

## UNITED STATES DEPARTMENT OF LABOR

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## MINE SAFETY AND HEALTH ADMINISTRATION

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## PUBLIC HEARING

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## PROPOSED RULE ON ASBESTOS EXPOSURE LIMIT

+ + + + +

THURSDAY  
OCTOBER 20, 2005

+ + + + +

The above-entitled matter convened at 9:00 a.m. in the 25<sup>th</sup> Floor conference room at 1100 Wilson Boulevard, Arlington, Virginia, Rebecca Smith, Acting Director, Office of Standards, Regulations and Variances, presiding.

## PRESENT:

REBECCA SMITH	Acting Director, Office of Standards
ALFRED D. DUCHARME	Solicitor's Office
CHRIS FINDLAY	Metal and Non-Metal Organization
CHERIE A. HUTCHISON	Office of Standards
PHUC PHAN	Office of Standards
MICHELLE SCHAPER	Educational Policy and Development
MARK WESOLOWSKI	Chief, Instrumentation and Analysis Branch

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**P R O C E E D I N G S**

Time: 9:03 a.m.

MS. SMITH: Good morning. My name is Rebecca Smith. I am the Acting Director of the Office of Standards, Regulations and Variances for the Mine Safety and Health Administration, and on behalf of David Dye, who is the Acting Assistant Secretary for MSHA, I would like to welcome all of you to this public hearing this morning.

This public hearing concerns the lowering of the permissible exposure limit for asbestos.

I would also like to introduce others with me this morning who have worked on this proposed rule.

On my right is Cherie Hutchison. Cherie is the Chairman of the Asbestos Rulemaking Committee for MSHA. She is an industrial hygienist, and she is with the MSHA Office of Standards.

Al Ducharme, on her right, is an attorney for the Solicitor's Office for the Department of Labor.

Mark Wesolowski is with our Technical Support Unit. He is the Chief of the Instrumentation and Analysis Branch and our Dust Division of our Pittsburgh Technical Support Center.

On my left, Chris Findlay. Chris is with

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1 our Metal and Non-Metal Organization of MSHA. He is  
2 an industrial hygienist.

3 Michelle Schaper: Dr. Schaper is a  
4 toxicologist, and she is with the Educational Policy  
5 and Development part of MSHA.

6 Phan Phuc is our economist from the Office  
7 of Standards with MSHA.

8 I think we have a couple of other MSHA  
9 folks also in the audience.

10 This is the second of two public hearings  
11 that we are holding on this asbestos proposed rule.  
12 The first, the other hearing, was held on this past  
13 Tuesday in Denver, Colorado.

14 We announced these public hearings in our  
15 Notice of Proposed Rulemaking that we published in the  
16 *Federal Register* on July 29, 2005. The purpose of  
17 these hearings is to obtain public comment on this  
18 proposed asbestos rule.

19 We have copies of the proposed rule, I  
20 believe, out front, if you would care to pick up a  
21 copy.

22 Before we hear testimony from the public  
23 on this proposed rule's lower permissible exposure  
24 limit for asbestos, I would like to give you some  
25 background on this issue. I will give you a brief

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1 overview of our historical enforcement actions at the  
2 Libby, Montana, vermiculite mine and our rulemaking  
3 activities concerning asbestos.

4 MSHA's predecessor agency, the Mining  
5 Enforcement and Safety Administration or MESA within  
6 the Department of Interior, monitored and enforced  
7 health and safety standards at mining operations,  
8 including the W.R. Grace vermiculite mine at Libby,  
9 Montana, from 1969 to 1977. At that time, the  
10 exposure limit for asbestos was 5 fibers per cubic  
11 centimeter of air.

12 During that time, sampling data showed  
13 high asbestos exposures among miners at the  
14 vermiculite mine in Libby, with the highest exposures  
15 occurring in the mill.

16 To reduce exposures, the mine installed or  
17 improved a number of engineering controls, such as  
18 exhaust ventilation and automatic bagging machines,  
19 and in 1974 the mine closed its old dry mill and began  
20 using its newly built wet mill to process and  
21 concentrate vermiculite, and occupational exposures  
22 dropped markedly.

23 All eight-hour, time-weighted average job  
24 exposure estimates decreased annually from 1972 to  
25 1976. then in 1978 we lowered our full shift asbestos

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1 exposure limit to 2 fibers per cubic centimeter. All  
2 eight-hour, time-weighted average job exposure  
3 estimates from 1977 to 1982 were less than one fiber  
4 per cubic centimeter of air in most areas of the mine.

5 In 1980 we requested that the National  
6 Institute for Occupational Safety and Health, NIOSH,  
7 investigate health problems at the Libby, Montana,  
8 mine and other vermiculite operations around the  
9 country.

10 NIOSH conducted this investigation and  
11 published their results in 1987. The NIOSH study  
12 verified the high occupational exposures at the Libby  
13 mine and documented increased incidence and risk of  
14 morbidity and mortality among vermiculite miners and  
15 millers exposed to tremolite actinolite.

16 In part because of the NIOSH findings and  
17 in part because of OSHA's 1986 final rule that lowered  
18 their asbestos permissible exposure limit from 2  
19 fibers per cubic centimeter to 0.2 fibers per cubic  
20 centimeter, we included asbestos in our air quality  
21 rulemaking.

22 Our 1989 air quality proposed rule covered  
23 several health issues, including carcinogens such as  
24 asbestos. The air quality proposed rule would have  
25 lowered our permissible exposure limit for asbestos

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1 from 2 fibers per cubic centimeter to 0.2 fibers per  
2 cubic centimeter.

3 The W.R. Grace vermiculite mine in Libby,  
4 Montana, ceased production in 1990 and closed  
5 permanently in 1992. The record for MSHA's air  
6 quality proposed rule closed also in 1992.

7 Although we split this massive rulemaking  
8 into several smaller rules, some were not completed  
9 and were withdrawn from the Department's regulatory  
10 agenda. Then in November 1999, a Seattle newspaper  
11 published a series of articles about the unusually  
12 high incidence rate of asbestos related illnesses and  
13 fatalities among individuals who had lived in Libby,  
14 Montana.

15 These articles raised public and  
16 Congressional awareness, and the Department of Labor's  
17 of Inspector General began an evaluation of MSHA's  
18 role at the Libby mine.

19 The Office of Inspector General published  
20 its findings and recommendations in March of 2001, and  
21 the Office of Inspector General recommended that MSHA  
22 do the following three things: Lower the existing  
23 permissible exposure limit for asbestos to a more  
24 protective level; use transmission electron microscopy  
25 instead of phase contrast microscopy in the initial

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1 analysis of fiber samples that may contain asbestos;  
2 and implement special requirements to address take-  
3 home contamination.

4 Exposure to asbestos has been associated  
5 with lung cancer, mesotheliomas, and other cancers, as  
6 well as asbestosis and other nonmalignant respiratory  
7 disorders. Although there are no asbestos mines  
8 operating in the United States at this time, asbestos  
9 occurs naturally and is found in places where other  
10 commodities are mined.

11 Lowering our permissible exposure limit  
12 for asbestos would help to assure that fewer miners  
13 who work in an environment where asbestos is present  
14 will suffer material impairment of health or  
15 functional capacity over their working lifetime.

16 This proposed rule would reduce the full  
17 shirt permissible exposure limit and the excursion  
18 limit for airborne asbestos fibers and make several  
19 nonsubstantive changes to add clarity to the standard.

