WHAT SHOULD I DO ABOUT SENSITISED EMPLOYEES?

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

• remove the individual from working with the sensitiser and advise them to consult a doctor giving information on the work they do and the substances they may have been breathing in;
• review your COSHH assessment and existing control measures and make any necessary changes.

WHAT DO MY EMPLOYEES NEED TO KNOW?

You have a legal duty to inform, instruct and train individuals 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 even seemingly minor symptoms at an early stage;
• the proper use of control measures;
• the need to report promptly any failures in control measures.

We have produced a worker's information card which explains the symptoms of sensitisation and the COSHH duties of employees.

FURTHER INFORMATION

This leaflet has only summarised your main duties under COSHH. HSE has also produced a guidance book - Preventing Asthma at Work: How to control respiratory sensitisers. It gives more specific advice on how to control employees' exposure to respiratory sensitisers.

For more practical advice you can telephone your local HSE office and ask to speak to an inspector.

USEFUL HSE PUBLICATIONS

Breathe freely: A workers' information card on respiratory sensitisers Pocket card INDG172 HSE Books 1994 (single copy free or priced packs of 25 ISBN 0 7176 0771 2)

COSHH a brief guide to the Regulations: What you need to know about the Control of Substances Hazardous to Health Regulations 2002 (COSHH) Leaflet INDG136(ref3) HSE Books 2003 (single copy free or priced packs of 10 ISBN 0 7176 2982 1)

EH 40/2005 Workplace exposure limits: Containing the list of workplace exposure limits for use with the Control of Substances Hazardous to Health Regulations 2002 (as amended) Environmental Hygiene Guidance Note EH 40 HSE Books 2005 ISBN 0 7176 2977 5

A matter of life and breath: Occupational asthma - the causes, the effects and how to prevent it Video HSE Books 1994 ISBN 0 7176 1859 5 (a video which illustrates the consequences of developing occupational asthma and gives good advice to employers)

HSE priced and free publications are available by mail order from HSE Books, PO Box 1999, Sudbury, Suffolk CO10 2WA Tel: 01787 881165 Fax: 01787 313995 Website: www.hsebooks.co.uk (HSE priced publications are also available from bookshops and free leaflets can be downloaded from HSE's website: www.hse.gov.uk; ) See also HSE's asthma website www.hse.gov.uk/asthma and COSHH essentials website (www.coshh-essentials.gov.uk) for information on work-related asthma.

Asthma UK has produced a Work Charter which gives advice on how to make workplaces safer for people with asthma. Contact Asthma UK Tel: 020 7226 2260 Website: www.asthma.org.uk.

British Occupational Health Research Foundation (BOHRF) have guidelines on occupational asthma (www.bohrf.org.uk).

For information about health and safety ring HSE Information Services, Caerphilly Business Park, Caerphilly CF83 3GG.

Respiratory sensitisers and COSHH

BREATHE FREELY

an employers' leaflet on preventing occupational asthma
INTRODUCTION

Breathing in substances called respiratory sensitisers at work can cause occupational asthma. They are used in a wide range of work activities. (Table 1 gives examples).

This leaflet tells you about the symptoms and effects of occupational asthma and your legal duty to protect your employees from exposure to respiratory sensitisers.

WHAT ARE RESPIRATORY SENSITISERS?

A respiratory sensitiser is a substance which when breathed in can trigger an irreversible allergic reaction in the respiratory system. Once this sensitisation reaction has taken place, further exposure to the substance, even to the tiniest trace, will produce symptoms. Sensitisation does not usually take place right away. It generally happens after several months or even years of breathing in the sensitiser.

WHAT ARE THE SYMPTOMS OF RESPIRATORY SENSITISATION?

The symptoms are:

- asthma - attacks of coughing, wheezing and chest tightness;
- rhinitis and conjunctivitis - runny or stuffy nose and watery or prickly eyes.

HOW SOON WILL SYMPTOMS OCCUR?

Once a person is sensitised, symptoms can occur either immediately they are exposed to the sensitiser or several hours later. If the symptoms are delayed, they are often most severe in the evenings or during the night, so workers may not realise it is work that is causing the problem.

WHAT ARE THE EFFECTS OF CONTINUED EXPOSURE?

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 be triggered by other things such as tobacco smoke, general air pollution or even cold air. These attacks often continue for years after exposure to the sensitiser has stopped.

WHAT ARE MY LEGAL DUTIES?

Respiratory sensitisers are subject to the Control of Substances Hazardous to Health Regulations (COSHH). The rest of this leaflet briefly explains what you must do to comply with COSHH.

HOW DO I ASSESS THE RISKS?

COSHH requires you to carry out an assessment of the risks created by work which are likely to expose your employees to respiratory sensitisers. First, find out whether there is an activity or process in your workplace which uses or creates respiratory sensitisers.

If there is, then ask the following questions:

- Is the sensitiser likely to become airborne in use?
- Are there safer alternatives?
- Who is likely to be exposed, to what concentrations, for how long and how often?

HOW DO I PREVENT OR CONTROL EXPOSURE?

COSHH requires you to prevent or adequately control exposure. To do this you will need to think about how you can:

- stop using the sensitiser altogether perhaps by replacing it with a less harmful substance;
- or if this is not reasonably practicable;
- segregate work that may pose a risk;
- or if this is not reasonably practicable;
- partially enclose the process and provide local exhaust ventilation.

If after carrying out the above you still have not achieved adequate control you will also need to use respiratory protective equipment (RPE).

WHAT ABOUT HEALTH SURVEILLANCE?

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

Table 1  Substances responsible for most cases of occupational asthma

<table>
<thead>
<tr>
<th>Substance groups</th>
<th>Common activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Isocyanates</td>
<td>vehicle spray painting; foam manufacturing</td>
</tr>
<tr>
<td>Flour/grain/hay</td>
<td>handling grain at docks; milling, malting, baking</td>
</tr>
<tr>
<td>Glutaraldehyde</td>
<td>disinfecting instruments</td>
</tr>
<tr>
<td>Wood dusts</td>
<td>sawmilling, woodworking</td>
</tr>
<tr>
<td>Electronic soldering flux</td>
<td>soldering, electronic assembly</td>
</tr>
<tr>
<td>Latex</td>
<td>protective gloves for health care, motor vehicle repair, beauticians etc</td>
</tr>
<tr>
<td>Laboratory animals</td>
<td>laboratory animal work</td>
</tr>
<tr>
<td>Some glues/resins</td>
<td>curing of epoxy resins</td>
</tr>
</tbody>
</table>

Note: Refer also to HSE’s asthma web page at www.hse.gov.uk/asthma.