EU-OSHA work on cancer and carcinogens

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EU-OSHA work on carcinogens and work-related cancers

- Member States survey and report on OELs for CMRs (published 2009)
- Seminar with DG Employment, ECHA, Member State reps nominated by FOP, ACSH WP Chemicals, SLIC Chemex, SCOEL (Summary published in 2012)
- Gaps identified in:
  - Research
  - Monitoring
  - Workplace solutions: collect case studies of successful prevention, examples of company policies, successful interventions by preventive services and labour inspections
  - Policy level: need for back-to-work strategies for workers affected by cancers (currently hardly any in place)
EU-OSHA work on carcinogens and work-related cancers

- 2013-2014: State-of-the report to address the gaps identified above, focusing on existing exposure and disease assessment & examples of national policies
- 2016-2017: Feasibility study for a survey on cancer risk factors
- 2016-2018: Research on return to work after cancer (literature review, examples of support schemes interventions and categorisation, expert interviews, company case studies, expert workshop)
- 2016-ongoing: roadmap on carcinogens activities

- 2013-2015: involvement in ISSG ex-post evaluation of OSH aquis
- 2016-2018: involvement in ISSG for carcinogens Directive, and recast of OSH legislation

- Presentations to different audiences and stakeholders
Work-related cancer and exposure to carcinogens EU-OSHA findings

- Analysed existing schemes to record exposure and monitor cancer, e.g. NOCCCA study, GISCOP, job-exposure matrices, etc…
- describes carcinogens and cancer-causing conditions in the workplace
- evaluates sources of information and identifies knowledge gaps

- Services not covered by data/recognised diseases
- Combine differents systems, e.g. exposure and cancer registries
- Vulnerable workers exposed, but exposure under-assessed
- New and emerging risks: endocrine disruptors, nanomaterials, etc…
- Work organisational factors important, lifestyle factors influenced by work
- Part-time workers may be excluded from some studies
- Return to work strategies for sufferers of cancer limited
- Need for workplace solutions

EU-OSHA Healthy Workplaces Campaign 2018/19
Aims – promote prevention culture on dangerous substances while targeting specific groups of workers

- Reinforce the substitution principle and hierarchy of control measures (in EU OSH Directives)
- Share information on newly developed tools and instruments
- Raising awareness of risks linked to exposure to carcinogens at work
- Communication up and down the supply chain
- Addressing new risks, changes in work, sectors and workforce
- Issues relevant to vulnerable workers and gender issues
Roadmap on carcinogens


- Aiming to raise awareness of the risks arising from exposure to carcinogens in the workplace, while promoting and facilitating the exchange of good practice across Europe.
- Initiated by the NL Presidency, launched in May 2016; EU-OSHA one of the founding partners

Support and promotion:

- Web section on corporate website
- Highlights (World Cancer Day, ICOH conference), press releases – Austrian EU Presidency, News articles, OSHmails, regular contributions to Roadmap newsletter
- Presentations and Workshops (A+ A, ICOH conference, AT EU Presidency conference, SLIC Thematic Day November 2018, national events, European Parliament, ECHA meetings, ETUI Women, work and cancer conference)
- Focal Points’ activities on carcinogens
  - Info sheet on carcinogens with the roadmap partners
  - Workshop at the HWC 2018-19 Summit
  - Prolongation of roadmap to Finnish Presidency -> event Helsinki November 2018, cooperation and workshop on good practices
Survey among our Focal Points – A diverse range of activities

- Vocational school visits – Truck: game, NAPO film, quiz
  Day of chemical safety at work for primary school children
- Inspection campaigns, e.g. rel. to specific carcinogens
  Exposure assessment – inspection and measurement
- Training, guidance/tools, incl. linked to new legislation
- Health surveillance incl. spec. guidance, e.g. those formerly exposed to occupational carcinogens
- National or regional strategies, e.g. on the prevention of occ. diseases
- Includes REACH/CLP, e.g. focus on safety data sheets and labelling, and how to translate info for workplaces
- **Wide range of sectors:** agriculture, aquaculture, basic chemistry, cleaning, construction, engineering, hairdressers, healthcare, leather, metallurgy/ metalworking, repair of cars and motorcycles, rubber & plastics, transport (road, sea and rail), wood.
National campaigns and guidance

- Guidance for risk assessment and its documentation
- Substance information
- Sectoral guidance
- Guidance for substitution
- Technical, organisational and personal prevention measures

- Examples are available in our database of tools and resources (>300): case studies, guidance documents, videos, posters, etc…
- Case studies that address carcinogens management at work
Case study example: Controlling exposure when treating surgical instruments

- A large hospital with 3,000 workers, more than 300,000 patients/year in Latvia
- Ethylene oxide to sterilise surgical equipment and supplies that are heat sensitive or cannot tolerate excessive moisture
- Potential mutagenic, reproductive, carcinogenic, neurological, and fire and explosion hazard, causes dizziness and loss of control

All the protective measures:
- latest generation of ethylene oxide sterilizer
- department in groundfloor,
- closed system
- local exhaust systems and gas analysers
- gas masks and other personal protective equipment
- limited access to premises
- dangerous chemicals kept in fireproof cabinets or in fireproof compartments that have separate exhaust systems

Equipment is more expensive (~70 %), but savings are ~ 63 %.

Loading the equipment is more ergonomic and easier for the operator
Survey on exposure to cancer risk factors at work

2016-2017: Assessing the feasibility of a survey
- Proposing a list of cancer risk factors that could be assessed
- Assessing pilot exercise in a selection of or in all EU Member states
  - Estimate how many workers are exposed and to which extent
  - Inspired by research conducted using a methodology developed in Australia

2018: Follow-up with experts to discuss the study
2019: Preparatory phase
2020-2021: Preparatory work and pilot survey
2022: Fieldwork and first findings
2023-2024: Promotion and evaluation

Rehabilitation and return to work after cancer

- Employers’ positive attitude and understanding is crucial
- Worker’s rights to be respected (confidentiality and medical data)
- SMEs should be provided with help:
  - Information and resources for RTW programmes are lacking
  - Fewer alternative jobs and tasks
  - Family-like atmosphere: more supportive environment
- Work should be assessed earlier - early in the diagnosis and treatment process
- Focus not only on RTW but also on remaining in work once a worker has returned
- No programmes aimed at RTW after occupational and work-related cancer
- Return to work influenced by the context of a country, especially the length of paid sick leave
- Possibility to work part-time?

Return to work - Interventions aimed at workers and employers

- **Aimed at workers**
  - Workplace accommodations, including:
    - workload
    - tasks
    - assistance
  - Information and training on cancer and RTW issues
  - Psycho-educational interventions
  - Rehabilitation services
  - Job coaching

- **Aimed at employers**
  - Support for employers in constructing RTW plans for workers with cancer
  - Workplace accommodations to facilitate RTW
  - Improved communication between the employee and co-workers
  - Factual information on diagnosis and treatment of cancer
  - Guidelines
Thank you for your attention