OCCUPATIONAL AND NONOCCUPATIONAL EXPOSURES TO ASBESTOS

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Numerous reports by many investigators from various countries establish the fact that an occupational or nonoccupational inhalation of dust of different chemical and physical types of asbestos results in the development of asbestosis of the lungs which, depending upon the type of exposure, may be designated as an occupational, neighborhood or household pneumoconiosis. Since 1935 an increasing amount of epidemiologic, clinical and pathologic evidence, moreover, incriminates this health hazard as one of the environmental sources of cancers of the lung (TABLE 1), and more recently also of mesotheliomas of the pleura and peritoneum, although some commercially interested parties and their medical guardians and protectors still prefer for their own reasons and motives, to deny the existence of these dangerous and usually fatal sequelae of a respiratory contact with asbestos dust. The obvious fallacy of such allegations is well demonstrated by the remarkable and progressive rise in the number of cases of asbestosis and of cancers of the lung, pleura, and peritoneum reported from various countries during the past two decades. It is shown also by the increase of publications noting the first observations on the occurrence of asbestosis and asbestos cancers from several countries during the past decade (Denmark, Sweden, Belgium, Finland, Japan).[1-6] Both occupational diseases are definitely not as rare and in fact, have become less so in recent times, as has been claimed by several industrial parties.[7]

There was, for instance, an estimated total of about 700 cases of asbestosis in Germany in 1946 among a total of approximately 8,000 employees of the asbestos industry.[8-11] Wegelius[2] found 125 cases of asbestosis of the lung in a roentgenologic examination of 476 asbestos workers of one company in Finland. Of 132 asbestos workers examined by Böhme,[12-13] 29 per cent showed radiologic evidence of asbestosis. The morbidity rate of asbestosis in members of this worker group rose, moreover, with the duration of employment, being five per cent in workers exposed to asbestos for less than three years; 56 per cent for those employed for five to ten years, and 79 per cent for those with over 10 years' exposure. A similar morbidity rate of 80 per cent among English asbestos workers with over 20 years of employment, was reported by Merewether and Price[14] in 1930. Nöro[4] noted an asbestosis attack rate of 65 per cent in 167 asbestos workers studied roentgenologically. It is remarkable that no large-scale observations on the incidence, morbidity and mortality rates of asbestosis and asbestos cancers have been published from the giant American asbestos industry.