



Occupational Diseases in the EU

The system(s) and their role

'TOGETHER FOR DISEASE-FREE WORKERS'

MCE (Management Centre Europe) Conference Centre, Brussels
Tuesday/Wednesday, 3rd & 4th December 2013



International
Labour
Organization

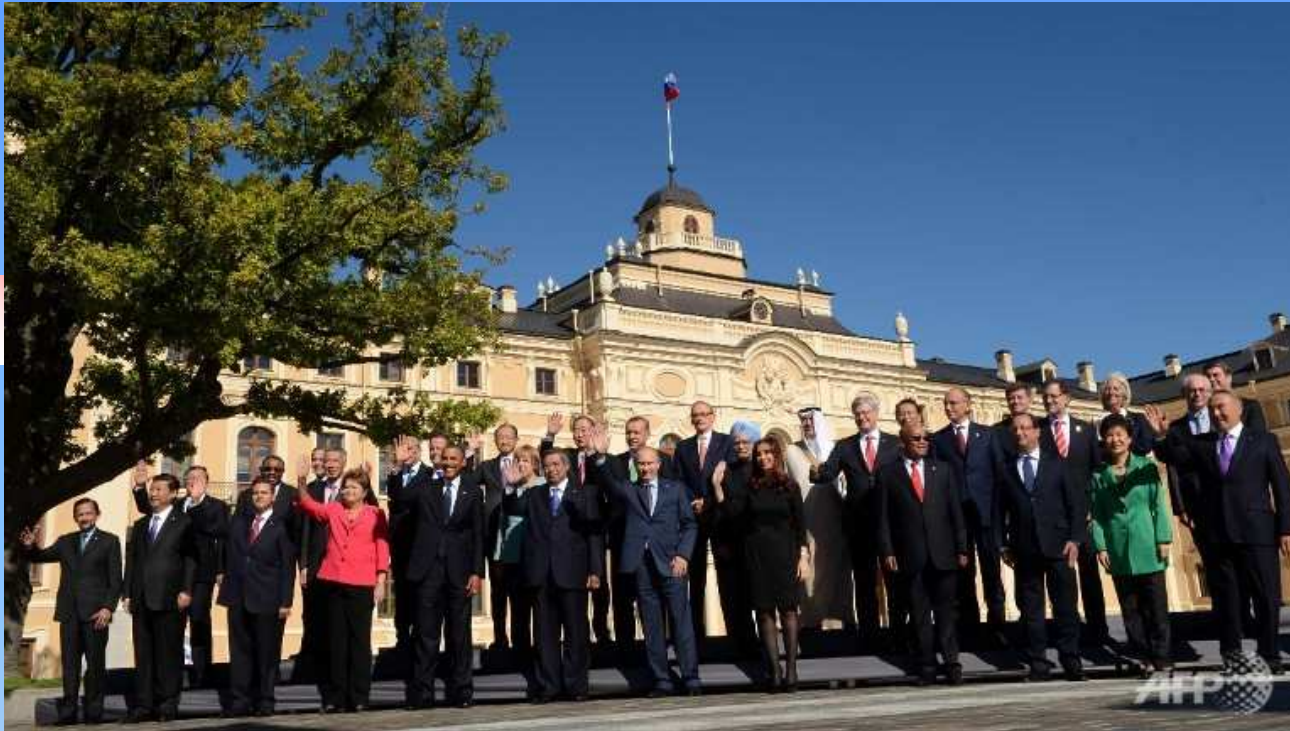


The ILO Activities on Occupational Diseases

Dr. Shengli Niu

Coordinator and Senior Specialist on Occupational Health
Labour Administration, Labour Inspection and Occupational
Safety and Health Branch
International Labour Office
Geneva, Switzerland





G20 LEADERS' DECLARATION

September, 2013

- **34.....In addition, given the recurring loss to human life and assets across the world on account of unsafe working places, we direct the Task Force to partner with ILO in consultation with countries, and to consider how the G20 might contribute to safer workplaces.....**



Occupational injuries and diseases

- 335,000 deaths
- 250 million accidents
- 160 million occupational diseases
- 4% of world's gross national product is lost

Source: Kofi A. Annan. Occupational health and safety: a high priority on the global, international and national agenda. Asian-Pacific Newslett on OSH 1997;4:59





Fatal accidents and diseases

- 4.4 It is thus estimated that 2.34 million people died from work-related accidents or diseases in 2008, of which 2.02 million were caused by various types of disease and 321,000 from work-related accidents. This equates to an average of more than 6,300 work-related deaths every day. Table 1 below compares current estimates with those of previous years.

Table 1.

Estimated numbers and incidence rates of fatal work-related accidents and diseases: global trends³¹

Year	Numbers of fatal accidents	Fatal accident incidence rates*	Numbers of fatal diseases	Total numbers of fatal accidents and diseases
1998	345,000	16.4	-	-
2001	351,000	15.2	2.03 million	2.38 million
2003	358,000	13.8	1.95 million	2.31 million
2008	321,000	10.7	2.02 million	2.34 million