20 We are not proposing to change the definition of  
21 asbestos or the analytic methods that are used in our  
22 current standard. Neither are we proposing additional  
23 requirements to prevent take-home contamination.

24 In response to the Office of Inspector  
25 General's recommendations, we published an Advanced

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1 Notice of Proposed Rulemaking in the *Federal Register*  
2 on March 29, 2002, in which we requested information  
3 relating to the Office of Inspector General  
4 recommendations. We also held seven public meetings  
5 around the country to provide the public an additional  
6 opportunity to comment.

7           Following review of all written comments  
8 and relying on testimony taken at public meetings and  
9 on OSHA's 1986 asbestos risk assessment, we determined  
10 that it is appropriate to propose reducing the  
11 permissible exposure limit for asbestos and to clarify  
12 criteria for asbestos sample analysis.

13           In response to the Office of Inspector  
14 General recommendations and public comments, and to  
15 enhance health and safety of miners, we are proposing  
16 to lower the existing eight-hour, time-weighted  
17 average asbestos PEL of 2 fibers per cubic centimeter  
18 to 0.1 fiber per cubic centimeter, and to lower the  
19 short term limit from 10 fibers per cubic centimeter  
20 over a minimum sampling time of 15 minutes to an  
21 excursion limit PEL of 1 fiber per cubic centimeter  
22 over a minimum sampling time of 30 minutes.

23           To clarify the criteria for the analytic  
24 method in our existing standards, we are proposing to  
25 incorporate a reference to Appendix A of OSHA's

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1 asbestos standard.

2 Appendix A specifies basic elements of a  
3 PCM method for analyzing airborne asbestos samples.  
4 It includes the same analytic elements specified in  
5 our existing standards and allows us to use other  
6 methods that meet the statistical equivalency criteria  
7 in OSHA's asbestos standard.

8 After considering approaches to prevent  
9 take-home contamination, we determined that  
10 nonregulatory measures could adequately address this  
11 potential hazard. Although we are only proposing to  
12 lower the permissible exposure limit for asbestos, we  
13 also discuss analytic methods and take-home  
14 contamination in this preamble and, therefore, those  
15 issues are acceptable subjects for this public hearing  
16 today.

17 The issues surrounding asbestos exposure  
18 are important to us, and we will use the information  
19 provided to us at these public hearings and in written  
20 comments to help us decide how to best proceed.

21 The procedure for each of our public  
22 hearings is the same. Those of you who have notified  
23 us in advance of your intent to speak or signed up  
24 today will make a presentations first. After all  
25 scheduled speakers have finished, others are free to

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1 speak. We will conclude this public hearing when the  
2 last speaker has finished.

3 We will conduct this hearing in an  
4 informal manner, and formal rules of evidence will not  
5 apply. The MSHA panel may ask questions to clarify  
6 statements for the record, but there will be no cross-  
7 examination of speakers.

8 If you wish to present any written  
9 statement or information today, please clearly  
10 identify your material, and give it to me before the  
11 conclusion of this hearing. I will identify who  
12 submitted it.

13 You may also submit comments following  
14 this hearing, but please submit them by November 21,  
15 which is the close of the comment period. You may  
16 submit comments to us by electronic mail, FAX, or  
17 regular mail at the addresses listed in the proposed  
18 rule.

19 A transcript of this hearing will be made  
20 available on our website within several days. If you  
21 want a personal copy of the transcript, you can make  
22 arrangements directly with the court reporter.

23 Thank you for your patience and attention  
24 to these introductory remarks. We will now begin with  
25 speakers who requested to speak. To ensure that we

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1 get an accurate record, if you would please say your  
2 name and your organization that you are affiliated  
3 with, and spell your name for the recorder.

4 Our first speakers this morning will be  
5 from NIOSH.

6 DR. WEISSMAN: Good morning. I am David  
7 N. Weissman, M.D., W-e-i-s-s-m-a-n, Director of the  
8 Division of Respiratory Disease Studies, National  
9 Institute for Occupational Safety and Health, Centers  
10 for Disease Control and Prevention.

11 Accompanying me today are several senior  
12 staff from NIOSH. Our purpose for appearing at this  
13 hearing is to provide testimony to the Mine Safety and  
14 Health Administration regarding the proposed rule on  
15 asbestos exposure limit published in the *Federal*  
16 *Register* on July 29, 2005.

17 NIOSH strongly supports the proposal to  
18 reduce the MSHA permissible exposure limit from 2  
19 fibers per cubic centimeter to .1 fibers per cubic  
20 centimeter. This twentyfold reduction in the MSHA PEL  
21 will make it consistent with the Occupational Safety  
22 and Health Administration PEL.

23 NIOSH also concurs with the proposal to  
24 incorporate reference to Appendix A of OSHA's asbestos  
25 standard, specifying phase contrast microscopy as the

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1 method for estimating the concentration of airborne  
2 asbestos.

3 Reducing exposures to asbestos is  
4 important for preventing asbestos related diseases.  
5 As we all know, these include asbestosis, lung cancer  
6 which asbestos can cause in asbestos exposed workers,  
7 especially for those who smoke, malignant  
8 mesothelioma, cancer of the tissue lining of the chest  
9 or abdomen for which asbestos and similar fibers are  
10 the only known cause, and non-malignant pleural  
11 disease which can appear as a painful accumulation of  
12 bloody fluid surrounding the lungs but more commonly  
13 seen as thick and sometimes constricting scarring of  
14 the tissues surrounding the lungs; in addition,  
15 asbestos exposure associated with excess mortality due  
16 to cancer of the larynx and cancer of the  
17 gastrointestinal tract.

18 Most asbestos related diseases,  
19 particularly the malignant ones, have long latency  
20 periods, extending 10 to 40 years from initial  
21 exposure to onset of illness. Asbestosis and asbestos  
22 related malignancies are very serious diseases that  
23 are associated with appreciable mortality. Asbestos  
24 related cancers are often fatal within a few years of  
25 initial diagnosis, and asbestosis can lead to death

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1 due to impaired breathing.

2 In the proposed regulation MSHA defines  
3 asbestos as six asbestos minerals, including  
4 chrysotile, amosite, crocidolite, anthophyllite-  
5 asbestos, tremolite-asbestos, and actinolite-asbestos.

6 Individual fibers of these minerals are defined as  
7 particles with a length to width or aspect ratio of at  
8 least three to one, and lengths of at least five  
9 micrometers.

10 MSHA states on page 43953 that "although  
11 we have received comments regarding the hazards  
12 associated with cleavage fragments, we do not intend  
13 to modify our existing definition of asbestos with  
14 this rulemaking" and further explains on page 43972  
15 that "substantive changes to the definition of  
16 asbestos are beyond the scope of this proposed rule."

17 NIOSH agrees with and supports MSHA's  
18 decision to limit the scope of the proposed rule to  
19 facilitate the proposed marked reductions in asbestos  
20 exposure limits. However, as noted by MSHA, issues  
21 remain in improving the definition of asbestos.

22 For example, the current definition  
23 doesn't include asbestoform mineral fibers such as  
24 winchite and rictterite, which were major components of  
25 the asbestoform mineral contamination of Libby,

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1 Montana, vermiculite.

