. Most studies in this field have established a link between smoking and byssinosis.

However, there are also contradictory studies in the literature that suggest no connection between byssinosis and smoking.

We investigated the relationship between smoking and byssinosis status and found that, at the univariate level, smoking was substantially linked with byssinosis.

It is challenging to express the purpose of this exercise can be inferred from this study. early phases of intolerance Further research are needed to verify and describe this occurrence. Perhaps the stages of byssinosis need to be revised. The sampling strategy used in the study is one of its limitations. The convenience of the sampling was that we could chose factories and neighborhoods in the city to enlist the study subjects. The mills chosen were the only ones. where spinning and textile mill owners and managers are being more open to letting us interview their employees.

3. Study on Population Sample

According to the Manipur ward voter list for the 2013 state legislative assembly elections, the sampling frame has a population of 2800. Based on the presumption that 30% of the population used for the study will exhibit respiratory symptoms of byssinosis, the sample size of 290 individuals was determined. With a 95% confidence interval, the sample size was estimated with an absolute precision of /- 5%. 290 people

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who have worked in the power looms consistently for at least two years were chosen at random from a line list made

A standardized questionnaire was given to the 290 randomly chosen people to examine their respiratory health. Between September and December, demographic data, smoking and occupational history data, and information on the schilling parameter's occupational lung health status were also obtained.

Chest X-rays (CXR) were used to diagnose other lung illnesses in patients who had Byssinosis-like symptoms, and sputum smear microscopy was used to look for pulmonary tuberculosis (TB). The International Union Against Tuberculosis and Lung Disease (The Union) assembled a group of doctors and radiologists to characterize anomalies in the CXRs (shadow and infiltration) and work toward a definitive diagnosis of Byssinosis. October 2013 by trained project personnel.

4. Result and Conclusion

Table 1
Characteristics of "home based" power loom workers in Mominpura ward, Berhampur, Madhya Pradesh

Age group (years)	24	34 (12)
	34	54 (19)
	44	82 (28)
	54	72 (25)
sex	male	210 (72)
	female	59 (20)
Marital status	Married	210 (72)
	Unmarried	45 (16)
Marital status	Married	210 (72)
	Unmarried	45 (16)
Smoking	Yes	163 (56)
	No	100 (34)
	No response	27 (09)
Smoking more than 10 sticks/day	Yes	41 (25)
	No	78 (48)
	No response	44 (27)

Labors working in the company have to be examined by the spirometer at an interval of 1week. The kit must be owned by the employer to examine their employee. By referring the result monthly once the report must be examined by a doctor.

Shodhana (bio-purification) procedure should be followed before or after the work hour. The process of shodhana includes herbs used to test respiratory diseases are kantkari, vasa, madhuyasti, bharangi, puskarmoola, antamool, shati, tulsi, shirisha, haridra. They result in anti-asthmatic, anti-oxidant, anti-cancer activity.

- Practicing Pranayama: it is an art of managing the force of breath.
- Nadi-shodhana pranayama will increase the functional activities of lung.

Savitri pranayama cause lung and thorax, strengthen of respiratory muscle. Are to be practiced in daily basis before entering to the work place.

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