*Accident incidence rates are the numbers of accidents per 100,000 workers

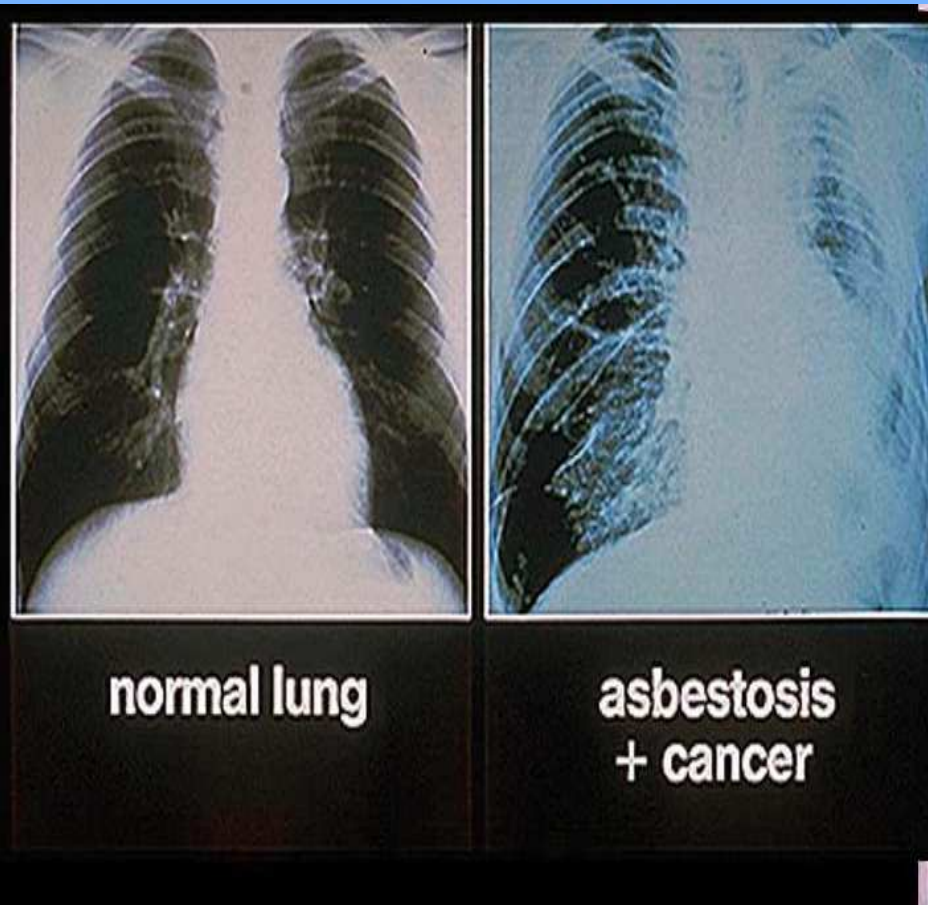


Occupational diseases





Pneumoconiosis





Occupational Diseases

- Diseases caused by work have to be discovered and their victims be properly treated and compensated
- Preventive and protective measures must be taken at the workplace
- Definition of occupational diseases is usually set out in legislation



International Labour Organization



- ✓ Standard-setting is one of the ILO's major means of action to improve conditions of life and work worldwide
- ✓ ILO's standards are Conventions and Recommendation adopted by the international Labour Conference



Historical Development in Identification of Occupational Diseases

In 1919

- R.3 Anthrax Prevention
- R.4 Lead Poisoning (Women and children)



Skin reaction to anthrax



Wrist drop in adult with lead poisoning and renal failure.



A skin lesion caused by anthrax



History and Development

In 1925 - C. 18 Workmen's Compensation (occupational diseases)

1. Poisoning by **lead**, its alloys or compounds and their sequelae
2. Poisoning by **mercury**, its amalgams and compounds and their sequelae and
3. **Anthrax** infection

***Date of entry into force: 01 Apr 1927
68 ratifications and 8 denouncements***

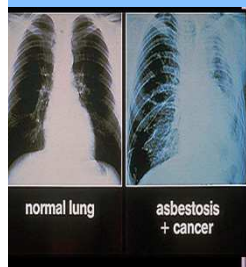


The crippled hand of a Minamata disease victim



History and Development

In 1934 - C. 42 Revised C.18



1. Lead poisoning
2. Mercury poisoning
3. Anthrax
4. Silicosis
5. Phosphorus poisoning
6. Arsenic poisoning
7. Poisoning by benzene
8. Poisoning by the halogen derivatives of hydrocarbons of the aliphatic series
9. Diseases due to radiation, and
10. Skin cancer (primary epitheliomatous cancer of the skin)

Date of entry into force: 17 Jun 1936
53 ratifications and 12 denunciations

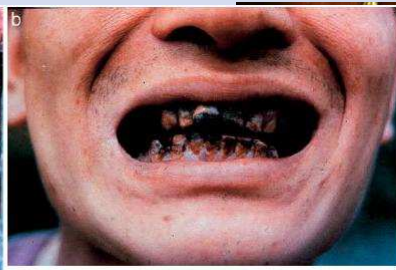


Figure 1. (a) Hyperkeratosis caused by exposure to arsenic mobilized by burning mineralized coals in a residential environment. (b) Dental fluorosis caused by exposure to arsenic mobilized by burning mineralized coals in a residential environment.



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C120 Hygiene (Commerce and Offices)
Convention, 1964

C121 Employment Injury Benefits
Convention, 1964

C122 Employment Policy Convention,
1964

C123 Minimum Age (Underground
Work) Convention, 1965

C124 Medical Examination of Young
Persons (Underground Work)
Convention, 1965

C125 Fishermen's Competency
Certificates Convention, 1966

C126 Accommodation of Crews
(Fishermen) Convention, 1966

C127 Maximum Weight Convention,
1967

C128 Invalidity, Old-Age and Survivors'
Benefits Convention, 1967

C129 Labour Inspection (Agriculture)
Convention, 1969

C130 Medical Care and Sickness

C121 Employment Injury Benefits Convention, 1964

Convention concerning Benefits in the Case of Employment Injury (Note: Date of coming into force: 28/07/1967.)

