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WORLD HEALTH ORGANIZATION

INTERNATIONAL AGENCY FOR RESEARCH ON CANCER

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to the follow-up and 444 deaths had been ascertained. Information on past silica exposure and smoking habits is available for most of the patients. Cohort analysis of the mortality data will be performed in collaboration with the Agency.

(*b*) *International study of people exposed to dioxin-contaminated substances* (Dr R. Saracci, Dr J. Wahrendorf, Mr J. Wilbourn and Dr P. Honchar; financed by the National Institute of Environmental Health Sciences of the USA, through Contract No: NO1-ES-1-5009)

Recent data from animals and from humans which suggest that the phenoxy herbicides, chlorophenols and their dioxin contaminants are carcinogenic, underline the need for further epidemiological study of persons exposed to these widely used herbicides and biocides. In order to assemble a cohort of adequate size for epidemiological study, the Agency has proposed to establish an international (outside of the USA) registry of people exposed to phenoxy herbicides and chlorophenols. Before establishing such a registry, a feasibility study is being conducted on cohorts from factories where phenoxy herbicides and chlorophenols are synthesized. The goals of the assessment are: (1) to identify factories, (2) to ascertain whether there is general interest and cooperation from companies and potential collaborators, and (3) to ascertain whether adequate information is available on the factory cohorts to allow formation of a registry for eventual epidemiological study.

(*c*) *Long-term effects of pesticides on human health in Colombia* (Dr N. Muñoz and Dr. N. Day; in collaboration with Dr E. Guerrero and Dr M. Restrepo, National Institute of Health, Bogota; Dr J. Davies and Dr C. Pfaffenberger, Department of Epidemiology and Public Health, University of Miami, FL, USA; and Dr J. Litvak, WHO Regional Office for the Americas, Washington DC; financed by the Environmental Protection Agency of the United States through the WHO Regional Office in Washington DC)

A prevalence survey of abortions, still-births and congenital malformations has been completed on 8650 floriculture workers. The prevalence rates will be compared for pregnancies occurring before and during exposure to pesticides. Reports of parents will be validated by physical examination of children and by review of medical and industrial records.

A case-control study based on 530 children reported to be malformed by the parents has been initiated and will be completed in early 1983. Two controls, matched by the age of the mother at pregnancy and birth order, have been selected for each malformed child. Exposure to pesticides in both groups will be assessed by interview, review of factory records and actual determination of selected pesticides or metabolites in blood, urine and air samples. A prospective study will be considered depending on the results of the retrospective phase. As soon as a pregnancy is detected, blood and urine specimens will be collected and stored frozen, and each woman will be asked to keep a record of all jobs performed during pregnancy. At the end of a two-year follow-up, blood and urine specimens from all mothers who eventually give birth to a malformed child and from all control mothers will be analysed for selected pesticides or their metabolites.

The chemical analyses for pesticides are for the present limited to a pilot study on exposure to Captan among floriculture workers, carried out in July 1982. Two floriculture companies with higher use of Captan were selected, and six female workers from each company were selected at random from each of four job categories with different Captan exposure (higher to lower exposure): (1) plant nursery, (2) cultivation and cutting, (3) sorting, (4) administration.