

ANNUAL REPORT 2025



1995



2025

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1995–2025 :

Thirty years of occupational medicine in Luxembourg and thirty years of the ASTF's commitment.

Over these three decades, the world of work, particularly the tertiary and financial sectors, has faced profound upheavals. The dependence on digital technologies, the health crisis of 2020, and more recently, the emergence of artificial intelligence in companies have deeply transformed organisations and working methods. Initially promising simplification and progress, digital tools have drawn the professional world into a vertiginous technological acceleration. Immediacy and permanent availability have gradually become the norm.

This digital revolution has shifted the nature of occupational risks and their impact on health. Long focused on physical risks, which are at the origin of musculoskeletal disorders, occupational health prevention must now broaden its scope to the more insidious sphere of psychosocial risks (PSR).

Faced with these developments, our role as occupational health professionals is that of sentinels. It consists of promoting prevention with a fundamental objective: to preserve the health of employees, an essential resource for the proper functioning and sustainability of companies. In this context, 2025 is an important milestone in our stated strategy to strengthen medical monitoring of all employees of our member companies, with the introduction of systematised periodic examinations. These consultations represent privileged moments of listening and awareness-raising, and enable, in particular, earlier detection of the impact of psychosocial risks and, where needed, tailored support from our psychologists. The assessment of risks related to mental workload is an integral part of the measures essential to the protection of health and safety at work. Although internationally recommended, this assessment remains largely underutilised. Several European Union countries have, however, already incorporated it into their legislative framework, which is not yet the case in Luxembourg. With the ambition to be a forerunner in this area, the ASTF's multidisciplinary team has decided to take on a new challenge for 2026: to deliver for its member companies a comprehensive and structured program integrating risk assessment, employee health monitoring, as well as individual and collective prevention and support measures.

In conclusion, it is essential to keep in mind that technological progress must never come at the expense of our health. Navigating this digital whirlwind requires discernment and responsibility, placing human capital, at once the most precious and the most vulnerable, at the heart of our concerns. The true wealth of a company lies in the well-being and fulfilment of those who bring it to life, as reflected in the ASTF's motto:

« The health of the company depends on the health of its employees. »



Dr Sandrine SCULFORT-TOMASINI
Medical Director, Occupational Physician

Key figures & Evolutions

In 2025, the ASTF has 687 member companies, representing 59 400 affiliated employees.

Activity evolved over the course of the year as follows:

The number of pre-employment medical examinations (which depends on recruitment carried out by employers) decreased, falling from 9 356 in 2024 to 7 901 in 2025.

The medical check-ups carried out at the ASTF allowed the health of a proportion of employees to be monitored (on a voluntary basis). As of 1 December 2025, the decision was made to replace them with enhanced periodic examinations targeted at sector-specific risks (particularly psychosocial risks), with the objective of increasing and broadening medical monitoring to cover all employees of our member companies. This has resulted in a decrease in the number of check-ups carried out (1 051 in 2024 vs. 778 in 2025) and, conversely, a sharp increase in the number of periodic examinations, rising from 1 257 in 2024 to 2 908 in 2025 (+131%). This development is fully in line with the ASTF's strategy to strengthen individual employee follow-up.

The number of special visits remained relatively constant (1 885 in 2024 compared to 1 960 in 2025).

The number of psychological consultations is also stable, and our Lighthouse program continues to grow, with the number of participants rising from 35 to 43 this year.

The flu vaccination campaign was once again a great success this year, with 4 850 doses administered.

Finally, it should be noted that the issue of appointments not honoured by employees (~20% of scheduled medical consultations) continues to have a negative impact on the organisation of medical examinations and, more broadly, on the ASTF's ability to fully fulfil its medical monitoring mission. Targeted measures have been implemented in an attempt to address this phenomenon.

	2025	EVOLUTION	2024
Affiliated companies	687	▲2,08%	673
Affiliated employees	59 400	▲1,48%	58 535
Followed-up employees	12 804	▼-1,29%	12 971
Pre-employment medical examinations	7 901	▼-15,5%	9 356
Periodic examinations	2 908	▲131,3%	1 257
Medical check-ups	778	▼-26,9%	1 051
Consultations for specific situations	1 960	▲3,98%	1 885
Professional reclassifications	172	▲16,2%	148
Psychological consultations	1 926	▼-7,1%	2 074
Participants in the Lighthouse program	43	▲22,8%	35
Flu vaccinations	4 850	▲1,89%	4 760

