roentgen aspects as other forms of pneumonoconiosis. Baritosis due to barium sulfate is a benignant pneumonoconiosis. The pathologic changes are specific. In the roentgenogram of the chest the lesions appear as confluent, well-defined, miliary-like opaque nodules diffuse throughout the lungs.

RECENT STUDIES OF SATURNISM IN ITALY. ENRIC C. VIGLIANI, Med. lavoro **41**:105 (April) 1950.

The work on saturnism in Italy as carried on by Italians in the course of the last 20 years includes studies on (1) absorption and elimination of lead and (2) toxic effects of lead on the blood, the viscera, the digestive tract, the nervous system, the cardiovascular-renal apparatus, the blood vessels, the endocrine glands and the metabolisms of uric acid and porphyrin. Other fields covered are concerned with the therapy of chronic lead poisoning and the clinical and medicolegal aspects of chronic lead poisoning and of acute poisoning with tetraethylene lead. Work on the anatomicopathologic lesions of this intoxication as seen at autopsies and during experiments on animals is also reported. A bibliography of 107 contributions made by Italian authors is given at the end of this article.

VITAL CAPACITY OF SILICOTICS: I. MODIFICATIONS OF VITAL CAPACITY AND OF OTHER RESPIRATORY INDICATIONS IN PULMONARY SILICOSIS. L. PARMEGGIANI, Med. lavoro **41**:153 (May) 1950.

The vital capacity values of 424 silicotics were established with the ratio real vital capacity: normal vital capacity and the respiratory formulas of Amar, Cantoni, Lambolez and Spehl. Remarkable reduction of vital capacity was observed to be more closely connected with the gravity of the emphysema than with the gravity of the fibrosis. Of the various respiratory formulas examined, Spehl's formula seemed to be connected more closely with the ratio real vital capacity: normal vital capacity.

ADAPTATION OF ENGLISH SUMMARY.

VITAL CAPACITY OF SILICOTICS: II. IMPORTANCE OF METHODS OF DETERMINING THEORETICAL VITAL CAPACITY IN SILICOSIS. L. PARMEGGIANI, Med. lavoro **41**:160 (May) 1950.

The theoretical importance of measuring vital capacity in cases of silicosis is stressed. This is a potential respiratory measure which is relatively constant and little influenced by neurovegetative conditions in the silicotic patient but very sensitive to those anatomical alterations that belong to silicosis, especially to emphysema. The vital capacity measure is more analytical than the functional effort tests, being almost independent of extrapulmonary conditions. In a sense it is comparable to the roentgenological examination, as it makes a quantitative valuation possible.

Practically speaking, when it is not possible to compare the vital capacity of a silicotic worker with the vital capacity he had before he contracted silicosis, the utilization of this measure is difficult and requires that formulas be used for the calculation of the theoretical normal vital capacity. The most important criticisms of the various ways of elaborating these formulas are discussed. These on the whole do not agree, as is shown in a table which presents the remarkable difference between the values of normal vital capacity calculated according to the various formulas of four silicotic patients. It is suggested that a new table of formulas valid for Italian workers be prepared, arranged according to age.

ADAPTATION OF ENGLISH SUMMARY.

PULMONARY BULLOUS EMPHYSEMA AS CAUSE OF SPONTANEOUS PNEUMOTHORAX IN PATIENTS WITH SILICOSIS. E. ZANETTI and E. CONTE, Med. lavoro **41**:185 (June-July) 1950.

Zanetti and Conte report a case presenting all the characteristics of multiple bullous emphysema secondary to diffuse silicotic changes and complicated with spontaneous pneumothorax through rupture of a bulla, in a man 35 years old, who worked as a mine driller for 15 years.