



## A CLOSER EXAMINATION OF RISKS OF FORMALIN ON ANATOMISTS AND PREVENTIVE STRATEGIES DURING CADAVERIC DISSECTION - A COMPREHENSIVE REVIEW

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### Abstract:

Formalin, a common preservative in cadaveric embalming is quintessential for anatomy dissection, thereby exposing anatomists, medical students, and laboratory personnel to serious health hazards due to formaldehyde, its active component, which is a recognised toxic and carcinogenic substance. The mechanisms of formaldehyde toxicity, the sensitivity of anatomists due to exposure frequency and duration, and the global statistics on formalin exposure and preventive measures such as engineering and administrative measures, institutional guidelines, regulatory frameworks from WHO, OSHA, and national agencies, personal protective equipment (PPE), including the investigation of safer chemical alternatives have been systematically reviewed. The important pillars for the health and safety of anatomical sciences personale are faculty training programs, institutional accountability, and the incorporation of safety instruction into medical curriculum.

**Keywords:** Anatomists, Cadaver, Formalin, Formaldehyde, Dissection

### Introduction

Formalin, an aqueous solution of formaldehyde (37–40%), is used universally as a tissue preservative in anatomical dissection due to its property of cross-linking proteins, which helps cadaveric tissues to retain their structural integrity over time<sup>1</sup>. Due to its usage in cadaver embalming and storage in gross anatomy labs, formalin has become an essential tool in medical education<sup>2</sup>. Formalin is a proven poisonous and carcinogenic substance that, despite its usefulness, poses serious health hazards to lab workers, anatomists, and medical students<sup>3</sup>. The International Agency for Research on Cancer (IARC) has designated formaldehyde vapours as a Group 1 human carcinogen, and prolonged exposure carries the risk of rhinitis, asthma, skin and eye irritation, and neurotoxicity<sup>4</sup>. The risk multiplies

manifold for anatomists due to extended exposure during dissections, which makes this a crucial field for occupational health and safety research<sup>5</sup>

#### Objectives

- Analysis of health hazards of formalin exposure
- Effects of formalin on various organs
- Assessment of preventive measures (personal protective equipment, engineering controls, ventilation)
- Measures of reduction of exposure

**Table 1: Side effects of Formalin Exposure in Anatomists<sup>1</sup>**

Health Domain Affected	Specific Effects	Short-Term Symptoms	Long-Term Implications	Supporting Evidence/Study
<b>Respiratory System</b>	Nasal irritation, bronchitis, asthma, reduced lung function	Sneezing, coughing, breathlessness, sore throat	Chronic respiratory illness, asthma aggravation	Kilburn KH et al., 1989; Sabariego et al., 2000
<b>Ocular System</b>	Conjunctival irritation, tearing, burning sensation	Eye redness, lacrimation	Chronic dry eyes, conjunctivitis	Occupational Health Reports, WHO, 2006
<b>Dermatological System</b>	Dermatitis, skin allergies	Itching, rash, erythema	Chronic eczema, allergic sensitization	Tang et al., 2009
<b>Neurological Effects</b>	Headache, sleep disturbances, memory loss	Dizziness, confusion	Neurotoxicity on prolonged exposure	ATSDR Report, 1999
<b>Carcinogenic Risk</b>	Nasopharyngeal carcinoma, leukemia (suspected)	N/A	Increased cancer risk (IARC Group 1 carcinogen)	IARC Monograph, 2006
<b>Psychological Impact</b>	Anxiety, stress due to prolonged exposure	Discomfort, irritability	Reduced attention, burnout in lab staff	Feng et al., 2010

Bronchial constriction, coughing, sore throat, and nasal irritation are reported due to formaldehyde vapour inhalation. Long-term exposure can cause pharyngitis, persistent rhinitis, and in extreme situations, chronic obstructive pulmonary disease (COPD)<sup>3</sup> Dermatological reactions reported are contact dermatitis, skin rashes, burning, and itching. Sensitisation from repeated exposure can lead to allergic dermatitis.<sup>6</sup> Neurological impacts of formalin vapour include headaches, poor focus, vision problems, memory loss, and loss of coordination due to interference with neurotransmission.<sup>2</sup> According to the International Agency for Research on Cancer (IARC), formaldehyde is a Group 1 carcinogen. Leukaemia, paranasal malignancies, and nasopharyngeal carcinoma have all been associated with prolonged contact, due to genotoxicity and compromised DNA repair caused by DNA-protein cross-linking. Anatomists, pathologists, and funeral workers who are exposed to formalin have a higher risk of cancer.<sup>7</sup>

The aldehyde group in formaldehyde is an extremely reactive electrophilic carbon atom which diffuses rapidly across membranes and creates cross-links with amino, carboxyl, and sulfhydryl groups in proteins and nucleic acids causing mutations, apoptosis, and cancer and which releases vapours in aqueous solution (formalin) that easily pass through mucosal surfaces of body<sup>7,8</sup>

