

The cardiac patient in industry is the topic of Abst. No. 128.

For a discussion on the verrucous carcinoma of the buccal mucosa in tobacco chewers consult Abst. No. 130.

An evaluation concerning the efficiency of an ethylene oxide sterilizer in hospital practice is presented in Abst. No. 132.

Experiences with phase microscopy are described in Abst. No. 156.

Abst. No. 163 presents ceruminosis, a factor in audiometry.

Information on food preservation by ionizing radiation is given in Abst. No. 176.

Information on food preservation by ionizing radiation is given in Abst. No. 176.

Dr. Marian Westrick, the Foundation's Secretary, has been married. Her duties have been taken over by Mr. McNerney, who has been with Dr. Westrick for several years. Mr. McNerney is the Secretary of our Chemical-Toxicological Committee. The Foundation's Laboratory added two assistants to its staff: Marianne Kaseck, a technician.

Dr. H. H. Schrenk attended meetings of the Pennsylvania Air Pollution Commission in Harrisburg, and the Editorial Board of the Archives of Environmental Health in Detroit.

The Executive Committee of the Board of Directors met for 1961 on February 2 at the Foundation's headquarters.

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26th ANNUAL MEETING

OCTOBER 25 - 26, 1961

material and in making similar determinations on air samples. The major difficulties experienced lie in the need for delicate microscope adjustments and in the preparation of microscopic samples from air samples collected in isopropyl alcohol. -- Author's conclusions

- 157 Silicosis of the Bone Marrow. J. L. Nicod and D. Gardiol.
Arch. Gewerbepathol. Gewerbehyg. 18, 79-90 (1960). French.

Silica dust in the lung produces lesions which always start as an accumulation of histiocytes round little blood vessels. Some particles are carried via the reticuloendothelial system, to other organs, and such particles retain their pathogenicity. The presence of silicotic nodules in the liver and spleen is a common finding in the silicosis of miners and industrial workers in Switzerland, but the presence of silicotic changes in the bone marrow has not so far been clearly demonstrated. The authors think that the reason for this is that the morphological study has not been sufficiently complete. They have therefore examined the vertebral and femoral bone marrow from all silicotic cases examined post-mortem over a period of years, and have traced the progress of lesions caused by silica. The first reaction is an accumulation of histiocytes, at first fluffy, then more discrete. Silver staining shows up a close meshed network of fibers. Although such lesions become more sharply defined they for the most part do not progress further. At this stage they are indistinguishable from those produced by infections such as tuberculosis. That is why they have been ignored by others interested in silicosis. It is concluded that the presence of silicotic nodules in the bone marrow shows that silica retains its toxicity even when it leaves the lung. Silicotic lesions should therefore be found in still more organs. Finally, a morphological study does not give any lead as regards functional damage.

-- Cond. from Bull. Hyg.

- 158 Serum Lipoprotein and Protein Content in Silicosis. H. Valentin, N. Lichius and G. Zerlett.
Arch. Gewerbepathol. Gewerbehyg. 17, 227-237 (1959). German.

