



## Sheffield Occupational Health Advisory Service (SOHAS)

*Working to Prevent and Alleviate the Effects of Work on Health*

REVISED JUNE 2007 | [www.sohas.co.uk](http://www.sohas.co.uk)

# Do you have Occupational Asthma?

**If you have attacks of shortness of breath and they started when you were at work or were made worse by work, your asthma may be occupational. Every year in the UK, up to 3,000 people develop asthma because they are exposed to dangerous substances at work. This is called occupational asthma. 750,000 people with asthma find that things at work make their asthma worse.**

A recent government survey confirmed that breathing problems are the second most common health problem caused by work. What to do if you think your asthma is work-related:

- Try to confirm the link
- Plan prevention measures
- Investigate compensation
- Campaign to reduce the risk of occupational asthma

### Confirming the link

The first step is to use a peak flow meter (available on prescription) to see how your breathing changes

during the working week and when away from work. You will need help to interpret the results; contact SOHAS or your practice nurse for instructions and help.

Your GP can refer you to a chest specialist for further investigations. This is particularly useful if your asthma is not responding to treatment, or the pattern is unclear, or you are planning to leave work because you think that your asthma is work-related.

Another essential step is to establish what you have been exposed to at work.

The substances at work may have a warning (a 'risk phrase') on them or you may need to get advice on the effects of the chemicals mentioned:

- R20 Harmful by inhalation
- R23 Toxic by inhalation
- R26 Very toxic by inhalation
- R37 Irritating to the respiratory system
- R42 May cause sensitisation by inhalation

Your employer is obliged to have information on each substance used under the Control of Substances Hazardous to Health Regulations (COSHH). If you are in a union, your safety representative or shop steward, or your national safety officer may have information on the chemicals you work with. Contact SOHAS, who have a database of information on sensitisers and may be able to advise you on how exposure to particular substances can be prevented.

### How to test your lungs

Workers can get a good indication of the effect of workplace factors on their lungs using a peak flow meter.

Lungs which have not been too badly damaged by chemicals show a tell-tale response when confronted with a sensitiser. The lungs recover over a weekend or break period; a reading will be characteristically high on a Monday morning. It will continue to drop through the week, only recovering again at the weekend. There will tend to be a time lag between exposure and onset of symptoms.

The effects of exposure to irritants will not offer so clear an exposure "fingerprint". There will usually be a more instantaneous effect, with symptoms directly following an exposure to a lung irritant.



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## Other lung diseases caused by work

If your breathing problems are not caused by a sensitiser at work, they may be work-related all the same. Other materials cause chronic obstructive lung disease (including emphysema), or diseases that limit lung capacity, such as asbestosis, silicosis or hard metal disease.

## Prevention

By law your employer has to have assessed the risk that could result from their use (COSHH Regulation 6). Employers have to provide you with information about 'the nature and the degree of risk arising' from using a substance (COSHH Regulation 12). They should also have information on the hazards of a substance provided by the supplier (Health and Safety at Work etc Act 1974 section 2). This might warn that a substance is a sensitiser.

If there is a risk to health, health checks should be carried out and exposure should be monitored. Employers must decide what precautions are needed to prevent or adequately control exposure. The COSHH Essentials pack provides useful solutions to problems of exposure. Each solution takes into account the possible health effects of materials in use, the kind of exposure occurring; dust, fume or gas; and the amount of exposure. This decides what kind of measures are required.

## Compensation

Compensation for occupational asthma is available in two ways:

- From a Jobcentre Plus or social security office (part of the Department for Work and Pensions [DWP]), on form BI100-OA for disablement benefit and BI103 for Reduced Earnings Allowance (see below).
- Through a common law compensation claim from your employer's insurance, via a solicitor.

Making one claim doesn't stop you making the other.

## To obtain Industrial Injuries Disablement Benefit for occupational asthma

- Your asthma must have started or been made worse at work.
- You must have been exposed to a substance known to have this effect (a so-called 'sensitiser'). See below.
- You must have been exposed to this sensitiser at work in the last 10 years.
- If your asthma started before October 1990 you may also be able to get Reduced Earnings Allowance, which compensates you for loss of wages resulting from your asthma.
- The forms can be off-putting. Ask your union representative or a SOHAS adviser to assist you in filling them in.

