find any tubercle bacillae. Again I want you to notice the extent of symple pneumoconiosis in the right lobe and again in this lung over here, notice the large amount of coal deposits and the cavity without any evidance of tubercle bacillae, both in life and in death at the necropsy table, and very careful studies.

Next slide. Now, the problem frequently comes up, and the question is often asked, is pneumoconiosis a progressive disease? I think that in this slide and in ensuing Roentgenograms, I can say and show you that it is. If you notice, this first slide, incidentally, all of the whole lung sections in pathology which I am showing you today have been prepared by Doctor Goffe in Cardiff, Wales and he lent me these tissues so I could demonstrate them to you.

If you notice here, in this first whole lung section, there are coal macules and in this lung we find no evidence of focal emphysema. However, in another case which had been a coal miner for a longer period of time, here you see the generating coal macules and focal emphysema and some coal macules maintain themselves without degeneration.

Now, what the contracture of the coal macule is due to is only a matter of conjecture. It may be that the impure fractions in coal dust besides carbon, have a fibrogenic tendency and cause this contracture over a long period