

The relationship between pulmonary function signs of restriction and abnormal x-rays was investigated. No significant association was found (Table X).

Chest x-ray: The chest x-rays were read twice by consensus reading, using at least three experienced readers, and categorized according to the ILO/U/C classification. An x-ray was read as abnormal if fine or moderately thin, irregular linear opacities were present (s or t $\geq$ 1/0) and/or pleural thickening was present (a-1 or more). The prevalence of abnormal readings is given in Table XI. Parenchymal abnormalities were present in 19 instances, nine 1/0, six 1/1, two 1/2 and two 2/2. X-ray findings consistent with asbestosis increased with time; such a trend is evident in Table XII. This trend is statistically significant.

TABLE X
Relationship between X-Ray Reading and Pulmonary Function Tests in 87 Vehicular Maintenance Workers

Pulmonary function	Number of Subjects	X-ray reading		Percent
Restriction	25	Abnormal*	5	20%
		Normal	20	80%
Obstruction	43	Abnormal*	15	35%
		Normal	28	65%
Normal	30	Abnormal*	8	27%
		Normal	22	73%

* parenchymal fibrosis and/or pleural thickening

For overall pattern $X^2 = 1.78$.50 > p > .30

For restriction alone $X^2 = 1.21$.30 > p > .20

For obstruction alone $X^2 = 1.50$.30 > p > .20

For obstruction and restriction compared to normal: $X^2 = .08$.80 > p > .70

TABLE XI
X-Ray Changes in 90 Vehicular Maintenance Workers with over 10 Years' Experience

	Number	Percent
Parenchymal fibrosis	18	20%
Pleural thickening or calcification	5	6%
Both parenchymal and pleural changes	1	1%
Any changes	24	27%

TABLE XII
X-Ray of Vehicular Maintenance Workers by Year of Onset of Work

Abnormal*					
1956-65		1946-55		Before 1946	
Yes	No	Yes	No	Yes	No
3 (18%)	14	10 (23%)	33	14 (47%)	16

* Parenchymal fibrosis (ILO/UC s, t $\geq$ 1/0) and/or pleural thickening

X^2 for before 1956 compared with 1956 and after: $X^2 = 5.95$.02 > p > .01