



ASBESTOS INFORMATION ASSOCIATION

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PLAINTIFF'S EXHIBIT

CAP-688

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B. J. Pigg, Executive Director

(The following statement was issued today by the Asbestos Information Association/North America (AIA/NA). AIA/NA is an incorporated, non-profit organization representing firms in the United States and Canada involved in the mining and milling of asbestos ore, the sale of asbestos fiber, and the manufacture or processing of asbestos-containing products.)

The Asbestos Information Association/North America (AIA/NA) announced today that it has brought a legal challenge to the Emergency Temporary Standard for asbestos filed yesterday by OSHA. AIA/NA Executive Director B. J. Pigg indicated that while AIA/NA has for several years urged OSHA to adopt a more protective occupational asbestos standard, the Association could not accept precipitous regulatory action -- taken without notice and without full public hearings -- based on the unfounded conclusion that a health "emergency" exists under the current 2.0 fiber per cubic centimeter OSHA standard.

Asbestos use in the workplace is already tightly regulated under existing OSHA regulations. Asbestos manufacturers and users have achieved significant reductions in worker exposures over the last decade. Most exposures are already well below the existing standard which became effective July 1, 1976.

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Mr. Pigg expressed the Association's disappointment that OSHA would issue new regulations through an ETS, thus denying interested parties any opportunity to participate in the rulemaking. Mr. Pigg commented: "AIA/NA has been urging OSHA for more than two years to initiate a rulemaking to develop a more stringent asbestos standard that would better protect worker health. We have urged the Agency to proceed with an expedited time-table to complete such a rulemaking. But, instead of working with all parties to develop the best possible permanent asbestos rule, OSHA has without such participation issued this unwarranted ETS."

Mr. Pigg further noted that OSHA's claim of any emergency is unsupported because of the absence of any new medical evidence in its lengthy ETS document. As Mr. Pigg noted: "They have had the medical evidence on which their ETS rests for many years. OSHA's interpretation of that evidence is based on numerous assumptions, each of which requires review by qualified scientists. Yet, by issuing an ETS, OSHA has completely short-circuited the normal rule-making process in which such review should and must occur. OSHA's actions contrast starkly with asbestos regulatory activities in other industrialized nations -- none of which have found any emergency necessitating such precipitous action."

Ingested Asbestos Study Completed in Washington

Researchers at the University of Washington Department of Environmental Health have completed a 21-month study of the ratio of asbestos fibers retained or excreted by persons consuming drinking water containing high levels of asbestos. The study, funded by the U.S. Environmental Protection Agency, was designed to determine whether asbestos fibers were present in the urine of residents in and around Everett, Wash., where tap water contains about 200 million fibers per liter. The researchers investigated whether significant numbers of asbestos fibers penetrate the wall of the intestinal tract, whether asbestos fibers are found in other organs of the body and in body fluids, and what is the effect during long term exposures of 20 or more years.

A small group of people in Everett, all in good health and without histories of kidney disease or occupational exposure to asbestos, consumed drinking water containing approximately 200 million fibers per liter. This group was compared to a control group of Seattle, Wash., residents where levels of chrysotile asbestos in the drinking water are 100 times less (2 million fibers per liter). Urine samples from both groups were taken over a 21 month period and asbestos fibers counted by means of a transmission electron microscope. Limits of detection ranged from 70,000 to 300,000 fibers per liter. Lengths of asbestos fibers in the drinking water ranged from 0.3 to 5.0 micrometers; fiber length in the urine samples ranged from 0.5 to 1.2 micrometers.

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According to a news release from the AC Pipe Producers Association, the investigations concluded that although the concentrations of fibers in the urine samples varied throughout the sampling period, none were consistently and significantly higher than the concentrations of fibers estimated for the control waters. There was, however, a significant difference ($p=0.05$) between the counts of fibers in the urine samples of persons who had been residents of Everett for less than three years compared to persons of more than 24 years residence.

The study revealed that the concentration of fibers in the urine samples of Everett donors combined (0.97×10^6 fibers per liter) was not significantly different than the concentration for Seattle/Bellevue control donors, even though the numbers of fibers in the drinking water of the latter were at least 100 times less.

The report says that although the data is inconclusive, the study suggests there is no relationship between high concentrations of asbestos fibers in drinking water and the numbers estimated for voided urine.