
Occupational Health Hazard Risk Assessment Project for California

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Introduction

- Project conceived by Dr. Julia Quint, former Chief of HESIS in CDPH



- Overall goals
 - Identify chemicals of concern to workers
 - Develop and apply risk assessment methods for the workplace
 - Provide examples of protective exposure limits
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Background

- OEHHA
 - Lead state agency for identifying and evaluating chemical hazards

 - Proposition 65
 - Safe Drinking Water and Toxic Enforcement Act of 1986
 - State is required to maintain a list of chemicals identified as causing
 - Cancer
 - Male and female reproductive toxicity
 - Developmental toxicity
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Primary Elements of Project

- Screen Proposition 65 list for workplace **chemicals of concern**
 - Describe and apply **cancer and noncancer risk assessment** methods for workplace
 - Provide input to HESIS on **priorities for further evaluation**
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Screening for “Workplace Chemicals” on Proposition 65 List

- Determine type/use of chemical (e.g., solvent)
 - Remove certain substances (e.g., drugs, banned chemicals)
 - Identify evidence for current use
 - Primarily U.S. production/import volume as a surrogate
 - No California inventory available
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Prop 65 Workplace Chemicals of Concern

- 122 workplace chemicals either unregulated or under-regulated
 - No PELs: 44 carcinogens, 5 reproductive/developmental toxicants
 - Have PELs but are not regulated explicitly for appropriate endpoint: 62 carcinogens, 14 reproductive/developmental toxicants
 - Characteristics
 - High production volume: ~60%
 - Chemical/dye intermediates: ~60%
 - Solvents: ~20%
 - Other use types: Plasticizers, stabilizers, flame retardants, dyes, catalysts, alloys, batteries, fuel-related, various industrial applications
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The Four Steps of Risk Assessment

- Hazard identification
 - Determine the types of health effects a chemical could cause - cancer or noncancer
 - Toxicity or dose-response assessment
 - Determine the relationship between levels of exposure to a chemical and the probability of health effects
 - Exposure assessment
 - Estimate how much of a chemical a person is exposed to under particular circumstances
 - Risk characterization
 - Combine the dose-response and exposure assessments to
 - Estimate the level of risk
 - Determine acceptable level of exposure
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Risk Management

- Risk assessors provide scientific input to risk managers
 - Health protective levels of exposure
 - Options for reducing risk
 - Risk managers separately consider other factors
 - Economic considerations
 - Technical feasibility
 - Stakeholder concerns
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Cancer Risk Assessment Basics

- Some risk at any dose of a carcinogen
 - Lifetime exposure for an adult male
 - For workers, need to adjust for shorter exposure
 - Sensitive subpopulations and early lifestages not typically considered
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Cancer Example 1: Hexachlorobenzene

- Listed under Proposition 65 as known to cause cancer (1987) and developmental toxicity (1989)
 - Cal/OSHA PEL: 0.002 mg/m^3 (or $2 \text{ } \mu\text{g/m}^3$)
 - Based on hepatic and neurological effects; hepatic tumors in animals noted
 - Cal/OSHA Advisory Committee acknowledged HCB to be a carcinogen
 - PEL based on other effects due to lack of policy and resources to conduct risk assessment
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Understanding the Unit Risk Value

- Definition:

The excess cancer risk associated with a continuous lifetime inhalation exposure to a unit air concentration (e.g., $1 \mu\text{g}/\text{m}^3$) of a given chemical

- The hexachlorobenzene unit risk value of $0.00051 (\mu\text{g}/\text{m}^3)^{-1}$ can be understood most simply as follows:

If 10,000 people inhaled $1 \mu\text{g}/\text{m}^3$ of HCB every day for life, approximately 5 excess cases of cancer would be expected in that population