Medical Consultations

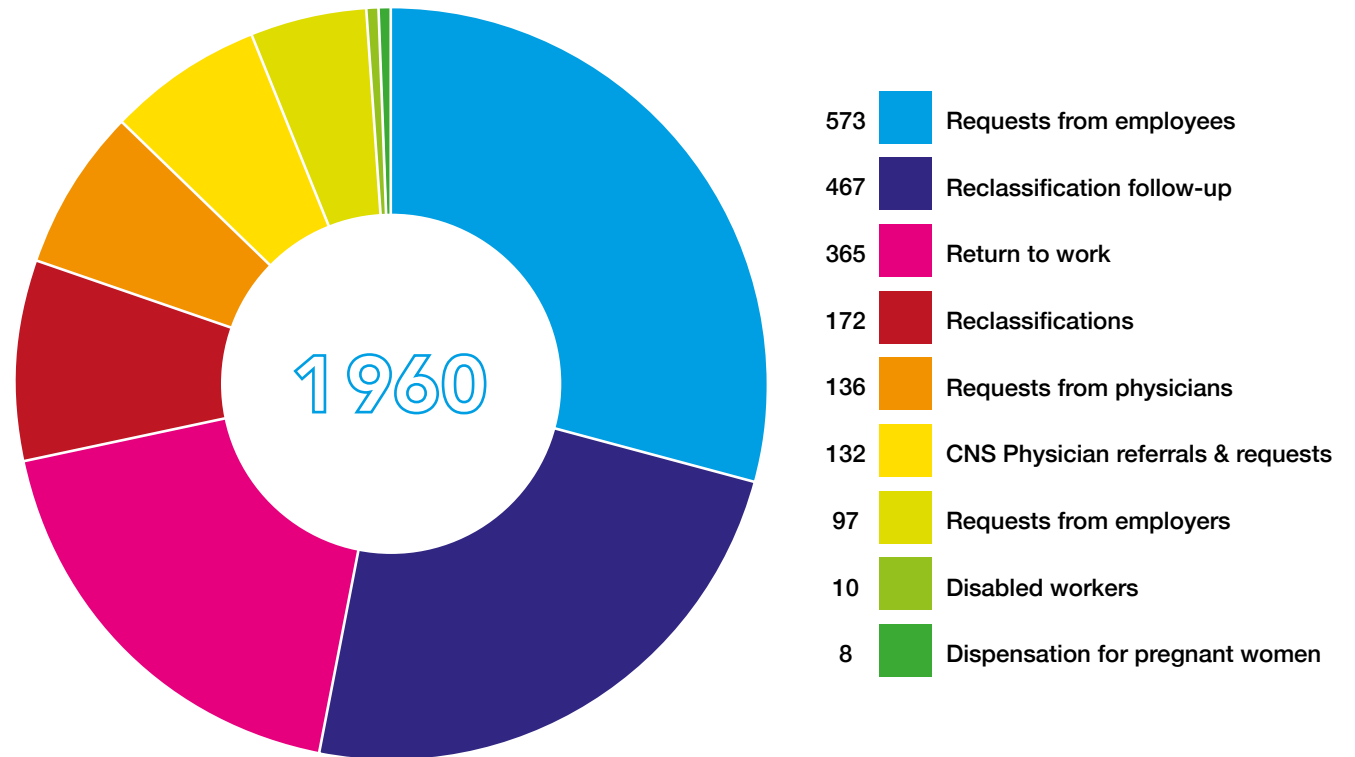
Follow-up of specific situations

During 2025, 1 960 consultations for follow-up of specific situations were carried out by the ASTF medical team.

Comparing with the medical consultations carried out in 2024, the breakdown of examinations is almost identical.

However, one category has seen a significant increase: return-to-work visits (230 in 2024 vs. 365 in 2025, an increase of 56,5%). This rise shows that companies are more systematically sending employees who have been on long-term sick leave (more than six weeks).

One explanation lies in the fact that during meetings with HR departments, ASTF physicians systematically emphasise the importance of this legally required step. This examination is consistent with the current prevention and follow-up approach. Indeed, during this visit, the physician assesses fitness for work and any potential workplace adjustments. Furthermore, it allows the patient to be enrolled in the periodic examination follow-up, as a job fitness certificate is issued with a periodicity of three or five years depending on the employee's age (above or below 50 years, respectively).

