

INAIL

Razlike med spoloma pri izpostavljenosti rakotvornim snovem na delovnem mestu in incidenca raka med italijanskimi delavci

Vse pravice so pridržane. Gradiva ni dovoljeno razmnoževati in razpošiljati v kakršnikoli obliki brez predhodnega pisnega dovoljenja avtorja in Ministrstva za delo, družino, socialne zadeve in enake možnosti. Citiranje je v skladu z Zakonom o avtorskih in sorodnih pravicah dovoljeno z navedbo podatkov o viru.

Alessandro Marinaccio

Ljubljana, 14. oktober 2019

Kongresni center Brdo



REPUBLIKA SLOVENIJA
MINISTRSTVO ZA DELO, DRUŽINO,
SOCIALNE ZADEVE IN ENAKE MOŽNOSTI



Zdravo delovno okolje

MEDNARODNA KONFERENCA

ŽENSKE IN MOŠKI
NA DELOVNEM MESTU:
VARNOST IN ZDRAVJE
PRI DELU V KONTEKSTU
ENAKIH MOŽNOSTI

Ponedeljek, 14. oktober 2019
Kongresni center Brdo
Dvorana Grandis

Ključne točke

- ✓ Epidemiologija poklicnega raka in razlike med spoloma pri izpostavljenosti in vplivih na zdravje.
- ✓ Italijanske izkušnje z epidemiološkim spremljanjem izpostavljenosti na delovnem mestu in primerov raka.
- ✓ Izpostavljenost azbestu, incidenca mezotelioma in razlike med spoloma v Italiji.
- ✓ Sklepne pripombe v zvezi z javnim zdravjem.

Razlike med spoloma pri izpostavljenosti rakotvornim snovem na delovnem mestu in incidenca raka

Bernardino Ramazzini je leta 1713 opazil, da pri nunah tako rekoč ni bilo primerov raka materničnega vratu, hkrati pa je opazil visoko incidenco raka dojk.

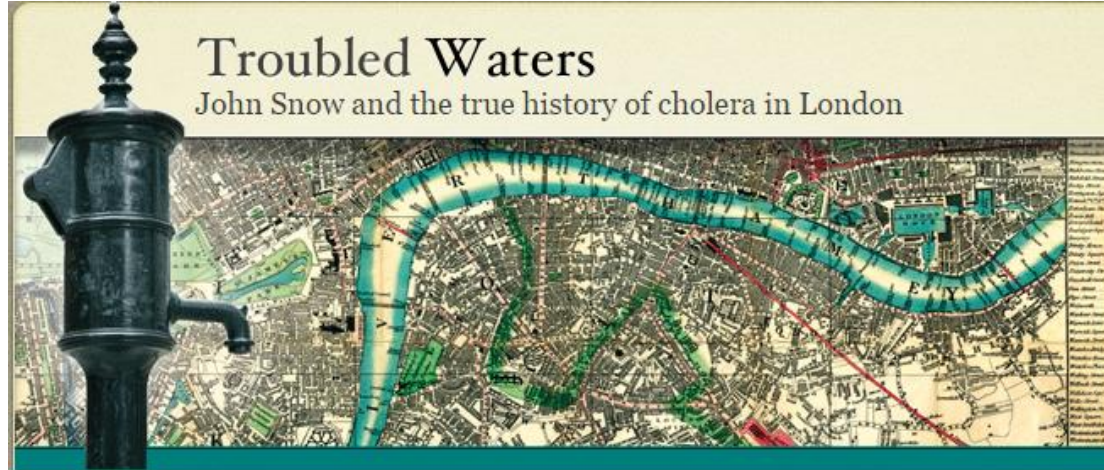
Ta opažanja so pripomogla k odkritju pomena hormonskih dejavnikov pri raku. Njegovo delo je jasen zgodnji primer epidemiološke raziskave razlik med spoloma na področju raziskav poklicnega raka.



Epidemiološko spremljanje vplivov na zdravje za etiološke raziskave

Epidemiološko spremljanje vplivov na zdravje je pomembno orodje za etiološke raziskave in preprečevanje tveganj.

John Snow je leta 1848 z označevanjem primerov kolere na zemljevidu Londona pripomogel k odkritju etiologije kolere.



Epidemiologija razsežnosti poklicnega raka

Globalno breme bolezni 2016

Global Health Metrics

Global, regional, and national comparative risk assessment of 84 behavioural, environmental and occupational, and metabolic risks or clusters of risks, 1990–2016: a systematic analysis for the Global Burden of Disease Study 2016



GBD 2016 Risk Factors Collaborators*

Summary

Background The Global Burden of Diseases, Injuries, and Risk Factors Study 2016 (GBD 2016) provides a comprehensive assessment of risk factor exposure and attributable burden of disease. By providing estimates over a long time series, this study can monitor risk exposure trends critical to health surveillance and inform policy debates on the importance of addressing risks in context.



Lancet 2017; 390: 1345–422

*Collaborators listed at the end of the Article

This online publication has been corrected. The corrected version

Globalna umrljivost zaradi raka in nezmožnosti prilagojena leta življenja (DALYs) za vse starostne skupine in oba spola skupaj (2016).

Rakotvorne snovi na delovnem mestu.
Smrti zaradi raka: 746.540 primerov
DALYs: 20.682.730 let

Sprememba pri številu DALYs 2006–2016:

Moški +18,7 %

Ženske +17,7 %

Epidemiologija razsežnosti poklicnega raka Breme poklicnega raka v Veliki Britaniji



British Journal of Cancer (2012) 107, S3–S7
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www.bjcancer.com

Introduction

Occupational cancer burden in Great Britain

Lesley Rushton^{*1}, Sally J Hutchings¹, Lea Fortunato¹, Charlotte Young², Gareth S Evans², Terry Brown³, Ruth Bevan³, Rebecca Slack⁵, Phillip Holmes³, Sanjeev Bagga³, John W Cherrie⁴ and Martie Van Tongeren⁴

¹Department of Epidemiology and Biostatistics, School of Public Health and MRC-HPA Centre for Environment and Health, Imperial College London, St Mary's Campus, Norfolk Place, London W2 3PG, UK; ²Health and Safety Laboratory, Harpur Hill, Buxton, Derbyshire SK17 9JN, UK; ³Institute of Environment and Health, Cranfield Health, Cranfield University, Cranfield MK43 0AL, UK; ⁴School of Geography, University of Leeds, Leeds LS2 9JT, UK; ⁵Institute of Occupational Medicine, Research Avenue North, Riccarton, Edinburgh EH14 4AP, UK

Skupno število smrti zaradi raka v Veliki Britaniji je bilo 8.010 (5,3 %), od tega je bilo 1.655 primerov žensk, skupno število vpisov v register raka zaradi izpostavljenosti na delovnem mestu pa je bilo 13.598 (4,0 %), od tega je bilo 3.611 primerov žensk.

