

Tuberculosis League of Pittsburgh
2851 Bedford Avenue
Pittsburgh, Pennsylvania

Saranac Symposium, 6th, RC773
Saranac Lake, N. Y., 1947 S243
1947

FALK LIBRARY OF THE HEALTH PROFESSIONS
UNIVERSITY OF PITTSBURGH
PITTSBURGH, PENNSYLVANIA 15213

plant in southwest Mississippi, we learned that this was the one state in the Union which had no workmen's compensation law. Of course we went ahead with our plans but we are hoping that early corrective measures will be taken by the state legislature. Mississippi, by the way, has been making rapid progress industrially during the past few years under the guidance of an able and enlightened group of citizens and we feel confident that they soon will be able to remedy the existing situation. It remains our firm conviction that the worst Workmen's Compensation Commission is preferable to the best jury when the issue of compensation for an industrial injury is drawn between a laborer and his corporate employer.

As Mr. Fletcher pointed out, compensation for pulmonary diseases of occupational character presents great difficulties, first, in ascertaining whether the disease derives from employment and, second, in ascertaining the degree of disability. These factors have induced some employers to oppose compensation for pulmonary occupational diseases and have provided sound basis for the argument that, when they are compensated, the law should provide for a well-qualified medical board to determine the existence of the disease and the degree of disability.

While recognizing an obligation for those afflictions which stem from employment, management is firmly opposed to shouldering the burden on behalf of its employees of "all the ills that flesh is heir to." This opposition extends also to tuberculosis as an occupational disease and to general health insurance.

As has been said, management generally favors compensation for *true* occupational diseases, whether pulmonary or other, although it is realized that those of pulmonary character present many special and difficult problems. These problems relate not only to the causal connection between the disease and employment and to the degree of disability that results, but also to the determination of permissible concentrations of dust, fumes, gases, and vapors in those cases where these are responsible for the diseases. What is the so-called "threshold limit," on one side of which the concentration can be considered harmless and on the other side dangerous? We realize this is a difficult question to answer but it is one which industry has a right to demand be answered with accuracy and fairness if industry is to be held responsible for eliminating unsafe conditions and for compensating for those diseases that result from operations under unsafe conditions.

Management is not equipped to answer this question but must rely upon the experts in the medical, scientific, and engineering professions. State industrial codes are being promulgated right and left which dogmatically—and, I hope, accurately—fix certain mandatory requirements for industries whose processes use, or create, harmful vapors, dusts, etc. A tentative draft of one for the state of New Jersey has recently come into my hands, through the courtesy of Mr. George Kruger, Deputy Commissioner of Labor. Maximum limits are prescribed for a great variety of materials with which I have no familiarity, but it is my earnest hope that these limits have been arrived at on the basis of a better factual and scientific background than exists in the case of asbestos. The allowable limit for industries using this material is a “mandatory” requirement of not more than five million particles per cubic foot, *10 microns or less in longest dimension*.

So far as I have ever been able to ascertain, no one can state with certainty what is the maximum allowable limit for asbestos dust. I am certain no study has been made specifically directed toward ascertaining this figure and I question whether there exists sufficient data correlating the disease to the degree of exposure to warrant any determination that will even approximate accuracy. It is my guess that the figure was allocated to asbestos either because it had already been prescribed for silicosis or because someone believed, like the poet, that “not failure but low aim is crime.” My own efforts to obtain any satisfactory answer from the experts have been greeted with what is sometimes known as a “lawyer-like” comment—that is, an answer that says “Yes and No—or Maybe.”

Johns-Manville Corporation and other members of the relatively small asbestos industry have solicited the assistance of experts and have received their wholehearted cooperation, but even the best they could give us has not been enough. Experimental work by Dr. Gardner here at Saranac demonstrated fairly conclusively that the finer particles would not produce a fibrosis either when inhaled by, or injected into, experimental animals. Unlike the situation that exists in silicosis, where the finer particles are the worst offenders, it appears that the large fiberlike particles of asbestos (20 to 50 microns in length and 1 to 3 in thickness) do the damage. Unfortunately, Dr. Gardner was unable to make a report on his experiments. It is our hope that one will be forthcoming before the end of this year based upon his preliminary findings, notes, and conclusions. Meantime, the drafters of industrial codes will presumably con-

time to provide us with standards which have no roots in experience but which take their sustenance, like orchids, from the air and, in the case of asbestos, will relate their standards to the innocuous sizes of dust and leave unmentioned those of the character that presumably can have some ill effects.

