

Inadequate case ascertainment

In addition to the overestimate of dose, a systemic underestimate of asbestos associated diseases may have also contributed to the apparent "low risk" of chrysotile exposure. In 1950, Dr. Lanza noted that this was likely in a meeting with QAMA officials: "It was pointed out that in the Province [Quebec] it is the practice not to list cancer as a cause of death even when it is, so that information on this may not be of much help to us.(1950) Metropolitan Life provided group life insurance to the mineworkers, and began collecting mortality data and death certificates on the workers in the 1920's. Begin et al. provided further support for this diagnostic or reporting bias when he documented, "an increasing incidence of cases of malignant mesothelioma in chrysotile miners and millers of the Eastern Townships of Québec, with 49 cases in the last 23 years, and a rate of 2.5 cases per year in the last 10 years in the primary industry, as compared with a rate of 0.3 per year in the years prior to 1969 [McDonald et al., 1979]." A similar eighty-fold undercount of lung cancer case finding can easily account for the fifty-fold "textile mystery."

There is clear evidence that this undercount occurred and was in fact organized by the main financial sponsor of the studies, the QAMA. In 1995, Schepers reported that Ivan Sabourin, head of the Conservative Party of Quebec and legal counsel to QAMA, had systematically stolen the lungs of Quebec miners with lung cancer and sequestered them at the Trudeau Institute at Saranac Lake New York.(Schepers 1995) By 1946 at least 17 cancer cases had been removed and are missing from the QAMA-McGill analysis. While unprecedented, this organ snatching clearly had a differential impact on the number of cancer cases attributable to the QAMA mine operations and those reported from the control group.