2 In view of these issues, NIOSH is  
3 presently reevaluating its definition of asbestos in  
4 non-asbestoform minerals, because this issue has  
5 implications that encompass numerous Federal agencies.  
6 NIOSH will work with other agencies to assure  
7 consistency, to the extent possible.

8 Overall, though, the proposed rule is an  
9 important and positive step and improves protection of  
10 miners from asbestos. NIOSH applauds the proposed  
11 rule, and strongly supports it.

12 I'll take any questions, if there are any.

13 MS. SMITH: Thank you, Dr. Weissman. Does  
14 the panel have any questions of Dr. Weissman? Thank  
15 you very much.

16 Our next speaker is Celeste Monforton.

17 MS. MONFORTON: Good morning. My name is  
18 Celeste Monforton. The last name is spelled M-o-n-f-  
19 o-r-t-o-n. I am testifying here today as a private  
20 citizen.

21 I am a research associate in the  
22 Department of Environmental and Occupational Health at  
23 the George Washington School of Public Health. From  
24 1991 until December 2001, I was employed at the  
25 Department of Labor, first at OSHA and then at MSHA.

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1           As I said, I offer my testimony as a  
2 private citizen. I am not being compensated in any  
3 way by any organization, corporation, group or  
4 individual to appear here today, and I have no  
5 economic interest in the outcome of this rulemaking.

6           On a personal note, I would very much like  
7 to thank the career MSHA employees who are involved in  
8 this rulemaking and in the agency's other efforts to  
9 protect miners from exposure to asbestos.

10           While I was at MSHA, I witnessed firsthand  
11 your commitment to the mission of the agency and your  
12 efforts to promulgate protective standards for  
13 workers. I appreciate the fact that you face  
14 significant political obstacles within your own  
15 agency, the Department of Labor, the Office of  
16 Management and Budget, and you also ensure substantial  
17 pressure from other groups who seek to preserve the  
18 status quo.

19           I also understand and recognize that there  
20 are other health hazards faced by miners, such as  
21 diesel particulate matter, coal mine dust, crystalline  
22 silica, which also must be addressed by MSHA, and  
23 given the agency's limited resources, this rulemaking  
24 on asbestos may not be your highest priority.

25           For that reason, I recommend the

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1 following. MSHA should expedite this limited scope  
2 rulemaking and issue a final rule by March 30, 2006,  
3 and MSHA should incorporate into this limited rule  
4 OSHA's 1926.1101, which is their asbestos standard for  
5 construction industry, to protect miners and  
6 contractors from asbestos containing building material  
7 and equipment, and MSHA should commit publicly to  
8 propose by March 30, 2007, a comprehensive asbestos  
9 rule which incorporates the latest scientific  
10 information on the health effects of respirable fibers  
11 and in the state of the art analytical methods.

12 It has been more than three years since  
13 MSHA published its advanced notice of proposed  
14 rulemaking on controlling and measuring asbestos and  
15 it held its public hearings. It is a sad commentary,  
16 but exposes a truthful reality. The current  
17 regulatory system is inefficient and incapable of  
18 responding in a timely manner to protect workers from  
19 occupational health hazards.

20 In some cases, whole generations of  
21 workers have been exposed to disabling and deadly  
22 hazards, while employers, industry trade associations  
23 and their lawyers debate with regulators.

24 When I studied MSHA's current proposal on  
25 asbestos, I kept returning to the same question.

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1 Given the current reality of the regulatory system,  
2 what can be done expeditiously to strengthen MSHA's  
3 enforcement tools in order to protect asbestos exposed  
4 mine workers? I elaborate below in my  
5 recommendations.

6 Recommendation 1: Expedite a limited  
7 scope final rule and issue it by March 30, 2006.

8 In at least 11 instances MSHA indicates  
9 that this rulemaking is limited in scope with the  
10 primary objective of establishing a permissible  
11 exposure limit that is equivalent to OSHA's. The  
12 regulatory text proposed will accomplish this  
13 objective.

14 I agree with MSHA's decision to propose  
15 this minor rule. I urge the agency, however, to  
16 expedite the process to ensure that it is in effect by  
17 March 30, 2006. That is about 120 days after the  
18 close of the post-hearing comment period.

19 I consider this a first step but one that  
20 is tremendous important and necessary to ensure  
21 miners' health is better protected. I note that in  
22 2002 representatives of the mining industry expressed  
23 no objections to this approach.

24 I urge MSHA to put this limited scope  
25 rulemaking on the fastest Fast Track available, taking

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1 full advantage of the mining industry's support for  
2 the change. I recommend, however, that MSHA include  
3 all mining operations, including underground coal  
4 mines, in the regulation.

5 Meaning no disrespect to the geology  
6 experts with whom MSHA consulted, the agency should  
7 not tie its own hands. If there is an instance in  
8 which underground coal miners were to be at risk of  
9 exposure to asbestos, the agency should have the  
10 enforcement tools it needs to protect coal miners'  
11 health.

12 Recommendation 2: Incorporate OSHA's  
13 1926.1101 in this limited scope rule.

14 In the preamble to this proposed rule,  
15 MSHA describes several reprehensible instances where  
16 mine workers were exposed to asbestos containing  
17 building material during maintenance and repair  
18 activities. In one case, MSHA reports that a company  
19 official knew that ACM was present. Yet they still  
20 allowed their workers to move the material without  
21 proper methods, protection or training.

22 Moreover, MSHA only became aware of the  
23 situation because of a miner who was brave and bold  
24 enough to notify MSHA. by the time MSHA learned of  
25 the hazard and arrived at the site, it was impossible

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1 to detect any airborne asbestos.

2 How is it today, more than a century after  
3 the health effects of asbestos were documented, some  
4 mine operators would knowingly expose workers to ACM  
5 and not take any precautions? I see it this way.  
6 First, employers realize there is little chance they  
7 will get caught. If nobody is watching, some will  
8 take shortcuts and risk the health and lives of their  
9 employees.

10 Second, employers understand that most  
11 workers will not complain to MSHA for fear of losing  
12 their jobs or being discriminated against in some  
13 other way. Third, these irresponsible mine operators  
14 know that MSHA does not have a regulation on the books  
15 to protect mine workers from asbestos containing  
16 material.

17 These factors combined give unscrupulous  
18 mine operators all the incentive they need to cut  
19 corners and place workers at significant risk. MSHA  
20 needs a regulation to specifically address demolition  
21 or salvage of structures where asbestos is present,  
22 removal or encapsulation of ACM in construction  
23 alteration, repair, maintenance and renovation of  
24 structures or equipment that contain asbestos.

25 MSHA should incorporate the appropriate

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1 provisions of 29 CFR 1926.1101 to its limited scope  
2 final rule and promulgate it no later than 120 days  
3 after the post-hearing comment period.

4 I cannot imagine that responsible mine  
5 operators would object to extending these protections  
6 to workers employed at mining operations. I suspect  
7 that the vast majority of firms, when faced with  
8 situations where ACBM has to be removed, already  
9 comply with the provisions of OSHA's standard or they  
10 hire a qualified asbestos abatement contractor to  
11 ensure the job is done properly and safely.

12 Formally incorporating OSHA's 1926.1101  
13 into MSHA's limited scope rule is necessary, however,  
14 for those irresponsible mine operators who will only  
15 take precautions when compelled to do so because there  
16 is a regulation on the books.

