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Occupational Cancer before the APHA

M E M O R A N D U M

November 22, 1948

Subject: PAPER READ BY DR. W. C. HUEPER ON THE SUBJECT OF
OCCUPATIONAL CANCER BEFORE THE APHA

Dear Doctor Woody:

A paper entitled Prevention and Control of Industrial Cancer was read by Dr. W. C. Hueper, Chief, Environmental Cancer Section, Cancer Control Branch, National Cancer Institute, Bethesda, Md., before the Industrial Hygiene Section and Subcommittee on Medical Care of the American Public Health Association. The occasion was the 76th Annual meeting of the APHA and an audience estimated by the writer at 200 - 300 people were in attendance at Talbot Hall, Mechanics Building, Boston, Massachusetts at 2:30 P.M., November 11, 1948.

In his preliminary remarks, Dr. Hueper indicated that research on the etiology of cancer indicated a strong link between environment and cancer incidence. Recent evidence has pointed out a definite correlation between cancer incidence and exposures to ultra-violet radiation, asbestos, benzol, certain organic amines, paraffin oils, as well as heavy petroleum distillates and degradation products such as tars, cokes, and pitches. He then discussed an idealized approach to the control of the problem which would involve the following points:

- 1) Evaluate the carcinogenicity of suspected compounds and materials through animal experimentation.
- 2) Investigate vital statistics records for cases of cancer and trace the employment history of these individuals. In certain instances it might be necessary to employ Social Security records to follow the employment of the individual.
- 3) In case that the foregoing provides evidence pointing to an unusual incidence of cancer in a certain industry, the plant records of that industry will be investigated to determine what activities and exposures within that industry produce the higher incidences of cancer.
- 4) Medical diagnostic procedures must be improved as a great many cases are being missed at the present time. Considerable work of this type is being done in private laboratories and the

Public Health Service is setting up such a laboratory at Georgetown University, Washington, D. C.

- 5) Initiate preventive measures as soon as possible since the identification of the offending agent is not necessary. Industrially, the approach would be as follows:
 - a) Through technical control aim at the complete elimination of the exposure, or,
 - b) Minimize the exposure by seeking improved industrial apparatus such as leak-proof equipment, closed systems, etc.
 - c) Provide suitable personal protective equipment such as gloves, boots, impervious clothing, etc.
 - d) Provide adequate sanitary facilities. This would require an expansion of locker facilities in most existing plants.
 - e) Instruct the workers in the proper use of the protective measures provided and tell them why their cooperation is required.
 - f) For certain operations in industry the exposure may be minimized by the use of teams, trained to perform their duties with a minimum of exposure, and provided with special safeguards.
- 6) Medical control programs must be set up, not only for current diagnosis and treatment, but aimed at following the worker throughout a latent period which may extend for 15-20 years.
- 7) A governmental factory inspection system would be set up to insure that the foregoing requirements are met.
- 8) Protection for workers in interstate commerce would be secured by setting up standards for containers and suitable warning labels.
- 9) Registration and licensing by a government agency would be required for those factories handling known carcinogens.
- 10) Amending of present State occupational disease laws to provide suitable compensation for occupational cancer and to insure the industrial control of exposures.


Clyde M. Berry,
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