

Armed Forces are cutting into this nucleus of specialists. To help meet the over-all need, formal educational opportunities in industrial hygiene have been expanded, largely with the aid of this personnel. Nevertheless, for all groups concerned, the gap between supply and demand still constitutes a serious threat to the existence of some of the agencies as well as a hindrance to the development of new ones.

ENVIRONMENTAL CONTROL OF INDUSTRIAL HEALTH HAZARDS

The environmental control of industrial health hazards accounted for 67 per cent of all field services reported by the state and local agencies. These services include a wide variety of activities aimed at preventing and controlling specific health hazards in industry. They also include the efforts of the agencies in coping with health problems of national interest, such as those associated with air pollution control and ionizing radiation which affect other groups as well as industrial workers.

Air Pollution Control.—Almost without exception, air pollution control activities were cited as demanding increased effort and time on the part of agency personnel, frequently at the expense of routine work. While air pollution caused by products of incomplete combustion is generally under the control of local smoke abatement units, nuisance and health aspects of air pollution from industrial operations have always been an integral activity of the industrial hygiene agencies. Thus, these agencies have been coping with pollution problems both within and outside the plant for several decades. As a result, they have gained valuable experience in sampling and evaluating emissions from all kinds of industrial operations and, in most instances, have even devised and developed their own testing methods and instruments. Impetus for further effort in this field has been provided by the periodic Los Angeles smogs, which have aroused the public to the severe nuisance aspects of air pollution, and particularly the Donora (Pa.) episode, which confirmed the acute threat and pointed to the possibility of immediate and long range health implications.

Despite the fact that this new evaluation of the air pollution problem has prompted greater activity, air pollution control, with but few exceptions, still comprises a routine activity of the over-all industrial hygiene program. Notable among the exceptions is the full scale program functioning in Pennsylvania. Since the early part of 1949, when the General Assembly authorized funds for the study of the problem, an air pollution division has been established and has been operating within the Bureau of Industrial Hygiene of the Pennsylvania Department of Health. The division's staff of six persons cooperates with local air pollution control units on technical phases of air pollution problems, and conducts investigations wherever necessary throughout the state.

In Maryland the major activities in this field were the conduct of a survey of the sources, kinds, and extent of air pollution in the state, and a pilot study of morbidity in relation to air pollution. This study was made in the Cumberland area in cooperation with local health department personnel and the Public Health Service. It was financed by special funds which had been made available to the Maryland Department of Health through an appropriation from the state legislature.

The New Jersey Bureau on Adult and Industrial Health has acquired factual data on the problem of air pollution in its state through systematic surveys and