



DA VENIAM SCRIPTIS QUORUM NON GLORIA NOBIS
CAUSA, SED UTILITAS OFFICIUMQUE FUIT

COLLEGIUM RAMAZZINI

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June 9, 2010

The Honorable Yves Bolduc, MD
Minister of Health and Social Services
Quebec City, Quebec

Dear Dr Bolduc:

We are writing to you now about the serious health problems associated with human exposure to asbestos, and about your ethical responsibility as a physician in this matter.

As a medical doctor, you are required to put the Quebec Medical Code of Ethics ahead of all other interests.

The Code specifically requires that you:

- ***comply with the primordial duty to protect the health of individuals and collectivities (s3)***
- ***not participate in any concerted action that puts in danger the health of an individual or a population (s13)***
- ***not permit any omissions that are contrary to the present knowledge of medical science (s47)***
- ***inform the public of opinions that conform with the present state of medical knowledge on any particular issue (s89)***
- ***not allow false or incomplete information to be given to the public (s91)***

While some might say that the Code technically applies to practicing doctors, we trust that you will agree with us that these are fundamental moral obligations and that you, in particular, as Quebec's Minister of Health, should set an example of complying with them.

We believe that you are currently failing in this duty. As fellow medical doctors, we urgently ask that you comply with the Code of Ethics and correct the following false and incomplete information that endangers public health.

1) On May 20, 2010, your fellow Minister, Serge Simard, at a parliamentary commission hearing, rejected a request from Quebec medical doctors, who asked that Quebec stop promoting and exporting asbestos to developing countries. Minister Simard expressed doubt as to whether chrysotile asbestos causes lung cancer. He claimed that scientific authorities are divided as to whether chrysotile asbestos can be safely used.¹

2) A publicity brochure, funded by your government and bearing the official emblem of Quebec, states that scientific authorities agree that exposure to 1 fibre of chrysotile asbestos per cubic centimetre of air poses no risk to health, that “safe” use of asbestos is easily achieved and that scientific studies show a 99.8% success rate in achieving safe use of asbestos in India, Thailand, Kazakhstan, Zimbabwe and other countries.² Evidence from independent experts in those countries shows this assertion to be completely untrue³.

3) A letter of April 20, 2010 sent on behalf of Premier Charest to the Mayor of Sarnia, where many are dying from asbestos-caused diseases, states that scientific studies “show that chrysotile has been and continues to be used without any detectable risk.”⁴

Minister Bolduc, as a medical doctor, you know that the above is false information. The science is indisputable that chrysotile asbestos (which represents the totality of the world asbestos trade) causes lung cancer. In 2009, the world’s leading authority, the International Agency for Research on Cancer, reconfirmed that chrysotile asbestos causes lung cancer, laryngeal cancer, ovarian cancer and mesothelioma.

As a medical doctor, you are also well aware that, far from being divided, present medical knowledge, from the World Health Organisation (WHO), the Canadian Medical Association and every reputable scientific organisation, is that chrysotile asbestos causes serious harm to health, that there is no safe exposure level, that it goes on killing for generations and that it should not be used. For these reasons, over fifty countries have outright banned its further use.

It is well established by independent science that exposure to 1 f/cc of chrysotile asbestos will cause unnecessary deaths. This is a level of exposure ten times higher than that permitted by any industrialized country or by any other province of Canada. As stated in a recent scientific report by the Collegium Ramazzini, “numerous epidemiologic studies, case reports, controlled animal experiments, and toxicological studies show clearly and consistently that chrysotile is highly dangerous and that it is fully capable of causing cancer. Workers exposed to chrysotile fiber alone have excessive risks of lung cancer and excessive deaths from mesothelioma.”⁵

With regard to the claim that asbestos can and is being safely used in developing countries, your own government studies show a 100% failure rate to achieve this in Quebec.⁶ The CSN

¹ <http://www.assnat.qc.ca/fr/video-audio/AudioVideo-22365.html>

² Chrysotile Institute, *Safety in the Use of Chrysotile, Requirements and Achievements*, http://www.chrysotile.com/data/Safety_use_Chryso-A_VF.pdf