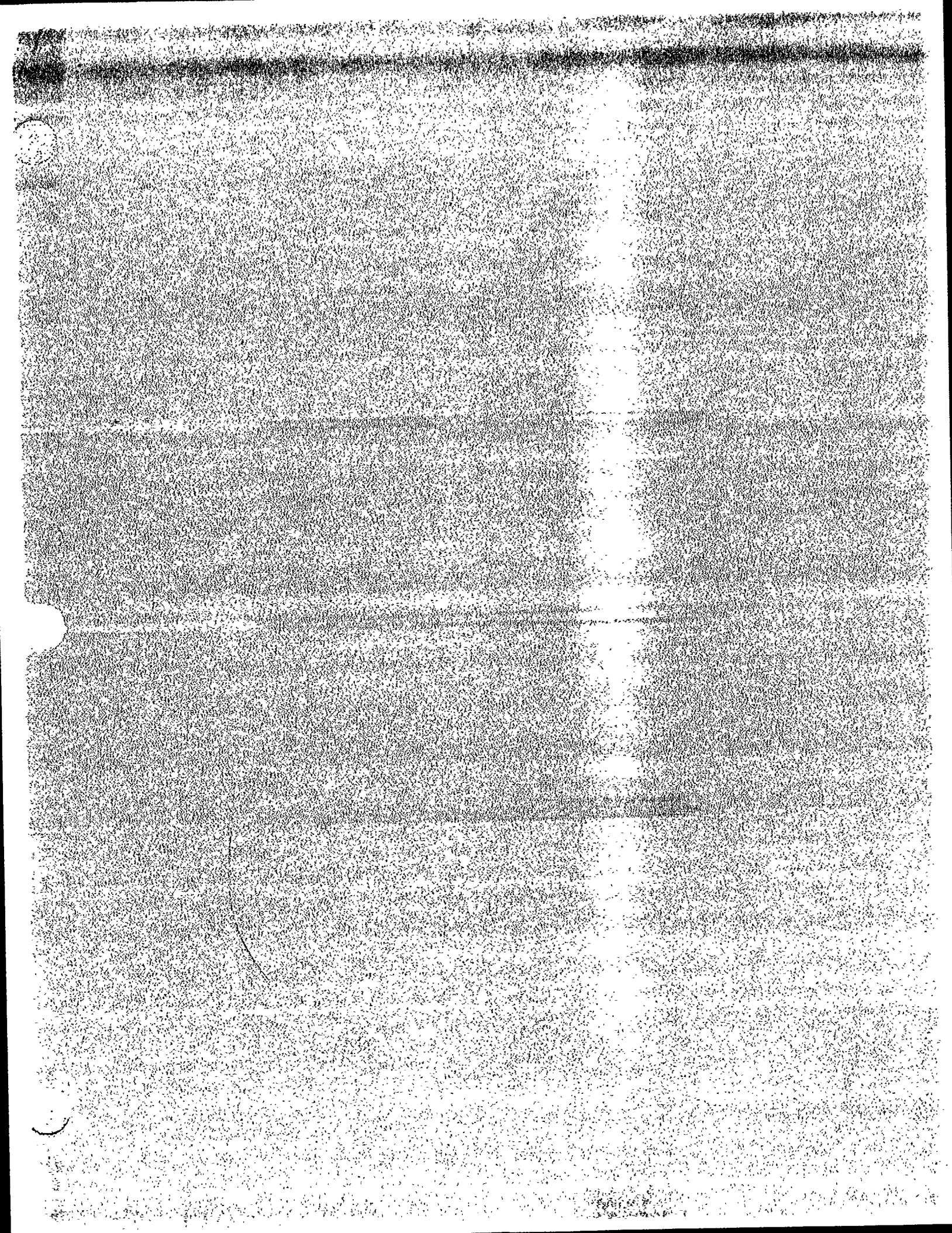
The authors made a detailed study of the serum protein and serum lipoprotein electrophoretic patterns of 56 silicotic patients. The results confirmed those of previous workers in that serum albumin was in the main decreased whereas gamma-globulin was increased; lipid fraction I levels were on the whole lower than those found in healthy subjects. There was no relation of serum lipoprotein content to grade of severity of silicosis.

-- Bull. Hyg.

- 159 The Varieties of Asbestos, their Study by Optical Methods and their Pathogenic Action.
K. G. Schmidt. Staub 20, 173-180 (June 1, 1960). German.

Asbestos is usually classified rather unscientifically by the characteristics which make it technically useful, by its place of origin, its color and so on. With modern methods, however, including an elaborate microscopical technique, 11 well-defined varieties of asbestos can be distinguished, the most important of which are chrysolite, amosite, crocidolite, tremolite and anthophyllite. In discussing the pathogenic action, the author states that asbestos may possibly undergo changes in the lung. However, it is doubtful how far the different varieties can be recognized in the lung dust. In speaking of the formation of asbestos bodies as a reaction intended to get rid of asbestos in the lung, he suggests that varieties susceptible to chemicals will form these readily. Chrysolite and possibly amosite may do so rather than the kinds of asbestos which are very resistant. Warning is given that the formation of bodies is not necessarily a disease. A considerable controversy has raged over the question as to whether chrysolite or hornblend is capable of producing bodies in the lungs. The literature as regards this and also the question of the action of short-fibered asbestos is reviewed. All forms of asbestos must be regarded as dangerous. It is suggested that chrysolite, crocidolite, and amosite have long, yielding fibers which can penetrate the lung more easily than the stiff brittle fibers of tremolite and anthophyllite. This would produce mechanical damage; chemical effects might result from the more sensitive chrysolite and amosite. The iron and aluminum content of the different types may also influence the pathogenic action.

-- Cond. from Bull. Hyg.



INDUSTRIAL HYGIENE FEATURES

New smoke and air pollution control rules and regulations are enacted by Allegheny County. See Abst. No. 728.

The effect of smoking on asthma and emphysema is discussed in Abst. No. 734.

Abst. No. 735 presents information on tobacco amblyopia.

Abst. No. 740 is concerned with education for industrial medical practice.

Dermatoses from phenylmercuric salts is the subject of Abst. No. 742.

See Abst. No. 746 for information on the present status of skin tests.

The topic of Abst. No. 756 is the role of roasted chromite ore in the production of cancer.