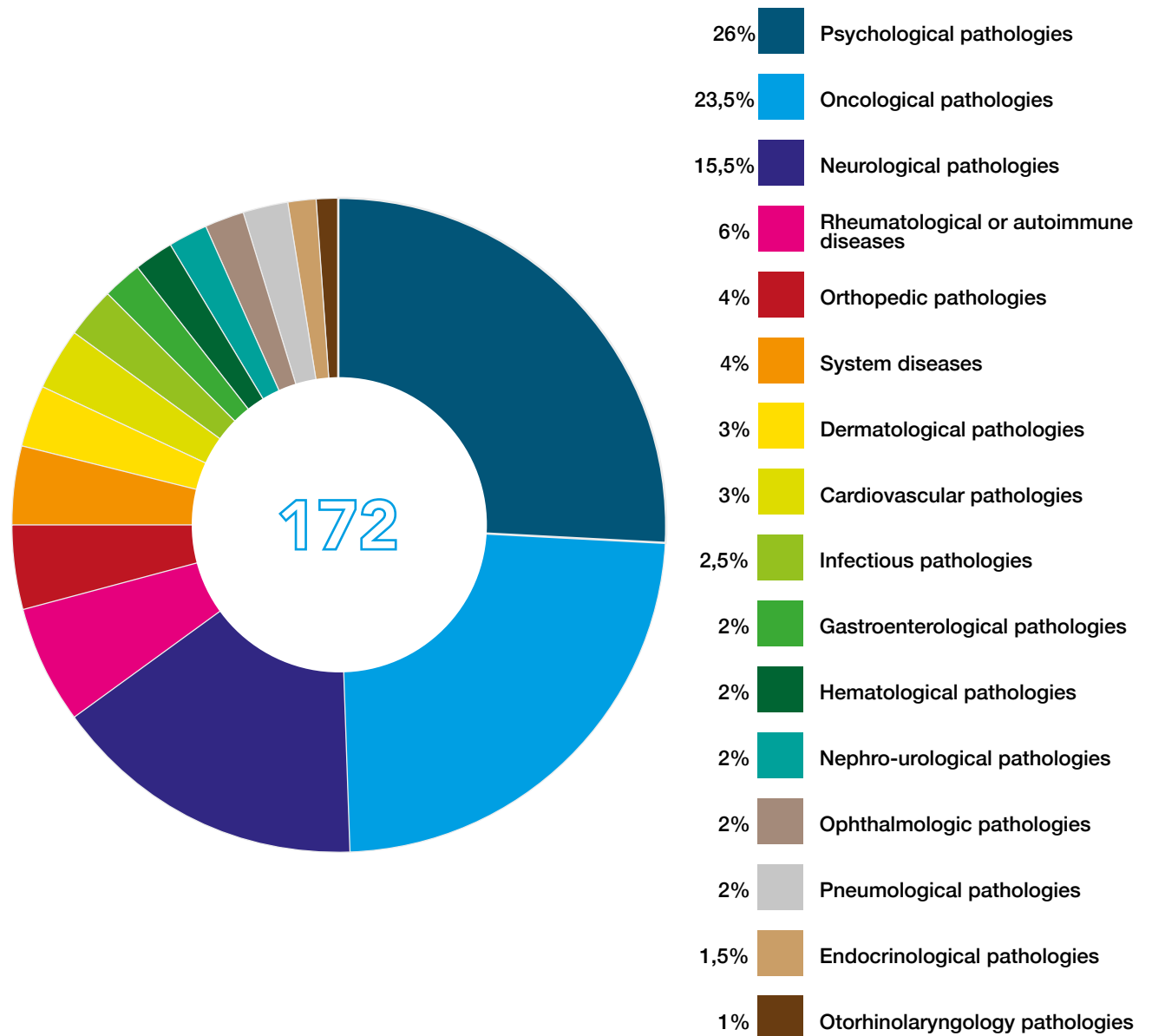


Visits for professional reclassification

The number of reclassification visits has slightly increased compared to 2024, rising from 148 to 172 (+16%).

Having lost their top position in 2024, psychosocial disorders are once again the leading cause of reclassifications, accounting for 26% of cases. In second place are reclassifications related to cancer-related pathologies (23,5%). Finally, neurological pathologies, which had taken first place in 2024, close the top three, representing 15% of all reclassifications.

The other causes of reclassification, detailed in the adjacent chart, are less frequent, each accounting for less than 10% of the total.



Periodic examinations

In 2025, the medical team carried out 2 908 periodic medical examinations.

Periodic medical examinations aim to preserve the long-term health, well-being and work capacity of employees in predominantly sedentary and mentally demanding work environments, such as the financial and tertiary sectors. These examinations make it possible to identify potential health risks at an early stage, prevent the development of chronic diseases and ensure that employees remain fit to perform their professional duties.

For employees under the age of 50, the medical examination is carried out every five years. For employees aged 50 and over, the examination is carried out every three years, reflecting the increased risk of age-related health issues.

In addition, the examination takes into account psychosocial factors, such as work-related stress, mental workload and work-life balance, which are particularly important in office-based roles and service functions. Where necessary, preventive advice, lifestyle recommendations or referrals for further medical follow-up are provided.

Overall, periodic medical examinations contribute to early screening, prevention and health promotion, thereby supporting sustainable employability and reducing the risk of long-term sickness absences.

During the examination, particular attention is paid to risks associated with sedentary work, including musculoskeletal disorders, postural problems and cardiovascular risk factors.



Periodic examinations

Body Mass Index

BMI	PERCENTAGES
Less than 20	6%
20 - 25	41%
25 - 30	33,5%
More than 30	19,5%

This table shows that more than half (53%) of the examined patients have a BMI above normal. Furthermore, nearly 1 in 5 is obese.

Physical activity

FREQUENCE	PERCENTAGES
1x / week	15,5%
2x / week	19%
3x / week	16,5%
4x and more / week	12,5%
From time to time	3%
Active	8%
No physical activity	25,5%

More than one in four patients does not practice any sport at all.

Most participants are not very active, and if we add to the occasional athletes those who are just active and those who exercise less than twice a week, the percentage rises to 49%, meaning practically 1 in 2 people.

Blood pressure

PRESSURE	PERCENTAGES
Less than 140/90	63,5%
More than 140/90	37,5%

More than one in three people examined during the periodic health checks presents high blood pressure.

Tobacco

QUANTITY	PERCENTAGES
1 to 10 cigarettes / day	8%
10 à 20 cigarettes / day	4%
More than 20 cigarettes / day	0,5%
E-cigarette	1,5%
Occasional smoker	3%
Former smoker	4%
Non-smoker	79%

More than three quarters of the participants in the periodic health checks are non-smokers, and even among smokers, the majority smoke less than 10 cigarettes per day.

