Table 5

DEATHS AT AGES 15-64 IN A COHORT OF 1,042 WHITE MALES WORKING IN ASBESTOS TEXTILE PLANTS IN 1938-41 AND ALIVE JAN. 1, 1948 BY EMPLOYMENT STATUS

Period of Death	Total Deaths	Still employed in Asbestos Textile Plants Jan. 1, 1948			Not employed in Asbestos Textile Plants Jan. 1, 1948		
		Total Deaths	Lung Cancer	Asbestosis	Total Deaths	Lung Cancer	Asbestosis
1948-52	43	2	0	0	41	0	1
1953-57	37	4	0	3	33	3	1
1958-63	59	11	2	4	48	7	1
Total	139	17	2	7	122	10	3

DISCUSSION

Data presented here are consistent with those reported by Newhouse who showed little difference in lung cancer deaths between men with short, as compared with long, periods of asbestos dust exposure.[4] One reservation that needs to be made in interpreting data presented here is whether those persons who died of asbestosis would not have ultimately developed lung cancer, particularly in view of the apparently differing latent periods for these two diseases. The men who developed asbestosis among the group who remained in the industry may have, in fact, been saved from lung cancer by their long exposure and total dose.

Previous studies of the health effects of asbestos dust have no doubt been over simplified. Specific human responses must depend upon an interaction among the intensity of exposure, the duration of exposure and the time since significant exposure first occurred. Effective control standards cannot be developed until these relationships are better understood.

SUMMARY

1. A previous report on the relationship between asbestos dust and the development of two diseases, lung cancer and asbestosis, showed that the dose-response relationship differed for these two diseases. Small doses of asbestos dust appeared to produce about as much lung cancer as asbestosis while large doses appeared to produce more asbestosis than lung cancer.