17 The recommendations offered above are  
18 meant to capture some low hanging fruit and, frankly,  
19 it should have been done years ago. Adopting a 0.1  
20 fiber per cc eight-hour TWA PEL and incorporating  
21 OSHA's 1926.1101 standard will not be onerous for the  
22 mining industry and, frankly, it would be ludicrous,  
23 legally and politically, for mine operators to object  
24 to these changes.

25 These two recommendations are designed to

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1 provide the nation's miners with some of the same  
2 health protections afforded to all other workers in  
3 this country. MSHA should finalize these provisions  
4 by March 30, 2006. They are not controversial, and  
5 they are long overdue.

6 Recommendation 3: While the MSHA staff  
7 completes work on this limited scope rule, I urge  
8 MSHA's Assistant Secretary or Acting Assistant  
9 Secretary to commit to proposing a comprehensive  
10 asbestos standard which incorporates the latest  
11 scientific information on the health effects of  
12 respirable fibers and state of the art analytical  
13 methods.

14 In the preamble to the current proposed  
15 rule, MSHA concedes the many issues that are not  
16 addressed in this limited scope rule. These issues  
17 include items as fundamental as the definition of  
18 asbestos, pros and cons of different analytical  
19 methods, the use of bulk sampling for hazard  
20 screening, and many others.

21 As I note above, I agree with MSHA's  
22 proposal to issue this preliminary rule which is  
23 limited in scope. However, these other issues must be  
24 addressed in a follow-up rulemaking.

25 These issues include: The definition of

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1 asbestos. There is substantial evidence that  
2 respirable fibers not currently classified as asbestos  
3 are associated with significant adverse health  
4 effects. As NIOSH noted in its June 2002 comments to  
5 MSHA, any durable inhalable fiber with characteristics  
6 similar to asbestos should be considered potentially  
7 harmful.

8 NIOSH further states that there is "no  
9 scientifically valid health evidence to exclude from a  
10 health standard so called cleavage fragments from the  
11 nine fibrous analogs of asbestos minerals, if they  
12 meet the microscopic definition of a fiber."

13 There is a wealth of new information on  
14 the adverse health effects of durable respirable  
15 fibers. MSHA should work in collaboration with  
16 scientists at USGS, EPA, ATSDR, NIOSH and other  
17 Federal agencies to develop an appropriate definition  
18 of the hazard, secure assistance from these agencies  
19 to develop an updated risk assessment for occupational  
20 exposure to the hazard, and set an appropriate  
21 permissible exposure limit and short term exposure  
22 limit.

23 Two: Provisions of a comprehensive health  
24 standard. As MSHA considers the content of a  
25 comprehensive health standard to protect mine workers

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1 from exposure to naturally occurring asbestos, I  
2 encourage the staff to take this approach. Review in  
3 detail the cases in which such exposures occurred, and  
4 ask yourselves what enforcement tools did you need and  
5 perhaps did not have to ensure that workers were  
6 protected?

7 Here are a few provisions to consider.  
8 Use of bulk samples to assess the presence of the  
9 hazard. If a bulk sample of ore or a processed  
10 product collected in a portion of the mine where  
11 miners are working or likely to be working contain  
12 more than 0.1 percent of the regulated material,  
13 however that is eventually defined in the  
14 comprehensive standard, then mine operators must have  
15 a written plan in place to control effectively  
16 workers' exposure to respirable dust and fibers.

17 If MSHA suspects that asbestos containing  
18 ore is present on a mine property, MSHA has the  
19 authority to use any variety of Federally approved  
20 analytical methods to confirm or refute its concern  
21 for miners' health.

22 The purpose of this provision will be to  
23 help MSHA determine whether the hazard is present at  
24 the mine. A follow-up step, if necessary, will be  
25 assessing the work practices to determine whether

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1 miners are likely to be exposed to the hazard or  
2 perhaps conducting air monitoring.

3 In some instances, again as specified in  
4 this comprehensive standard, mine operators would be  
5 required to develop and implement a written, mine  
6 specific plan which describes the work practices, such  
7 as water application to control dust or engineering  
8 controls such as environmentally controlled cabs on  
9 equipment, which will be used to control respirable  
10 dust and fibers on the mine property.

11 The control plan must address all facets  
12 of ore extraction, processing, loading, shipping and  
13 waste product handling, and describe how exposure to  
14 respirable dust and fibers would be controlled. If a  
15 mine operator fails to follow their own written plan,  
16 a citation would be issued, and a series of worker and  
17 public notification would commence.

18 My written testimony describes other  
19 provisions that MSHA should include in a comprehensive  
20 rule, including requirements to prevent take-home  
21 contamination.

22 Before I conclude my remarks, I have  
23 several additional comments. First, I encourage MSHA  
24 to create a scientific repository of asbestos samples  
25 collected during all future enforcement and compliance

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1 assistance visits.

2           These bulk samples and filter cassettes  
3 should be made available for public health research  
4 purposes to scientists from Federal agencies such as  
5 USGS, NIOSH or EPA, to continue build a knowledge base  
6 about all forms of respirable fibers present at the  
7 nation's mining operations.

8           This repository could become a valuable  
9 resource for scientists who are examining new health  
10 effects data, comparing sample results by different  
11 analytical methods, or verifying new analytical  
12 techniques. This information may prove invaluable to  
13 MSHA, OSHA, and NIOSH in future rulemakings on this  
14 occupational hazard.

15           Second, I was bewildered by one portion of  
16 MSHA's preamble to this proposed rule. I cannot  
17 conclude my remarks without expressing its absurdity.

18           The text specifically suggests that another tragedy  
19 like the one caused by W.R. Grace beginning in Libby,  
20 Montana, now spread to communities across the nation,  
21 would not occur today.

22           MSHA states, "If a mine's ore contains  
23 significant amount of asbestos-like minerals, there is  
24 a strong likelihood of potential liability risk, both  
25 from customers and workers, and the possibility that

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1 the mine's product would be commercially unmarketable.

2 In our view, these commercial reasons make it  
3 unlikely that a new Libby-like mining condition would  
4 arise in the future."

5 Yet in this very same MSHA document just a  
6 few short pages later, the agency describes the  
7 inability of pure market forces to protect workers'  
8 health. In one case, a customer purchased product  
9 from a mine. They sent a sample of the material to an  
10 independent lab for analysis, and tremolite asbestos  
11 was found in the product.

12 When MSHA learned of the matter, it  
13 conducted sampling at the mine and "found  
14 concentrations at the mill exceeded 2.0 fibers per cc  
15 a measured by PCM, and over half of the exposures in  
16 the mill exceeded 0.1 fibers per cc of asbestos."

17 The incongruity of these two passages is  
18 striking. On one hand, MSHA is trying to convince us  
19 of the effectiveness of market forces, while on the  
20 other, the agency's own experience illustrates that  
21 the economic theory does not match the reality in  
22 today's workplaces, when the hazard is microscopic and  
23 the adverse health effects do not emerge for decades  
24 after the exposure, and many years after the employer-  
25 worker relationship has ceased.

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1           It is foolish to rely on economic theories  
2 to protect workers' health. Past and present  
3 experience tell us the same.

4           In conclusion, I support MSHA's proposal  
5 to issue this limited scope rule which will provide  
6 mine workers some of the same protections against  
7 asbestos exposure granted to all other workers in this  
8 country.

9           The agency must acknowledge and act,  
10 however, to address the significant limitations in the  
11 current definition of asbestos and the toxicologically  
12 irrational industry demand for "discriminatory fiber  
13 counting."

