

DEPARTMENT OF COMMERCE
BUREAU OF MINES COOPERATIVE CLINIC
PICHER, OKLA.

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ANNUAL REPORT FOR THE FISCAL YEAR ENDING JUNE 30, 1931.

Personnel.

At the beginning of the fiscal year the personnel consisted of 1 surgeon in charge, 2 examining doctors and 1 doctor for treatment of venereal diseases, 1 laboratory technician, 1 X-ray technician and 1 assistant X-ray technician, 1 principal clerk, 2 clerks, and 1 janitor, a total of 11. The force was reduced during the year to 9 by the transfer of 1 doctor and 1 technician. Only one doctor was employed on examinations for the last six months. This reduction in personnel was brought about in order that a saving on the budget of the Tri-State Zinc and Lead Ore Producers Association might be made.

Finances.

Expenditures by the three parties to the cooperative agreement under which the work is financed are given below.

(a) Examining Clinic

Item	U.S.Bu.of Mines	Metropolitan Life Ins. Co.	Tri-State Z.& L.O.P.A.	Total
Salaries	\$7,398.23*	\$6,568.29	\$5,082.73	\$19,049.25
Travel	560.40	107.60	237.75	905.75
Supplies, Equipment, Etc.	1,378.05	790.39	2,614.11	4,782.55
Continuous Services	79.10	533.72	516.94	1,129.76
Books	50.00	0.0	0.0	50.00
TOTAL	9,465.78	8,000.00	8,451.53	25,917.31

(b) Venereal Disease

Section.				
Salaries	3,637.46	0.0	0.0	3,637.46
Supplies	0.0	0.0	473.73	473.73
TOTAL	3,637.46	0.0	473.73	4,111.19

Combined Totals \$13,103.24 \$8,000.00 \$8,925.26 \$30,028.50

*Includes \$2,847.60, salary of surgeon in charge paid by Public Health Service from October 1, 1930.

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A comparison of the cost of operation of the examining clinic for last year with that for this year shows a decrease of \$1,038.49, but the actual unit cost per individual examination is greater than last year due to the reduced number of men examined. In the venereal disease section, the cost this year was \$1,528.13 less than last year for approximately the same number of treatments on 237 fewer patients. The fact that a smaller number of patients took approximately the same number of treatments shows a better attendance and fewer desertions this year than last.

Work Accomplished.

During the year the punching of cards for histories obtained in the second annual series of examinations was completed. The cards were run through the Hollerith machine and tables were made. These tables were studied and considerable work was done on a report of the findings.

Physical examinations totalling 3,695 were made, as compared with a total of 7,843 last year. The record shows that 617 of these were original (first annual) examinations of men, and 191 of women, a total of 808; re-examinations (second, third, etc. annual) of men, 2,853, women 34, all told, 2,887. Of the 3,695 persons examined, 3,180 were working for the companies cooperating with the clinic, 225 were women or children, 169 were men in for diagnosis only, and 121 were examined for companies not cooperating.

A preliminary tabulation of 3,301 examinations, representing the number of men working after the 394 patients examined for diagnosis were excluded, shows chest diagnoses in the following percentages: Negative, 2.5 (last year, 6.7); more fibrosis than normal, 73.8 (last year 73.0); silicosis, 20.3 (last year, 16.0); silicosis and tuberculosis, 2.2 (last year 2.4); tuberculosis uncomplicated, 1.1 (last year, 1.3).

It should be noted that the incidence of silicosis in the district has increased during the year from 16 per cent to 20.3 per cent. While this shows an increased percentage, there was an actual decrease in number of silicotics. There were employed last year 1,195; this year 669. This shows a reduction of 527 in number of silicotics working in the mines in the Picher field.

The increase in the percentage of silicotics noted this year is probably due to the fact that men with first stage silicosis are not barred from the mines and during the reduction in number of men employed the old men with families who have in a large number of instances early silicosis have been retained.

A detailed report of the findings in this year's examinations is now being prepared and will be tabulated and given in a future report.

