

FILE NAME: Metropolitan Life (ML)

DATE: 1933

DOC#: ML306

DOCUMENT DESCRIPTION: Dr. Lanza Opposes Warning Signs in J-M
Plant in 1933

that such airline respirators were "on the market," he was fully aware that they cannot be worn except by a person who stands in one place as they have to be hooked up with a rubber tube to an air line. I doubt if they would be practical in a textile plant."

Exhibit:

"Questions Asked Dr. A. J. Lanza and His Answers Verbatim," forwarded by S. Williams to A. Fisher (August 29, 1933).

3034. Asked whether the workers should be warned of the hazard in breathing asbestos dust, Lanza responded that no such warnings should be given, "especially ... in view of the extraordinary legal situation" (presumably a reference to the recently settled asbestosis suits).

Exhibit:

"Questions Asked Dr. A. J. Lanza and His Answers Verbatim," forwarded by S. Williams to A. Fisher (August 29, 1933).

3035. Asked whether employees diagnosed as having asbestosis would be removed from areas that produce dust, Lanza responded that it would depend on a number of factors:

If he is well along in years and shows no disability, it may be just as well to leave him alone. One of the difficulties and vexations in trying to deal with the problem of pneumoconiosis is that economic as well as production factors must be balanced against the medical factors.

*Lanza advises
against warning
signs on asbestos
at J-M plant in
1933*



Mr. J. E. Williams
Washington, D.C.
Also President

Enclosed to you are by Mr. Williams's office of questions
- asked by Mr. J. E. Williams, former of Washington and
his answers also the recommendations of our plant physician.
I would like to have you turn this over to someone who could
review this correspondence and then go over it yourself and
give me your opinion of it.

QUESTIONS ASKED BY J. E. WILLIAMS
AND HIS ANSWERS THEREON

Mr. J. E. Williams
Manager
Burlington, Vermont

Enclosed & Continued

General Headquarters
August 29, 1935

**RECOMMENDATIONS OF PLANT PHYSICIAN FOLLOWING
EXAMINATION OF EMPLOYEES IN TEXTILE DEPARTMENT AND COMMENT BY**

DR. A. J. LORRA

1. The provision of the best type of dust collection and exhaust ventilation equipment.

Comment: By all means.

2. Personal respiratory protection of an adequate and approved type for every employee in this department.

Comment: I do not know.

3. Employees in the textile department should tactfully but definitely be made aware of the fact that work in asbestos dust is hazardous to their health. Every reasonable effort should be made to induce them to wear respirators. They should be instructed in the necessity of thoroughly cleansing their hands before eating lunch and after work and provided with adequate facilities for doing this.

Comment: I think this is art, at least for the present. Personal cleanliness does not enter into this problem.

4. I advise rigid adherence to the factory manager's order that no employees be hired or rehired in this department without first being examined and approved by the plant physician and further that no employee be transferred to this department without first being approved by the physician.

Comment: Absolutely correct.

5. I advise re-examination, as indicated, of all workers in asbestos dust and x-rays of any suspected cases. I consider the re-examinations and the continued study of this hazard and its effects of more importance than the first examination. From this point of view, the study of some of these cases may be considered complete.

Comment: Entirely correct, with the understanding that no examination without an x-ray is worth anything in dealing with Pneumoconiosis.

6. I request, if possible and approved by Mr. Williams, contact with some authority on asbestosis who has x-ray films showing the condition. This for the purpose of comparative study of our suspected cases.

Comment: We can probably help you in this if your company is willing.

7. My rejection of Marie Intushki, made at the time of first examination, stands.

Comment: This is outside of my knowledge.

8. I have deferred rejection or classification of Edwin G. Bell, first, because of the delicacy of the situation which might arise in connection with his case, and secondly, because it is generally believed that removal of a worker from the dust will not retard or affect the progress of the disease once it is established.

Comment: Ditto.

