

108

KALGOORLIE.

10th December, 1962.

JMcN:RM

Dr. H.M. Rennie,
F.R.C.P.(Lond.) F.R.A.C.P.,
Macquarie Chambers,
183 Macquarie Street,
SYDNEY : N.S.W.

Dear Dr. Rennie,

Thank you for your letter regarding dust conditions at Australian Blue Asbestos.

Unfortunately the situation has altered little, the dust has not been laid and, to date, it is doubtful if any major lessening of the hazard has taken place. In July of this year dust counts at the mine and mill were as bad as ever. The Konimeter is still being used for dust counting and although it is not the ideal instrument, there is little point in pressing for a finer instrument until the coarse dust has been suppressed.

However, since July several events have occurred which may radically alter conditions. Through ventilation underground is possible now that shafts have broken through to the surface in several places. A recent earth movement altered the geography of the mine and this is expected to considerably improve ventilation. A new type of dust extractor embodying a synthetic fibre sock has had successful experiments and is being installed in the mill. This is a pretty expensive dust extraction process and there are great hopes that it will help to solve the problem. My information in regard to this is derived from discussions with Dr. Letham, Mines Department Inspectors and Mr. Thomas, Superintendent of the company.

Fairly short exposure is still causing silicosis and asbestosis and the tragedy is aggravated by their relative youth. There are now about 42 men fairly seriously affected, or dead, and in most instances their only exposure to harmful dust was at Wittenoom. The industry has been producing for about 15 years and only the huge labour turnover prevented disease on an epidemic scale. 80 p.c. of the workers, at any one time, have been employed for less than three years. Many of them have scattered elsewhere in the mining industry and now complicate the overall picture.

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The plans and improvement mentioned earlier make me hopeful that steady improvement will be maintained. The coincidental diagnosis of disease in so many men in 1958-59 highlighted the problem and had a dramatic effect. The problem is still acute and much more work will be needed before the hazard to the men will be reduced to at least that of gold-mining.

I am still a little concerned about the carcinogenic effect of crocidolite and wish that the Company wouldn't use its tailings for roads and paths. Tailings were used as fillers at the golf course so that the poor devils inhale asbestos at recreation as well.

Many thanks for your interest. Anything that you can do to impress upon Australian Blue Asbestos the seriousness of the problem would be appreciated.

Yours faithfully,

J. McNulty
CHEST PHYSICIAN

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