The General Conference of the International Labour Organization,

Having been convened at Geneva by the Governing Body of the International Labour Office, and having met in its 90th Session on 3 June 2002, and

Noting the provisions of the Occupational Safety and Health Convention and Recommendation, 1981, and the Occupational Health Services Convention and Recommendation, 1985, and

Noting also the list of occupational diseases as amended in 1980 appended to the Employment Injury Benefits Convention, 1964, and

Having regard to the need to strengthen identification, recording and notification procedures for occupational accidents and diseases, with the aim of identifying their causes, establishing preventive measures, promoting the harmonization of recording and notification systems, and improving the compensation process in the case of occupational accidents and occupational diseases, and

Having regard to the need for a simplified procedure for updating a list of occupational diseases, and

Having decided upon the adoption of certain proposals with regard to the recording and notification of occupational accidents and diseases, and to the regular review and updating of a list of occupational diseases, which is the fifth item on the agenda of the session, and

Having determined that these proposals shall take the form of a Recommendation;

adopts this twentieth day of June of the year two thousand and two the following Recommendation, which may be cited as the List of Occupational Diseases Recommendation, 2002.

1. In the establishment, review and application of systems for the recording and notification of occupational accidents and diseases, the competent authority should take account of the 1996 Code of practice on the recording and notification of occupational accidents and diseases, and other codes of practice or guides relating to this subject that are approved in the future by the International Labour Organization.

2. A national list of occupational diseases for the purposes of prevention, recording,
notification and, if applicable, compensation should be established by the competent authority, in consultation with the most representative organizations of employers and workers, by methods appropriate to national conditions and practice, and by stages as necessary. This list should:

(a) for the purposes of prevention, recording, notification and compensation comprise, at the least, the diseases enumerated in Schedule I of the Employment Injury Benefits Convention, 1964, as amended in 1980;

(b) comprise, to the extent possible, other diseases contained in the list of occupational diseases as annexed to this Recommendation; and

(c) comprise, to the extent possible, a section entitled "Suspected occupational diseases".

3. The list as annexed to this Recommendation should be regularly reviewed and updated through tripartite meetings of experts convened by the Governing Body of the International Labour Office. Any new list so established shall be submitted to the Governing Body for its approval, and upon approval shall replace the preceding list and shall be communicated to the Members of the International Labour Organization.

4. The national list of occupational diseases should be reviewed and updated with due regard to the most up-to-date list established in accordance with Paragraph 3 above.

5. Each Member should communicate its national list of occupational diseases to the International Labour Office as soon as it is established or revised, with a view to facilitating the regular review and updating of the list of occupational diseases annexed to this Recommendation.

6. Each Member should furnish annually to the International Labour Office comprehensive statistics on occupational accidents and diseases and, as appropriate, dangerous occurrences and commuting accidents with a view to facilitating the international exchange and comparison of these statistics.

ANNEX

LIST OF OCCUPATIONAL DISEASES

1. Diseases caused by agents

1.1. Diseases caused by chemical agents

1.1.1. Diseases caused by beryllium or its toxic compounds

1.1.2. Diseases caused by cadmium or its toxic compounds

1.1.3. Diseases caused by phosphorus or its toxic compounds
1.1.4. Diseases caused by chromium or its toxic compounds
1.1.5. Diseases caused by manganese or its toxic compounds
1.1.6. Diseases caused by arsenic or its toxic compounds
1.1.7. Diseases caused by mercury or its toxic compounds
1.1.8. Diseases caused by lead or its toxic compounds
1.1.9. Diseases caused by fluorine or its toxic compounds
1.1.10. Diseases caused by carbon disulphide
1.1.11. Diseases caused by the toxic halogen derivatives of aliphatic or aromatic hydrocarbons
1.1.12. Diseases caused by benzene or its toxic homologues
1.1.13. Diseases caused by toxic nitro- and amino-derivatives of benzene or its homologues
1.1.14. Diseases caused by nitroglycerine or other nitric acid esters
1.1.15. Diseases caused by alcohols, glycols or ketones
1.1.16. Diseases caused by asphyxiants: carbon monoxide, hydrogen cyanide or its toxic derivatives, hydrogen sulphide
1.1.17. Diseases caused by acrylonitrile
1.1.18. Diseases caused by oxides of nitrogen
1.1.19. Diseases caused by vanadium or its toxic compounds
1.1.20. Diseases caused by antimony or its toxic compounds
1.1.21. Diseases caused by hexane
1.1.22. Diseases of teeth caused by mineral acids
1.1.23. Diseases caused by pharmaceutical agents
1.1.24. Diseases caused by thallium or its compounds
1.1.25. Diseases caused by osmium or its compounds
1.1.26. Diseases caused by selenium or its compounds
1.1.27. Diseases caused by copper or its compounds

