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February 2, 1977

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Subject: OSHA Asbestos Standard

The OSHA standard for exposure to asbestos dust became effective on July 7, 1972. An interim level of dust exposure was established for an 8-hour time weighted average (TWA) not to exceed five fibers, longer than five micrometers, per cubic centimeter of air with a ceiling or maximum exposure level of ten fibers, longer than five micrometers, per cubic centimeter of air to which "no employe shall be exposed at any time...".

The standard also established an effective date of July 1, 1976, at which time the TWA exposure level was reduced to two fibers, longer than five micrometers, per cubic ~~micrometer~~ centimeter.

As a result of a suit filed by the Industrial Union Department, AFL-CIO in 1974, the court directed the Secretary of Labor to reconsider the July 1976 effective date for the lower two-fiber limit and the adequacy of the established 3-year retention period for exposure monitoring records. OSHA, through the Federal Register, asked for public comment on these issues as well as any new information having any bearing on the standard.

During the period between the issuance of the standard in 1972 and the establishment of the lower exposure limit in 1976, considerable work was done by numerous scientific investigators to determine more precisely the correlation between disease entities resulting from asbestos dust exposure and the levels of exposure. New developments were presented to OSHA urging the establishment of a lower exposure limit.

Thus it came about that on October 9, 1975, OSHA published in the Federal Register a proposed rulemaking for exposure to asbestos which included the lower 0.5 fiber TWA exposure limit.

Manufacturers using asbestos in products supplied to us have indicated that they cannot meet the 0.5 limit without considerable expense for control measures

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at their operations, and some have stated they would discontinue manufacturing certain parts because of the added cost for controls.

Regardless, it is the opinion of the Employe Health Services Department that any material, including asbestos, can be used safely provided we accept the cost penalty associated with the control measures required to protect employe health. Pragmatically, the increased cost associated with the use of any one particular material oftentimes makes safer substitutes more attractive.

Looking at the history of health standard development, we estimate that the proposed lower limit will be established within the year. Further, since asbestos is a carcinogen to humans, we recommend that a search for substitute materials be undertaken. In the interim, safe handling procedures and protective control measures can be applied to processes or material handling procedures that generate potential asbestos exposures.

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