

FILE NAME: Talc (TALC)

DATE: 1963

DOC#: TALC003

DOCUMENT DESCRIPTION: Talcosis References

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE

SIC

DGA
34-1964CIS
1812-1964

Fsh Gtz Mpz

Talcosis (Talcose). Tolc, J.J.C. "Tijdschrift voor sociale geneeskunde", Assen, Netherlands, 27 September 1963, Vol. 41, No. 19, pp. 597-600. Illus. 15 bibl. refs.

During the examination of 12 workers who for 10 years or more had been exposed to talc dust in the rubber processing industry, 8 cases of pulmonary talcosis were discovered. The X-ray findings are described. This has led the author to assume that the incidence of talcosis is higher than was previously thought. The author deals with measures for the reduction of talc dust concentrations in the extrusion of rubber.

The incidence of silicosis in the mining of talc and graphite (Incidenza della silicosi nell'estrazione di talco e grafite). Gaido, P.C., Capellaro, F., Braguzzi, E., Parigi, A., and Rosettani, E. "Archivio per le scienze mediche", Turin, Italy, November 1963, Vol. 116, No. 5, pp. 227-233.

Talc and graphite mining expose workers to the hazard of pneumoconiosis on account of the impurities present in the minerals. The authors examined 50 graphite miners and 260 talc miners in order to determine the incidence of silicosis. They made the following observations: (a) development of pulmonary lesions is relatively slow; (b) graphite and talc dust do not seem to influence the course of silicosis in any special way (the only special finding was irritation of the bronchial mucosa in the case of talc).

ENPI

CIS

Fsh Gtz Mpz

89-1964

1665-1964

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE

SIC

Clinical, radiological, electrocardiographical and spirometrical study of talc mine workers (Aspetti clinici, radiologici, elettrocardiografici e spirografici in lavoratori dell'industria estrattiva del talco). Coscia, G.C., Perrelli, G., Linari, F., and Martino, P. "Archivio per le scienze mediche", Turin, Italy, December 1963, Vol. 116, No. 6, pp. 329-335. 23 bibl. refs.

Results of the examination of 60 workers with pneumoconiosis who had worked for more than 20 years on the mining of talc. In 56.7% of the cases the electrocardiographic examination revealed various changes, mainly signs of discrete right heart involvement without significant relationship with the length of exposure or the radiographic picture. On the other hand, the changes revealed by spirometric tests were directly related to the length of exposure and the radiological picture. Bronchitis and emphysema were frequently observed. In conclusion, the authors confirm the opinion often expressed by other specialists, that even short exposure will nearly always produce significant radiological markings in the lungs.

ENPI

CIS

Fsh Gtz Mpz

73-1964

1649-1964

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE

SIC

ENPI
231-1963CIS
44-1964

Fsh Gtz Mpz

Attiopathology and clinical aspects of talcosis (Aspetti etiopatologici e clinici delle pneumoconiosi da talco). Rubino, G.F., Maranzana, P., Pettinati, L., and Scanseth, G. "Medicina del lavoro", Milan, Italy, June-July 1963, Vol. 54, No. 6-7, pp. 496-506. Illus. 10 bibl. refs.

Results of a survey carried out on 357 workers employed for more than 3 years in the mining and handling of talc (talc miners, talc grinders, and talc spreaders in the rubber industry). From the clinical point of view, it was observed that the incidence of pneumoconiosis (very low in talc workers) decreased in proportion to the increase in distance from the mine. Optical, microscopic and X-ray diffraction analysis showed that different types of industrial talc are contaminated with such minerals as tremolite, serpentine and quartz which are well known for their fibrogenic action. In its pure state, talc will not cause pneumoconiosis.

The clinical, radiological and pathological picture of talc workers (Quadri clinici, radiologici e fisiopatologici nei lavoratori del talco). Meo, G., Perrelli, G., and Coscia, G.C. "Folia medica", Naples, Italy, November 1963, Vol. 46, No. 11, pp. 893-902. 10 bibl. refs.

A study was carried out on the clinical, radiological and functional course of the pathological syndrome produced by talc dust and a mixture of talc and sclerogenic substances (asbestos, silica). 72 talc workers, 25 talc grinders and 250 talc miners were examined. The comparison of data collected from these 3 groups revealed that only a mixture of talc and impurities (asbestos, silica) can give rise to progressive fibrosis. The most serious cases were found among miners who are exposed to large quantities of silica.

Clinical and radiological evolution of pneumoconiosis in the talc extracting industry (Evoluzione clinica e radiologica delle pneumoconiosi nell'industria estrattiva del talco). Scansetti, G., Rasetti, L., and Gheml, F. "Medicina del lavoro", Milan, Italy, November 1963, Vol. 54, No. 11, pp. 746-749. Illus. 1 bibl. ref.

