

## OCCUPATIONAL CANCER – A WORKPLACE GUIDE

Cancer is not a single disease with a single type of treatment. There are more than 200 different kinds of cancer most effecting different parts of the body.

Cancers occur when new cells start growing out of control and develop into a lump or tumour. These tumours can be either benign or malignant. If it is benign the cells do not spread to other parts of the body but if it is malignant the tumour can spread beyond the original area. If the tumour is left untreated, it may spread into the surrounding tissues and destroy it. Sometimes cells break away from the original cancer and spread to other organs in the body through the blood stream or lymphatic system can form a new tumour.

Although some cancers seem to develop for no apparent reason, most are a result of exposure to a carcinogen, lifestyle issues, genetic defects, age or a combination of all.

Carcinogens are things such as chemicals or radiation that damage the cell and make it more likely to turn cancerous. There are a wide range of known carcinogens (see below) but they include tobacco smoke, asbestos fibres, diesel exhaust, and a wide range of chemicals found in the workplace.

Roughly a quarter of a million people are diagnosed with cancer every year and it is estimated that this figure will rise to almost 300,000 by 2020. Estimates of how many are caused through work vary considerably. This is because, if a worker develops lung cancer, it is impossible to say whether that individual worker developed the cancer because they smoked, because they were exposed to a carcinogen at work such as asbestos, whether they were exposed to radon gas in their home, or whether there was some other cause. However it is possible to estimate numbers based on the increased levels of certain cancers among people who work with certain chemicals or are exposed to other carcinogens.

In the past the HSE has estimated that there are around 6,000 occupational cancer deaths each year. This includes around 4,000 caused by exposure to asbestos. These figures were strongly criticised and as a result the HSE has funded research into the number of cancers. This, more recent research has estimated that the 6 most common cancers alone were responsible for over 13,000 cancer diagnoses with 7,300 deaths a year. Estimates from the TUC have suggested that the number of cancer cases each year is almost certainly over 20,000 with the number of deaths between 15,000-18,000.

This however is only the number of deaths. There are a large number of people who develop cancers which are treatable but which can seriously affect their quality of life. The survival rates from cancers vary considerably, with some such as mesothelioma (a cancer of the lining of the lung caused by asbestos exposure) being always fatal, and usually killing the person within 18 months to 2 years. Most however are treatable, some of them usually successfully. For example although there are 100,000 new cases of skin cancer every year, most of these are treatable and only around 2,000 people a year die as a result of this form of cancer. Most cancers fall somewhere between these two examples

The prevention of workplace cancer has a much lower profile in the workplace than preventing injuries from risks such as falls from height or electrocution. This is despite the fact that only between 220 and 250 workers die each year as a result of an immediate injury as opposed to the 15,000-18,000 who die from cancer. The reason why cancer deaths are treated so differently is because of a number of factors. The first is that it is almost always impossible to link a specific instance of cancer with a specific exposure to a cancer causing substance. Secondly when there is a fatality in the workplace it is very visible. Most people who are killed by cancer will die either at home or hospital. Thirdly, many cancers develop decades after the



initial exposure and often the person has retired from work before they develop any of the signs of cancer.

The delay and the lack of individual certainty breaks the link between the cancer and the workplace. That is why raising awareness of cancer in the workplace both among workers, and employers can be much more difficult than dealing with other diseases or injuries which occur immediately.

The Health and Safety at Work Act makes it clear there is a legal responsibility on every employer to ensure, as far as is reasonably practical, the health of their employees. It also states that employers must provide information, instruction, training and supervision to ensure their safety. This requirement covers not just the safety from immediate injury but also any danger to their long-term health. The Management of Health and safety at Work Regulations also require the employer to conduct a suitable risk assessment of the risks to the health of the workforce. That includes any risk from any hazard that may cause cancer.

It is only once they have tried to do that that they should look at whether they have to control the hazard. First the employer should try to reduce the risk through using a less hazardous chemical or process. This means substituting one chemical for one that is less dangerous or changing working practices so that the worker is not exposed to a hazard. If substitution is “reasonably practical”, even if more expensive, then it must be used.

If it is not possible to substitute for a less hazardous substance or process then the employer should try to ensure that there is no access to the hazard through use of partitioning, or exhaust ventilation. If that is not possible they should try to organise work to remove or reduce exposure to the hazard.

Finally, if no other control measures work, and as a last resort, they should issue personal protective equipment.

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There are also strong limits to the levels of exposure to many substances, including most known carcinogens. These exposure limits, called “Workplace Exposure Limits” are, what the regulations say, the absolute maximum level to which workers can be exposed. Unfortunately many employers see Workplace Exposure Limits as being the level up to which it is safe to expose people. This is not the case as there is no safe exposure limit for any carcinogen and even levels well below the Workplace Exposure Limits can lead to some workers developing cancer.

Just because a substance has a Workplace Exposure Limit does not mean that it is deemed to be safe to work with it at either that, or any level. That is why trade unions believe that the aim should be to remove all exposure to any known or suspected carcinogen in the workplace. While we recognise there are difficulties in this, and that some cancer causing substances, such as silica and solar radiation cannot be removed, exposure to them can be very easily controlled. In addition most of the chemicals known or suspected to cause cancer can be substituted for other less harmful substances.

The first step must be to find out what carcinogens workers in the workplace are exposed to.

Safety representatives should be encouraged to ask their employer for a list of all known class 1 or 2a or 2b carcinogens that workers are likely to be exposed to as part of their work. According to HSE research the largest contributors to cancer deaths in the UK were asbestos, followed by mineral oils, solar radiation, silica, diesel engine exhausts.

Does your employer actually know whether there is any asbestos in the building? Have they included the risk of working in the sun for outdoor employees? Also some chemicals may be known only by their brand name rather than by the name they are given in the IARC

classification, or may be mixed with other agents. Safety representatives should therefore ask for copies of safety datasheets for all chemicals and chemical mixtures used to ensure that all possible cancer causing agents are included. You are entitled to this information by law.

There is a legal requirement on any employer only to use a carcinogen if there is no reasonable alternative. In practice this often means that they will continue to use a cancer causing agent if the alternative is more expensive. They will also often not consider alternatives if the exposure levels are below their legal maximum. In fact, regardless of whether there is a cheaper substitute or they are still within the legal maximum, there is still a legal requirement on the employer to remove or reduce exposure “as far as is reasonable practical”.

It is up to safety representatives to challenge the decisions their employers make to ensure that, whatever safeguards are in place, there is no exposure to cancer causing substances in the workplace. They must feel sure that the employer has attempted to remove the substance rather than first control the risk and they must also be confident that any control measures put in place are going to work.

Employers are required by law to carry out appropriate health surveillance if employees are exposed to certain substances. Most of these are listed in COSHH (Control of Substances Hazardous to Health Regulations) but in actual fact any worker exposed to any possible carcinogen should be regularly monitored to ensure there are no adverse health effects arising from the exposure.

However employers should still keep records of any worker who develops any form of cancer, including the kind of cancer and the work the person did. Union safety representatives can also assist in building up a picture of any possible cancer links by checking sickness absence records and also talking to any workers who have



a long term illness. Just because a number of people within one workplace develop a similar kind of cancer, does not necessarily mean that it is linked to their work, but what is certainly does mean is that there should be a full investigation as to whether it is work related.

People with cancer often experience considerable prejudice from both managers and colleagues and may hide their illness from their employers. We must use our experience to ensure that anyone who develops cancer, regardless of the cause, will be given advice on their rights to both sickness absence and also to reasonable adjustments under the Disability and Discrimination Act.