Ocenjeni delež zaradi izpostavljenosti (%) glede na anatomsko mesto.

	Moški	Ženske
Mehur	7,1	1,9
Dojke		4,6
Pljuča	21,1	5,3
Mezoteliom	97,0	82,5
Nazofarinks	10,8	2,4
Sinonazalen		43,3
19,8		
...		
Skupno		
Na podlagi smrti	8,2	2,3
Na podlagi incidence	5,7	2,1

Epidemiologija poklicnega raka pri ženskah Zajeta delovna mesta in gospodarske dejavnosti.

Delovna mesta v storitvenih dejavnostih se običajno ne štejejo za nevarna, toda na takih delovnih mestih so delavci velikokrat izpostavljeni možnim rakotvornim snovem.

Frizerke/frizerji (povečano tveganje raka mehurja)
(izpostavljenost formaldehidom, topilom in drugim kemikalijam).

Metaanaliza je pokazala povečano tveganje za nastanek multiplega mieloma. raka mehurja. pljuč in grla.

Published by Oxford University Press on behalf of the International Epidemiological Association
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International Journal of Epidemiology 2009;**38**:1512–1531
doi:10.1093/ije/dyp283

Risk of cancer among hairdressers and related workers: a meta-analysis

Bahi Takkouche,^{1,2*} Carlos Regueira-Méndez^{1,2} and Agustín Montes-Martínez^{1,2}



Epidemiologija poklicnega raka pri ženskah Zajeta delovna mesta in gospodarske dejavnosti.

Zaposleni v kemičnih čistilnicah so lahko izpostavljeni tetrakloroetilenu in trikloroetilenu, ki sta verjetno rakotvorna za človeka.

Pri skupini **zaposlenih v kemičnih čistilnicah** (dve tretjini so bile ženske) je bila ugotovljena čezmerna umrljivost zaradi raka mehurja, materničnega vratu, požiralnika, pljuč in trebušne slinavke.

All EHP content is accessible to individuals with disabilities. A fully accessible (Section 508-compliant) HTML version of this article is available at <http://dx.doi.org/10.1289/ehp.1307055>.

Review

Tetrachloroethylene Exposure and Bladder Cancer Risk: A Meta-Analysis of Dry-Cleaning-Worker Studies

Jelle Vlaanderen,¹ Kurt Straif,² Avima Ruder,³ Aaron Blair,⁴ Johnni Hansen,⁵ Elsebeth Lyng,⁶ Barbara Charbotel,⁷ Dana Loomis,² Timo Kauppinen,⁸ Pentti Kyyronen,⁹ Eero Pukkala,^{9,10} Elisabete Weiderpass,^{11,12,13,14} and Neela Guha²



Epidemiologija poklicnega raka pri ženskah Zajeta delovna mesta in gospodarske dejavnosti.

Pri **stewardesah** je večje tveganje za nastanek raka dojke in malignega melanoma.

Tveganje za nastanek raka dojke je lahko povezano z motnjo cirkadianega ritma ali izpostavljenostjo kozmičnemu sevanju.

Težko je nadzorovati zasnovo raziskav za druge dobro poznane dejavnike tveganja za nastanek raka dojke (ženska še ni rodila, starost ob prvem porodu)

Original article

Scand J Work Environ Health. 2016;42(6):538–546. doi:10.5271/sjweh.3586

Breast cancer incidence among female flight attendants: exposure–response analyses

By Lynne E Pinkerton, MD, MPH,¹ Misty J Hein, PhD,² Jeri L Anderson, PhD,¹ Mark P Little, DPhil,³ Alice J Sigurdson, PhD,³ Mary K Schubauer-Berigan, PhD¹



Epidemiologija poklicnega raka pri ženskah Zajeta delovna mesta in gospodarske dejavnosti.

Zdravstvene delavke so lahko izpostavljene antineoplastičnim zdravilom, anestetičnim plinom, etilenu, ionizirajočemu sevanju in elektromagnetnemu polju.

Opaženih je bilo veliko primerov raka, in sicer levkemija, limfomi, rak mehurja, dojk, možganov, jajčnikov, kože in ščitnice.

Pri radioloških tehnologih (75 % žensk v skupinah v ZDA) je bilo povečano tveganje za nastanek raka (rak pljuč, rak dojk, levkemija) zaradi izpostavljenosti ionizirajočemu sevanju med slikanjem bolnikov z rentgenom.

Article

August 2, 1995

Breast Cancer Among Radiologic Technologists

John D. Boice Jr, ScD; Jack S. Mandel, PhD; Michele Morin Doody, MS

» Author Affiliations

JAMA. 1995;274(5):394-401. doi:10.1001/jama.1995.03530050042030

Vir: Boice, JR., *et al.* JAMA. 1995; 274(5):394–401.



Poudarek: Izpostavljenost žensk rakotvornim snovem na delovnem mestu. Italija. Ozadje

Večina epidemioloških raziskav rakotvornih snovi na delovnem mestu se nanaša na moško delovno silo.

Zaposlovanje žensk se je v Italiji v zadnjih 35 letih povečalo za skoraj 50 %.

Po italijanskem pravu morajo delodajalci zbirati podatke o izpostavljenosti delavcev rakotvornim snovem (1A in 1B, ugotovljena ali domnevna izpostavljenost) in jih sporočiti italijanskemu Nacionalnemu inštitutu za zavarovanje za primer nezgode pri delu (INAIL).

INAIL

Scarselli et al. *BMC Public Health* (2018) 18:413
<https://doi.org/10.1186/s12889-018-5332-x>

BMC Public Health

RESEARCH ARTICLE

Open Access



Gender differences in occupational exposure to carcinogens among Italian workers

Alberto Scarselli*, Marisa Corfiati, Davide Di Marzio, Alessandro Marinaccio and Sergio Iavicoli

Abstract

Background: Many carcinogenic chemicals are still used or produced in several economic sectors. The aim of this study is to investigate differences in occupational exposure patterns to carcinogens by gender in Italy.

Methods: Information about the most common carcinogens recorded in the Italian occupational exposures database (SIREP) for the period 1996–2015 was retrieved. Descriptive statistics were calculated for exposure-related variables (carcinogenic agent, occupational group, economic activity sector, and workforce size). The chi-square (χ^2) test was used to verify differences between genders, and logistic regression analysis was performed to evaluate the association between gender and risk of having higher exposure levels, after adjusting for age. Concurrent exposures to multiple carcinogens were investigated using the two-step cluster analysis.

