

# Update of NIOSH Carcinogen Classification and Target Risk Level Policy for Chemical Hazards in the Workplace

## NIOSH Carcinogen Policy

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# Why Update the Carcinogen Policy?

- ❑ New scientific advances in risk modeling, biological mode of action, and analytical methods
- ❑ Receive peer and public input on the NIOSH process
- ❑ Increase the transparency of the NIOSH process

# Current Intelligence Bulletin

- ❑ Carcinogen classification
- ❑ Target risk level for carcinogen RELs
- ❑ Analytical feasibility and engineering achievability

# Carcinogen Classification: History

- ❑ Since 1978 NIOSH used “potential occupational carcinogen” as its highest designation
- ❑ Some dissatisfaction with that terminology
  - Known carcinogens such as asbestos, benzene, and cadmium were mislabeled
- ❑ NIOSH requested public input in 2011
- ❑ Public meeting on issues in December 2011
- ❑ Currently: draft document on web for public/peer review
  - <http://www.cdc.gov/niosh/docket/review/docket240A/pdf/EID-CIB-11052013.pdf>

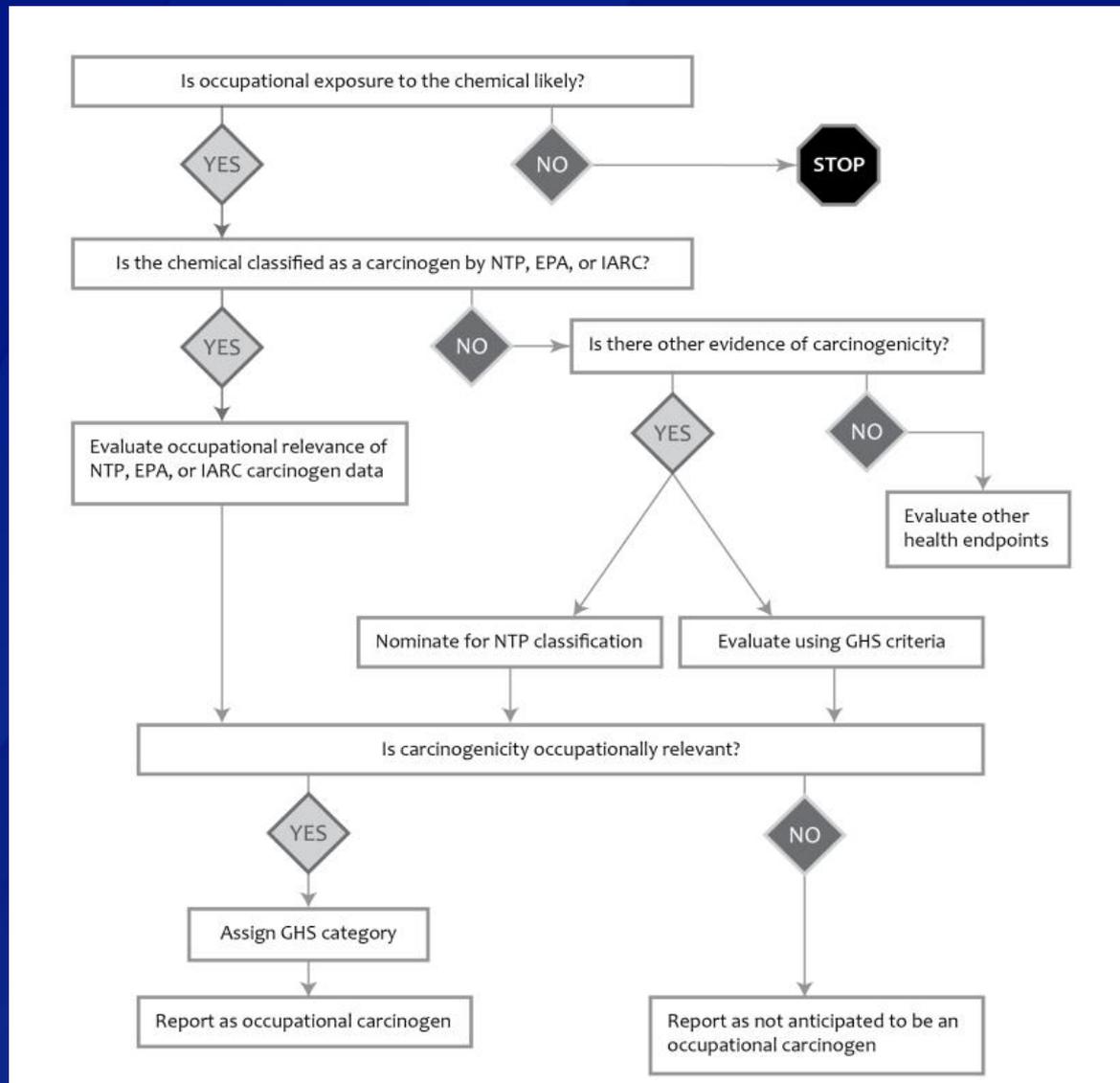
# Carcinogen Classification: Features

- ❑ Utilizes **NTP, EPA,** and **IARC** cancer classifications for chemicals
- ❑ Evaluates **occupational relevance** in terms of exposure and applicability of the data
- ❑ Assigns **Globally Harmonized System (GHS) category** for hazard communication

# Occupational Relevance of Carcinogen Classification

- ❑ Potential for worker exposure
- ❑ Applicability of evidence to occupational carcinogenicity
  - Mode of action
  - Route of exposure

# NIOSH Chemical Carcinogen Review Process



# Correspondence of Carcinogen Classification with GHS Carcinogen Categories\*

NTP RoC	IARC	EPA 1986	EPA 2005	GHS Category/ Hazard Phrase
