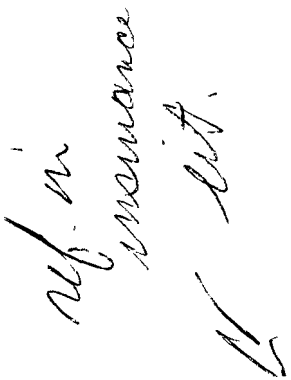
FILE NAME: Maryland Casualty Company (MCC)

DATE: 1955 Nov

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DOCUMENT DESCRIPTION: The Insurance Index [Reference in Insurance Literature to Lung Cancer among Non-Smokers]

bin (myoglobin) in the urin. Myoglobinuria is known to occur under the following conditions: muscle injury, violent exercise and Haff disease. These pathologic conditions are similar to the spontaneous or idiopathic form but are secondary to some known exogenous factor. In all types there is a release of myoglobin from the muscle, which produces myoglobinemia, a resultant myoglobinuria, and in some cases permanent kidney lesions." (Of the spontaneous form only 15 cases have been as yet reported in the literature. ed.)



the differing age grouping, and the diagnostic facilities.

F. Lickint. Lung Cancer among Nonsmokers. Muenchen. med Wchnschr., 47:1366, 1954.

The great increase of the disease in males may be due to environmental factors. A proof for the tobacco etiology is the fact, that in Germany smoking among women has become frequent only for 10 to 15 years so that in females the incidence of lung cancer has hardly increased as yet. Aside of tobacco there are other noxious agents, e.g. asbestos dust, chromates, arsenic, and radioactive substances which may be responsible in the causation of cancer of the lung. Lung cancer occurs among nonsmokers yet, the number is very small as compared with the enormous increase of bronchial carcinoma among men in recent years which primarily is due to cigarette smoking. Filters afford no protection as the noxious substances pass the filter.

R. Doll and A. B. Hill. The Mortality of Physicians in relation to their Smoking Habits. Dt. Med. Wchneschr. 48: 1808. 1954.

In October 1951 about 40,000 physicians, listed in the British Medical Register, answered a short questionnaire about their smoking habits. egistrar of the United King- tablished the cause of death of these physicians who died the following 29 months. The l investigation is limited to hysicians who, when answer- questionnaire, were at least s of age. Of the 789 deaths, e cause was cancer of the he death rate due to this as zero among nonsmokers, % in smokers. In smokers aily consumption of 1 Gm. one cigarette equals 1 Gm. the death rate was 0.48%, consumption of 15-25 Gm., 0.67%, and with a consumption of more than 25 Gm., 1,1%. In a similar manner it was possible to establish a relationship of tobacco consumption and death due to coronary sclerosis. Other causes of death did not show a relation with smoking consumption of physicians.

G. E. Ward and R. G. Chambers. Management of Intraoral Cancer. American Surgeon. 20: 1297. December 1954.

Intraoral cancer may be grouped according to location in: tongue and floor of mouth; buccal mucosa and lower gingiva; palate and upper gingiva. The lesions in each group have similar development, treatment and prognosis. Statistically, the death rate from intraoral cancer is about 1.4 per 100,000 population .25% of

cancers of the tongue and the floor of the mouth coming in without palpable nodes will sooner or later develop neck metastases. Since inception of hemiglossectomy with radical neck dissection, there was an operative mortality of 11 patients among 53 operated on. 11 of the surviving patients had recurrences; 9 of these have died. Carcinomas of the cheeks comprise about 9.5% of all intraoral tumors. It is usually reported that 50 to 60% of buccal mucosa tumors do not metastasize if the primary lesion is adequately treated. In the few complete series of cases that have been reported, the 5-year survival rate ranged from 9% to 40%.

R. Reifer. Weather and Mortality Rate. Dt. med. Wchnschr., 29:1113, 1954.

The author evaluated 52,238 deaths in 1950 according to sexes and urban and rural population in relation to weather disturbances. He concluded that there is a significant connection between weather disturbances and frequency of deaths. The increase of the death rate in days with weather disturbances was 11% to 13%. Especially in days with cold fronts and after chromospheric eruption of the sun, an increase in death frequency was observed which was correlated with infrared-wave disturbances. The death rates showed a maximum in March and a minimum in September.

M. B. Fertman. Newer Concepts of Experimental Obesity. Arch. Int. Med., 6:794, June 1955.

"A distinction should be made between obesity, a severe, often irreversible disease, and simple overweight, reversible and based on a high ratio of caloric intake to activity or the rate of growth. The extrinsic cases of obesity include excessive caloric intake, and perhaps nutritional deficiencies as well; relative inactivity; toxic effects, and possibly stress situations. The extrinsic factors may bring certain of the intrinsic causes of obesity into operation. The intrinsic causes include the constitutional, the diencephalohypothalamic, the endocrine metabolic, and the enzymatic. All of these may be interrelated and interactive. Results indicate, that endocrine glands, the adipose tissue, and enzyme systems play at least a part-role."

Book Review

Practical Management of Disorders of the Liver, Pancreas, and Biliary Tract. By John Russell Twiss, M.D. and Elliot Oppenheim, M. D., Lea & Febiger, Philadelphia, 1955. 653 pages, Cloth, $15.

The authors have done a splendid work in classifying and describing a group of related disorders. Diagnosis, prognosis and treatment are well delineated. The integration of the various subjects has been judiciously stressed in spite of the fact that the various organs and their diseases had to be set forth separately. Statistical evaluations are manifold and will assist the insurance physician to use this work with benefit in his daily work. The illustrations as well as the literature references are selected with discrimination. A few quotations: "In reported series of operations for cholecystitis, 2.5 to 11 per cent have been acute cholecystitis. The average ages reported were from fifty-two to sixty-one years. Women have outnumbered men in most reported series from 2 to 1 to 4 to 1." "Carcinoma of the gallbladder constitutes 2 to 6 per cent of all malignancies and is found in ½ to 1 per cent of all patients coming to autopsy. The disease predominates in females by a ratio of 4 to 1. Carcinoma of the gall bladder occurs most commonly over