I mentioned before that most representatives of management are still opposed—and firmly opposed—to general health insurance. “Cradle-to-grave” and other paternalistic programs we believe weaken two of the principal supports of our capitalist system, namely, individual incentive—the assurance that for a greater expenditure of effort one will receive a greater reward; and habits of thrift—whereby a person eating beans today may put aside the wherewithal to dine upon sirloins tomorrow or at worst still be able to procure beans for the pot without recourse to charity—either private or governmental. Furthermore, by “saving for a rainy day” (on which one will in all likelihood contract pneumonia) the thrifty soul is also able to afford doses of whatever new wonder drug may be in vogue at the time.

Our strength lies in our productivity. Incentive is the spark-plug of production. If we wrap the individual in the cotton-wool of complete security, he will lack incentive and produce nothing. The issue involved in health insurance represents in miniature the world-wide ideological conflict of the present day. The opponents of our system have distilled the essence of their philosophy into an alluring epigram: “From each according to his ability; to each according to his need.” At first glance this may seem like the finest flowering of the Christian ethic but this is an illusion. The Christian ideal also includes such ancient wisdom as “God helps them that help themselves” and my own Presbyterian dogma includes the doctrine of “original sin.” The Marxian dogma, on the other hand, overlooks the Adam that is in all of us. Production was unnecessary in the Garden of Eden and Adam produced nothing. Most men in a similar situation today would produce nothing. There will be lacking the urgent necessity—the incentive. The more talented, industrious, and productive under a perfect socialist state will produce far less than their superior abilities would permit because of their knowledge that they will not enjoy the fruits of their labors. The less energetic or intelligent will produce as little as they can get by with because they have been assured that the state will provide for their needs. In this economic

Cooley, Mr. A. C., Atomic Power Laboratory, Schenectady, N. Y.
Cox, Mr. J. L., Duro Test Corporation, North Bergen, N. J.
→ Cranch, Dr. A. G., Union Carbide & Carbon Corporation, New York, N. Y.
Cucci, Mrs. M. R., University of Rochester, Rochester, N. Y.

Dahlberg, Mr. S., Fidelity and Casualty Co. of New York, New York, N. Y.
Delahant, Mr. A. B., Saranac Laboratory, Saranac Lake, N. Y.
DeNardi, Dr. J. M., Brush Beryllium Company, Lorain, Ohio
Dill, Dr. D. B., Medical Division, Army Chemical Center, Md.
Donlon, Miss Mary, Workmen's Compensation Board, New York, N. Y.
Downs, Mr. R. N., Saranac Laboratory, Saranac Lake, N. Y.
Downs, Mr. W. L., University of Rochester, Rochester, N. Y.
Dunham, Mr. R. E., Sunray Electric Company, Warren, Pa.
Dunn, Mr. K. L., Corning Glass Works, Corning, N. Y.
Durkan, Mr. T. M., Saranac Laboratory, Saranac Lake, N. Y.
Dutra, Dr. Frank, University of Cincinnati, Cincinnati, Ohio
Dworski, Mr. Morris, Saranac Laboratory, Saranac Lake, N. Y.

Eddy, Dr. G. P., Carborundum Company, Niagara Falls, N. Y.
Egan, Mr. E. F., Utah Self-Insurers' Association, Salt Lake City, Utah
Eisenbud, Mr. Merrill, United States Atomic Energy Commission, New York, N. Y.
Elkins, Dr. H. B., Massachusetts Department of Labor and Industries, Division of Occupational Hygiene, Boston, Mass.

Fehnel, Mr. J. W., Metropolitan Life Insurance Company, New York, N. Y.
Finlay, Dr. C. R., Norton Company, Chippawa, Ont., Canada
Fletcher, Mr. Andrew, St. Joseph Lead Company, New York, N. Y.
Ford, Mr. C. B., New York State Department of Labor, New York, N. Y.
Freynik, Mr. H. S., Riverside Metal Company, Riverside, N. J.

Gafafer, Dr. W. M., United States Public Health Service, Bethesda, Md.
Giaccio, Mr. F. J., United States Atomic Energy Commission, New York, N. Y.
Gleason, Mr. R. P., Sylvania Electric Products, New York, N. Y.
Gorman, Mr. T. G., New York State Insurance Fund, New York, N. Y.
Gray, Dr. A. S., Connecticut Department of Health, Hartford, Conn.
Greenburg, Dr. Leonard, New York State Department of Labor, New York, N. Y.
Greenbush, Mr. Abraham, Workmen's Compensation Board, New York, N. Y.
Grier, Dr. R. S., Massachusetts General Hospital, Boston, Mass.

Haines, Mr. E. B., Atomic Power Laboratory, Schenectady, N. Y.
Hamblen, Mr. R. G., Machlett Laboratories, Springdale, Conn.
Hamlin, Dr. L. E., American Brake Shoe Company, Chicago, Ill.
Hardy, Dr. H. L., Division of Occupational Hygiene, Massachusetts Department of Labor and Industries, Boston, Mass.
Harrington, Dr. R. H., General Electric Company, Schenectady, N. Y.