14           Specifically, MSHA should: (1) Expedite  
15 this limited scope rulemaking and issue a final rule  
16 by March 30, 2006; and incorporate into this limited  
17 scope rule OSHA's 1926.1101 standard, and commit  
18 publicly to proposing by March 30, 2007, a  
19 comprehensive asbestos rule which incorporates the  
20 latest scientific information on the health effects of  
21 respirable fibers and the state of the art analytical  
22 methods.

23           Thank you for providing this opportunity.

24           MS. SMITH: Thank you, Ms. Monforton.  
25 Questions from the panel for Ms. Monforton? Thank you

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1 very much.

2 We have no other speakers who have signed  
3 up to give testimony this morning. Are there any in  
4 the audience who would like to sign up at this time or  
5 come forward to give remarks?

6 MR. BAKER: I'm sorry. I came in late,  
7 and I did sign in.

8 MS. SMITH: Okay. If you would give your  
9 name, spell it for the reporter, please.

10 MR. BAKER: My name is Tim Baker. It's B-  
11 a-k-e-r. I am the Deputy Administrator for Health and  
12 Safety for the United Mine Workers of America. We  
13 have submitted written comments on this matter, and I  
14 will try to be fairly brief in my testimony, but felt  
15 it important to at least address some of the issues  
16 that are in this proposed rule.

17 First of all, the Mine Workers is pleased  
18 that the agency has made at least an attempt to  
19 regulate or to further regulate asbestos exposure to  
20 miners. We agree with the decision to lower the  
21 exposure levels over the course of a shift or over the  
22 course of the period of time an individual works.  
23 However, we are a little bit apprehensive and confused  
24 by the method of which you are going to determine what  
25 that exposure level is.

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1           We have suggested, I believe, in 2002  
2           that the agency change the method for analyzing  
3           asbestos or determining asbestos and use the  
4           transmission electron microscopy. However, that is  
5           not in this rule, and to some degree we are led to  
6           believe it is because of cost.

7           In this particular instance, given the  
8           circumstances and what happened at W.E. Grace and  
9           nationwide, the Union is a little confused as to why  
10          any type of cost analysis approach was used in this  
11          particular issue. The cost in human suffering that  
12          has occurred as a result of noncompliance,  
13          overexposure, nonenforcement, lack of a rule that  
14          really protects workers, allowed people to suffer, not  
15          only individuals working at the operations but, in  
16          fact, the community and suppliers and everyone that  
17          was associated, basically, with the asbestos problem  
18          in the community has been exposed.

19          This caused huge heartache for those  
20          individuals and pain and suffering that I don't think  
21          any of us can even imagine. We are, quite frankly,  
22          offended when this agency or any agency says, well,  
23          you know, the cost of doing certain tests is extreme,  
24          basically ignoring the cost and the suffering that  
25          those individuals and their families and communities

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1 have suffered. I think we need to point that out  
2 whenever we begin to look at a rule, especially in  
3 this instance, and we begin to say the price is too  
4 high to enforce something. I think we ought to look  
5 at the price that those individuals have already paid.  
6 So we are quite upset there.

7 As far as the short term exposure limits  
8 that have been lowered for 15-minute excursion, like  
9 many of the things that this agency does, it is  
10 nonenforceable. You will never find a situation where  
11 an individual is overexposed for a short term period  
12 of time, not because the overexposure doesn't occur,  
13 but because the sampling is not going to occur, and  
14 nobody is going to turn in an over exposure.

15 If the inspector or the individual who is  
16 in charge of that operation, from the Secretary's  
17 standpoint, is not on site when that occurs, there  
18 will never be an overexposure reported.

19 I am uncertain at this point how we  
20 tighten that particular aspect of this rule, but I  
21 think we all got to look at this in real terms. To  
22 put it in there is nice. It's nice window dressing,  
23 but just so we all understand it, no employer out  
24 there, no operator out there is going to turn  
25 themselves in on an overexposure for short term.

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1           Testing over the long haul over an entire  
2 shift may be reportable, depending on what means are  
3 used to test, but the short term is simply not going  
4 to happen.

5           The other thing that we are extremely  
6 concerned about is the fact that the agency has  
7 determined that there is no need to get involved or  
8 hit the issue of take-home contaminants. To be honest  
9 with you, personally looking at this situation, I'm  
10 bewildered by this.

11           A community was destroyed. Many  
12 communities were destroyed, not because the  
13 individuals worked at the operation, not because they  
14 showed up on site either in the milling operation or  
15 the mining operation or any of those places, but  
16 because they simply lived in the community.

17           For the agency to say that we believe that  
18 employers will take necessary steps to protect workers  
19 and their families from take-home contamination is  
20 ridiculous. It didn't occur in the past, and if you  
21 do not regulate the situation, it will not happen in  
22 the future.

23           Benevolence is not part of this equation.  
24           This is about dollars and cents when you get down to  
25 it, and when it comes to dollars and cents, it has

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1       been proven through history that, if it is not  
2       regulated, the dollars will override any other thing  
3       that's out there.

4               That employer is going to seek maximum  
5       profit at the risk of the individuals who work for  
6       them, as is the case here, as is the case with many of  
7       the issues that the mine workers deal with, whether it  
8       be black lung, whether it be roof conditions, whether  
9       it be a host of conditions that exist in the mine.

10              To simply say that -- and I believe it was  
11       brought up previously -- that market forces will force  
12       them to deal with this issue is not the correct  
13       approach. This particular industry has proven clearly  
14       that they cannot self-regulate, that they will not  
15       self-regulate.

16              While we can say that there is no more --  
17       or you make the claim in the preamble that there is no  
18       more asbestos being mined in the United States, that  
19       does not exempt you from a responsibility to say that,  
20       in the event that people are around asbestos, in the  
21       event that they come in contact, we've got to regulate  
22       every area. And you have not done that. Quite  
23       frankly, you have not done that.

24              In many of these issues, I think what we  
25       do is we sit back and look at a situation and,

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1 hopefully, the agency says, well, if we detach  
2 ourselves for a long enough period of time, people  
3 won't be passionate about it, and we can maybe fudge  
4 around the edges a little and not tighten the  
5 regulation. I think that's exactly what occurred  
6 here. But those individuals who have suffered through  
7 this with asbestos and asbestosis still do have  
8 advocates out there, and it is important to remember  
9 that this is about protecting them.

10 Like I said before, the market forces just  
11 don't show that there would be any change. I mean, I  
12 deal with mining operations daily. I have not met too  
13 many operators that are benevolent enough to make sure  
14 that the conditions are what they should be, unless  
15 they are forced to.

16 The other thing that we are a little upset  
17 about is the exemption for underground mines, coal  
18 mines. Be it stated in the preamble that exposure is  
19 unlikely, exposure is very limited, it is not an  
20 excuse to exclude any particular segment of any  
21 industry. if it's mining, it's mining.

22 If coal miners are exposed to asbestos at  
23 any level in any single operation, it should apply to  
24 those operations. We are still using parts that  
25 contain asbestos. We are still using -- Whether it's

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1 in clutches for transmissions or whether it's in brake  
2 pads or whatever it is, they are still there.

3 It seems to me that in the confined spaces  
4 of an underground coal mine, it would be more  
5 hazardous than in an open area outside. So to exempt  
6 the underground mining industry, coal mining industry,  
7 is a mistake that we believe the agency does need to  
8 correct.