Paper read at the 25th Italian National Congress of Occupational Health (Taormina, Sicily, October 1962). A group of talc miners who had not been exposed to any other dust risk were submitted to clinical and X-ray examination and respiratory function tests 5 years after starting work, and subsequently after 14, 16 and 19 years' experience. The incidence of pneumoconiosis increased progressively with time, extending to almost all the subjects whom it was possible to follow for 19 years or more. The conditions observed did not present very advanced radiological signs. Evidence of bronchitis and emphysema were frequent findings of the clinical examination.

Radiological and clinical aspects of pneumoconiosis in the mining of talc (Aspetti radiologici e clinici della pneumoconiosi nell'industria estrattiva del talco). Pettinati, L., Coscia, G. C., Franta, A., and Gheml, F. "Medicina del lavoro", Milan, Italy, January 1964, Vol. 55, No. 1, pp. 58-63. Illus. 3 bibl. refs.

Paper read at the 25th Italian National Congress of Occupational Health (Taormina, Sicily, October 1962). The authors examined periodically 260 mine workers exposed to talc dust. The number of normal radiographs decreases progressively with increasing lengths of exposure. The radiographs of persons exposed for more than 30 years were all outside normal limits, and similar to those of mixed-dust pneumoconioses. The radiological features were often accompanied by bronchitis, emphysema and dyspnoea. Electrocardiography revealed progressive right heart involvement in more than 50% of the cases (axis deviation, right ventricular hypertrophy).

USPHS

171-1967

CIS

2072-1967

Fsh Gtz Mpz Nyh

INTERNATIONAL OCCUPATIONAL SAFETY
AND HEALTH INFORMATION CENTRE

CIS

2

Mortality among talc miners and millers in New York State. Kleinfeld, M., Messite, J., Kooyman, O., and Zaki, M. H. "Archives of Environmental Health", Chicago, Ill., USA, May 1967, Vol. 14, No. 5, pp. 663-667. 9 bibl. refs.

Mortality data on 91 talc miners and millers in New York State who had 15 or more years of exposure to talc dust by 1940 or had achieved 15 years between 1940 and 1965, were reviewed. The average age at death was 60.4 years with a range of 38 to 84 years. Proportional mortality from carcinoma of the lung and pleura among talc workers was 1 times that of the control population. However, the significant increase in incidence appeared in the 60 to 79 year age group rather than in the 40 to 59 year group. This was at variance with the authors' findings in asbestos workers who had a similar duration of exposure covering a similar period where the increase in observed incidence was present in both age categories.

(NLM)

ILO

82-1963

CIS

574-1963

Fsh Gtz Mpq Nyt

INTERNATIONAL OCCUPATIONAL SAFETY
AND HEALTH INFORMATION CENTRE

CIS

4

The clinical aspects and pathological anatomy of tumourlike talcosis (Zur Klinik und pathologischen Anatomie der tumorförmigen Talkum-Staublunge). Ehrhardt, W., and Güthert, H. "Internationales Archiv für Gewerbepathologie und Gewerbehygiene", Berlin (Western Sectors), 5 October 1962, Vol. 19, No. 5, pp. 465-486. Illus. 30 bibl. refs.

An account is given of a case of severe tumourlike talcosis after 18 years' exposure in a rubber factory. The course of the disease was clinically observed for many years and pathologically examined. In addition X-ray and electron microscopic examinations were made of the lung dust particles. The authors consider the fibrogenous effect of the dust to be due to a large quantity of silicic acid from the talc itself going into solution.

ENPI

8-1964

CIS

1128-1964

Fsh Gtz Mpz Xjy

INTERNATIONAL OCCUPATIONAL SAFETY
AND HEALTH INFORMATION CENTRE

CIS

6

Data on talc pneumoconiosis (Sulla pneumoconiosi dei talcatori). Scansetti, G., Gaido, P. C., and Rasetti, L. "Medicina del lavoro", Milan, Italy, October 1963, Vol. 54, No. 10, pp. 680-682. Illus. 9 bibl. refs.

Paper read at the 25th Italian National Congress on Occupational Health (Taormina, Sicily, 1962). The authors examined 72 workers employed on "talc dusting" in the rubber industry. The inhalation of pure talc, even over prolonged periods, did not induce sclerotic pulmonary lesions. Changes were limited to an increase in pulmonary linear markings; these changes were not progressive and affected neither respiratory function nor working capacity.

(A)

Fibrous and mineral content of cosmetic talcum products. Crilley, L. J., et al. "American Industrial Hygiene Association Journal", Detroit, Michigan, USA, July-August 1966, Vol. 29, No. 4, pp. 350-354. Illus. 24 bibl. refs.

