asbestos, when classified according to the effect of a dust on tuberculous infection, would be placed below an active dust like quartz but above an inert dust, such as iron oxide. In animals infected with attenuated tubercle bacilli, quartz causes the infectious process to progress until the animal dies of tuberculosis. Inert dusts have no effect on the infection and the lesions usually heal and the disease disappears. Asbestos dust is in a different category. In the experimental investigation, when the fibrous dust was being inhaled during the evolution of the infection, there was a spreading of the tuberculous process for a time but usually the stimulus for continued proliferation of the tubercle bacilli was not sustained, the progression was arrested and healing followed. In guinea pigs infected with attenuated tubercle bacilli after completion of slightly more than two years of exposure to asbestos dust, progressive disease did not develop. The only modification of the infection was one of localization, a few bacilli being retained in the fibrous terminal bronchioles and forming tubercles there in addition to the usual foci beneath the pleura. Such tubercles healed in a few months.

Susceptibility to Non-tuberculous Infection. There was no specific experiment concerning the effect of inhaled asbestos dust on non-tuberculous infection. Intercurrent pneumonia among animals exposed to asbestos dust was rather common, the frequency in guinea pigs exposed in the four inhalation experiments ranging from 16 to 39 per cent. This incidental evidence suggests the possibility of an effect of asbestos dust on non-tuberculous infection. Nevertheless, since such epidemics are not uncommon

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