

internal organs but did have the nasal lesions frequently attributed to chromium intoxication. The appearance of hepatitis in a chromium worker, as well as the existence of hepatic dysfunction in workers with no constitutional complaints, suggests that subtle systemic intoxication of employees of industries using chromium may be a definite health hazard.

-- Authors' Summary

- 973 Health Hazards in the Plating Room and Their Control. S. Moskowitz. Monthly Rev. N.Y. State Dept. of Labor 31, 25-27, 29-32 (July, Aug. 1952).

Three kinds of occupational injury may occur in the electroplating industry, namely, injury to internal organs, dermatitis, and mechanical accidents. Internal injury may result from exposure to cyanides, cadmium, lead, chromates, alkali cleaning solutions, degreasing solvents, pickling acids, and materials for buffing and polishing. These hazards are all discussed. They can be prevented by proper exhaust ventilation and personal protection. Contact with a number of the same chemicals may cause dermatitis. Preventive measures are discussed, with emphasis on cleanliness. Suggestions are given for safe storage and handling of toxic materials.

- 974 A Coproporphyrin III Test as a Measure of Lead Damage. 2. Considering Lead Dusts of Relatively Large Particle Size. G. C. Harrold, S. F. Meek, and D. A. Padden. Arch. Ind. Hyg. & Occ. Med. 6, 24-31 (July 1952).

The porphyrin test for lead damage, using a simplified technique which may be adapted to the needs of the physician's office or to large-scale industrial screening programs, is reliable. The correlation of positive results and lead-in-urine values above 0.15 mg. per liter, while very good in certain kinds of lead exposure, is not perfect and does not need to be perfect. The positive deviations due to other causes are negligible in a screening technique and provide the physician with added data to use in evaluating other disease manifestations. Samples may be shipped for considerable distances but when possible they should be analyzed within six days and should not be exposed unnecessarily to heat and light. The porphyrin test does not indicate high lead exposure as soon as urinary lead determinations, and both tests should be used whenever possible. Length of exposure is not a factor in the reliability of the test. The correlations established in this paper refer in the main to relatively coarse lead compounds readily soluble in human lung fluid and blood serum.

-- Cond. from Authors' Conclusions