

FILE NAME: Colonial Sugar Refinery (CSR)

DATE: 1961 Oct 10

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Mr. Brisbane's Office, Mines Dept. Perth

(189)

76

MEETING P.M. 10TH OCTOBER, 1961. IN MR.
BRISBANE'S OFFICE. MINES DEPT. PERTH

Present: Mr. Brisbane (State Mining
Engineer)
Mr. Boyland (Chief Mines
Inspector)
Dr. McNulty (of this Dept.)
Mr. Thomas (Manager, Aust.
Blue Asbestos)
Dr. Letham (Physician, Occ.
Health)

At the suggestion of Dr. McNulty this meeting was called, mainly with the object of acquainting the Mines Department and the Management of Australian Blue Asbestos with the most recent information on the incidence of asbestosis and silicosis resulting from work at Wittenoom. 37 individual cases were cited; in these it was considered that a diagnosis of either asbestosis or silicosis, or both, had been made. Grave concern was expressed by Dr. McNulty and myself, not only at the number of cases but also at the considerable to gross incapacity which had resulted in some of them. It was also pointed out that a disturbing feature was that a number of these men had experienced symptoms some years after their last exposure to asbestos or silica at Wittenoom without their having been any further exposure from another source. It might be inferred from this that further cases will present in this way.

All present shared this concern. Mr. Thomas indicated that as far as the mill was concerned the Company was prepared, if necessary, to replace the present exhaust ventilation with one which would be more effective. The Company had, in fact, called in a consultant from Gregory & Company, Sydney, for this very purpose.

As far as the mine is concerned, Mr. Thomas considered that, including plans for the provision of a second fan, the present ventilation system should be adequate. He indicated that specific remedial measures could often be taken when a high dust count was known to have been taken from a particular area.

Considerable discussion on dust counts took place. It was recognised that the Konimeter had definite limitations, particularly as far as assessment of asbestos dust was concerned. On the other hand it was an instrument with which mines inspectors were quite familiar; and the view was put and accepted in principle that the reduction of the overall dust concentration could be a reasonable measure of reduction of silica and asbestos dust.

It was agreed that the Mines Department should make available to Australian Blue Asbestos an officer who would instruct an employee of Australian Blue Asbestos in the use of the Konimeter. This employee would be employed full-time in taking dust counts, the results of which would then be quickly available to the management who could investigate the reasons for high counts in particular areas. This does seem to be a matter of prime importance as recent dust counts would indicate that there are many areas in the mine in which counts are excessively high.

It is proposed that in early January arrangements should be made for a further meeting to review the dust counts.

D. D. Letham
(D.D. Letham),
PHYSICIAN
OCCUPATIONAL HEALTH.

DLL/CT

PLAINTIFF'S
EXHIBIT

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MEETING A.M. 10TH OCTOBER, 1961. IN MR.
BRISBANE'S OFFICE, MINES DEPT. PERTH

Present: Mr. Brisbane (State Mining
Engineer)
Mr. Boyland (Chief Mines
Inspector)
Dr. McNulty (of this Dept.)
Dr. Lotham (Physician, Occupational
Health).

The purpose of the meeting was to discuss
the means of attaining liaison between the two Departments,
in matters concerning occupational health of miners. After
considerable discussion it became clear that:-

The State Mining Engineer was quite prepared
to accept the proposition that this Department should appoint
a medical officer who would be occupied, full-time if necessary,
in matters concerning the occupational health of miners and
the conditions under which they work.

There seems to be no doubt that much benefit
could be gained by bringing together specialised knowledge
in the engineering field, observations of trained observers
i.e. mines inspectors, and the specialised knowledge of an
occupational health physician, for the purpose of minimising
and preventing occupational hazards.

D. Lotham

(D.D. Lotham)
PHYSICIAN
OCCUPATIONAL HEALTH.

PLAINTIFF'S
EXHIBIT

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