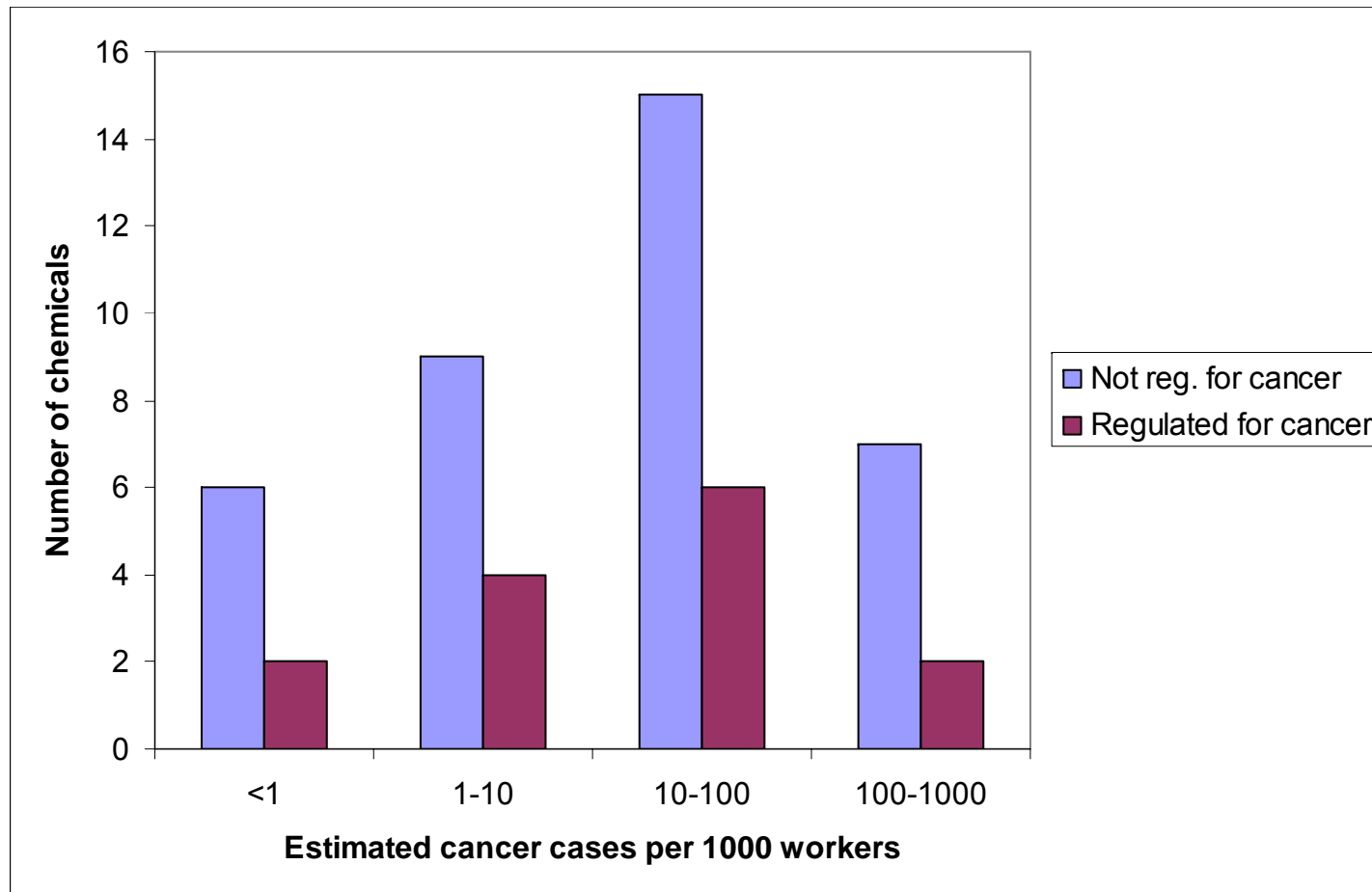
Cancer Risk Associated with Current Cal/OSHA PEL for Hexachlorobenzene

- Cancer risk at current Cal/OSHA PEL:

$$\text{Risk} = \underbrace{0.00051 (\mu\text{g}/\text{m}^3)^{-1}}_{\text{Unit Risk}} \times \underbrace{2 \mu\text{g}/\text{m}^3}_{\text{PEL}} \times \underbrace{\frac{10}{20} \times \frac{5}{7} \times \frac{50}{52} \times \frac{40}{70}}_{\text{Worker Exposure Factors}} = 2 \times 10^{-4}$$

- Also can be expressed as “2 in 10,000”
- Compared to “acceptable” cancer risk levels (determined by risk managers):
 - 1 in 100,000 under Proposition 65
 - 1 in 1,000 commonly applied for workplace

