

Carcinogens Health Surveillance

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What COSHH Says

- Health surveillance is appropriate where employees are exposed to carcinogenic or mutagenic substances, unless the employer assesses that exposure is so adequately controlled that there is no reasonable likelihood of an identifiable disease or adverse health effect resulting from the exposure

How do we determine if the carcinogen is ‘so adequately controlled’

- We say it is impossible to assess and so we keep a health record for all people handling carcinogens
- We say it is our policy that all carcinogens are always adequately controlled so we don't keep any health records for any carcinogens
- We try to lay down some sort of objective criteria for assessing exposure and determining when health surveillance is required

What might the criteria be?

- Potency of carcinogen
- Quantity handled
- Control measures in place
- Whether there is reliance on PPE

Suggestion for limits above which health surveillance would be indicated

■ Powders

- Open bench 100 ug
- Fume cupboard 100 mg
- Isolator 100 gms

■ Volatile Liquids

- Open bench 100 uL
- Fume cupboard 100 mL
- Isolator 1000 mL

- These are based on an exposure limit of 1 ug/m³ or 0.1 ppm and can be adjusted up if it is a well down low potency carcinogen with an established WEL

Health surveillance also indicated if...

- High potency carcinogen
- Banned carcinogen (benzidine, beta-naphthylamine)
- Reliance on PPE for control

How would the process work

- Straightforward guidance
- Training of PI's and other COSHH assessors
- Process remains responsibility of COSHH assessors
- Able to seek guidance from OH if necessary
 - Should OH formally monitor the assessments?
- Notify OH when Health surveillance is required

Carcinogen Classification

- COSHH is based on the R45 CHIP Risk Phrase (to be reviewed in light of GHS)
 - Categories 1, 2, 3
- GHS (Global Harmonisation System) coming in (transition to 2015)
 - Categories 1A, 1B, 2
- MSDS's contain both classifications (and often IARC as well) this is causing great confusion and we have to ensure that guidance is clear as to which system is used

What are we doing about other carcinogens

- Hardwood dusts
- Mineral oils
- Pitch and tar

Health Record Procedure

- Must be a separate document
- Not medically confidential but still contains 'sensitive' data so needs good control
- System to ensure archiving 40 years
 - Paper or electronic record?
- Must link individual to exposure
- Who is it kept by?
 - OH
 - Safety
 - User department



Health Surveillance Updates



J.T. Craggs

Health Surveillance updates

- UKNSPG guidance on Working Safely with Nanomaterials in R&D
- UCEA Guidance on Responsible Research
- New hazard phrases under Global Harmonisation System (GHS)

- Potential topics for Spring 2013 HEOPS –
 - Physician revalidation performance review
 - Caldicott Guardian
 - Feedback on UCEA Sickness Absence Survey 2011/12