

**RESOLUTION**  
**of the international scientific conference**  
**"Chrysotile Asbestos: Risk Assessment and Management"**

Kiev, Ukraine

21-22 November 2012

The conference was held in accordance with recommendations of the V Conference of the Parties to the Rotterdam Convention on the Prior Informed Consent Procedure for Certain Hazardous Chemicals and Pesticides in International Trade (19-25 June 2011, Geneva).

**The objective of the Conference** was to exchange information about medico-biological studies including the health risk assessment for general population and workers exposed to chrysotile asbestos and chrysotile-containing materials and products, and to develop evidence-based recommendations on the issue of chrysotile asbestos to be considered by the VI Conference of the Parties to the Rotterdam Convention.

**The Conference** was attended by participants from 19 countries: Azerbaijan, Belarus, Brazil, Vietnam, Zimbabwe, Kazakhstan, Canada, China, Kyrgyzstan, Mexico, Moldova, India, Poland, Russia, the USA, Serbia, Switzerland, Thailand, and Ukraine, as well as by observers of IARC and the Rotterdam Convention Secretariat who did not participate in discussion of this Resolution.

Twenty nine reports were presented and discussed during the conference on the following topics:

- epidemiology of asbestos-related diseases;
- a comparative assessment of health risks from exposure to various types of asbestos;
- assessment of levels of occupational and environmental exposures to different types of asbestos;
- diagnosis of asbestos-related diseases, establishing the cause-effect relationship between the asbestos exposure and the disease; and
- modern approaches to managing possible risks from exposure to asbestos and its substitutes (the experience of several countries).~

**The participants of the Conference note the following:**

There exists a long experience in studying health effects of various types of asbestos. The obtained results and especially their interpretation affect the design of making approaches to public policy- from a total ban on all its types in some countries to the controlled use of chrysotile.

There is no exact risk assessment for various types of asbestos on the manufacturing process, the type of asbestos-containing material, and the exposure level. There is some data on the contribution of various types of asbestos in the asbestos-related disease incidence and mortality rates among the exposed individuals, but historical uses which varied among countries have not been sufficiently taken into account.

Up to now, some aspects of the biological effects of chrysotile remain to be studied: they include the molecular and cellular mechanisms of developing fibrosis and lung cancer related to chrysotile and the importance of physical and chemical properties of chrysotile fibers for their biopersistence in the lung. As well, further epidemiologic studies of health of workers and the population exposed to chrysotile are needed, with special attention paid to levels of exposure.

**In the light of data presented in the conference participants of the conference are of the opinion that under the current circumstances (the lack of research especially of epidemiologic studies of different risk groups; the ongoing debate on chrysotile asbestos as a carcinogenic risk factor; the lack of pertinent studies on the risk associated with currently mandated exposure levels, the insufficient evidence on safety of the proposed asbestos substitutes), the issue of including (or not including) chrysotile in Annex 3 to the Rotterdam Convention is premature.**

**The participants of the Conference consider that:**

1. Policy for the elimination of asbestos-related diseases should be based on realistic risk assessment, taking into account present conditions and the spirit of the ILO Convention 162.
2. The decision-making concerning the use of natural and man-made fibrous materials shall be based on the results of hygienic, ecological, clinical, and epidemiologic studies of their safety for human health and the environment during their production, use and waste disposal, including the scientific risk assessment and taking into account for approaches applied to nanomaterials.
3. It is expedient to establish a group of WHO experts for a systematic analysis of accumulated research data on safety of natural and man-made fibrous materials and development of substantiated recommendations for subsequent consideration of the problem by the Chemical Review Committee of the Rotterdam Convention.