



## **Asbestos Risks**

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## **Editorial**

Exaggerated claims of asbestos risks in Thailand first appeared in the media a few years after the beginning of importation of the mineral for industrial use, and such claims have surged from time to time. Pros and cons of the discussion, however, are evidently derived from non-scientific understanding and sometimes fraud, seemingly occurring against a political background, which has proven confounding. Historically, most mesotheliomas, exclusively a cancer of the pleura or peritoneum among other organs with mesothelium lining, were exclusively referred to as sentinel disease for asbestos exposure, i.e. an epidemiologic marker for asbestos. More recently, arguments have been emerging based on the evidence of atmospheric asbestos pollution in Thailand, the results of which did not conform to the incidence of asbestos-related diseases in the country. In addition to a few risk factors other than asbestos, most mesothelioma cases are claimed to be a consequence of spontaneous tumor formation; a report by Bertham Price projected that around the year 2040 virtually all mesothelioma cases in the United States will be background cases [1].

Of note: in Thailand, two articles reported the results of several hundred routine autopsies in two university hospitals, performed 34 years apart; they showed asbestos bodies in the lungs of patients. The findings of both studies implied that Thai people at large were being exposed to increasing amounts of asbestos fibers floating in the ambient atmosphere. However, the studies did not claim that such exposure had led to the death of those who had been exposed to asbestos bodies in their lungs in contrast to the general belief that exposure to even a small amount of asbestos would readily cause asbestos-related diseases.

The phenomenon has been explained by the fact that Thais are less likely to develop asbestos-related diseases because they lack susceptibility genes needed for the development of asbestos-related conditions. Another explanation may be that the long incubation period of mesothelioma may not cause disease during an exposed person's lifetime. At this point, setting aside political decisions, it is the time to act in light of the ample scientific opinion on the industrial uses of chrysotile in this country. The debate should come to an end [2].

## References

- Tiamkao S, Bovornkitti S (2023) Are mesothelioma patients in Thailand background cases? KUHJ 4(2): 105-106.
- 2. Bovornkitti S (2021) Time to Act. AMJAM 21(2): 163.