

# Περιβαλλοντικά και Επαγγελματικά Αίτια Καρκινογένεσης

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Ομώνυμου Εργαστηρίου

# Carcinogenesis

- Cancer is caused by changes to certain genes that alter the way our cells function
- Some of these genetic changes occur naturally when DNA is replicated during the process of cell division
- Others are the result of environmental exposures that damage DNA

# Risk Factors

## What is a carcinogen?

- A carcinogen is a substance, mixture or agent that can cause cancer or it increases the risk of developing cancer. Known carcinogens include viruses (Hepatitis B), hormones (estrogens), chemicals (benzene), naturally occurring minerals (asbestos), alcohol, and solar radiation (ultraviolet radiation)



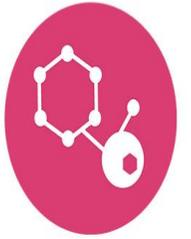
ALCOHOL



DIETARY EXPOSURES



ENVIRONMENTAL EXPOSURES



HORMONES



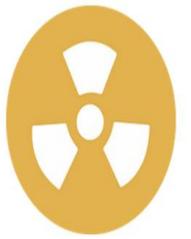
INFECTIONS



OBESITY



OCCUPATIONAL EXPOSURES



RADIATION



TOBACCO

**International Agency for Research on Cancer**



**World Health Organization**

# International Agency for Research on Cancer

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**World Health  
Organization**

## Environmental health

- Clean air, stable climate, adequate water, sanitation and hygiene, safe use of chemicals, protection from radiation, healthy and safe workplaces, sound agricultural practices, health-supportive cities and built environments, and a preserved nature are all prerequisites for good health.

# International Agency for Research on Cancer



## World Health Organization

### Epidemiology

- 13.7 million of deaths per year in 2016, amounting to 24% of the global deaths, are due to modifiable environmental risks
- One in five people worldwide develop cancer during their lifetime. Prevention of cancer has become one of the most significant public health challenges of the 21st century
- Based on current scientific evidence, at least 40% of all cancer cases could be prevented with effective primary prevention measures, and further mortality can be reduced through early detection of tumors



**13%** of deaths in the Americas attributed to environmental risks  
**847,000** deaths per year



**320,000** deaths in the Americas attributed to **air pollution**



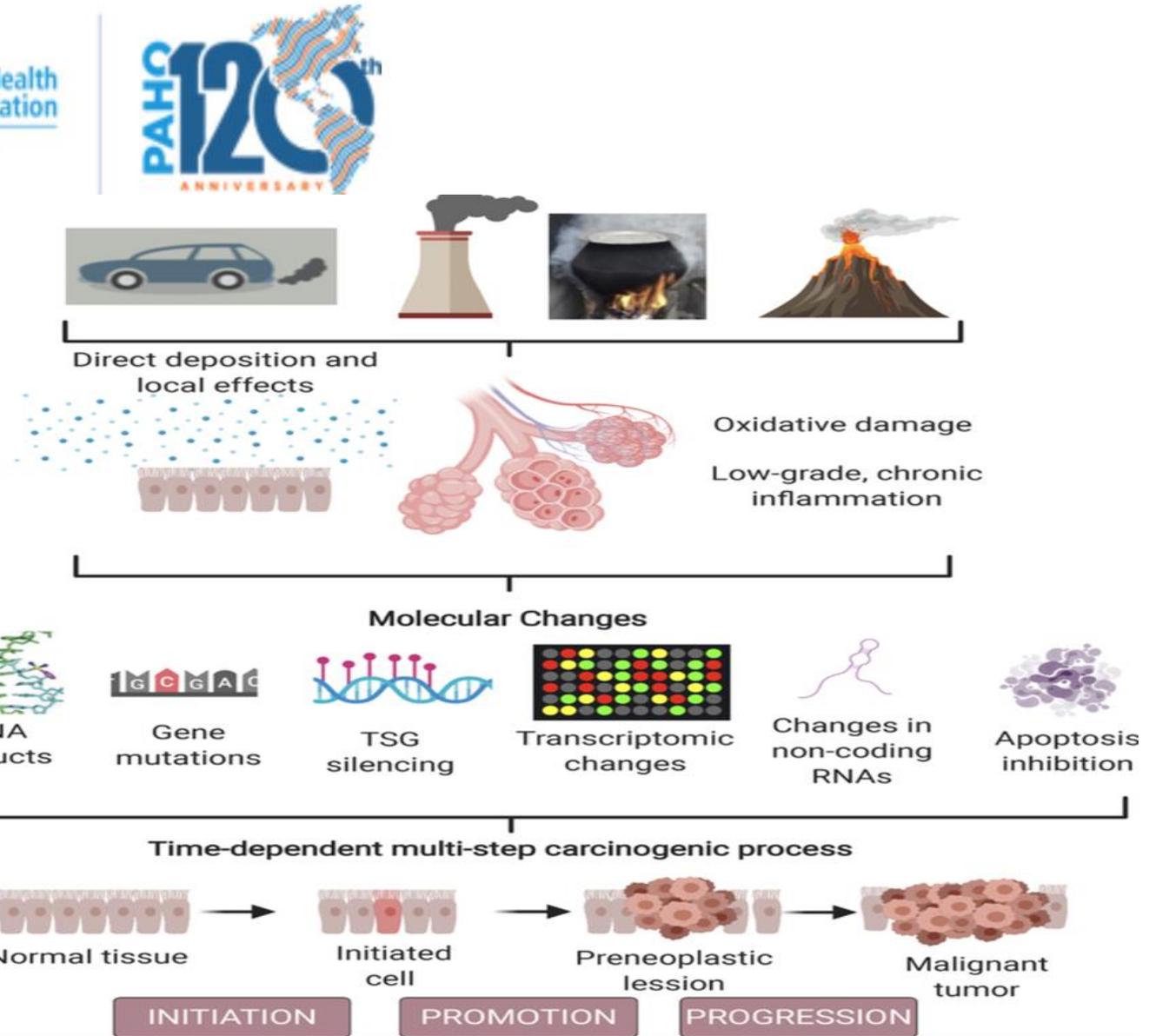
**15.6 million** still practice open defecation



**1.55 million** deaths attributed to **chemical exposures**



More than **80 million** people use **polluting household fuels**



A healthy environment is vital to “ensure healthy lives and promote well-being for all at all ages.”

