



**Statement by John Howard, M.D.
Director, NIOSH**

National Institute for
Occupational Safety and Health
Centers for Disease Control
and Prevention (CDC)
395 E Street, SW - Ste 9200
Washington, DC 20201
PH: 202-245-0625

The National Institute for Occupational Safety and Health (NIOSH) is honored to have a role in national efforts to prevent coal workers' pneumoconiosis, also known as black lung. Research and health surveillance to help achieve this goal are among NIOSH's core responsibilities under the Federal Coal Mine Health and Safety Act.

Once a miner's lungs are damaged as a result of exposure to coal mine dust, the condition cannot be reversed. In advanced stages, disability and death can result. Therefore, it is critically important to 1) identify cases early enough to guide treatment and to prevent the individual's condition from worsening, 2) chart trends in cases to design early interventions for protecting groups or communities of coal miners who may be at risk, and 3) curtail new cases by preventing hazardous coal mine dust exposures in the first place.

NIOSH has worked closely with the Mine Safety and Health Administration (MSHA), coal miners and their representatives, the mining industry, and others to address this terrible work-related disease. For nearly three decades after the passage of the mine health and safety act, those efforts were met with success. Between the early 1970s and the late 1990s, the prevalence of black lung disease in among U.S. coal miners with more than 20 years' tenure who participated in the NIOSH Coal Workers' Health Surveillance Program decreased by about 90 percent.

However, in a dismaying trend, from the late 1990s to the time of our most recent data in 2005-2006, the prevalence of this work-related disease more than doubled among coal miners with greater than 20 years' tenure. Increased risk has been reported in several geographic areas, in those working at the coal face, in smaller mines, and among contract miners. Severe cases have recently been identified in miners as young as 39. Vigorous partnerships are essential for understanding the reasons for persistence of this preventable disease, and for guiding effective preventive measures.

NIOSH is committed to meeting those needs. For example, in collaboration with MSHA, we have developed, staffed, and implemented the Enhanced Coal Workers' Health Surveillance Program, which is designed to encourage and facilitate coal miners' participation in health screening to detect black lung. NIOSH's mobile health unit makes confidential x-ray screening and related medical evaluations available to coal miners at times and locations designed to be as convenient for them as possible.

Also in partnership with MSHA, we have made promising strides in developing state-of-the-art technologies for better measuring and controlling coal mine dust exposures. One such advancement, the personal dust monitor or PDM, which measures exposures in near real-time, exemplifies NIOSH's commitment to working with our partners in moving the products of research from the laboratory to practical application in workplaces.

We will continue, strengthen, and expand such partnerships as we and our stakeholders strive to eliminate black lung.