I request that NIOSH and its advisory committee on developing a list of hazardous drugs in health care settings carefully consider policy for evaluating monoclonal antibodies (MAbs) as appropriate additions to the roster of hazardous drugs. Certainly some of these materials present appreciable health hazards upon intravenous or subcutaneous dosing. However, there is little or no evidence to suggest MAbs as relevant occupational hazards given the low likelihood of substantial systemic exposure in healthcare settings where dermal and possibly respiratory exposure predominate. It seems prudent and scientifically justifiable that NIOSH incorporate elements of exposure assessment into consideration of the risk of occupational adverse effects of MAbs. Without this there is a likelihood that many MAbs, especially those used in oncology and rheumatology practice, will eventually end up on the NIOSH list of hazardous drugs, raising inappropriate concern.

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