9 I guess, in conclusion -- and it's hard to  
10 say when you open up a hearing to say we are pleased  
11 that you tried to do something but, boy, you missed  
12 the mark. But we believe that to be the case here.

13 We believe that you have completely missed  
14 the mark, that issues that need to be dealt with  
15 weren't, and the agency really does need to have a  
16 rule on asbestos, but you need to tighten up all those  
17 particular areas that I have discussed.

18 The fact of the matter is that a rule is  
19 only going to be as effective as it can be enforced.  
20 What I have read even in the preamble and through the  
21 rule -- what I have read is a rule that basically has  
22 no teeth, and if my reading is correct, if my reading  
23 is right, I would suspect that we are better off not  
24 to have hearings, not to propose anything. Just allow  
25 the status quo to continue, because to a certain

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1 degree, you throw out a regulation, and people think  
2 they have a protection.

3 People think that they are going to be  
4 protected more than what they are. So you give them a  
5 false sense of security, and 20 years from now the  
6 problem is still there, and you haven't corrected  
7 anything.

8 The final thing I would like to say is  
9 that we do disagree, I think, with the Inspector  
10 General's determination that MSHA -- More sampling or  
11 more presence by the agency wouldn't have done any  
12 good, and kind of let you off the hook. We don't  
13 believe that for a minute.

14 It is one thing to sample. It is one  
15 thing to look at exposures. It is another thing to  
16 know that there is an extreme hazard out there, and to  
17 be satisfied that, well, I've taken the required  
18 samples; we have a generation dying off from  
19 asbestosis. That's a shame, but I've done my job, and  
20 the rule says what it says, while the next generation  
21 is being sentenced to death, which is exactly what has  
22 occurred here.

23 The hazard existed. This rule should have  
24 happened years and years and years ago. A rule with  
25 teeth should have happened years ago. Whenever the

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1 medical community, the agency and other individuals  
2 became aware of the fact that there was a hazard,  
3 there was no swift movement. There were studies and  
4 more studies and studies on top of those studies, but  
5 nobody moved to do anything.

6 So to a certain degree, culpability does  
7 lie with this agency for understanding that there was  
8 a hazard and not taking action to lower the exposure  
9 limits, not taking action to see that people were not  
10 overexposed.

11 So while the I.G. may say, you know,  
12 you're off the hook, from our perspective and from the  
13 United Mine Workers perspective, this agency is not  
14 off the hook. You are guilty of allowing this to  
15 occur as the operators who mine this and overexposed  
16 their people, and knowingly overexposed their people;  
17 because it was long ago -- It was long ago that you  
18 knew that these hazards existed, and nothing was done,  
19 quite frankly.

20 To say the rule is the rule, we applied  
21 the rule -- The rule wasn't stringent enough. It  
22 didn't protect, and for years you have known that.

23 I would be happy to answer any questions.

24 That is about the extent of my comments. We do need  
25 to tighten the rule. You do need to look at those

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1 areas where you allow operators to self-regulate.

2 My experience of 30 years, there is no  
3 operator that self-regulates. If you don't force it,  
4 it doesn't happen. Workers do not get protections,  
5 because the agency says, gee, it's market -- that  
6 wouldn't be good; they wouldn't do that again. It  
7 costs them too much money in the end.

8 I think that what we see in this instance  
9 and in this day and age is, if you get in enough  
10 trouble, you just go bankrupt and take your piggy bank  
11 home with you, and the workers are left with nothing  
12 anyhow. So I think we need to put some teeth in the  
13 regulation.

14 If there are any questions, I'd be happy  
15 to attempt to answer them.

16 MS. SMITH: Thank you, Mr. Baker.  
17 Questions for Mr. Baker? Thank you very much.

18 There are no other speakers signed up.  
19 Anyone in the audience, second thoughts on any  
20 remarks? Yes?

21 MR. CASTLEMAN: Good morning.

22 MS. SMITH: Good morning.

23 MR. CASTLEMAN: My name is Barry  
24 Castleman, C-a-s-t-l-e-m-a-n. I am here, like Celeste  
25 Monforton, at my own expense, on my own time, and I

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1 am not representing anyone here but myself.

2 My background is that I have been involved  
3 in the public health struggles over asbestos for about  
4 35 years. I have been involved in rulemaking before  
5 numerous Federal agencies. I have been a consultant  
6 to a number of Federal agencies, including OSHA, EPA,  
7 the Consumer Products Safety Commission, and the  
8 Department of Justice, on asbestos issues.

9 I was one of the initiators of the rule  
10 banning asbestos in drywall patching compounds in the  
11 1970s, a product that many workers and consumers were  
12 exposed to, millions of people a year, and I was  
13 involved in representing the Natural Resources Defense  
14 Council at the EPA banning rule hearings in the 1980s.

15 My book on the public health history of  
16 asbestos is a thorough documentation of why you can't  
17 expect market forces to protect people from asbestos,  
18 why we need to have government regulatory agencies,  
19 and this is just fundamental to anybody who  
20 understands public health any better than knowing how  
21 to spell the words.

22 This book is in its fifth edition. It is  
23 twice the size of my doctoral thesis at the Johns  
24 Hopkins School of Public Health on the same subject 20  
25 years ago. This has been peer reviewed by the best

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1 lawyers and scientists that money can buy, and it is a  
2 thoroughly accurate history of what happened with  
3 asbestos as a case study of the public health failure  
4 which is continuing to this day.

5 As to MSHA, your proposal to lower the  
6 exposure limit from 2 fibers per cc to 0.1 is long  
7 overdue. As you know, OSHA enacted that limit 11  
8 years ago. It was actually first proposed back in  
9 1976, not proposed but recommended by the Director of  
10 NIOSH, Jack Finklea, to the OSHA Director who was at  
11 that time Morton Corn, in a memorandum which I cite  
12 here in my testimony.

13 It was also recommended again in 1980 by a  
14 NIOSH-OSHA work group which issued a booklet called  
15 "Workplace Exposure to Asbestos: Review and  
16 Recommendations," and held a press conference in April  
17 of 1980, again saying that the occupational exposure  
18 limits should be set down to 0.1 fiber per cc.

19 The current MSHA limit of 2 fibers per cc,  
20 according to OSHA, was associated with a lifetime  
21 occupational mortality from occupational cancer of 64  
22 for every 1,000 workers exposed at that limit for a  
23 working lifetime.

24 For the lower limit of 0.1 fibers per cc,  
25 OSHA estimated that the mortality would be 3.4 deaths

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1 from occupational cancer for every 1,000 workers  
2 exposed at the permissible exposure limit of 0.1.

3 A more recent estimate by NIOSH experts  
4 Leslie Stainer and others published in 1997 pegged the  
5 0.1 fiber per cc limit as being associated with five  
6 deaths per 1,000 workers, just from occupational  
7 cancer of the lung that they would sustain. So that  
8 is a higher level of risk that had been projected by  
9 OSHA back in the early Nineties and in the Eighties.

10 If you assume a virtually linear dose  
11 response relationship as OSHA did, then you multiply  
12 by 20, the five deaths per 1,000, then you get the  
13 risk of 100 deaths per 1,000 from lung cancer, roughly  
14 speaking, that would be associated according to the  
15 NIOSH experts, with 0.1 fiber per cc permissible  
16 exposure limit. I mean for the 2 fiber per cc limit  
17 that you currently have.

