Asbestos—worker exposure, family disease

William Ivan Glass, Helen Clayson

ABSTRACT

Family members, mostly female, can be at risk of asbestos-related disease as a result of the transfer of asbestos from the workplace to the home on the hair, boots and clothes of the worker. It is argued that in these cases the home should be recognised as an extension of the workplace and that the employer has a duty of care to contain and control the asbestos. Given these circumstances, the family member with the disease should be entitled to cover under the Accident Compensation Legislation.

Recent newspaper reports of mesothelioma occurring to two women have highlighted a particularly tragic outcome of the asbestos disease epidemic in New Zealand. An epidemic currently generating six or more cases of mesothelioma, lung cancer, asbestosis and pleural disease each week. An epidemic which has yet to plateau.

The unique feature of both these cases was that their mesothelioma was a consequence of exposure to asbestos in the home following transfer of the carcinogenic fibres from the workplace on the hair and clothes of family members who worked with asbestos.

Such ‘secondary’ cases usually occur unexpectedly in old age but not infrequently in middle age and predominantly affect women. A latency of 40 or more years after the initial exposure means that not only is the disease unexpected but often—at least initially—inexplicable both to the patient and to the doctor.

Asbestos disease occurring to family members in this manner was first reported in the medical literature in South Africa in 1960, in the UK, 1965, and later in the US, Italy and Denmark. In New Zealand, the first case was notified to the National Asbestos Disease Register in 1994. This occurred to a 43 year-old woman whose father and older brother were both employed for eight years at an asbestos cement manufacturing company from the time she was seven years old, thus illustrating a latency of 36 years.

As pointed out in the newspaper articles, these types of exposure do not comply with the New Zealand Accident Compensation Corporation law that requires exposure to have resulted from paid employment in New Zealand within the acceptable latency range. The consequence is that there is no entitlement for cover, lump sum payment, weekly compensation or funding for the most effective treatment. This illustrates both employment and gender discrimination affecting women who do unpaid homework.

While the primary focus of this viewpoint is to highlight the circumstances of transfer of a workplace hazard, asbestos, to the home, it does raise other questions such as “where is the workplace?” and “where are its boundaries?”.

If workplace hazards are transferred from work to home on the person (hair, clothes and boots) of the worker, so that the home becomes contaminated and family members suffer, does not that make the home a physical extension of the workplace? If that is the case, it places on the employer a duty of care to control and contain workplace hazards within the workplace, as well as ensuring the worker’s contaminated work clothes are retained and laundered on site.

Asbestos-related disease is of worldwide concern and was first brought to the attention of the medical profession, industry
and government over 100 years ago. Its history is one of scientific conflict, industry denial, government inaction and inadequate recognition and care of the victims. However, the immediate question is one of fairness for family members who contract asbestos-related diseases in the manner described. Is this too much to ask of a ‘no fault’ compensation system?

Competing interests:
Nil.

Acknowledgements:
To Grace Chen, researching the National Asbestos Disease Register.

Author information:
William Ivan Glass, Centre for Public Health Research, Massey University, Wellington, Principle Advisor—Occupational Medicine, Technical Programmes and Support, WorkSafe, New Zealand Government, Wellington; Helen Clayson, General Practitioner, Masterton Medical, Masterton.

Corresponding author:
William Ivan Glass, Centre for Public Health Research, Massey University, Wallace Street, Wellington.

billoffi@xtra.co.nz

URL:

REFERENCES:
2. Cann G. Cancer from husband's washing - Years of exposure to toxic dust on clothes, in The Dominion Post Weekend. 2017, FairFax Media: Wellington.
11. Langhoff MD, Kragh-Thomsen MB, Stanislaus S, Weinreich UM. Almost half of women with malignant mesothelioma were exposed to asbestos at home through their husbands or sons. Dan Med J. 2014; 61(9): A4902.