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aggravate . . . functional or organic disease. It is particularly the person with an active peptic ulcer who is likely to be harmed by smoke. His response to active treatment will be much less satisfactory than that of the patient who gives up smoking entirely." These views are also shared by leading specialists in gastro-intestinal diseases. It has been shown that low-nicotine or filter-type cigarettes reduce the damage of smoking in persons with active stomach or duodenal ulcer.

SUMMING UP

In summing up the evidence, it seems established that smoking is harmful in vascular disorders of the extremities and the eyes; and in active peptic ulcer. Inhaling smoke is also definitely irritating to the nose, throat and larynx. The evidence is inconclusive with respect to the effects of smoking on athletic ability, and on heart disorders.

As for cancer of the lung, the most reasonable view at this time relates its phenomenal and alarming rise in frequency in industrial countries partly to the diffusion in the air of carcinogens derived from industry and transportation, partly to unusual exposures to carcinogens in many occupations, and partly to excessive cigarette smoking. The control of respiratory or lung cancer would appear to require a three-pronged effort by individuals, communities, industries and voluntary health agencies (such as the American Cancer Society) against 1) air pollution, 2) occupational exposure and 3) excessive cigarette smoking. How significant a factor regular cigarette smoking is in contributing to lung cancer remains to be determined. Until more conclusive evidence is reported, it would seem prudent to reduce cigarette smoking to less than a half pack a day or to smoke a pipe or cigars in moderation. There is no conclusive evidence that smoking a nicotine, or filter, or king-size cigarettes offers substantial protection to those with disorders which are known to be aggravated by smoking.

What can be said for the smoking habit?

All living organisms are characterized by the property of "irritability." When an organism receives a stimulus, it reacts by a discharge of energy. Human beings are exposed to an enormous number of stimuli in their environment. Among the most important of these are the stresses and strains of modern society—of family, occupation and community tensions. To contend with these tension stimuli, and for relief from them, man has adopted a number of activities, including smoking. Reaching for a cigarette, lighting it, holding it in the mouth, inhaling and blowing out clouds of smoke are motor activities that relieve tensions. Cigarette smoking also provides at least one chemical, nicotine, which appears to have a tranquillizing effect on the nervous system. These effects may be so valuable to some individuals that they will willingly risk whatever harm may be associated with the habit. On the other hand, there are many for whom these risks are not worthwhile and who should therefore cut out or cut down on their smoking.

POSSIBLE INDUSTRIAL CAUSES OF LUNG CANCER

CHROMATES FROM

CHROME ORE SMELTING,
PLATING, PIGMENTS, PAINTS,
INKS AND ABRASIVES

NICKEL CARBONYL FROM

NICKEL ORE REFINING,
PLATING AND BUFFING

ARSENIC FROM

ARSENIC MINING,
SMELTING, PESTICIDES

ASBESTOS FROM

ASBESTOS MINING,
PROCESSING AND WEAVING

TAR FUMES FROM

TAR MANUFACTURING,
COKE OVEN SERVICING

ASPHALT DUST FROM

ASPHALT PITCH,
SOOT, ROADS

RADIOACTIVE DUST FROM

URANIUM MINING,
URANIUM REFINING

The tremendous growth of industry, no less than the increases in cigarette smoking, has paralleled the rise in lung cancer mortality. Many industrial waste products contain known carcinogens capable of polluting the air