

CAMBRIDGE

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VW
WH

TO: E.S.Wood / CPD

DATE: 15 January 79

FROM: H.Borgstedt

SUBJECT: Pleural Effusions

CC H.A.Eschenbach

This is in further response to your inquiry about the occurrence of pleural effusions among the workers in your division.

I have received a medical record from Dr. Herron in Kailispell which indicates that one employee was found to have bloody pleural effusion on the right side.

The initial complaint had been chest pain, the diagnosis made by X-rays and open chest biopsy. Tuberculosis, tumors and fungal infections were ruled out as possible causes by appropriate laboratory tests, as were lung emboli.

Asbestos was considered as a causative agent but more or less set aside because of the brevity of this patient's exposure to it.

The biopsy was performed in early 1974. As evidenced by repeated chest X-rays, the complaints resolved gradually after that date.

The operative report and the discharge summary leave the cause (etiology) unknown.

There is one statement regarding asbestos which I will quote verbatim: "I am not particularly concerned about the possibility of asbestosis, although the family history of cancer of the lung (his mother dying at a young age) must be considered." (sic). I do not


Harold H. Borgstedt, M.D.
HBB:jh

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