

Asbestos problems: Follow-up of potentially asbestos exposed workers in Norway.

Tor Erik Danielsen

Specialist in Occupational Medicine, PHD.
Chief physician at the Norwegian Labour Inspection Authority



Still no global ban on asbestos use

-ban in Norway from the 1980's.



What has lately happened on asbestos in Norway?

Examples:

1. Report from the Norwegian Labour Inspection Authority on status for follow-up in Norway (January 2020).
2. Project report from STAMI (National Institute) on exposure in asbestos removal.
3. Recommendations for follow-up from a working group led by STAMI to employer's organization for industrial enterprises "Norsk Industri".
4. Proposal from the Norwegian Labor Inspection Authority on regulatory changes.



1) Report from the Norwegian Labour Inspection Authority on the status for follow-up on asbestos in Norway (January 2020).

- Labour Inspection efforts to reduce health consequences of asbestos exposure

Various measures:

- Mapping of already used asbestos
- Training in asbestos removal work (demolition)
- Workplace visits
- Regulatory changes

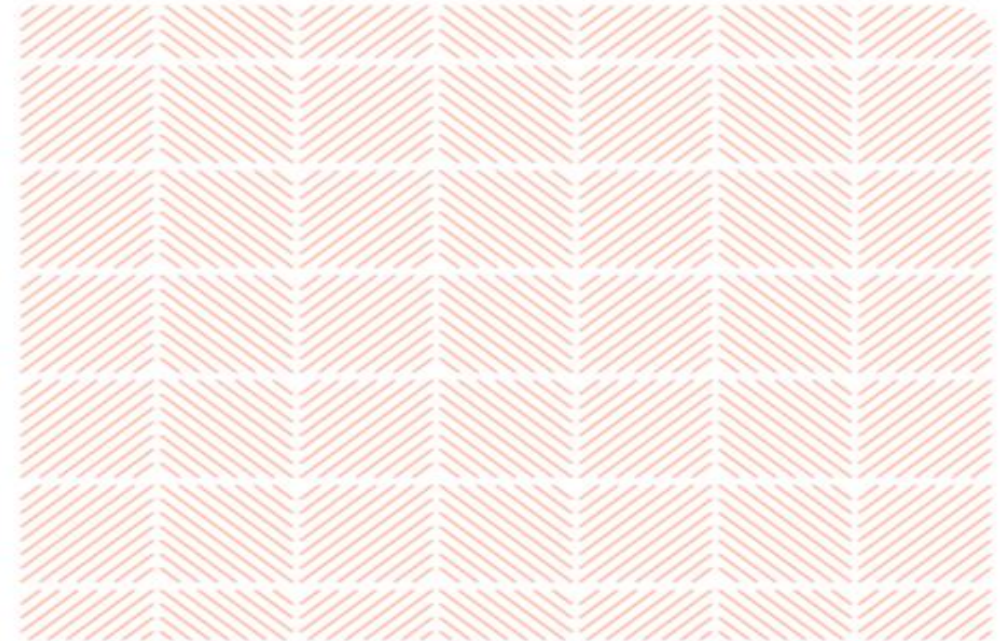


Arbeidstilsynets innsats mot asbesteksponering

Evaluering og forslag til tiltak

Rapport

Januar 2020



- New situation after 40 year with ban (?)
- Less use in regular work life
- Still asbestos in buildings and installations
- Still lung cancer and mesotheliomas among exposed workers (long latency)