Known to be a human carcinogen	<b>Group 1</b> Carcinogenic to humans	<b>Group A</b> Human carcinogen	Carcinogenic to humans	<b>Category 1A</b> Known human carcinogen
Reasonably anticipated to be a human carcinogen	<b>Group 2A</b> Probably carcinogenic to humans	<b>Group B1</b> Probable human carcinogen	Likely to be carcinogenic to humans	<b>Category 1B</b> Presumed human carcinogen
	<b>Group 2B</b> Possibly carcinogenic to humans –adequate in animals; inadequate in humans	<b>Group B2</b> Probable human carcinogen		
	<b>Group 2B</b> Possibly carcinogenic to humans –limited animal evidence	<b>Group C</b> Possible human carcinogen	Suggestive evidence of carcinogenic potential	

\*As interpreted by NIOSH

# **Carcinogen Classification**

## **Sample Determination: Benzene**

- ❑ NIOSH occupational carcinogen
- ❑ GHS carcinogen category 1A: known human carcinogen
- ❑ Based on:
  - NTP: known to be carcinogenic to humans
  - EPA: Group A: human carcinogen
  - IARC: Group 1: carcinogenic to humans

# Carcinogen Classification

## Sample Determination: Heptachlor

- ❑ NIOSH occupational carcinogen
- ❑ GHS carcinogen category 1B: presumed human carcinogen
- ❑ Based on:
  - EPA: Group B2-probable human carcinogen (sufficient data in animals)
  - IARC: Group 2B-possibly carcinogenic to humans (sufficient data in animals)

# Target Risk Level for Carcinogen RELs: History

- ❑ Prior to 1995: lowest feasible concentration
  - Determined by employers
  - Employer evaluated technical and economic options
- ❑ In 1995: adopted a quantitative basis for RELs
  - Based on quantitative risk evaluation
    - Use mathematic models to evaluate exposure-response relationships
    - Extrapolate from animals to humans and from high doses to low doses
  - Acknowledged residual risks
  - Inherent in establishing an REL is a target risk level but no such level was specified