Results: A total of 166,617 exposure measurements were selected for 40 different carcinogens. Exposed workers were only in a small proportion women (9%), and mostly aged 20–44 years (70%) in both genders. Women were more likely to be exposed than men to higher levels for several carcinogens even after correction for age at exposure, and the exposure level was significantly ($p < 0.01$) associated with occupation, economic sector and workforce size. The five main clusters of co-exposures identified in the entire dataset showed a differential distribution across economic sectors between genders.

Conclusions: The exposures to occupational carcinogens have distinguishing characteristics in women, that are explained in part by work and job segregation. Because of the presence of high-exposed groups of female workers in many industrial sectors, further research and prevention efforts are recommended.

Keywords: Gender disparities, Exposure assessment, Occupational health, Surveillance system, Prevention database, Carcinogenic agents

Poudarek: Izpostavljenost žensk rakotvornim snovem na delovnem mestu. Italija. Načini

Podatki iz sistema SIREP (italijanski državni sistem za izpostavljenost rakotvornim snovem na delovnem mestu) za obdobje 1996–2015.

Gospodarske dejavnosti in poklici po klasifikaciji NACE Rev. 1 in ISCO-88.

Model logistične regresije za proučevanje povezave med spolom in izpostavljenostjo (prilagojen po letih).

Ocena sočasne izpostavljenosti z analizo razvrščanja v skupine.

Vir: Scarselli, A., *et al.* BMC Public Health 2018; 18:413.

RESEARCH ARTICLE

Open Access



Gender differences in occupational exposure to carcinogens among Italian workers

Table 2 Gender differences in the risk of having higher occupational exposure levels by exposure-related variables (Continued)

Variable	Description	Total	Males (ref.)	Females	M/F Ratio	OR (95% CI) for medium level ^a	OR (95% CI) for high level ^a
29	Manufacture of machinery and equipment nec	5093	4567	526	8.7	0.15 (0.08 to 0.28) [†]	0.12 (0.05 to 0.30) [†]
34	Manufacture of motor vehicles	1425	1303	122	10.7	0.95 (0.49 to 1.82)	0.27 (0.10 to 0.74) [†]
35	Manufacture of other transport equipment	8536	8198	338	24.3	0.32 (0.23 to 0.44) [†]	0.17 (0.08 to 0.34) [†]
36	Manufacture of furniture; manufacturing nec	38,097	34,069	4028	8.5	0.61 (0.56 to 0.67) [†]	0.83 (0.75 to 0.92) [†]
45	Construction	13,720	13,685	35	391.0	2.68 (1.18 to 6.13) [†]	2.95 (1.02 to 8.57) [†]
50	Repair of motor vehicles; retail sale of fuel	2828	2608	220	11.9	1.01 (0.48 to 2.10)	0.45 (0.24 to 0.85) [†]
51	Wholesale trade and commission trade	1673	1591	82	19.4	0.10 (0.01 to 0.72) [†]	0.86 (0.42 to 1.76)
52	Retail trade, repair of household goods	2435	2325	110	21.1	0.86 (0.49 to 1.54)	5.03 (2.70 to 9.35) [†]
74	Other business activities	1620	1534	86	17.8	0.27 (0.11 to 0.68) [†]	0.24 (0.06 to 0.98) [†]
90	Sewage and refuse disposal, sanitation	4707	4609	98	47.0	0.08 (0.01 to 0.57) [†]	–
	Overall	166,617	151,524	15,093	10.0	0.96 (0.92 to 1.01)	1.20 (1.13 to 1.27) [†]

^aLow level is the reference group; [†]Significant at $p = 0.05$ level; OR: Odds ratio; 95% CI: 95% confidence interval; ^bonly main sectors are showed; nec: not elsewhere classified; Elementary occupations consist of simple and routine tasks which mainly require the use of hand-held tools

Poudarek: Izpostavljenost žensk rakotvornim snovem na delovnem mestu. Italija. Ugotovitve

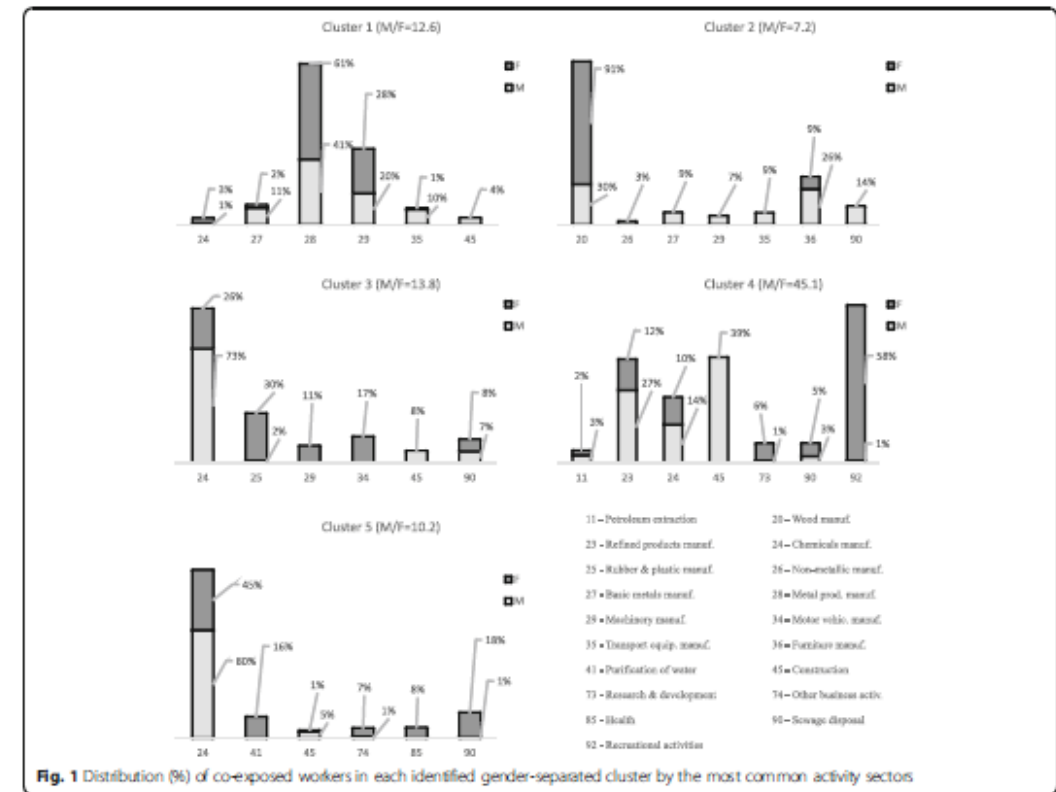
Pri ženskah je bilo ugotovljeno pomembno število meritev izpostavljenosti (15.093, 10 %).

