

CASE 4 (L. H., M.G.H. No. 549407).—This 28 year old patient worked as a clerk (1940-1943) in a fluorescent light company, where he was only slightly exposed to the "powders." In October 1946 a chest roentgenogram revealed no abnormality, but in July 1947 a roentgenogram showed fine granularity. Further roentgenograms showed persistence of the granularity, and cough and exertional dyspnea developed.

He was admitted to the Massachusetts General Hospital on Sept. 15, 1947, where his vital capacity was reported as 4 L. and a roentgenogram showed progression of the granularity of the lung fields. A tentative diagnosis of beryllium intoxication was made.

In 1948 this patient was studied by Bruce and co-workers.¹² The pertinent data from this report are presented in table 3 for comparison with the present information.

The patient was also studied in Montreal, Canada, where he received a course of ACTH therapy starting on Jan. 21, 1950 (100 mg. a day for 21 days). Within two to three days after the start of this treatment he felt much improved and dyspnea was less.^{1a}

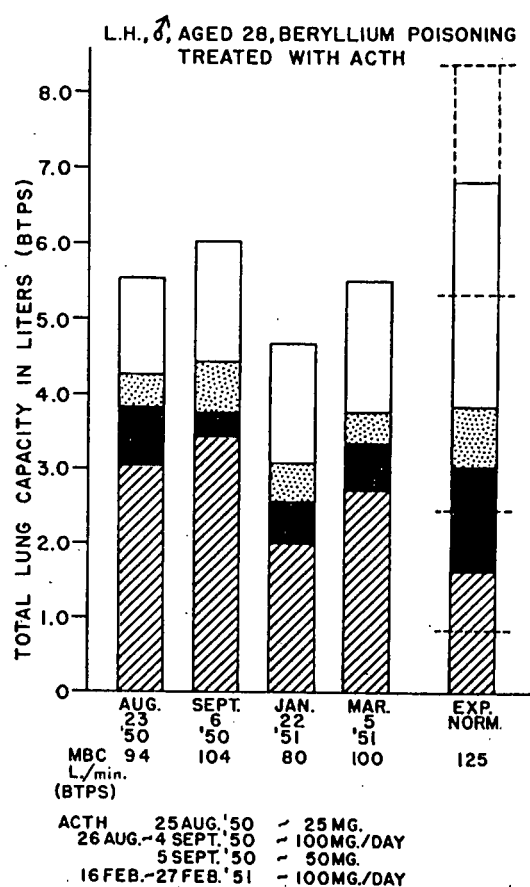


Chart 5 (case 4).—The patient's pulmonary volume subdivisions and maximum breathing capacity before and after two separate courses of ACTH therapy. See chart 1 for key to the subdivisions. The last column to the right indicates by broken lines (---) the limits of normal for the residual volume and the total lung capacity.

When admitted to the Massachusetts General Hospital for the third time, on Aug. 22, 1950, he still showed slight improvement over his condition at the previous admission, but he was cyanotic and had clubbed fingers, as well as coarse rales over the periphery of both lung fields.

Subsequent to August 1950 the patient received two courses of ACTH therapy, making a total of three. Pulmonary function was studied before and after each of the last two courses (table 4).

12. Bruce, R. A.; Lovejoy, F. W., Jr.; Yu, P. N. G.; Pearson, R., and McDowell, M.: Further Observations on the Pathological Physiology of Chronic Pulmonary Granulomatosis Associated with Beryllium Workers, *Am. Rev. Tuberc.* 62:29, 1950.