## What will happen when you make your claim for disablement benefit?

The Jobcentre Plus or social security office will check with your employer at the time your occupational asthma started or was aggravated, that you worked

with the substance you say you did. The consequences of this are something you will have to take account of before you claim. If the DWP accepts your claim, you will go for a medical examination which will decide whether your asthma is due to work and how disabled you are by it.

If what you say has caused your asthma is not confirmed then the examining doctors can get the help of other people – the Health and Safety Executive inspectors and their doctors in the Employment Medical Advisory Service – to find out if they have any evidence that the chemical you mention was present. You can only appeal a decision on medical grounds. This includes identifying a sensitising substance you have been exposed to.

## Claiming damages

Civil claims for compensation (damages) are made through a solicitor. If you are in union, use your union solicitor. Otherwise it is important to get an assessment of the strength of your claim before starting legal proceedings. Even if a 'no win-no fee' agreement is available you may have to pay for initial medical investigations. Make sure that the solicitor you choose is a personal injury solicitor with experience of claims involving occupational diseases. The Association of Personal Injury Lawyers has a list of personal injury solicitors practising in Sheffield. Civil claims are based on proof of negligence by your employer, causation (your lung problem – not necessarily asthma solely caused by work – was caused by work) and liability.

## Campaigning on asthma

Occupational asthma puts workers' jobs and pay at risk. Many workers leave work at higher rates of pay for lower paid jobs because their asthma is becoming progressively worse while at work. Occupational asthma is quite common and often goes undetected because the right questions are not asked when it starts. Each case demonstrates that chemical exposures at work are not controlled and that others are at risk. There are often ways of substituting

chemicals that cause asthma with others that do not. Union safety representatives should make sure

that workers with occupational asthma are safeguarded while the cause is eliminated.

## COMMON SENSITISERS IN SHEFFIELD

<b>Engineering</b>	Chrome nickel, dusts and mists, bacteria and biocides in cutting fluids, cobalt (in tungsten carbide)
<b>Cleaning</b>	House dust mite, solvent based cleaners
<b>Steelmaking and foundries</b>	Resins: isocyanates, furfural, formaldehyde, epoxy resin hardeners
<b>Painting</b>	Isocyanate, epoxies
<b>Food/bakery</b>	Flours, flour mite, additives, colours
<b>Hospitals</b>	Glutaraldehyde, antibiotics, disinfectants

## SENSITISERS AND SOURCES

CONTACT	INDUSTRY	SOURCE
Animals	Laboratories Farming Food and animal products industries	Vertebrates: Budgerigar, Chicken, Frog, Guinea pig, Mice, Pig, Rabbits, Rats Terrestrial invertebrates: Acarian, Bee moth, Beetles, Caterpillars, Cockroaches, Cricket, Daphnia, Fruit fly, Grasshoppers, Honey bee, L. Caesar larvae, Lesser mealworm, Locust, Mites (grain, fowl, barn, flour, straw, house dust mite), Moth, Butterfly, Molluscs, Nematode worms, Riverworm fly, Screw worm fly, Sheep blowfly, Silkworm larvae, Weeping fig, Weevils (Mexican bean, flour, grain) Marine invertebrates: Crab, Prawn, Hoya, Cuttle fish, Squid, Oyster, Seasquirt fluids, Trout, Echinodorus larva, Red soft coral
Animal products	Food industry Agriculture	Avian protein, Bat guano, Casein, Egg protein, Fish-feed, Lactoserum, Pearldust, Sheepswool dust, Shrimpm meal.
Plant dusts	Agriculture Horticulture Food manufacture	Baby's breath, Buckwheat, Castor bean, Cocoon seed, Chicory, Citrus fruit peel, Cladosporium seeds, Coffee Bean, Flour (wheat, barley, oats, rye, soya), Freesia, Garlic dust, Gentian powder, Gluten, Graindust, Henna (hairdressers), Hops, Lathyrus sativus, Lycopodium, Paprika, Pollens (including sunflower), Rose hips, Sericin (hairdressers), Sunflower, Tamarind seed, Tea (incl. herbal), Tobacco leaf, Vicia sativa
Fungi, etc		Alternaria, Contaminated water (amoebae, etc), Humidifier sludge, Merulius lachrymans (dry rot), spores, Paecilomyces
Enzymes		B. subtilis, Bromelin, Flaviastase, Fungal amylase, Fungal amyloglucosidase, hemicellulase, Pancreatin, Papain, Pepsin, Trypsin
Plant gums	Food industry Manufacturing industry	Acacia, Guar, Karaya, Tragacanth
Other biologically derived substances	Various occupational exposures	Carmine, Casein, Phenylglycine acid chloride, Plicatic acid, Psyllium, Quillaic acid, Rosin, Saponin, Tannic acid, Turpentine