18 So you have an appalling high occupational  
19 mortality associated with the current limit, and that  
20 estimate, based on the latest information, is higher  
21 than the estimates were that OSHA based its rulemaking  
22 on in the early 1990s.

23 Federal and state authorities have long  
24 recognized that there was a health threat to people  
25 doing mining and quarrying in various activities. I

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1 mention a few here.

2 I mention the talc deposits in upstate New  
3 York as having been the subject of state government  
4 inquiry since 1940, and publications from 1943 on  
5 asbestosis and in 1967 on the excess of occupational  
6 lung cancer in those talc miners in upstate New York,  
7 published by state government officials. This has  
8 been continued with a finding of mesotheliomas as well  
9 in the same miners, published in more recent years.

10 Other examples of activities subject to  
11 your regulatory purview would be the quarrying of  
12 asbestoform, asbestos containing rock, in the area of  
13 Rockville, Maryland, in 1977. There was a big  
14 controversy over that. People in Montgomery County,  
15 Maryland, were quite upset about the use of this  
16 material as a road paving material and the possible  
17 exposures of the workers and the communities from  
18 this.

19 I can't believe this is the only place.  
20 IN fact, it is not the only place in the country where  
21 quarrying is done for road building materials, and  
22 this kind of exposure can take place.

23 This month research was published linking  
24 residents in areas with naturally occurring asbestos  
25 outcrops and an increased risk of mesothelioma, and

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1 Dr. Marc Schenker in California is one of the authors  
2 of the study, and I give a website where Medical News  
3 Today reports this week on Dr. Schenker's research  
4 showing the high correlation of proximity, living in a  
5 proximity within a short distance of areas where  
6 natural outcrops of asbestos occur having a  
7 correlation with increased liability to develop  
8 mesothelioma.

9 Now, obviously, there are questions that  
10 can raised about the occupational exposure that people  
11 with mesotheliomas had which weren't answered by Dr.  
12 Schenker's research, but the study is compelling  
13 evidence that at least some people appear to be  
14 getting cancer just from environmental exposure to the  
15 disturbance of the rocks in the surface outcrops in  
16 certain areas of California.

17 In El Dorado County, California, where a  
18 lot of land development is going on, there have been  
19 studies by a pathologist, Gerald Abraham and Bruce  
20 Case, and they have looked at the lung tissues of pets  
21 that have died in this area, and they have looked at  
22 them for the amount of asbestos that they can find in  
23 the lung tissues.

24 They find that the longer these pets lived  
25 in this area, the more asbestos they had in their

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1 lungs, and this is an area where this is just  
2 homebuilding and ordinary commercial and residential  
3 development activities are going on, and the land is  
4 being disturbed, and there is asbestos in it and, in  
5 some cases, quite a lot of asbestos in the soil there.

6 Dr. Abraham and Dr. Case have found that  
7 the amount of asbestos that these animals had in their  
8 lungs at the time that they died was greater than the  
9 amounts of asbestos that goats in an area of Corsica  
10 where environmental mesotheliomas have been documented  
11 - it is higher in these pets than it is in some of  
12 these goats.

13 So this is an indication of the human  
14 health risk that is associated with this kind of  
15 disturbance of the land in areas where you have  
16 asbestos present in the soil, and this is something  
17 that you people ought to be doing something about  
18 before we have an epidemic of mesothelioma in every  
19 place where this kind of activity is going on.

20 In Libby, Montana, we have seen a  
21 catastrophe unfolding, not just in the miners but in  
22 the community, and even in the people that live in  
23 buildings where there is insulation that they made  
24 with this vermiculite was installed.

25 In one native Canadian community,

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1 indigenous people, reservations, have been provided  
2 with this material as part of a home that they lived  
3 in, and Raven Thundersky has gone on Canadian  
4 television on a number of occasions talking about how  
5 she and several members of her family are dying or  
6 have died from mesothelioma, and their only exposure  
7 is having lived in a building where this Zonelite  
8 insulation, this vermiculite insulation from Libby,  
9 Montana, was installed in the home.

10 How much of this kind of thing is still  
11 going on, I wonder? We still have vermiculite  
12 activities going on in the United States. There is a  
13 company called Virginia Vermiculite that's been the  
14 subject of news reports five years ago.

15 It's been the subject of MSHA  
16 investigations. They clearly have an asbestos  
17 exposure problem down there. What's being done about  
18 that? What should be done about it that's not being  
19 done about it? I'll say a little more about that  
20 later.

21 The situation in Libby: The presence of  
22 asbestos in the ore was known to state health  
23 authorities in Montana as far back as 1956. The  
24 company was originally called The Asbestos and  
25 Vermiculite Company back in 1919 when they opened it.

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1 So, obviously, they knew they had asbestos.

2 It was known to OSHA in 1974 when they  
3 were cited for violations of an OSHA standard in the  
4 handling of this vermiculite material, and it was  
5 known to the EPA, certainly, by 1982 when memos were  
6 written about this within the EPA. And yet the use of  
7 this material went on until 1990 with widespread  
8 dispersion in many communities all over this country  
9 and Canada and elsewhere perhaps.

10 W.R. Grace not only failed to warn  
11 consumers about the presence of asbestos in this  
12 material, they marketed it to the public as asbestos-  
13 free.

14 In upstate New York, as I mentioned, Dr.  
15 Abraham and his co-workers have documented  
16 mesotheliomas in people who were exposed to the talc  
17 mining activities associated with -- well, the mining  
18 and processing of talc, and these mines have been the  
19 subject of reports going back to 1943 in the published  
20 medical and scientific literature.

21 A company mining talc in New York, R.T.  
22 Vanderbilt, has long denied that its talc contains  
23 asbestos or should be subject to Federal regulations  
24 on asbestos.

25 I have, through the wonders of legal

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1 discovery, obtained a document from Johns-Manville  
2 Corporation where the people at Johns-Manville take a  
3 look at the talc product from Vanderbilt, and they  
4 look at various grades of the material, and their  
5 people -- their analytical people concluded that these  
6 materials all had substantial amounts of both  
7 tremolite and chrysotile asbestos in them, as well as  
8 anthophyllite and other asbestos minerals.

9 The Johns-Manville official, noting that  
10 he had numerous discussions with R.T. Vanderbilt  
11 people, concluded -- and this is a quote -- "It is  
12 apparent that the R.T. Vanderbilt presentations to  
13 OSHA, NIOSH, FDA, MESA" -- M-E-S-A, must have been  
14 what you guys were back in 1974 -- "are based on  
15 something less than the truth. I find it difficult to  
16 believe that they could be so grossly misinformed as  
17 to what their materials really are."

18 So this is what the industry people  
19 sometimes say about each other when they subject their  
20 materials to laboratory analysis and in the privacy of  
21 their own discussions within the company comment on  
22 what they find.

23 I mentioned Virginia Vermiculite. The  
24 USGS has recently published a map of asbestos deposits  
25 in the eastern United States. For some reason, the

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1 map does not include Louisa, Virginia, where Virginia  
2 Vermiculite operates.

3 Workers at this site were reported as  
4 having asbestos exposure five years ago. This was  
5 well known to top officials at MSHA, and previous MSHA  
6 air sampling had followed poor methodology and yielded  
7 negative findings, but citations were issued in the  
8 year 2000 for failure to warn and protect the workers.

