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MONTHLY PUBLICATION DEVOTED TO THE ARTS AND SCIENCES RELATED TO THE SILICATE INDUSTRIES

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(1937); see "Principles . . ." *Ceram. Abs.*, 16 [11] 360 (1937).

Industrial medicine and the workmen's compensation system. J. B. LAURICELLA. *Ind. Med.*, 11 [9] 415-19 (1942).—L. points out that industrial medicine has been present in some form or other since the beginning of civilization with the object, even in slave-labor eras, of returning sick and injured workers to usefulness again. Hippocrates, the contemporary of Plato and Socrates, was the first to recognize the toxic properties of lead. He reported many cases of lead colic as affecting lead miners. When miners became ill, he urged rest and palliative measures away from the place of work, which he felt to be the true cause of the disease. As prevention methods, he advocated physical exercises, baths, massage, and proper diet. His influence dominated medical practice for 500 years. In the 1st century A.D., Pliny the Elder disclosed the dangers inherent in handling sulfur and zinc. In one of his books, he speaks of masks made of transparent bladders worn by workmen in the preparation of vermilion to protect them against lung disease due to inhalation of this metallic dust. The history of compensation proper dates back to ancient Rome whose foreign legions received rewards for services and injuries in terms of property grants and gold. Through the centuries since, disabled soldiers have received additional property and grants of money on their return from war.

Law of patent infringement. LEO T. PARKER. *Combustion*, 14 [3] 51-53 (1942).—A suit for patent infringement involves three fundamental questions: (1) Has the patentee invented something? (2) Is the invention described in the specifications? (3) Is it covered by the claim? Such subjects as who may infringe, joint ownership, law of anticipation, process patents, etc., are discussed.

Prevention of heat sickness. INDUSTRIAL HYGIENE FOUNDATION MEDICAL COMMITTEE. *Mining Congress Jour.*, 28 [8] 25 (1942).—High temperatures have a pronounced effect on susceptibility to minor accidents. Heat sickness includes (1) heat cramps, (2) heat prostration, and (3) heat pyrexia. Heat cramps are caused by excessive loss of sodium chloride and may be relieved almost miraculously by injection of saline solution. It can be prevented by salt tablets. Heat prostration is a systemic collapse and is best treated by rest; other remedies recommended are glucose and other sweet things and Vitamin C. Heat pyrexia is sunstroke caused by failure of the heat-regulating system. The victim should be removed to a cooler place and treated for shock. See "Combating . . ." *Ceram. Abs.*, 21 [10] 225 (1942).

BOOKS AND SEPARATE PUBLICATIONS

Custom House Guide, 1942. Custom House Guide, Box 7, Station P, Custom House, New York, N. Y. Price \$15. Reviewed in *Can. Machinery*, 53 [7] 113 (1942).—Each port in the U. S. and its limits, activities, and port charges are described, and a directory of those engaged in shipping and allied commerce trades is given. A general information section is devoted to weights, measures, coin values, trade terms, air services, government departments, etc.

Findings from major studies of fatigue. R. R. SAYERS. *U. S. Bur. Mines Information Circ.*, No. 7209, 46 pp. Free.—Under compulsion of the present urgency, there is a tendency to demand relaxation of restrictions on hours of labor and to speed up all industrial processes. Data on fatigue and health show clearly the relationship between accident occurrence, but there is little actual medical proof that long fatiguing periods of work permanently affect efficiency, health, or working capacity. A bibliography is included.

Manual for Committees of Engineers Interested in Engineering Education and the Engineering Profession. Engineers' Council for Professional Development, 29 West 39th St., New York, 1942. Price 10¢; appendix only, 5¢; discount on quantity orders.—Direct aids in counseling are given in outline form, and the advisors are

urged to present their case in the form of (1) general letters to student bodies, (2) explanations of a more technical nature to small groups of boys having a definite interest in civil, electrical, or other branches of engineering, (3) contests limited to 500-word papers on the subject "Why I Believe I Should Be an Engineer," and (4) inspection trips and motion pictures, when practical. A list of books and pamphlets on vocational guidance, especially in relation to engineering, is given. Full information on the engineering field is made available to high-school students who will qualify for and are interested in engineering. The appendix is designed for use by the student in supplying biographical and educational background.

Symposium on Industrial Health. Medical College of Virginia, Department of Preventive Medicine, Richmond, Va., 1941. 129 pp., mimeographed. Medical Society of Virginia's program for industrial health. WALTER E. MARTIN. Pp. 1-2. State Department of Health's Bureau of Industrial Hygiene—assistance it can render the industrial physician. J. B. PORTERFIELD. Pp. 3-5. Tuberculosis in industry—use of mass X-raying. E. C. HARTEN. Pp. 6-10. How an industrial physician can and should cooperate with the general practitioner. RUSSEL R. JONES. Pp. 11-15. Respiratory diseases and air conditioning. W. J. McCONNELL. Pp. 16-22.—Statistical studies and medical experience indicate that over 50% of the illness of industrial workers is due to acute infection of the upper respiratory tract, especially the common cold. Time is lost by all concerned and at approximately a cost of a billion dollars annually. The author (the Assistant Medical Director of the Metropolitan Life Insurance Co.) reviews in turn various experiments intended to lessen these disease ravages among workers, but as long as the specific agents causing these several diseases are not definitely known, the experiments must continue. The contribution of the Metropolitan Life to the problem was to try on air conditioning. After studying their records, the author and his assistants moved half of their 10,000 workers over to the Company's new air-conditioned building, leaving the other half as controls in the older office building, ventilated only by raising the windows and without any artificial humidification or cooling supplied in hot, dry periods of the summer. To the surprise of the experimenters, the new records failed to show any appreciable difference in the number of attacks of respiratory illness per clerk, or the number of days lost per clerk among the two groups. However, the partial air conditioning now frequently employed, such as air filtration for persons subject to hay fever, pollen asthma, and other allergic diseases, has produced very satisfactory results. Another example of partial air conditioning occurs in the entrapment of air contaminated with unwanted gases, fumes, and dusts, and its subsequent removal through exhaust equipment and other devices, which are depended upon almost entirely for the protection of workers subjected to the dangerous concentrations of dust responsible for pneumoconioses and the irritant effects of other toxic by-products of industrial processes. Diagnosis, treatment, and prevention of industrial dermatoses. LOUIS SCHWARTZ. Pp. 23-35. Essentials of first aid and later management of industrial eye injuries. HARRY B. STONE. Pp. 36-42. Handling of chemical burns of the eye. GEORGE H. CROSS. Pp. 43-49. Detection and control of defective vision in industry. RUDOLPH C. THOMASON. Pp. 50-56. Protective equipment for eyes in industry. C. N. SCOTT. Pp. 57-61. Diet and dietary deficiencies. D. FRANK MILAM. Pp. 62-68. Aging as a problem of industrial health. EDWARD J. STIEGLITZ. Pp. 69-78. Medical control of industrial exposure to toxic chemicals. JOHN H. FOULGER. Pp. 79-91. Placement of the worker. T. LYLE HAZLETT. Pp. 92-96. Suggestions for the conduct of hygiene departments in industry. DONALD E. CUMMINGS. Pp. 97-100. Selection of antiseptics for application to wounds following injuries to the hand. H. C. MARBLE. Pp. 115-20. Prevention and treatment of infections of the hand. SUMNER L. KOCH. Pp. 121-26. Backache. H. PAGE MAUCK. Pp. 127-29.