This is partially covered by No. 1. I think it is better to
refrain to justify making points in light of what I have said, because
of some matters are concerned. It is especially true in view of the
unusually large amounts. It is better to keep the company to control the
to make a general statement that the company is doing well to control the
amount of time in the general health business. Any other action
placed in business would probably be influenced by the experience of other
plans of the company.

Answer:

There seems to be this place and particularly to have any other
plans which should be given.

Before making these and other work.
The company has no other plans in view and planning of them
plans, which are the first in business, and
then to have a point in place as we are considering plans in the de-
tails of the fact that business has to be made in order to be
in the same with the recommendation that business should be
made.

Question No. 2.

There is a plan to be made in a similar place.
I think it is better to be made in a similar place.
and controlled but they cannot be made except by a person who knows the
equipped with positive pressure and there are both industry, efficiency,
and safety. There are in the market with positive pressure which are
designed to regulate that it could not be made without an in order
regulator which will allow the flow, but it will allow as much as
regulators are not satisfactory. It is possible to construct a

Answer:

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Question No. 3.

QUESTION ASKED BY J. A. LUNA AND HIS ASSOCIATES

Question No-3.

Do you report the finding of asbestos bodies in the sputum as pathognomonic of asbestosis?

I have one employee with x-ray and physical findings pointing toward asbestosis but not sufficiently definite that I can be positive as to whether or not she has asbestosis. However, every one of four or five specimens of sputum examined show typical asbestos bodies. On the other hand, is it possible for a person to have asbestos and not to show, with careful and thorough search, to find asbestos bodies in the sputum?

Answer:

The presence of asbestos bodies in the sputum only implies that the individual has been exposed to asbestos dust. I am not certain of the exact pathological significance. My impression is that the presence of asbestos bodies in the sputum indicates some definite lung pathology. I believe it is quite possible for an individual to have asbestos within asbestos bodies in the sputum.

Question No. 3.

I have made a diagnosis of an individual as an employee who has been working in the card room of the textile department six years. This place is extremely dirty. He is not disabled. In my judgment the best disposal of such a case is to remove him from the work and give him a job in some other part of the plant. From your remarks in the case I believe this was your advice as to the disposition of such cases.

Answer:

It is difficult to answer this question. I think it really depends upon the man's age, the nature of his work, his length of service, and other considerations. If the man is young and has been working for a long time, it may be best to give him a job in some other part of the plant. If the man is old and has been working for a long time, it may be best to give him a job in some other part of the plant. From your remarks in the case I believe this was your advice as to the disposition of such cases.

[illegible]

We have what seems to be an unfortunate situation existing in the fact that the various health department including towns, counties, cities, etc., sometimes are able to clean half the width of a long building, the other side of which is occupied by the building, bridge building and other departments in which there is very little dirt, the cost from a half to one third of the health department is included by partition. Further back of the health department business considerable expense. Such complete inspection of the health department is necessarily recommended or will you be paid by the cost count and other departments in these adjoining departments.

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expended up to three times as much as the other agencies for the same work. The reason for this is that the other agencies are not permitted to spend more than \$1 per day for each person in the field. The other agencies are not permitted to spend more than \$1 per day for each person in the field. The other agencies are not permitted to spend more than \$1 per day for each person in the field.

QUESTIONS ASKED DR. A. J. LANZA AND HIS ANSWERS VERBATUM

Question No. 1.

Among eleven employees in the Textile department, all exposed to asbestos dust, one only wears a respirator, several on being questioned claim they cannot wear them continuously especially in hot weather.

Should all employees be forced to wear these respirators whether subjected to much or little asbestos dust? Is any such difficulty experienced at the Manville N.J. J-M plant or other places of which you have knowledge?

Answer:

Respirators are not satisfactory. It is possible to construct a respirator which will filter out fine dust, but it would offer so much resistance to respiration that it could not be worn continuously on an eight hour shift. There are on the market small face mask respirators which are equipped with positive pressure and these are both satisfactory, efficient, and comfortable but they cannot be worn except by a person who stands in one place as they have to be hooked up with a rubber tube to an air line. I doubt if they would be practical in a textile plant.