1.1.28. Diseases caused by tin or its compounds

1.1.29. Diseases caused by zinc or its compounds

1.1.30. Diseases caused by ozone, phosgene

1.1.31. Diseases caused by irritants: benzoquinone and other corneal irritants

1.1.32. Diseases caused by any other chemical agents not mentioned in the preceding items 1.1.1 to 1.1.31, where a link between the Exposure of a worker to these chemical agents and the diseases suffered is established

1.2. Diseases caused by physical agents

1.2.1. Hearing impairment caused by noise

1.2.2. Diseases caused by vibration (disorders of muscles, tendons, bones, joints, peripheral blood vessels or peripheral nerves)

1.2.3. Diseases caused by work in compressed air

1.2.4. Diseases caused by ionizing radiations

1.2.5. Diseases caused by heat radiation

1.2.6. Diseases caused by ultraviolet radiation

1.2.7. Diseases caused by extreme temperature (e.g. sunstroke, frostbite) 1.2.8. Diseases caused by any other physical agents not mentioned in the preceding items 1.2.1 to 1.2.7, where a direct link between the exposure of a worker to these physical agents and the diseases suffered is established

1.3. Diseases caused by biological agents

1.3.1. Infectious or parasitic diseases contracted in an occupation where there is a particular risk of contamination

2. Diseases by target organ systems

2.1. Occupational respiratory diseases

2.1.1. Pneumoconioses caused by sclerogenic mineral dust (silicosis, anthracosilicosis, asbestosis) and silicotuberculosis, provided that silicosis is an essential factor in causing the resultant incapacity or death

2.1.2. Bronchopulmonary diseases caused by hard-metal dust
2.1.3. Bronchopulmonary diseases caused by cotton, flax, hemp or sisal dust (byssinosis)

2.1.4. Occupational asthma caused by recognized sensitizing agents or irritants inherent to the work process

2.1.5. Extrinsic allergic alveolitis caused by the inhalation of organic dusts, as prescribed by national legislation

2.1.6. Siderosis

2.1.7. Chronic obstructive pulmonary diseases

2.1.8. Diseases of the lung caused by aluminium

2.1.9. Upper airways disorders caused by recognized sensitizing agents or irritants inherent to the work process

2.1.10. Any other respiratory disease not mentioned in the preceding items 2.1.1 to 2.1.9, caused by an agent where a direct link between the exposure of a worker to this agent and the disease suffered is established

2.2. Occupational skin diseases

2.2.1. Skin diseases caused by physical, chemical or biological agents not included under other items

2.2.2. Occupational vitiligo

2.3. Occupational musculo-skeletal disorders

2.3.1. Musculo-skeletal diseases caused by specific work activities or work environment where particular risk factors are present

Examples of such activities or environment include:

(a) rapid or repetitive motion

(b) forceful exertion

(c) excessive mechanical force concentration

(d) awkward or non-neutral postures

(e) vibration

Local or environmental cold may increase risk
3. Occupational cancer

3.1. Cancer caused by the following agents

3.1.1. Asbestos

3.1.2. Benzidine and its salts

3.1.3. Bis chloromethyl ether (BCME)

3.1.4. Chromium and chromium compounds

3.1.5. Coal tars, coal tar pitches or soots

3.1.6. Beta-naphthylamine

3.1.7. Vinyl chloride

3.1.8. Benzene or its toxic homologues

3.1.9. Toxic nitro- and amino-derivatives of benzene or its homologues

3.1.10. Ionizing radiations

3.1.11. Tar, pitch, bitumen, mineral oil, anthracene, or the compounds, products or residues of these substances

3.1.12. Coke oven emissions

3.1.13. Compounds of nickel

3.1.14. Wood dust

3.1.15. Cancer caused by any other agents not mentioned in the preceding items 3.1.1 to 3.1.14, where a direct link between the exposure of a worker to this agent and the cancer suffered is established

4. Other diseases

4.1. Miners’ nystagmus

Cross references

Conventions: C121 Employment Injury Benefits Convention, 1964
Conventions: C155 Occupational Safety and Health Convention, 1981
Conventions: C161 Occupational Health Services Convention, 1985
Recommendations: R164 Occupational Safety and Health Recommendation, 1981
Recommendations: R171 Occupational Health Services Recommendation, 1985
For further information, please contact the International Labour Standards Department (NORMES) by email:

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