Convention: C121

Place: Geneva

Session of the Conference: 48

Date of adoption: 08/07/1964

Subject classification: Employment Injury Benefit

Subject: Social Security

[See the ratifications for this Convention](#)

Display the document in: [French](#) [Spanish](#)

Status: Up-to-date instrument

The General Conference of the International Labour Organisation,

Having been convened at Geneva by the Governing Body of the International Labour Office, and having met in its Forty-eighth Session on 17 June 1964, and

Having decided upon the adoption of certain proposals with regard to benefits in the case of industrial accidents and occupational diseases, which is the fifth item on the agenda of the session, and

Having determined that these proposals shall take the form of an international Convention,

adopts this eighth day of July of the year one thousand nine hundred and sixty-four the following Convention, which may be cited as the Employment Injury Benefits Convention, 1964:

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R120 Hygiene (Commerce and Offices) Recommendation, 1964

R121 Employment Injury Benefits Recommendation, 1964

R122 Employment Policy Recommendation, 1964

R123 Employment (Women with Family Responsibilities) Recommendation, 1965

R124 Minimum Age (Underground Work) Recommendation, 1965

R125 Conditions of Employment of Young Persons (Underground Work) ... 1965

R126 Vocational Training (Fishermen) Recommendation, 1966

R127 Co-operatives (Developing Countries) Recommendation, 1966

R128 Maximum Weight Recommendation, 1967

R129 Communications within the Undertaking Recommendation, 1967

R130 Examination of Grievances Recommendation, 1967

R131 Invalidity, Old-Age and Survivors' Benefits Recommendation, 1967

R121 Employment Injury Benefits Recommendation, 1964

Recommendation concerning Benefits in the Case of Employment Injury
Recommendation: R121
Place: Geneva
Session of the Conference: 48
Date of adoption: 08/07/1964
Subject classification: Employment Injury Benefit
Subject: **Social Security**
Display the document in: [French](#) [Spanish](#)
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Having decided upon the adoption of certain proposals with regard to benefits in the case of industrial accidents and occupational diseases, which is the fifth item on the agenda of the session, and

Having determined that these proposals shall take the form of a Recommendation supplementing the Employment Injury Benefits Convention, 1964,

adopts this eighth day of July of the year one thousand nine hundred and sixty-four, the following Recommendation, which may be cited as the Employment Injury Benefits Recommendation, 1964:

1. In this Recommendation--

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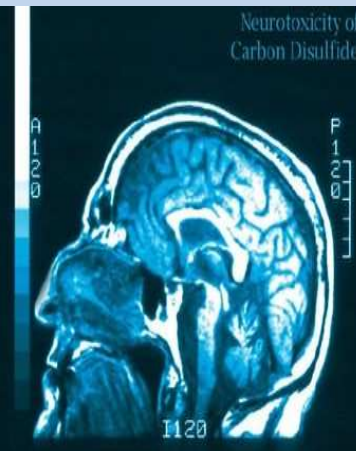
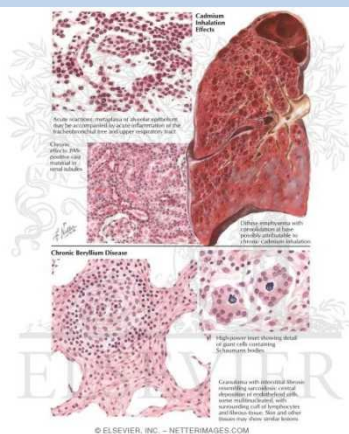
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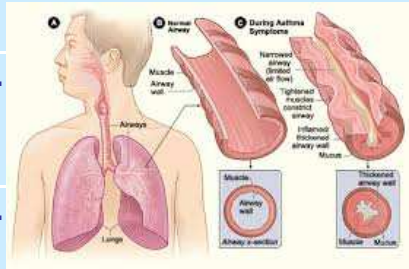
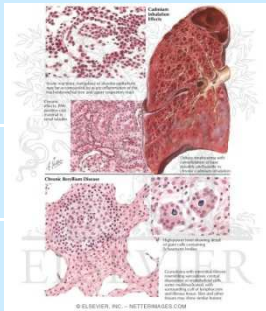
History and development

Schedule I. List of Occupational Diseases

- **1964:** 15 diseases
(five new diseases: beryllium, chrome, manganese, carbon bisulphide, nitro- and amido-toxic derivatives of benzene & its homologues)



Schedule I. List Of Occupational Diseases, 1980

<i>Occupational diseases</i>	Work involving exposure to risk
1. Pneumoconiosis caused by sclerogenic mineral dust (silicosis, anthraco-silicosis, asbestosis) and silico-tuberculosis, provided that silicosis is an essential factor in causing the resultant incapacity or death.	All work involving exposure to the risk concerned.
2. Bronchopulmonary diseases caused by hard- metal dust.	 
3. Bronchopulmonary diseases caused by cotton dust (byssinosis), or flax, hemp or sisal dust.	
4. Occupational asthma caused by sensitising agents or irritants both recognised in this regard and inherent in the work process.	
5. Extrinsic allergic alveolitis and its sequelae, caused by the inhalation of organic dusts, as prescribed by national legislation.	
6. Diseases caused by beryllium or its toxic compounds.	
7. Diseases caused by cadmium or its toxic compounds.	
8. Diseases caused by phosphorus or its toxic compounds.	
9. Diseases caused by chromium or its toxic compounds.	
10. Diseases caused by manganese or its toxic compounds.	