Question No. 2.

Do you agree with my recommendation that employees definitely be made aware of the fact that asbestos dust is hazardous to their health? My idea is that a poster be placed at one or more conspicuous places in the department, signed by the physician, stating that the dust is injurious, advising the continuous use of respirators while at work and cleansing of hands before eating lunch and after work.

Your comment on this please and particularly is there any additional advice that should be given?

Answer:

This is partially answered by No. 1. I doubt if the hazard is sufficient to justify warning posters as might be used where lead, benzol or carbon monoxide are concerned. This is especially true in view of the extraordinary legal situation. If anything is said at all, it would be better to make a general statement that the Company is taking steps to control the amount of dust in the air for general health purposes. Any action contemplated at Waukegan would probably be influenced by the experience at other plants of the Company.

#3977

Question No. 3.

Do you regard the finding of asbestosis bodies in the sputum as pathogenesis of asbestosis?

I have one employee with x-ray and physical findings pointing toward asbestosis but not sufficiently definite that I can be positive as to whether or not she has asbestosis. However, every one of four or five specimens of sputum examined show typical asbestosis bodies. On the other hand, is it possible for a person to have asbestosis and not be able, with careful and thorough search to find asbestosis bodies in the sputum?

Answer:

The presence of asbestos bodies in the sputum only implies that the individual has been exposed to asbestos dust. I am not certain of the exact pathological significance. My impression is that the presence of asbestos bodies in the sputum indicate some definite lung pathology. I believe it is quite possible for an individual to have asbestosis without asbestos bodies in the sputum.

Question No. 4.

Are you of the opinion that the added information derived from stereoscopic films of the chest justified the procedure of taking a stereo on every case that is to be x-rayed? This is the conclusion I draw from Dr. Pancost's talk in Chicago.

Do you consider it advisable and practical that an x-ray film be taken of every employee in the Waukegan J. M. plant who is exposed to asbestos or silica dust? To date I have x-rayed only those cases suspected, from history or physical findings, of having asbestosis of other lung pathology.

Answer:

Stereoscopic films are better than single films. They are also more expensive. In our work at the Picher Clinic, we used single films simply on account of the expense involved. You can diagnose silicosis or any other form of pneumoconiosis from a single flat film. On the other hand, you can probably get a more complete and accurate idea of the exact condition of any given case from a stereo.

If it is the intention to determine what may be the extent of pneumoconiosis among employees, obviously the only thing to do is to x-ray all of them and then correlate your findings with the length of exposure and nature of the job in order that you may get a fairly accurate idea of what the hazard is.

Question No. 5.

I have made a diagnosis of asbestosis on an employee who has been working in the card room of the textile department six years. This place is extremely dusty. He is not disabled. In my judgment the best disposition of such a case is to remove him from the dust and give him a job in some other part of the plant. From your remarks in Chicago I believe this was your advise as to the disposition of such cases.

Answer:

It is difficult to answer this question. I think it would depend upon the man's age, the nature of his work, his length of service, and other considerations which might have some bearing. If he is well along in years and shows no disability, it may be just as well to leave him alone. One of the difficulties and vexations in trying to deal with the problems of pneumoconiosis is that economic as well as production factors must be balanced against the medical factors.

Question No. 6.

We have what seems to be an unfortunate situation existing in the fact that the asbestos textile department including looms, twistors, pools, etc. occupies one side or about half the width of a long building, the other side of which is occupied by the packing, brake lining and other departments in which there is very little dust. The card room, or most dusty part of the textile department is isolated by partition. Further isolation of the textile department involves considerable expense. Should or would you be guided by the dust counts and other observations in these adjoining departments?

Answer:

I think the answer to the situation outlined in this question is the control of dust in those processes that cause it. When everything possible has been done to accomplish this result, it may then be necessary to isolate or confine the dusty processes so as to avoid needless exposure or other employees not concerned in these processes. This is a situation that occurs in many different types of industrial hazard. It calls for nothing more than the application of common sense to the problem.