Opazno je očitno spolno razlikovanje glede na poklic (poročilo za EU iz leta 2007).

Pri ženskah je tveganje za izpostavljenost večje (OR = 1,20; IC95% = 1,13–1,27) ob upoštevanju vseh rakotvornih snovi skupaj.



Gender differences in occupational exposure to carcinogens among Italian workers



Poudarek: Izpostavljenost žensk rakotvornim snovem na delovnem mestu. Italija. Opombe

Sočasna izpostavljenost delavk formaldehidom in lesnemu prahu na delovnem mestu je pereče vprašanje (majhna podjetja).

Sočasna izpostavljenost šestvalentnemu kromu in niklju v proizvodnji kovinskih izdelkov, metalurgiji in proizvodnji transportne opreme.

V dejavnostih iger na srečo in stav so ženske izpostavljene tobačnemu dimu iz okolja (ETS).



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Poudarek 2: Razlike med spoloma pri izpostavljenosti azbestu in primeri mezotelioma v Italiji

Svetovna poraba azbesta in posebne italijanske okoliščine.

Italijanski sistem za spremljanje mezotelioma: državni register (ReNaM).

Izpostavljenost žensk azbestu na delovnem mestu in v okolju.

Epidemiološki dokazi, preprečevanje tveganja in povezave s sistemom zavarovanja.

ORIGINAL ARTICLE

The epidemiology of malignant mesothelioma in women: gender differences and modalities of asbestos exposure

Alessandro Marinaccio,¹ Marisa Corfiati,¹ Alessandra Binazzi,¹ Davide Di Marzio,¹ Alberto Scarselli,¹ Pierpaolo Ferrante,¹ Michela Bonafede,¹ Marina Verardo,² Dario Mirabelli,³ Valerio Gennaro,⁴ Carolina Mensi,⁵ Gert Schalleberg,⁶ Guido Mazzoleni,⁷ Enzo Merler,⁸ Paolo Girardi,⁸ Corrado Negro,⁹ Flavia D'Agostin,⁹ Antonio Romanelli,¹⁰ Elisabetta Chellini,¹¹ Stefano Silvestri,¹² Cristiana Pascucci,¹³ Roberto Calisti,¹³ Fabrizio Stracci,¹⁴ Elisa Romeo,¹⁵ Valeria Ascoli,¹⁶ Luana Trafficante,¹⁷ Francesco Carrozza,¹⁸ Italo Francesco Angelillo,¹⁹ Domenica Cavone,²⁰ Gabriella Cauzillo,²¹ Federico Tallarigo,²² Rosario Tumino,²³ Massimo Melis,²⁴ Sergio Iavicoli,¹ ReNaM Working Group

ABSTRACT

Introduction The epidemiology of gender differences for mesothelioma incidence has been rarely discussed in national case lists. In Italy an epidemiological surveillance system (ReNaM) is working by the means of a national register.

Methods Incident malignant mesothelioma (MM) cases in the period 1993 to 2012 were retrieved from ReNaM. Gender ratio by age class, period of diagnosis, diagnostic certainty, morphology and modalities of asbestos exposure has been analysed using exact tests for proportion. Economic activity sectors, jobs and territorial distribution of mesothelioma cases in women have been described and discussed. To perform international comparative analyses, the gender ratio of mesothelioma deaths was calculated by country from the WHO database and the correlation with the mortality rates estimated.

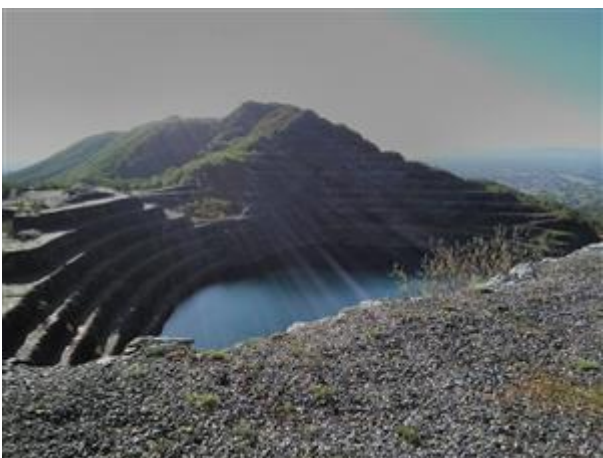
What this paper adds

- ▶ Malignant mesothelioma is a rare tumour prevalently due to occupational and environmental exposure to asbestos and the attributable fraction to known sources of asbestos exposure in women is generally much lower than in men;
- ▶ In Italy a permanent surveillance system for mesothelioma incidence (ReNaM) is active with 21 463 collected cases in the period between 1993 and 2012 and 16 458 (76.7%) of them investigated for exposure;
- ▶ In ReNaM, gender ratio (F/M) is 0.38 and 0.70 (0.14 and 0.30 in the occupational exposed subjects subgroup) for pleural and peritoneal forms respectively;
- ▶ Italy presents a larger presence of women

