through the Province, and are lower than those for the remainder of the Province, and much lower than the rate for Montreal.

Since 1940, there have been 19 cases in which the diagnosis of primary cancer of the lung may be considered to have been proved. Approximately half of these cases were associated with asbestosis. All but one died in the recognized "cancer age" and at least one-third had only the lightest exposure (category I) to asbestos dust.

Conclusions

On the basis of a careful and detailed study of what are believed to be complete and reliable data, it seems fair to conclude that the asbestos miners at Thetford Mines and Asbestos in the Province of Quebec do not have a significantly higher death rate from lung cancer than do comparable segments of the general population. Despite this, the results suggest that a miner who develops the disease asbestosis does have a greater likelihood of developing cancer of the lung than a person without this disease. We suspect, however, that underreporting of asbestosis cases had led to a fallacious finding in this connection.

The death rate from lung cancer in the areas continguous to the asbestos operations is comparable to that in areas widely scattered throughout the Province of Quebec and is lower than in some urbanized areas within the Province.