# Air pollution

- A complex mixture of **solid particles**, **liquid droplets**, as well as **gases**. It can come from many sources for example: household fuel burning, industrial chimneys, traffic exhausts, power generation, open burning of waste, agricultural practices, desert dust and many other sources
- In 2019, 99% of the world's population was living in places where the WHO air quality guidelines levels were not met
- The combined effects of ambient air pollution and household air pollution are associated with 6.7 million premature deaths annually
- WHO estimates that in 2019, some 11% of **outdoor** air pollution-related premature deaths were due to cancer within the respiratory tract

# Over 3.2 million people

a year die prematurely from household air pollution (2019). Household air pollution is mostly created by using kerosene and solid fuels such as wood with polluting stoves, open fires and lamps.

**Women and children are the most at risk.**



**23%**  
from stroke



**32%**  
from ischaemic heart disease



**19%**  
from chronic obstructive pulmonary disease (COPD)

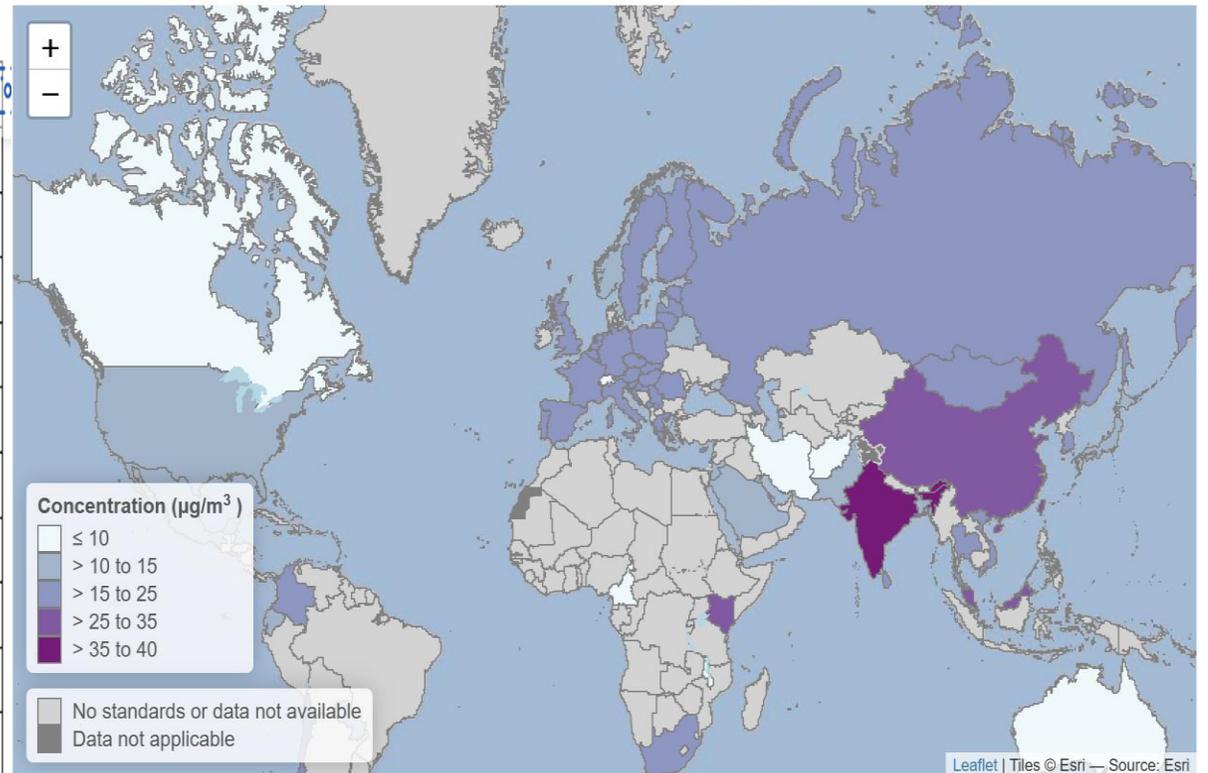
**6%**  
from lung cancer

**21%**  
are due to lower respiratory infections



# Recommended 2021 AQG levels compared to 2005 air quality guidelines

Pollutant	Averaging Time	2005 AQGs	2021 AQGs
PM <sub>2.5</sub> , µg/m <sup>3</sup>	Annual	10	5
	24-hour <sup>a</sup>	25	15
PM <sub>10</sub> , µg/m <sup>3</sup>	Annual	20	15
	24-hour <sup>a</sup>	50	45
O <sub>3</sub> , µg/m <sup>3</sup>	Peak season <sup>b</sup>	-	60
	8-hour <sup>a</sup>	100	100
NO <sub>2</sub> , µg/m <sup>3</sup>	Annual	40	10
	24-hour <sup>a</sup>	-	25
SO <sub>2</sub> , µg/m <sup>3</sup>	24-hour <sup>a</sup>	20	40
CO, mg/m <sup>3</sup>	24-hour <sup>a</sup>	-	4



© World Health Organization (WHO). Source of data: Swiss Tropical and Public Health Institute. The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement. The borders of the map provided reflect the current political and geographic status as of the date of publication (2019).