11. Diseases caused by arsenic or its toxic compounds.

12. Diseases caused by mercury or its toxic compounds.

13. Diseases caused by lead or its toxic compounds.

14. Diseases caused by fluorine or its toxic compounds.

15. Diseases caused by carbon disulfide.

16. Diseases caused by the toxic halogen derivatives of aliphatic or aromatic hydrocarbon.

17. Diseases caused by benzene or its toxic homologues

18. Diseases caused by toxic nitro- and amino-derivatives of benzene or its homologues.

19. Diseases caused by nitroglycerine or other nitric acid esters.

20. Diseases caused by alcohols, glycols, or ketones.

21. Diseases caused by asphyxiants, carbon monoxide, hydrogen cyanide or its toxic derivatives, hydrogen sulfide

22. Hearing impairment caused by noise

23. Diseases caused by vibration (disorders of muscles, tendons, bones, joints, peripheral blood vessels or peripheral nerves)



24. Diseases caused by work in compressed air.



25. Diseases caused by ionising radiations.

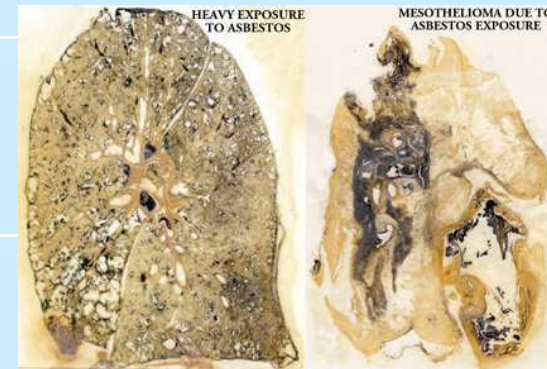
All work involving exposure to the action of ionising radiations

26. Skin diseases caused by physical, chemical or biological agents not included under other items.

All work involving exposure to the risk concerned

27. Primary epitheliomatous cancer of the skin caused by tar, pitch, bitumen, mineral oil, anthracene, or the compounds, products or residues of these substances.

28. Lung cancer or mesotheliomas, caused by asbestos.



29. Infectious or parasitic diseases contracted in an occupation where there is a particular risk of contamination.



- (a) Health or laboratory work**
- (b) Veterinary work**
- (c) Work handling animals, animal carcasses, parts of such carcasses, or merchandise which may have been contaminated by animals, animal carcasses or parts of such carcasses.**
- (d) Other work carrying a particular risk of contamination**

***In the application of this schedule the degree and type of exposure should be taken into account when appropriate**

(Source: ILOLEX - 15. 10. 2013)

Employment Injury Benefits Convention, 1964 (No. 121)

Ratified: 24

Conditional ratification: 0

Declared applicable: 0

Denounced: 0

Country	Ratification date	Status
Belgium	22:04:1970	ratified
Bolivia	31:01:1977	ratified
Bosnia and Herzegovina	02:06:1993	ratified
Chile	30:09:1999	ratified
Democratic Republic of the Congo	05:09:1967	ratified
Croatia	08:10:1991	ratified
Cyprus	28:07:1966	ratified
Ecuador	05:04:1978	ratified
Finland	23:09:1968	ratified
Germany	01:03:1972	ratified
Guinea	11:08:1967	ratified
Ireland	09:06:1969	ratified
Japan	07:06:1974	ratified
AraLibyan b Jamahiriya	19:06:1975	ratified
Luxembourg	24:07:1972	ratified
The former Yugoslav Republic of Macedonia	17:11:1991	ratified
Montenegro	03:06:2006	ratified
Netherlands	02:08:1966	ratified
Senegal	25:04:1966	ratified
Serbia	24:11:2000	ratified
Slovenia	29:05:1992	ratified
Sweden	17:06:1969	ratified
Uruguay	28:06:1973	ratified
Bolivarian Republic of Venezuela	10:08:1982	ratified

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Definition of Occupational Diseases



Definition of occupational diseases

Paragraph 6(1) of Recommendation No. 121 defines occupational diseases as follows:

“Each Member should, under prescribed conditions, regard diseases known to arise out of the exposure to substances and dangerous conditions in process, trades or occupations as occupational diseases”

Definition of Occupational Diseases



Definition of occupational diseases

The Protocol of 2002 to the Occupational Safety and Health Convention, 1981 (No.155) specifies :

“occupational diseases as any disease contracted as a result of an exposure to risk factors arising from work activities. ”



Two Main Elements in the Definitions

- The exposure-effect relationship between a specific working environment and/or activity and a specific disease effect
- The fact that these diseases occur among the group of persons concerned with a frequency above the average morbidity of the rest of the population



Employment Injury Benefits Convention, 1964 (No.121)

(Article 8) Each Member shall

- (a) prescribe a **list of diseases**, comprising at least the diseases enumerated in Schedule I to this Convention, which shall be regarded as occupational diseases under prescribed conditions; or
- (b) include in its legislation a **general definition** of occupational diseases broad enough to cover at least the diseases enumerated in Schedule I to this Convention; or
- (c) prescribe a list of diseases in conformity with clause (a), complemented by a **general definition of occupational diseases** or by other provisions for establishing the occupational origin of diseases not so listed or manifesting themselves under conditions different from those prescribed



The Role & Impact of the ILO List

- Promotion of the inclusion of a range of internationally acknowledged occupational diseases in national lists.
- Harmonization of the development of policy on occupational diseases and in promoting their prevention.
- Serving as an example for countries establishing or revising their national lists.



The Role & Impact of the ILO List

- Adding to the list would imply the extension of preventive measures to control the use of harmful substances and would assist a better health surveillance of workers
- This effect can be expected both in countries that have ratified the Conventions and those that have not



