

# Work-Related Asthma

## What is Work-Related Asthma?

Work-related asthma is asthma caused or made worse by work.

Some people may have had asthma before they started work, but workplace substances may make their asthma worse.

There are also substances which are used at work which can cause asthma in otherwise healthy people, for example flour or wood dust. These substances are called 'respiratory sensitisers' or 'asthmagens'. Once someone becomes sensitised to these, even small amounts of the substance can trigger an asthma attack.

Some substances can make existing asthma worse. These are called 'respiratory irritants' and they can trigger attacks in those with asthma caused by work or with pre-existing asthma. Examples include chlorine, general dust and even cold air.

## Symptoms

People can work with a substance for several months or even years before they develop a sensitisation to breathing it in.

Sometimes the symptoms start as soon as the person is exposed to the substance, but often they are delayed for several hours, so they are most severe in the evenings or during the night, and workers may not realise it is work that is causing the problem. Symptoms may improve during weekends and holidays when they have had some break from the substance.

The symptoms for asthma are attacks of coughing, wheezing, breathlessness and chest tightness. People may also develop rhinitis and conjunctivitis - runny or stuffy nose and watery or prickly eyes.

Once a person is sensitised, continued exposure can result in permanent damage to their lungs and increasingly severe symptoms.

People with rhinitis may go on to develop asthma. Asthma attacks are likely to become worse and can also be triggered by respiratory irritants. These attacks often continue for years after exposure to the sensitiser has stopped.

## Causes of asthma

There are many different kinds of substances which may be respiratory sensitisers. Chemicals, metals, and natural substances of animal or plant origin. Below is a list of substance groups that are particularly likely to cause asthma and where you may use these in your business.

Some of the activities in this pack referred to as 'Areas That Need Extra Care' are ones where asthma is a high risk, for example the 'Flour Dust' page which covers flour dusts and improvers. You must get these pages if they apply to your business.

Look for the risk phrase **R42 'may cause sensitisation by inhalation'** or **R42/43 'May cause sensitisation by inhalation and skin contact'** on product labels and safety data sheets for the substances you use, this should tell you if any substance is known to cause or make worse asthma.

Substance Groups	Typical Occurrence
<ul style="list-style-type: none"> <li>• Isocyanates</li> <li>• Animal dander (e.g. skin flakes)</li> <li>• Grain dusts/hay dust/ flour dusts/ flour improvers</li> <li>• Wood dusts</li> <li>• Soldering flux/colophony fume</li> <li>• Latex</li> <li>• Hot-wire-sealed film wrapping</li> <li>• Shellfish i.e. prawns</li> <li>• Glues and resins</li> </ul>	<ul style="list-style-type: none"> <li>• 2 pack paints used in vehicle spraying</li> <li>• Pet shops, animal boarding establishments</li> <li>• Bakeries, caterers, hay handling, malting</li> <li>• Woodworking units, builders merchants, sawmills</li> <li>• Repair work activity/electronic assembly</li> <li>• Latex protective gloves</li> <li>• Packaging food products</li> <li>• Shellfish processing</li> <li>• Curing of epoxy resins</li> </ul>

Safety point	Why?	What do you do?
The use of certain substances needs to be controlled. A list of substances and where they might be found is listed above.	These substances are likely to trigger Occupational Asthma.	Do you use chemicals/substance groups that may cause occupational asthma? Yes <input type="checkbox"/> No <input type="checkbox"/>
The use of certain respiratory sensitizers and their levels in the air strictly controlled by legislation.	Some respiratory sensitizers are so dangerous they have been assigned Workplace Exposure Limits (WEL) and Short Term Exposure Limits (STEL). These are concentrations of the substance in the air, above which you are legally required to take specific actions as they have known health effects.	You can find the list of chemicals given WEL or STEL by searching the HSE website ( <a href="http://www.hse.gov.uk">www.hse.gov.uk</a> ) for EH40. You will need specialist advice if you use these chemicals. Complete the section below if you use any of these substances.

### Workplace Exposure Limits and Short Term Exposure Limits Section

Substance	Who is exposed	What controls do you have?

## Information, Instruction and Training for Employees

You have a legal duty to inform, instruct and train staff who are likely to be exposed to respiratory sensitisers so that they know and understand:

- the risks to health;
- the symptoms of sensitisation;
- the importance of reporting minor symptoms at an early stage;
- the proper use of control measures;
- the need to report promptly any failures in control measures.

## Health Surveillance

### WHAT IS IT?

Health surveillance is about systematically watching out for early signs of work-related ill health in employees exposed to certain health risks. It helps prevent asthma by detecting the early signs.

Health surveillance is never an alternative to the proper control of exposure. It is not the same as health screening or health promotion.

### WHAT DO I NEED TO DO?

You must set up a system of health surveillance if your employees are exposed to respiratory sensitisers, unless you are confident your assessment shows there is unlikely to be a risk to their health.

You should contact the Employment Medical Advisory Service through the local HSE office who can recommend local Occupational Health Professionals to advise you.

## Example Health Surveillance Questionnaire

You may wish to photocopy the following template for use when questioning staff when first employed and regularly during their employment.

Employees name

Reference no

Have you any chest problems, e.g. periods of breathlessness, wheeze, chest tightness or coughing attacks?

Yes  No

Since starting your present job (or in your previous employment) have you had any of the following symptoms (do not including isolated colds, sore throats or flu)

a) recurring soreness of or watering of eyes,

Yes  No

b) recurring blocked or running nose,

Yes  No

c) bouts of coughing,

Yes  No

d) chest tightness,

Yes  No

e) wheezing,

Yes  No

f) breathlessness,

Yes  No

g) any other persistent chest problems.

Yes  No

Have you consulted your doctor about any of the above since the last questionnaire?

Yes  No

To be completed by the responsible person:

a) no further action required

b) refer to company occupational health adviser

Signature of responsible person

Date

I confirm that the responses given by me are correct and that I have received a copy of the completed questionnaire.

Signed

Date

## What Should I do About Sensitised Employees?

If health surveillance makes you suspect an employee has become sensitised you should:

- Removed the affected person from the work activity.
- Advise to them to consult their doctor giving information on the work they do and the substances they may have been breathing.
- Review your assessment/control measures and make any necessary changes.
- Report the illness to your local authority – see the sheet on Accident prevention and reporting.