# Common mental disorders and sickness absence: 

## Conclusions

- Common mental disorders (CMD) were associated with short and long sickness absence
- CMD should be tackled to prevent sickness absence and promote work-ability of ageing employees


## Background

- CMD affect up to a fourth of employed European populations and are associated with sickness absence
- Few studies have considered different severity levels of CMD together with sickness absence of different lengths

Methods

- Helsinki Health Study phase 1 survey data (2000-2002), 40-60 year old City of Helsinki employees
- Prospectively linked with employer's sickness absence register data: self-certified 1-3 day and medically confirmed 4+ day spells
- $\mathrm{n}=6554$, women $\mathrm{n}=5194$, men $\mathrm{n}=1360$
- CMD measure: General Health Questionnaire GHQ-12 (scores 0-1, 2-4, 5-7, 8-12)
- Covariates: age, marital status, occupational class, working conditions, work-family conflicts, social support, health behaviours, limiting longstanding illness


Figure 1. Sickness absence spells per 100 person-years over a 5 year follow-up by baseline common mental disorders (GHQ-12 score).

Aim

- To examine the associations of CMD at different severity levels with short and longer sickness absence spells among midlife and ageing Finnish municipal employees


## Results

- Increasing severity of CMD increased the rate of both 1-3 day and 4+ day sickness absence spells in a 5 -year follow-up
- Strongest associations were found for men and longer sickness absence spells
- Adjusting for all covariates attenuated the associations but they remained

Table 1. Common mental disorders (GHQ-12 score) and sickness absence (SA, 1-3 days, 4+ days), age-adjusted rate ratios from Poisson regression.