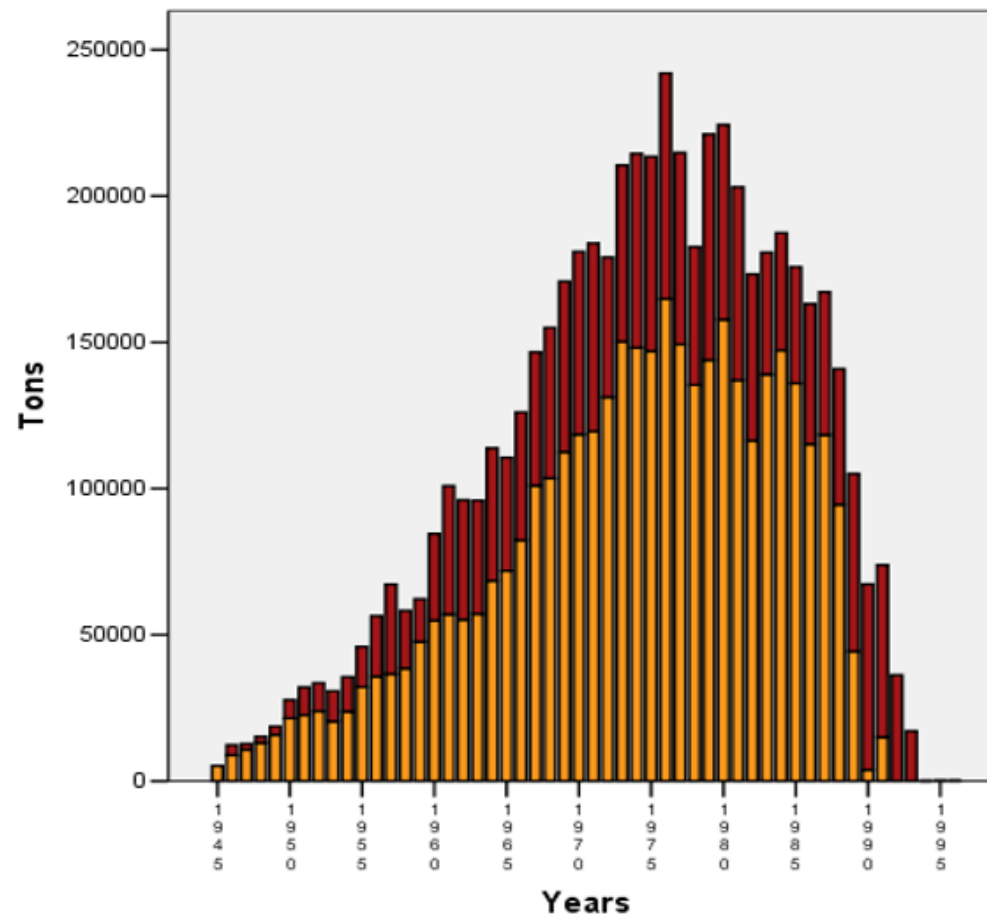
Kumulativna poraba azbesta in italijanske okolice



V Italiji je bilo do leta 1990 dejavno največje izkopavališče azbesta v zahodni Evropi (Balangero, Torino). Tovarna azbestnega cementa Casale Monferrato je delovala do leta 1986.



Od leta 1945 do leta 1992 (leto prepovedi) se je proizvedlo 3.748.550 ton surovega azbesta (na grafu rumeno), uvozilo pa 1.900.885 ton azbesta (rdeče).

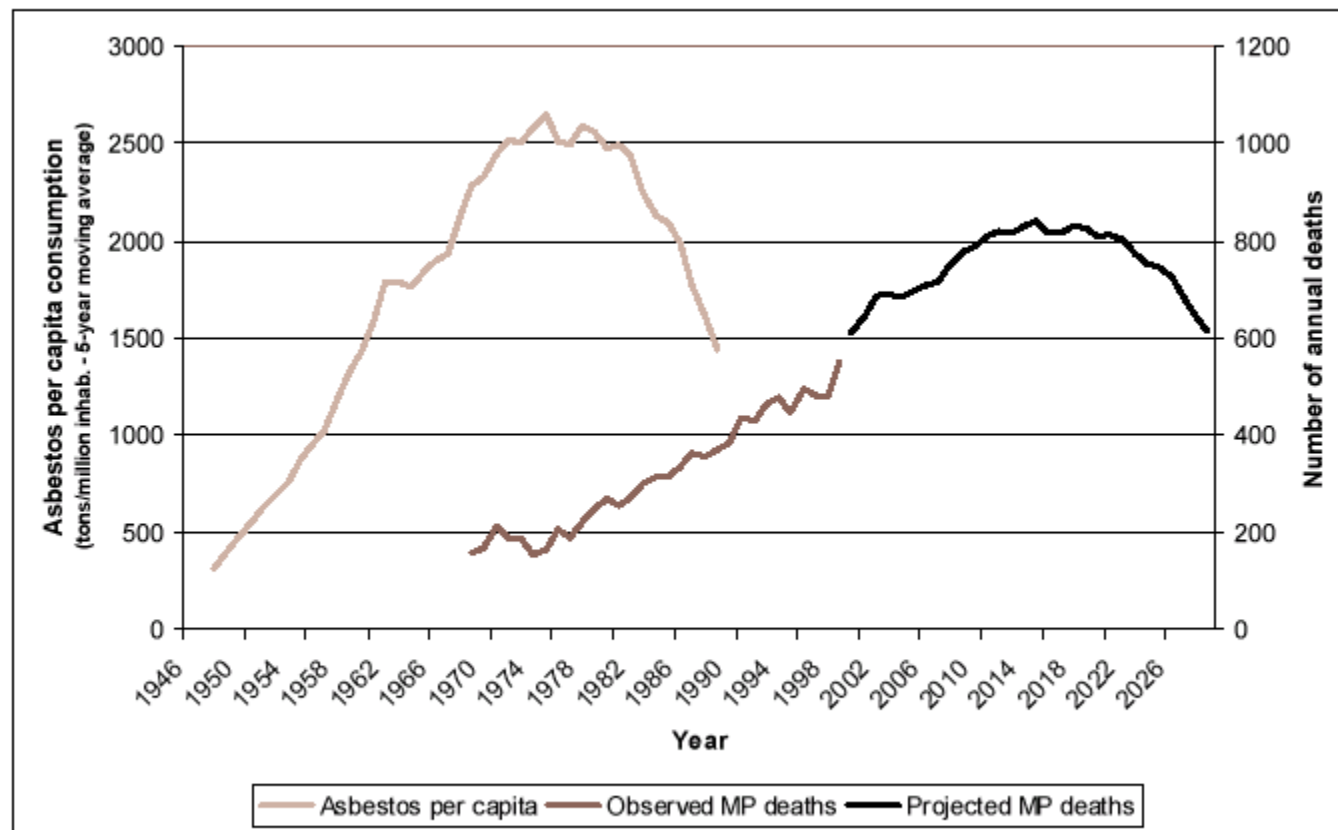


Italijanski državni register mezotelioma (ReNaM). Napoved

ReNaM je na podlagi modela starost-obdobje-skupina in gibanja porabe azbesta v preteklosti (pojasnjevalna spremenljivka) predvidel, da bo epidemična krivulja malignega mezotelioma v Italiji dosegla vrh v letih 2015–2020.

Nedavni podatki o umrljivosti in incidenci to napoved potrjujejo.

Figure 2. Italian raw asbestos per capita consumption (five-year moving average - tons per 1,000,000 inhabitants), observed (1969-1999) and predicted (2000-2029) pleural mesothelioma deaths¹ (MP) among men aged 25-89 years old in Italy.



¹ Pleural mesothelioma deaths = pleural cancer deaths * 0.73.