Occupational Exposure Limit (OEL) as per OSHA (USA) is 2 ppm (short-term exposure limit), 0.75 ppm (8-hour TWA). ACGIH: ceiling level is 0.3 ppm. Dose-response for Eye and nose mild discomfort at <0.1 ppm, respiratory symptoms at 0.5–2 ppm, Severe mucosal damage, headaches, nausea, and sensitisation risk at >5 ppm. Long-term exposure to even low concentrations can cause sensitisation, carcinogenesis, and cumulative DNA damage<sup>9</sup>

## Discussion

Research conducted all over the world has revealed alarming patterns. Chaudhary et al. (2011) have reported from their study that more than 80% of medical staff in India feel irritated or uncomfortable by formalin. O'Callaghan and Naidoo (2012) discovered large number of dissection rooms in South Africa to have exposure levels beyond the permissible limits. Fadeyibi et al. (2009), from their study in Nigeria encountered the occurrence of ocular and respiratory problems. The attempt to overcome the side effects, the developed countries, USA and Germany have adopted low-formaldehyde solutions with adequate ventilation settings.

A thorough review of various preventive strategies to minimize the damage due to formalin have been surmised to be Engineering modifications, administrative paraphernalia, use of personal protective equipment, alternative less hazardous methods together with appropriate work practices and periodic health check ups.

**Table 2: Measures to Minimize Damage due to Formalin Exposure**

Category	Strategy/Measure	Description	Effectiveness Level	Remarks/Recommendations
Engineering Controls	Ventilation Systems	Installation of down-draft tables, exhaust fans, local exhaust hoods	★★★★★	Ensure regular maintenance and proper positioning
Administrative Controls	Duty Rotation & Exposure Limitation	Restrict prolonged dissection sessions and rotate duties	★★★★☆	Reduces cumulative exposure in long-term
Personal Protective Equipment (PPE)	Masks, gloves, goggles, lab coats	Barrier to prevent inhalation, skin and eye contact	★★★★☆	Use formaldehyde-rated masks (e.g., N95 with carbon filter)
Substitution	Use of formalin substitutes	Use phenoxyethanol-based or glyoxal-based preservatives	★★★☆☆	May compromise preservation quality; under research
Work Practices	Proper handling & disposal protocols	Avoid spillage, tightly seal containers, use under fume hoods	★★★★☆	Training and SOPs required
Health Surveillance	Periodic health checkups	Monitor lung function, dermatological and neurological health	★★★★☆	Record exposure history; early detection possible
Training & Awareness	Education programs	Inform anatomists and students about risks and safe practices	★★★★★	Improves compliance with safety protocols

## Conclusion

Anatomists and lab technicians are very susceptible due to prolonged exposure, which is worsened by poor ventilation and gross neglect of safety measures, The use of preventive measure namely engineering controls, appropriate personal protective equipment and administrative reformative measures and safe preservation alternatives have proved to be effective to a great extent by the present review. In order to reduce formalin hazards, medical institutions must incorporate formalin safety training into academic curriculum. The need of the hour is administrative changes in infrastructure and precise adherence to safety measures in cadaveric labs and dissection halls for a safe working environment.

**Reference:**

1. IARC (International Agency for Research on Cancer). Formaldehyde, 2-Butoxyethanol and 1-tert-Butoxypropan-2-ol. IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, Vol. 88. Lyon: World Health Organization 2006
2. Fadeyibi IO, Izegebu MC, & Ogundipe KO. Health hazards of formaldehyde exposure in anatomy laboratories. *Nigerian Quarterly Journal of Hospital Medicine*, 19(1):37–41. 2009
3. O'Callaghan AR, & Naidoo S. Effect of formalin on medical students and anatomy staff: A systematic review. *South African Journal of Anatomy and Physiology*, 17(1), 4–9. (2012).
4. Coleman R, & Kogan I, Anatomical teaching: Ghosts of the past, present and future. *Clinical Anatomy*, 11(5), 334–337. 1998
5. ATSDR (Agency for Toxic Substances and Disease Registry). Toxicological Profile for Formaldehyde. U.S. Department of Health and Human Services. 1999
6. Chaudhary A, Singh A, & Agarwal A. Health hazards of formaldehyde exposure in medical students and professionals. *Indian Journal of Occupational and Environmental Medicine*, 15(3), 149–153. (2011)
7. Tang, X., Bai, Y., Duong, A., Smith, M. T., Li, L., & Zhang, L. Formaldehyde in China: Production, consumption, exposure levels, and health effects. *Environment International*, 35(8), 1210–1224. (2009).
8. Kilburn, K. H. Neurobehavioral impairment and seizures from formaldehyde. *Archives of Environmental Health*, 49(1), 37–44. 1994
9. Salthammer T, Mentese S, & Marutzky R. Formaldehyde in the indoor environment. *Chemical Reviews*, 110(4), 2536–2572. (2010).