

**Transcript of Interview with WHO Director of Public Health and Environment, Dr Maria Neira, 5<sup>th</sup> November 2013**

Time	Text / Audio
00 00	<p style="text-align: center;"><b>An interview with Dr. Maria Neira</b></p> <p style="text-align: center;"><b>Director, Public Health and Environment World Health Organisation</b></p>
00 07	<p><b>What kind of threat does asbestos pose to the world today?</b></p>
00 13	<p>We know very well that asbestos represents a threat to public health. It causes cancer, lung cancer, it will cause mesothelioma, and it will cause chronic respiratory diseases which are very unpleasant for the patients and obviously cause a lot of suffering. And in addition to that we know now from the recent studies conducted by our colleagues at the International Agency for Research on Cancer [IARC] that it can be associated as well with cancer of the ovary and laryngeal cancer. So I think we have enough arguments to say that asbestos represents a major problem for public health.</p>
00.53	<p><b>What is the WHO's evidence-based policy on asbestos?</b></p>
01 00	<p>WHO has been conducting studies to look at what is the evidence to say that asbestos represents a problem for human health. You know asbestos-related diseases are not new, we have a lot of experience on that, and WHO conducted a comparative risk assessment and from this we know that an estimated 125 million people around the world are exposed to asbestos in the work environment, to all forms of asbestos. And we know as well that this is an underrepresentation [of the actual number of people exposed to asbestos around the world] because in fact we have figures only for people exposed in the working environment but we know that there are other places where they can be exposed. We know as well that there is an estimation of more than 100,000 deaths that can be attributable to exposure to asbestos, all types of asbestos. I think this [evidence] is strong enough to say that it is time to move now to [take] more action related [towards] the elimination of asbestos-related diseases.</p>

02 02	<b>How does WHO act on World Health Assembly resolutions in practice?</b>
02 09	WHO has the supreme body for our policy recommendations, which is when the Ministers of Health of 194 countries meet here in Geneva at the World Health Assembly. We have a resolution where they have requested us to do more on cancer control and one of the ways to address cancer control is to look at all types of cancer and one of them is the one caused by asbestos. And since then we have been concentrating on reducing asbestos-related diseases, eliminating asbestos-related diseases, and therefore by doing so reducing the cancer caused by asbestos. We have another resolution: We have a resolution where all member states request the WHO to develop a Global Plan of Action on Workers Health and part of that resolution asks us to go to for a global campaign on elimination of asbestos-related diseases. So we have a very solid basis for conducting our work, plus the fact that people have been suffering from asbestos-related diseases for years now and the evidence now is overwhelming.
03 26	<b>In WHO's 'Global Plan of Action' could you clarify the meaning of the phrase 'bearing in mind a differentiated approach to regulating its various forms'.</b>
03 41	WHO has a resolution saying that we need to go for a global campaign to eliminate asbestos-related diseases, and there is a sentence that says 'with a differentiated approach' but this is related to the legal instruments you want to use at country level, but it is certainly <i>not</i> referring to any differentiated forms of asbestos. For us, all forms of asbestos including obviously chrysotile are carcinogenic. And we have the evidence from, the latest one, we have plenty of evidence, comes from the IARC, which is our research cancer agency that belongs to WHO. And that revision, done by a very important number of scientists with an incredible consensus around that, they concluded that all forms of asbestos are carcinogenic, and 'all forms of asbestos' means that chrysotile asbestos is definitely included.
04 47	<b>In Asia the asbestos industry has claimed that 'WHO certifies that chrysotile is safer than substitutes'. Is this true?</b>
05 04	Chrysotile is not safe. We concluded that all forms of asbestos are carcinogenic to humans. And not only that, in the latest revision of IARC they concluded that in addition to mesothelioma and lung

	<p>cancer that are very well-known and for which we have enormous evidence, we can add two other types of cancer – ovarian and laryngeal cancer – and we need to look out for them. So all forms of asbestos including chrysotile asbestos are carcinogenic. There is no ambiguity on WHO’s position around that. We have plenty of documents where you can find these statements and we would like to go for a massive elimination of asbestos-related diseases including obviously chrysotile forms.</p>
05 53	<p><b>Does WHO support the safe use of chrysotile or the elimination of chrysotile use?</b></p>
06 02	<p>For us there is no safe use of chrysotile or any form of asbestos, for different reasons: It will require on the manipulation [use of asbestos], it will require levels of safety that in developing countries cannot be assured. In addition to that when you have to remove or when asbestos or when chrysotile asbestos goes into the waste this will require as well a special manipulation. So for us there is no safety threshold, there is no safe manipulation or use of chrysotile asbestos or any forms of asbestos. Of course the countries need to choose the way they want to handle this major public health issue. In many countries around the world they have banned the use of all forms of asbestos and in other countries they go for regulatory measures that might not go as far as banning asbestos but are still very effective.</p> <p>I think WHO has very, very strong statements about chrysotile – I will refer to our fact sheets, they are available on our webpages, where I don't think there is any ambiguity. WHO very clearly states that based on the results of the monograph on asbestos by IARC, which is our research agency on cancer, all forms of asbestos are carcinogenic, including obviously chrysotile. So I think the information is widely available for member states, for people, for scientists, for general populations, so anyone can have access to these very clear statements about the fact that WHO considers that it will be feasible to go for the elimination of asbestos-related diseases, and obviously the most efficient way to do that will be to eliminate the cause of asbestos-related diseases, so stop the use of asbestos, all types of asbestos.</p>
08 02	<p><b>Some asbestos supporters have claimed there is no evidence that chrysotile is harmful to human health. Is this true?</b></p>
08 11	<p>The evidence is there, I mean there is extremely solid evidence. It's true that asbestos cancer, asbestos-induced cancer, will take 20 years to appear so it will be difficult to differentiate lung cancer</p>