2) STAMI-report - June 2021

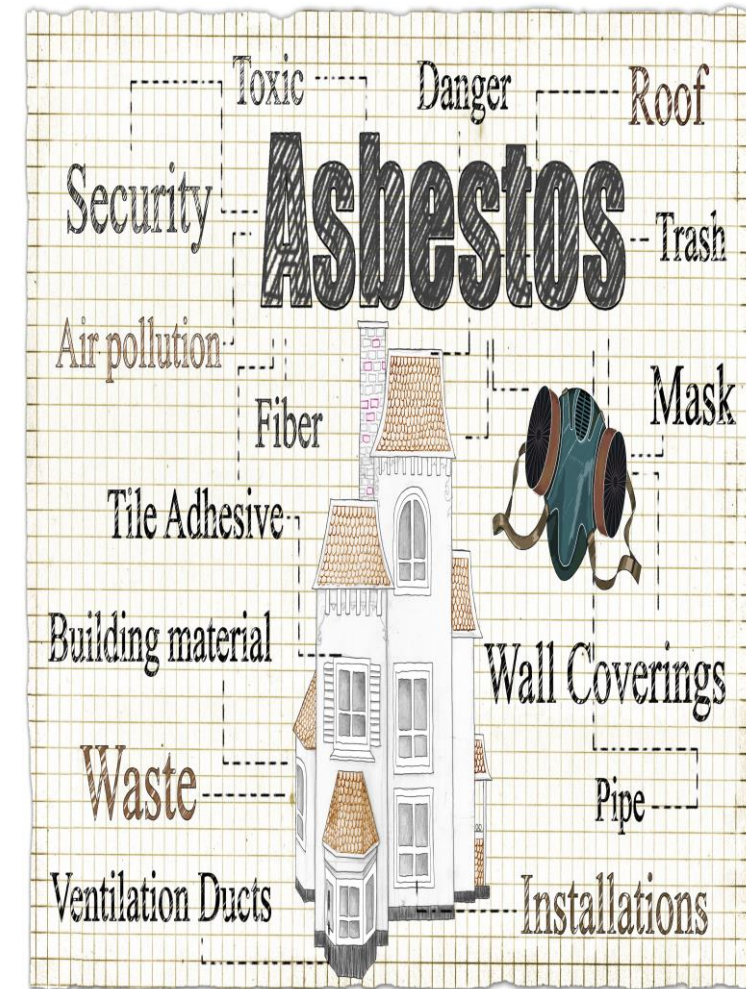
- ❑ It is important that today's professionals in the construction and demolition industry gain knowledge about asbestos:
 - where it is found,
 - how it is handled,
 - protective measures,
 - and possible health risks from exposure.
- ❑ The report describes the levels of asbestos fibres that can occur in the air when working with asbestos-containing building materials.
- ❑ Several of the measurements carried out by the researchers show levels of asbestos fibres above the limit values, even though the work has been carried out with careful processes.
- ❑ The asbestos measurements carried out in the project show the potential for exposure in renovation that is not carried out in a correct manner.
- ❑ In renovation projects where one is not aware of the presence of asbestos-containing materials, there may be unnecessary exposure.

«Risiko for tredje bølge av asbesteksponerte»



3) Recommendations from a working group lead by STAMI

A group of professionals from several professional disciplines was brought together, who could contribute to a broad understanding. This group had seven meetings at STAMI over five years, and consists of specialists in pulmonary medicine, oncology, radiology and occupational medicine as well as representatives of the Norwegian Labour Inspection Authority, STAMI, Trade Unions, and Norwegian Industry.



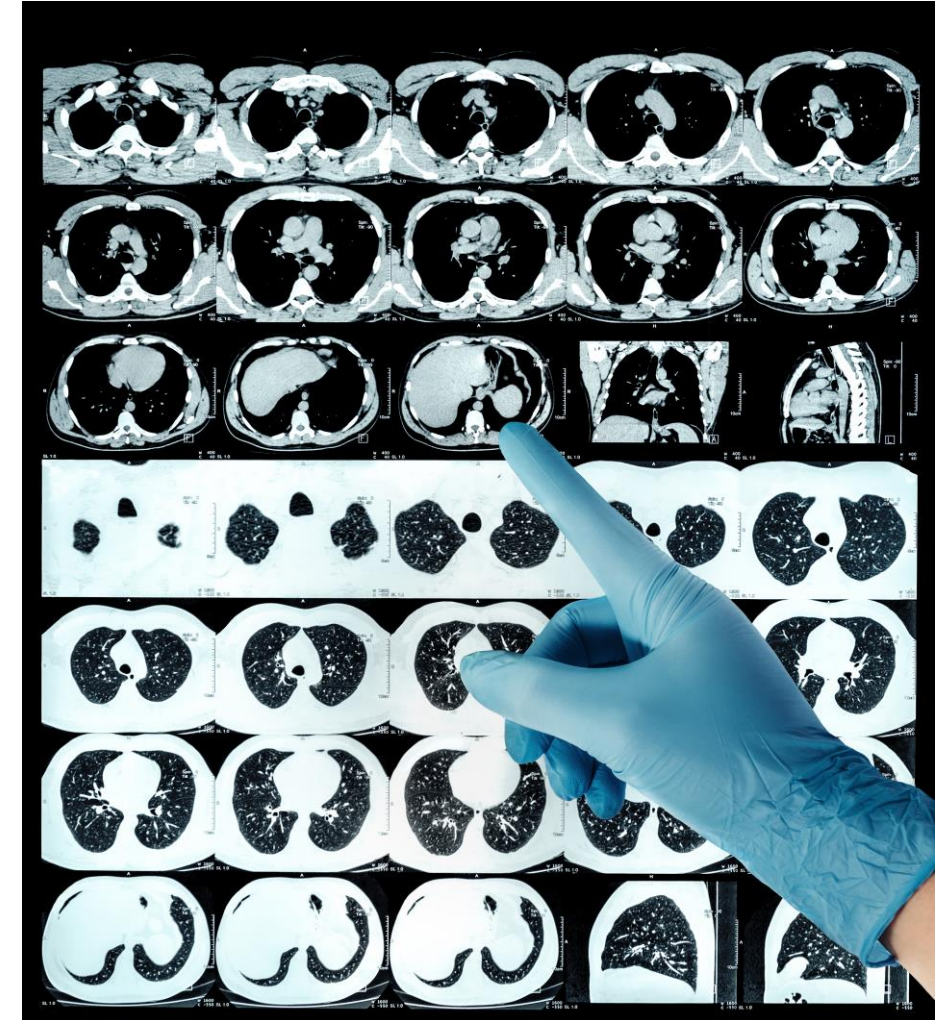
Conclusions:

