

Industrial Injuries Advisory Council Position Paper 17
Interstitial Fibrosis in Coal Workers

Interstitial fibrosis in coal workers is likely to be a part of the disease process of coal workers pneumoconiosis. In practice any disability from interstitial fibrosis would be accompanied by a diagnosis of pneumoconiosis or 'bronchitis and emphysema' and, disability from these diagnosed conditions is subject to standard assessment methods. There is no need for a separate diagnosis of interstitial fibrosis either for medical care or for state compensation.

HA Cowie et al. Occup Environ Med (2006) Vol.63 p 320–325.

Dust related risks of clinically relevant lung functional deficits

Reports of breathlessness correlated quite accurately with measured lung capacity (FEV1). Breathlessness varied with age. The probability of reporting breathlessness was doubled when the FEV1 deficit, compared with most likely FEV1 score, was 0.63 litres and trebled for a deficit of 0.99 litres.

Cumulative dust exposure had a measurable effect on FEV1. A deficit of 1L at age 60 was found for 10% of non smokers with no dust exposure and 16% of non smokers with a working lifetime exposure to 5 mg/m³ respirable dust. Among current smokers, the proportions were 22% and 32% respectively.

Friends of the Earth May 2006.

Nanomaterials, sunscreens and cosmetics: small ingredients big risks

This glossy report provides a number references to preliminary toxicology research work. It points out that; much remains unknown, applications are already available on the market and, nano-specific regulations are not yet in evidence. It calls for a moratorium on further commercial release of personal care products containing engineered nanoparticles.

[Editors note: The report is highly visible and broad in scope. In our view it adds nothing significant to the official reports from the UK and USA but will gain a higher profile among the less-informed.]
