ABOUT THE LUNG CANCER WITH ASBESTOSIS !

by

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In the past 12 to 15 years a so voluminous experience of the asbestosis ha been put down (established) in the German and foreign literature, that we have a far-reaching knowledge of the danger to the asbestos workers, the clinical picture of their occupational disease and also its progress (cour With regard to the pathogenesis, however, there are still a number of ques tions remaining for which further enlightenment is to be expected, especia from the animal-experimental and chemical-physical workings (revisions, adaptions). Contrary to that, our knowledge of its complications and simul taneous phenomenons is built on a much less broad and certain basis. Here, the author was recently able to make a voluminous contribution concerning the behavior of the pulmonary tuberculosis with this coniosis. Equally in formative as well as important is the inquiry after the relation to lung cancer, whose increase with asbestosis has been repeatedly brought to atte tion over the past years. This interest is not merely confined to the soci medical territory or that of insurance's legality (judicialness), but rath reaches much beyond that into the general medicine, because with that a ne example of an exogenous cancer origin would be set. The number of observa tions belonging in this place is, in itself, but small, yet in proportion the rarity of this ailment so considerable that a summarizing presentatio seems to be permitted. It is also welcome for the reason that, from the c nical side, there is no such work at all existing as yet in medical liter ture.

Firstly, we begin by repeating the observations of lung cancer with asbes sis as hitherto known in the world literature, then we are going to add t that the newest experiences, and point out the pecularities of this pictu of disease as well as its clinical diagnosis.

GLOYNE makes in 1933 the first mention of a carcinomatous tumor in the as bestos dust-lung in a treatise dealing with pathological anatomy and hist logy of the asbestosis. There he discussds the complications of the asbes sis which are said to be in causal connection with it (purulent bronchiti broncho-pneumonia, tuberculosis, emphesema, bronciectases) and the simult neous diseases which, according to the knowledge of that time, had nothin to do with the influence of dust. Among the latter, he mentions an observa which he dismisses as follows : "There has also been one case of squamous carcinoma of the pleura. There is no evidence at the moment that this was any way related to the asbestosis."

In 1935 GLOYNE could contribute 2 further cases of lung cancer with asbes sis, but he blieved that an etiological connection of both diseases could not be asserted as yet. Certain histological points of view, however, see to make it quite obvious.

The first of these 2 observations concerned a woman, 35 who had been an a bestos spinner for 8 years, and who, after that, continued to live still nother 9 years without being exposed to asbestos dust. As the autopsy sho she died of a moderate asbestosis, a clot in the right heart, spleen infa and a meningeal bleeding (hemorrhage). A clinically not recognized swelli (tumor) of walnut size was found on the base of the right upper lobe of t lung, extending up to the apex and the thickened pleura. There were no me stases present. The horny plate-epithelium carcinoma had its starting poi at a small bronchus.

The second observation by way of autopsy also concerned a woman, 71. Fift years prior to her death she had once worked for 6 months, and then again 13 months in an asbestos factory, and that, according to experience, in t