RECOMMENDATIONS OF PLANT PHYSICIAN FOLLOWING
EXAMINATION OF EMPLOYEES IN TEXTILE DEPARTMENT AND COMMENT BY

DR. A. J. LANZA

1. The provision of the best type of dust collection and exhaust ventilation equipment.

Comment: By all means.

2. Personal respiratory protection of an adequate and approved type for every employee in this department.

Comment: I do not know.

3. Employees in the textile department should tactfully but definitely be made aware of the fact that work in asbestos dust is hazardous to their health. Every reasonable effort should be made to induce them to wear respirators. They should be instructed in the necessity of thoroughly cleansing their hands before eating lunch and after work and provided with adequate facilities for doing this.

Comment: I think this is out, at least for the present. Personal cleanliness does not enter into this problem.

4. I advise rigid adherence to the factory manager's order that no employees we hired or rehired in this department without first being examined and approved by the plant physician and further that no employee be transferred to this department without first being approved by the physician.

Comment: Absolutely correct.

5. I advise re-examination, as indicated, of all workers in asbestos dust and x-rays of any suspected cases. I consider the re-examinations and the continued study of this hazard and its effects of more importance than the first examination. From this point of view, the study of some of these cases may be considered complete.

Comment: Entirely correct, with the understanding that no examination without an x-ray is worth anything in dealing with Pneumoconiosis.

6. I request, if possible and approved by Mr. Williams, contact with some authority on asbestosis who has x-ray films showing the condition. This for the purpose of comparative study of our suspected cases.

Comment: We can probably help you in this if your company is willing.

7. My rejection of Marie Lutenski, made at the time of first examination, stands.

Comment: This is outside of my knowledge.

8. I have deferred rejection or classification of Dwain O. Bell, first: because of the delicacy of the situation which might arise in connection with his case, and secondly: because it is generally

believed that removal of a worker from the dust will not retard or affect the progress of the disease once it is established.
Comment: Ditto.



General Headquarters,
August 29, 1933.

Personal & Confidential

Mr. A. R. Fisher,
Manager,
Marville Factory

QUESTIONS ASKED DR. A. J. LANZA
AND HIS ANSWERS VERBATUM

Attached is copy made by Mr. Kottcamp's office of questions asked Dr. A. J. Lanza by our local physician at Waukegan and his answers; also the recommendations by our plant physician.

I would like to have you turn this over to someone who could review this correspondence and then go over it yourself and write me your opinion of it.

S. A. WILLIAMS,

Vice President

cc - Mr. J. P. Kottcamp
Waukegan Factory

- Andy Berkly's affidavit
- Parker's affidavit

QUESTIONS ASKED DR. A. J. LANZA AND HIS ANSWERS VERBATUM

Question No.1.

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Should all employees be forced to wear these respirators whether subjected to much or little asbestos dust? Is any such difficulty experienced at the Manville N.J. J-M plant or other places of which you have knowledge?

Answer:

Respirators are not satisfactory. It is possible to construct a respirator which will filter out fine dust, but it would offer so much resistance to respiration that it could not be worn continuously on an eight hour shift. There are on the market small face mask respirators which are equipped with positive pressure and these are both satisfactory, efficient, and comfortable but they cannot be worn except by a person who stands in one place as they have to be hooked up with a rubber tube to an air line. I doubt if they would be practical in a textile plant.

Questions No.2.

Do you agree with my recommendation that employees definitely be made aware of the fact that asbestos dust is hazardous to their health? My idea is that a poster be placed at one or more conspicuous places in the department, signed by the physician, stating that the dust is injurious, advising the continuous use of respirators while at work and cleansing of hands before eating lunch and after work.

Your comment on this please and particularly is there any additional advice that should be given?

Answer:

This is partially answered by No.1. I doubt if the hazard is sufficient to justify warning posters as might be used where lead, benzol or carbon monoxide are concerned. This is especially true in view of the extraordinary legal situation. If anything is said at all, it would be better to make a general statement that the Company is taking steps to control the amount of dust in the air for general health purposes. Any action contemplated at Waukegan would probably be influenced by the experience at other plants of the Company.

