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Artificial Stone, Real Danger



Cutting, grinding, and polishing artificial stone slabs containing crystalline silica can expose countertop fabrication workers to toxic dust that can cause silicosis.

James P. Nevin

Artificial stone slabs containing crystalline silica have become a popular choice for kitchen and bathroom countertops. They are more durable and cheaper compared to some natural stone slab products. But countertop workers who fabricate these slabs can develop artificial stone silicosis, a potentially fatal lung disease, as well as other related diseases.[1] The disease disproportionately affects young, undocumented immigrant workers in the United States.[2]

Artificial stone slabs—also known as quartz, engineered, synthetic, or manufactured stone—can contain up to 95% crystalline silica that has been pulverized and crushed into nanosized particles and mixed with toxic metals and toxic resins.[3]

By comparison, natural stones such as granite and marble are naturally occurring, have significantly less crystalline silica, contain larger crystalline silica particles, and are not mixed with toxic materials. Natural stone slabs release

far fewer toxins and carcinogens into the air during fabrication.[4]

In contrast, cutting, grinding, drilling, and polishing artificial stone slabs containing crystalline silica release nanosized crystalline silica and other toxic dust into the air, which workers can then inhale, potentially leading to silicosis.[5]

When Silicosis Strikes

Silicosis causes scarring, or fibrosis, in the lungs.[6] There are three main types.

Chronic silicosis. The most common form develops gradually after many years—often decades—of silica exposure.[7]

Accelerated silicosis. This form develops after several months to a few years of exposure and has increased rapidly since artificial stone entered the countertop market.[8] Once a person receives a diagnosis of accelerated silicosis, the disease has typically advanced to progressive massive fibrosis.[9]

Acute silicosis. The most severe form can develop after just weeks or months of exposure to very high levels of silica dust.[10] It can lead to pulmonary alveolar proteinosis, in which proteins, fats, and other substances build up in the air sacs of the lungs and prevent sufficient oxygen from reaching the bloodstream.[11]

Because silicosis caused by artificial stone is both unique and severe, it is often called artificial stone silicosis.[12]

Silicosis is often misdiagnosed as a cold, asthma, pneumonia, tuberculosis, or sarcoidosis. Standard chest X-rays and CT scans may miss the disease. Diagnosis typically involves a high-resolution CT scan, a pulmonary function test, a medical exam, and a detailed occupational history. A lung biopsy may be necessary in some cases.

Socioeconomic factors or immigration status can limit fabrication workers' access to specialized care, potentially leaving some workers undiagnosed or untreated.

Silicosis has no cure. Once accelerated or acute silicosis develops, patients may require supplemental oxygen or, in some cases, a lung transplant. Average survival after a lung transplant is only five to seven years, meaning some patients may eventually require another or die.

Exposure to artificial stone dust also can cause other health problems, including lung cancer, chronic obstructive pulmonary disease, asthma, rheumatoid arthritis, and kidney disease.[13]

A Known Danger

Silicosis has been recognized for centuries, from workers who quarried stone to build the Egyptian pyramids to miners and factory workers during the Industrial Revolution.[14]

Long before artificial stone became popular in the United States, manufacturers and suppliers knew that fabricating these products posed a serious risk of silicosis.[15] Artificial stone fabrication workers in Australia, China, Israel, Italy, and Spain have died from silicosis.[16] Since the 2010s, global peer-reviewed studies have shown the dangers of crystalline silica artificial stone.[17] Yet manufacturers continued to sell these artificial stone slabs in the United States, marketing them as "pure natural quartz."

The first diagnosis of silicosis linked to artificial stone in the United States occurred in Texas in 2014.[18] California has since become an epicenter of the disease. The state Department of Public Health has confirmed 652 cases among fabrication workers since 2019, and a majority of fabrication shops have had at least one case.[19]

These silicosis cases prompted the California Occupational Safety and Health Standards Board and the California Division of OSHA (Cal/OSHA) to investigate crystalline silica artificial stone slabs, ultimately determining that the product is "uniquely toxic."[20] Following this finding, the Cal/OSHA Standards Board proposed a ban on the fabrication and manufacture of artificial stone slabs containing more than 1% crystalline silica.[21]

Safer alternatives are readily available.[22] Most major manufacturers now offer safer "no-silica" artificial stone slabs made with recycled glass. Yet many manufacturers and distributors continue to make and sell crystalline silica slabs.

Process or Product?

Artificial stone manufacturers and suppliers commonly argue that fabrication practices—not the product itself—cause workers' silicosis. They point to fabrication shops' failure to comply with OSHA safety requirements.[23] But several arguments undermine that defense.

Licensure. California, for example, does not require a license to fabricate artificial stone

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The plaintiffs argued that **the slabs were defectively designed** because they could not be fabricated safely.

countertops. Some fabrication shops hold C-54 ceramic and mosaic tile contractor licenses, but those licenses do not regulate slab fabrication or silica safety.[24]

Limits of OSHA standards. OSHA's permissible exposure limit (PEL) for respirable crystalline silica does not represent a risk-free level of exposure.[25] Research has also found that commonly used engineering controls and personal protective equipment may not eliminate exposure to toxic artificial stone particles during fabrication and may be insufficient to prevent disease.[26] Even with wet-cutting methods and respiratory protection, toxic artificial stone dust and mist exposure can exceed OSHA's PEL.[27]

Building the Case

One of the first trials in the United States took place in Los Angeles in 2024, where Gustavo Reyes Gonzalez, who developed silicosis at age 34 and underwent a lung transplant, obtained a plaintiff verdict, including both economic and noneconomic damages.[28]