# Which country had the worst air quality in 2022?

#	COUNTRY	POPULATION	AVG. US
1	 Chad	17,179,740	169
2	 Iraq	43,533,592	164
3	 Pakistan	231,402,117	159
4	 Bahrain	1,463,265	157
5	 Bangladesh	169,356,251	156
6	 Burkina Faso	22,100,683	155
7	 Kuwait	4,250,114	151
8	 India	1,407,563,842	144
9	 Egypt	109,262,178	128
10	 Tajikistan	9,750,064	127
50	 Greece	10,641,221	65

PM2.5 stands for particulate matter that is 2.5 micrometers or less in diameter, going down to sizes as small as 0.001 microns across. Due to its incredibly small size as well as chemical composition depending on the material, it has the ability to cause considerable harm when respired, and as such is used as a major component for calculating the overall AQI, or air quality index



**2022 average PM2.5 concentration in Greece:** 3.8 times the WHO annual air quality guideline value

**2022** Greece cleanest city

Corfu , Ionian Islands

10

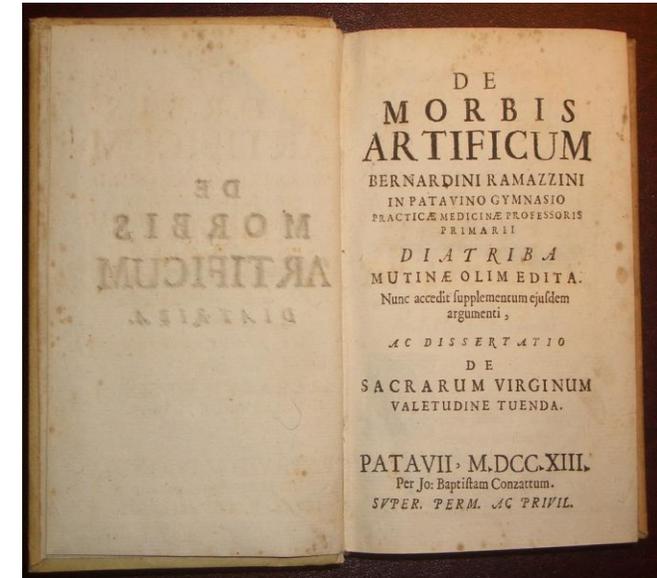
**2022** Greece most polluted city

Vasilika , Central Macedonia

76

# The Father of Occupational Medicine

- Bernardino Ramazzini
- Born in Carpi, Italy, in 1633
- Ramazzini focused on workers' health problems in a systematic and scholarly way
- De Morbis Artificum Diatriba [Diseases of Workers]; the first edition was printed in Modena in 1700



- With cancer accounting for an estimated 53 % of all work-related deaths in the EU and other developed countries, reliable data on workplace exposures to cancer risk factors are essential for both the safety and health of workers and a productive and sustainable economy

# What is occupational cancer?

- Occupational cancer is cancer that is caused wholly or partly by exposure to a carcinogen at work
- The most common types of occupational cancer are lung cancer, bladder cancer and mesothelioma

Type of Cancer	Related to Occupational Exposure Estimated % (USA)
Lung	6.3-13%
Bladder	3-19%
Mesothelioma	85-90% (men); 23-90% (women*)
Leukemia	0.8-2.8%
Laryngeal	1-20% (men)
Skin Cancer (non-melanoma)	1.5-6% (men)
Sinonasal and nasopharyngeal	31-43% (men)
Kidney	0-2.3%
Liver	0.4-1.1 (vinyl chloride only; men)

# Definitions



The agent is a defined substance, a mixture, or a type or source of radiation



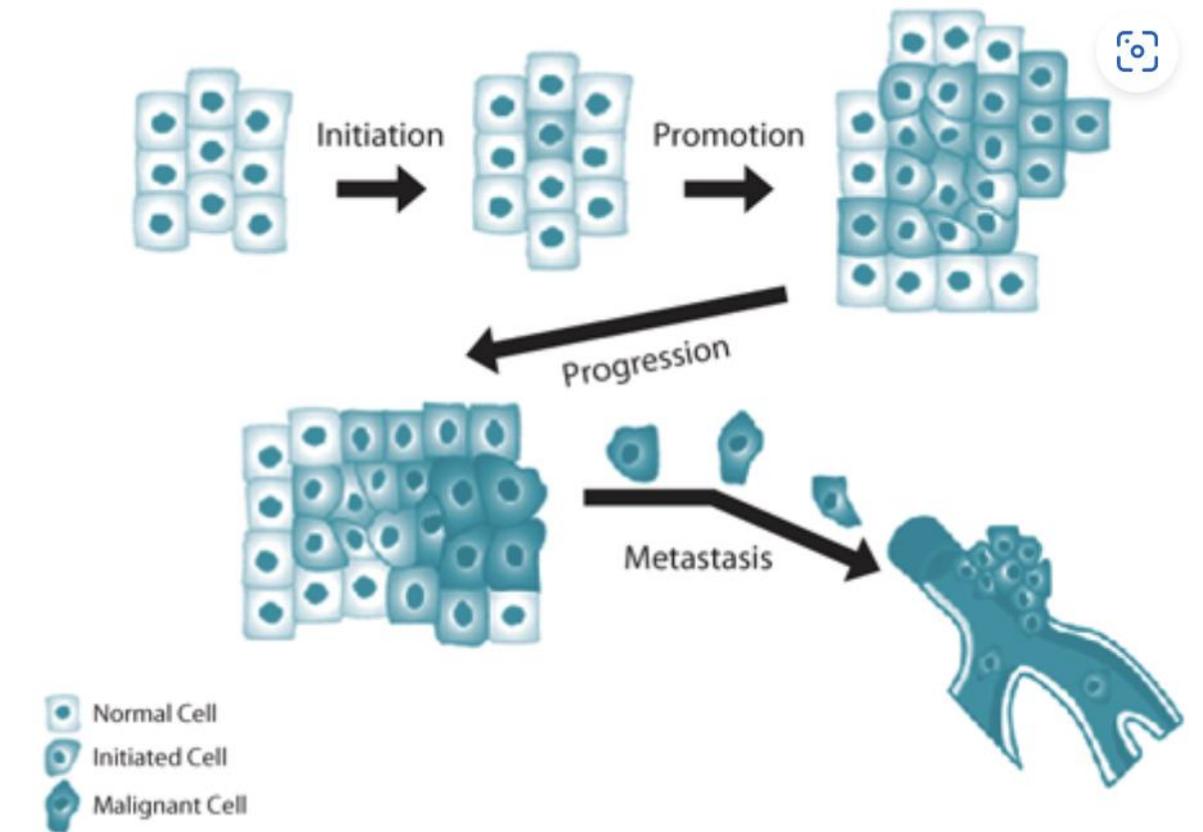
The agent is classified in IARC Group 1 with ‘sufficient evidence of carcinogenicity’ in humans (to ensure that observed exposure-disease associations are causal).



