

石綿関連肺ガン認定基準の各国一覧表

Country	Medical criteria	Criteria for asbestos dust exposure	Latency period
Germany	<ul style="list-style-type: none"> - Lung cancer associated with an asbestosis (from an histological point of view, even a minimal asbestosis is sufficient) or important alterations of the pleura caused by asbestos - Alternative condition: see "exposure criteria" 	exposure of 25 fibres/ml-year (alternative condition to medical criteria)	10 years at least
Austria	<ul style="list-style-type: none"> - Lung cancer associated with an asbestosis (from an histological point of view, even a minimal asbestosis is sufficient) or important alterations of the pleura caused by asbestos - Alternative condition: see "exposure criteria" 	exposure of 25 fibres/ml-year (alternative condition to medical criteria)	-
Belgium	<p>Alternative conditions:</p> <ul style="list-style-type: none"> - Presence of asbestosis or diffuse bilateral pleural thickening due to asbestos. - Presence, shown by optical microscopy, of at least 5,000 asbestos bodies per gram of dry pulmonary tissue or at least five asbestos bodies per linear metre of bronchoalveolar lavage. In case of serious doubt concerning the type of asbestos bodies observed, the presence of asbestos must be confirmed by electronic microscopy - Presence established by electronic microscopy of at least five million asbestos fibres of length exceeding 1 μm per gram of dry pulmonary tissue or at least two million amphibole fibres of length exceeding 5 μm per gram of dry pulmonary tissue - Other alternative condition: see "exposure criteria" 	exposure of 25 fibres/ml-year or restrictive list of jobs or medical criteria equivalent to an exposure of at least 25 fibres/ml-year	10 years
Denmark	Diagnosis by microscope advisable; failing that, probable diagnosis on the basis of the clinical table and the development of the disease.	Helsinki criteria	-
Spain	Lung cancer associated with an asbestosis; failing that, biopsy, exam of bronchoalveolar fluid by microscope	10 years (except cancer associated with an asbestosis)	10 to 20 years
Finland	Diagnosis by a pathologist of a malignant neoplasm of bronchus or lung If asbestosis (even post mortem microscopic tissue response), automatic recognition	Helsinki criteria (in the absence of asbestosis)	10 years (in the absence of asbestosis)

Country	Medical criteria	Criteria for asbestos dust exposure	Latency period
France ⁷⁰	Histological examination, failing that, diagnosis based on suggestive clinical evolution and imaging	exposure of 10 years + restrictive list of jobs	liability period: 40 years at most after the end of exposure
Italy	- X-ray, HRCT - Spirometry, blood test, electrocardiogram - Cytology	- ⁷¹	-
Norway	Barring a formal diagnosis performed by microscope, a virtually certain diagnosis is sufficient (according to the clinical table and the development of the disease)	Helsinki criteria	15 years
Portugal	X-ray, CT, bronchoscopy, biopsy	Indicative list of jobs	10 years
Sweden	Diagnosis normally based on biopsy or cytology and X-ray Lung cancer associated with asbestosis or "exposure criteria"	at least 15-20 years in a job with clear asbestos exposure or at around 10 fibres/ml-year cumulated dose (life-time exposure)	15 years
Switzerland	Diagnostic established on the basis of radiological, bronchoscopic and/or histological observations Recognition if cancer associated with an asbestosis or else modifications of the pleura caused by asbestos or "exposure criteria"	exposure of 25 fibres/ml - year (alternative condition to the medical criteria)	-

出典：石綿による疾病に係る臨床・病理・疫学等に関する調査研究

(平成 19 年度 厚生労働省委託研究)

[労働災害・業務上疾病に対する保険に関する欧州フォーラム]

⁷⁰ 疾患が良性実質・胸膜障害に関係している場合、認定条件はより柔軟になる。曝露 5 年、業務リストに当てはまるかどうか、35 年の最大潜伏期間。

⁷¹ 曝露の最低期間あるいは強度についての法定基準はない。曝露の現実、科学文献と非職業曝露の有無に従い、認定請求ごとに検証する。