

VI. WORK PRACTICES

Information concerning work practices for 1,1,1-trichloroethane can be found in the Manufacturing Chemists Association Safety Data Sheet SD-90.

[15] Information on work practices for some specific uses is also available. [106,133]

(a) Transport, Handling, and Use

1,1,1-Trichloroethane may be stored in mild steel containers or, if there is excess moisture in the ambient air, in stainless steel or resin-lined containers. It can be decomposed to toxic and corrosive compounds including phosgene and hydrochloric acid by contact of liquid or vapor with open flame or red-hot surface, so it should be appropriately stored and handled to prevent such contact. [134,135] Damaged drums or other storage or transporting containers should not be welded until thoroughly purged with steam, flushed with water, and air dried. [136]

All piping and valves at the loading or unloading station should be of material resistant to 1,1,1-trichloroethane and should be carefully inspected prior to connection to the transport vehicle and periodically during the operation. Personal protective clothing must be provided during both inspection and connection. Information on imperviousness of some materials to 1,1,1-trichloroethane is available. [137] Eye wash and safety shower installations should be readily available in the immediate area. Signs indicating the location of safety showers and eye wash facilities should be prominently displayed throughout the work area. Unloading areas must be posted "DANGER: LOADING OR UNLOADING 1,1,1-TRICHLOROETHANE."

Due to the toxicity of 1,1,1-trichloroethane, processes in which it is used in large quantities should be carried out in closed systems. Well designed hoods and ventilation systems should be used to maintain exposures at or below concentrations specified by this recommended standard. Further protective measures include the use of personal protective equipment and clothing and purging of equipment prior to and during servicing and maintenance.

Safety showers are desirable and eye wash facilities are necessary in areas where 1,1,1-trichloroethane is handled. In locations where such facilities are not available, a container of water for emergency use must be kept with the first aid supplies.

(b) Equipment Maintenance

All equipment used for handling 1,1,1-trichloroethane must be emptied and purged prior to entry or disassembly. Steaming followed by washing with water is recommended for purging tanks and other containers which have held 1,1,1-trichloroethane. Pipe lines should be disconnected and capped. Under conditions where it is necessary to enter highly contaminated areas or otherwise work with 1,1,1-trichloroethane contaminated equipment, maintenance personnel must use either a self-contained breathing apparatus of the pressure demand mode, with an impervious protective suit, or a combination supplied air suit with auxiliary self-contained air supply. Ventilation should be continued during this time by blowing or drawing fresh air through the system. Safety precautions for emergency rescue require that all maintenance personnel be informed of the toxic properties of 1,1,1-trichloroethane and be instructed on the necessity of wearing personal protective equipment. Constant observation of anyone entering a

tank should be maintained in case rescue work is necessary.

(c) Emergencies

Spills must be anticipated. Storage tanks should be diked to contain the contents of the tank. Drum storage areas must also be diked to contain the volume of 1,1,1-trichloroethane present in the drums to prevent release to other areas. Areas where major spills are likely to occur should be constructed so that they may be closed until properly protected personnel can ventilate, enter, and clear the area. Warning signs must be posted so that unauthorized personnel will not enter the area. Normal work should not be continued until the concentration of 1,1,1-trichloroethane has been reduced to the recommended workplace environmental limit. Any combustion operations must be stopped until the spill is cleared. Disposal of 1,1,1-trichloroethane must be performed in compliance with local, state, and federal waste disposal regulations. Consideration should be given to pumping the diked spill to another tank. In addition, it is advisable to have facilities for transfer of the contents of a leaking tank to another suitable tank.

Areas in which small spills have occurred should be evacuated and well-ventilated. Small, portable fans may be used in confined areas where local exhaust ventilation is not feasible. Workers should not return to any work area if the odor of 1,1,1-trichloroethane is still perceptible without the concentration being determined first.

(d) Respiratory Protection

For adequate respiratory protection against the many conditions which may be encountered in individual operations, many types of respirators have been developed and approved. Each has a particular application and

limitations from the viewpoint of protection, as well as advantages and disadvantages from the viewpoint of operational procedures and maintenance. Detailed information on the selection and use of respirators can be obtained from the Respiratory Protection Devices Manual [138] published by the AIHA and the ACGIH in 1963. The American National Standards Practices for Respiratory Protection, ANSI Z88.2-1969, [139] also classifies, describes, and gives the limitations of respirators.

There are three categories of respirators: atmosphere-supplying respirators, air-purifying respirators, and combination atmosphere-supplying and air-purifying respirators.

One factor that affects the overall performance of demand-type (negative pressure) respirators is the variability of the face seal. Facepiece leakage is the major limitation of half-mask and quarter-mask facepieces operated with a negative pressure.