Mercury as a potential hazard in medical laboratories is considered in Abst. No. 758.

Pathological changes in ethylene dibromide poisoning is the objective of Abst. No. 763.

Data on the mycological contamination of impinger samples are given in Abst. No. 769.

Consult Abst. No. 772 for some statistical aspects of dust counting.

A case report on asbestosis and carcinoma of the lung is given in Abst. No. 781.

For a discussion on asbestos absorption in large halls see Abst. No. 787.

Microwave radiation hazards are discussed in Abst. No. 791.

Man versus environment is the subject of Abst. No. 808.

Adhesion of solid particles to solid surfaces is the title of Abst. No. 810.

A discussion on automation and unemployment is presented in Abst. No. 814.

FOUNDATION FACTS

A. M. A. ARCHIVES OF INDUSTRIAL HEALTH has changed its name to Archives of Environmental Health beginning with the July 1960 issue, and will start with Volume I, Number I.

DR. GROSS PRESENTS PAPER AT INTERNATIONAL CONGRESS. Dr. Paul Gross, the Foundation's Research Pathologist presented a paper on "The Synergistic Action of Tuberculin with Quartz Dust" on July 28 at the 13th International Congress on Occupational Health, held in New York City.

SILVER ANNIVERSARY MEETING

OCTOBER 26 - 27, 1960

- 779 The Bronchoscopic Picture in Silicotuberculosis. A. Ferraris and G. Paoli.
Lotta contro tuberc. 29, 102-105 (July-Aug. 1959). Italian.

In this paper the authors give 3 schematic outlines to show what are the likely, sometimes alternative, details which may be seen through the bronchoscope in cases of silicosis, broncho-pulmonary tuberculosis and silicotuberculosis respectively. The tracheo-bronchial lesions which may be found to affect the picture seen in respiratory tuberculosis are also schematically listed according to 2 separate authorities. It is obvious that the many lesions may combine in a wide variety of patterns in each of the 3 diseases and so may the signs to be seen throughout the bronchoscope. No pattern or patterns can be expected to be typical of silicotuberculosis, but a bronchoscopic examination can, nevertheless, prove of great value in the diagnosis of this condition and this is illustrated by a series of 6 cases.

-- Cond. from Bull. Hyg.

- 780 The Bronchographic Picture in Silicotuberculosis. A. Ferraris and G. Paoli.
Lotta contro tuberc. 29, 1031-1050 (July-Aug. 1959). Italian.

In their paper on bronchoscopy (see previous abstract) the authors set out 3 schematic outlines of the likely bronchographic signs, to be seen in cases of silicosis, broncho-pulmonary tuberculosis and silicotuberculosis respectively. From another authority they quote a list of the signs which may be observed when tuberculosis involves the bronchial system. The signs will combine in many different ways to give a wide variety of bronchographic shadow patterns none of which can be said to be typical of silicotuberculosis, but bronchography can still be of great value in diagnosis. The authors carried out both bronchoscopic and bronchographic examinations on 27 patients found to be suffering from silicotuberculosis and they select 6 of these to describe their findings and conclusions in each case, reproducing photography of the bronchography and of the chest radiography. Both bronchoscopic and bronchographic pictures in one of these cases showed the signs of silicosis but did not show evidence of the associated tuberculosis at the time. In two other cases, both bronchoscopy and bronchography gave indications of the tuberculous association, while in 2 other cases the indications were seen by bronchoscopy but not by bronchography and in the other case it was the opposite.

-- Bull. Hyg.

- 781 Asbestosis and Carcinoma of the Lung. Case Report and Review of the Literature.
J. Anderson and F. A. Campagna. Arch. Environmental Health 1, 27-32 (July 1960).

A case of asbestosis associated with carcinoma of the lung is presented. The literature is reviewed, and this is the 24th reported case, with complete autopsy findings. In general, it conforms to the previously described cases where a relationship between the 2 diseases is intimated. It is suggested that further cases of asbestosis, with and without neoplasia, be reported with careful attention to other factors, such as smoking. Only when these facts are available will final assessment of the relationship between asbestosis and lung carcinoma be possible.

-- Authors' summary

- 782 Pneumoconiosis (Talcosis) in Soapstone Workers. A. Ahlmark, T. Bruce and A. Nystrom.
Nord. Med. 59, 287-288 (Nov. 20, 1958).

Mining and processing of soapstone in Sweden are confined to 2 places and employ only about 100 men. The stone consists mainly of the minerals talc and chlorite. The disease condition produced by exposure to such dust is best described as talcosis. The authors describe 5 cases of mild pneumoconiosis which were demonstrated after at least 20 years exposure, as a rule not until after more than 30 years exposure. In no case was the working capacity of the individual affected.

-- APCA Abst.