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Asbestos, Lung Cancer From Cigaretts Linked

**Doctors Report Mineral Does Not Cause
Disease but Enhances Smoking Dangers**

NEW YORK (AP)—Two cancer researchers say they have confirmed through human lung cancer cases the theory that occupational exposure to asbestos enhances the cancer-causing effects of cigarette smoke.

Asbestos exposure by itself, they reported Wednesday, does not appear to increase the incidence of lung cancer among asbestos workers who do not smoke.

Studies Confirmed

These findings, the researchers said, confirm studies based on such approaches as reviewing medical records but come from what they said was the first study they are aware of based on actual lung cancer specimens.

The report in the journal *Cancer*, a publication of the American Cancer Society, was written by two pathologists, Dr. Milton Kannerstein, of the Barnert Memorial Hospital Center in Paterson, N.J., and Dr. Jacob Churg, of the Mt. Sinai School of Medicine in New York.

The pathologists said they compared 50 lung cancer cases in patients occupationally exposed to asbestos with 50 matched control cases in persons not exposed.

The major features of the cancers in both

groups were essentially the same, Kannerstein and Churg reported, indicating that the documented increased incidence of lung cancer among asbestos workers cannot be attributed to asbestos alone.

This agrees with a finding by a leading asbestos researcher, Dr. Irving J. Celikoff of Mt. Sinai, that occupational exposure to asbestos does not appear to cause cancer among nonsmokers.

The incidence of lung cancer among cigarette-smoking asbestos workers was 92 times as high as it is for nonsmokers not exposed to asbestos.

A 'Cocarcinogen'

"It would appear then," Kannerstein and Churg said, "that it is as a cocarcinogen, in combination with cigarette smoking, that asbestos has an effect."

A similar situation has been suggested for lung cancer among uranium miners, they said.

The authors said they were forced to assume that cigarette smokers existed with the same frequency in their two study groups as they do in those groups at large because smoking histories were not available for all the groups. The researchers said they were confident the assumption did not lead to any major error.

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