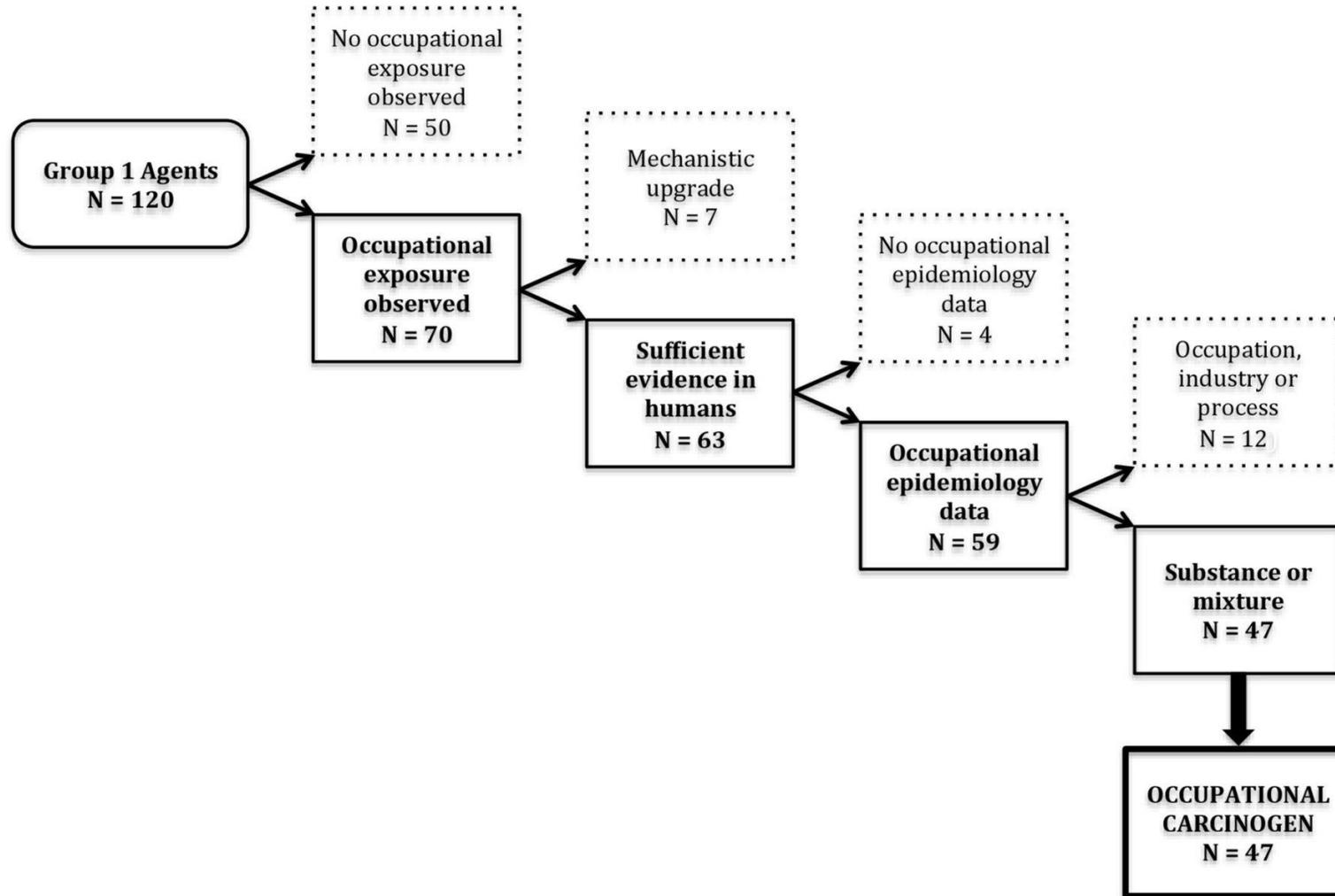
‘Sufficient evidence of carcinogenicity’ in humans is obtained entirely or in part from epidemiologic studies of exposed workers (to ensure that the carcinogen has documented occupational exposure); the occurrence of exposure in workers is documented in the pertinent monograph.

Carcinogenic chemicals are divided into 3 categories:

- known to cause cancer to humans (category 1A);
- presumed to cause cancer to humans (category 1B);
- suspected of causing cancer to humans (category 2)

