

Industrial Hygiene Digest

INDUSTRIAL HEALTH NEWS

LITERATURE ABSTRACTS

ARMED FORCES
JUL 24 1956
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MEDICAL

ENGINEERING

CHEMICAL

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LEGAL --- decisions and trends

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INDUSTRIAL HYGIENE FOUNDATION
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INDUSTRIAL HYGIENE FOUNDATION

FOUNDATION FACTS

Foundation Facts is a monthly newsletter issued to industrial concerns holding membership in Industrial Hygiene Foundation. The Foundation is a nonprofit association of industries for the advancement of healthful working conditions.

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WELCOME TO MEMBERSHIP

Wald Industries, Inc. is the latest company to affiliate with Industrial Hygiene Foundation. We are pleased to add them to the membership roster.

INTERNATIONAL INTEREST IN FOUNDATION ACTIVITIES

The work of Industrial Hygiene Foundation is of interest not only to industries within the United States but to scientists and industrial health specialists in other countries as well. The Foundation is pleased to receive such visitors and to explain the American system and techniques for maintaining health in industry. Among the distinguished visitors recently was Dr. W. E. George, Medical Officer of the [illegible] New South Wales. A visitor from Birmingham, England was Dr. [illegible], Medical Officer of Joseph Lucas, Ltd. Dr. Mario Baldelli, [illegible] Del Lavoro in Milan, Italy, visited the Foundation and [illegible] studying I-H-F activities. Dr. [illegible] Kang of the College of [illegible] University in Korea, also paid a visit to the Foundation.

SCHRENK APPOINTED TO [illegible]

[illegible]

[illegible]

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evidence of previous infection. Coal-mine dust alone produced no fibrosis. The combination of bacilli and dust produced tuberculous cavities involving large areas of lung tissue, and killed the guinea pigs. -- Am. Rev. Tuberc.

910 Experimental Infective Tuberculosis. 4. Massive Pulmonary Fibrosis Produced by Coal-Mine Dust and Isoniazid- Resistant Tubercle Bacilli of Low Virulence. S. H. Zaidi, C. V. Harrison, E. J. King, and D. A. Mitchison. Brit. J. Exptl. Pathol. 36, 553-559 (Dec. 1955).

The effects of intratracheal injection of coal-mine dust, a catalase-negative isoniazid-resistant strain of tubercle bacilli of low virulence, and a combination of dust and bacilli were studied in the lungs of guinea pigs. The bacilli alone produced lesions which tended to disappear after 90 days, and the only evidence of tuberculosis at 300 days was a few calcified nodules in some of the lungs. While coal-mine dust itself produced no pulmonary fibrosis, the combined action of the dust and bacilli produced massive pulmonary fibrosis. In its early stages, the fibrosis was composed mainly of thick reticulin fibers and collagen, but later more collagen was formed. Serial cultures of the lungs injected with coal dust and bacilli yielded growth of tubercle bacilli up to, but not beyond, 120 days. The largest number of organisms was found at 30 days. In animals infected with bacilli alone, no growth could be obtained from lung cultures other than those from guinea pigs killed one day after injection. -- Am. Rev. Tuberc.

911 Costal Pleura and Pleural Adhesion Silicotic Pigmentation. D. Schwenkenbecher. Tuberkulosearzt 9, 592-595 (Oct. 1955). German.

A pneumothorax for cavernous tuberculous disease was induced in a patient who had worked as a bricklayer for fourteen years. During a pneumonolysis, a silicotic deposit was observed in the pleural adhesions as well as in the costal pleura. The suspicion of silicotuberculosis was verified by biopsy following eventual lobectomy. Silicotic deposits in the costal pleura are rare. They are usually localized in the neighborhood of the pleuropulmonary adhesions and are believed to come from the lymphatic system. In the present case the chest roentgenogram gave no indication of silicotuberculosis. -- Am. Rev. Tuberc.

912 Roentgenographic Complications of Pulmonary Asbestosis. G. Jacob and H. Bohlig. Fortschr. Gebiete Rontgenstrahlen 83, 515-525 (Oct. 1955). German.

Over a period of approximately twenty years, 343 cases of asbestosis, 130 in women and 213 in men, were observed in Dresden, a center for industries using asbestos. The most common complications were pleural thickening, compensatory emphysema, and nonspecific peribronchial, peribronchiectatic, and bronchopneumonic inflammations. Pleural changes were found in 49 per cent of the cases, 5 per cent of which had extensive, irregularly shaped calcifications. Active pulmonary tuberculosis was present in 4.4 per cent of the cases; bronchogenic cancer was not more frequent than in the general population but, when present, was found relatively often in the lower lobe. -- Am. Rev. Tuberc.

PHYSICAL ASPECTS OF THE ENVIRONMENT

913 Industrial Noise and How to Deal with It. H. A. Carter. Arch. Phys. Med. 37, 152-158 (Mar. 1956).

This paper deals briefly with noise sources, dangerous noise levels, noise measurement, effects on hearing, protection, noise reduction, and medico-legal aspects.