

FILE NAME: Industrial Hygiene Foundation (IHF)

DATE: 1942-1944

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DOCUMENT DESCRIPTION: Reference Cards

MELLON INSTITUTE, PITTSBURGH, PA.

Also #78-1/44/

752

FELLOWSHIP
NUMBER

FILE NUMBER

752

AUTHOR: A. Eorno

TITLE: Examination of workers in an asbestos factory.

ORIG. REFS.	VOL.	PP.	DATE	ABSTR. REFS.	VOL.	PP.	DATE
Arch. f. Gewerbepath.	11	433-452	Nov. 10,				
U. Gewerbepath.			1942				

ABSTRACT:

This is a record of clinical and radiological observations made in an asbestos factory during the years 1936-1937 and the year 1940. The factory handled

raw asbestos and manufactured a variety of asbestos products. It employed up to 500 workers. Of 132 persons examined, 29 per cent showed radiological evidence of asbestosis. Correlating these findings with exposure, it is stated that there were in workers with less than three years of exposure 5 per cent of cases, in those with 3-5 years of exposure 12 per cent, in 5-10 years 36 per cent, and in over 10 years 79 per cent. Five cases of pulmonary tuberculosis were noted. The clinical histories of these are recorded.

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CLASSIFIED SUBJECT

#436-3/45

FELLOWSHIP
NUMBER

NFC

FILE NUMBER

752

AUTHOR: M. Giroux

TITLE: Experimental Asbestosis: Pathognomonic Value of Asbestos Bodies

ORIG. REF.S.

VOL.

PP.

DATE

ABSTR. REF.S.

VOL.

PP.

DATE

Laval Med.

8

259-50

1945

C.A.

39

366

Jan. 29,
1945

ABSTRACT:

Experiments with animals indicate that asbestos bodies form only after intense tissue reaction and with an appreciable deposit of iron furnished by hemoglobin. The presence of asbestos bodies in the sputum or in fluid obtained by pulmonary puncture indicates pulmonary asbestosis but not the degree of pulmonary sclerosis since the degree of fibrosis may vary. — C.A.

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C.A.:GME

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McLELLON INSTITUTE, PITTSBURGH, PA.

292. J/44	752	FELLOWSHIP NUMBER	FILE NUMBER 752
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AUTHOR: M. Giroux
 TITLE: Asbestosis Bodies

ORIG. REFS.	VOL.	PP.	DATE	ABSTR. REFS.	VOL.	PP.	DATE
Leval Med. (French)	8	239	Mar. 1943				

ABSTRACT:

The "curious bodies" found in the sputum of patients suffering from pulmonary asbestosis usually measure 24 to 50 μ by 12 to 24 μ but can be as large as 250 μ . They consist of a central fiber of asbestos which is covered by a golden-yellow substance containing iron. Rabbits, guinea pigs and one dog were exposed to inhalation of asbestos dust. Asbestosis did not develop in the rabbits nor in the dog. The guinea pigs showed, after several weeks, macrophages with asbestos fibers in their alveoli. Erythrocytes appeared in the alveoli, and hemoglobin derivatives containing iron could be found on asbestos fibers two to three months after the beginning of the inhalation of the asbestos dust. When a suspension of asbestos in olive oil was injected subcutaneously or into the testicles of guinea pigs no asbestos bodies were formed. However, if first one cc. of blood was injected and then the asbestos dust through the same needle, asbestos bodies could be found one month later. The presence of asbestos bodies in the sputum is believed to be a definite sign of pulmonary asbestosis.—Am. Rev. Tuberc.

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MELLON INSTITUTE, PITTSBURGH, PA.