# Risk Levels in New NIOSH Carcinogen Policy

- ❑ NIOSH affirms scientific knowledge that the only way to eliminate excess risk from carcinogens is to prevent exposure
- ❑ NIOSH advocates using safer alternatives and to substitute noncarcinogen chemicals whenever feasible
- ❑ Removing all carcinogens in commerce is impractical so guidance on reducing carcinogen exposures to workers is needed
- ❑ NIOSH will assess risks using quantitative methods when data are available

# Risk Levels in New NIOSH Carcinogen Policy

- ❑ Communicate an array of lifetime cancer risk for exposures from 1/100 to 1/1,000,000
  - Provides useful information to employers and workers to take preventive action
- ❑ NIOSH will identify a minimum level of protection – this is 1 in 1000 risk level; to establish a REL a target risk level is needed
- ❑ NIOSH advocates trying to achieve exposures resulting in risks lower than 1 in 1000

## Basis for Target Risk Level

- ❑ U.S. Supreme Court “Benzene Decision” characterized a range of risks between 1 in 1000 and 1 in a billion
- ❑ Implied that 1 in 1000 was a significant risk
- ❑ NIOSH will use the 1 in 1000 target risk level because it better relates to OSHA’s work in developing occupational exposure limits
- ❑ NIOSH will use mathematic models for quantitative risk assessment

## **NIOSH Precedent for Using 1 in 1000 Risk Level\***

- 1990** Benzene PEL (Testimony to OSHA)
- 1990** Cadmium PEL (Testimony to OSHA)
- 1991** 1,3-Butadiene PEL (Testimony to OSHA)
- 1995** Coal dust (REL)\*
- 1998** Diesel exhaust (Journal article/collaboration with MSHA)\*
- 2001** Silica (Journal article-risk assessment)
- 2002** Silica (Journal article-risk assessment)\*

\*Includes health effects other than cancer

## **NIOSH Precedent for Using 1 in 1000 Risk Level (cont'd)\***

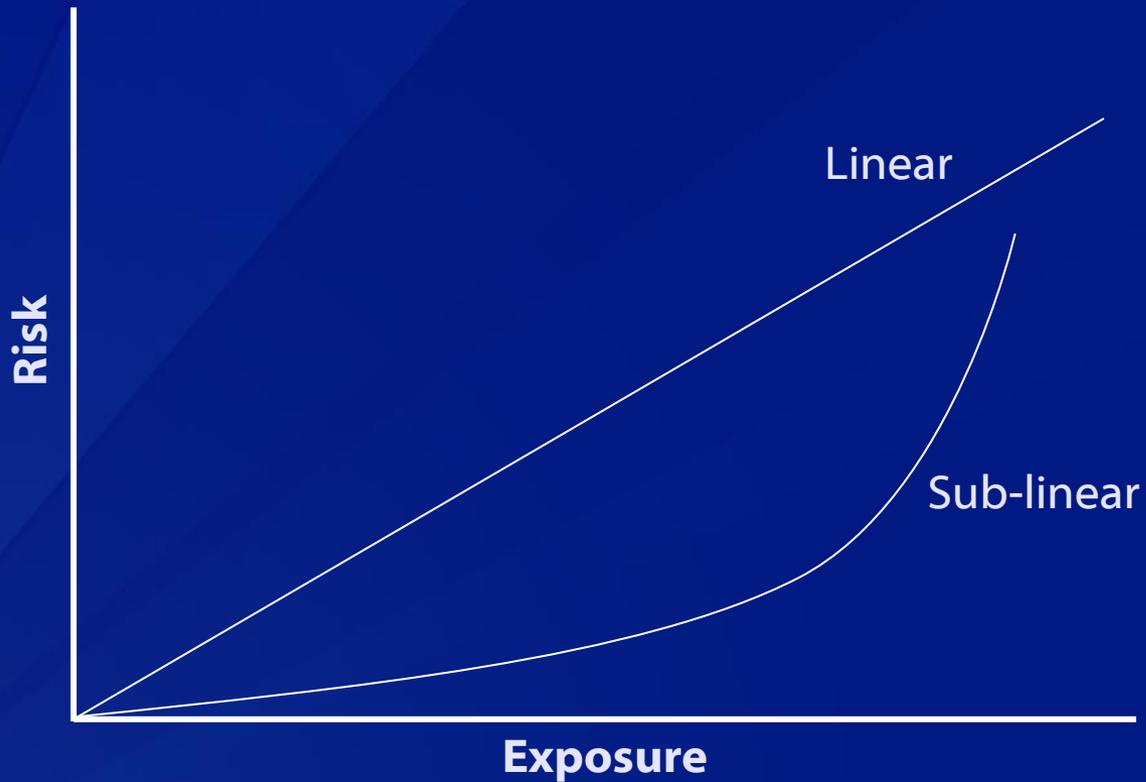
- 2007** Manganese (Journal article-risk assessment)\*
- 2011** Titanium dioxide (RELs)
- 2013** Hexavalent chromium (REL)
- 2013** Diacetyl/2,3-Pentanedione (Draft REL)\*

