LETTER TO THE EDITOR

Excess Mortality Among Golf Course Attendants

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In a recent issue of this journal, Kross et al [1996] published the first study which provides mortality figures for male golf course attendants. It was found that these employees had an excess mortality from arteriosclerotic heart disease and from respiratory diseases, compared with the general population. This is an unexpected finding because, as a result of health-based selection, mortality from these diseases is usually lower among people in employment than in the population at large [Checkoway et al., 1989]. Kross et al. interpreted this excess mortality—without further discussion—as being caused by heavy smoking. However, no data with regard to smoking habits were available, and no clear increase was found for typical smoking-related cancers, such as lung cancer and bladder cancer. An alternative explanation might be that golf course work attracts persons who are not fit enough to find employment in industries with a heavy work-load.

Another remark which I would like to make concerns the finding of a significant increase of mortality from prostate cancer. Kross et al. limited themselves to stating that associations were found to exist between prostate cancer risk and firefighting and farming. It might be of interest to mention that the literature points to an association between the use of pesticides and other agricultural chemicals and prostate cancer [Van der Gulden, Vogelzang 1996; Aronson et al., 1996]. In these reports, there is also some evidence to indicate that prostate cancer risk may be related to exposure to combustion products, such as diesel exhaust from agricultural machinery. These types of exposure are relevant to golf course work.

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REFERENCES