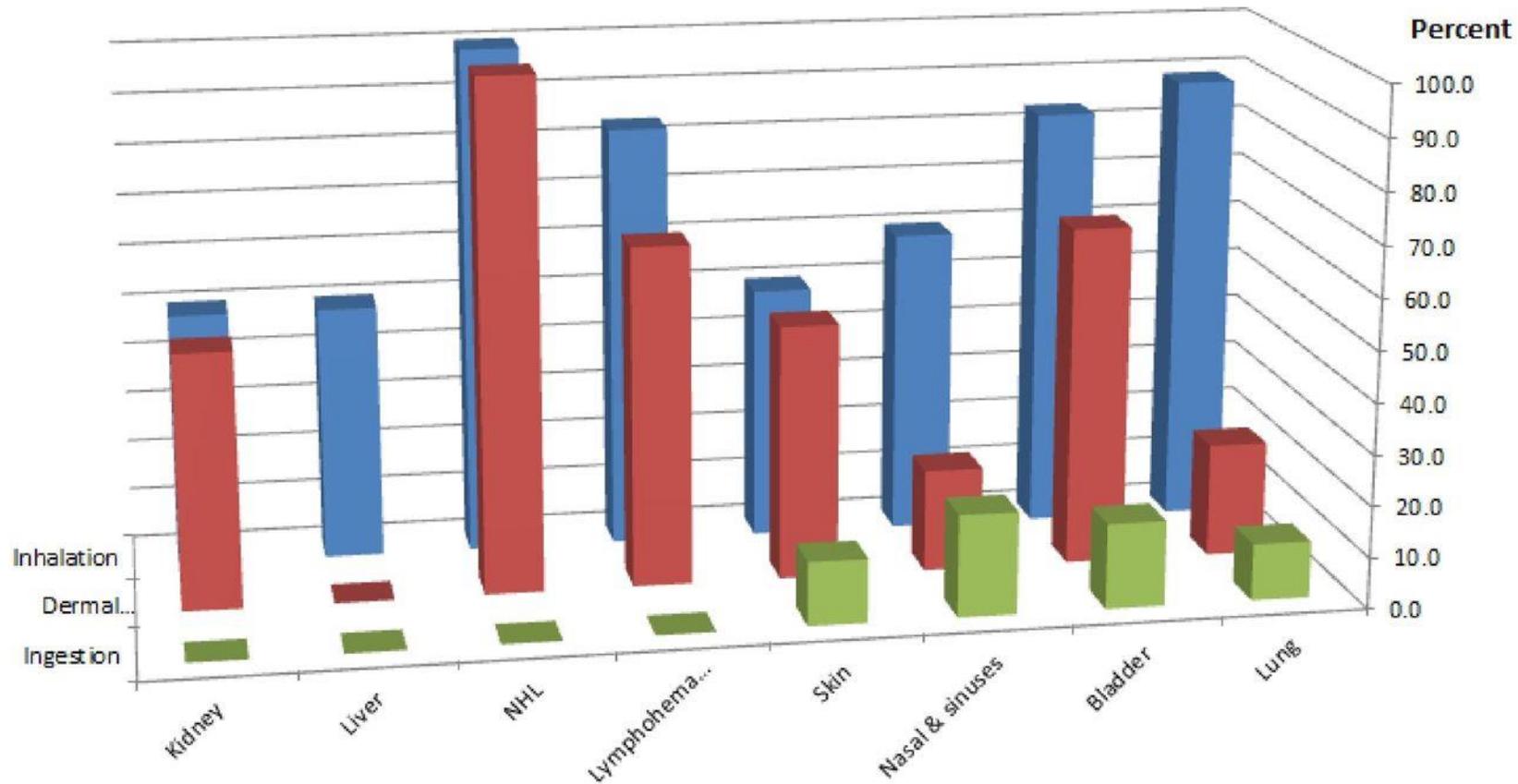


# Defining occupational carcinogens from the International Agency for Research on Cancer (IARC) Monographs (1971–2017).



Dana Loomis et al. *Occup Environ Med* 2018;75:593-603

**Route of exposure to occupational carcinogens and the cancers they cause (ionising radiation not included due to the diversity of exposure routes and cancer types). NHL, non-Hodgkin lymphoma.**



Dana Loomis et al. *Occup Environ Med* 2018;75:593-603

# List of classifications by cancer sites with sufficient or limited evidence in humans, IARC Monographs

Cancer site	Carcinogenic agents with <i>sufficient evidence</i> in humans	Agents with <i>limited evidence</i> in humans
<b>Lip, oral cavity, and pharynx</b>		
Lip		Hydrochlorothiazide Solar radiation
Oral cavity	Acetaldehyde associated with consumption of alcoholic beverages Alcoholic beverages Betel quid with tobacco Betel quid without tobacco Human papillomavirus type 16 Tobacco, smokeless Tobacco smoking	Bitumens, occupational exposure to hard bitumens and their emissions during mastic asphalt work Bitumens, occupational exposure to oxidized bitumens and their emissions during roofing Human papillomavirus type 18
Salivary gland	Acetaldehyde associated with consumption of alcoholic beverages X- and Gamma-radiation	Radioiodines, including iodine-131
Pharynx: oropharynx <sup>b</sup>	Human papillomavirus type 16	
Pharynx: tonsil <sup>b</sup>	Human papillomavirus type 16	
Pharynx: nasopharynx <sup>b</sup>	Epstein–Barr virus Formaldehyde Salted fish, Chinese-style Wood dust	Pickled vegetables (traditional Asian)
Pharynx: all combined	Acetaldehyde associated with consumption of alcoholic beverages Alcoholic beverages Betel quid with tobacco Tobacco smoking	Asbestos (all forms) Bitumens, occupational exposure to hard bitumens and their emissions during mastic asphalt work Bitumens, occupational exposure to oxidized bitumens and their emissions during roofing Opium consumption Tobacco smoke, secondhand

Oesophagus	Acetaldehyde associated with consumption of alcoholic beverages Alcoholic beverages Betel quid with tobacco Betel quid without tobacco Tobacco, smokeless Tobacco smoking X- and Gamma-radiation	Bitumens, occupational exposure to hard bitumens and their emissions during mastic asphalt work Bitumens, occupational exposure to oxidized bitumens and their emissions during roofing Dry cleaning Opium consumption Pickled vegetables (traditional Asian) Rubber manufacturing industry Very hot beverages (squamous cell carcinoma)
Stomach	<i>Helicobacter pylori</i> (infection with) Rubber manufacturing industry Tobacco smoking X- and Gamma-radiation	Art glass, glass containers and pressed ware (manufacture of) Asbestos (all forms) Epstein–Barr virus Lead compounds, inorganic Nitrate or nitrite (ingested) under conditions that result in endogenous nitrosation Opium consumption Pickled vegetables (traditional Asian) Processed meat (consumption of) Salted fish, Chinese-style
Colon	Alcoholic beverages Processed meat (consumption of) Tobacco smoking X- and Gamma-radiation	Asbestos (all forms) Firefighter (occupational exposure as a) Night shift work Red meat (consumption of) <i>Schistosoma japonicum</i> (infection with)

