



- [About the ILO](#)
- [Topics](#)
- [Regions](#)
- [Meetings and events](#)
- [Programmes and projects](#)
- [Publications](#)
- [Labour standards](#)
- [Statistics and databases](#)
- [Search](#)
- [User guide](#)
- [Glossary](#)

## NORMLEX

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[Instruments](#)

[Key documents](#)

[Ratification of ILO Conventions](#)

[Supervising the application of International Labour Standards](#)

[Supervision by country](#)

[Search comments by the supervisory bodies](#)

Complaint procedures

[Freedom of association cases](#)

[Representations \(Art. 24\)](#)

[Commission of Inquiry \(Art. 26\)](#)

[Regular reporting](#)

[Country profiles](#)

[Comparatives](#)

[Maritime Labour Convention \(2006\)](#)

### 1. MLC, 2006

#### 1. NATLEX *\*new look\**

National Legislation on Labour and Social Rights

#### 1. LEGOSH

Global database on occupational safety and health legislation

#### 1. EPLex

Employment protection legislation database

#### 1. Compendium of court decisions

[NORMLEX Home](#) > [Country profiles](#) > > Comments

# Direct Request (CEACR) - adopted 2016, published 106th ILC session (2017)

[Occupational Cancer Convention, 1974 \(No. 139\)](#) - Italy (Ratification: 1981)

[show/hide Permalink](#)

[Other comments on C139](#)

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**Observation**

1. [2011](#)
2. [2010](#)
3. [2007](#)
4. [2006](#)

**Direct Request**

1. [2016](#)
2. [2002](#)
3. [1996](#)
4. [1992](#)
5. [1990](#)

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The Committee notes the observations made by the General Labour Union (UGL), attached to the Government's report. The Committee notes that, according to the UGL, the access to retirement of workers engaged in strenuous work, including asbestos removal, has generally worsened and that financial support for workers affected by cancer does not appear to be sufficient to ensure a decent standard of living. The Committee notes the Government's reply in its report that, following the adoption of Act No. 214 of 2011, workers engaged in strenuous activities and who were previously eligible for a reduction of up to three years of their retirement age can now retire once they reach a fixed quota combining their age and the length of their employment. With regard to financial assistance for workers affected by cancer, the Government indicates that the National Insurance Institute for Employment Injuries (INAIL) provides workers diagnosed with an occupational disease with the appropriate financial and health benefits, which include compensation for personal injury, direct pensions for permanent disability and pensions for workers affected by silicosis or asbestosis. The Committee takes note of this information.

***Article 5 of the Convention. Medical examinations of workers during the period of employment and thereafter.*** With reference to its previous comments concerning medical examinations following the period of employment, the Committee notes the Government's indication that, pursuant to section 41(2)(e) of Legislative Decree No. 81 of 9 April 2008, medical examinations shall be conducted upon termination of employment in the cases provided for by the legislation in force. The Committee also notes that, with regard to protection from chemical agents, section 229(2)(c) provides that medical surveillance shall be carried out upon termination of

employment, and section 242(6) provides that, with regard to protection from carcinogens and mutagens, physicians shall provide workers with adequate information on health surveillance, particularly with regard to the opportunity of undergoing a health check even after termination of employment. Furthermore, with regard to protection from risks associated with exposure to asbestos, section 259(2) provides that workers who have been included in the register of exposure shall be subject to a medical examination upon termination of employment, during which the physician must provide them with information on the opportunity to undergo subsequent medical examinations. ***The Committee requests the Government to provide further information on the measures taken in practice to ensure the availability of facilities for the medical supervision of workers following the cessation of assignment to work involving exposure to carcinogenic substances and after termination of employment.***

***Application in practice.*** The Committee notes the very detailed statistical information provided by the Government according to which the number of cases of occupational diseases reported to the INAIL has gradually increased since 2007, reaching 51,834 cases in 2013. It also notes that 1,133 cases of occupational cancer were registered in 2013, compared with 1,202 cases in 2010, and that the number of occupational diseases related to asbestos increased from 1,711 cases identified in 2012 to 1,860 in 2013. Furthermore, the Committee notes that by the end of 2012, a total of 158,774 workers exposed to carcinogens were registered under the Information System on Occupational Exposure to Carcinogens (SIREP), 88 per cent of whom were men, and that the highest proportion of exposed workers were employed in the chemicals industry. The Committee also notes that the 2012 report of the National Registry of Mesotheliomas (ReNaM) on cases of mesothelioma diagnosed during the 1993–2008 period examined the average age of diagnosis, the proportion of cases by gender and the modes of exposure to asbestos. ***The Committee requests the Government to continue providing detailed information on the number and causes of occupational cancers.***