These percentages confirm the value of periodic health checks as a tool for prevention and awareness among employees.

Burn-out follow-up

As part of its occupational health prevention mission, the ASTF continued in 2025 to assess situations of chronic stress and psychological overload identified during occupational medicine consultations with employees of member companies. This approach is based on the use of results from psychosocial risk self-assessment questionnaires collected both during periodic medical examinations and medical check-ups, as well as during consultations triggered by particular professional situations.

This methodology enables the early identification of signs of work-related psychological distress, whether explicitly expressed by employees or manifesting as more subtle clinical indicators. This approach thus facilitates early intervention, before the development of more established psychosocial disorders or confirmed burn-out.

Of the 3 662 psychosocial risk assessments carried out as part of periodic examinations and medical check-ups, a significant proportion of employees showed vulnerability indicators with regard to burn-out. Specifically, 60,5% of those assessed fall within a low-risk zone, while 30,9% present a moderate level of risk. Situations corresponding to a high risk of professional exhaustion concern 1,8% of employees, and cases of severe burn-out remain exceptional (0,1%). Conversely, only 6,7% of assessed employees present no identified risk factors. These figures highlight the central role of occupational medicine consultations in the early detection of at-risk situations and in the implementation of appropriate preventive measures.

Analysis of the 1 108 psychosocial risk assessment tests carried out during consultations for particular situations reveals more pronounced clinical profiles, with a higher proportion of employees presenting a high risk (7,5%) or confirmed burn-out (1,8%). However, even within this group, the majority of situations still fall within risk levels for which early and appropriate intervention is likely to prevent the worsening of disorders.

Overall, regardless of the type of consultation, the low proportion of employees showing no signs of psychological vulnerability highlights the need to maintain collective and continuous vigilance with regard to psychosocial risk factors, such as workload, emotional demands, lack of autonomy, and interpersonal tensions.

Compared with data collected in 2024, the results observed in 2025 appear stable. They confirm the persistence of issues related to mental load and psychological distress at work, and reinforce the need to embed preventive actions within a long-term approach.

With this in mind, the Copenhagen Psychosocial Questionnaire (COPSOQ) will soon be systematically offered during periodic medical examinations. This scientifically validated tool will enable an individualised and multidimensional assessment of psychosocial risks, facilitating early and structured dialogue between the employee and the occupational physician.

In parallel, as psychosocial risk factors are still insufficiently integrated into the current inventory of at-risk positions, work is currently under way within the ASTF to supplement this tool by defining specific items in order to better assess them.

All of these actions reflect a commitment to strengthening comprehensive, progressive and shared prevention, in the service of mental health and well-being at work.

RESULTS OF PSYCHOSOCIAL RISK QUESTIONNAIRES OTHER MEDICAL EXAMINATIONS 1 108 tests		RESULTS OF PSYCHOSOCIAL RISK QUESTIONNAIRES MEDICAL CHECK-UPS / PERIODIC EXAMINATIONS 3 662 tests
1,8%	Severe risk of burn-out	0,1%
7,5%	Risk of burn-out	1,8%
33%	Definitely at risk	30,9%
51,8%	Minor symptoms	60,5%
5,9%	No risk	6,7%

Trainings

In 2025, the ASTF continued its training activity, firmly convinced that occupational health prevention rests on two complementary pillars: medical monitoring and training as a tool for ongoing prevention and awareness among companies and their employees. The objective is to strengthen internal competencies, support managers and create safer, healthier and more sustainable working environments.

A new catalogue presenting the training courses, programs and workshops is available on our website. The objectives and content of each training course, the pedagogical methods, duration, target audience and languages offered are described for each topic.

2025 Activity: A stable Volume, evolving Needs

In 2025, 153 training sessions were delivered by the ASTF, a figure slightly higher than in 2024 (147), but lower than in 2023 (183). These variations can be explained by several factors:

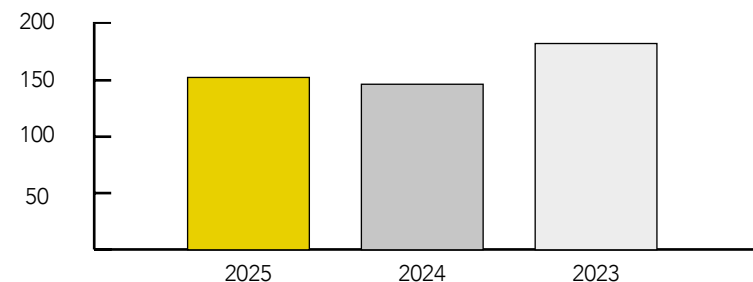
- the diversity of topics requested,
- the variable duration of training sessions,
- the fluctuating availability of trainers,
- the strategic decision taken in March 2024 to discontinue webinars in favour of the active presence of our medical teams within companies, which mechanically reduced the number of training sessions and the total volume of hours.

In 2026, the intention is to once again offer webinars for a number of training courses suited to this format and to meet the needs expressed by our members.

