



Safety Bulletin 118

Asthma – occupational and work-related

Following on from the recent 'World Asthma Day' (5th May 2009), this bulletin contains information on occupational and work-related asthma, its effects, as well as things you can do to reduce the risks in your workplace.

In 2000, the HSE estimated that between 1500 and 3000 people develop occupational asthma rising to 7000 cases a year if you include asthma made worse by work (work-related asthma). Statistics released by HSE in 2008 indicate that the number of cases has fallen in recent years, but occupational asthma is still a major concern.

The cost to society is estimated to be up to £1.1 billion over 10 years. Asthma can ruin lives. Some sufferers become so disabled they cannot work again.

Symptoms

Asthma is a serious health problem. Thousands of people in Britain have to face the challenges of this disease every day.

Symptoms include severe shortness of breath that can stop you doing the simplest tasks. Some sufferers are never able to work again. Other symptoms include:

- ✚ wheezing
- ✚ coughing
- ✚ chest tightness

The symptoms can develop right after exposure to a workplace substance. But sometimes symptoms appear several hours later, possibly at night. This can make any link with workplace activities unclear. Other associated conditions are:

- ✚ rhinitis (sneezing/runny nose)
- ✚ conjunctivitis (itchy and inflamed red eyes)

Occupational asthma

Occupational asthma is an allergic reaction that can occur in some people when they are exposed to substances, for example, flour, or wood dust in the workplace. These substances are called '**respiratory sensitisers**' or **asthmagens**. They can cause a change in peoples airways, known as the '**hypersensitive state**'.



Not everyone who becomes sensitised goes on to get asthma. But once the lungs become hypersensitive further exposure to the substance, even at quite low levels, may trigger an attack.

See www.hse.gov.uk/asthma/substances.htm for a summary list of substances that can trigger occupational asthma.

How do you get it?

You may be breathing in substances at work, which over weeks, months or years can lead to your airways becoming damaged, making you breathless or wheezy.

Most cases of occupational asthma occur as a result of exposure to the following substances:

- ✦ isocyanates
- ✦ flour dust
- ✦ grain dust
- ✦ glutaraldehyde
- ✦ wood dust
- ✦ natural rubber latex
- ✦ solder/colophony
- ✦ laboratory animals

Work-related asthma

Work-related asthma or asthma made worse by work is broader and includes substances in the workplace that irritate the airways of individuals with pre-existing asthma. This includes people who have had asthma since childhood. Respiratory irritants may trigger attacks in those with occupational asthma or pre-existing asthma.

Examples include chlorine, general dust, or even cold air.

What is the difference between occupational asthma and asthma made worse by work?

Occupational asthma is asthma that has been caused by exposure to a substance at work, e.g. flour dust.

Many people have asthma for other reasons and may have had it all their life. For people who already have asthma, exposure to substances at work can make their asthma worse than before. For these people, controlling exposure at work will ease their symptoms but won't prevent asthma attacks.

Just how dangerous is it?

Perhaps 1 in 10 cases of adult asthma is caused by work. The disease can ruin your health by restricting your ability to breathe. In 2000 HSE estimated that between 1500 and 3000 people develop occupational asthma. It is the most commonly reported occupational respiratory disease in Great Britain. But, if spotted early, complete recovery is possible.



Does this really matter?

Occupational asthma ruins lives and costs society up to £1.1 billion over 10 years. It is important that we learn from past cases so that workers and their families can avoid the pain and suffering caused by this disease.

What can I do as an employer?

There are many things you can do as an employer to reduce the risk of occupational asthma in your workplace.

However, occupational health needs to be tackled through a partnership approach. Workers, Trade Unions, industry groups and senior management need to be involved to ensure a safe environment is created for all.

COSHH

The Control of Substances Hazardous to Health (COSHH) Regulations require employers to control exposures to hazardous substances to protect employees' health.

Employers must assess the risk of exposure (exposure means taking in chemicals by breathing in, by skin contact or by swallowing).

COSHH requires you to consider the substitution of harmful products with less harmful ones.

COSHH requires that all controls be kept in good working order, including:

- ✚ Mechanical controls e.g. local exhaust ventilation (LEV), protective gloves
- ✚ Administrative controls e.g. supervision
- ✚ Operator controls e.g. following instructions

Health surveillance

Health surveillance means regularly looking for early signs of work related ill health and putting procedures in place to achieve this.

The purpose of health surveillance is to monitor and protect the health of individual employees.

Collecting simple information may lead to early detection of ill health caused by work and identify the need for improved control measures.

All employees exposed or likely to be exposed to an asthmagen should receive suitable health surveillance.

The specific requirements are set out in COSHH and might involve examinations by a doctor or trained nurse.



Reporting

The law requires employers to report cases of occupational asthma to a central point.

This is under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995.

The Incident Contact Centre is at Caerphilly Business Park, Caerphilly CF83 3GG Tel: 0845 300 9923, Fax: 0845 300 9924, e-mail: riddor@connaught.plc.uk

Questions workers may ask

What will happen to me when I tell my employer I have asthma symptoms because of work?

Your employer has a duty to protect your health at work. All employees exposed or liable to be exposed to a substance that may cause occupational asthma should be under suitable health surveillance.

If you have symptoms your employer should refer you to an occupational health specialist.

The employer will need to discover whether, and if so how, you are getting the asthma through work and alter the way the job is done to protect you from any further 'exposure'. Collecting simple information may lead to early signs of ill health and may identify the need for improved control measures.

Can I continue to do my present job?

If your symptoms are at an early stage and your employer can reduce your exposure, you may be able to continue in your job and not have any problems. You certainly don't always have to leave your job.

It is important that the cause of your asthma is controlled so that you do not get any worse.

Some jobs may require the use of respiratory protective equipment to control exposure. However, depending on how bad your symptoms are, it may be appropriate to remove you from the problem area and to give you work elsewhere.

If you become a severe asthmatic it may be necessary to take early retirement on health grounds.

You should seek medical advice through your occupational health adviser or GP if you have any of the following symptoms: wheezing, coughing, chest tightness, or shortness of breath.

What about compensation?

First discuss the situation with your employer and/or workplace safety representative. Unions are good at helping their members with claims and your local Citizens Advice Bureau and other voluntary associations, including Asthma UK can give valuable advice.



Can I be cured?

You really need to be diagnosed with the disease within the first six months. Early removal from exposure can lead to a complete recovery. Once you have occupational asthma, exposure to any airborne irritant may trigger an attack.

Where can I get support?

If you have any queries on occupational asthma or work-related asthma, your first point of contact should be HSE's Infoline (**0845 345 0055**). You may also wish to contact your union or a voluntary advice association for support.

Asthma UK has an Asthma Helpline run by trained nurses - 08457 010203.

If you require any further information, clarification or assistance with the above, then please do not hesitate to contact us;

Telephone; 01268 649006
Freephone; 0800 046 8122
Email; info@cjtservices.co.uk

Source –Health and Safety Executive

www.hse.gov.uk