Italijanski državni register mezotelioma (ReNaM)

Struktura, cilji, postopki

Ključne besede ReNaM:

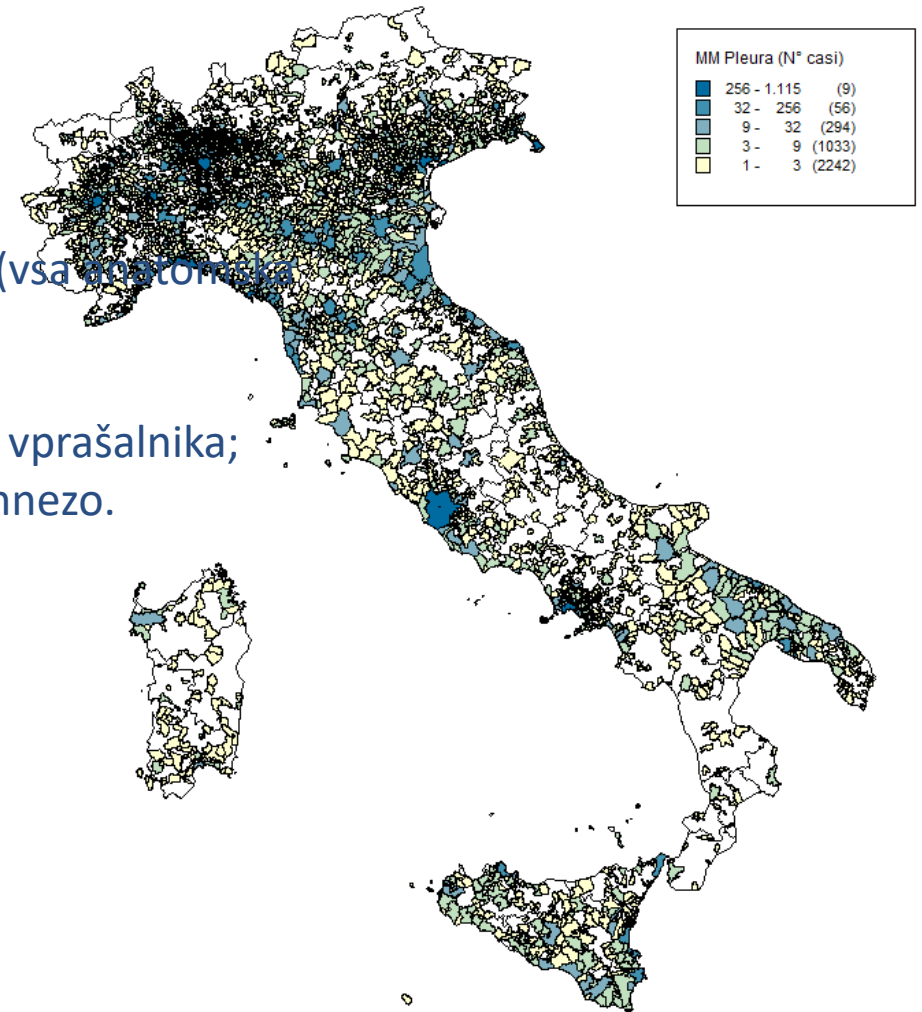
- ✓ državna mreža z regionalno strukturo;
- ✓ dejavno iskanje primerov pojavnosti malignega mezotelioma (vsa anatomska mesta);
- ✓ posebni sistem kodiranja diagnoz;
- ✓ individualna anamnestična analiza na podlagi strukturiranega vprašalnika;
- ✓ okoljske, družinske in pristočasne dejavnosti, vključno z anamnezo.

Regionalni operativni centri (COR) v vsaki italijanski regiji:

- ✓ dejavno iskanje primerov malignega mezotelioma;
- ✓ preverjanje in kodiranje diagnoz;
- ✓ razgovori s prizadetimi ljudmi (ali skrbniki);
- ✓ opredelitev izpostavljenosti azbestu.

ReNaM:

- ✓ Analize državnih podatkov;
- ✓ raziskovalni projekti;
- ✓ podpiranje COR in poenotenje postopkov (smernice).

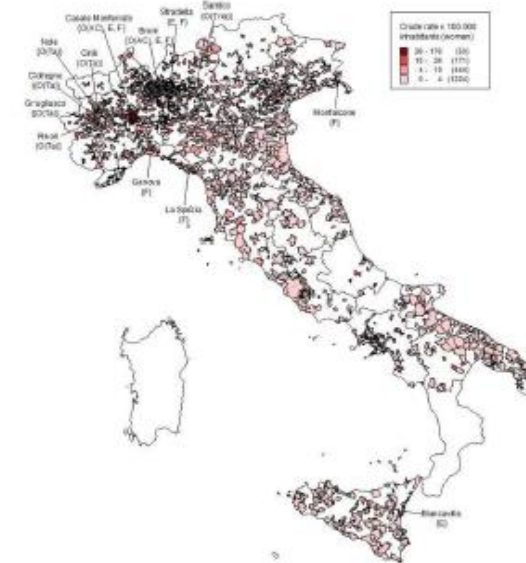
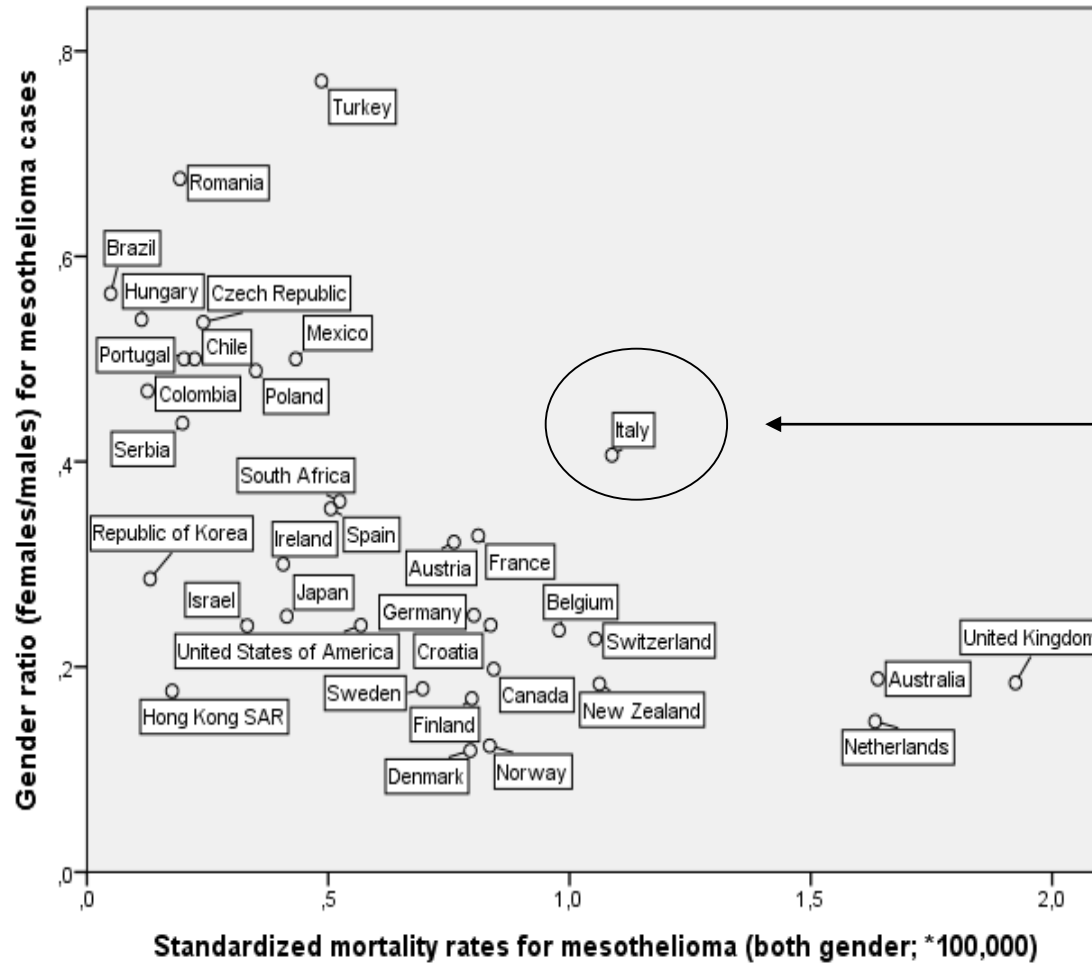


