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Mesothelioma Register 1967-68

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Greenberg, M., and Lloyd Davies, T. A. (1974). *British Journal of Industrial Medicine*, 31, 91-104. Mesothelioma Register 1967-68. A register of mesothelioma cases is maintained by the Department of Employment, Medical Services Division (now Employment Medical Advisory Service). This paper describes an investigation of 413 notifications to the Register in 1967-68 from England and Wales and Scotland.

Cases were regarded as 'definite' when histological confirmation of diagnosis had been obtained, either by hospital pathologists, or by the UICC Panel of Pathologists, to whom pathological material was submitted whenever possible. Two hundred and forty-six cases were accepted as 'definite' and 76 cases were regarded as 'definitely not' mesothelioma. The remainder were classified as 'undecided' or 'insufficient pathological material'. Thirty-five of the 76 cases definitely not mesothelioma had nevertheless been so described on death certificates.

The investigation carried out covers clinical aspects, survival, and evidence of exposure to asbestos. Twelve per cent of definite mesotheliomata were of peritoneal origin. The age range was 21 to 87 years, but, in general, mesothelioma occurred at an earlier age than 'carcinoma of bronchus and lung' or 'all malignant tumours' in the Registrar General's statistical mortality tables.

Concomitant asbestosis and the finding of asbestos bodies or pleural plaques occurred as frequently in those cases classified as definitely not mesothelioma as in confirmed cases.

Occupational exposure to asbestos was found in 68% of definite cases, apparently significantly more frequently than in those definitely not mesothelioma, but there was observer bias. The interval between first exposure and death from mesothelioma exceeded 25 years in 85% of cases but was only three and a half years in one case. The duration of exposure varied widely: in 12% of cases it was under five years. The type of asbestos could be ascertained in so few cases that it was impossible to assess the rôle of crocidolite in aetiology. There were 38 definite cases in which no history of any exposure to asbestos could be obtained.

Definite mesotheliomata showed marked clustering in areas where there is substantial industrial use of asbestos. Whether this should be interpreted as evidence of causation or an effect of heightened awareness in these areas cannot be deduced from this study. Evidence is quoted suggesting that the observed annual incidence of approximately 120 definite mesotheliomata in England, Scotland, and Wales may considerably understate the true prevalence.

Diffuse or malignant mesothelioma of the pleura and peritoneum, although rare, has been sought for increasingly in the past decade. The reported association with asbestos exposure (Wagner, Sleggs, and Marchand, 1960) gave impetus to the enquiry. For some years the Pneumoconiosis Unit of the Medical Research Council had recorded cases of mesothelioma reported to them. By 1966 a register of some

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