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* M E M O R A N D U M *

TO: Mr. Doolap, Assistant Secretary.

FROM: Dr. Fisher

DATE: March 9, 1928

SUBJECT: Fisher Clinic, Fisher, Oklahoma.

The Fisher Clinic is carried on as a cooperative enterprise between the Metropolitan, the United States Bureau of Mines, and the mining companies in the district. The Metropolitan contributes \$8,000 a year, the U.S. Bureau of Mines \$8,000 a year, and the mine operators \$18,000 a year. Formal contracts have been entered into as between the Metropolitan and the Government and each individual mining company and the Government. The original plan was to have it continue for three years from February 1928.

The staff of the clinic consists of Dr. Bartholomew, Surgeon-in-Charge, a consultant physician, a medical officer in charge of the laboratory, an X-ray technician, and 4 clerks. Every mining company in the district contributes to the clinic upon a per capita payroll basis. Up to the present time only two small mines have refused to come in, one employing 40 men and another employing 40 men, but one of these has signified its intention of joining. Not all of these participating mines are group paymasters, but all the big companies in the field are covered by the Metropolitan with the exception of the Bigler Fisher Lead Company.

We have just completed a complete physical examination including an X-ray of every man working in the district, which includes Ottawa County, Delaware, Cherokee County, Kansas, Rogers County, Missouri and a few outlying villages upwards of 10,000 men have been examined. Every man whom we examined is given a card on which is his photograph, his signature, his summary of his physical condition, the card being stamped with the United States Government seal. The card is then placed in a little leather folder.

As you know, there has been some investigative work done in the Joplin-Fisher district off and on for a number of years, but no attempt has been made to deal with the condition. Previous investigations have merely been for the purpose of establishing the facts. To adequately deal with this situation two forms of endeavor are necessary; that is, mining conditions underground must be improved and every effort made to control the dust heard, and second, the physical condition of the men must be constantly supervised so that those whose lungs have become dust damaged may be removed from the industry before they become hopelessly ill. As you know, those miners with dust damaged lungs (silicosis) contract and die of tuberculosis.

Mr. Baulap

Fisher Clinic

March 9, 1926

The mining companies in recent years have been gradually improving underground conditions and these mines are less dusty than they were. I do not believe that the present conditions represent the maximum possible results in the way of dust control, but at least there is a forward movement.

Our purpose in making physical examinations of miners was first of all to detect all men working underground who had tuberculosis and remove them from the industry, and secondly to guarantee that no new men could be hired for underground work whose lungs were not normal. If we can get tuberculous men out of the ground and keep men with tuberculosis from being hired and if we can maintain an annual physical check-up, I do not see but what we must eventually diminish the amount of tuberculosis and the total permanent disability costs. The first effect of these examinations among Group policyholders is probably to cause an increase in the total permanent disabilities, but that should be followed by an improvement in the number of these cases.

Whether we can get to the point where we can or wish to examine men with silicosis from underground work I do not know; time alone can tell. It is our plan at the end of three or possibly four or five years to turn over this clinic enterprise to the mining companies and let them run it.

Of course aside from its local features the physical examination and re-examination of 25,000 thousands of men are going to give us a lot of valuable information both in regard to silicosis and other lung conditions which will be of general use to us. It must not be forgotten, too, that we carry Group insurance in other places where the silicosis hazard is a very serious one, notably Barre, Vermont.

The most remarkable thing about this clinic has been the entire absence of objections or serious complaints from the men. I should not have believed it possible that such a scheme as this could have been put over without some serious objections. Of course the moral force of the Government and the Metropolitan is the deciding factor. It should be remembered that all the men working in this district are Americans, there being no foreigners and no negroes in that part of the country. So we are dealing with a homogeneous population which is another factor which I believe will facilitate the securing of some worth while statistics that might have a bearing on the general questions of health insurance.

