first LCA case observed in Italy was published in 1955 (Rombola). Prior to the year 1947, Wegelius and Noro did not observe any cases of LCA among persons suffering from asbestosis in Finland; the same applies to Frost, Georg and Mzller in Denmark prior to 1956. No cases of LCA have been reported as yet by the Soviet Union and South Africa. Serious doubts therefore exist with regard to the 13% rate of incidence calculated based on the autopsy statistics available.

Including Doll's cases and our own five cases of LCA, approximately 80 cases were published in worldwide literature prior to 1956 (literature by Bohlig, Jacob and Kallabis). This low number adds strength to our opinion that the incidence quoted based primarily on English autopsies is not to be generalized since the autopsy material was not selected at random.

The chance of humans contracting lung cancer has considerably increased over the past decade due to the increased incidence of bronchial carcinoma and the incidence of lung cancer is now 12 out of 10,000 living males and more than one out of 10,000 living females per year at the carcinoma-prone age (Schinz, Fig. 1).

Comparative studies performed in 1954 based on the Dresden Hospital Records of 343 cases of asbestosis showed that the number of known LCA cases against the number of persons exposed to asbestos dust at that time did not indicate a higher lung cancer hazard as compared to the total number of lung tumors among the general population. For female asbestos workers, however, the proportions were different. As far as we can judge from the small quantity of data available, it would appear that the