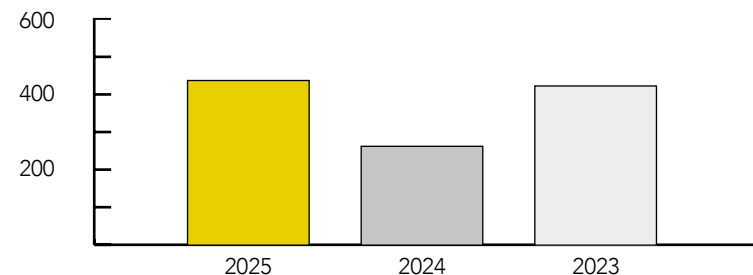
Evolution of training types

Whereas in 2024 a significant proportion of interventions consisted of short information sessions, 2025 was marked by a return to longer and more in-depth formats, which also explains the increase this year in the number of training hours delivered (438,5 hours in 2025 vs. 264 hours in 2024).

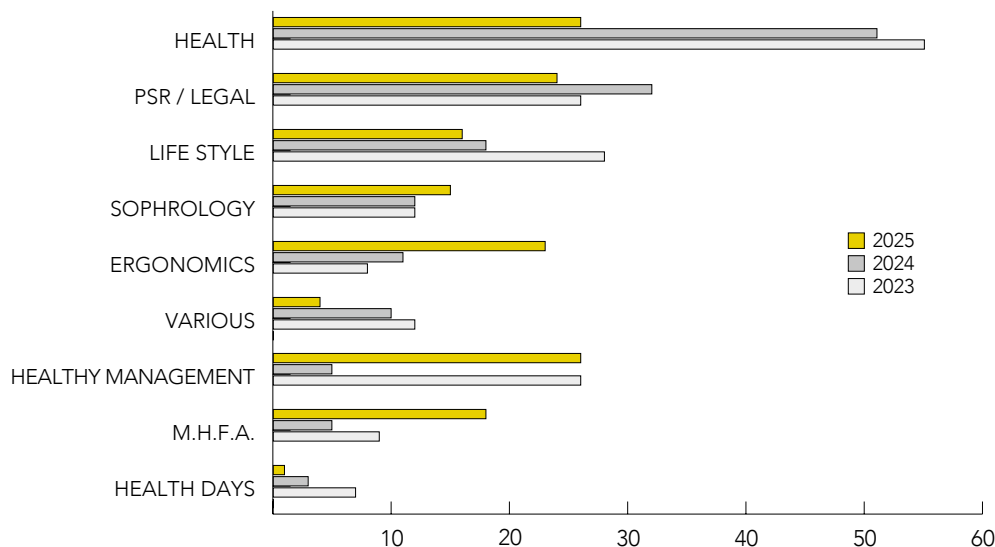
NUMBER OF TRAINING SESSIONS



HOURS OF TRAINING



BREAKDOWN OF TRAINING SESSIONS



Trainings

Observed trends:

- Rise in demand for MHFA training (Mental Health First Aid): a 12-hour program certified by the Ligue de Santé Mentale, forming part of Luxembourg's national mental health plan.
- Strong increase in demand for healthy leadership and management training, supporting the prevention of psychosocial risks and the sustainable engagement of teams.
- Increase in ergonomics interventions, combining theory with direct practical application on request.
- Greater diversification of training choices, indicating that members are exploring the full catalogue more broadly.

Mental Health First Aid (MHFA)

In 2025, 14 MHFA training sessions were organised, bringing the total to 59 groups trained since 2021, across 33 companies only. It is important to recall that this training aims to prepare individuals to intervene in psychological first aid, much like physical first aid: providing immediate support in situations of distress, and not to train internal mental health coaches or change facilitators.

For these more structural needs, other training courses from our catalogue are better suited, such as « Introduction to Mental Health for Managers », or our dedicated « Healthy Leadership » modules, which aim to strengthen managerial competencies and the sustainable prevention of psychosocial risks.

MHFA training is demanding:

- 12 hours of training,
- significant mobilisation of our teams,
- specific instructor certification.

This is why we must manage resources and access carefully to ensure that as many of our members as possible can benefit from it.

2026 Outlook:

Broadening access to ASTF training for small and medium-sized enterprises members via inter-company training

Today, our training sessions reach an average of 6% of our members. To strengthen our impact, the ASTF aims to:

- reach more companies,
- increase the visibility of its programs,
- and offer formats adapted to smaller structures.

Psychology

Before going further, a reminder on psychosocial risks is necessary in order to fully understand them and appreciate that they can form a complex and multifaceted reality. Why? Because PSR are inherently multifactorial and interdependent, arising from the relationship between the individual and the organisation in which they evolve.

Let us revisit the definition « Psychosocial risks are psychological and physical disorders resulting from the interaction between an individual and their work, linked to organisational, relational, managerial and individual factors » (Source: INRS, Gollac Report 2011).

Observations show that certain factors can be aggravating, such as work overload, lack of autonomy and support, and deteriorated interpersonal relationships.

