

PLAINTIFF'S EXHIBIT

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INDUSTRIAL HYGIENE DIGEST

Literature Abstracts

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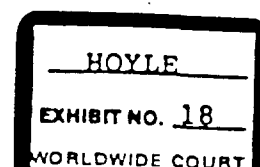
Industrial Health News



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References to Recent Literature - 4

2 ASBESTOSIS. E. W. Bader. *Deutsche med. Wochenschr.* 63, 407-408 (1939). (German)
A short but excellent description of the origin, clinical aspects and diagnosis of pulmonary asbestosis. Asbestososis and lung cancer of asbestos workers are discussed. It is comparatively rare to find asbestosis complicated by pulmonary tuberculosis in Germany.

3 TUBERCULOSIS IN INDUSTRY. A. J. Riddell. *Canadian Pub. Health J.* 26, 126-130 (March 1939).
The author concludes that "although the relation of certain occupations to the occurrence of tuberculosis is somewhat disquieting, industry in general does not constitute a source in this respect." He states that "industrialization has raised the general standards of living as to more than counteract any adverse influence which specific industries exert." Insurance reports indicate a higher death rate among industrial as contrasted with non-industrial groups in the same community. The influence which may exert an adverse effect on an industry's tuberculosis rating are discussed, particularly poverty and overcrowding. The results of surveys of overworked plants are revealing. The importance of tuberculosis in relation to silicosis is illustrated by observations on a series of 375 cases which occurred in Ontario during the past 10 years and on a group in one of the northern mining camps, where the transmission of tuberculosis to contacts was particularly noted. The economic aspect of tuberculosis exerts a severe strain on the community and industry, and the results of treatment as far as the individual worker is concerned are not encouraging, for are ever again permanently self-supporting. The necessity of preventive measures for early detection of cases is pointed out. Such measures should include chest roentgenograms, supplemented by laboratory facilities.

4 TUBERCULOSIS AND CALSON DISEASE. J. Am. Med. Assoc. (Queries and minor notes) 112, 1990 (May 13, 1939).
A man who had an attack of calson disease made a almost complete recovery. At that time his lungs were normal although no roentgenograms were taken. A year later the man developed active tuberculosis. The reply states that there is no logical connection between these two conditions; it is quite possible that pre-symptomatic tuberculosis was present originally but not detected.

5 A STUDY OF THE EFFECTS OF EXPOSURE TO DUST IN THE MINING AND MILLING OF PYROPHYLLITE. H. F. Eason, M. F. Price and C. C. Carpenter. Division of Industrial Hygiene, North Carolina State Board of Health and North Carolina Industrial Commission, Bulletin, 169 pp. (February 1939). For sale by the Division, Raleigh, N. C. Price 50 cents.
Pyrophyllite is a natural hydrated aluminum silicate containing 30% alumina, 74% silica--of which from 25% to 35% is quartz. It is employed in the manufacture of rubber goods, textiles, roofing paper, soap, paint, toilet preparations, and ceramic products. Exposure of workers in mining and milling processes, which are inherently dusty occupations, constitutes a serious hazard and many of them develop a lung condition designated as pneumoconiosis. The pyrophyllite dust causes a pulmonary fibrosis which appears on the x-ray film as massive tumor-like shadows bilaterally situated in the subapical region or as granular densities throughout the lungs. Emphysema is common and radiation rare. The pathology appears to be permanent and tends to progress. Tuberculosis is not necessarily a complicating factor. The examinations reported here cover 101 present and former employees; 35% of those with 2 years or more exposure showed evidence of lung pathology. The Bulletin also includes methods for dust control, numerous reproductions of x-rays and microphotographs and many plant and mine scenes.

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