The percentage of each classification of the 394 men, women and children examined for diagnosis only is: Negative, 9.1; more fibrosis than normal, 69.0; silicosis, 6.9; silicosis and tuberculosis, 4.1; tuberculosis only, 4.3; miscellaneous or undiagnosed, 6.6. The figures indicate that in this group, largely made up of people outside

the mining industry. except for a few old miners not working. the percentage of negative chests as compared with the figures for the total given above was higher, the percentage of mere fibrosis than normal lower, the percentage of silicosis about three times lower, the percentage of silicosis and tuberculosis three times as high, and that of tuberculosis three times as high.

The incidence of some of the most common defects that cause low grading of men in percentage is as follows: defective vision, 3.7 (last year 4.7); deafness 1.4 (last year 1.4); positive Kahn and Kline, 6.7 (last year 6.7); hernia, 1.3 (last year 1.7); active gonorrhea, 0.9 (last year 2.6); active syphilis, 0.05 (last year 0.2).

During the year the laboratory work included 4,527 blood tests, 524 smears for gonorrhea, 32 darkfields, 3,424 urine tests, and approximately 200 blood counts and sputums, which were done on all suspected and known cases of tuberculosis. In addition, animal experimentation tests were conducted in connection with research work on what is believed to be syphilis of the lungs.

Venereal Disease Section.

A summary of the work done in the venereal disease section

follows:

	Male	Female	Total	Last year
Average number under treatment	200	113	313	
Number of new cases	381	193	574	810
Number discharged, arrested or cured	136	72	208	
Number quit without permission	508	289	797	
Number of salvarsan treatments	2808	1188	3996	4,142
Number of mercury treatments	4319	2059	6378	6,752
Number of gonorrhea treatments	2418	1904	4322	2505
Positive Wassermanns, male & female				630
Positive G.C.				265
Readmissions during the year	237	95	332	

Respectfully submitted,

-4- *F. V. Meriwether*
F. V. Meriwether, Surgeon in Charge.

Feb. 6, 1936

It is recommended that the Bureau should, in cooperation with the Distributors of Ethyl Gasoline, for contingencies of the investigation as to possible effects from the use of ethyl gasoline maintain a list of the subjects of 1935 (1:1228-1230, S. P. I. or in later years).

1. With the advice and approval of the Surgeon General, the distribution of ethyl gasoline shall select and provide for the construction or having repaired, of a suitable number of garage vehicles, automobile repair men, service and filling stations, and men delivering ethyl gasoline, together with controls, to determine whether ill effects are likely to occur from the extra extensive use of ethyl gasoline over a prolonged period.

2. These subjects shall comprise at least 125 such vehicles in various parts of the country, ^{as frequently as possible} with at least 25 similar vehicles not exposed to ethyl gasoline, and at least 25 other vehicles exposed to a lead content not exceeding that from which.

3. So far as practicable the three groups should be similar in age distribution, and location, and social status. A considerable proportion should consist of young married men.

4. Besides the initial examination, examination of each subject shall take place each summer and each winter.

5. As a minimum, this examination shall consist of:
- (a) Examination for stippling, by carefully trained workers, without knowledge of the source of the slices.
 - (b) Examination of a fecal sample for lead.
 - (c) Examination of a 24-hour urinary specimen, divided into day and night portions, for volume, specific gravity, color, turbidity, reaction, albumin (after filtration or clearing) by heat and acetic acid, and for lead content.
 - (d) Report as to general state of health.
 - (e) Vision in each eye, uncorrected and corrected.
 - (f) Field of vision in each eye.
 - (g) Weight, stripped.
 - (h) Blood pressure estimation while rested, systolic and diastolic.
 - (i) Hemoglobin estimation by Duro's instrument.

6. Exact records of these examinations, with locations, dates, and names of examiners, shall be kept and transmitted promptly to the Surgeon General.

7. The procedure and techniques used shall be subject to the advice of the Public Health Service.

~~8. In the event of injury to any person from the results of the examination, the person or persons responsible shall be held liable for the same.~~

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1. The following information shall be obtained by means of the following tests:
- (a) Report on the general state of health.
 - (b) Vision by each eye, uncorrected and corrected.
 - (c) Field of vision in each eye.
 - (d) Weight, stipped.
 - (e) Blood pressure estimation with Javal's sphygmomanometer and sphygmograph.
 - (f) Hemoglobin estimation by Hart's instrument.

6. Best records of these examinations, with location, date, and names of examiners, shall be kept and transmitted quarterly to the Surgeon General.
7. The personnel and technique used shall be subject to the review of the Public Health Service.