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The Journal of Occupational Diseases and Traumatic Surgery

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The Science, the Law and the Economics of Industrial Health

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Industrial Medicine

—The Plan and Scope of the Interest of the National
Association of Manufacturers in This Field—

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I BELIEVE at the outset it is proper to be perfectly frank and attempt to clear up some misconceptions concerning the work the National Association of Manufacturers is attempting to do in the field of industrial health.*

In the first place, it is perhaps unfortunate that the author of this article is sometimes thought of as a Research Director. While the title may adequately cover my planned activities, it easily leads to a misunderstanding of my intentions in the average mind. It often serves to generate the impression that the first step on the N. A. M.'s part will be the inception of vast independent surveys and new statistical studies in fields now inadequately covered.

If this were true, of course, it would represent a gratuitous slight to all the splendid work that has already been done in the field of industrial medicine. Fortunately, it is not true at all.

As a matter of fact, we have set aside no appropriations to finance activities of this scope. Such surveys would naturally need to be exhaustive, and they would not yield a return in proportion to the effort and expense involved. Existing material in the field is quite adequate for our requirements.

What we are really anxious to do is to make very complete use of the material that already exists. Just as the National Association of Manufacturers itself has served as a coordinating body to learn the best industrial practices and spread knowledge of them throughout industry, our particular arm of the service will try to coordinate the best practices in industrial medicine in an effort to adapt them to the varying types of manufacturing plants, no matter how small or strictly budget-ridden.

This leads naturally to a discussion of one other point in which the N. A. M. can be of real service to industrial medicine. Indi-

vidual doctors faced with the necessity of proving the value of their work in plants and factories are well aware how difficult it sometimes is to convince the manufacturer. It is not always easy to prove that in the long run something which involves an added expense will more than pay for its initial cost; it is particularly hard for an individual to prove this.

Here the manufacturers' group, with its experience in "selling" good industrial practices on a factual basis, hopes to be of service. Its word carries weight; the businessman, large or small, realizes that the association has his interests in mind, and as a result he is much more likely to heed its recommendations.

These two activities, then—coordination and "selling"—are the ones in which the N. A. M., because of its unique position and experience, can admirably serve the industrial doctors and the industrialists of this country.

That is the thought which really determines the duties of my newly acquired post.

NOW for a second prevailing conception concerning my work. Many people seem to think that we are going to emerge almost immediately with a long report on our findings, full of final recommendations on best practices. Of course, doctors are not numbered among those who believe this. We are going to study the whole subject for a long time before taking upon ourselves the consideration of a working model for industry.

The main problem, as I see it, is to take the excellent work that has been done and extend it to

* Written especially for INDUSTRIAL MEDICINE.

include the little fellow who has little or no knowledge of what can be done, or who believes that obtaining healthful working conditions inevitably involves great expense. It is worthwhile, then, with the assistance of the experienced duties in industry to take enough time to build a good working model, one that will meet the most exacting of these requirements.

In drafting any health plan, of course, we must take account of two chief factors: occupational hazards, and ordinary sickness. Though the former is certainly the more spectacular, the latter has certainly involved a greater loss of man-hours. Both must be studied in correct proportions.

Of the occupational sicknesses, special attention must be devoted to prevent hazards like silicosis and to lead poisoning.

There is no doubt in my mind that cases of this kind can be greatly reduced.

We still have an open mind on all the subjects I have so far mentioned. We are working slowly towards a plan of action, we are studying the best practices now in use, and we are conferring constantly with members of our advisory board.

One other point besides those already mentioned, one in which I am considerably interested, is the possibility of using what might be termed industrial psychology.

The British have been quite active in this field for a number of years, and some of their activity is well worth our attention.

On my last trip abroad I came across an interesting case which seems extremely simple and obvious when described, but which would probably be rather unusual here:

A company had just hired an excellent sales manager of the go-getting, dynamic type. There was only one cloud on the horizon so far as the company was concerned: he had never kept any previous job for more than a year, and the company naturally wanted to know why. A little investigation disclosed the fact that the man was a bully who constantly browbeat the salesmen under him.

A course of treatment was decided upon.

The chairman of the board called the salesman into his office, and, as soon as he appeared, shouted at him: "Hey, you big lummo! What do you mean, coming in here without knocking?" This treatment was repeated in varying forms for several days, and ended suddenly one morning when the former bully broke down in tears. Then his employers found themselves in a perfect position to point out the grave defects in his own attitude towards those under him.

This may seem like a far field for the industrial doctor to stray into, but I believe that in the course of the next five or 10 years the industrial doctor is going to find his activities very greatly enlarged. There are many places where his medical knowledge, and the knowledge of human nature which this certainly involves, can be of value. Cases of the type I have mentioned above belong to a large group which certainly ought to be within the province of the medical man.

There is another question that follows naturally from this one. How much mental fatigue and turbance do machines cause? A great deal according to popular fancy. In actuality, probably much less than is commonly believed.

Boots, the big English chemical company which employs 50,000 workers, has completed an exhaustive survey on this very subject. The survey concludes that the health of the company's workers is superior to that of workers on farms, because of the healthier surrounding conditions. This is not universally true, but it tells a true story of a modern factory using the latest health knowledge and sanitary standards.

I SAID before that the industrial doctor is usually finding himself engaged in new activities of many types. One of the most interesting of these, and one which the National Association of Manufacturers would like to see developed to perfection, is the practice of finding employment for the bodily handicapped. Here the doctor's knowledge of a man's physical shortcomings is the point.