For uniform regulations covering the many face sizes and shapes of the US population, NIOSH recommends that the half-mask or quarter-mask facepieces operated with a negative pressure not be used for protection above 10 times the TWA environmental limit, although the majority of wearers can obtain protection in atmospheres of higher 1,1,1-trichloroethane concentrations. On the same basis, NIOSH recommends that the full facepiece, operated with negative pressure, may be used up to 50 times the TWA concentration limit. As eye irritation has been reported at concentrations of 500 ppm 1,1,1-trichloroethane, it is recommended that full facepiece respirators be used above this level. Due to the adequate warning nature of 1,1,1-trichloroethane, air-purifying respirators, such as the chemical cartridge type, may be used at concentrations less than 500

ppm. When significant and nonreversible health effects may occur, at 1,000 ppm and above, self-contained breathing apparatus or supplied-air respirators with a full facepiece must be used.

The maximum use concentration guides do not take into account the service life of the filters or absorbent canisters which also affect the performance of air-purifying respirators. The approval tests (under 30 CFR 11) for these two devices specify only carbon tetrachloride for the service life test. Based on recent tests by Nelson and Harder, [140] who tested standard respirator cartridges against many types of industrial organic solvents, it is now possible to estimate the service life of approved organic vapor canisters or cartridges against 1,1,1-trichloroethane. With a test concentration of 1,000 ppm of 1,1,1-trichloroethane, they reported that the standard organic vapor cartridge has a service life of 59 minutes before a breakthrough 100 ppm of 1,1,1-trichloroethane. Under the same test conditions, a service life of 90 minutes for carbon tetrachloride was obtained. The standard industrial size gas mask canister is tested against 20,000 ppm of carbon tetrachloride and it must have a service life of 12 minutes before a breakthrough of 5 ppm. Since it has been shown that charcoal can absorb 1.5 times as much carbon tetrachloride as 1,1,1-trichloroethane, it can be estimated that the service life for an industrial size canister is 150 minutes in an atmosphere of 1,000 ppm 1,1,1-trichloroethane.

NIOSH periodically issues a list of approved or certified respiratory protective devices. All devices approved by the Bureau of Mines are listed in Information Circular 8559 and supplements. All types of devices certified by the Testing and Certification Laboratory of NIOSH are listed

in separate publications. These are available from the Testing and Certification Laboratory, NIOSH, Morgantown, West Virginia, 26505.

VII. RESEARCH NEEDS

Epidemiologic Studies

The evidence from epidemiologic studies is somewhat contradictory. Several studies [36,47,50,62,64] reported no adverse effects in man at concentrations of 100-800 ppm of 1,1,1-trichloroethane. Unfortunately, individual data is lacking in some, and experimental details are lacking in all of these studies.

Interpretation is further complicated by other studies [61,63] which report symptoms attributable to "substances used in the work environment," not necessarily 1,1,1-trichloroethane, at 10-250 ppm. These studies suffer from (1) exposure to vapors in addition to those of 1,1,1-trichloroethane (2) inadequate characterization of exposure concentrations and (3) intervening variables such as skin exposure and psychological effects. Therefore, carefully controlled, cross-sectional studies, which report individual data, adequately characterize the environment and control for exposure to airborne contaminants other than 1,1,1-trichloroethane, should be conducted.

Chronic Animal Studies

Although a number of animal studies have indicated chronic changes in the heart, [77] nervous reflex activity, [77] respiratory function, [77,85,88] and hepatic anatomy [41,77,88] resulting from "long term" exposure to 1,1,1-trichloroethane, most of these studies have used continuous exposures, which are not typical of the occupational setting.

Therefore, studies investigating the chronic effects of long term exposure to 1,1,1-trichloroethane should be conducted that utilize exposure schedules similar to those observed in industry, ie, an 8 to 10-hour day, 5 days per week.

Mutagenicity, Teratogenicity, Carcinogenicity

As only one study was available on teratogenicity [103], further studies are needed concerning the influence of 1,1,1-trichloroethane upon the mother and fetus. While it has not been determined if 1,1,1-trichloroethane is teratogenic, mutagenic, or carcinogenic in man, and it is not known what the tolerated dose of 1,1,1-trichloroethane is in the embryo or fetus, there is little doubt that many detrimental substances in the maternal bloodstream can readily reach the embryo or fetus via the placenta. As 1,1,1-trichloroethane concentrations in the occupational environment will lead to small but measurable concentrations of this substance in the bloodstream, additional information is needed.

A study by Dow Chemical Company in rats was inconclusive, as spontaneous neoplastic lesions occurred in both control and experimental groups. [90] A carcinogenesis study, as yet incomplete, by the National Cancer Institute may provide more data.

Synergistic Effects

From a review of the literature, it is evident that research must be initiated to answer important questions concerned with exposure to 1,1,1-trichloroethane and that a concerted effort must be directed toward

determining the possible additive, synergistic, or inhibitory effects of 1,1,1-trichloroethane, in combination with other hydrocarbons and organic solvents, on dose-response relationships.

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