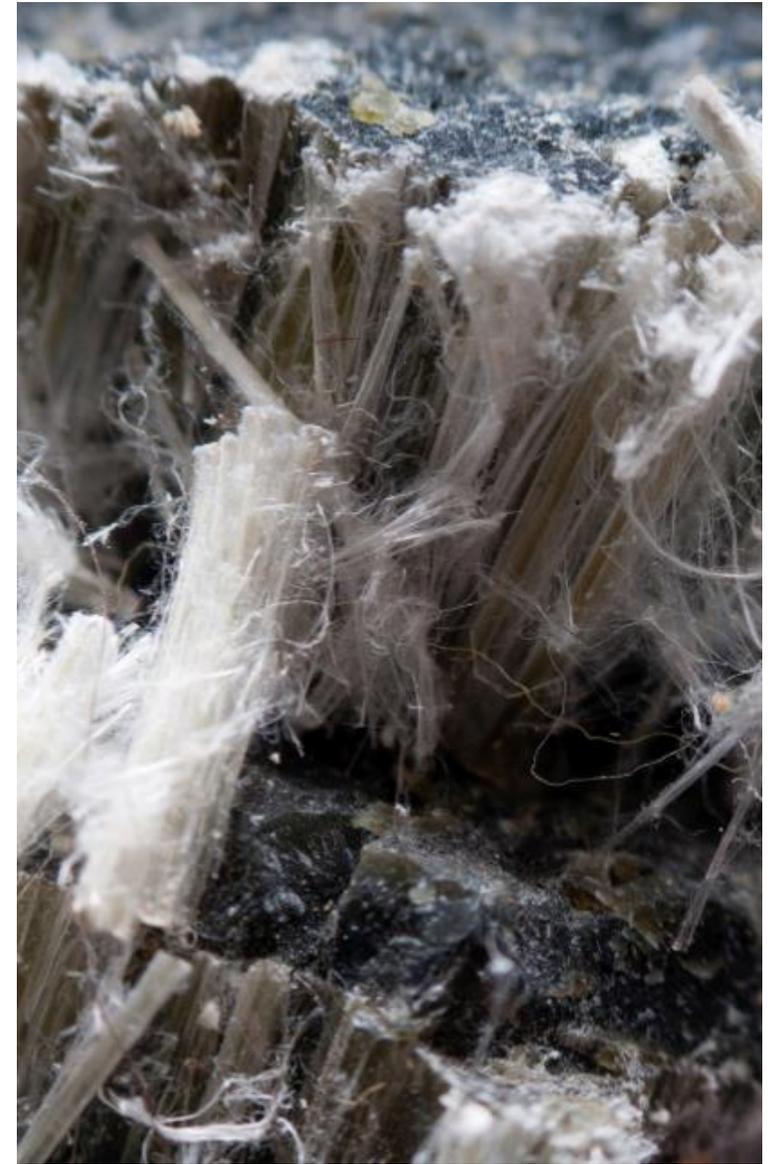
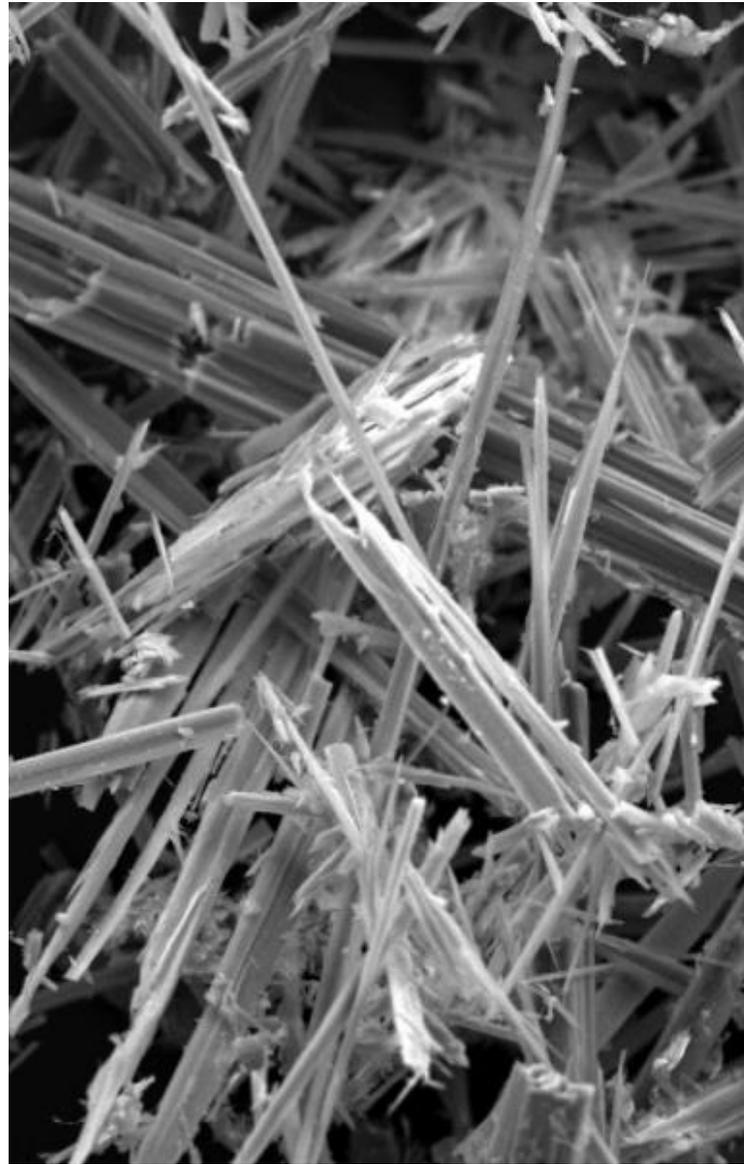
# List of classifications by cancer sites with sufficient or limited evidence in humans, IARC Monographs