The major purpose of this investigation was to obtain data on some of the constituents found in cosmetic talcum products and to discuss their health aspects. 22 commercial talcum products were examined, their fibre content varied from 8 to 30% per count. Fibrous particulates were generally under 1.0 μ m in diameter with lengths ranging from 1.5 to 6.0 μ m. The free silica content varied from 0.3 to 3%, one sample, however, had 54.4% quartz. The samples were also analysed for metals, with 4 exceptions, the levels of cobalt, nickel, chromium and manganese were low.

ILO
505-1969

CIS
1987-1969

Fsh Gtz Qix

CIS

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE

Lung function in talc workers - A comparative physiologic study of workers exposed to fibrous and granular talc dusts. Kleinfeld, M., Messite, J., Shapiro, J., Keeyman, O., and Swencicki, R. "Archives of Environmental Health", Chicago, Ill., USA, November 1964, Vol. 9, No. 5, pp. 559-566. Illus. 10 bibl. refs.

A comparative clinical, roentgenographic, physiological, and environmental study of workers exposed to granular and fibrous talc was carried out. The findings indicate that prolonged exposure to adequate amounts of either variety can produce talcosis of the lung, the criteria for the diagnosis being a history of adequate exposure (prolonged exposure to concentrations greater than 20 million particles/ ft^3 air) and a consistent chest roentgenogram. The mean average exposure of those having talcosis in both groups was appreciably above the present acceptable threshold limit of 20 million particles/ ft^3 air as recommended by the American Conference of Industrial Hygienists. The pulmonary function findings indicate that exposure to fibrous talc dust is more hazardous than to granular talc.

(NML)

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CIS

229

143-1963

2497-1963

Fsh Gtz Mpz

Talc pneumoconiosis - A report of six patients with postmortem findings. Kleinfeld, M., Giel, C. P., Majeranowski, J. P., and Messite, J. "Archives of Environmental Health", Chicago, Ill., USA, July 1963, Vol. 7, No. 1, pp. 101-115. Illus. 14 bibl. refs.

6 workers who were exposed for an average of 24 years to a dust containing appreciable amounts of talc admixed with tremolite and anthophyllite and containing a small amount of free silica developed a symptomatic form of pneumoconiosis. The major clinical features were chronic productive cough, dyspnea, diminished breath sounds, limited chest expansion, diffuse rales, and clubbing. Dyspnea was the most constant complaint and was progressive. The chest roentgenogram usually disclosed interstitial infiltration of variable degree both basally and in the midlung fields with the apices relatively spared. Cor pulmonale was the major complication in 4 of the 6 cases and the mechanism of death in 3. In general, the clinical, roentgenographic and pathological findings were similar to those observed in asbestosis. However, in contrast to the latter, pulmonary talcosis has not been associated with an increased incidence of pulmonary carcinoma.

(NML)

ROSPA
106-1960CIS
3087-1960

Fsh Gtz Mpz

Talc pneumoconiosis. Kipling, M. D., and Bech, A. O. *Transactions of the Association of Industrial Medical Officers*, London, United Kingdom, October 1960, Vol. 10, No. 3, pp. 83-93. Illus. Bibl.

A review of past experience of hazards in the use of talc is followed by seven case histories with clinical details and X-rays, of which four cases occurred in the manufacture of lead accumulator plates (one with five years' exposure), one was that of a rubber tyre extruder, one an aluminium die-caster and the last an aluminium foundry worker.

(A)

USPHS
90-1965CIS
1261-1965*

Fsh Gtz Mrz Pop

Effect of talc dust inhalation on lung function. Kleinfeld, M., Messite, J., Shapiro, J., and Swencicki, R. "Archives of Environmental Health", Chicago, Ill., USA, March 1965, Vol. 10, No. 3, pp. 431-437. Illus. 13 bibl. refs.

Pulmonary function tests were performed on 43 workers engaged in the milling of talc. The mean duration and weighted average of exposures were 19.0 years and 62.3 mppcf, respectively. The predominant symptoms were dyspnoea (29) and cough (12). Basilar crepitations and clubbing were noted in 12 and 8, respectively. The mean predicted values for the various pulmonary function parameters measured were within the 95% confidence limits of the control group. However, an appreciable number of talc workers had values which fell outside these limits. This was particularly evident in the vital capacity, total lung capacity, and DL_{CO} . There were 16 who showed pulmonary infiltration on their chest roentgenograms as compared to 27 without such evidence. In general the correlation between pulmonary function impairment and clinical and roentgenographic findings was poor.

