It's pretty difficult sometimes to tell when you get a man's X-ray picture in the office and you talk to him about his occupation, it's pretty difficult to tell just precisely what he was exposed to and, for that reason, I would think that it would be poor practice to bring in the question of inactive and active dusts.

Furthermore, we have learned in the last fifteen years, that what, at one time, we considered inactive, we now know to be active.

Our Chairman also raised the question as to whether simple silicosis was a condition or a disease. Well, so far as I'm aware, simple silicosis is a disease. It's fibrosis with a certain amount of nodulation, just how much it's impossible to say. I went back to the 1930 report of the Johannesburg Conference, and I would like to read you the definition first used of silicosis, by Doctor Urban to his colleagues. He says: 'If one employs a term simple silicosis to designate a condition of simple silicosis unaccompanied by simple or undetected tuberculosis, one may say that due to a tactical standpoint upon respiratory ailment, the degree of simple silicosis coincides with the appearance of a certain amount of palpable nodulation under the pleura and in the lung substance'.

Apparently, the question as to how much nodulation is somewhat indefinite, and then a little later on,