Cancer site	Carcinogenic agents with <i>sufficient evidence</i> in humans	Agents with <i>limited evidence</i> in humans
Rectum	Alcoholic beverages Processed meat (consumption of) Tobacco smoking	Asbestos (all forms) Night shift work Red meat (consumption of) <i>Schistosoma japonicum</i> (infection with) X- and Gamma-radiation
Anus	Human immunodeficiency virus type 1 (infection with) Human papillomavirus type 16	Human papillomavirus types 18 and 33
Liver	Aflatoxins Alcoholic beverages Estrogen-progestogen oral contraceptives (combined) Hepatitis B virus (chronic infection with) Hepatitis C virus (chronic infection with) Plutonium Thorium-232 and its decay products Tobacco smoking (in smokers and in smokers' children) Vinyl chloride	Androgenic (anabolic) steroids Arsenic and inorganic arsenic compounds Betel quid without tobacco DDT (4,4'-dichlorodiphenyl-trichloroethane) Human immunodeficiency virus type 1 (infection with) <i>Schistosoma japonicum</i> (infection with) Trichloroethylene X- and Gamma-radiation
Bile duct	<i>Clonorchis sinensis</i> (infection with) 1,2-Dichloropropane <i>Opisthorchis viverrini</i> (infection with) Plutonium Thorium-232 and its decay products Tobacco smoking (in smokers)	Androgenic (anabolic) steroids Arsenic and inorganic arsenic compounds Betel quid without tobacco DDT (4,4'-dichlorodiphenyl-trichloroethane) Dichloromethane (methylene chloride) Hepatitis B virus (chronic infection with) Hepatitis C virus (chronic infection with) <i>Schistosoma japonicum</i> (infection with)

Pancreas	Tobacco, smokeless Tobacco smoking	Alcoholic beverages Opium consumption Red meat (consumption of) Thorium-232 and its decay products X- and Gamma-radiation
Digestive tract, unspecified		Radioiodines, including iodine-131
<b>Respiratory and intrathoracic organs</b>		
Nasal cavity and paranasal sinus	Isopropyl alcohol manufacture using strong acids Leather dust Nickel compounds Radium-226 and its decay products Radium-228 and its decay products Tobacco smoking Wood dust	Carpentry and joinery Chromium(VI) compounds Formaldehyde Textile manufacturing industry (work in)
Larynx	Acetaldehyde associated with consumption of alcoholic beverages Acid mists, strong inorganic Alcoholic beverages Asbestos (all forms) Opium consumption Tobacco smoking	Bitumens, occupational exposure to hard bitumens and their emissions during mastic asphalt work Bitumens, occupational exposure to oxidized bitumens and their emissions during roofing Human papillomavirus types 16 and 18 Rubber manufacturing industry Sulfur mustard Tobacco smoke, secondhand
Lung	Acheson process, occupational exposure associated with Aluminium production Arsenic and inorganic arsenic compounds Asbestos (all forms) Beryllium and beryllium compounds Bis(chloromethyl)ether: chloromethyl	Acid mists, strong inorganic Art glass, glass containers and pressed ware (manufacture of) Benzene Biomass fuel (primarily wood), indoor emissions from household combustion of

# Ίνες αμιάντου

- Chrysotile
- Amphibole asbestos
  - i. Crocidolite (blue) asbestos
  - ii. Amosite (brown) asbestos
  - iii. Anthophyllite
  - iv. Actinolite
  - v. Tremolite



PNEUMON • VOL. 27 • SUPPLEMENT No 1 • 2014

ΠΝΕΥΜΩΝ • ΤΟΜΟΣ 27 • ΣΥΜΠΛΗΡΩΜΑΤΙΚΟ ΤΕΥΧΟΣ 1 • 2014

# ΠΝΕΥΜΩΝ

ΤΡΙΜΗΝΙΑ ΙΑΤΡΙΚΗ ΕΚΔΟΣΗ

ΕΛΛΗΝΙΚΗ  
ΒΡΟΓΧΟΛΟΓΙΚΗ ΕΤΑΙΡΕΙΑ  
GREEK BRONCHOLOGIC  
SOCIETY

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HELLENIC THORACIC  
SOCIETY

QUARTERLY MEDICAL JOURNAL

ISSN 1105-848X

e-ISSN 1791-4914

## ΠΝΕΥΜΩΝ ΜΕΤΣΟΒΟΥ

ΜΙΑ ΙΑΤΡΙΚΗ ΙΣΤΟΡΙΑ ΜΥΣΤΗΡΙΟΥ ΜΕ HAPPY END

## METSOVO LUNG

A MEDICAL DETECTIVE STORY WITH A HAPPY ENDING

[www.pneumon.org](http://www.pneumon.org)

Cited in:

