Letters to the Editor

Status of the Ban on Asbestos Use in Spain and Latin America

Situación de la prohibición del uso de asbesto en España y Latinoamérica

To the Editor:

Although the first reports on the deleterious effect of asbestos exposure on health were published at the beginning of the 20th century, this mineral continues to be one of the main materials used in construction, building, and the automotive and textile industries, among others. For this reason, many countries have passed laws banning the use of all forms of asbestos, and others have placed restrictions on production and export. At present, 54 countries, mostly in Europe (including Spain), have anti-asbestos legislation, while it has been introduced in only 4 Latin American countries: Argentina, Chile, Uruguay and Honduras. In 1986, Spain passed the Toxic and Dangerous Waste Act 20, listing asbestos (dust and fibers) as a toxic or dangerous substance. Limitations were later placed on the sale of asbestos and its use was banned, except in companies involved in demolition work and the production of chlor-alkalis. Health and safety provisions have also been introduced for the workers exposed to these fibers.

The first country in Latin America to introduce similar legislation was Argentina, where the use of amphiboles was banned in 2000 and the use and import of chrysotile in 2001. In 2001, Chile passed Ministry of Health Decree 656 banning the production, importation, distribution, sale and use of any type of asbestos or asbestos-containing materials. Similar legislation banning the production and importation of asbestos was passed in Uruguay in 2002. Two years later, Honduras banned the use, importation, production, distribution, sale, transport, and storage of products containing chrysotile, anthophyllite, actinolite, amosite, and crocidolite, with the exception of thermal or electrical insulation in electrical appliances, electronic equipment and personal fire protection equipment.

In our opinion, the long latency period of asbestos-related diseases and the difficulty of proving the benefit of anti-asbestos laws are 2 of the factors preventing a general worldwide ban of this product. A third factor is the pro-asbestos lobby mounted by producers and consumers who oppose such legislation. The human development index (HDI), a comparative measure of life expectancy, illiteracy, education and living standards is an important factor in this equation. There are 47 countries with a very high HDI, of which 37 (79%) already have anti-asbestos legislation, including Chile and Argentina, the only Latin America countries in this group. Meanwhile, the 47 countries with high HDI, the 47 with medium HDI, and the 46 with low HDI, only 9 (19%), 5 (11%) and 1 (2%), respectively, have anti-asbestos laws.

As pulmonologists, we need to push through anti-asbestos legislation to protect our people from this silent epidemic, irrespective of our national level of development.

References