Need to Regularly Update the List

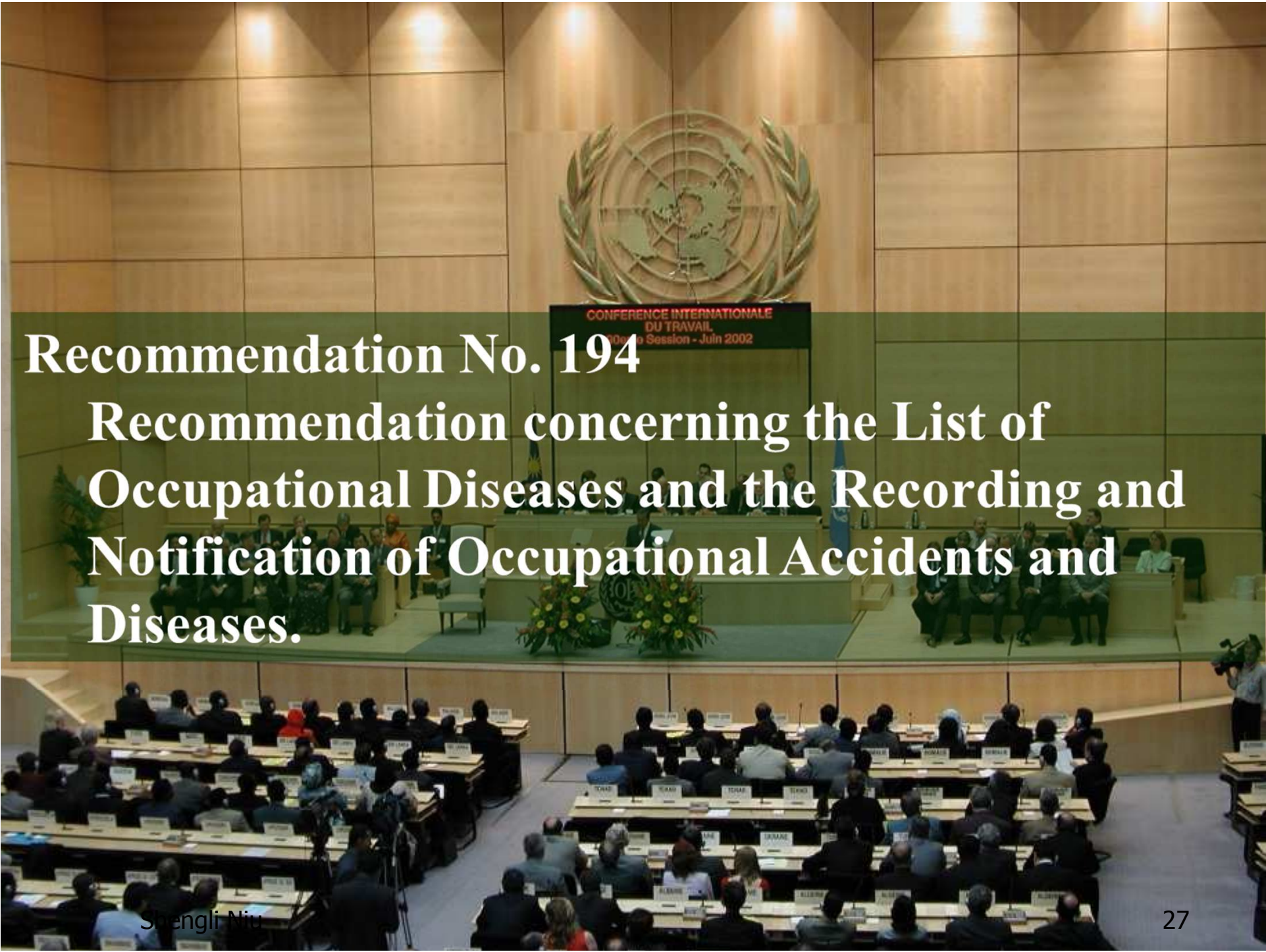
- New risk factors
- Diagnostic technology
- Increased recognition at the national and international levels

90th Session of the International Labour Conference, June 2002, Geneva



Committee on Occupational Safety and Health





Recommendation No. 194

Recommendation concerning the List of Occupational Diseases and the Recording and Notification of Occupational Accidents and Diseases.

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R189 Recommendation, 199/ Job Creation in Small and Medium-Sized Enterprises Recommendation, 1998 R190 Worst Forms of Child Labour Convention Recommendation, 1999 R191 Maternity Protection Recommendation, 2000 R192 Safety and Health in Agriculture Recommendation, 2001 R193 Promotion of Cooperatives Recommendation, 2002 R194 List of Occupational Diseases Recommendation, 2002 R195 Human Resources Development Recommendation, 2004	2. <u>A national list of occupational diseases for the purposes of prevention, recording, notification and, if applicable, compensation should be established by the competent authority, in consultation with the most representative organizations of employers and workers, by methods appropriate to national conditions and practice, and by stages as necessary. This list should:</u> (a) <u>for the purposes of prevention, recording, notification and compensation comprise, at the least, the diseases enumerated in Schedule I of the Employment Injury Benefits Convention, 1964, as amended in 1980;</u> (b) <u>comprise, to the extent possible, other diseases contained in the list of occupational diseases as annexed to this Recommendation; and</u> (c) <u>comprise, to the extent possible, a section entitled "Suspected occupational diseases".</u> 3. The list as annexed to this Recommendation should be regularly reviewed and updated through tripartite meetings of experts convened by the Governing Body of the International Labour Office. Any new list so established shall be submitted to the Governing Body for its approval
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[R109](#) Enterprises
Recommendation,
1998

[R190](#) Worst Forms of Child
Labour Convention
Recommendation,
1999

[R191](#) Maternity Protection
Recommendation,
2000

[R192](#) Safety and Health in
Agriculture
Recommendation,
2001

[R193](#) Promotion of
Cooperatives
Recommendation,
2002

[R194](#) List of Occupational
Diseases
Recommendation,
2002

(b) comprise, to the extent possible, other diseases contained in the list of occupational diseases as annexed to this Recommendation; and

(c) comprise, to the extent possible, a section entitled "Suspected occupational diseases".

3. The list as annexed to this Recommendation should be regularly reviewed and updated through tripartite meetings of experts convened by the Governing Body of the International Labour Office. Any new list so established shall be submitted to the Governing Body for its approval, and upon approval shall replace the preceding list and shall be communicated to the Members of the International Labour Organization.

