

# Chrysotile Asbestos



World Health  
Organization

Further information from WHO on chemicals of major public health concern, including asbestos, can be found at the following web address:

[http://www.who.int/ipcs/assessment/public\\_health/chemicals\\_phc](http://www.who.int/ipcs/assessment/public_health/chemicals_phc)

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WHO Library Cataloguing-in-Publication Data:

Chrysotile asbestos.

1.Asbestos, Serpentine. 2.Environmental Exposure. 3.Occupational. Exposure. 4.Neoplasms – prevention and control. I.World Health Organization.

ISBN 978 92 4 156481 6 (NLM classification: WA 754)

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The production, translation and publication of this document were financially supported by the International Development Fund program of the Permanent Mission of Australia to the United Nations, the Government of Germany and the European Commission. The views expressed herein do not necessarily reflect the views of these organizations.

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# Foreword

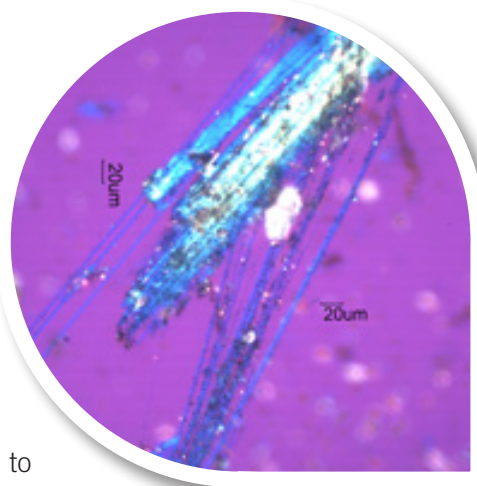
Many countries have already taken action at a national level to prohibit the use of all forms of asbestos to limit exposure and so control, prevent and ultimately eliminate asbestos-related diseases, from which at least 107 000 people die each year globally. However, there are other countries that, for a range of reasons, have yet to act in the same manner. With that in mind, the prime intent of this publication is to assist Member States of the World Health Organization (WHO) in making informed decisions about management of the health risks attached to exposure to chrysotile asbestos.

The document is divided into three parts. The first part reproduces a WHO short information document for decision-makers on the elimination of asbestos-related diseases, updated in March 2014. The second part addresses questions commonly raised in policy discussions, specifically to assist decision-makers in coming to a view. The third part is a technical summary of the health effects of chrysotile, which brings together and summarizes for the first time the most recent authoritative WHO evaluations performed by its International Agency for Research on Cancer and its International Programme on Chemical Safety. The technical summary also reviews results from key studies published after those evaluations and then, briefly, the conclusions drawn from WHO assessments of alternatives.

I commend this publication to ministers, government officials and others who may wish or need to take decisions on, or provide advice related to, asbestos and in particular chrysotile asbestos and the health consequences of exposure.

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# Elimination of asbestos-related diseases

*Updated March 2014*

Asbestos is one of the most important occupational carcinogens, causing about half of the deaths from occupational cancer (1, 2). In 2003, the Thirteenth Session of the Joint International Labour Organization (ILO)/World Health Organization (WHO) Committee on Occupational Health recommended that special attention should be paid to the elimination of asbestos-related diseases (3). World Health Assembly (WHA) Resolution 58.22 from 2005 on cancer prevention and control urged Member States to pay special attention to cancers for which avoidable exposure is a factor, particularly exposure to chemicals at the workplace and in the environment. In 2007, WHA Resolution 60.26 called for global campaigns to eliminate asbestos-related diseases, and in 2013, WHA Resolution 66.10 addressed prevention and control of noncommunicable diseases, including cancer.

***Asbestos is one of the most important occupational carcinogens***

The term “asbestos” designates a group of naturally occurring fibrous serpentine or amphibole minerals with current or historical commercial usefulness due to their extraordinary tensile strength, poor heat conduction and relative resistance to chemical attack. The principal varieties of asbestos are chrysotile, a serpentine material, and crocidolite, amosite, anthophyllite, tremolite and actinolite, which are amphiboles (4).

Exposure to asbestos, including chrysotile, causes cancer of the lung, larynx and ovary, mesothelioma (a cancer of the pleural and peritoneal linings) and asbestosis (fibrosis of the lungs) (5–7).

## Exposure to asbestos and its impact on public health are substantial

Exposure to asbestos occurs through inhalation of fibres primarily from contaminated air in the working environment as well as from ambient air in the vicinity of point

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