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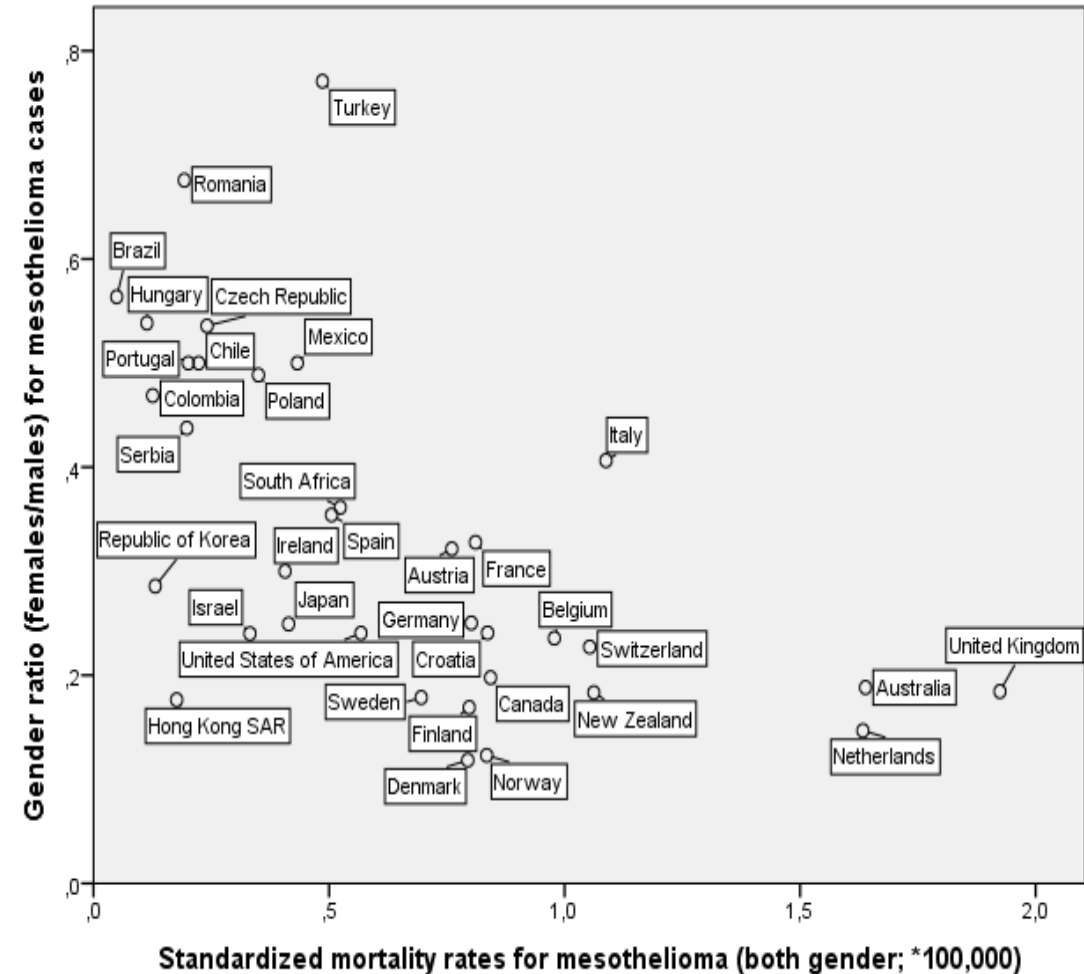


Poudarek 2: Razlike med spoloma pri izpostavljenosti azbestu in primeri mezotelioma v Italiji

Število primerov mezotelioma pri ženskah (Ž/M = 0,38 pri primerih plevralnega mezotelioma in 0,70 pri primerih peritonealnega mezotelioma) v Italiji je pomembno.

Vzroki visoke incidence mezotelioma pri ženskah:

- i) z vidika zgodovine veliko žensk zaposlenih v tekstilni industriji;
- ii) pomen izpostavljenosti azbestu v družini in okolju.



Poudarek 2: Razlike med spoloma pri izpostavljenosti azbestu in primeri mezotelioma v Italiji

Epidemiološko spremljanje primerov mezotelioma v Italiji je pokazalo, da je azbest prisoten v tekstilni (neazbestni) industriji, v kateri prevladuje ženska delovna sila.

Tekstilna (neazbestna) industrija:
prisotnost azbesta v zavornih sistemih



Poudarek 2: Razlike med spoloma pri izpostavljenosti azbestu in primeri mezotelioma v Italiji

Epidemiološko spremljanje primerov mezotelioma v Italiji (in drugje) je pokazalo, da pri ženskah obstaja tveganje za nastanek mezotelioma zaradi skupnega bivanja z ljudmi, ki so izpostavljeni azbestu (njihovi možje).



WOMEN AND MESOTHELIOMA



53.3 Years

Average length of time between asbestos exposure and mesothelioma diagnosis in women.



13.4%

Percent of women who survive five years after treatment for pleural mesothelioma.



19.2%

Of mesothelioma deaths from 1999 to 2005 were female.



"Women are most often the victims of secondary exposure to asbestos."

