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Painters & Allied Trades Journal

FEBRUARY 1977

CIRCULATING MATERIAL
CORNELL

LINCOLN ON THE RIGHTS OF LABOR

FROM A SPEECH AT NEW HAVEN CONN. MARCH 6, 1860

I am glad a system of labor prevails under which laborers, can strike when they want to, where they are not obliged to work under all circumstances; and are not tied down and obliged to labor, whether you pay them for it or not – I like the system which lets a man "quit" when he wants to, and I wish it might prevail everywhere.–

I do not believe in a law to prevent a man getting rich; that would do more harm than good – So, while we do not propose any war upon Capital; we do wish to allow the humblest an Equal chance to get rich with everybody else.

I want every man to have a chance to better his condition; that is the true system.

I am not ashamed to confess that 25 years ago I was a hired laborer.

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Painters & Allied Trades Journal

On the Cover
Lincoln's Labor message on the cover was printed on a postcard provided by Brother Morris Silverman of Local 798, Nassau County, L.I., N.Y.

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Respiratory Disease Cause Are

This is the third in a five-part series dealing with the Mount Sinai School of Medicine investigation into the health hazards of the painting trades.

The investigation, completed after nearly three years of detective work, exposes chemical culprits responsible for death and suffering among the ranks of painters and allied tradesmen.

Last month neurological harms and the chemical culprits that cause them were examined.

This month disorders and diseases of the respiratory system are discussed.

Suffering in the IBPAT Ranks (Part III)

Respiratory disorders and diseases encompass those of the nose, throat, mouth, lungs and bronchial and trachial tubes, which form the "wind pipe" to the lungs.

The chemical culprits span from the solvents, discussed last month as the Number One cause of neurological harms, to the well-known respiratory culprits asbestos and crystalline silica.

The disorders and diseases range from mild irritations of the respiratory tract, which cause minor coughs, stuffiness and headaches, to major breathing problems, which often result in death.

Most respiratory complaints among painters and allied tradesmen stem from solvent and dust irritation of the "upper" and "lower airways."

The solvent and dust culprits responsible include the solvents alcohol, aliphatic hydrocarbons, aromatic hydrocarbons, benzene, chlorinated hydrocarbons, esters, ketones, toluene, turpentine and xylene; and the dusts from asbestos, bichromates, leads, zincs and assorted pigments. Other culprits include ammonia, antimony, boric acid, oxalic acid, shellac, sodium hydroxide and sulfuric acid.

Irritation by these chemical culprits affect the "upper airways"—the nose, mouth, upper throat and connecting air passages—among 45 percent of the painters, metal painters, sandblasters, floor tile workers and tapers tested.

Irritation of the "lower airways"—the bronchial and trachial tubes, and the lungs—affect 38 percent.

Among tradesmen who work with epoxies, 57 percent have upper airway irritations. Fifty-two percent have lower airway irritations. These are the highest percentages of irritations for any tradesmen. Mount Sinai School of Medicine detectives in New York believe such high percentages of irritations show that the special chemicals epoxy workers use are more dangerous than the more conventional chemicals used among other painters.

Titanium pigment manufacturers work with few of the solvents and chemicals which other painters and tradesmen are exposed to constantly. They also have the lowest percentages of upper and lower airway irritation. The MSSM detectives say this helps to show that solvents and chemicals are responsible for respiratory disorders and diseases among other painters.

But many titanium workers are exposed to sulfuric acid fumes during the titanium dioxide manufacturing process. These fumes do cause respiratory disorders and diseases among titanium pigment manufacturers. Among exposed workers 76 percent claim trouble with lower respiratory irritations: 70 percent experienced coughs; 41 percent, shortness of breath; 30 percent, tightness in the chest, and 12 percent, audible wheezing upon exposure to fumes.

Several medical tests assisted the MSSM detectives in finding respiratory disorders and diseases among painters and allied tradesmen. They are the pulmonary function test, the chest x-ray, the Sputum Cytopathology and the Serum Carcinogenic Embryonic Antigen test, known as CEA.

The pulmonary function test assesses breathing difficulties such as "obstructive" and "restrictive respiratory dysfunctions." Obstructive dysfunctions occur when the breathing passage is "blocked" by the swelling of the bronchial and tra-

ius Are Identified by MSSM

chial tubes. Restrictive dysfunctions occur when the capacity of the lungs is reduced.

Among the painters in an MSSM study, more than half who smoke or had smoked experience obstructive dysfunction. Forty-eight percent of those examined who did not smoke at all also experienced obstructive dysfunction. The MSSM detectives pointed out that the high number of non-smokers who experience breathing difficulties is a sure sign of the dangers of the chemicals to which they are exposed.