*Explains why didn't do it if plant (a)
Shows direct advise & check of
d cover-up they wouldn't produce*

Question No.3.

Do you regard the finding of asbestosis bodies in the sputum as pathogenesis of asbestosis?

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Answer:

The presence of asbestos bodies in the sputum only implies that the individual has been exposed to asbestos dust. I am not certain of the exact pathological significance. My impression is that the presence of asbestos bodies in the sputum indicate some definite lung pathology. I believe it is quite possible for an individual to have asbestosis without asbestos bodies in the sputum.

Question No.4.

Are you of the opinion that the added information derived from stereoscopic films of the chest justified the procedure of taking a stereo on every case that is to be x-rayed? This is the conclusion I drew from Dr. Pancost's talk in Chicago.

Do you consider it advisable and practical that an x-ray film be taken of every employee in the Waukegan J.M plant who is exposed to asbestos or silica dust? To date I have x-rayed only those cases suspected, from history or physical findings, of having asbestosis or other lung pathology.

Answer:

Stereoscopic films are better than single films. They are also more expensive. In our work at the Picher Clinic, we used single films simply on account of the expense involved. You can diagnose silicosis or any other form of pneumoconiosis from a single flat film. On the other hand, you can probably get a more complete and accurate idea of the exact condition of any given case from a stereo.

If it is the intention to determine what may be the extent of pneumoconiosis among employees, obviously the only thing to do is to x-ray all of them and then correlate your findings with the length of exposure and nature of the job in order that you may get a fairly accurate idea of what the hazard is.

Question No.5.

I have made a diagnosis of asbestosis on an employee who has been working in the card room of the textile department six years. This place is extremely dusty. He is not disabled. In my judgment the best disposition of such a case is to remove him from the dust and give him a job in some other part of the plant. From your remarks in Chicago I believe this was your advise as to the disposition of such cases.

Answer:

It is difficult to answer this question. I think it would depend upon the man's age, the nature of his work, his length of service, and other considerations which might have some bearing. If he is well along in years and shows no disability, it may be just as well to leave him alone. One of the difficulties and vexations in trying to deal with the problems of pneumoconiosis is that economic as well as production factors must be balanced against the medical factors.

Question No.6.

We have what seems to be an unfortunate situation existing in the fact that the asbestos textile department including looms, twisters, mools, etc. occupies one side or about half the width of a long building, the other side of which is occupied by the packing, brake lining and other departments in which there is very little dust. The card room, or most dusty part of the textile department is isolated by partition. Further isolation of the textile department involves considerable expense. Should or would you be guided by the dust counts and other observations in these adjoining departments?

Answer:

I think the answer to the situation outlined in this question is the control of dust in those processes that cause it. When everything possible has been done to accomplish this result, it may then be necessary to isolate or confine the dusty processes so as to avoid needless exposure of other employees not concerned in these processes. This is a situation that occurs in many different types of industrial hazard. It calls for nothing more than the application of common sense to the problem.

RECOMMENDATIONS OF PLANT PHYSICIAN FOLLOWING
EXAMINATION OF EMPLOYEES IN TEXTILE DEPARTMENT AND COMMENT BY

DR. A. J. LANZA

1. The provision of the best type of dust collection and exhaust ventilation equipment.

Comment: By all means.

2. Personal respiratory protection of an adequate and approved type for every employee in this department.

Comment: I do not know.

3. Employees in the textile department should factually but definitely be made aware of the fact that work in asbestos dust is hazardous to their health. Every reasonable effort should be made to induce them to wear respirators. They should be instructed in the necessity of thoroughly cleansing their hands before eating lunch and after work and provided with adequate facilities for doing this.

Comment: I think this is out, at least for the present. Personal cleanliness does not enter into this problem.

