

and 1 of myocardial infarction. Nine of the original workmen are still alive, one following the resection of a lung or lung cancer.

Two papers were presented by workers from Britain discussing the value of routine lung function studies. In the first, Ross Hunt, of British Belting and Asbestos, Ltd., Yorkshire, England, gave the results of routine lung function studies on 813 employees in an asbestos processing factory. Routine work in this field of lung function was started in July 1960 in an asbestos textile plant in the north of England. The aim was to create a set of normal figures for lung compartment values, gas transfer factor coefficients, 90% mixing indices, ventilation on exercise, and forced breathing capacities. The subjects used in these tests were volunteers of both sexes in varying age and stature groups from departments other than those processing asbestos. These results were then analysed statistically and the regression formulae obtained applied to the results of men and women working in those occupations exposed to asbestos. Pulmonary function tests were also used as a screen to prevent people with lung impairment from taking up work in departments where asbestos dust was prevalent. Some difficulties were encountered in the beginning both in subject response and sampling technique. But these were overcome and this paper deals in the main with the technique and results obtained over the past three years. The evidence points to a significant decrease in gas transfer and vital capacity before any radiological or clinical signs are evident.

The other paper given by M. L. Thomson and W. J. Smither, from the London School of Hygiene and Tropical Medicine and from Cape Insulation and Asbestos Products, Ltd., London, England, indicated that inspiratory capacity and vital capacity were the best discriminates of asbestosis amongst the many pulmonary function tests used.

It would appear from the consensus at this meeting that the risk of persons not normally thought of as engaged in work with asbestos, and certainly not thought of as being in the asbestos industry, is greater than was originally thought. This fact should be borne in mind and embraces not only the person's occupation but also his hobbies - for instance, a do-it-yourself worker at home can have a material exposure to asbestos during home insulation. Since the prognosis for a diagnosed pleural mesothelioma is extremely poor, varying from a few weeks to one year, it is important that no persons within the company should be exposed to asbestos whether as frank asbestos fiber or asbestos contained in such materials as insulation, lagging, asbestos cement, etc. It is also of course important to present this type of information in perspective and not to cause undue alarm since there is no reason to believe that good industrial hygiene practice such as the use of masks when cutting asbestos or using powdered or fibrous asbestos products is not completely effective in preventing later disease. It is whether