All of these parameters have consequences on the physical and mental health as well as the performance of employees within the organisation. Common manifestations include chronic stress, burn-out, moral harassment and workplace violence.

These psychosocial risks can be exacerbated by the broader societal context, creating challenging environments that impact the mental and physical health of employees.

For occupational health psychologists, the challenges are considerable :

- De-stigmatising care, combating the prejudice and shame associated with psychological disorders to encourage access to care.
- Addressing human and organisational causes.
- Preventing isolation linked to remote working.
- Developing innovative and adapted interventions in response to complex issues such as value conflicts and job insecurity.

Meeting these challenges requires:

- Adapting methods to accompany shifts in mindset and the evolving expectations of members and their staff.
- Managing isolation, maintaining social bonds, achieving work-life balance and addressing mental load.
- Implementing preventive actions targeting both chronic stress and professional burn-out.
- Supporting employees facing existential questions, loss of meaning, conflicts and relational difficulties.
- Co-constructing prevention and support policies together with management and social stakeholders within companies.

In short, one ultimate challenge remains: transforming a reactive approach into a proactive one, by equipping companies and employees to become active agents of their own health and to positively transform their working environments.

In conclusion, modern occupational psychology must demonstrate person-centred expertise, organisational analysis capability and a role as a partner in change, navigating between individual needs and collective imperatives, between the virtual and the real, in order to create working environments that are more human and more resilient.

Lighthouse

In 2025, 43 people from 26 different companies were able to benefit from the Lighthouse program, dedicated to the prevention of professional burn-out.

Changes compared to 2024

In 2025, as part of a continuous improvement approach to this program for employees of our affiliated members, we evolved our program through:

Relaxation techniques:

The previously preferred method was sophrology, in order to enable a reconnection between body and mind. And as we all know, there is no single truth. We therefore broadened our offering to include several other relaxation techniques, namely:

- Dynamic sophrology
- Caycedian sophrology
- Jacobson's progressive muscle relaxation
- Mindfulness meditation

Annual sessions:

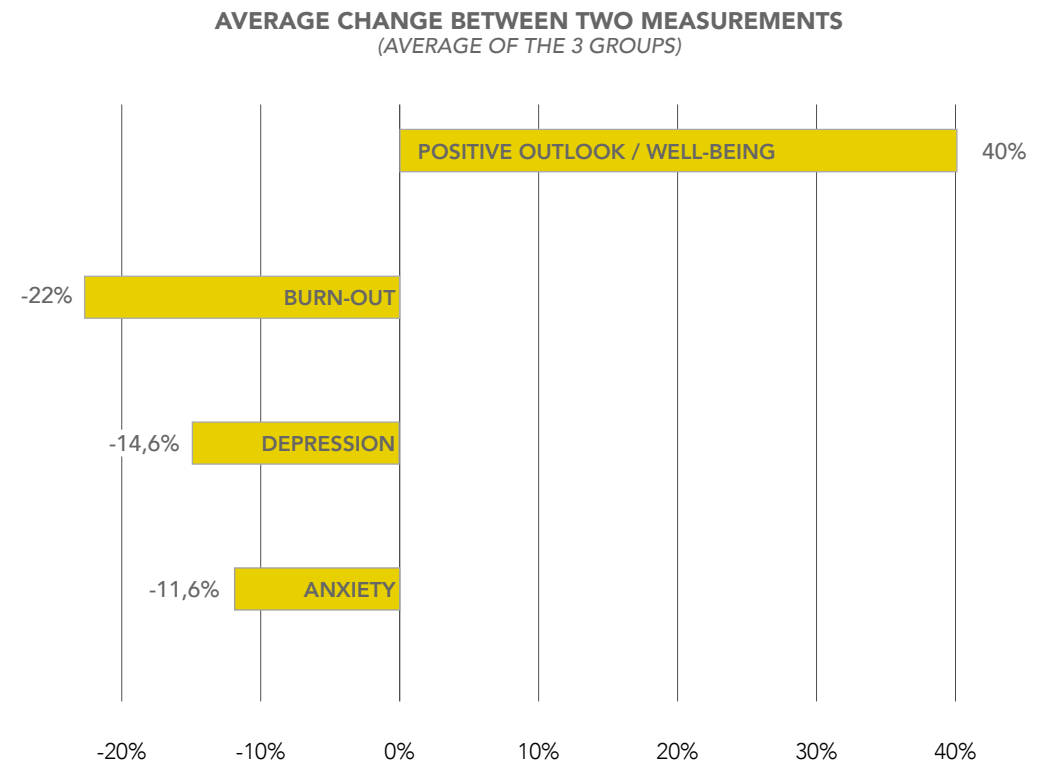
The number of annual sessions was increased to 3 (vs. 2 in 2024), meaning one session per four-month period. Each session comprises 2 groups: one French-speaking and one English-speaking. To date, the French-speaking group has consistently been fully booked, which has not been the case for the English-speaking group. This will be addressed through a dedicated communication plan for 2026.

Assessing the program's impact on participants' symptoms and well-being.

As in the previous year, the 43 participants completed, at the start and end of the program, a psychometric assessment of their risk level of professional burn-out, symptoms of anxiety and depression, and other psychosomatic indicators.