• SCOPUS

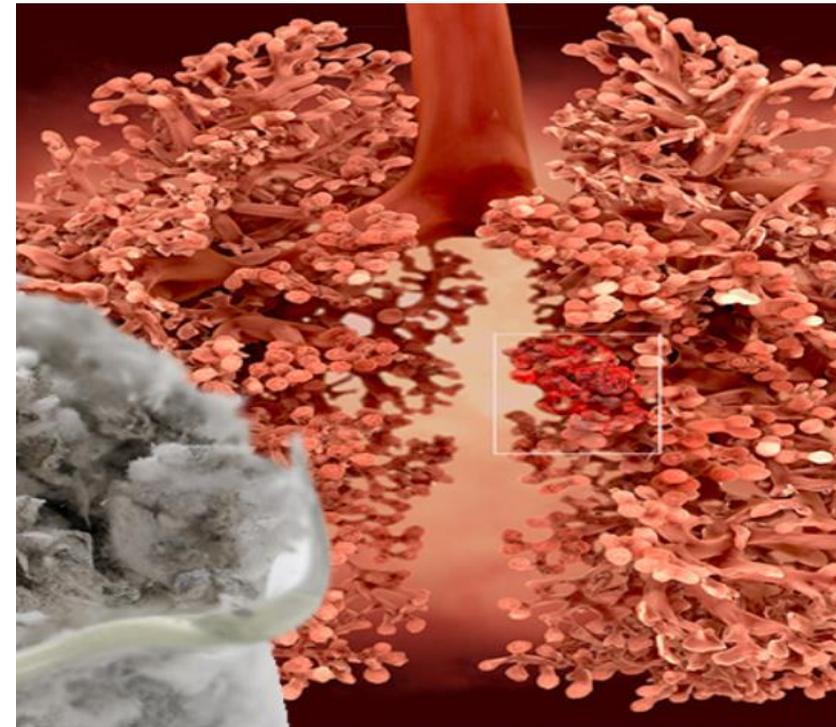


# Metsovo Lung



# Κακοήθες Μεσοθηλίωμα

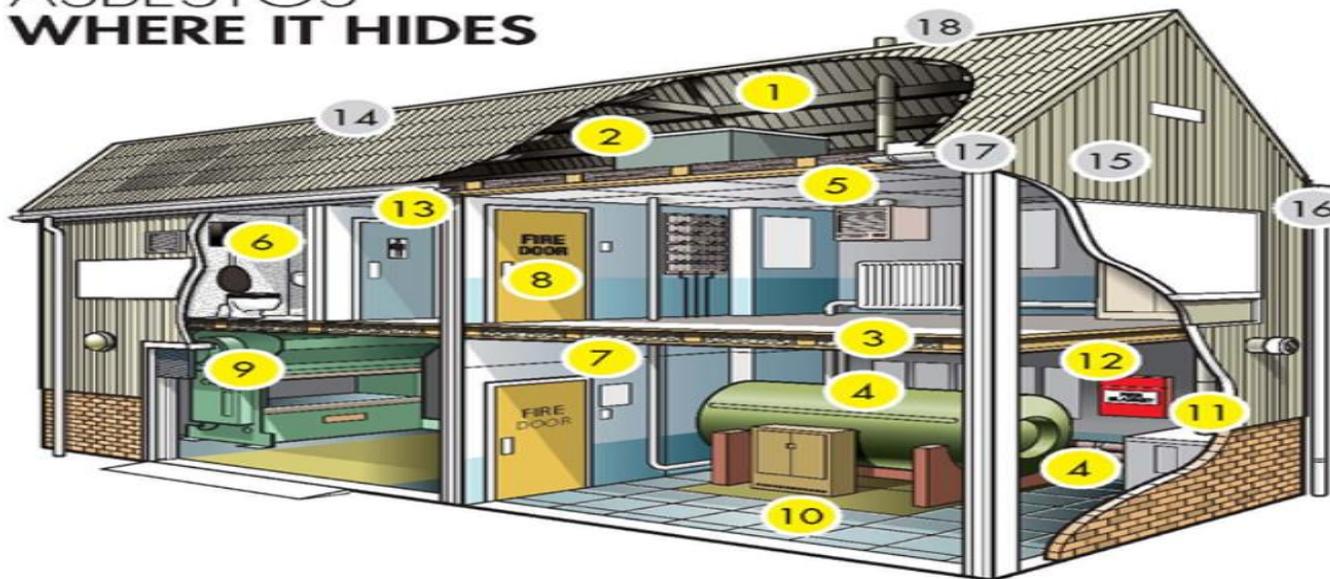
- Mesothelioma is a rare but fatal form of thoracic cancer that is diagnosed in more than 30,000 people per year and kills over 25,000
- Over 80% of cases arise from exposure to asbestos fibres which cause long term inflammation in the mesothelial cells of the lung, slowly leading to cancerous changes 20-50 years later
- The incidence of mesothelioma has fallen in Australia, the USA and Western Europe, where asbestos or strict regulations were introduced in the 1970s and 1980s
- Approximately 3000 incident cases of mesothelioma are registered each year in the United States



# Countries with a National Ban on Asbestos, 2018



## ASBESTOS WHERE IT HIDES

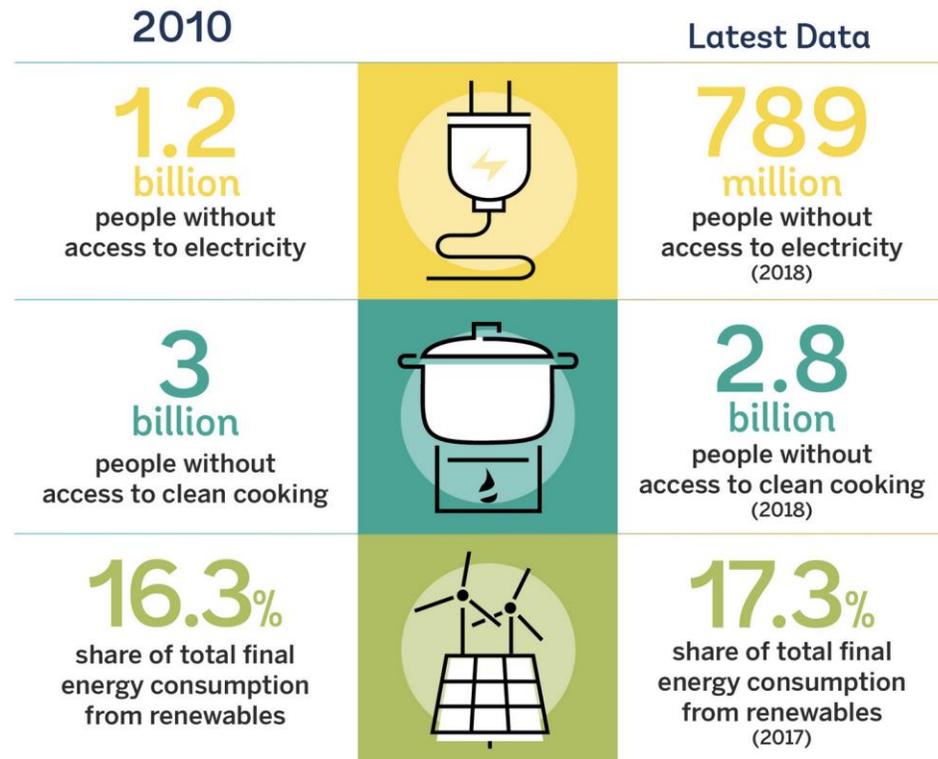


- Data compiled from the IARC Monographs from its initiation in 1971 through 2017 indicate that the number of recognized occupational carcinogens has increased progressively in recent decades
- Despite notable progress, there continues to be a need for research on the causes of work-related cancer. Epidemiologic evidence is inadequate or entirely lacking for the majority of the over 1000 agents evaluated by IARC; many more agents present in workplaces have never been evaluated for carcinogenicity

# Solutions



# Energy Progress Report for 2020



ευχαριστώ

# Air pollution kills 13 people every minute



World Health  
Organization

due to lung cancer, heart disease  
and strokes.

Stop burning fossil  
fuels like oil, coal  
and natural gas.