The pulmonary function tests of titanium pigment manufacturers, who experience lower exposures to solvents and other chemicals, also show fewer obstructive or restrictive dysfunctions. Only nine percent have "mixed" obstructive abnormalities. And only six percent have "restrictive" respiratory diseases.

Once again, the MSSM detectives find the greater the exposure the greater the disorder and disease and the less the exposure the less the disorder and disease.

The breathing difficulties among painters and allied tradesmen shown by the pulmonary tests are troublesome problems that lower enjoyment of life and affect the quality of work for any tradesman. They also lead to even greater concerns: chronic bronchitis, pneumoconiosis, fibrosis and cancers.

Chronic bronchitis is a disease characterized by severe trachial and lung inflammation which produces persistent coughs, soreness in the chest, difficulty breathing and, in extreme cases, fevers. Chronic bronchitis is reported by MSSM among 30 percent of all painters and allied tradesmen tested.

The highest percentage of chronic bronchitis is among sandblasters, 38 percent; followed by paint manufacturers, 33 percent; floor tile workers, 29 percent, and general painters, 28 percent.

According to the MSSM detectives, the higher prevalence of bronchitis among sandblasters is due to higher concentrated exposures to solvents and silica. Once again, among titanium workers, who are exposed to much lower levels of solvents and dusts, diagnosed disorders and diseases are lower. In fact, says the MSSM report, among titanium workers cigarette smoking "had a more pronounced effect upon bronchitis prevalence than did a history of symptoms due to irritant exposure."

Chest x-rays were used by the MSSM detectives to get "inside" information on the disorders and diseases that affect painters and allied tradesmen.

The chest x-rays show abnormalities among 20 percent of all examined tradesmen. Among painters and paint manufacturers, changes in the lung tissue are found among 14 percent.

Five percent of the painters' x-rays show small, round, dense growths of abnormal cells, which appear on the x-rays as white, cloudy areas. These growths are known as "opacities." Nine percent of the painters also show irregular-shaped opacities.

The presence of opacities, MSSM specialists say, indicates a high likelihood of pneumoconiosis from dust exposure among painters. Pneumoconiosis is similiar to silicosis and hinders the ability of the lungs to exchange oxygen and carbon dioxide in the blood stream.

Among sandblasters 8 percent have opacities. Once again, especially due to the large amounts of silica to which they are exposed, pneumoconiosis and silicosis among sandblasters are very likely.

Other x-ray abnormalities found among painters and allied tradesmen include "pleural" changes. The pleura are like large sacks and are filled with a lubricating liquid that enfold and protect the lungs. When irritated the pleura can thicken and calcify, becoming stiff and unelastic. This restricts the lungs from expanding to full capacity, creating breathing difficulty. Pleural changes are found in 10 percent of the painters' x-rays.

Among tapers, 48.1 percent of the x-rays show lung and pleural abnormalities. Four percent of the tapers also have pleural fibrosis, a disease in which thickening of the pleural tissue destroys the pleural cavity. The MSSM study found that the x-ray abnormalities among asbestos insulation workers are nearly the same as among tapers, clearly indicating that asbestos is the culprit responsible for taper x-ray abnormalities.

Further, the number of abnormalities increased with the number of years of exposure. The increase in abnormalities is greatest among tapers with more than ten years experience.

Cancer is one of the big concerns of nearly every person in the United States. Currently, one person in 10 can expect to be struck by cancer. Many experts believe 80 to 90 percent of cancers are caused by chemicals and other materials which we have introduced into the environment during the 20th Century.

Because painters are exposed to a high number of irritants, MSSM

Respiratory Diseases (cont'd.)

detectives felt cancer could be a problem among them.

To find out, MSSM examined past histories of the painters and allied tradesmen and conducted two tests, the Sputum Cytopathology test and the Carcinogenic Embryonic Antigen (CEA) test.

The histories of workers revealed malignancies in four percent of all examined workers. Most of the problems had been skin cancers. About 1 percent of the workers had undergone surgery for bronchial or larynx cancers.

Next, the MSSM administered the Sputum Cytopathology test. The sputum test is very simple. A person coughs then spits on a slide. The coughing before spitting causes loose cells in the throat to mix with the spit. These cells are deposited on the slide in the spit, where they are examined for abnormalities. The sputum test can reveal abnormalities ranging from bronchitis to cancer.