	<p>caused by asbestos and by other causes like tobacco for example in countries where you don't have these epidemiological studies linking exposure in the working environment to asbestos to a type of cancer. In developing countries, in many of them we don't even have cancer registries. But we have done these very long epidemiological studies following the entire population exposed and then looking at the results for many years. We have done that in several countries. The evidence is very solid. There are no reasons to think that in Africa it will not happen the same or in Asia. Therefore for us the evidence is there. We know that cancer is happening. And we don't want to wait 20 years until we start to count the number of deaths and to look at the increase in the number of cancers. So I think the time to act is now. We have very solid evidence and more than enough [evidence] to say that we need to eliminate asbestos related-diseases.</p>
09 40	<p><b>How do we know that chrysotile causes cancer?</b></p>
09 47	<p>The evidence about carcinogenicity comes from our colleagues working at the International Agency for Research on Cancer. They look very much for the environmental causes of cancer. And they have prestige, they have enormous credibility, and their studies are based on a review of the literature and the scientific consensus and then they come up with their recommendations. Their latest revision is from 2009, and since then there is not new evidence or studies, but all the evidence proves that all forms of asbestos are carcinogenic to humans and, in addition to that, until now we knew that asbestos could cause lung cancer and that mesotheliomas are attributable to asbestos, but now we know that there are two other types of cancers that can be attributed to exposure to asbestos as well, which is the ovarian cancer and laryngeal cancer. So we will be looking at that as well. But this is in addition to the evidence that we have until now, that asbestos exposure is carcinogenic to humans.</p>
10 38	<p><b>Are there plans to produce a WHO Guideline on chrysotile that incorporates the new evidence since 1998?</b></p>
11 12	<p>We have the monograph produced by our colleagues in IARC. We have previous studies in WHO. We have a Fact Sheet that gives all the facts about the evidence that we have on asbestos. And we have at the moment more than 50 countries that officially banned the use of asbestos. I think now with the resolution on workers health, and the global campaign to eliminate asbestos-related diseases, WHO will be concentrating not on producing more evidence, but now really going to the <i>cause</i> of the disease which</p>

	will mean promoting the stop of the use of all forms of asbestos because [the use of asbestos] is responsible for cancer.
11 58	<b>What is the most efficient way to eliminate asbestos-related diseases?</b>
12 04	<p>Well in public health when you know the cause of the disease, you go and tackle that cause. This is what we call primary prevention. If you are dealing with a cholera outbreak, obviously you will treat the patients, but more importantly you will make sure that the water that people are drinking that is probably the cause of the disease, is clean and safe. So you eliminate the cause of the disease. In the case of mesothelioma and lung cancer caused by asbestos, it is very simple: The way to address the cause of the disease will be to promote the end of the use of all forms of asbestos. So we are working with countries, providing them with the scientific evidence, giving them the facts that we have that are very solid around the end of the use of asbestos, and we tell them that based on evidence there are safe substitutes for asbestos and if they use the right technology and economic arguments it is feasible to stop the use of asbestos, and by doing so protecting the health of their population.</p> <p>The most efficient way to eliminate asbestos-related diseases, the safest way, will be to stop the use of all forms of asbestos and therefore we will be able to stop exposure and therefore we will be able to stop to see the diseases caused by exposure to asbestos. So the most efficient way will be to stop the use of all forms of asbestos.</p>
13 37	<b>How will WHO carry out the global campaign to eliminate asbestos-related diseases in the countries where asbestos is still being used?</b>
13 45	For WHO to conduct this global campaign on the elimination of asbestos-related diseases we had to do several things: One, to continue to produce and disseminate the evidence that we have and that's why it's so important that we have opportunities to disseminate and do more advocacy on the work we have done, and on the scientific evidence around the fact that asbestos is carcinogenic; Second, we are working with countries on the way they can phase out the use of asbestos – if they can ban it, it will be even better for us – but at least to stop the use of all forms of asbestos. Obviously we need to work with countries as well on proposing measures for the safe removal of asbestos from those buildings where asbestos is already there, and then obviously

	conducting very active campaigns at country level, for people to demand more action on stopping the use of asbestos. Obviously for those persons who have already been infected and they are suffering from mesothelioma or lung cancer, we will propose adequate treatment and rehabilitation where possible, and follow-up of the patients.
15 03	<b>Do you support a global chrysotile ban as the most efficient policy to eliminate chrysotile-related diseases?</b>
15 12	The most efficient way, as I say, will be to stop the use of all forms of asbestos. Now whether there is a global ban campaign, that will require a negotiated Convention by member states, that's something that maybe goes beyond WHO's capacity to go for a legally binding treaty, but in fact there are more than 50 countries that have already banned the use of asbestos and others are moving [in that direction]. We want countries to move on stopping the use of asbestos, the way they prefer to do it and adapted to their local capacity... but I think it has to be done as soon as possible. The evidence is there and the health of the people is at risk.
15 58	<b>End</b>