

National Maritime Occupational Health and Safety Committee

Guidelines to
shipping companies
on HIV and AIDS





1. Introduction

- 1.1 AIDS is an acronym for the Acquired Immune Deficiency Syndrome, a disease that continues to evoke widespread concern. HIV stands for Human Immunodeficiency Virus, the organism responsible for AIDS. The virus attacks part of the body's natural defences against illness, leaving an affected individual susceptible to serious infections and certain cancers. There is, as yet, no immediate prospect of a protective vaccine nor specific treatment for it.
- 1.2 Efforts have therefore been directed at informing the public about the cause of the condition and how it is spread, and more importantly, how it may be prevented. The Chamber of Shipping first published advice to members on HIV and AIDS in 1985, whilst the National Maritime Occupational Health and Safety Committee (NMOHSC) issued guidelines to shipping companies in 1992 and 1999.
- 1.3 HIV infection and AIDS are present all over the world and HIV is now officially defined as a pandemic. Figures from the World Health Organisation (WHO) indicated that, in 2007, there were 33.2 million people living with AIDS worldwide and that an estimated 2.1 million people, including 330,000 children, had died from AIDS in that year. An estimated 2.5 million people were newly infected with HIV in 2007, including 420,000 children.
- 1.4 Sub-Saharan Africa remains by far the most seriously affected area of the world, accounting for an estimated 68% of all people living with AIDS and 76% of all AIDS deaths in 2007. That year saw 1.7 million new HIV infections in the region, bringing the number of people living with HIV to 22.5 million, of whom 61% are women. An estimated 18% of all people living with AIDS in 2007 were resident in south and south-east Asia. In the UK, there are 73,000 people living with HIV and experts believe that 30% of people with HIV do not know they have the condition.



2. Epidemiology

- 2.1 The virus is only passed on when blood, semen or vaginal fluid from an infected person enters another person's blood stream. The commonest means of transmission is through penetrative sexual intercourse with an infected person, but it can also be passed on through the sharing of needles and injecting equipment and from an infected pregnant woman to her unborn child. HIV can only survive within a small range of temperatures around 36.9 degrees celsius – perhaps two degrees either side. It will not survive outside the human body for more than a few minutes.
- 2.2 There may be an increased risk of contracting HIV in some overseas countries if transfusion blood or blood products are not screened and treated, as is now the practice in the Western world. Additionally, needles, syringes and other medical and dental equipment may not be properly sterilised between patients in some of those countries, and thereby may also constitute a means of transmission. The WHO believes that up to 10% of the world's HIV infections come from transfusion of infected blood and blood products.
- 2.3 Although there is still no protective vaccine, recent developments in available treatments have been successful in prolonging – and increasing the quality of – the lives of HIV carriers. As welcome as this is, it may have reduced the effectiveness of campaigns to encourage preventive measures – which, therefore, need vigorous reinforcement.

- 2.4** Seafarers need to be aware of the situation since the nature of their occupation may make them vulnerable to HIV infection and expose them to greater risk in some overseas countries than is the general case in the Western world. The increased risk that seafarers face also makes their families and home communities more vulnerable to HIV and other sexually transmitted infections (STIs.)
- 2.5** At the same time, working conditions may make it harder for seafarers to access information about HIV prevention and related services to decrease their risk of becoming infected. Seafarers are a highly mobile population, who frequent shore-based medical and information services infrequently, and who are often prevented from receiving HIV messages through lack of time or ability to understand the local language. This is why it is important that advice and information on HIV and AIDS continues to be provided for seafarers and access to HIV information and services enhanced.
- 2.6** It is important to note that HIV cannot be acquired through ordinary occupational and social contact. Thus it is not caught from food, kitchen utensils, crockery, restaurants or sharing toilets or washrooms, nor is it transmitted by coughs, sneezes or insect bites. The risk of health workers contracting HIV from patients infected with the virus is minimal and this has been demonstrated by scientific studies.



3. Preventative Measures

- 3.1** Any person engaging in a sexual relationship other than with a regular partner should always use a condom. The correct use of condoms from a reputable manufacturer remains by far the most effective means of protection against transmission of HIV via sexual contact, as well as other sexually-transmitted infections such as chlamydia, gonorrhoea and syphilis and unwanted pregnancy. For anal intercourse it is essential that an extra strength condom is used. Persons engaging in oral sex should use a condom or dental dam as appropriate. In high-risk areas of the world, sexual encounters of any kind should be avoided.
- 3.2** The use of oil-based lubricants, such as petroleum jelly, with latex "male" condoms can reduce their effectiveness, as the oil might react with the latex, rendering it porous. Where additional lubricants are used (this is commonest in respect of anal intercourse) they should be water-based.
- 3.3** When it is necessary to carry out injections, injecting equipment should never be re-used.
- 3.4** Transfusions of blood or blood products in certain overseas locations should be avoided unless there is a compelling medical indication. If possible Red Cross or Red Crescent blood supplies should be used, but if these are not available reassurance should first be obtained from an authoritative source that the transfusion is not infected with HIV, otherwise the substitution of safe sterile plasma expanders should be considered.
- 3.5** Similarly, medical and dental instruments or equipment might not be adequately sterilised between patients in such locations and might constitute a means of transmitting HIV.
- 3.6** Dental treatment should be avoided in such locations unless it is strictly necessary. Ships' crews should be strongly advised to have all preventive and restorative dentistry performed whilst at home before embarking on overseas voyages.