One manufacturer I know of has found out, for example, that in many instances he can give employment to the blind, and I was quite surprised to learn the number of blind people now on payroll. Men and women with heart trouble, formerly were often turned away from jobs, but are being shifted to work that they can do.

To the industrial doctor of the future, with exact knowledge of fitting the man correctly to the job, these will seem like crude and obvious examples; but today they are encouraging steps on the road to progress.

The N. A. M. Committee on Healthful Working Conditions is open-minded as to where the situation will lead. No one can correctly estimate at this time just how far some of the subjects I have mentioned above are likely to lead us. Nor is there any question of possible subjects more than touched upon in the present article.

At this point, I am merely able to indicate some of the matters that interest us and interest the industrialist.

Our greatest encouragement at this point is the free access we enjoy to the best experience in the field of industrial medicine.

We are fortunate, too, in having the active support and guidance of the N. A. M. Committee on Healthful Working Conditions, of which F. P. PURNELL, President of the Youngstown Sheet and Tube Company, is Chairman. Through it and the Association, we are ensured the cooperation of leading manufacturing companies and manufacturers' organizations throughout the country.

A representative committee of company medical men has been selected to plan and advise the membership of the Committee on Healthful Working Conditions. This is under the chairmanship of DR. W. IRVING CLARK, Personnel Director of the Norton Company, Worcester, Massachusetts.

This committee is by no means complete

The Physician in Industry

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I APPROACH my task of addressing you upon the subject of "The Physician in Industry" with mixed emotions. I believe with all my heart that the subject bears deeper implications than most of us have assigned to it in the past. I realize the conflict in ideas that exists in medical and lay circles relating to the health problems of our society, and I am not prepared to offer you any panacea for these pressing problems. I aspire only to stimulate your thought.

We are very much concerned these days, as a profession and as a society, by the changes in our social order, which we see approaching. Truly, we are confronted with revolutionary modifications of our way of thinking and of our approach to many of our social problems, especially as they involve the question of health. We are trying to solve these enigmas by legislation, by regulating the law of supply and demand, by attempting to govern artificially the operation of the laws of Nature. But I fear we are stymied in our efforts to secure an answer until we attack the fundamental element, Man. We as citizens have a deep but an abstract interest in the social aspects of the problem, but as physicians we have a very profound and a very concrete interest in man himself, with his physical, psychological, mental, yes, spiritual problems.

We are learning a new sense of values—the pre-dominance of human rights over property rights. For generations we have been living in the midst of selfishness—individual, civic, national and international—and today we have reached the peak of the curve. We must stretch our capacities almost to infinity if our democratic principles of national life are to be preserved. Our thought along all lines must be broad in scope and focused upon the benefit to many, instead of to ourselves or to our own particular group. As civilization becomes increasingly complex, as progress takes place, as time marches on, our profession must continue to serve and advance in step, never forgetting the bright design it contributes to the fabric of human happiness and development, and never letting that design lose its lustre or get out of perspective.

Like every other part of our social fabric, industry and labor have undergone radical changes—changes not merely in philosophy, but in manufacturing practices as well. The principle of mass production has become almost a fetish, with all the human wear and tear that must accompany the assembly line. New substances are constantly being introduced into industrial processes, with certain known and many unknown effects upon the workers exposed. Newly created laws dealing with the control of and compensation for certain diseases of industry have focused the atten-

all the doctors so far invited to join have accepted. The members to date are:

W. A. BREWTON, Plant Physician, American Enka Corporation, Enka, North Carolina.

Dr. WILLARD J. DENNO, General Medical Director, Standard Oil Company of New Jersey, 30 Rockefeller Plaza, New York, N. Y.

PROFESSOR PHILIP DRINKER, Harvard University School of Public Health, Department Industrial Hygiene, 55 Shattuck Street, Boston, Massachusetts.

Dr. GEORGE H. GEHRMANN, Medical Director, E. I. du Pont de Nemours and Company, Incorporated, Wilmington, Delaware.

Dr. T. LYLE HAZLETT, Medical Director, Westinghouse Electric & Manufacturing Company, East Pittsburgh, Pennsylvania.

Dr. W. J. MCCONNELL, Assistant Medical Director, Metropolitan Life Insurance Company, 1 Madison Avenue, New York, New York.

Dr. C. D. SELBY, Medical Consultant, General Motors Corporation, Detroit, Michigan.

Dr. LOYAL A. SHOUDY, Chief of Medical Service, Bethlehem Steel Corporation, Bethlehem, Pennsylvania.

Dr. CASSIUS H. WATSON, Medical Director, American Telephone and Telegraph Company, 195 Broadway, New York, New York.

THE American College of Surgeons, with its many hundreds of members engaged in work similar to that we are undertaking, has offered its fullest cooperation.

The same is true of other private and governmental organizations.

Already associated with me in this work is Dr. DONALD M. SHAFER, a native of Grove City, Pennsylvania, graduate of the Cornell University Medical School, and formerly associated with the Medical Department of the Standard Oil Company of New Jersey.

Throughout our work, we are going to try to keep one principle in mind: we are going to try to "make haste slowly." Too many ambitious projects have been wrecked on the rocks of too hurried execution. The National Association of Manufacturers and the doctors it has enlisted are determined to achieve a firm groundwork upon which to base the best industrial practices of the future.

In view of the quantity and quality of the work already done in the field, and because of the fine cooperation we have already received, we look forward to the day when the average small manufacturer will be just as well equipped to provide healthful working conditions as the large corporations now are.

We look forward, too, to a greatly broadened concept of the industrial doctor's duties.

And when once these things have been accomplished, healthier and happier workers will be the inevitable by-product.

It is with this goal in mind that we start off on a course the end of which is not yet in sight.