(NLM)

INTERNATIONAL OCCUPATIONAL SAFETY
AND HEALTH INFORMATION CENTRE

CIS

Pulmonary talcosis, a clinical and environmental study. Messite, J., Reddin, G. and Kleinfeld, M. *A.M.A. Archives of Industrial Health*, Chicago, Ill., USA, November 1959, Vol. 20, No. 5, pp 408-413. Illus. Bibl.

Describes an industrial hygiene survey of talc mines and mills in New York State. The institution of wet drilling has reduced the dust exposure in the mines and lowered the incidence of pulmonary fibrosis among talc miners. The authors indicate that, while both types of talc can produce pulmonary fibrosis, the fibrous or tremolite variety is the more pathogenic.

* This card annuls and replaces the card already issued with the same CIS number, which bore the incorrect code Fsh Mpz : sl.

SUVA	CIS	Fsh Gtz Mpz
2-1969	1083-1969	

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE	CIS		Silicatoses (asbestosis, talcosis) (Silikatosen (Asbestose, Talkose)). (Also published in French.) Schlegel, H. "Berufskrankheiten - Maladies professionnelles", Schweizerische Unfallversicherungsanstalt, Lucerne, Switzerland, November 1968, Merkblatt Nr. 1. 7 pp. Illus. 6 bibl. refs.
	Fsh Gtz Mpz		First of a series of information sheets published by the Swiss National Accident Insurance Institute and designed for the Swiss medical corps. Subjects dealt with include: asbestos and talc hazards and working environments where they may be encountered, uptake and pathogenic effects of asbestos and talc particles; diagnosis; prophylaxis and technical protection; insurance practices; incidence of asbestosis and talcosis in Switzerland.
INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE	CIS		USPHS
	Fsh Gtz Mpz		73-1967
INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE	CIS		CIS
	Fsh Gtz Mpz		1602-1967

INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE	CIS		Commercial talc and talcosis Weiss, B., and Boettner, E.A. "Archives of Environmental Health", Chicago, Ill., USA, February 1967, Vol. 14, No. 2, pp 36-46. Illus. 13 bibl. refs.
	Fsh Gtz Mpz		The authors state that it has still not been fully determined whether talcosis is caused by mineral talc or by other minerals that exist in commercial talc. One difficulty in the study of this subject is the lack of mineralogical uniformity between different talc deposits, and in order to clarify mineralogy from the occupational health standpoint the authors have studied the principal talc deposits worked in the United States. These deposits fall into 2 groups: (a) deposits formed from carbonate rocks usually consisting primarily of talc, tremolite and anthophyllite, (b) lenticular ores of serpentine origin containing talc, magnesite and chlorite. The former type was found to be a greater industrial hazard. It is thought that the latter type may be innocuous and if this fact could be confirmed, it would indicate the need for at least 2 different threshold limit values for commercial talc depending on the origin of the material.

ILO	CIS	Fsh Gtz Mpz
457-1966	347-1967	

ROSPA	CIS	Fsh Gtz Mpz
207-1964	81-1965	

"Talcosis" (talcosis) in man (Talcose "hexamphibolite" chez l'homme). (Published in French.) Lott, M. "Publications de l'Association des Ateliers de Genetecologie und Genetecologie", Bonn (West Germany), 17 August 1966, Vol. 22, No. 3, pp 194-201. Pages 141-196.

A case of a worker exposed to talc dust in the process of talc production. The worker had been exposed to talc dust for 15 years. During the powder into conduct which had been used to produce the talc, the worker had been exposed to talc dust. He did this by sucking the talc into his mouth, and then resuspending it into the conduct. A slight decrease in the radiological picture was noted between 1964 and 1966.

CIS INTERNATIONAL OCCUPATIONAL SAFETY AND HEALTH INFORMATION CENTRE

Talc pneumoconiosis (talcosis). McLaughlin, A.L.G. "Occupational Health", London, United Kingdom, July-August 1964, Vol. 16, No. 4, pp. 180-186. Illus. 7 bibl. refs.

Surveys of workers exposed to talc dust in several countries and industries have shown widely differing results but in all of them a percentage of the workers showed X-ray evidence of lung disease. The period of exposure before onset of pneumoconiosis also shows wide variations, and concurrent exposure to other products, e.g. free silica and granite, may be a possible cause of lung damage. Association between the intensity of exposure and the time factor appears to exist. Some of the industries using talc are listed, cases of pneumoconiosis have been found in most of them. Fatal cases of talc pneumoconiosis have occurred in the rubber industry, in the process of tyre making and extruding when powdered talc is blown through the extruded tyre to prevent sticking of internal surfaces, and in the cable making industry in which cables are coiled into large pans containing talc. In all industrial uses there should be adequate dust control and preventive measures against inhalation, with substitution where possible.

