

- 836 The Evaluation of Physical Tasks in Industry. S. H. Snook and C. H. Irvine.
Am. Ind. Hyg. Assn. J. 27, 228-233 (May-June, 1966).

The evaluation of physical tasks in terms of fatigue has often been based on their effect on the "average man," thus serving to protect only half of the population from excessive fatigue. The concept of group work capacity is proposed as a technique for task evaluation which includes the entire population. It is defined as the percentage of workers that can perform a task without showing physiological signs of fatigue. An experiment that investigates 30 different lifting tasks is described. Thirty subjects were used, and group work capacity was estimated for each task by three different methods. The application of the results to industrial situations is discussed.

-- Authors' abst.

- 837 Primary Cutaneous Tuberculosis Resulting from Mouth-to-Mouth Respiration: Report of a Case. K. M. Heilman and C. Muschenheim. New Engl. J. Med. 273, 1035-1036 (Nov. 4, 1965).

A case of primary cutaneous tuberculosis is reported that presents an interesting problem in differential diagnosis and treatment. It also serves as a warning of some of the hazards of mouth-to-mouth resuscitation. A tuberculin-negative intern gave mouth-to-mouth resuscitation to a patient with respiratory arrest. Postmortem examination of the patient subsequently disclosed active pulmonary tuberculosis. Six weeks after this episode the intern had a strongly positive reaction to first-strength PPD. Approximately eight weeks after contact two ulcerative lesions gradually developed near the left nasolabial fold with submaxillary adenopathy. Biopsy of the lesion showed granulomatous inflammation. The culture was subsequently positive for acid-fast bacilli. After two months of therapy with isoniazid, the lesions involuted. After 12 months, treatment was terminated without evidence of recurrence. This case also illustrates the need for readily accessible pulmonary-resuscitation apparatus.

-- Am. Rev. Resp. Dis. Absts.

- 838 Risk in Mouth-to-Mouth Respiration. Anon. New Engl. J. Med. 273, 1049 (Nov. 4, 1965).

A report of primary cutaneous tuberculosis that confronted the authors with an interesting problem in differential diagnosis is presented as a warning of some of the hazards of mouth-to-mouth resuscitation. The nature of the lesion was obscure, and the rarity of its occurrence, added to the difficulty in recognizing it, is the basis of a plea for readily accessible pulmonary resuscitation apparatus in emergency rooms and on the wards of hospitals. The authors emphasize the importance of training the house staff in the use of such equipment to obviate the need for mouth-to-mouth resuscitation. Such apparatus should indeed be made available, and the supporting personnel, especially nurses, orderlies, and porters, should receive instruction in its use. Ambulances should be similarly equipped, and those who ride them should receive such instruction also. Another recent but unreported episode is of interest in this regard. A prominent Boston physician had a similar experience. However, he took isoniazid and, as far as is known, did not acquire infection from this heavy exposure. Although this cannot be taken as proof of the effectiveness of the prophylaxis, it appeared to be the wiser and safer course to recommend. The entire question of the value of mouth-to-mouth respiration in relation to other methods of resuscitation deserves further study. In any event, its use should be applied with some consideration of the risks involved.

-- Am. Rev. Resp. Dis. Absts.

- 839 Chronic Bronchitis in Forest Workers in Finland. H. Poppius, M. Lehtinen, and J. Patiala. Ann. Med. Internae Fenniae 54, (1) 1-12 (1965).

The following factors associated with the incidence of chronic bronchitis, are considered to be of etiologic significance: age, smoking, and especially cigarette smoking, air pollution (chronic bronchitis is more common in towns and industrial communities than in rural districts), asthmatic dispositions, and social status. The current study deals with the occurrence of respiratory symptoms associated with chronic bronchitis in a group of 975 forest workers and 329 non-forest workers of a rural male population in Finland. In addition, the peak expiratory flow-rate was measured and a chest radiograph was taken. The following observations were made: Forest workers had a higher incidence of respiratory symptoms than the control group. The incidence of respiratory symptoms in the forest worker group rose with age and the consumption of tobacco. The forest workers were heavy smokers, using more tobacco than the controls. After standardizing the two groups with regard to age and smoking habits, only an indistinct trend towards a higher incidence of phlegm production and no difference in the peak expiratory flow-rate, were demonstrable in the forest worker groups as compared with the control group. The question is raised whether these findings may not be partially due to the circumstance that a relatively high proportion of the persons meeting the fairly strict criteria of the test were incapacitated for forest work and thus eliminated from participation in that group but would not have been so considered in the control