



THE INDUSTRIAL
COMMISSION OF OHIO

Division of Safety and Hygiene

Richard F. Celeste
Governor

8230 Montgomery Road, Suite 107
Cincinnati, Ohio 45236

January 13, 1989

Ms. Judy Spencer
Legal Department
Industrial Commission of Ohio
246 North High Street
Columbus, Ohio 43215

Re: OD 193635
Employer: R. E. Kramig Co.
Cincinnati, OH
Claimant: [REDACTED]

Dear Ms. Spencer:

[REDACTED] is a 60 year-old man who has worked as an insulator for approximately 42 years. Most of that time he worked for the R. E. Kramig Co. In view of the extremely long time, it is surprising that his medical symptoms are not much more pronounced. According to the medical information supplied, Mr. Grosardt has asbestosis. The evidence, that is, signs and symptoms, is not totally conclusive, especially the suggestion of mesothelioma.

In 1984, Dr. Frank suggested the possibility of "...a serious process developing in the right pleura". While he did not mention mesothelioma specifically, that is very likely what he was referring to. According to some experts in pulmonary medicine, pleural mesothelioma is commonly associated with chest pain, dyspnea, a rapid increase in pleural thickening, restriction of lung function, and a rapid downhill course; the disease is almost uniformly fatal.

Subsequent medical reports make no mention of mesothelioma, which is a type of tumor occurring in asbestos-exposed individuals almost exclusively. In view of the word "rapid", in the previous paragraph, and the fact that approximately four years have elapsed since the first mention of mesothelioma, it seems unlikely that cancer has occurred in this case -at least yet.

There is little doubt that [REDACTED] was exposed to a wide variety of dust types, concentrations, and lengths of exposure over the many years of his worklife. He was doing

insulation work long before any knowledge of, the health effects and preventive measures relative to asbestos exposure were known. It is also surprising that even though he quit smoking many years ago, much more serious complications have not developed. The fact that he smoked for nearly twenty years during the time when the worst exposures were probably occurring would predispose him to a number of respiratory diseases. That his medical condition is not much more serious, indicates that either he is more resistant to the development of asbestos-related disease than many others like him, or his exposures were not nearly as serious as others in similar jobs.

In summary, there seems little doubt that [REDACTED] received some degree of exposure to asbestos-containing dusts during his very long worklife. The exact amount and time and place of exposure, are impossible to estimate at this time. The presence of some degree of respiratory disease is also obvious. Whether it is totally, or not at all due to asbestos exposures, and the degree of disability which has resulted, seem to be the main questions.

If I may be of further assistance in this claim, please let me know.

Sincerely,

James S. Ferguson
James S. Ferguson, CIH
Industrial Hygienist

Literature sources used in this include:

1. Occupational Lung Diseases, Weill & Warick, Marcel Dekker, Inc., N. Y., 1981
2. Pulmonary Function Tests in Clinical and Occupational Lung Disease, Miller, Grune & Stratton, Inc., N. Y. 1986
3. Asbestos Related Disease: Difficulties in Diagnosing Occupationally Related Illness, Raymond Murphy, M.D., Frontiers in Medicine, Feb. 10, 1981
4. Federal Register, Vol 57, No. 119, June 20, 1986

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