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Mr. Dunlap

Picher Clinic

March 8, 1932

The attached leaflet is handed to the miner at the same time that he gets his card from the clinic. I have in my files Dr. Moriwether's report for the year 1927. It is rather long, but it is very interesting and comprehensive and, if you would care to read it, let me know and I shall send it up to you. Also if there are any points that are not clear or about which you would like to have further information, let me know.

Assistant Medical Director

March 10, 1933

Mr. Philip Drinker
50 Van Dyke Street
Boston, Mass.

Dear Phil:

I have your letter of March 9. Mr. Davis came to see me, accompanied by Mr. Winans, Personnel Manager of the Union Carbon and Carbide Company. Mr. Davis is the head of the department dealing with power development for this Company and struck me as being a very decent citizen and seemed to be quite well informed on the whole subject of silicosis.

I have heard from a number of sources about the high mortality that has been attendant upon the construction of this tunnel. The suits are being brought against the contractor and the insurance company and Union Carbon and Carbide is apparently not liable. However, they have decided to look into the matter thoroughly and be of such assistance as circumstances may warrant to the contractor in defending these suits.

I pointed out to Mr. Davis, and as far as I could make out, he got the same advice from Sayres, that the thing to do was to establish first of all whether these sick men had silicosis and for that purpose, I suggested that he consult Dr. Pascoeast. My own opinion is that if these men were found to have silicosis and they had worked under conditions exposing them to silicosis, the suits had better be settled. Of course, there is a strong probability that many of these men were old hard-rock workers who may have had silicosis when they went to work for the contractor. Mr. Davis was anxious to establish the status of respirators and I advised him to get in touch with you, both as to type and as to the time when various types appeared on the market.

I imagine that there are probably some genuine cases of silicosis mixed up with a number of more or less fraudulent suits. The majority of these people bringing suits are negroes and naturally the whole thing has been engineered by some clever lawyer. I do not know who the contractor is but I expect they have got him across a barrel. A number of suits have been filed on behalf of persons now dead and I believe their lungs have been secured. I advised Mr. Davis to consult Dr. Gardner for this phase of the job. I shall be glad to give you any further dope if I have any.

Sincerely yours,

A. J. Lanza, M.D.
Assistant Medical Director

July 9, 1934

Mr. Philip Brinker,
c/o L. T. Nicks,
St. Joseph Lead Company,
Kansas City, Missouri.

Dear Phil:

At Mr. Fletcher's request, I am enclosing a copy of the classification of silicosis. This has not been officially O.K.'d yet and I imagine that what will happen is that Sayers, as Chairman of the Committee on Silicosis of the A. P. H. A., will present it at the next meeting in Pasadena as the annual report of the Committee on Silicosis, thus at one time putting on it the stamp of approval of the Public Health Service and of the A. P. H. A. Sayers has been in Europe and I have not had a chance to see him. So, in the meantime, this classification is not for general dissemination.

Sincerely yours,

A. J. Lanza, M.D.
Assistant Medical Director

ST. JOSEPH LEAD COMPANY.

250 PARK AVENUE

NEW YORK

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GEORGE I. BRIDEN, Asst. Secretary

TELEPHONE ELDERADO 8-3900

CABLE ADDRESS
"SAINTJOE" NEW YORK

July 6, 1934.

Dr. A. J. Lanza,
Assistant Medical Director,
Metropolitan Life Insurance Company,
One Madison Avenue, New York, N. Y.

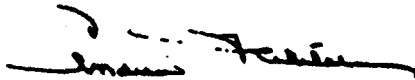
Dear Dr. Lanza:

Upon my return to New York this morning, I was very interested to find your letter of June 27, 1934.

As you know, Mr. Drinker is expecting to spend two weeks with our Bonne Terre Organization, and it would be a great help to us if he had a copy of your proposed form of silicosis classification, as he expects to go over the entire problem with our legal staff, as well as with certain of the local doctors who may aid us in our defense.

I quite appreciate that before any public announcement is made, the matter should be considered as confidential, and therefore, that you may not be in a position to send us copy of the classification, but you probably would have no objection to sending same to Mr. Drinker for such use as he may consider equitable.

