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Dear Cal/OSHA

We are writing from the Bureau of Environmental and Occupational Health in Wisconsin's Department of Health Services (Division of Public Health) in support of the California Division of Occupational Safety and Health's *Draft Standard for Comment - Prohibition of Fabrication and Manufacture of Artificial Stone with more than 1.0% Crystalline Silica*. Silicosis is a reportable condition in Wisconsin and we have identified cases of silicosis among engineered stone workers in our state. Those cases were notably younger than other silicosis cases among those who were exposed through other means (e.g., construction or foundry work).

As you know, the popularization of engineered stone in countertops and benchtops for kitchens and bathrooms has led to a surge of severe, rapidly progressive silicosis in younger workers. These products, also called quartz, artificial stone, or manufactured stone, often contain more than 90% crystalline silica compared to about 30% crystalline silica in natural stone.

Nationally, accelerated and acute silicosis has been increasingly recognized among workers who fabricate or install engineered-stone countertops with many cases leading to respiratory impairment and need for supplemental oxygen, lung transplantation, and/or death.

Patients with silicosis may initially be diagnosed with pneumonia or recurrent respiratory infections, asthma, COPD, sarcoidosis, idiopathic pulmonary fibrosis or another interstitial lung disease, or tuberculosis and non-tuberculosis mycobacterial infections. Exposure to RCS is also associated with lung cancer, COPD, chronic kidney disease, autoimmune diseases (e.g., rheumatoid arthritis, systemic sclerosis), and mycobacterial infections.

Occupational health follows the "hierarchy of controls" in making recommendations to protect worker health. Elimination and substitution of harmful products or substances are at the top of the hierarchy, as they are the most effective means of health protection. Current engineered stone products pose severe health risks due to their high silica content and the size of the particulate matter released when such stone slabs

are cut, polished, or otherwise disturbed and prepared for installation. The risks of such products make elimination or substitution imperative. The proposed rules are an important step towards achieving this and ensuring the use of safer alternatives. We hope that such rules can pave the way for worker protection in California and beyond.

Thank you in advance for your time.

Sincerely,

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