



MEDIA STATEMENT



Asbestos Mineworkers Miss Out On Compensation Because Of Poor Diagnosis

Only half of former asbestos mine workers who have an asbestos related disease are diagnosed while they are still alive.

This was the surprising finding by researchers who compared the medical records of 149 former asbestos mineworkers with their autopsy findings¹.

“There was a very high rate of asbestos-related disease. Sixty three percent had an ARD at autopsy. But only half of the cases were diagnosed in life,” Professor Jill Murray, of the School of Public Health at the University of the Witwatersrand, told the International Mesothelioma Interest Group Conference currently under way at the Cape Town International Convention Centre.

Murray conducted the research with a colleague, Zodwa Ndlovu, and Dr Jim teWaterNaude, medical consultant to the Asbestos and Kgalagadi Relief Trusts, which commissioned the research.

“This highlights the difficulty of making accurate diagnoses of these diseases,” said Murray. “The clinical diagnosis of asbestos-related diseases is not straightforward because other diseases may have similar symptoms. This raises the concern that poorly resourced public health care facilities may be missing many cases of disease.”

This shortcoming meant that many former mineworkers with asbestos related diseases were not able to claim compensation from the state, or the trusts, while they were still alive.

The research team concluded that “the cessation of asbestos mining and usage in South Africa has drastically reduced occupational exposures but because of long latency, ARDs are still seen in former asbestos miners and workers. In addition, widespread contamination of the environment following decades of production, suggests an indefinite ARD epidemic in this country.”

¹ CLINICO-PATHOLOGICAL CORRELATION OF ASBESTOS-RELATED DISEASES IN FORMER MINERS, Ndlovu N, School of Public Health, University of the Witwatersrand and Pathology Division, National Institute for Occupational Health, National Health Laboratory Service; Murray J, School of Public Health, University of the Witwatersrand, Johannesburg, South Africa; teWaterNaude J, Diagnostic Research and School of Public Health and Family Medicine, University of Cape Town.