- 3.7** Ear-piercing, tattooing and acupuncture involve puncturing the skin with a sharp instrument and may constitute a further risk of infection. Such practices should be avoided abroad and, to be absolutely sure, barber shop shaving, manicure and pedicure should also be avoided for the same reason.
- 3.8** Items such as toothbrushes and razors should not be shared as there is a chance that they could be contaminated with HIV and this could be passed on through a mouth sore or an abrasion.
- 3.9** Seafarers should be aware that barriers such as gloves, masks, protective eyewear or shields, gowns or aprons that prevent exposure of the skin or mucous membranes to blood-borne pathogens can protect against the transmission of infected blood. Such equipment should be provided on board for seafarers to use. In addition, frequent and thorough washing of the skin immediately after any contact with blood or other bodily fluids can reduce the chance of infection. It is especially important to take particular care with sharp objects such as needles, scalpels and glass, in order to avoid injuries. Once used, such items must be carefully disposed of in solid, appropriately marked containers.
- 3.10** If any person is concerned that they may have come into contact with HIV, they should seek medical advice and treatment as quickly as possible.



4. Treatment

- 4.1** The favoured current treatment for HIV infection consists of highly active anti-retroviral therapy (HAART) This normally consists of combinations (or “cocktails”) comprising at least three drugs belonging to at least two types, or “classes,” of antiretroviral agents. HAART has been found to delay the onset of AIDS in HIV-positive persons by between four and 12 years – normally, progression from HIV infection to AIDS occurs after nine or 10 years and the average survival time after developing AIDS is only 9.2 months. However, the therapy is expensive and can produce unpleasant side-effects.



5. Employment and HIV and AIDS

- 5.1** As previously stated, there is no risk to fellow workers or the general public from normal social and work contact with an employee who is infected with HIV. Where first-aid treatment is required, standard precautions taken to reduce the risk of other infections are equally effective against HIV infection.
- 5.2** Employees who contract HIV are perfectly capable of working normally, subject to periodic medical review as clinically indicated. An HIV-positive seafarer who displays no reasonably foreseeable risk of disease progression from side-effects of treatment or requirements for frequent surveillance may be given an unrestricted ENG1 certificate. Such a seafarer would only be certified as permanently unfit if there were impairing HIV-associated conditions present without scope for improvement.
- 5.3** Any seafarer with HIV who subsequently develops AIDS would be declared permanently unfit for sea service by the statutory medical standards for seafarers. Such a seafarer should therefore be retired on medical grounds.

- 5.4** It is not recommended that employers require their employees, or potential employees, to undergo screening for HIV. It would be essential to provide appropriate counselling for any person being screened. In addition it should be noted that it can take up to six months from the time of infection for HIV antibodies to show up in a test.
- 5.5** Employers need to be aware of the legal protection provided to employees with HIV or AIDS by the Equality Act 2010, in particular in respect of the protected characteristics of disability and, where appropriate, race and sexual orientation.



6 Action by Employers

- 6.1** It is considered important that each company should consider the adoption of an HIV and AIDS policy as part of its overall health and safety policy.
- 6.2** Companies should take steps to:
- 6.2.1** Promote the health and welfare of seafarers;
 - 6.2.2** Provide support health promotion and behaviour change programs on HIV and AIDS
 - 6.2.3** Eliminate prejudice and discrimination against employees suffering from HIV infection; and
 - 6.2.4** Provide support in confidence for any employees known to be suffering from HIV infection.
- 6.3** Employers should ensure that their employees receive informative and educational material about HIV and AIDS. This should be updated at regular intervals.
- 6.4** It is recommended that up-to-date information and advice on HIV and AIDS be provided to all sea staff and managers:
- 6.4.1** In induction programmes; and
 - 6.4.2** In ongoing training programmes.
- 6.5** It is recommended that a kit for protection against blood transmitted diseases meeting Maritime and Coastguard Agency specifications are carried by all vessels. This is a statutory requirement for UK-flag ships trading in malarial areas where medical facilities are limited and emergency shore-based treatment is necessary. On non-UK flag ships any similar flag-state legislation should be complied with.
- 6.6** The company should ensure that supplies of condoms which can be made available to sea staff are carried by all vessels and easily accessed by all seafarers.
- 6.7** The company has a duty to treat in the strictest confidence information concerning the infection of any employee who may have the HIV virus, as would be the case with any other medical condition.



References and Useful Publications

1. World Health Organisation Initiative on HIV and AIDS and Sexually Transmitted Infections (HSI).
www.who.int/asd
2. *AIDS and the Workplace: A Guide for Employers*
Department of Employment/Health and Safety Executive, 1990
3. *Protection against Blood-Borne Infections in the Workplace: HIV and Hepatitis*
Department of Health/Health and Safety Commission Advisory Committee on Dangerous Pathogens, 1996
4. *AIDS in Employment: A Joint Statement*
CBI, TUC and ACAS, 1988
5. *HIV and AIDS Information for Seafarers*
British Red Cross/Health Education Authority, 1994
6. National AIDS Helpline, HM Government free telephone Service
0800 567 123 to talk to an adviser and to obtain free leaflets
7. District Health Authority HIV or AIDS Prevention Co-Ordinators
See Telephone Directory
8. Terrence Higgins Trust
52 Gray's Inn Road, London, WC1X 8LT
9. Joint IMHA/ITF Statement on HIV/AIDS, 2007

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