



AOMA Report

SEPTEMBER, 1979

Doris Flournoy, Editor

AMERICAN OCCUPATIONAL MEDICAL ASSOCIATION

• 150 NORTH WACKER DRIVE

• CHICAGO, ILLINOIS 60606

AOMA ISSUES STATEMENT TO CLARIFY POSITION ON EMPLOYEE REFUSAL OF MEDICAL EXAMS

The Occupational Safety and Health Administration can not require an employer to employ a person who is not medically-qualified to perform the duties of the job in question, according to the American Occupational Medical Association. The statement released by the Association on August 28 was issued to dispel uncertainty among occupational health professionals regarding their obligations both in complying with the regulations and in protecting workers from occupational hazards in those instances when employees refuse medical examinations offered by employers.

While OSHA can require an employer to make special medical surveillance programs and procedures available to employees whose jobs may create conditions of potential exposure to a regulated chemical or physical hazard, states AOMA, OSHA can not require an individual to take the tests or medical examinations, and when an employee or applicant for employment refuses or waives the examinations, it becomes impossible for the employer to determine whether an individual is medically-qualified for the position.

The statement which was developed by the AOMA's Council on Scientific Affairs and subsequently approved by the Association's Board of Directors will be published in full in the October issue of the Journal of Occupational Medicine.

CURRENT INTELLIGENCE BULLETIN WARNS OF ARSINE AND STIBINE HAZARDS IN THE WORKPLACE

Several reports of worker exposure to arsine resulting in severe toxic effects or death have prompted the National Institute for Occupational Safety and Health to issue a Current Intelligence Bulletin (#32) recommending work practices that should be implemented by those industries in which there is risk of worker exposure to arsine (AsH_3) gas, or stibine (SbH_3). There is high potential for the generation of arsine gas when inorganic arsenic is exposed to nascent hydrogen, according to NIOSH, and, in most situations where arsine can be formed, stibine can also be formed if antimony is present.

Most of the reported cases occurred when arsine was accidentally generated during an industrial process such as the smelting and refining of metals. However, lethal concentration of the gas can occur during galvanizing, soldering, etching and lead plating operations. Because of the accidental generation of arsine gas, most reported cases of arsine poisoning have been acute or subacute in nature. Arsine is the most acutely toxic form of arsenic, and stibine equals or surpasses arsine in toxicity. Arsine is one of the major industrial causes of sudden extensive hemolysis. It has the ability to combine with hemoglobin within the red blood cell causing destruction or severe swelling of the cell, rendering it non-functional.

Inhalation of 250 ppm of arsine gas is instantly lethal and exposures of 25 to 50 ppm for one-half hour are lethal. The current OSHA standard for occupational exposure to arsine is 0.05 ppm as a time-weighted average in any 8-hour work shift of a 40-hour work week. The characteristic features of acute arsine poisoning are abdominal pain, bloody urine, and jaundice. Initial symptoms are headache, malaise, weakness, dizziness, difficult breathing, abdominal pain, nausea, and vomiting.

Monday through Friday. A public meeting to discuss the draft guidelines will be held at 9:00 a.m. on October 30, 1979, in the main floor auditorium of the Hubert H. Humphrey Bldg., 200 Independence Ave., S.W., Washington, DC 20201.

Twelve additional health effects guidelines and eight guidelines for environmental effects are at various stages of development by the IRLG. A set of criteria for documenting epidemiological studies has also been completed and is undergoing agency review.

LIA PROGRAM AIMS TO INVOLVE WORKERS IN REDUCING BLOOD LEAD LEVELS

An educational and motivational program aimed at achieving significant reduction in workers' blood lead levels throughout the lead industry has been announced by the Lead Industries Association. The project, which is designed to obtain worker cooperation, is believed to be the first effort of its kind to be undertaken by a major industry.

Initially, the LIA project will study how deeply communication on lead exposure is built into the fabric of day-to-day supervision throughout the industry, according to Jerome F. Cole, Sc.D., Director of LIA's Environmental Health Department. In order to be effective, hygiene improvement requires supervisors who are thoroughly familiar with basic occupational health practices, and who are sufficiently skilled in communication to obtain worker participation in problem-solving, he noted, and added that therefore, as much attention will be given to the development of supervisory skills as to hygiene education.