4. I advise rigid adherence to the factory manager's order that no employees be hired or rehired in this department without first being examined and approved by the plant physician and further that no employee be transferred to this department without first being approved by the physician.

Comment: Absolutely correct.

5. I advise re-examination, as indicated, of all workers in asbestos dust and x-rays of any suspected cases. I consider the re-examinations and the continued study of this hazard and its effects of more importance than the first examination. From this point of view, the study of some of these cases may be considered complete.

Comment: Entirely correct, with the understanding that no examination without an x-ray is worth anything in dealing with Pneumoconiosis.

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Comment: We can probably help you in this if your company is willing.

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Comment: This is outside of my knowledge.

8. I have deferred rejection or classification of Dwain O. Bell, first: because of the delicacy of the situation which might arise in connection with his case, and secondly: because it is generally believed that removal of a worker from the dust will not retard or affect the progress of the disease once it is established.

Comment: Ditto.

General Headquarters,
August 29, 1914.

Personal & Confidential

Mr. G. A. Fisher,
Manager,
Bainville Factory

CONFIDENTIAL - MR. A. J. LITTLE
MR. L. J. HARRIS, JR.

Attached is copy made by Mr. Rothcamp's office of questions
raised by A. J. Little by our local physician at Bainville and
his answers, also the recommendations by our plant physician.

I would like to have you turn this over to someone who could
review this correspondence and then go over it yourself and
write me your opinion of it.

A. A. Williams,

Vice President

Mr. J. E. Rothcamp
Bainville Factory

GOVERNMENT
EXHIBIT

D-7481

March 10, 1911

Very much interested in the results of the investigation, all reports to be made to the Secretary of the Army, and the results of the investigation to be made to the Secretary of the Army.

Should all reports be made to the Secretary of the Army, and the results of the investigation to be made to the Secretary of the Army.

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Should all reports be made to the Secretary of the Army, and the results of the investigation to be made to the Secretary of the Army.

Question 3rd.

Do you regard the finding of subversive tactics in the system as prejudicial to subversives?

I have no experience with any real political tactics relating to subversive tactics but not sufficiently sufficient that I can be paid to be in service or not the subversive. However, many one of four or five agents, some of whom are not subversive, are not subversive tactics. On the other hand, it is possible for a person to have subversive and not be able, with respect to the system, to find subversive tactics in the system.

Answer:

The presence of subversive tactics in the system only implies that the individual has been exposed to subversive tactics. I do not consider it the most prejudicial of circumstances. By implication it is that the presence of subversive tactics in the system implies that the individual has been exposed to subversive tactics. It is more likely to be quite possible for a person to have subversive or have subversive tactics in the system.

Question 4th.

Are you of the opinion that the whole information furnished from the Bureau of the State Department is the product of a person in every case that is to be exposed? Well, in the case of the Bureau, I am not sure.

Do you consider it advisable and practical that in every case the Bureau of the State Department should be exposed to the Bureau of the State Department or other Bureau of the State Department? In the case of the Bureau of the State Department, I am not sure.

Answer:

Presumably the Bureau of the State Department is the Bureau of the State Department. In the case of the Bureau of the State Department, I am not sure.

It is in the Bureau of the State Department that the Bureau of the State Department is the Bureau of the State Department. In the case of the Bureau of the State Department, I am not sure.

Question 2nd.

I have made a diagnosis of an employee who has been working in the card room of the textile department six years. His place is extremely dirty. He is not disabled. In my judgment the best disposition of such a case is to remove him from the card and give him a job in some other part of the plant. From your remarks in Chicago I believe this was your advice as to the disposition of such cases.

Answer:

It is difficult to answer this question. I think it would depend upon the man's age, the nature of his work, his length of service, and other considerations which might have some bearing. If he is well along in years and shows no flexibility, it may be just as well to remove him. One of the difficulties and variations in trying to conduct an industrial hygiene program is that conditions in the production factory must be taken into account and the medical department.

Question 3rd.