4. The national list of occupational diseases should be reviewed and updated with due regard to the most up-to-date list established in accordance with Paragraph 3 above.

5. Each Member should communicate its national list of

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Annex

List of occupational diseases

- Diseases caused by agents
 - Diseases caused by chemical agents
 - Diseases caused by beryllium or its toxic compounds
 - Diseases caused by cadmium or its toxic compounds
 - Diseases caused by phosphorus or its toxic compounds
 - Diseases caused by chromium or its toxic compounds
 - Diseases caused by manganese or its toxic compounds
 - Diseases caused by arsenic or its toxic compounds
 - Diseases caused by mercury or its toxic compounds
 - Diseases caused by lead or its toxic compounds
 - Diseases caused by fluorine or its toxic compounds
 - Diseases caused by carbon disulphide
 - Diseases caused by the toxic halogen derivatives of aliphatic or aromatic hydrocarbons
 - Diseases caused by benzene or its toxic homologues
 - Diseases caused by toxic nitro- and amino-derivatives of benzene or its homologues
 - Diseases caused by nitroglycerine or other nitric acid esters
 - Diseases caused by alcohols, glycols or ketones
 - Diseases caused by asphyxiants: carbon monoxide, hydrogen cyanide or its toxic derivatives, hydrogen sulphide
 - Diseases caused by acrylonitrile
 - Diseases caused by oxides of nitrogen
 - Diseases caused by vanadium or its toxic compounds
 - Diseases caused by antimony or its toxic compounds
 - Diseases caused by hexane
 - Diseases of teeth caused by mineral acids
 - Diseases caused by pharmaceutical agents
 - Diseases caused by thallium or its compounds
 - Diseases caused by osmium or its compounds
 - Diseases caused by selenium or its compounds
 - Diseases caused by copper or its compounds
 - Diseases caused by tin or its compounds

Attachments

Comments

Annexe

Liste des maladies professionnelles

- Maladies causées par des agents
 - Maladies causées par des agents chimiques
 - Maladies causées par le béryllium ou ses composés toxiques
 - Maladies causées par le cadmium ou ses composés toxiques
 - Maladies causées par le phosphore ou ses composés toxiques
 - Maladies causées par le chrome ou ses composés toxiques
 - Maladies causées par le manganèse ou ses composés toxiques
 - Maladies causées par l'arsenic ou ses composés toxiques
 - Maladies causées par le mercure ou ses composés toxiques
 - Maladies causées par le plomb ou ses composés toxiques
 - Maladies causées par le fluor ou ses composés toxiques
 - Maladies causées par le sulfure de carbone
 - Maladies causées par les dérivés halogénés toxiques des hydrocarbures aliphatiques ou aromatiques
 - Maladies causées par le benzène ou ses homologues toxiques
 - Maladies causées par les dérivés nitrés et aminés toxiques du benzène ou de ses homologues
 - Maladies causées par la nitroglycérine ou d'autres esters de l'acide nitrique
 - Maladies causées par les alcools, les glycols ou les cétones
 - Maladies causées par les substances asphyxiantes: monoxyde de carbone, acide cyanhydrique ou ses dérivés toxiques, hydrogène sulfuré
 - Maladies causées par l'acrylonitrile
 - Maladies causées par les oxydes d'azote
 - Maladies causées par le vanadium ou ses composés toxiques
 - Maladies causées par l'antimoine ou ses composés toxiques
 - Maladies causées par l'hexane
 - Maladies des dents causées par les acides minéraux
 - Maladies causées par des agents pharmaceutiques
 - Maladies causées par le thallium ou ses composés
 - Maladies causées par l'osmium ou ses composés
 - Maladies causées par le sélénium ou ses composés
 - Maladies causées par le cuivre ou ses composés
 - Maladies causées par l'étain ou ses composés

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6 of 14



Important Features of the List in 2002

A new format has been proposed, breaking down the list into the four following categories:

1. Diseases caused by agents (chemical, physical, biological)
2. Diseases of target organ systems (respiratory, skin, musculoskeletal)
3. Occupational cancer
4. Other diseases



Preparation for Updating the List of Occupational Diseases

1. Evaluation of the international scientific development in identification of occupational diseases
2. Analysis of national and other lists of occupational diseases
3. Amendments to the List of Occupational Diseases at the 2002 ILC
4. Comments from Member States



Technical Considerations

- The proposed list was **not** intended to **include all known occupational diseases**
- Diseases to be included in the list were considered **common to a number of countries or populations**
- **Rare disorders** (or less frequent and very specific to a small target group) were considered to be more **appropriate to be dealt with at a local level**

Meeting of Experts on the Revision of the List of Occupational Diseases (Recommendation No. 194)

27-30 Oct.2009, Geneva





International
Labour
Organization

ILO List of Occupational Diseases

(revised 2010)



ANNEX

List of occupational diseases ¹ (revised 2010)

