

FILE NAME: Neighborhood Exposures (NE)

DATE: 1963 May 23

DOC#: NE013

DOCUMENT DESCRIPTION: Letter to the Philip Carey Manufacturing Comp.

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May 23, 1963

Mr. L. J. Knippa, Plant Manager
The Philip Carey Manufacturing Company
Lockland, Cincinnati 15, Ohio

Dear Mr. Knippa:

In accordance with your request, I am providing you with background data and specific recommendations, which were discussed in the joint conferences with you, Mr. Karl Krieg and Mr. Louis Rechstein.

Background:

A national awareness is developing relative to the potential and harmful effects of asbestos and asbestos products. This stems from:

- 1) The relatively recent scientific reports in England, Germany, Africa and the United States, showing a strong association between asbestos and lung cancer and mesothelioma (cancer) of the pleura and peritoneum.

This is augmented by the technical weaknesses of the study conducted by the Industrial Hygiene Foundation (at the request of the Asbestos Industry) and the opinion of well qualified persons that the conclusion of a "negative" association of asbestosis and lung cancer is not really justified in this report.

These various scientific reports, the limitations of the Industrial Hygiene report and other unpublished data, were reviewed and discussed in a meeting in Washington, D. C., with representatives of the asbestos industry and the U. S. Public Health Service over one year ago and the need for extensive research expressed.

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- 2) The Federal governmental study now officially launched (although not publicly announced) by the U. S. Public Health Service, Division of Occupational Health, of the asbestos industry in the United States, which will include comprehensive medical, engineering, chemical and statistical evaluations and studies of the work environment of representative situations in the asbestos industry. The governmental investigation at present is in the technical development stage and preparations are under way for field studies in the asbestos industry.

RECOMMENDATIONS

I Establish an inter-industry Asbestos Research Program on a national and international basis for the development of a coordinated plan of research to meet the needs of industry; to evaluate present and projected problems; and to establish the means of identifying and limiting the particular hazards involved.

Although cooperation with state and federal agencies is necessary and desirable, the asbestos industry should be in a position to make an independent judgment, based upon its own appraisal and research of the situation and the factors involved, since this judgment may have very serious implications relative to the plans and operations of the asbestos industry.

Affiliation with industry and research associates in Europe and Africa with similar interests and concerns, would make possible the benefits of those experiences and avoid duplication; make possible the demarcation of specific areas of research relative to particular questions; and the development of a unified approach to the successful continuation of asbestos operations effectively controlled and accepted by the consumer in various countries.

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The asbestos environmental hazards can definitely be controlled.

However, the lack of cooperation of other asbestos industries or the continuation of an occupational cancer exposure in a particular industry, will, in terms of public response and consumer relations, as well as law suits, and Workmen's Compensation, affect all other asbestos or related industries.

II Develop a "positive" approach to consumer guidance and assistance. This would take several forms.

a) The development of recommended practice manuals containing illustrative ventilation control designs, safe handling procedures, and other similar guide lines for the effective control of dusts under various types of consumer uses. This could be prepared after an analysis of consumer uses and practices had been made by the industrial hygiene engineer recommended in III. The ventilation examples and recommended practices would relate to various products and cover broadly all operations of consumer use. This approach could be initiated by a single asbestos industry for competitive sales, or an agreement developed on an inter-industry basis as to the contents of these various manuals and their distribution.

b) Provide a technical assistance service through the company's industrial hygiene engineer for consultation and the evaluation and control of dust problems, to the large or various consumer industries and specific groups in which contractual arrangements have been made. The objective is to prevent the development of problems or any change in Workmen's Compensation and liability status of large users of the products, and to demonstrate and emphasize that the products can be used safely and effectively under proper conditions.

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III Employ a well qualified industrial hygiene engineer to establish, on a company-wide basis, a program of effective environmental, occupational and air pollution control of the various dusts, fumes, mists, gases, etc., created, emitted or used in the operations of the various company plants, and to provide technical consultation as required, for consumer relations. Some of the duties which would effect substantial savings, would be as follows:

1) Occupational Disease Control - to conduct technical industrial hygiene surveys of all work environments at the various plants, buildings and locations and for all company operations, including Canada. The objective is to identify and measure the various concentrations of harmful dusts and chemicals; determine those operations in which control measures are required; design the ventilation control measures; and subsequently determine the effectiveness of these control measures. To accomplish this, the industrial hygiene engineer would carry out all the engineering aspects of environmental evaluation and work closely with the company chemists and laboratory facilities.

On specific occupational disease claims, the industrial hygiene engineer would be able to provide precise data relative to the presence or absence of various chemicals or dusts, the concentrations and forms of these chemicals or dusts, and the concentrations and forms of these chemicals at various time periods and operations. This would be of assistance in evaluating the merits of occupational disease claims.

2) Air Pollution Control - to conduct technical air pollution surveys in designated areas in various communities in which company operations exist. Such studies require the measurement and analyses of diverse atmospheric

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contaminants from a variety of sources and the determination of the nature and extent of the company's contribution, as well as the design of the ventilation control and contaminant suppression measures required. In conjunction with this, he would develop a program of air pollution surveillance relative to company operations in various locations.

The industrial hygiene engineer would represent the company in conferences and discussions with community, state and federal officials relative to complaints and problems pertaining to air pollution.

3) Technical Consumer Assistance - to develop informative engineering control, ventilation and safe handling and use guide lines for consumer use, and provide technical consultation to specific users for the prevention and control of actual or projected problems relative to the use of the company's products. (This has been referred to in II).

4) Process Development and Product Use - to work cooperatively with the Departments of Research and Engineering in evaluating and developing necessary control measures for the possible health effects created by (1) new manufacturing processes or process changes, and (2) consumer use of new company products.

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In summary, the background data and the recommendations made, point to the need for direct and immediate action.

It is readily apparent that unless the necessary steps have been taken, the information desired at subsequent dates may not be available to answer the questions which may be posed.

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Such information and action has a direct bearing in limiting
the extent and preventing future financial losses.

Yours very truly,

Thomas F. Mancuso

Thomas F. Mancuso, M. D.
Consulting Medical Director

TFM/kb

Cc: Mr. L. A. Peckstein

Mr. Karl F. Krieg

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