Cell abnormalities are classified according to the severity of change. The cell change, called "atypia," can be either mild, moderate or marked. Most persons with mild or morderate sputum deviations do not develop lung or bronchial cancers. However, they do have a greater chance of developing cancers than do persons with normal sputum tests. Even marked atypia does not mean the person has cancer. However, unless some form of health corrective measures are taken—for example, stopping smoking or reducing exposure to irritants—the person is very likely to soon have cancer.

The sputum tests show 54 percent of the non-smoking painters and 69 percent of the smoking painters have abnormal sputums. Forty-seven percent of the non-smoking painters' and 61 percent of the smoking painters' sputums are mild atypias. Seven percent of the non-smokers' and smokers' sputums are moderate atypias. Marked atypias are found among one percent of all painters examined. In addition, during the course of examination, one case of lung cancer was diagnosed. The painter is currently undergoing treatment by his physician.

The other test used by MSSM to determine the likelihood of painters and allied tradesmen developing cancers, is the Carcinogenic Embryonic Antigen (CEA) test. Like the sputum test, it is also designed to reveal cell abnormality.

All painter and allied tradesmen examined in the study had abnormal CEA tests significantly different from normal groups.

Further, non-smoking tradesmen had the same abnormalities found among smokers in the non-tradesmen, normal, groups. This means, say the MSSM experts, that the environmental exposures to solvents and dusts among painters and allied tradesmen is at least as harmful to the health as smoking. The environmental effect on tradesmen who smoke is even greater.

The combined findings of respiratory symptoms, chronic bronchitis, the opacities, the pleural changes, the abnormal sputums and all other disorders and diseases strongly suggests that chemical culprits including solvents and dusts do present a significant hazard to the health and well-being of painters and allied tradesmen.

Two things are certain:

- The longer a tradesmen is exposed to the chemical culprits of the trade, the greater the harm, and
- The higher the concentration to which the tradesman is exposed, the greater the harm.

Consequently, the message is clear. Avoiding lengthy and concentrated exposure to the chemical culprits, will be beneficial to worker health and well-being.

Further, anything that a tradesman can do to eliminate other irritations that might act in concert with the harms of the chemical culprits with which he must work, should be done. In other words, if you smoke, stop!

Next month, the fourth part of this five-part series, harms caused to the digestive system, the organs of the body and all other parts of the body.

38 Chemical Culprits Causing 15 Respiratory Disorders in the Painting Trades

	RESPIRATORY																
	Asbestosis	Bronchitis	Emphysema	Fibrosis	Irritation of Nose & Throat	Irritation of Lung Tissue	Irrit. Trachea & Bronchial Tubes	Lung Cancer	Lung Congestion	Obstructive Ventilatory Dysfunction	Pneumoconiosis / Pneumonitis	Pulmonary Edema	Respiratory Tract Cancers	Shortness of Breath	Silicosis
Acetic Acid					X	X	X								
Alcohols		X			X	X	X		X	X	X				X
Aliphatic Hydrocarbons		X			X	X	X		X	X	X	X			X
Ammonia		X			X	X	X		X	X		X			X
Antimony					X	X	X		X						
Aromatic Hydrocarbons		X			X	X	X		X			X			X
Asbestos	X	X		X	X	X	X	X	X	X	X		X		
Barite		X			X	X	X				X				X
Benzene		X			X	X	X			X	X				X
Bichromates					X	X	X	X	X						
Boric Acid					X	X	X					X			
Cadmium Compounds		X	X		X		X								
Carbon Tetrachloride		X			X	X	X				X	X			X
Chlorinated Hydrocarbons		X			X	X	X				X	X			X
Chromium Compounds					X	X	X	X							
Crystaline Silica					X	X	X	X	X	X					X	X
Esters		X			X	X	X								X
Glycols															
Ketones		X			X	X	X								X
Lead Compounds		X			X	X	X					X			X
Maganese Oleate															
Magnesium Carbonate						X	X								
Methylene Chloride		X			X	X	X					X			X
Mineral Spirits		X			X	X	X					X			X
Naptha		X			X	X	X					X			X
Oxalic Acid					X	X	X								
Pigment Dust		X	X	X	X	X	X	X	X	X	X	X	X	X	X
Shellac					X	X	X		X	X	X				
Silica Compounds		X	X	X	X	X	X		X	X					X	X
Sodium Hydroxide					X	X	X								
Sulfuric Acid		X	X		X	X	X		X	X					X	
Titanium Dioxide		X			X	X	X								X	
Toluene		X			X	X	X		X	X					X	
Turpentine		X			X	X	X		X	X					X	
Vinyl Chloride																
Wood Dust		X	X	X	X	X	X		X	X	X	X		X		
Xylene		X			X	X	X		X	X				X		
Zinc Compounds					X	X	X									