Chemical Exposures from Cosmetics: A Case Study of Nail Care Products



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Cosmetic widespread long-term use

•Women use an average of fifteen cosmetic products per day;

•Cosmetic use among men has been increasing dramatically.









Cosmetics Regulation

Cosmetics fall under U.S. Food and Drug Administration (FDA), but FDA does <u>NOT</u> have legal authority to require:

- ✓Pre-market testing of products by manufacturers
- ✓Necessary information from industry for FDA to conduct its own pre-market testing
- ✓ Require that products sold for professional use include ingredients labels
- Industry has no incentive to conduct toxicity testing of their products for long-term effects such as cancer









California Safe Cosmetics Act

Reporting requirements apply to cosmetic companies if:

- •The company makes \$1 million or more annually in worldwide aggregate cosmetic sales;
- •The company name is on the label of a cosmetic product sold in California after January 1, 2007;
- •The product contains an ingredient identified as a known or suspected human carcinogen or reproductive toxicant.







Why the Interest in Nail Salon Workers

Nail Salon Workforce

Rapid growth due to tripling of nail salons in last two decades

- California workforce comprised over 100,000 licensed manicurists
- Vietnamese comprise ~60-80% of workforce in California
- 95% female workers







Growth of cosmetologists and manicurists in California



Source of data: California Board of Barbering and Cosmetology Licensee file of cosmetologists and manicurists from 1970-2005





Workforce Context and Complexities

Employee vs. Independent contractor Lack employee benefits - health care Owners are also workers

Workplace hazards

Exposures to multiple chemicals over long periods of time
 Small poorly ventilated salons
 Limited or lack of product labeling

Immigrant workers in Nail Salons

- ► Language barriers
- Cultural factors





Select Compounds in Nail Products

Compounds	Nail care use	Potential Health Effects	Route(s) of Exposure
Acetone	Nail polish remover	Shortens menstrual cycle	Inhalation, dermal
Dibutyl Phthalate (DBP)*	Nail polish	Endocrine disruption; developmental and reproductive effects	Inhalation, dermal
Formaldehyde	Nail hardener, disinfectant	Known carcinogen; respiratory effects	Inhalation, dermal
Methylene Chloride*	Artificial nail solvent	Possible carcinogen	Inhalation, dermal
Methyl Ethyl Ketone (MEK)	Nail polish thinners	Damaged liver and kidney, reproductive effects	Inhalation, dermal
Methyl Methacrylate (MMA)	Artificial nails	Respiratory effects - asthma; neurological symptoms	Inhalation, ingestion
Titanium Dioxide	Acrylic nail powder, nail polish	Possible carcinogen	Inhalation
Toluene*	Nail polish, nail polish thinner, nail adhesives	Developmental toxicant; endocrine disruption	Inhalation, dermal



Toxic Trio: chemicals of concern

These three compounds referred to as <u>"toxic trio"</u> in nail polishes

1) Dibutyl Phthalate

Use: provide flexibility Health impacts: endocrine disruptor; reproductive effects; cross placenta and affect fetal development

2) Formaldehyde

Use: nail-hardening agent; tool disinfectant; hair straightening products Health impacts: known carcinogen (nasopharyngeal and leukemia)

3) Toluene

Use: creates a smooth finish & keeps pigment from separating in bottle *Health impacts:* endocrine disruptor; reproductive & developmental effects









Past Research Studies





Descriptive Survey of Vietnamese Nail Salon Workers

Health and safety of nail salon issues emerged from community

Mutual interest between community and research partner
Funded by California Breast Cancer Research Program for community-research collaboration (2005-2007)

Cancer Prevention Institute of CA

- Cancer prevention
- Environmental/ occupational health
- Community-based research



<u>Asian Health</u> <u>Services</u>

- Community health center in Oakland, CA
- Large Underserved AAPI
 Population
- Vietnamese patients nail salon workers
- Community-based





Study Methods and Findings

Research methods

1)Two focus groups (N=20 workers and owners)

