

I had access, that is to the cases of Fahr, di Biasi, Loeschke, and Stroebe-Beger. The tumor itself was a calcifying squamous epithelium carcinoma, in whose epithelium cone and stroma whole packages of asbestos needles and asbestos particles were found (ill. 2). The metastases were of identical structure, but without asbestos.

Case 6. Own observation.- A 55 year old man had worked between the 36th and 43rd, that is seven years, in the asbestos hall of an asbestos plant in the preparation for the spinning, then he was without employment for 3/4 year, during which time he contracted pneumonia, and then he was, till 4 months before his death, employed in a wool - laundry. He had not been in the service in peace time, but he was a soldier for three years during the war, he had had diphtheria, scarlet fever and malaria. His weight was never above 65 kg. He probably started to complain about dryness in his throat in 1919. Later, he was treated for bronchial catarrh and excessive stomach acid. 13 months before his death he lost a good deal of weight and developed bloody sputum. Tuberculosis was suspected. Four months prior to his death he stopped working. He was coughing and had shortness of breath. The breathing was dragging on the left side, and there was a damping and weakened breathing. The sputum contained great quantities of asbestos particles. The x-ray picture showed a deep shadow in the area of the left lower lobe (ill. 3). His doctors, Schulte and Reichelt (Hannover), diagnosed from these symptoms an asbestosis of the lungs, a carcinoma of the left lower lobe with spreading in the peritoneum, based on the narrowing of the esophagus which showed up in the x-ray picture. The body showed intergrown lungs with bloating of the lobules and a finely structured steelgrey and coarse gridwork. The colour of the cutting surface was otherwise reddish-brown. In the segment of the lower lobe there was black and white speckled tumor, which had spread to the neighbouring organs of the pericardium, the left chamber septum of the heart, the diaphragm, the peritoneum of the left upper abdominal cavity, retroperitoneal tissue behind the spleen, the group of lymphnodes at this location, and the lower thoracic and lumbar vertebrae (ill. 4). In the middle of the tumor, in extension of the main bronchus, there was walnut-sized cavern of decay with tindery edges.

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