We have what seems to be an unfortunate situation existing in the fact that the asbestos textile department including looms, twistere, spools, etc. occupies one side or about half the width of a long building, the other side of which is occupied by the jacking, brake lining and other departments in which there is very little dust. The card room, or most dirty part of the textile department is isolated by partition. Further isolation of the textile department involves considerable expense. Should complete isolation of the textile department be unreservedly recommended or would you be guided by the dust counts and other observations in these adjoining departments?

Answer:

I think the answer to the question outlined in this question is the control of dust in these processes that cause it. When everything possible has been done to accomplish this result, it may then be necessary to isolate or confine the dirty processes so as to avoid needless exposure of other employees not concerned in these processes. This is a situation that occurs in many different types of industrial work. It calls for something more than the application of common sense to the problem.

Question 22.

I have made a diagnosis of an employee who has been working in the card room of the textile department six years. His place is extremely dirty. He is not disabled. In my judgment the best disposition of such a case is to remove him from the card and give him a job in some other part of the plant. From your records in Chicago I believe this was your advice as to the disposition of such cases.

Answer:

It is difficult to answer this question. I think it would depend upon the man's age, the nature of his work, his length of service, and other considerations which might have some bearing. If he is well along in years and shows up disability, it may be just as well to remove him. One of the difficulties and variations in trying to construct and maintain a production department is that conditions will be production factory that is in a general manner the medical department.

Question 23.

We have what seems to me an unfortunate situation existing in the fact that the selected textile department including looms, twist, spools, etc. occupies one side or about half the width of a long building, the other side of which is occupied by the packing, trade fixing and other departments in which there is very little dust. The card room, or most dirty part of the textile department is isolated by partition. Further isolation of the textile department involves considerable expense. Should complete isolation of the textile department be unreservedly recommended or would you be guided by the dust counts and other observations in these adjoining departments?

Answer:

I think the answer to the question outlined in this question is the removal of dust in these processes that cause it. When everything possible has been done to accomplish this result, it may then be necessary to isolate or confine the dirty processes so as to avoid needless exposure of other employees not concerned in these processes. This is a situation that occurs in many different types of industrial plants. It calls for something more than the application of common sense to the problem.

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RECOMMENDATIONS OF PLANT PHYSIOLOGY DIVISION

ILLUSTRATION OF SELECTION IN PLANT DEPARTMENT AND DEPARTMENT IN

DR. A. J. LILL

3. The provision of the best type of dust collection and exhaust ventilation equipment.
Comment: By all means.

4. Personal respiratory protection of an adequate and approved type for every employee in this department.
Comment: I do not know.

5. Employees in the fertile department should heartily be exhorted to make sure of the fact that work in sections that is hazardous to their health. Every reasonable effort should be made to induce them to wear respirators. They should be instructed in the necessity of thoroughly cleaning their hands before eating lunch and after work and provided with adequate facilities for doing this.
Comment: I think this is not, at least for the present. Personal cleanliness does not enter into this problem.

6. I advise rigid adherence to the factory manager's order that no employee be hired or rehired in this department without first being examined and approved by the plant physician and further that no employee be transferred to this department without first being approved by the physician.
Comment: Absolutely correct.

7. I advise re-examination, as indicated, of all workers in sections that are subject of any suspected cases. I consider the re-examinations and the continued study of this hazard and its effects of more importance than the first examination. From this point of view, the study of some of these cases may be considered complete.
Comment: Entirely correct, with the understanding that no examination without a survey is worth anything in dealing with pneumoconiosis.

8. I request, if possible and approved by Dr. Williams, contact with some authority on asbestos who has been filing during the examination. This for the purpose of comparative study of our suspected cases.
Comment: We can probably help you in this if your company is willing.

9. My suggestion of Maria Lefkowitz, made at the time of first examination, stands.
Comment: This is outside of my knowledge.

10. I have deferred rejection or classification of Joseph A. Hall, first, because of the delinquency of the examination which might arise in connection with his case and secondly because it is generally believed that removal of a worker from the dust will not retard or affect the progress of the disease once it is established.
Comment: None.