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OCCUPATIONAL HEALTH

Abstracts of current literature on Occupational Hygiene, Medicine, and Nursing

By J. T. SIEDLECKI
Industrial Hygienist, NSC

Roentgen Study Of Silicosis

"Roentgen Study of Silicosis in Ceramic Workers Who Have Received McIntyre Aluminum Powder." By J. W. G. Hannon, M.D., P. G. Bovard, M.D., and L. R. Osmond, M.D. *Industrial Medicine and Surgery*. Vol. 29, No. 6. June 1960. Pp. 286-289.

THERE HAS been considerable discussion among various investigators whether aluminum therapy is of any value in the prevention of silicosis in workmen exposed to high concentrations of silica dust and whether aluminum therapy does prevent the usual progression of established silicosis.

The authors in this paper report a study of a program started in 1944 in a plant that manufactured ceramic sanitary bathroom fixtures and where the average dust exposures were seven million particles per cubic foot with a quartz content of 25 to 30 per cent. At the beginning of this study many of the 132 workers involved had long exposure to silica and showed radiological evidence of silicosis. Aluminum therapy treatments consisted of six-minute inhalations once a week.

The authors point out that plant management had put in engineering control measures to minimize the hazard of airborne silica dust, but in spite of these controls, new silicotics were being developed each year. For this reason plant management decided to inaugurate a program of aluminum therapy and prophylaxis. The authors conclude:

"1. The inhalation of McIntyre Aluminum Powder can help protect workers from silicosis for 15-plus years.

"2. The use of McIntyre Aluminum Powder will prevent or decrease the rate of severity of the usual progression of ceramic silicosis.

"3. There was no evidence that the inhalation of McIntyre Aluminum Powder was harmful in any manner to workmen who took this type of additive prophylaxis in the prevention of silicosis."

Asbestosis, Carcinoma Of the Lung

"Asbestosis and Carcinoma of the Lung." By J. Anderson, M.D., and F. A. Campagna, M.D. *Archives of Environmental Health*. Vol. I, No. 1. July 1960. Pp. 27-32.

THE AUTHORS report on a case of asbestosis associated with carcinoma of the lung. The literature is also reviewed, and it is indicated that this is the 24th reported case with complete autopsy findings.

Many investigators previously have felt that asbestosis predisposes to lung carcinoma. Hueper of the National Cancer Institute reported that 127 cases of asbestosis carcinoma of the lung are on record. The authors in this paper have indicated that, in their case, the patient had been a heavy smoker until five years before his final illness.

They also indicate that two other investigators commented on smoking and their patients had been heavy smokers. They suggest that any further cases of asbestosis with or without tumors be reported with careful attention to other factors, such as smoking. It is only when all the facts are available that an evaluation can be made of the relationship between asbestosis and lung carcinoma.

Providing Suitable In-Plant Environment

"A Practical Method of Providing a Suitable In-Plant Environment." By K. E. Robinson. *Industrial Medicine and Surgery*. Vol. 29, No. 6. June [illegible]. Pp. 233-237.

THE AUTHOR indicates one must have a basic understanding of how a worker reacts to his environment before different methods of heating and ventilating can be evaluated to obtain a satisfactory environment in a plant.

He discusses the A.S.H.V.E. Comfort Chart for still air and effective temperature chart. Unfortunately, these charts are not too well illustrated in this journal. However, they can be found in the *Manual on Ventilation* published by the American Conference of Governmental Industrial Hygienists. With these charts, one can determine whether or not plant conditions are within a temperature zone considered comfortable.

The author also describes why many heating systems fail to provide satisfactory environmental conditions in industrial plants. The author discusses with illustrations how to control the environmental conditions in a plant having operations such as heat-treating operations involving considerable quantities of radiant energy.

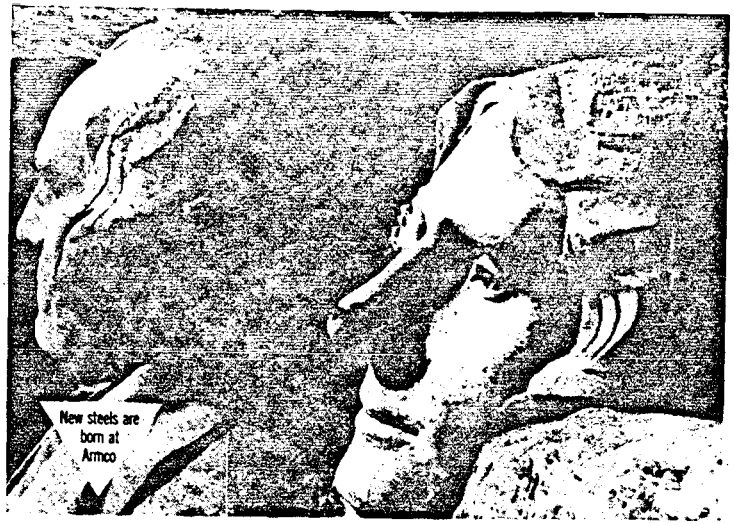
He stresses that satisfactory installations must be based on the reaction of the individual to his environment rather than supplying the heat loss based on a calculated B.T.U. loss from the building.

Arsenic: Chronic Human Intoxication

"Arsenic: Chronic Human Intoxication." B. D. Dinman, M.D., D.Sc., *Journal of Occupational Medicine*. Volume 2. Pp 137-141. March 1960.

THE AUTHOR reviews manifestations of chronic arsenic intoxication in humans, giving the diagnosis, therapy, and prognosis. He indicates that occupational exposure to arsenic and its compounds has rarely produced acute and systemic intoxication among exposed workers. Acute cases of arsenic intoxication

—*To page 131*



At Mount Rushmore National Memorial in South Dakota small fissures in the sculptured faces of Washington, Jefferson, Lincoln and Roosevelt are being sealed with granite dust and white lead. Though the granite sculpture is estimated to last for thousands of years, this preventive maintenance will keep the surfaces smooth and slow the natural erosion process. The insert shows how workmen are suspended on Union Wire Rope.

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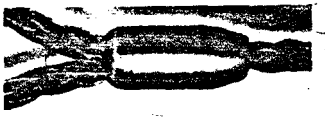

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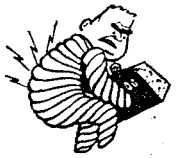

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