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## “Crystalline Silica Exposure” Health Hazard Information for Construction Employees

### *What is crystalline silica?*

Crystalline silica is a basic component of soil, sand, granite, and many other minerals. Quartz is the most common form of crystalline silica. Cristobalite and tridymite are two other forms of crystalline silica. All three forms may become respirable size particles when workers chip, cut, drill, or grind objects that contain crystalline silica.

### *What are the hazards of crystalline silica?*

Silica exposure remains a serious threat to nearly 2 million U.S. workers, including more than 100,000 workers in high risk jobs such as abrasive blasting, foundry work, stonecutting, rock drilling, quarry work and tunneling. The seriousness of the health hazards associated with silica exposure is demonstrated by the fatalities and disabling illnesses that continue to occur in sandblasters and rockdrillers. Crystalline silica has been classified as a human lung carcinogen. Additionally, breathing crystalline silica dust can cause **silicosis**, which in severe cases can be disabling, or even fatal. The respirable silica dust enters the lungs and causes the formation of scar tissue, thus reducing the lungs’ ability to take in oxygen. There is no cure for silicosis. Since silicosis affects lung function, it makes one more susceptible to lung infections like **tuberculosis**. In addition, smoking causes lung damage and adds to the damage caused by breathing silica dust.

## What are the symptoms of silicosis?

Silicosis is classified into three types: chronic/classic, accelerated, and acute.

**Chronic/classic silicosis**, the most common, occurs after 15–20 years of moderate to low exposures to respirable crystalline silica. Symptoms associated with chronic silicosis may or may not be obvious; therefore, workers need to have a chest x-ray to determine if there is lung damage. As the disease progresses, the worker may experience shortness of breath upon exercising and have clinical signs of poor oxygen/carbon dioxide exchange. In the later stages, the worker may experience fatigue, extreme shortness of breath, chest pain, or respiratory failure.

**Accelerated silicosis** can occur after 5–10 years of high exposures to respirable crystalline silica. Symptoms include severe shortness of breath, weakness, and weight loss. The onset of symptoms takes longer than in acute silicosis.

**Acute silicosis** occurs after a few months or as long as 2 years following exposures to extremely high concentrations of respirable crystalline silica. Symptoms of acute silicosis include severe disabling shortness of breath, weakness, and weight loss, which often leads to death.

For more information, contact your local OSHA office (listed in the telephone directory under United States Government—Department of Labor—Occupational Safety and Health Administration) or visit OSHA’s website at [www.osha.gov](http://www.osha.gov) <<http://www.osha.gov>>.



## ***Where are construction workers exposed to crystalline silica?***

Exposure occurs during many different construction activities. The most severe exposures have occurred during abrasive blasting with sand to remove paint and rust from bridges, tanks, concrete structures, and other surfaces. Other construction activities that may result in severe exposure include: jack hammering, rock/well drilling, concrete mixing, concrete drilling, brick and concrete block cutting and sawing, tuck pointing, tunneling operations.

## ***How is OSHA addressing exposure to crystalline silica?***

OSHA has an established Permissible Exposure Limit, or PEL, which is the maximum amount of crystalline silica to which workers may be exposed during an 8-hour work shift (29 *CFR* 1926.55, 1910.1000). OSHA also requires hazard communication training for workers exposed to crystalline silica, and requires a respirator protection program until engineering controls are implemented. Additionally, OSHA has a National Emphasis Program (NEP) for Crystalline Silica exposure to identify, reduce, and eliminate health hazards associated with occupational exposures.

## ***What can employers/employees do to protect against exposures to crystalline silica?***

- Replace crystalline silica materials with safer substitutes, whenever possible.
- Provide engineering or administrative controls, where feasible, such as local exhaust ventilation, and blasting cabinets. Where necessary to reduce exposures below the PEL, use protective equipment or other protective measures.
- Use all available work practices to control dust exposures, such as water sprays.
- Wear only a N95 NIOSH certified respirator, if respirator protection is required. Do not alter the respirator. Do not wear a tight-fitting respirator with a beard or mustache that prevents a good seal between the respirator and the face.
- Wear only a Type CE abrasive-blast supplied-air respirator for abrasive blasting.
- Wear disposable or washable work clothes and shower if facilities are available. Vacuum the dust from your clothes or change into clean clothing before leaving the work site.
- Participate in training, exposure monitoring, and health screening and surveillance programs to monitor any adverse health effects caused by crystalline silica exposures.
- Be aware of the operations and job tasks creating crystalline silica exposures in your workplace environment and know how to protect yourself.
- Be aware of the health hazards related to exposures to crystalline silica. Smoking adds to the lung damage caused by silica exposures.
- Do not eat, drink, smoke, or apply cosmetics in areas where crystalline silica dust is present. Wash your hands and face outside of dusty areas before performing any of these activities.
- Remember: If it's silica, it's not just dust.