2) In-person surveys in salons (N=201 workers from 74 salons)*

*conducted by former and current nail salon workers

Major findings

- Half the salons had poor methods for ventilation
- 80% of workers reported health concerns due to work
- Nearly 50% of workers reported acute health symptoms (headaches, dizziness, difficulty breathing, skin irritations)





Follow-up Study: Cancer

Record-linkage study to examine cancer rates in workforce



RESULTS: No excess cancer risk found for any sites

<u>CONSIDERATIONS</u>: Workforce is still fairly young and short observation time; may require extending years of study



Quach T, Doan-Billing PA, Layefsky M, Nelson D, Nguyen KD, Okahara L, Tran AN, Von Behren J, Reynolds P. Cancer Incidence in Female Cosmetologists and Manicurists in California, 1988-2005. Am J Epidemiol. 2010 Sep 15;172(6):691-9.



Follow-up Study: Air Monitoring

Conducted air monitoring with 80 workers from 20 salons during their work-shift

Personal monitoring

•Toluene levels 2x higher than recommended indoor air

Area monitoring

•Detected methyl methacrylate (100% MMA monomer banned from nail products)

•Total volatile organic compounds (TVOC) - higher levels than recommended indoor air

Acute Health Problems

•Measured levels may explain why workers (>25%) reporting uncomfortable health symptoms (headaches, skin irritations, breathing problems).







Quach T et al. Characterizing Workplace Exposures in Vietnamese Women Working in California Nail Salons. Am J Public Health. 2011 Dec;101 Suppl 1:S271-6. Epub 2011 May 6.







Intervention Study



NIEHS 2R01ES019598

Keeping a Healthy Occupational Environment & Developing Empowerment Program





Randomized Controlled Trial

•Goal: Evaluate the effectiveness of a train-the-trainer intervention

✓ salon owners are trained around best practices to reduce chemical exposures and then train their workers

•Conduct personal air monitoring (toluene, methyl methacrylate, methyl ethyl ketone, & TVOCs) and surveys

•Regions: 1) Marin/Contra Costa, 2) Alameda, 3) Santa Clara, and 4) Orange County/Los Angeles





5 Ways To Reduce Your Chemical Exposure









Ventilate nail stations

Protect face and hands

Handle and store chemicals properly





Study Design









Research Gaps and Emerging Products





Research Gaps

•Better exposure assessment

✓Going beyond single chemical to multiple chemicals; looking at synergistic effects and potential predispositions

✓Tying exposure to sources (i.e., products and their usage)

 \checkmark Biomonitoring that provides more insights into exposure

 Need for longitudinal study on respiratory, reproductive, cancer and other health outcomes

✓Cross-sectional may have selection bias; long latency periods; and lack of reliable and relevant health surveillance

•Better research around health literacy and effective health communication for immigrant workforces

✓Powerful stakeholder – links to manufacturers as well as consumers



Emerging Products and Trends

Industry is constantly changing, with new trends and products marketed to consumers and workforce

- False sense of safety with little research
 ✓Gel polishes
- Regrettable substitutes
 ✓ Triphenyl phosphate (TPP) as substitute for dibutyl phthalates (DBP)







Research Challenges

Intense amount of work when working with immigrant population in small business sector

- Language barriers
- Cultural issues (e.g., choose livelihood over health)
- Risks posed to livelihood
 ✓ small profit margin and reliance on customers decision-making
- Owner-worker dynamics
- High turn-over of workers and salon businesses
- Distrust and fear of government due to historical experiences in Vietnam and interactions with inspectors



Low health literacy, especially in chemicals



Research Opportunities

Raising awareness on chemical exposures can be empowering for workforce

Biomonitoring would provide information (e.g. phthalates exposure) connecting to "body burden"

✓ Potential to identify occupational sources

 Effective health communication of results to drive multilevel change

✓Influence individual and salon level changes

✓Influences workers, owners and consumers to buy safer alternatives/ affect industry

✓Influence policy-makers to change regulations