They also completed a short questionnaire assessing positive outlook and well-being.

Overall, we were able to observe the following results:



Lighthouse

On average, across the four assessed scales, questionnaire results improved, meaning that anxiety and depressive symptoms and the risk of professional burn-out decreased, while the positive outlook/well-being scale showed a significant increase. This confirms the relevance of the program aimed at raising awareness and strengthening participants' coping resources.

However, we observe little improvement for individuals presenting higher scores on the anxiety and/or depression symptom assessment scales. On the other hand, a positive outlook on the future improves for most participants. These results would confirm the trend whereby the program appears to be most beneficial for participants presenting mild to moderate symptoms of anxiety, depression and burn-out, and as such represents a prevention and support tool.

For all participants, the psychosomatic signs assessed (anxiety, sleep problems, stomach knots, etc.) decreased in both variety and intensity. This could be explained by the fact that we have diversified relaxation techniques.

The group effect remains a key factor in improving individuals' overall sense of well-being.

Assessment tools references:

- Emotional distress - anxiety - short form for adults; 2008-2012 PROMIS Health Organization
- Emotional distress - depression - short form for adults; 2008-2012 PROMIS Health Organization.
- DSM-5-TR Measurement of self-assessed cross-sectional level 1 symptoms - adult, 2013 APA.
- Lukat, J., Margraf, J., Lutz, R., van der Veld, W.M., Becker, E.S. (2016). Psychometric properties of the positive mental health scale (PMH-scale). BMC Psychology, 4;8.
- Doi: 10.1186/s40359-016-0111-x.



Ergonomics

Context and strategic direction

In 2025, the Ergonomics department further strengthened its role within ASTF's preventive framework. Building on the expanded concept introduced in 2024, which integrates traditional ergonomic workstation analysis with individual health management, the department continued to emphasize sustainable prevention, employee well-being and workplace performance. The approach remains firmly aligned with ASTF's mission of promoting occupational health and proactive risk prevention.

Key activities and engagement

Throughout the year, the department conducted approximately 160 individual ergonomic consultations and workstation assessments. These interventions focused on identifying musculoskeletal disorders, adapting workstations to individual needs, and providing targeted, practical advice to employees and employers. In addition, 16 ergonomic workshops totaling approximately 40 hours were delivered, covering topics such as static working postures, ergonomic workstation setup and daily health strategies. Through these combined activities, the department helped raise employee awareness and develop ergonomic knowledge within member companies.

Ergonomics activities were conducted in close collaboration with more than 40 member companies, reflecting both the demand for and trust in ASTF's preventive offering. Feedback collected from participants and company representatives was positive, highlighting the importance of proactive and individualized occupational health support.

Impact and value for members

The 2025 service delivery contributed to a broader shift in perception: ergonomics is increasingly recognized not only as a legal obligation but as a strategic asset for health promotion. These various interventions enable the implementation of preventive practices, both at the individual level and within organizations.

By strengthening ergonomic awareness within companies and providing practical tools for daily use, the department supported ASTF's overarching goal of reducing the risk of work-related musculoskeletal disorders and fostering a culture of health responsibility.

Communication

In 2025, the statistics reflect a stable audience. The migration to the new website, completed on May 7, 2025, significantly improved performance on desktop and mobile, security, and flexibility in content management.

Website

The site recorded 40 417 visitors (+4,34% vs. 2024), representing an average of 3 368 unique monthly visitors. It totaled 90 374 page views (-4,75% vs. 2024), with a monthly average of 7 531 pages. This decrease is explained by the reorganization of content enabled by the new platform, which reduced the total number of pages by eliminating duplicates.

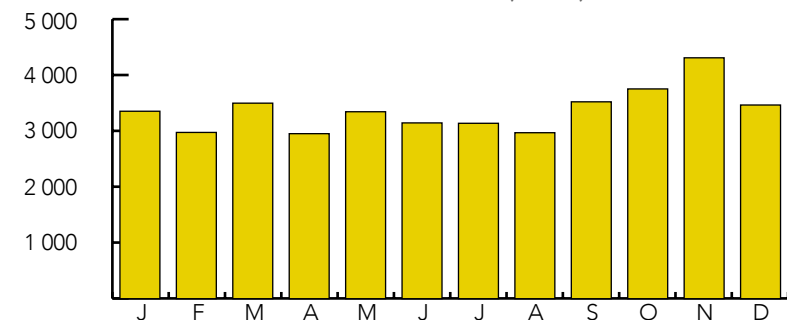
The peaks in November (4 306 visitors) and December (3 464 visitors) — representing +47% compared to the same months in 2024 — resulted from the sending of a communication on mandatory periodic medical examinations to all directors and HR managers (see *insert on the following page*).

a) Visitor Origins

Search engines remain the primary acquisition source, accounting for 52,07% of traffic. Direct access reaches 39,19% and inbound links 7,06%. These figures should however be put into perspective, as the refusal of cookies by a portion of users makes the traceability of their origin, and therefore the reliability of this data, relative.