Summary of Estimated Cancer Cases



Interpreting High Cancer Risk Estimates

- Real world exposures may be less than assumed
 - Insufficient cancer studies in humans
 - Difficult to study: long latency period, workplace exposures difficult to characterize
 - Systematic follow up often not performed
 - Insufficient work history data collected by cancer registries
 - Rely on animal data
 - Human dose at PEL comparable to animal dose when high cancer risks predicted
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Comparison of Worker and Animal Doses

Chemical	Estimated Excess Cancer Cases per 1000 Workers	Worker Dose Based on PEL ¹ (mg/kg-day)	Lowest Animal Dose ² Producing Tumors (mg/kg-day)	Ratio of Animal Dose to Worker Dose	Animal Dose Adjusted to Human	Ratio of Adjusted Dose to Worker Dose
Bis(2-chloroethyl) ether	940	2	40 ⇨ 88% tumor	20	3	1.5
Methylaziridine	990	0.3	3 ⇨ 81% tumor	10	0.5	1.5
Naphthalene	220	3	6 ⇨ 14% tumor	2	1	0.33
Phenylhydrazine	500	1	13⇨ 53% tumor	13	1	1

1. Assumes worker breathes 10 m³ during the workday, and works 5 d/wk, 50 wk/yr, 40 yr out of a 70 yr lifespan.

2. Lowest non-zero dose in bioassay(s) underlying cancer potency. Control rates: 10%, 0%, 0%, 13%, respectively.

Noncancer Risk Assessment Basics

- No significant adverse health effect expected below specific threshold
 - “No observed adverse effect level”
 - Apply “uncertainty factors” (UFs)
 - Address various issues, including effects on sensitive subpopulations
 - Re-evaluate UFs for workers
 - General population continuously exposed for life
 - Adjust for shorter worker exposure
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Noncancer Example: Benzene

- Noncancer effects
 - Developmental and male reproductive toxicity
 - Blood and nervous system toxicity
 - Cal/OSHA PEL
 - Regulated as an occupational carcinogen
 - PEL does not explicitly account for developmental/reproductive toxicity
 - OEHHA noncancer assessments
 - Inhalation exposure level – various health effects
 - Safe harbor level - developmental toxicity
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Example: Adjusting Noncancer Inhalation Exposure Level for Benzene

- Study population: 303 refinery workers (Tsai *et al.*, 1983)
 - Critical effect: Blood effects
 - NOAEL: 0.53 ppm ← start with worker NOAEL
 - LOAEL factor: 1
 - Subchronic factor: 1
 - Interspecies factor: 1
 - Intraspecies factor: 1, 3 or 10 ← possible worker values
 - Cumulative uncertainty factor: 1, 3 or 10
 - Example health-based occupational air concentrations: 0.05, 0.2, or 0.5 ppm
- For this worker study, no adjustment for exposure needed
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Summary of Example Health-Based Occupational Air Concentrations (C_{occ}) for Benzene

Basis for Example C_{occ}	Example C_{occ} (ppm)
Hematological effects in refinery workers	0.5
	0.2
	0.05
Hematological effects in neonates	0.04
	0.01
1 in 1,000 cancer risk	0.05

Current Cal/OSHA PEL:

1 ppm (includes feasibility)

Current ACGIH TLV:

0.5 ppm

Priorities for Further Evaluation

- Chemicals used in California with potential for worker exposure
 - Real world exposure data needed
 - Level of toxicity
 - For example, estimated excess cancer risk at PEL
 - Existence of safer alternatives
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Some Considerations for Occupational Risk Assessment

- “Acceptable” cancer risk levels for workers
 - Choice of intraspecies uncertainty factor for noncancer assessment
 - Variations in worker populations
 - Procedures for evaluating worker exposure
 - Exposure adjustments – averaging, breathing rate
 - Accounting for dermal exposure
 - Toxicokinetic modeling
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For More Information

- **Full report:**

<http://www.cdph.ca.gov/programs/hesis/Documents/riskreport.pdf>

- **OEHHA web site:**

www.oehha.ca.gov

- **Proposition 65:**

<http://www.oehha.ca.gov/prop65.html>