CONTACT	INDUSTRY	SOURCE
<b>Chemicals</b>		
Isocyanates	Foundries, paint shops & others	Diphenylmethane -, Isophorone -, 5-Naphthylene -, Toluene - diisocyanate
Anhydrides	Chemical syntheses and processes	Himic, Methyl tetrahydrophthalic, Phthalic, Pyromellitic, Tetrachlorophthalic
Amines	Foundries Engineering Paint manufacture & elsewhere	Dimethylethanolamine, 3-(Dimethylamino-propylamine (3-DMAPA), Ethanolamines, Ethylene diamine, N-methylmorpholine, Monoethanolamine, Paraphenylene diamine, Piperazine Hydrochloride, Triethylene tetramine
Fluxes	Soldering Welding Electronics	Colophony, Zinc-chloride and ammonium, chloride flux, 95% Alkylarul polyether, alcohol + 5%, polypro-pylene glycol
Timbers	Timber trades Joinery Cabinet-making	Abiruana, African Maple, Cedar, Boxwood, California redwood, Cedar (Eastern red, of Lebanon, Western red), Cinnamon, Cocabolla, Ebony, Fernambouc, Iroko, Kejaat, Kotibe, Mahogany, Mansonia, Maple, African Oak, Paw Paw Tree, Pine (pine resin), Quillaja, Ramin, Soapbark, , Tanganykia aningre, Walnut, Central American, Zebrawood, African
Metals as dust, fume or metal salt	Steel, non-ferrous metal refining Engineering Electroplating Painting Printing	Aluminium, Chromium, Cobalt, Nickel, Platinum, Stainless steel welding, Tungsten carbide, Vanadium, Zinc fumes
Drugs	Health care Drug industry Agriculture	Penicillins, Ampicillin, Amprolium, Aspirin, Cephalosporins, Cimetidine, Hydralazine, Hydrazide, Ipecacuanha, Isonicotinic acid, Ispaghula, Methyl dopa, Penicillamine, Phenylglycine acid, Chloride, Psyllium, Siramycin, Salbutamol intermediate, Sulphathiazole, Sulphone choramide, Tetracycline, Tylosin tartate
Dyes	Textile industry	Levafix brillant, Yellow E36, Drimaren brillant, Yellow K-3GL, Cibachrome brillant, Scarlet 32, Drimaren brillant, Blue K-BL
Other organic chemicals	Hospitals Engineering Foundries Construction Painting Refrigeration Agriculture	Abeitic acid, Acrylic resins, Adipic acid, Azobisformamide, Azodicarbonamide, Chloramine, Chlorhexidine, Cyanoacrylates (widely used adhesives), Diazonium salt, Formaldehyde, Epoxy resins, Freon, Furfuryl alcohol: furan based resin, Glutaraldehyde, Hexachlorophene (sterilizing agent), Iso-nonanyl oxybenzene sulphonate, Latex, Methyl methacrylates, Organic phosphate insecticides, Plexiglass, Polyvinyl chloride (fumes, powder), Styrene, Tetrazene, Urea formaldehyde
Oil mists		Fluorine, Aluminum

The above list is derived from a number of sources, principally Chan-Yeung in 'Asthma in the Workplace' (ed. Chan-Yeung) and Hazards bulletin.