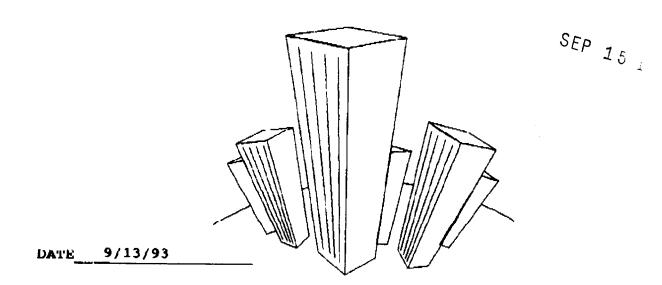
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KERR-McGEE COAL CORPORATION

Fax 405/270-2967

TO:	Dr. Richard W. Niemeier, Ph.D.
COMPANY:	NIOSH
FAX NO:	(513) 533-8573
	Dennis Knight
	s Cover): 3
COMMENTS:	Kerr-McGee Coal Corporation comments on NIOSH
Draft for Pr	oposed Dust Standard.
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	ANY PROBLEMS WITH THIS CAY DI CASE CALL

405/270-2552 or 270-3728



September 13, 1993

Dr. Richard W. Niemeier, Ph.D.
Director
Division of Standards Development
and Technology Transfer
Centers for Disease Control
National Institute for Occupational Safety & Health
Robert A. Taft Laboratories
4676 Columbia Parkway
Cincinnati, OH 45226-1998

Dear Dr. Niemeier:

Kerr-McGee Coal Corporation appreciates this opportunity to submit these comments on the NIOSH Draft Respirable Coal Mine Dust Criteria Document dated June 14, 1993.

Kerr-McGee participated in the development of and fully concurs with the American Mining Congress (AMC) comments which have been submitted on this document. Kerr-McGee emphasizes that a two month response period is totally inadequate to properly respond to a document that has taken years to develop.

A partial summary of Kerr-McGee's concerns on the NIOSH Draft follow:

- The need for a lower coal dust standard has not been demonstrated. Since the introduction of the current coal dust standard, the prevalence of progressive massive fibrosis (PMF) has been decreasing and is essentially nonexistent in coal miners that have begun their careers since 1969.
- A review of cited medical literature in the NIOSH Draft suggests that the prevalence of small round opacities on chest x-rays may well be under-reported in the general population. Therefore, the prevalence of reported pneumoconiosis in miners may well be over-reported which would yield flawed conclusions in this study.
- Scientific literature, including citations in the NIOSH Draft, show that coal rank has been consistently demonstrated to affect the prevalence and severity of all pulmonary disease outcomes in miners. NIOSH has elected to discount the importance of coal rank effect and has proposed a new lower dust standard for all coal, regardless of percent carbon content. Data from British and United States studies does not support the need for lower standards.

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- NIOSH, BOM, and MSHA have all performed studies with the first generation air-stream helmets which have shown high success rates for reducing dust exposure to the wearer. Yet the NIOSH document does not encourage or recommend that these devices be used or be granted regulatory credit for their usage.
- NIOSH has not demonstrated a need to include surface miners in their proposed medical surveillance program. Current standards for silica and coal dust exposures adequately protect surface miners.
- Chronic Obstructive Pulmonary Diseases (COPD) should not be part of this standard. COPD is primarily related to smoking habits, an individual life style choice. health risk associated with life style should not become a burden for employers.
- The NIOSH Coal Workers X-Ray Surveillance Program (CWXSP) has suffered from low voluntary miner participation rates which limits its scientific usefulness particularly relative to evaluation of the adequacy of dust standards.
- NIOSH has introduced several changes to the employee transfer program that are neither justified or warranted and may pose considerable conflicts with existing employment laws.

Kerr-McGee Coal Corporation is committed to the safety and health of all our employees and welcomes sound scientific health guidelines. Kerr-McGee believes that scientific literature supports the fact that the current two milligram dust standard is adequate and appropriate for the U.S. Coal Mining Industry.

Sincerely,

J. C. Burdick III

Director-Environmental and

1. Clarand Smake to

Regulatory Affairs

JCB:djw

cc: R. C. Scharp

E. T. Still

D. L. Knight