\*Includes health effects other than cancer

## **Additional Protections Afforded by Risk Assessment and Related Communications**

- ❑ Use of 45-year working lifetime
- ❑ Treats exposure-response as linear at low doses
  - Default assumption
  - In some cases sufficient mode of action data may allow risk estimation based on non-linear dose-response models

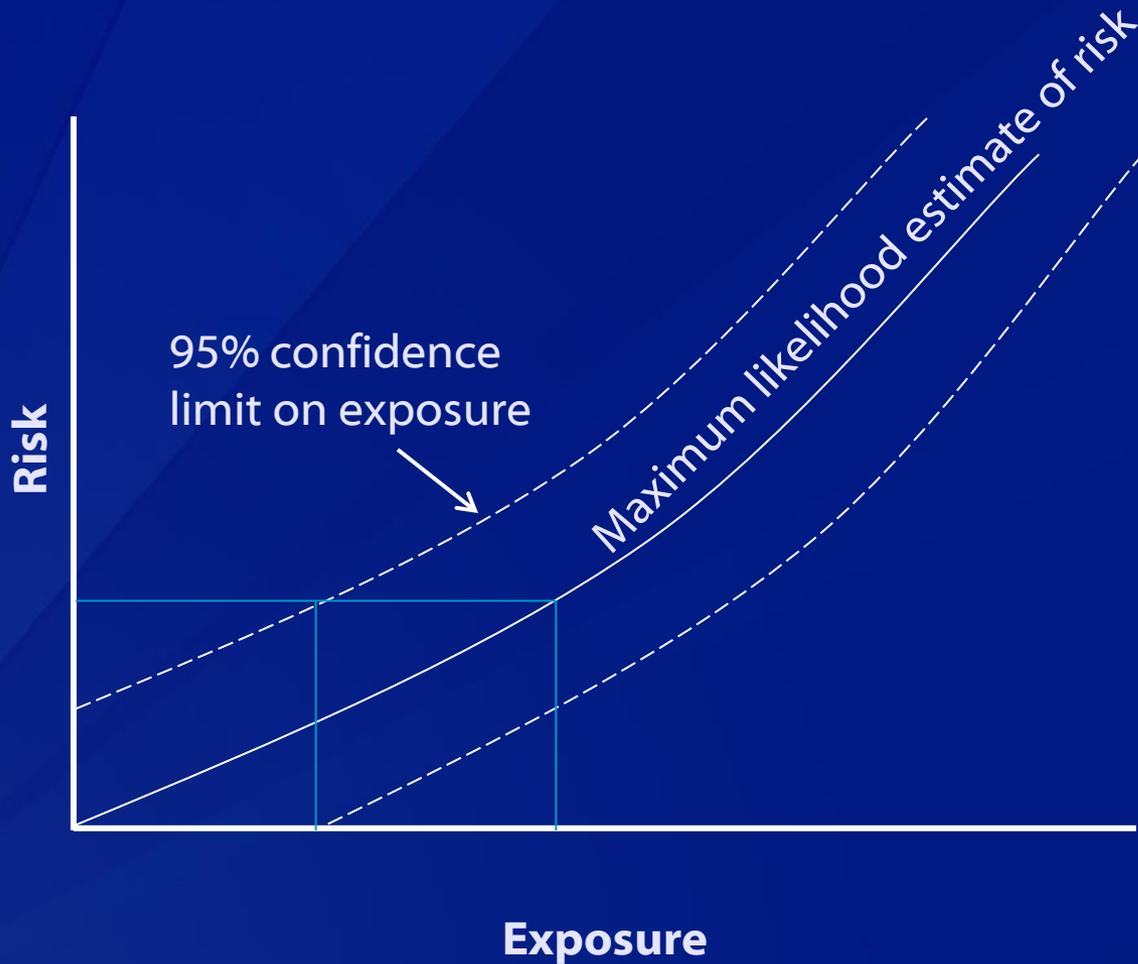
# Low Dose Extrapolation



## **Additional Protections Afforded by Risk Assessment and Related Communications**

- ❑ NIOSH REL will be based on 95% lower confidence limit of the exposure corresponding to the target level of risk

# Confidence Interval



## **Additional Protections Afforded by Risk Assessment and Related Communications (cont'd)**

- ❑ NIOSH guidance is that risks should be kept well below the REL. Lower exposure lowers the risk.
- ❑ NIOSH recommends alternatives when possible
- ❑ For these reasons the actual risk on which a REL is based will be less than 1/1000

# Analytical Feasibility and Engineering Achievability: History

- ❑ "...Engineering controls ...should be used to control occupational exposures **to the fullest extent feasible.**" [1988]
- ❑ "NIOSH RELs will be based upon risk evaluations . . .and on an assessment of what **levels can be feasibly achieved** by engineering controls and measured by analytical techniques." [1995]