- Which imaging method is recommended for screening asbestos-exposed?
Answer: According to regulations on the performance of work, an X-ray examination of new employees must be performed before they are put to work with asbestos. The purpose of this examination is to ensure that there is no serious lung or heart disease that would be incompatible with this type of work. In this examination, X-rays of the lungs (chest X-ray) are used.
- What doses of asbestos exposure require periodic health monitoring with imaging?
Answer: With the current level of knowledge, we would not recommend a routine imaging examination of asbestos-exposed people. The health examination should include a conversation about exposure, smoking and health status. Spirometry is performed regularly. The doctor decides, on the basis of symptoms or reduced lung function, whether there is an indication for imaging, this will then usually be about CT thorax. Such follow-up should be offered to employees with occupational exposure that indicates increased risk, even after the employee has terminated his / her employment / retired.

National screening for lung cancer?

The discussion in the working group has touched on several key questions that must be addressed and answered separately

- Is screening to detect lung cancer early appropriate?
 - If lung cancer is detected early enough, there will be an opportunity for curative treatment.
- If so, is CT a good instrument to use?
 - Yes, but with defined reservations
- If so, who is in the target audience to be screened?
 - If a national CT screening program is introduced in Norway, asbestos-exposed and other occupationally exposed groups with a high risk of lung cancer could be included in this program on the basis of an additional contribution from the occupational exposure to their individual overall risk of developing lung cancer.



4) Regulatory changes –medical surveillance

- The purpose of the requirement for a health examination in is to:
 - Exclude diseases that may prevent workers (asbestos cleaners) from being put to work with asbestos
 - Exclude illness that occurs during work performed by asbestos cleaners, as well as others who have been exposed to asbestos.
 - Investigate symptoms of suspected asbestos disease



New proposal:

