

probability of developing lung cancer is very much greater among asbestos workers who smoke cigarettes than among those who do not smoke.

(9) Data are virtually non-existent concerning the possible deleterious effects of chronic exposure to low concentrations of asbestos fibers, such as that found in the ambient air of most metropolitan areas or around construction and demolition sites. Nevertheless, the Committee agrees with many experts in the field that, until persuasive evidence to the contrary is forthcoming, it is prudent for public health officials to assume that there is no level of concentration of airborne asbestos fibers below which adverse effects will not occur in population groups chronically exposed. Accordingly, the Committee endorses the consensus of many experts that every reasonable method should be exercised to limit the discharge of asbestos fibers into the environment from all sources.

(10) With regard to limiting the occupational exposure to asbestos fibers, the Philadelphia Department of Public Health, as well as the Pennsylvania Department of Health use as a performance standard (threshold limit values) the limits specified in Chapter 4 of Article 432 of the Rules and Regulations of the Department of Health of the Commonwealth. In April 1970, the American Conference of Governmental Industrial Hygienists (ACGIH) adopted a proposal to lower the threshold limit values in places of employment, to become effective in approximately two years. It appears unlikely that State Regulation 432 can be amended to reflect the revised standard in the near future. However, the Committee believes that the Philadelphia Department of Health should adopt as soon as possible, its own performance standard, consistent with the ACGIH proposed values, to apply to airborne asbestos fibers from all sources within the working environment.