symptoms were referable to the central nervous system, and that he died from terminal broncho-pneumonia following a rapidly progressive encephalopathy associated with epileptiform attacks. He had no presenting pulmonary symptoms, and x-ray examination of the chest showed only slight abnormalities. Radiographic examination of the chests of 53 other workers in the same factory and clinical examination with lung function tests of 23 of them revealed no other definite cases of aluminum fibrosis of the lung, nor any other cases with neurological signs and symptoms. Estimations of the aluminum contents of the body tissues such as the lungs, brain, liver, and bone are also recorded. When compared with normal values, it was found that the lungs and brain contained about 20 times and the liver 122 times more than normal. The results of a survey of the dust concentrations in the factory are also given. The use of aluminum compounds in the experimental production of epilepsy in primates is reviewed, and it is suggested that the neurological signs and symptoms with epileptiform convulsions which occurred in this case might have been related to aluminum intoxication. The authors hold the view, however, that the interstitial and nodular fibrosis found in the lungs was undoubtedly associated with the inhalation and retention of aluminum dust.
-- Cond. from authors' abst.

1171 Pleural Asbestosis. H. B. Eisenstadt. Am. Practitioner Dig. Treat. 13, 573 (Sept. 1962). (American Practitioner and Digest of Treatment, 227-231 South Sixth St., Philadelphia 5, Pa. *).

Because of the widespread industrial use of asbestos the number of persons suffering from asbestosis is increasing. Frequently the correct diagnosis is never established. Pleural asbestosis may occur with only minimum parenchymal involvement, and it may present itself as acute, chronic, or recurrent pleuritis or as pleural mesothelioma. Three cases were observed among oil refinery workers, one with recurrent pleurisy, one with pleural calcification followed by tumor formation, and one with primary mesothelioma. Only lung biopsy will establish the correct diagnosis. Pleural biopsy is nonspecific.
-- J. Am. Med. Assn. References & Reviews

1172 Asbestosis and Carcinoma of the Lung. J. F. Cordova, H. Tesluk and K. P. Knudtson. Cancer 15, 1181 (Nov.-Dec. 1962).

Eleven cases of asbestosis associated with carcinoma of the lung are presented. A known exposure to asbestos dust was obtained in 7 of these cases. In 2 cases, evidence is presented for multifocal origin of the malignant tumor. The relationship of asbestos bodies as a carcinogen in the production of lung cancer is discussed.
-- J. Am. Med. Assn. References & Reviews

PHYSICAL ASPECTS OF THE ENVIRONMENT

1173 Restoration of Hearing by Surgical Procedures. F. A. Perri. J. Occ. Med. 4, 518-520 (Oct. 1962).

The author has determined that the stapes procedures, which are more extensive than mobilization procedures, are far more likely to produce a permanent return of auditory acuity to levels within acceptable social limits. In a few instances, the operation described has been performed on patients having a loss of hearing by bone conduction at or near the 30 db. level, with improvement shown audiometrically by air conduction and bone conduction.
-- Author's conclusion

* Address not in current List of Periodicals.