1. **Occupational diseases caused by exposure to agents arising from work activities**
 - 1.1. **Diseases caused by chemical agents**
 - 1.1.1. Diseases caused by beryllium or its compounds
 - 1.1.2. Diseases caused by cadmium or its compounds
 - 1.1.3. Diseases caused by phosphorus or its compounds
 - 1.1.4. Diseases caused by chromium or its compounds
 - 1.1.5. Diseases caused by manganese or its compounds
 - 1.1.6. Diseases caused by arsenic or its compounds
 - 1.1.7. Diseases caused by mercury or its compounds
 - 1.1.8. Diseases caused by lead or its compounds
 - 1.1.9. Diseases caused by fluorine or its compounds
 - 1.1.10. Diseases caused by carbon disulfide
 - 1.1.11. Diseases caused by halogen derivatives of aliphatic or aromatic hydrocarbons
 - 1.1.12. Diseases caused by benzene or its homologues
 - 1.1.13. Diseases caused by nitro- and amino-derivatives of benzene or its homologues
 - 1.1.14. Diseases caused by nitroglycerine or other nitric acid esters
 - 1.1.15. Diseases caused by alcohols, glycols or ketones
 - 1.1.16. Diseases caused by asphyxiants like carbon monoxide, hydrogen sulfide, hydrogen cyanide or its derivatives
 - 1.1.17. Diseases caused by acrylonitrile
 - 1.1.18. Diseases caused by oxides of nitrogen
 - 1.1.19. Diseases caused by vanadium or its compounds
 - 1.1.20. Diseases caused by antimony or its compounds
 - 1.1.21. Diseases caused by hexane
 - 1.1.22. Diseases caused by mineral acids
 - 1.1.23. Diseases caused by pharmaceutical agents
 - 1.1.24. Diseases caused by nickel or its compounds
 - 1.1.25. Diseases caused by thallium or its compounds
 - 1.1.26. Diseases caused by osmium or its compounds
 - 1.1.27. Diseases caused by selenium or its compounds
 - 1.1.28. Diseases caused by copper or its compounds
 - 1.1.29. Diseases caused by platinum or its compounds
 - 1.1.30. Diseases caused by tin or its compounds
 - 1.1.31. Diseases caused by zinc or its compounds
 - 1.1.32. Diseases caused by phosgene
 - 1.1.33. Diseases caused by corneal irritants like benzoquinone
 - 1.1.34. Diseases caused by ammonia
 - 1.1.35. Diseases caused by isocyanates
 - 1.1.36. Diseases caused by pesticides

¹ In the application of this list the degree and type of exposure and the work or occupation involving a particular risk of exposure should be taken into account when appropriate.

- 1.1.37. Diseases caused by sulphur oxides
- 1.1.38. Diseases caused by organic solvents
- 1.1.39. Diseases caused by latex or latex-containing products
- 1.1.40. Diseases caused by chlorine
- 1.1.41. Diseases caused by other chemical agents at work not mentioned in the preceding item where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to these chemical agents arising from work activities and the disease(s) contracted by the worker

1.2. Diseases caused by physical agents

- 1.2.1. Hearing impairment caused by noise
- 1.2.2. Diseases caused by vibration (disorders of muscles, tendons, bones, joints, peripheral blood vessels or peripheral nerves)
- 1.2.3. Diseases caused by compressed or decompressed air
- 1.2.4. Diseases caused by ionizing radiations
- 1.2.5. Diseases caused by optical (ultraviolet, visible light, infrared) radiations including laser
- 1.2.6. Diseases caused by exposure to extreme temperatures
- 1.2.7. Diseases caused by other physical agents at work not mentioned in the preceding item where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to these physical agents arising from work activities and the disease(s) contracted by the worker

1.3. Biological agents and infectious or parasitic diseases

- 1.3.1. Brucellosis
- 1.3.2. Hepatitis viruses
- 1.3.3. Human immunodeficiency virus (HIV)
- 1.3.4. Tetanus
- 1.3.5. Tuberculosis
- 1.3.6. Toxic or inflammatory syndromes associated with bacterial or fungal contaminants
- 1.3.7. Anthrax
- 1.3.8. Leptospirosis
- 1.3.9. Diseases caused by other biological agents at work not mentioned in the preceding item where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to these biological agents arising from work activities and the disease(s) contracted by the worker

2. Occupational diseases by target organ systems

2.1. Respiratory diseases

- 2.1.1. Pneumoconioses caused by fibrogenic mineral dust (silicosis, anthraco-silicosis, asbestosis)
- 2.1.2. Silicotuberculosis
- 2.1.3. Pneumoconioses caused by non-fibrogenic mineral dust
- 2.1.4. Siderosis
- 2.1.5. Bronchopulmonary diseases caused by hard-metal dust
- 2.1.6. Bronchopulmonary diseases caused by dust of cotton (byssinosis), flax, hemp, sisal or sugarcane (bagassosis)

- 2.1.7. Asthma caused by recognized sensitizing agents or irritants inherent to the work process
- 2.1.8. Extrinsic allergic alveolitis caused by the inhalation of organic dusts or microbially contaminated aerosols, arising from work activities
- 2.1.9. Chronic obstructive pulmonary diseases caused by inhalation of coal dust, dust from stone quarries, wood dust, dust from cereals and agricultural work, dust in animal stables, dust from textiles, and paper dust, arising from work activities
- 2.1.10. Diseases of the lung caused by aluminium
- 2.1.11. Upper airways disorders caused by recognized sensitizing agents or irritants inherent to the work process
- 2.1.12. Other respiratory diseases not mentioned in the preceding items where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the disease(s) contracted by the worker

2.2. Skin diseases

- 2.2.1. Allergic contact dermatoses and contact urticaria caused by other recognized allergy-provoking agents arising from work activities not included in other items
- 2.2.2. Irritant contact dermatoses caused by other recognized irritant agents arising from work activities not included in other items
- 2.2.3. Vitiligo caused by other recognized agents arising from work activities not included in other items
- 2.2.4. Other skin diseases caused by physical, chemical or biological agents at work not included under other items where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the skin disease(s) contracted by the worker

2.3. Musculoskeletal disorders

- 2.3.1. Radial styloid tenosynovitis due to repetitive movements, forceful exertions and extreme postures of the wrist
- 2.3.2. Chronic tenosynovitis of hand and wrist due to repetitive movements, forceful exertions and extreme postures of the wrist
- 2.3.3. Olecranon bursitis due to prolonged pressure of the elbow region
- 2.3.4. Prepatellar bursitis due to prolonged stay in kneeling position
- 2.3.5. Epicondylitis due to repetitive forceful work
- 2.3.6. Meniscus lesions following extended periods of work in a kneeling or squatting position
- 2.3.7. Carpal tunnel syndrome due to extended periods of repetitive forceful work, work involving vibration, extreme postures of the wrist, or a combination of the three
- 2.3.8. Other musculoskeletal disorders not mentioned in the preceding items where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the musculoskeletal disorder(s) contracted by the worker