Very truly yours,



Vice President & Treasurer.

AF:LL

Copy Mr. Drinker

March 10, 1933

Mr. Philip Drinker
30 Van Dyke Street
Boston, Mass.

Dear Phil:

I have your letter of March 9. Mr. Davis came to see me, accompanied by Mr. Winans, Personnel Manager of the Union Carbon and Carbide Company. Mr. Davis is the head of the department dealing with power development for this Company and struck me as being a very decent citizen and seemed to be quite well informed on the whole subject of silicosis.

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I pointed out to Mr. Davis, and as far as I could make out, he got the same advice from Baynes, that the thing to do was to establish first of all whether these sick men had silicosis and for that purpose, I suggested that he consult Dr. Pennock. My own opinion is that if these men were found to have silicosis and they had worked under conditions exposing them to silicosis, the suits had better be settled. Of course, there is a strong probability that many of these men were old hard-rock workers who may have had silicosis when they went to work for the contractor. Mr. Davis was anxious to establish the status of respirators and I advised him to get in touch with you, both as to type and as to the time when various types appeared on the market.

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Sincerely yours,

A. J. Lanza, M.D.
Assistant Medical Director

May 17, 1933

Dr. A. J. Lanza,
Assistant Medical Director,
Metropolitan Life Insurance Co.,
New York City, New York.

Dear Dr. Lanza:

Enclosed herewith please find a copy of the deposition of Dr. Clayton S. Smith and of my own evidence in the first of the series of legal cases resulting from the alleged silicosis developments at the New River power tunnel project. This case is that of Raymond W. Johnson (an employe) vs. Rinehart & Dennis Co., et al (the contractors).

I have indicated certain corrections in red pencil where mistakes are obvious, either on my part or that of the stenographer. This copy of my testimony was transcribed by a stenographer for the Rinehart & Dennis Co., and I think he made a pretty good job of it. You will notice my attempt at simplified language, also many grammatical slips, etc. - the case being heard before a locally selected lay jury. Hence, please be gently critical of the phraseology and so on, but lay on heavily where you think I am in error and I shall appreciate it. You will find these two manuscripts most valuable for the direct evidence of the West Virginia situation rather than for the opinions contained regarding silicosis.

In this Raymond Johnson case, some 85 lay witnesses had already been heard before I arrived, while the plaintiff, Mr. Johnson, and his physician, Dr. L. E. Harlow, preceded me on the witness stand. I waited there until the two X-ray specialists from Charleston, Dr. Hughey and Dr. Lambert, had given their testimonies, which corroborated mine, and then departed for Columbus.

I am informed that the next week Dr. Pancoast and Dr. James A. Britton appeared for the defense. Dr. Pancoast limited his testimony to the X-ray films of Mr. Johnson alone and stated that in his opinion they were tuberculosis and not silicosis, while Dr. Britton considered all the evidences, X-ray and otherwise, and declared the case was purely one of tuberculosis and not silicosis; thus, we obviously disagreed.

I think the trial must have covered between four and five weeks. Finally it resulted in a disagreement on the part of the jury. Dr. Harlow wrote me under date of May 10th that seven of the jurors were in favor of finding for the plaintiff, Johnson, and five were for the defendant. There is very strong suspicion that those five were corrupted by an agent for the defense. One of the five has been summoned before the Court and was fined for contempt on the evidence that he discussed the case during the progress of the trial. I think a second one will perhaps receive a summons to appear.

Dr. A. J. Lanza — Page 2.

before the Court to answer contempt charges. Of course it is very difficult to obtain evidence sufficient to establish charges of bribery, but there is no doubt in my mind as to what happened. The case was cleanly won for the plaintiff by overwhelming evidence. The same case, or another one will come to trial soon, perhaps in this month."

Judge Bary, who presided (Circuit Court, Fayetteville, W. Va.), I considered very fair indeed.

I am sending similar copies to Sayers and Russell. You may keep this material for your files.

With all best regards,

Sincerely yours,

Emory R. Hayhurst.