Mortality of Workers Exposed to Creosote – Wong and Harris
Summary

A recent study examined the health status of creosote workers and found no evidence supporting an increased cancer risk as a result of exposure to creosote. Based on the findings of the largest mortality study to date of workers employed in creosote wood treating plants, there is no evidence that employment at wood-treating plants or exposure to creosote-based preservatives was associated with any significant mortality increase from either site-specific cancers or non-malignant diseases. The study consisted of 2,179 employees at eleven plants in the United States where wood was treated with creosote preservatives. Some workers began work in the 1940s to 1950s. The observation period of the study covered 1979- 2001.

The study was conducted by Dr. Otto Wong, an epidemiologist affiliated with Applied Health Sciences in California and Tulane University in New Orleans. The study was published recently in a peer-reviewed journal (Wong and Harris, Journal of Occupational and Environmental Medicine, Vol. 47, pages 683-697, July 2005). Based on the Wong and Harris study and studies conducted by other organizations, including the National Cancer Institute, there is no evidence that individuals who work with creosote have an increased risk of cancer. Since those who work daily with creosote show no statistically significant evidence of adverse health effects, it is reasonable to assume that the risk to the general public is negligible.

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- Largest study of creosote-exposed wood-treating workers to date.
- Studied causes of death.
- Sought to determine whether creosote-exposed workers had higher rates of death for specific causes.
- Over 2,100 employees in eleven plants.
- Observation period: 1979-2001.
- Study covered workers employed in plants in 1940s through 1990s.
- Average length of employment was 12.5 years.
- One-third of the study subjects were employed for more than 15 years.
- No evidence of increased cancer mortality relative to the general population.
- No evidence of increased mortality from non-malignant diseases.
- No evidence that workers exposed to creosote have a higher than average mortality rate from any cause.
- Consistent with European studies.
- Consistent with other U.S. studies.