9 Seems to me, that should be the beginning  
10 and not the end of MSHA's activity in connection with  
11 dealing with that. Here again, as with the talc  
12 mines, you have a management and an employer that is  
13 denying the problem, not saying we tried to fix the  
14 problem and we are still working on it, but simply  
15 denying that they have an asbestos problem in the  
16 first place. That is a fundamental challenge to your  
17 authority.

18 I have something else I want to bring up,  
19 and that is notification. Having reviewed what I have  
20 just said, I think we have a deplorable failure to  
21 protect the health of workers, communities and  
22 consumers from asbestos contamination in mining and  
23 quarrying operations and the products of these  
24 business activities.

25 I again say it would be important for MSHA

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1 to drastically lower its antiquated occupational  
2 exposure limit, its permissible exposure limit, as  
3 proposed. But there is more that you should do.

4 Workers and the public depend on the  
5 government to see through the denials of employers  
6 that say that they don't have asbestos, when they do,  
7 and protect the health of workers and consumers  
8 against asbestos contamination in talcs and  
9 vermiculite and quarried stone.

10 Given the lack of candor of the companies  
11 extracting these materials, one can only wonder what  
12 products people are making and using that contain this  
13 contaminated talc and vermiculite today.

14 MSHA's identification of an asbestos  
15 contamination of stone or minerals should trigger  
16 efforts in public notification and public health  
17 protection.

18 When bulk samples show a tenth of a  
19 percent of asbestos or more or air monitoring shows  
20 that work with the material yields even brief  
21 exposures to 0.1 fibers per cc or more, the business  
22 activity being monitored should be ordered to notify  
23 all of its customers that (1) the material contains  
24 asbestos, a cancer causing substance for which there  
25 is no known safe threshold of exposure; (2) they

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1 should tell their customers appropriate measures  
2 should be taken to minimize worker exposure to the  
3 material to prevent breathing of asbestos dust; and  
4 (3) workers and consumers of products containing the  
5 material should receive warnings along the lines of  
6 (1) above so that they can take steps to protect  
7 themselves, possibly including avoidance of purchasing  
8 the labeled product.

9 So people should have the right to make  
10 the fundamental decision as to whether to accept the  
11 risk that such products entail, not just to deal with  
12 that risk as a necessity.

13 For its part, MSHA should immediately  
14 inform the company where the inspection is made about  
15 the dangers of asbestos to workers and consumers, and  
16 find out who the customers of the operation are. MSHA  
17 should then inform the relevant Federal agencies,  
18 including the Consumer Product Safety Commission and  
19 the Environmental Protection Agency, possibly others  
20 such as the Food and Drug Administration, immediately  
21 after a finding is made that a deposit of stone or  
22 other materials contains asbestos in the above  
23 concentrations, and after going through who their  
24 customers are with the operator of that site.

25 I am not saying that you publish a list of

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1 the customers. I'm saying that you inspect a list of  
2 the customers, and notify the appropriate Federal  
3 authorities that might be dealing with products that  
4 that material is going to show up in, or public  
5 exposures that that material might cause.

6 Next I want to talk briefly about the  
7 short term exposure limit. At present the short term  
8 exposure limit is a peak exposure not to exceed for a  
9 period lasting 15 minutes, and the limit is 10 fibers  
10 per cc, and this is the same limit and sampling time  
11 that was established by OSHA in 1972.

12 MSHA now proposes to lower the short term  
13 limit to 1 fiber per cc but allow the sampling time to  
14 be doubled to 30 minutes. My beef is about the  
15 sampling time.

16 This copies the provisions of OSHA set 11  
17 years ago, but the deadliness of asbestos exposure is  
18 now believed to be greater than it was then, here  
19 citing the NIOSH epidemiologists that I discussed  
20 earlier, having a higher risk associated with given  
21 levels of asbestos exposure.

22 OSHA estimated a lifetime exposure was 3.4  
23 per 1,000 workers exposed from occupational cancers,  
24 but leading NIOSH experts say that the death rates  
25 would be two for asbestos and five for lung cancer for

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1 every 1,000 workers exposed.

2 So that is more than twice the death rate  
3 previously estimated by OSHA for the same level of  
4 exposure, and that is not counting the mesothelioma  
5 deaths, which would be in addition to the lung cancer  
6 and asbestosis deaths for which figures are given here  
7 and for which no figure was given in the article that  
8 I cite.

9 So the debate -- So since the material is  
10 now thought to be more dangerous than it was when OSHA  
11 was rulemaking, I think that you should keep the 15  
12 minute period for short term exposure limits from  
13 before, rather than doubling the time sampling  
14 interval to 30 minutes, as you are proposing to do by  
15 simply following the OSHA lead; because OSHA did that  
16 in 1994, based on the state of knowledge about the  
17 hazards of asbestos that OSHA laid out before 1994.

18 The last thing I want to mention is  
19 rulemaking -- regulation separate from rulemaking. I  
20 think that, because of the likelihood that there will  
21 be a lower permissible exposure limit soon, and I have  
22 confidence in you to do that, that -- and because the  
23 management in some of these talc mines and vermiculite  
24 operations I have mentioned, the Virginia Vermiculite  
25 and R.T. Vanderbilt in particular, are really trying

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1 to deny that there is an asbestos problem, despite all  
2 the evidence, then I think that these two sites should  
3 be immediately and thoroughly inspected for asbestos  
4 exposure and put on notice that the rules are in the  
5 process of being changed, and that their exposure  
6 limit will soon be 0.1 fibers per cc.

7 So I think that, again because of the  
8 recalcitrance of these employers in even admitting  
9 that they have asbestos exposure going on, that this  
10 is warranted.

11 So thank you very much for your time. I  
12 am disappointed to see that the industry people here  
13 who are present haven't come up to speak. Perhaps now  
14 they will be moved to say something to you, but I  
15 congratulate the career Civil Servants at MSHA for  
16 trying to get this thing moving again, and I wish you  
17 all the best in completing your task.

18 If you have any questions, I would be  
19 happy to respond.

20 MS. SMITH: Thank you, Mr. Castleman. We  
21 appreciate it. Question? Thank you very much.

22 MR. CASTLEMAN: And I will have copies of  
23 several things I would like to leave with you.

24 MS. SMITH: Fine. Thank you.

25 MS. HUTCHISON: Are you looking for these

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1 documents?

2 MR. CASTLEMAN: I think I am, yes. Let me  
3 just tell you what I've got here.

4 This is the 1974 document where the people  
5 at Johns-Manville are hooting at the people at R.T.  
6 Vanderbilt for telling a lot of lies to government  
7 agencies.

8 This is the Medical News Today report,  
9 "Exposure to Asbestos From Rocks Can Cause Malignant  
10 Mesothelioma" published two days ago or three days  
11 ago, describing the research in California that I was  
12 telling you about.

13 This is my CV. And the last item is the  
14 1976 memorandum from NIOSH to OSHA recommending the  
15 imposition of a 0.1 fiber per cc permissible exposure  
16 limit as an OSHA standard.

17 Thank you very much.

18 MS. SMITH: Thank you. We will include  
19 those materials as part of the record.

20 Any other second thoughts about remarks?

21 We would like to thank all of you this  
22 morning for your remarks. Please be assured that they  
23 will be given very thoughtful consideration as we  
24 weigh the process of moving forward with this proposed  
25 rule.

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