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ABSTRACTS*

The Clinical Significance of Uncomplicated Marked Left Axis Deviation in Men Without Known Diseases. R. S. Eliot; W. A. Millhon and J. Millhon. *American Journal of Cardiology*; 12; 767-771 (Dec. 1963).

One hundred and ninety-five men with marked left axis deviation (-30° to -90°) ranging in age from 23 to 61 years were compared with 100 men with normal axis deviation in the same age distribution at an initial examination and at follow up 3 to 22 months later. Men with other ECG abnormalities, clinical cardiovascular-renal disease or diabetes mellitus known to exist prior to the initial examination were excluded from the study.

113 or 58% of the 195 subjects with LAD had cardiovascular disease or diabetes mellitus on the initial or follow up examination compared to 3% with hypertension and 1% with diabetes in the control group. A more detailed analysis of the abnormal findings revealed:

Angina coronary insufficiency, myocardial infarction or a positive exercise tolerance test occurred or developed in 34% of the study group. None of these diagnoses occurred in those with NAD.

Hypertension alone occurred in 14% of the LAD group compared to 3% of the NAD group. 2% in the LAD group had both hypertension and angina.

Subclinical or latent diabetes mellitus was found in 7% of the study group compared to 1% of the controls.

Cerebral hemorrhage or infarction developed in 2% of the study group. Neither occurred in the controls.

Six patients died of coronary or cerebrovascular disease in the study group during the brief period of follow up.

Body habitus or blood cholesterol levels were not significantly different in the two groups.

The group with LAD had a much stronger family history of cardiovascular disease than did the NAD group.

The authors conclude that the ECG finding of uncomplicated marked LAD should be suspect because of the above associations.

Reprinted with permission from the *Journal of Occupational Medicine*, July 1964.

* These abstracts have been prepared by the Medical Research Division of Esso Research and Engineering Company.

Permanent Threshold Shift in Hearing. R. Gallo and J. J. J. (June 1964).

With long-term exposure to noise, the most hearing level change occurred in the first 15 years, while at 5 years the change was linear with exposure time in both men and women. Changes from normal hearing were

Asbestos Exposure During Shipyard Work. *Hyg. Assn. J.* 25:264 (1964).

Exposures resulting in asbestosis in naval shipyard insulators have been reported since the cases took a mean of 15 years to develop at an allowable concentration of 0.1 fibers per cubic centimeter. There is no agreement on the need for asbestos. Shipboard pipefitters should wear respirators.

Diffuse Mesothelioma of the Pleura. W. G. Owen. *Br. J. Cancer* 18:100 (1964).

Seventeen cases of diffuse mesothelioma were sought of exposure to asbestos. The cases are discussed and described. Exposure to asbestos was examined, and asbestos in lung tissue examined. It is a major factor in the development of the disease.

The New Federal Clean Air Act. *Control Assn.* 57th Annual Meeting (1964).

The Clean Air Act (1964) provides assistance and leadership to Federal, State, regional and local governments in the development of air quality standards and in the implementation of air pollution control programs.

ABSTRACTS

Permanent Threshold Shift Changes Produced by Noise Exposure and Aging. R. Gallo and A. Glorig. *Am. Ind. Hyg. Assn. J.* 25:237 (May-June 1964).

With long-term exposures to industrial noise of 90 db octave band SPL, most hearing level changes at 3,000, 4,000, and 6,000 cps occur in the first 15 years, while at 500, 1,000, and 2,000 cps, hearing level change is linear with exposure time. Men have greater hearing level changes than women. Changes from noise and aging may not be differentiable.

Asbestos Exposure During Naval Vessel Overhaul. W. T. Marr. *Am. Ind. Hyg. Assn. J.* 25:264 (May-June 1964).

Exposures resulting in 6 cases of asbestosis among 80 employees of a naval shipyard insulation shop were not picked up in time by X-rays since the cases took a minimum of seven years to develop. The maximum allowable concentration for short duration massive exposures is unknown. There is no agreement on the relative importance of short and long fiber asbestos. Shipboard pipe covering and insulation is hazardous and employees should wear respirators when exposed.

Diffuse Mesothelioma and Exposure to Asbestos Dust in the Merseyside Area. W. G. Owen. *Brit. Med. J.* 2:214 (July 25, 1964).

Seventeen cases of diffuse mesothelioma were investigated and evidence was sought of exposure to asbestos dust. Clinical features of diffuse mesothelioma are discussed and the pathological findings in 12 cases are described. Exposure to asbestos was confirmed in 14 (82%) of the 17 cases examined, and asbestos bodies were found in 7 out of 10 specimens of lung tissue examined. The author concludes that exposure to asbestos is a major factor in the cause of diffuse mesothelioma.

The New Federal Clean Air Act. V. G. MacKenzie. Paper, Air Pollution Control Assn. 57th Ann. Meet., Houston, Texas (June 21-25, 1964) 6 p.

The Clean Air Act (Public Law 88-206) states that Federal financial assistance and leadership is essential for the development of cooperative Federal, State, regional, and local programs to prevent and control air