Miller, Diane M. (CDC/NIOSH/EID)

From:

Sent: Tuesday, November 25, 2008 12:37 PM

To: NIOSH Docket Office (CDC)

Cc: Dotson, G. Scott (CDC/NIOSH/EID);

Subject: RE: Review of NIOSH document: Skin notation strategy

Thank you for asking me to review this document. It appears that a great deal of work went into formulating and justifying the skin notations. Most of my comments relate to the sensitization definitions and analyses.

- 1. Are proposed classes of skin notations appropriate? Yes.
- 2. Are proposed criteria for skin notation appropriate? Yes.

3. Multiple skin notations useful? Yes.

- 4. Yes, very important to include sensitizing effects for respiratory sensitization associated with dermal exposure.
- 5. Propose harmonization scheme? Seems reasonable.
- 6. Additional information?
 - a. What is the time frame for SYS (FATAL)?

b. Will you mention approximate dose for SYS (FATAL)?

c. Might be helpful to add notation for carcinogenicity, e.g. SK: DIR (CARC) vs. SK: SYS (CARC).

d. Would be helpful to further define SK: SENS (type I, type IV, etc), as it will indicate the kinds of reactions that workers might have, e.g. anaphylaxis is a risk for type I sensitization, but not for type IV.

e. What about SK: SENS without dermatitis? For example, isocyanates can sensitize through the skin, yet a true contact dermatitis (v.s irritant or defatting) is rare.

f. Should SK: SENS include a SYS notation? This gets to the issue of anaphylaxis or severe systemic reaction.

g. P 85 Table D2 – some of these attributions don't look right. For example:

i. methyl isocyanate is 0 SENS, but is a sensitizier.

ii. Dimethyl sulfatae is 1 SENS, but I can find no information that demonstrates that is causes sensitization. There is information, however, indicating that systemic exposures, if high enough, can be fatal.[SK: SYS (FATAL)].

iii. This suggests that this table requires extensive review of the literature, and probably comments from experts.

h. Table E1: no search terms for allergen, sensitization, allergy, asthma, or hypersensitivity pneumonitis, which would help include more relevant chemicals.

6. Data cited supportive? Yes, but some areas need more work (see above).

7. Conclusions appropriate? In general, yes. The document is very thoughtful.