

DR. ARMSTRONG, THIRD VICE PRESIDENT

DR. EVELIN, THIRD VICE PRESIDENT AND STATISTICIAN

DR. KNIGHT, MEDICAL DIRECTOR

DR. MC CONNELL, ASSISTANT MEDICAL DIRECTOR

I spent April 7th at the Bureau of Mines Experiment Station in Pittsburgh, and together with Dr. Sayers and Mr. Yant went over the work that is being carried on under our co-operative agreement.

The research staff working under our joint direction consists of Dr. Miller, Mr. Froese, and Mr. Witemyer. Under the supervision of Mr. Yant, Dr. Miller and Mr. Witemyer are working on a very interesting series of experiments demonstrating the pathological effects of various kinds of dusts when injected into the abdominal cavities of guinea-pigs. They have prepared a striking exhibit, showing the difference in the types of reactions provoked by different kinds of dusts. They have mounted sections of the abdominal wall of guinea-pigs, showing reactions due to the various dusts at periods from one week to six months after inoculation. These specimens show very clearly the tendency of certain dusts to produce lesions tending to become aggravated as time goes on, whereas other types of dusts produce lesions that tend to clear up and finally disappear. The object of this is to furnish a ready means of deciding whether any given dust will produce pulmonary fibrosis without having to go through the long and tedious process of artificially dusting animals by inspiration. This material will be exhibited at the annual convention of the A. M. A. in Milwaukee.

Mr. Froese has been working on various phases of lung infection, particularly with the fastidious bacillus and Vincent's spirillum and has established the fact that these organisms will produce pulmonary disease only when in symbiosis with certain other bacteria. These experiments are to be continued to determine the effects of these various groups of bacteria when in conjunction with silica. At the same time that he has been carrying on this work, Mr. Froese has been inoculating guinea-pigs with a group of bacteria producing definite lung abscesses and at the same time administering arphenazine and bacteriophage. He has shown that both the arphenazine and bacteriophage will prevent the formation of abscesses.

Both Dr. Sayers and I felt that this work in Pittsburgh was not only clear cut and well-organized but thoroughly practical and that there is already available enough material for three or four articles for publication. We have asked Mr. Yant to see that these are prepared before the end of the fiscal year (June 30). I was impressed not only with the business-like method in which Mr. Yant and his associates present their results but also with the excellent spirit and morale of the whole staff.

April 12, 1938

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

Re: Coverage under Metropolitan Employees Insurance and Retirement Plan, Group Contract No. 52, of Employees at Bureau of Mines Experiment Station at Pittsburgh

Mr. Dobbin
Third Vice President

This replies to your memorandum of February 23rd, since receipt of which I have the annexed advice sent you by Dr. Lanza that the two employees particularly in question, Miss Dillon and Mr. McIntyre, have both been rejected medically.

I see no reason to depart from the opinion expressed in my memorandum of January 13, 1931 and approved by Mr. Lincoln, that the former employees of the Fisher Clinic, paid by the Metropolitan, were Metropolitan employees.

Whether a Metropolitan employee is a permanent or temporary employee depends on the actual circumstances of the case, and in the determination I think a certain amount of discretion is permitted the Company.

The Fisher Clinic is no longer in existence, and there appear to be some differences in arrangement as to employees of the Bureau of Mines Experiment Station in Pittsburgh, in which we are cooperating. As to the employee, Mr. McIntyre, who receives only half his pay from the Metropolitan, I certainly do not think he is a full time permanent employee. As to the employee, Miss Dillon, who is paid in full by the Metropolitan, I would think in the circumstances that she might properly be deemed a temporary employee. Both of these employees having been rejected medically, I do not think any waiver is required, but think that they should be advised that they are not deemed to be such employees as we must cover under the group policy, and are not entitled to coverage thereunder. I think this classification might properly be made of future employees at this Station.

I do not think this conclusion necessarily requires us to discontinue the coverage of Mr. Froese who was originally covered while employed at Fisher Clinic.

April 18, 1933
HCB:W

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Assistant General Counsel

copy to

Dr. Lanza, Assistant Medical Director

Mr. Dixon, Met. Employees Ins. and Retirement Plan