# **Toxic Mould**

RK Bush et al. J Allergy Clin Immunol (2006) Vol. 117#2 p 326 – 333

# The medical effects of 'mold' exposure

The "Position Paper" provides a review of the relationships between mould exposure and asthma, allergic rhinitis, allergic bronchopulmonary aspergillosis, sinusitis, and hypersensitivity pneumonitis. It also examines the case for links with other outcomes.

'Molds' cause adverse human health effects through 3 specific mechanisms: generation of a harmful immune response (eg, allergy or hypersensitivity pneumonitis [HP]), direct infection by the organism, and toxic-irritant effects from 'mold' by products.

## Allergy and Asthma

It is estimated that approximately 10% of the population have IgE antibodies to common inhalant 'molds'. About half of these individuals (5% of the population) are predicted to have, at some time, allergic symptoms as a consequence of exposure to fungal allergens.

This section goes on to state that outdoor exposures to moulds have been shown to cause asthma attacks but that the outcomes associated with indoor exposures relate to symptoms not causes. The causal role in rhinitis and dermatitis is even less certain.

### Mould toxicity and irritancy

The occurrence of 'mold'-related toxicity (mycotoxicosis) from exposure to inhaled mycotoxins in non-occupational settings is not supported by the current data, and its occurrence is improbable.

The occurrence of 'mold'-related irritant reactions from exposure to fungal irritants in non-occupational settings are theoretically possible, although unlikely to occur in the general population given exposure and dose considerations.

#### Comment

In a jurisdiction where evidence of causation is required, there would be very few successful liability claims.

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