A second innovation in LIA's approach is that several techniques will be tested in the workplace under controlled conditions at three representative manufacturing locations over a period of six-to-nine months. Change will be measured in terms of actual blood lead level reduction, as well as basic attitudes toward hygiene. The project will be carried out by the firm of W. P. Dolan Associates of Kansas City.

OSHA, NIOSH STRIKE COOPERATIVE AGREEMENT WITH COMMISSION OF EUROPEAN COMMUNITIES

The Occupational Safety and Health Administration and the National Institute for Occupational Safety and Health have agreed with the Commission of European Communities to pool their resources to help provide equitable protection from job hazards for workers in the U.S. and Europe, it has been announced by OSHA and NIOSH. The Commission of European Communities initiates and administers joint social and economic policies for its nine member states: Belgium, Denmark, France, Germany, Ireland, Italy, Luxembourg, the Netherlands and the United Kingdom.

Specifically, the U.S. agencies and the Commission will exchange information on toxic substances found in the workplace, health hazard sampling techniques, proposed regulations, occupational safety and health statistics and education, and training and research programs in job safety and health. Data and testing methodologies also will be shared. The agreement, set forth in letters exchanged between the European Communities and Deane R. Hinton, U.S. Ambassador to the Communities, calls for possible meetings of officials to plan, coordinate and review cooperation in job safety and health areas. Also under consideration is an international workshop on occupational safety and health.

OSHA TO EXPAND JOB SAFETY AND HEALTH GRANT PROGRAM

Up to \$13.3 million in new and continuing grants will be awarded to nonprofit employer, worker, and educational organizations to support their development as centers of information and expertise in job safety and health, it was announced by the Occupational Safety and Health Administration on August 10.

Eula Bingham, Director of OSHA said that, subject to the level of the agency's appropriation for fiscal

year 1980, \$2.3 million in new grants will be awarded to selected groups following open competition, and that \$11 million will be used to strengthen the programs of organizations awarded grants in 1978, following reapplication by the grantees and a review by OSHA of their needs and progress.

OSHA will fund both planning and developmental grants. Planning grants, funded for one year, will be awarded to groups that demonstrate the potential to provide important workplace information, but need to focus goals and assess needs before their programs can serve the intended audiences fully. Developmental grants, awarded for periods of up to five years, will support programs that have demonstrated effectiveness in providing safety and health services but require further development to become more comprehensive, self-sufficient resource centers.

GENERAL INDUSTRY STANDARDS IN PAPERBACK VOLUME AVAILABLE FROM GPO

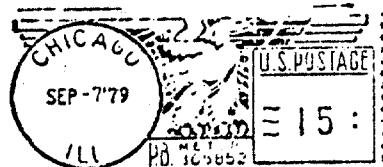
A paperback volume of the Occupational Safety and Health Administration's general industry standards, contained in Part 1910, Title 29, Code of Federal Regulations, has been published by the Government Printing Office. The standards, which apply to most businesses, cover such topics as fire protection, materials handling and storage, machinery and machine guarding and toxic and hazardous substances. The book includes all current OSHA regulations except the lead standard. Agriculture, construction, and maritime rules are not included.

This printing of the standards represents the first in book form since 1976 and the first reprinting of the standards since nearly 1,000 picayune provisions were deleted by OSHA in October, 1978. The book (GPO #029-015-00054-6) is available for \$6.50 from the Superintendent of Documents, Government Printing Office, Washington, DC 20402.

RESULTS OF A 35-YEAR STUDY OF LEAD EXPOSURE IN HUMANS PUBLISHED

An extensive investigation of the physiology of lead in humans, spanning a 35-year period, is the subject of a 71-page report published by the Lead Industries Association. The book, "Oral and Inhalation Lead Exposures in Human Subjects" was written by Stanley B. Gross, Ph.D., when he was associated with the Department of Environmental Health at the University of Cincinnati. Dr. Gross, who is now with the Environmental Protection Agency, began measuring the human body burden of lead in 1969 as part of an ongoing project initiated in 1932 by Robert A. Kehoe, M.D. Copies of the report are available from LIA, 292 Madison Ave., New York, NY 10017.

AOMA REPORT
150 North Wacker Drive
Chicago, Illinois 60606



First Class Mail

SEPTEMBER, 1979

ROBERT A KEHOE MD
UNIV OF CINN COLLEGE OF MED
EDEN AVE
CINCINNATI OH 45267

KE 04569