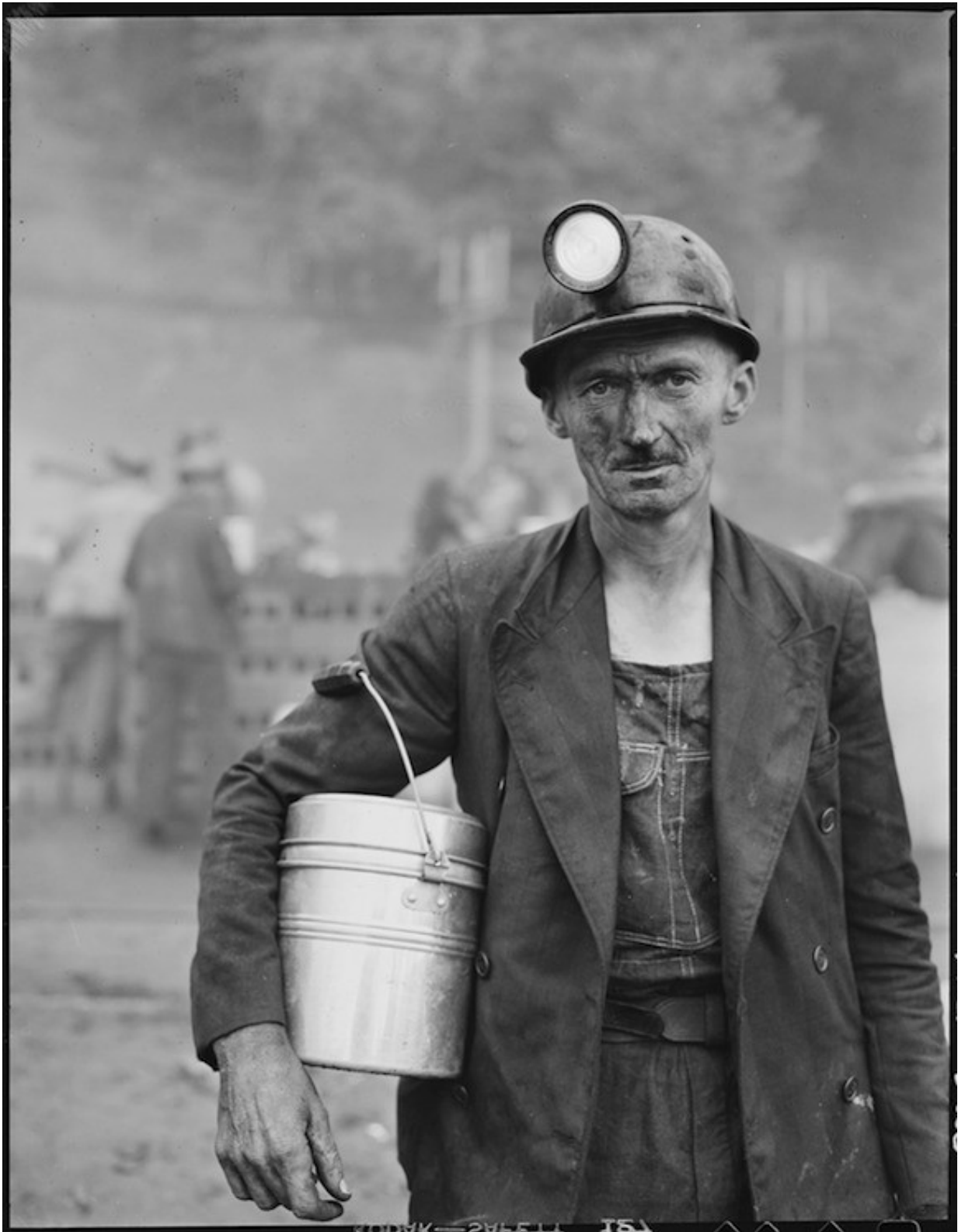


No safe level of coal dust exposure as miner's disease makes comeback

September 27 2016, by Elisabeth Lopez



The health of thousands of past and present coal mine workers is potentially at risk, in the wake of revelations that black lung disease is making a comeback.

Since May last year, Queensland has confirmed 15 cases of Coal Worker's Pneumoconiosis (CWP), a fatal, [incurable disease](#) thought to have been eliminated 30 years ago in Australia by tighter regulations and modern mining methods.

Researchers say there is little scientific evidence for current regulations on exposure to coal dust.

Clinical director of the University of Melbourne's Lung Health Research Centre, Professor Lou Irving, said scientists do not even know if there is a safe level of exposure.

"There are regulations limiting the amount of dust that coal miners can be exposed to, but they have no basis in science," Professor Irving said.

"We simply do not know at what point exposure to dust triggers lung stiffening, or fibrosis and we urgently need to address this so we can catch it before it becomes incurable."

The Centre, a partnership between the University's Department of Pharmacology and the Royal Melbourne Hospital, has brought together a team of cross-disciplinary researchers to push diagnosis and management of the disease beyond measuring breathing and chest x-rays.

Centre co-director and pharmacologist, Professor Alastair Stewart said new drugs, advanced technology and genomics had opened up new

possibilities for this research.

"We can investigate more accurate coal dust exposure levels and monitoring, and use modern techniques to improve screening and investigate individual sensitivity to exposure," Professor Stewart said.

The disease is believed to affect as many as 17 per cent of workers in Chinese coalmines, 36 per cent in Colombia and about 3 per cent in the United States. At its peak in 2008, the Australian [coal mining](#) industry employed about 36,700 people, according to the Australian Bureau of Statistics.

"We suspect Australian rates will be similar to the US, but there is so much we don't know," Professor Stewart said.

"The battle against this disease is only just beginning."

Provided by University of Melbourne

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