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Effects of the glass fiber at the pulmonary level

Rodolfo Augusto Chaparro Aranguren
Colombia

Pulmonary diseases of occupational origin are a chapter of special relevance in the field of clinical and occupational medicine. Within the entities that have attracted great attention, pneumoconiosis is mentioned, which has been recognized since antiquity. Among the pneumoconiosis that has generated the most interest are silicosis, coal miner pneumoconiosis and asbestosis, entities that constitute a major problem in Third World countries where it is necessary to improve strategies on their prevention, recognition and management. A special interest arises in this way to develop a guide that allows optimizing early recognition and prevention measures in situations that involve the potential to develop pneumoconiosis. And to avoid the incidence and prevalence of respiratory diseases preventable by inhalation of particulate material of glass fiber and carbon, solvent vapors, gases potentially harmful to the health of the workers of the Aircraft Factory Calima T-90 of the Air Maintenance Command (CAMAN). In this work, habits and lifestyles were identified; Promoting a better quality of life for workers identifying habits, in order to strengthen, modify and / or eliminate according to personal and work needs with advice from specialists to prevent exposure to physical and mental risk factors. The method used for the development of this research work was based on the observation, interview and data collection process on the different causes of occupational respiratory diseases by fiberglass and carbon in adults living in the city of Bogotá Colombia and as a result from these processes the necessary measures that affect positively or negatively will be determined. The population with which the investigative exercise is carried out was workers and / or visitors of the Aircraft Factory Calima T-90 of the Air Maintenance Command (CAMAN). According to the information of the revisions made by the Respiratory Therapist Lord, Rodolfo A Chaparro Aranguren, ESM CAMAN-ESUFA, specifically reviewed the morbidity and mortality of respiratory and occupational diseases such as allergic rhinitis, rhinopharyngitis, laryngotracheitis, bronchitis and occupational asthma, by exposure to this particulate material of glass fiber and carbon; it should be noted that the exposure time has been short for these continuous acute exacerbations to occur in the target population, without omitting that these particles are also affecting the ophthalmic and dermatological level, which was confirmed in the interviews with the staff.

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