A notable new development in 2025: 0,90% of visitors arrive via AI tools (in order: ChatGPT, Perplexity, Copilot, Claude). Although marginal, this channel is already equivalent to traffic from social networks (0,78%). As astf.lu is a reference website, it is consistent that these generative AI players draw on its content as a source.

WEBSITE VISITS (USERS)



ORIGINS	2025	EVOLUTION	2024	2023
Search	52,07%	▼ -16,5%	62,35%	62,50%
Direct access	39,19%	▲ 38,5%	28,29%	23,68%
E-mailings	NA	-	2,53%	8,97%
Inbound links	7,06%	▲ 19,46%	5,91%	3,97%
AI links	0,90%	-	-	-
Social media	0,78%	▼ -19,6%	0,97%	0,89%

Communication

b) User languages

The linguistic distribution is evolving slightly: English speakers now represent more than half of the audience (53,2%), while French speakers (30,5%) and German speakers (5,5%) are proportionally declining. The « Other languages » category remains identical at 10,8%, including English, French and German-speaking users who refused cookies

VISITORS	2025	EVOLUTION	2024	2023
English speakers	53,2%	▲ 9,67%	48,51%	50,41%
French speakers	30,5%	▼ -9,92%	33,86%	38,22%
German speakers	5,5%	▼ -19,47%	6,83%	6,57%
Others	10,8%	-	10,80%	4,81%

c) Device types

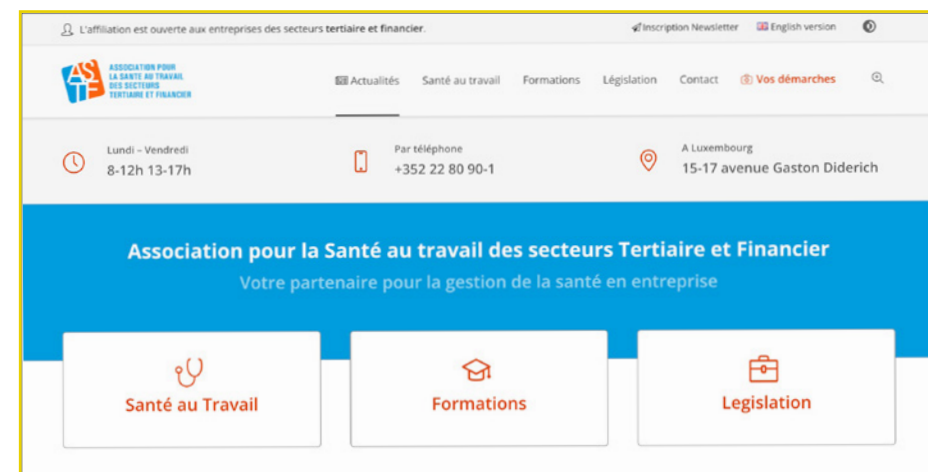
2025 marks a turning point: mobile/desktop parity has been reached, with 49,72% computers against 49,42% mobile devices. This convergence, anticipated for several years, confirms the relevance of the new ASTF platform with technical features better suited to mobile. Tablets remain marginal (0,85%).

DEVICES	2025	EVOLUTION	2024	2023
Computers	49,73%	▼ -21,15%	63,06%	64,29%
Mobiles	49,42%	▲ 42,01%	34,80%	34,65%
Tablets	0,85%	▲ 32,81%	0,64%	0,63%
Others	NA%	-	1,50%	0,43%

Social media

The LinkedIn page totaled 894 subscribers at end-2025 (+170 vs. 2024, +23,48%). This growth is partly explained by the notoriety of philosopher Julia de Funès, who spoke at the Annual General Meeting in May 2025. The LinkedIn post, including photos from the event, benefited from wide visibility, allowing the page to attract new subscribers.

OVERVIEW OF THE NEW WEBSITE





Communication to Human Resources managers

On November 19, 2025, a communication on mandatory periodic medical examinations was sent to all directors and HR managers. It generated exceptional traffic to a dedicated page presenting: the historical and legal context, the differences from previous examinations, the objectives of enhanced medical surveillance, the procedure to follow, and the new billing procedures for missed appointments.

The ASTF team

Management

 Olivier HAMOU
Managing Director


 Dr Sandrine SCULFORT-TOMASINI
Medical Director

Occupational physicians

 Dr Anne-Lorraine BOUQUIAUX

 Dr Heidi D'HERT

 Dr Clara GOEDERT

 Dr Inès SAIDI

 Dr Kawtare ZILATE

Nursing Manager

 Sandra VAZQUEZ-PARRAS

Nurse

 Magali MORGESE

Psychology Manager

 Samuel BOUTIBA


Psychologist

 Gilliane GRANDJEAN


Psychologist & Coach

 Patrice PETREMENT-MARCHAL

Training Manager & Psychologist

 Petra BUDERUS


Ergonomist

 Thomas HÜTTERS DORF

Member Relations & Marketing Manager

 Paul GRUNER

Administrative & Accounting Manager

 Bernadette MARCHER


Administrative & Medical Assistants Manager

 Sandra NATALE-TIBERI

Administrative & Medical Assistants

 Thérèse AMMAN

 Céline BITTERMANN

 Vanessa JACOB

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