Health Surveillance for workers with previous exposure to asbestos: a specific programme

developed in Tuscany Region (central Italy).

Francesca Battisti and Elisabetta Chellini.

Unit of Environmental and Occupational Epidemiology, Cancer Prevention and Research Institute (ISPO),

Firenze, Italy

In Italy a complete ban of asbestos use is in force since 1992 (national law no.257). Asbestosrelated diseases, either non-oncologic or oncologic, have usually a long latency time that justifies a health surveillance of subjects with previous occupational exposure to asbestos. In Italy this surveillance was also provided by the Italian Decree No. 81/2008 "Testo unico sulla Salute e Sicurezza sul Lavoro" [National Law on Occupational Safety and Health], Article 259, paragraph 2, in force since 2008.¹ However, the law does not specify who is responsible for organizing such surveillance, nor the timeframe and the protocol of these clinical checks.

In Tuscany Region (central Italy) several initiatives aimed at the healthcare surveillance of asbestos workers have been carried out by single institutions (Local Health Authorities or University Hospitals) during last two decades, although not in a homogeneous nor in a coordinated manner. Therefore a regional group of experts was engaged to define an homogeneous approach to this issue, its operational and economical aspects. Then, the Deliberation of the Regional Administration of Tuscany no.396/2016 supported the whole programme, making it free of charge for all subjects who fulfil the predefined enrolment criteria (being resident in the region, having less than 80 years old with cessation of occupational asbestos exposure in the last 30 years).² Clinical activities started on 3rd April 2017. Workers previously exposed to asbestos that fulfil enrolment criteria are expected to be almost 5,600.

The programme activities are classified in two levels: a first level for a basic health evaluation and a second level for in-depth analyses. The programme has to be performed by public health services and a quality control of activities guarantees its homogeneity and equity of access in the whole region.

The involvement of specific public health services and the cooperation of social stakeholders (unions and asbestos workers associations mainly), with whom a specific agreement was signed by the Regional Administration, are expected to help in enhancing the participation to the programme of all the past asbestos workers.

¹ Decreto legislativo 9 aprile 2008, n. 81. Testo unico sulla salute e la sicurezza sul lavoro. Gazzetta Ufficiale n. 101 del 30 aprile 2008 – Suppl. Ordinario n. 108.

² Delibera di Giunta Regionale Toscana nº 396 del 03/05/2016. Sorveglianza sanitaria e percorso clinico per gli ex esposti ad amianto e sviluppo di linee di indirizzo per la sorveglianza sanitaria di ex esposti ad altri cancerogeni occupazionali. Available at: http://www301.regione.toscana.it/bancadati/atti/Contenuto.xml?id=5114096&nomeFile=Delibera_n.396_d el_03-05-2016