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PLAINTIFF'S
EXHIBIT

K414

November 29, 1963

Mr. J. M. Briley - Toledo

F. H. Edwards - Toledo

ATTACHED REPORT

The report describes what little information we have about Dr. Selikoff and several fairly recent statements by Dr. Kenneth Smith, J-M Medical Director.

Our present concern is to find some way of preventing Dr. Selikoff from creating problems and affecting sales. A direct approach might be more damaging than helpful and I am only suggesting that we explore, at this time, all avenues open to us.

As I explain in the report, we know of no real evidence that permits Dr. Selikoff to take this positive position and this point could be used effectively in explaining our position to Mount Sinai Hospital officials. This certainly would force Dr. Selikoff to produce what information he has.

Neither Dr. Bishop nor I would want to have an issue made of our surprise and suspicions about Dr. Smith's statements. I mention them only because they might be indicative of at least some of the thinking in J-M.

F. H. Edwards

FEB:JS

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5. Dr. Salihoff refers to fibrous glass as a "micro-particulate" substance. If he has used this in the literal sense, he is wrong in respect to more than 99% of air-borne glass fibers. Air sampling surveys made by Hattering Laboratory and Actua have shown that less than 1% of air-borne glass fibers in our plants is under 10 microns in maximum dimension. It is generally agreed in the medical profession that few particles over 10 microns enter the lungs proper. After several years of study, Dr. Leroy U. Gardner concluded that Fiberglas particles are not inhalable.

It is a common error on the part of pathologists, public health officials and others to compare Fiberglass particles with free silica, asbestos and coal dusts which often are sub-micron in size. Fiberglass seldom breaks down to such small particles and we must mill them to make them usable for animal studies.

- d. Note that Dr. Salikoff states in the last sentence of the third paragraph of his letter, "These theoretical considerations" which indicates he has nothing substantial upon which to base his ideas. Further, he has selected a 20-year period or longer in which a lung disease from glass dust exposure would develop subjective or objective symptoms. In my opinion, he has selected a long period of time mainly because he has not found any lung diseases that he could attribute to glass dust. It is true that pneumoconiosis takes years to develop symptoms but numerous cases show up in a matter of 12 or more years because of the unusual susceptibility of a small group of people.
- e. To our knowledge, Dr. Harper has never published anything relating Fiberglass to lung cancer or other lung diseases. Incidentally, he was one of the few supporters of Salikoff at the New York asbestos meeting.

Dr. Schapers came in as head of Sarnac Lab. during the time that Fiberglass-reinforced plastic resin was being studied and published a number of articles that implied that Fiberglass dust might be harmful. This is a long story.

2. Dr. Selikoff indicates that he is attempting to restrict the uses of Fiberglas. I am sure that he has nothing concrete to show to Public Health officials.
7. Our own position is somewhat delicate and I believe we should approach it cautiously. It would be of interest to know to what extent Dr. Baeyer and Dr. Schepers would back him but they are all out from the same cloth.
8. We have had several formal and informal conferences on Dr. Selikoff and the health aspects of glass with Dr. Kenneth Smith and Mr. Clifford Sheckler, Manager of Health, of Johns-Manville Company. We entered these meetings with the thought that the fibrous glass business is a relatively small part of J-M's total volume and for this

Reason they might be less concerned over the problem that we are. They have never contributed anything to our health knowledge.

Dr. Bishop, Lew Searby and I have heard of certain statements or actions by Dr. Smith that have caused us to question his motivations. However, they should not be made an issue with J-M.

Within the past year, Dr. Smith has:

1. Supplied a pathologist with information about the composition of J-M binders which, along with Fiberglas binders, were being questioned by a health group.
2. Publically stated that he had no quarrel with statements made by Dr. Selikoff in regard to the biological effects of asbestos although we know that Dr. Smith and other J-M people were fighting his every move during the New York symposium. It seems evident that they do not want to make an open fight of it.
3. In a talk before physicians and industrial hygienists in October, 1963, he referred to Dr. Selikoff's article on asbestos and said that very little asbestos was being used in those early days. He questioned why Dr. Selikoff would select asbestos as the culprit when cork, mineral wool and Fiberglas were used. The implication is obvious and in truth Fiberglas could have been omitted as it was not produced in the early days, either.