

Why the delay in cancer-protection standards?

Does the lag in coming out with enforcement action to protect workers against cancer signify a breakdown in the regulatory process? What's to be done about it?

I have somewhat of a unique vantage point and set of experiences in regard to setting standards for control of occupational exposure to carcinogens. In 1973, I was on detail from HEW to OSHA. The majority of my time during this period was devoted to the development and subsequent promulgation of emergency and permanent standards for the control of 14 carcinogens.

There were numerous occasions on which the appropriateness of the requirements in the standards was hotly debated. Indeed, even the coverage of certain compounds, especially those for which no information as to human cancer was available, was thought by some to be going too far.

Rejection of MOCA standards was based on invalid procedures.

PROCEDURES The courts have ruled in favor of the government's right to base such decisions on factors other than the records of human cases. At least they understand the concepts of preventive medicine. But I couldn't help reflect on their decision to vacate certain parts of the 14 standards and indeed to vacate the whole MOCA standard due to OSHA's failure to follow certain administrative procedures in the development of this standard.

And it seemed as though people had lost reason. While lawyers debated

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fine technicalities of law, the lack of concern for human life was resulting in continuing exposure of workers to carcinogenic substances. But of even greater concern regarding the impact on worker health is that almost two years have elapsed since the MOCA standard and the laboratory sections of the other carcinogen standards, were vacated, and OSHA has yet to take the appropriate action to have them reinstated.

However, I think there is even a tragedy of even greater proportions with which we should be concerned. In the past five years, HEW has submitted more than 250 recommended occupational health standards to OSHA under the standards completion program and the criteria document activity.

THREE STANDARDS Excluding the 14 carcinogen standards, to date OSHA has developed only three standards based on these recommendations. Certainly not all of the 250 recommended standards are of equal importance as regarding immediacy of need. However, as regards seriousness of health effects and the number of workers potentially at risk, it takes no great genius to identify those hazards for which the lack of adequate standards constitutes a great injustice to the workers of this country.

Today, workers are sick and dying because of exposures to classical problems, such as silica and lead, even though recommended standards for these substances were developed several years ago.

Of importance in our discussion today is the lack of rule-making for the control of carcinogens in the workplace. Although recommendations for

the control of a number of carcinogens have been made by the Department of Health, Education and Welfare, OSHA, since the action on the 14 substances, has regulated only vinyl chloride and coke-oven emissions. As noted earlier, MOCA, one of the most widely used of the original 14 carcinogens, is no longer regulated.

DEAD CENTER In the two and a half years since the first occupational carcinogen standards were promulgated, the net result was essentially no movement forward, while the list of identified carcinogens continues to increase. Certainly, one does not wish to consider these facts as representing a disregard for the health and well-being of workers.

It therefore must signify a breakdown of the regulatory process as more and more complexities are added to the system. NIOSH is greatly concerned regarding the continual

The number of identified carcinogens is rising but protection is lagging.

unregulated exposure of workers to carcinogenic substances. We also note that the 14 carcinogen standards and the standard on vinyl chloride were finally promulgated only as a result of the immediacy associated with rule-making requirements under Section 6(c) of the Occupational Safety and Health Act, that dealing with emergency temporary standards.

NIOSH will therefore recommend that OSHA immediately implement emergency temporary standards for three carcinogenic substances which we feel pose the greatest potential to adversely affect the health of workers. These are benzene, MOCA, and certain hexavalent chromium compounds, including lead and zinc chromate.



BENZENE For benzene, NIOSH has updated and revised its recommendations originally transmitted to OSHA in July of 1974. Based on reevaluation of the evidence, we find sufficient data to conclude that benzene does produce leukemia and should be controlled as a carcinogen.

Our evaluation and recommendations were transmitted to the Department of Labor two months ago. With MOCA we were of the opinion that the evidence used to justify the initial standard was a satisfactory basis on

The lack of action presents us with a "sad and shocking" situation.

which to initiate new rule-making. However, in addition to that data, we were verbally informed several months ago by representatives of DuPont that the results of their long-term feeding studies with dogs showed the induction of bladder tumors.

There was a basis for emergency rule-making for MOCA almost three years ago, and these latest data now make the need even more urgent.

LAG The hexavalent chromium compounds are in widespread use, and the data involved not only animal studies but human results. Again the recommended standards were forwarded to OSHA a year ago.

I have hoped to convey my impression that efforts to prevent occupational diseases, with emphasis on occupational cancers, are not moving forward. In the most straightforward terms, this lack of inaction is resulting in sickness and death in our work force, and by and large we know it is preventable. That is the sad and shocking state of affairs that exists today in efforts to protect the health of American workers.

Needed: an overall strategy for control of carcinogens on the job.

It is also a fact that we, as professionals, dedicated to the control of occupational injuries and illnesses, must be deeply concerned with. In discussing strategies for OSHA's control of carcinogens in the workplace, I think the fundamental concept should be what is our overall strategy? What are the philosophies that should guide us as we move to providing this needed protection? **CHAS**