American Medical Women's Association

Source: The Annals of Thoracic Surgery and World Health Organization

Asbestos.com
Thought to you by The Mesothelioma Center

Epidemiološko spremljanje poklicnega raka. Opombe

Spremljanje incidence poklicnega raka (in izpostavljenosti) je pomembno za raziskave, načrtovanje ukrepov preprečevanja tveganj in učinkovitost sistema zavarovanja.

Michael Marmot
"Ni podatkov, ni težav.
Ni težav, ni ukrepanja."



Ozaveščanje o tveganjih

Zagotavljanje podatkov za analitične študije

Podpiranje politik preprečevanja tveganja zaradi izpostavljenosti

Izboljšanje učinkovitosti sistema zavarovanja

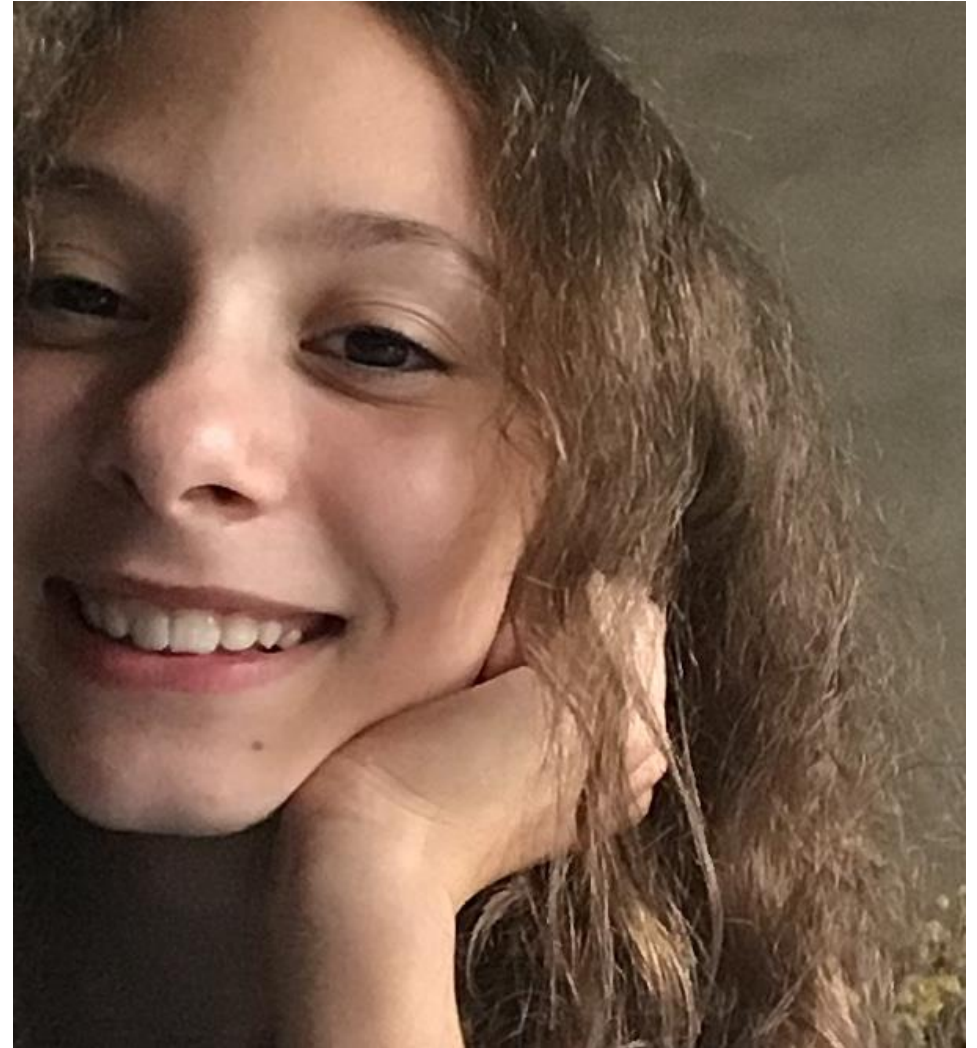
Preverjanje učinkovitosti sanacije in obvladovanja tveganj

Epidemiološko spremljanje poklicnega raka pri ženskah. Opombe

Raziskave o poklicnem raku pri ženskah so pokazale povečano tveganje na delovnih mestih v nekaterih dejavnostih (kmetijstvo, zdravstvo, proizvodnja).

Pri delovno aktivnem prebivalstvu sta izpostavljenost žensk rakotvornim snovem na delovnem mestu in tveganje za nastanek raka pri ženskah razlog za resno zaskrbljenost.

Poklicni rak pri ženskah je mogoče v veliki meri preprečiti, zato moramo temu vprašanju nameniti pozornost, saj gre za prihodnost naših otrok.



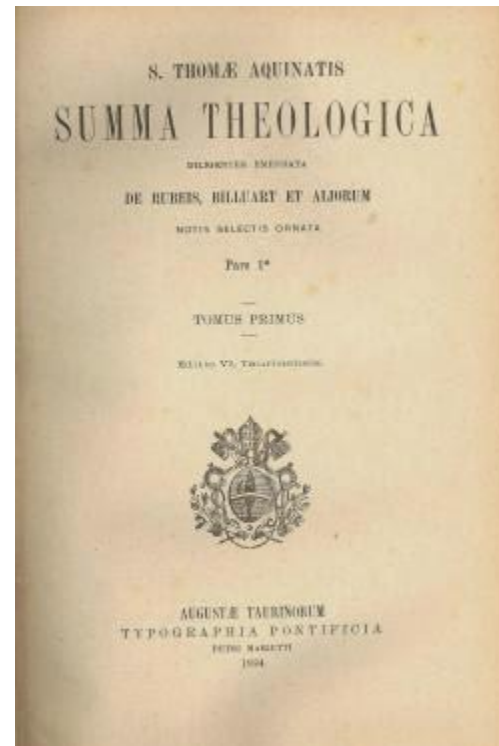


"Nihil volitum, quin cognitum."

Summa theologica scholastica

Hvala za pozornost.

Alessandro Marinaccio
a.marinaccio@inail.it



REPUBLICA SLOVENIJA
MINISTRSTVO ZA DELO, DRUŽINO,
SOCIALNE ZADEVE IN ENAKE MOŽNOSTI

Zdravo delovno okolje

MEDNARODNA KONFERENCA
ŽENSKE IN MOŠKI
NA DELOVNEM MESTU:
VARNOST IN ZDRAVJE
PRI DELU V KONTEKSTU
ENAKIH MOŽNOSTI

Ponedeljek, 14. oktober 2019
Kongresni center Brdo
Dvorana Grandis