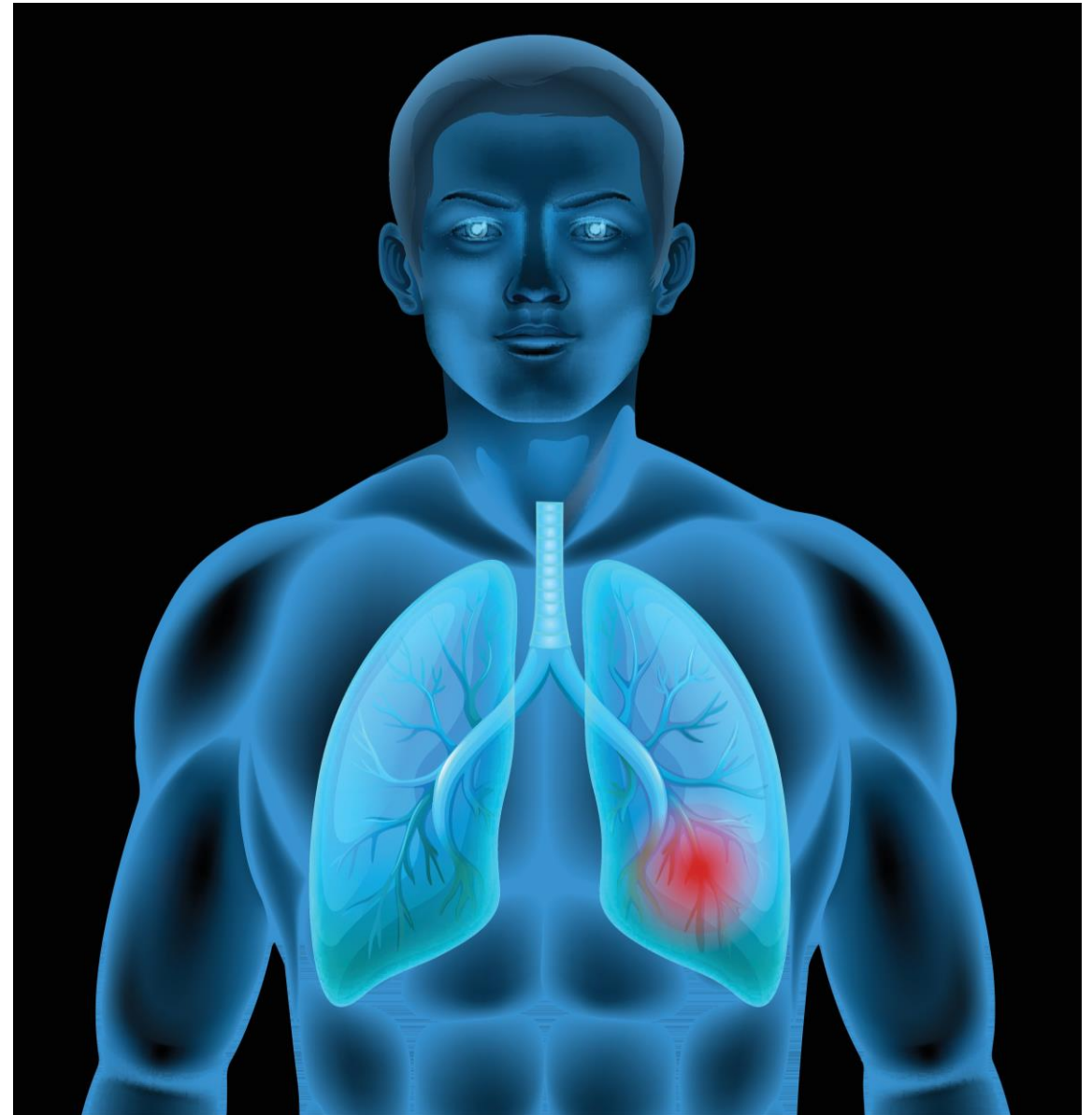
Health examination of an employee exposed to dust with asbestos fibres

- The employer must ensure that employees who may be exposed or have been exposed to dust with asbestos fibres at work for the employer undergo a suitable health examination of the lungs and respiratory tract.

Health examination must be performed:

- before workers are put to work where they may be exposed to dust with asbestos fibres. The health examination must include a professional history and spirometry. The competent doctor decides if imaging is necessary to rule out disease that is an obstacle to working with asbestos.
- when workers have been exposed to asbestos dust fibres to such an extent that it is associated with disease risk. The health examination must include a professional history. The doctor decides if imaging is necessary to detect diseases triggered by the asbestos exposure.
- when workers have symptoms that may be compatible with disease, triggered by the asbestos exposure. The competent doctor decides the content of the examination.

- A health examination must then be performed at least every three years. The doctor decides whether more frequent health examinations are necessary and the content of the examinations, based on the employees' state of health and the level and duration of the exposure. For employees who have been put to work with asbestos, spirometry must be considered in the health examination.
- At the end of the employment relationship, the doctor decides whether there is a need for further health examinations. If there is a need for further follow-up, the employees must be informed in writing about this.
- Expenses for health examinations of employees that are not covered by the National Insurance Scheme are paid by the employer.





Thank you!

Comments/questions?

tor.erik.danielsen@arbeidstilsynet.no