In April 2026, Tyler Jordan prevailed in an artificial stone trial outside California.[29] Jordan developed silicosis and chronic kidney disease at age 28 and had undergone a kidney transplant but had not yet had his first lung transplant.[30]

In August 2026, two additional plaintiff verdicts for the families of Wilmer Martinez Paredes and Gerardo Ramirez-Soriano occurred in Los Angeles.[31] More than 600 individual civil lawsuits have been filed with at least 400 more currently pending.[32]

In all of these cases, the plaintiffs challenged manufacturers' marketing of artificial stone as "pure" and "natural," alleged the products had inadequate warnings, and argued that the products were defectively designed because they could not be fabricated safely.[33]

Additional civil cases have been filed in several other states alleging the same causes of action.[34] In California, artificial stone silicosis cases have been consolidated for pretrial proceedings in Judicial Council Coordinated Proceeding No. 5378.[35]

Damages. Filing a civil lawsuit allows fabrication workers and their families to recover economic damages. Depending on the jurisdiction, plaintiffs may recover past and future lost income, loss of household services, and medical expenses, as well as noneconomic damages for pain, distress, and suffering. Punitive damages also may be available, depending on the jurisdiction and evidence of the defendants' conduct, such as knowingly manufacturing and marketing a toxic product as "natural" without any warning labels.

Practical challenges. Because fabrication workers encounter an extensive number of brands throughout their careers and the artificial stone slab distribution network contains manufacturers, distributors, suppliers, designers, and contractors, each case typically has 50 to 100 defendants. Uncovering every defendant often requires a significant amount of investigation.

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Plaintiffs usually have about 10 experts. But because of the sheer number of defendants, there may be 30 or more defense experts to depose. In order to prove (or dispute) exposure, diagnosis, causation, fault, and damages, the experts on both sides typically include industrial hygienists, toxicologists, pathologists, radiologists, pulmonologists, occupational medicine specialists, epidemiologists, transplant specialists, life care planners, economists, and human factors specialists, among others.

Some artificial stone manufacturers and distributors are seeking passage of the Protection of Lawful Commerce in Stone Slab Products Act.[36] The bill claims that artificial stone is not inherently dangerous and does not pose an inherent risk of injury.[37] It would preempt state laws and give immunity to artificial stone manufacturers and distributors for all current and future civil lawsuits, effectively ending civil litigation.[38]

The bill's opponents state that an increasing share of the artificial stone slabs sold in the United States are manufactured overseas and that global research has demonstrated that these slabs are "uniquely toxic" products that humans cannot fabricate safely.[39] Therefore, this bill would give immunity to many foreign manufacturers and prevent U.S. workers who claim their products caused silicosis from holding them accountable.[40]

While crystalline silica artificial stone slabs continue to dominate the countertop fabrication market, thousands of young fabrication workers across the country will continue to develop fatal artificial stone silicosis and other diseases. As the number of workers diagnosed with artificial stone silicosis increases, so will the number of civil lawsuits filed across the country. T



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Notes

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AAJ Opposes Stone Slab Immunity Bill

The Protection of Lawful Commerce in Stone Slab Products Act, H.R. 5437, would shield artificial stone slab manufacturers and sellers from federal and state civil lawsuits and require courts to dismiss pending claims against them. In June, the House Judiciary Committee voted along party lines to advance the bill.

Supporters argue that manufacturers and sellers do not control the fabrication process and therefore should not be responsible for workers' exposure to silica dust. Plaintiffs, however, argue that manufacturers produce these slabs specifically for cutting and polishing into countertops. The lawsuits targeted by H.R. 5437 allege that the slabs are defectively designed because fabricating them is necessary to turn them into finished products.

AAJ has opposed the legislation by engaging with key congressional staff, lobbying lawmakers, and working to prevent the bill from gaining bipartisan support. AAJ will continue working to prevent the bill from advancing.

For more information, contact Elizabeth Farrar, AAJ's senior director of government affairs, at elizabeth.farrar@justice.org. T

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23. Trial Transcripts June 24–Aug. 7, 2024, and All Marked Exhibits, *Reyes-Gonzalez v. Caesarstone, Cambria*, No. 22STCV31907 (Cal. Super. Ct. Los Angeles Cnty.); Trial Transcripts Apr. 13–Apr. 29, 2026, *Jordan v. Cambria Co., LLC*, No. 2024CV31180 (Colo. Dist. Ct. Denver Cnty.) and *Hyundai L&C USA, LLC*, No. 2024CV31180 (Colo. Dist. Ct. Denver Cnty.); *Decision Regulation Impact Statement: Prohibition on the Use of Engineered Stone*, *supra* note 22.
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27. *Id.*
28. Amended Judgment on General Verdict as to Caesarstone USA, Inc. and Cambria Company LLC After Aug. 7, 2024, Jury Verdict in *Reyes-Gonzalez*, No. 22STCV31907 (Mar. 18, 2025).
29. Entry of Final Judgment, Jury Verdict, *Jordan*, No. 2024CV31180 and No. 2024CV31180 (May 19, 2026).
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31. *Gonzalez Rodriguez, v. Dal-Tile Distribution, LLC*, No. 23STCV29755 (Cal. Super. Ct. Los Angeles Cnty. Aug. 3, 2026); *Ramirez-Soriano v. Dal-Tile Distribution, LLC*, No. 30-2024-01439369 (Cal. Super. Ct. Los Angeles Cnty. Aug. 19, 2026).
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