³ Health Hazards Due to Asbestos Exposure in India, Dr Qamar Rahman; *India’s Asbestos Time Bomb*, http://www.ibasecretariat.org/india_asb_time_bomb.pdf; Tackling the Hazardous Aftermath of Asia’s Asbestos Consumption, *Asian Asbestos Conference 2009*

⁴ Letter of April 20, 2010 from Jean-S Lebel, Deputy Associate Minister Mines, on behalf of Premier Charest, to Mayor Mike Bradley

⁵ Asbestos is Still With Us : Repeat Call for a Universal Ban, Collegium Ramazzini, *Journal of Occupational and Environmental Medicine*, May 2010

⁶ Gouvernement du Québec, *Projet Provincial – Amiante, 31 déc. 2007*, <http://www.santepub-mtl.qc.ca/Publication/pdftravail/projetamiante.pdf>

(Confédération des syndicats nationaux) recently voiced bitter complaints about this failure, which endangers its members doing construction work.⁷

It is totally absurd and dishonest to claim that developing countries have achieved 99.8% safe use of asbestos, when Quebec, with all its resources, technological expertise and regulations, has failed 100%. Furthermore, evidence is readily available showing workers in India bathed in clouds of Quebec asbestos⁸ and children playing amongst broken, dusty asbestos-cement debris⁹.

The WHO has pointed out that safe use chrysotile asbestos is simply impossible: The WHO states: "The most efficient way to eliminate asbestos-related diseases is to stop using all types of asbestos. Continued use of chrysotile asbestos cement in the construction industry is a particular concern, because the workforce is large, it is difficult to control exposure and in-place materials have the potential to deteriorate and pose a risk to those carrying out alterations, maintenance and demolition."¹⁰

As a medical doctor, you are required by the Quebec Medical Code of Ethics to correct the above misinformation being disseminated to the public by your government with your collaboration, which is causing, as an editorial in the Canadian Journal of Public Health has stated, the "exporting (of) death, made in Quebec."¹¹

It is particularly incumbent on you to do this since, on the basis of this misinformation, your government plans to give a \$58 million loan guarantee to open up new asbestos mine to increase Quebec's export of asbestos to the developing world for years to come.

The irresponsible misinformation that is funded and endorsed by your government is one of the most serious obstacles the world health community faces in endeavouring to implement the WHO campaign to stop asbestos use so as to stop the growing world epidemic of asbestos-related disease.

In addition, we call on you to defend the scientific work carried out by your own expert health authority, the National Public Health Institute of Quebec (INSPQ). The research carried out by the INSPQ has repeatedly documented the harm caused by chrysotile asbestos and the failure of Quebec to achieve so-called safe use. The INSPQ has recommended against your government's asbestos policy. However, instead of heeding your own health experts, you have allowed them to be publicly vilified and threatened by asbestos interests.

We believe that you have a duty to comply with the Quebec Medical Code of Ethics, as well as to defend your own health experts. We understand that, as Premier Charest has stated, asbestos is a political issue in Quebec. As a medical doctor, however, you have a duty that surpasses political interests: the duty to protect public health.

We hope you will give this letter the serious attention it deserves and we trust that you will give us a positive response.

⁷ *L'amiante, première cause de décès au travail*, Le Soleil, October 24, 2009
<http://www.cyberpresse.ca/le-soleil/affaires/actualite-economique/200910/23/01-914577-lamiante-premiere-cause-de-deces-au-travail.php>

⁸ Canada's Ugly Secret, CBC, The National,
http://www.cbc.ca/video/#/News/TV_Shows/The_National/Health/ID=1304445584

⁹ Views From the Asbestos Front Line, P. Madhavan, *India's Asbestos Time Bomb*,
http://www.ibasecretariat.org/india_asb_time_bomb.pdf

¹⁰ World Health Organization, *Elimination of Asbestos-Related Diseases*, September 2006
http://whqlibdoc.who.int/hq/2006/WHO_SDE_OEH_06.03_eng.pdf

¹¹ *Exporting Death Made In Québec*, Dr Gilles Paradis, Canadian Journal of Public Health, Vol 101, No 2, 2010

Respectfully,



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