2.4. Mental and behavioural disorders

- 2.4.1. Post-traumatic stress disorder
- 2.4.2. Other mental or behavioural disorders not mentioned in the preceding item where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to risk factors arising from work activities and the mental and behavioural disorder(s) contracted by the worker



3. Occupational cancer

3.1. Cancer caused by the following agents

- 3.1.1. Asbestos
- 3.1.2. Benzidine and its salts
- 3.1.3. Bis-chloromethyl ether (BCME)
- 3.1.4. Chromium VI compounds
- 3.1.5. Coal tars, coal tar pitches or soots
- 3.1.6. Beta-naphthylamine
- 3.1.7. Vinyl chloride
- 3.1.8. Benzene
- 3.1.9. Toxic nitro- and amino-derivatives of benzene or its homologues
- 3.1.10. Ionizing radiations
- 3.1.11. Tar, pitch, bitumen, mineral oil, anthracene, or the compounds, products or residues of these substances
- 3.1.12. Coke oven emissions
- 3.1.13. Nickel compounds
- 3.1.14. Wood dust
- 3.1.15. Arsenic and its compounds
- 3.1.16. Beryllium and its compounds
- 3.1.17. Cadmium and its compounds
- 3.1.18. Erionite
- 3.1.19. Ethylene oxide
- 3.1.20. Hepatitis B virus (HBV) and hepatitis C virus (HCV)
- 3.1.21. Cancers caused by other agents at work not mentioned in the preceding items where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure to these agents arising from work activities and the cancer(s) contracted by the worker

4. Other diseases

- 4.1. Miners' nystagmus
- 4.2. Other specific diseases caused by occupations or processes not mentioned in this list where a direct link is established scientifically, or determined by methods appropriate to national conditions and practice, between the exposure arising from work activities and the disease(s) contracted by the worker

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Meetings of Experts on the List of Occupational Diseases

Type	Resource list
Date issued	13 January 2011
Unit responsible	Programme on Safety and Health at Work and the Environment (SAFEWORK)
Subjects	occupational safety and health, occupational diseases

Meeting of Experts on the Revision of the List of Occupational Diseases

Governing Body, 307th Session, 11-26 March 2010, Geneva

- [Report of the Committee on Sectoral and Technical Meetings and Related Issues](#) - [GB.307/13(Rev.) - pdf 261 KB]
- [Effect to be given to the recommendations of sectoral and technical meetings - Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\)](#) - [GB.307/STM/2/4 - pdf 147 KB]

(Recommendation No. 194) – 27-30 October 2009, Geneva

- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - List of Occupational Diseases adopted by the Meeting](#) - [pdf 373 KB] (MERLOD/2009/DR)
- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - Agenda](#) - [pdf 15 KB] (MERLOD/2009/1)
- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - Proposed programme of work](#) - [pdf 120 KB] (MERLOD/2009/2)
- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - List of occupational diseases proposed by the Office](#) - [pdf 136 KB] (MERLOD/2009/3)
- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - Identification and recognition of occupational diseases: Criteria for incorporating diseases in the ILO list of occupational diseases](#) - [pdf 235 KB] (MERLOD/2009/4)
- [Meeting of Experts on the Revision of the List of Occupational Diseases \(Recommendation No. 194\) \(Geneva, 27-30 October 2009\) - Technical backgrounder on the problematic diseases in the proposed list to replace the list annexed to the List of Occupational Diseases Recommendation, 2002 \(No. 194\)](#) - [pdf 479 KB] (MERLOD/2009/5)

Meeting of Experts on updating the List of Occupational Diseases

13-20 December 2005, Geneva

Key resources

- [R194 List of Occupational Diseases Recommendation, 2002](#)

Related information

Document

- [Occupational Health](#)

News item

- [ILO Governing Body approves new list of occupational diseases](#)

http://www.ilo.org/global/publications/ilo-bookstore/order-online/books/WCMS_150323/lang--en/index.htm

LIST OF OCCUPATIONAL DISEASES (revised 2010)



International
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Identification and recognition
of occupational diseases:
Criteria for incorporating diseases
in the ILO list of occupational diseases

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INTERNATIONAL LABOUR OFFICE

Governing Body

317th Session, Geneva, 6–28 March 2013

Policy Development Section
Employment and Social Protection Segment



GB.317/POL/3

POL

Date: 30 January 2013
Original: English

THIRD ITEM ON THE AGENDA

Prevention of occupational diseases

Purpose of the document

This paper examines the scale and dynamic nature of occupational diseases and the challenges associated with their prevention. Based on the experiences and lessons learned in the recognition and prevention of occupational diseases, it describes the Office strategy and invites the Governing Body to provide guidance on how to enhance the effectiveness of action to prevent occupational diseases (see the draft decision in paragraph 42).

Relevant strategic objective: Enhance the coverage and effectiveness of social protection for all (Outcome 6: Workers and enterprises benefit from improved safety and health conditions at work).

Policy implications: None.

Legal implications: None.

Financial implications: None.

Follow-up action required: Based on the Governing Body's guidance, the Office should work closely with constituents and other international players for better prevention of occupational diseases.

Author unit: Programme on Safety and Health at Work and the Environment (SafeWork).

Related documents: GB.307/13(Rev.).

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THE PREVENTION OF OCCUPATIONAL DISEASES

2 million
workers
killed
every
year

World Day for safety
and health at work
28 April 2013



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