# Analytical Feasibility and Engineering Achievability: Issues

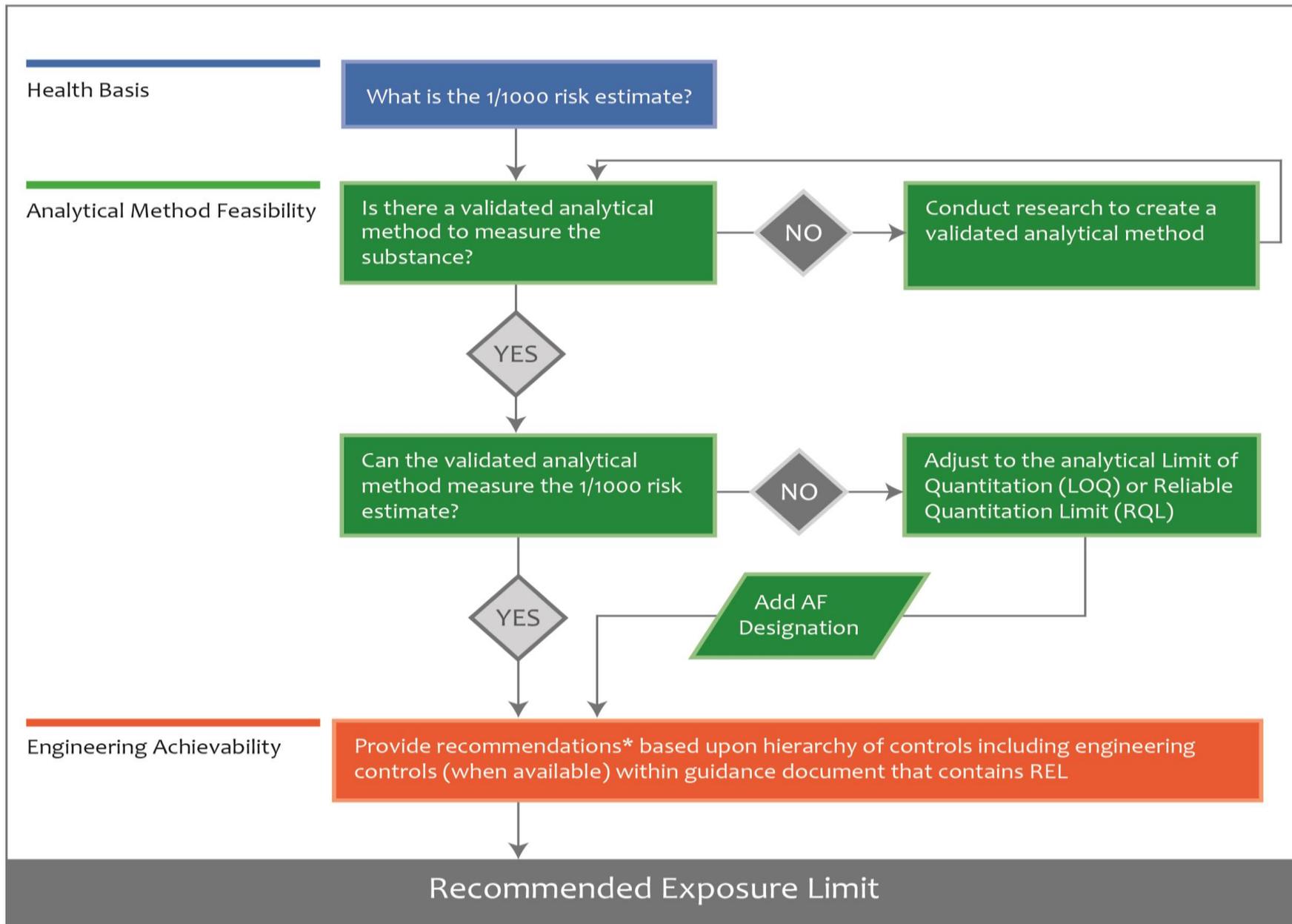
- ❑ Not all NIOSH RELs are health-based
- ❑ Many NIOSH RELs are based on analytical feasibility
- ❑ NIOSH has made some evaluations of engineering feasibility or achievability, but has not routinely conducted quantitative analyses of the technical feasibility of achieving RELs

# Analytical Feasibility and Engineering Achievability

- ❑ NIOSH will no longer establish carcinogen RELs relying on an evaluation of engineering controls, but will make an effort to provide control information
- ❑ Basis of NIOSH RELs
  - Health effects (quantitative risk assessment)
  - Analytical feasibility (measurement of chemical in the work environment)

# Analytical Feasibility and Engineering Achievability: New RELs Policy

- For new RELs, NIOSH will distinguish between health-based and analytical feasibility-based RELs
  - Health-based RELs = REL
  - RELs based on analytical feasibility = REL<sub>AF</sub>



\*Research on engineering controls will be conducted if such guidance does not yet exist.

# Timeline

- ❑ Public meeting (December 16, 2013)
- ❑ Receive all public comments by February 13, 2014
- ❑ Receive all peer review comments by March 14, 2014
- ❑ Anticipate completion of FINAL Cancer Policy in 2014

# Carcinogen and RELs Policy Update Committee

- ❑ David Dankovic (EID)
- ❑ John Decker (OD)
- ❑ Charles Geraci (EID)
- ❑ Pius Joseph (HELD)
- ❑ Eileen Kuempel (EID)
- ❑ Thomas J. Lentz (EID)
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For updates visit the NIOSH Carcinogen Policy web page:

<http://www.cdc.gov/niosh/topics/cancer/policy.html>

**Thank you!**