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P. H. Scheuerle - Berlin

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STATUS OF EMPLOYEE TESTS

R. E. Grimes - Berlin

H. C. Schwartz, M.D. - Berlin

This memorandum is in reply to yours of August 22, 1969, on same subject.

I have reviewed the medical reports on Fred DiStaphano, Floyd Regn and Harry Copeland. The reports of DiStaphano and Regn were noted to have abnormal chest findings which could be explained on the basis of naturally occurring disease. It would be good industrial health practice to place both of these men in jobs where airborne contaminants are minimal.

I have reviewed Harry Copeland's file as well as the x-ray reports that go back to the 1950's. I think that there is little doubt that this individual has pleural scarring as well as a diffuse interstitial pulmonary disease which manifests itself both as airway obstructive disease, as well as a mild diffusion effect. I will be most interested to learn of Dr. Higgins' interpretation of the x-rays for the following reasons:

1. In-plant exposure to fibrous asbestos has never been more than borderline;
2. There has been no other cases of asbestosis reported (aside from one very atypical exposure);
3. His pulmonary changes on x-ray began in the '50's and strongly suggested an infective etiology.
4. This man was a heavy cigarette smoker which certainly could have contributed to his present pulmonary condition.

I am looking forward to reviewing this case and will be happy to assist you in the proper placement of this individual. I would hope that we would have an opportunity to review the case not only with Dr. Schwartz, yourself and Dick Grimes, but also with Dr. Paisley.

If you have any questions or comments, please let me know.

Jon L. Kozem, M.D.

*X-ray changes
while w/ I
in '50's*

JLK/dsl