CLASSIFIED SUBJECT <u>69-1/45</u>		471		FELLOWSHIP NUMBER MFC		FILE NUMBER 752	
AUTHOR: <u>H.W. Wedler</u>							
TITLE: <u>Asbestosis and pulmonary carcinoma.</u>							
ORIG. REFS.	VOL.	PP.	DATE	ABSTR. REFS.	VOL.	PP.	
Deut. med. Wochschr. (German)	69	575-576	Aug. 6, 1943	JIRAT	26	183	Nov
ABSTRACT:							
<u>Asbestosis and Pulmonary Carcinoma.</u> H.W. Wedler. Deut. med. Wochschr., <u>69</u>, 576 (Aug. 6, 1943) German. The author has collected the published autopsy records on asbestosis from various countries and finds that there have been 14 instances of malignant disease of lungs and pleura in 92 post-mortem examinations (16 percent). This is in excess of the proportion of lung carcinoma in autopsies generally (2-6 percent). Carcinoma as a complication of asbestosis occurred most frequently in males between 35 and 41 and was generally in the part of the lung most affected with asbestosis. Development of the lesion was slow but corresponded with the length and intensity of the exposure (12-42 years). There was often a long interval between the cessation of exposure and the development of the cancer, which, in the author's view must now be regarded as an occupational cancer. -- Bull. Hyg.							
FFR: Bull Hyg.							
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CLASSIFIED SUBJECT

FELLOWSHIP
NUMBER

FILE NUMBER

291-7/44-752

752

AUTHOR:

F. Homburger

TITLE: Coincidence of Primary Carcinoma of the Lungs and Pulmonary Asbestosis

ORIG. REFS.:

VOL.

PP.

DATE

ABSTR. REFS.:

VOL.

PP.

DATE

Am. J. Path.

19

797-807

Sept.

1943

ABSTRACT:

In the medical literature there are now at least 19 known cases of asbestosis associated with primary pulmonary carcinoma. In 4137 autopsies at the pathology laboratory at Yale University School of Medicine, there were 45 cases of pulmonary carcinoma in the years from 1918 to 1938. Asbestosis was diagnosed 8 times, silicosis 17 times. Pulmonary carcinoma was found in 4 of the 8 cases of asbestosis and twice in the 17 silicotic cases.

Despite the high correlation of the foreign body asbestosis in the lungs with primary pulmonary carcinoma, this is a small series of cases and the value of these data is limited. Three cases are given in detail. The diagnosis of pulmonary asbestosis was diagnosed according to the following criteria: 1) fibrosis of the lung and 2) presence of asbestosis bodies. —Stephen L.

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CLASSIFIED SUBJECT

292 2/44 752

FELLOWSHIP
NUMBER

FILE NUMBER

752

AUTHOR: L. Rousseau

TITLE: Pulmonary Asbestosis

ORIG. REFS.:

VOL.

PP.

DATE

ABSTR. REFS.:

VOL.

PP.

DATE

LaVal med.

8

233

Mar. 1943

(French)

ABSTRACT:

The radiological picture of pulmonary asbestosis is not characteristic; it is usually similar to that of tuberculous fibrosis. The diagnosis is, therefore, often made only after asbestos bodies have been found in the sputum. Asbestos fibers may be seen in the sputa of individuals who do not suffer from asbestosis; asbestos bodies are due to a pathologic tissue reaction. Microscopical examination of the lungs of patients who have died from an intercurrent disease may show asbestosis, which had not been found on X-ray examination. ~~It cannot be decided whether asbestosis favors the development of pulmonary fibrosis.~~ The case history of a forty-two year old man with asbestosis without tuberculosis is given. The patient had been working in the asbestos industry for eighteen years. For two years the patient had been suffering from increasing cough, expectoration and dyspnea. Roentgenological examination showed mottling of both lungs. Sputa

and gastric examinations were negative for tubercle bacilli. Asbestos bodies were found in the sputum.--

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CLASSIFIED SOURCE

255 3/44 752

AUTHOR: R. Desmeules and others

FELLOWSHIP
NUMBER

FILE NUMBER

752

TITLE: Asbestosis and Pulmonary Tuberculosis

ORIG. REF.

Laval. Med.
(French)

VOL.

8

PP.

217

DATE

Mar. 1943

ABSTR. REF.

VOL.

PP.

DATE

ABSTRACT:

Asbestosis is an occupational disease caused by the inhalation of asbestos dust. It is diagnosed by the presence of asbestos bodies in the sputum, and is characterized by the transformation of normal lung tissue into fibrous tissue. Symptoms appear usually five to seven years after the beginning of exposure. Both asbestosis and tuberculosis were seen in 3 workers exposed to asbestos dust for 20 years. In three of these cases asbestosis was masked by tuberculosis.

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MILLON INSTITUTE, PITTSBURGH, PA.

MELLON INSTITUTE, PITTSBURGH, PA.

CLASSIFIED SUBJECT	7/43-#717 / 339 752	FELLOWSHIP NUMBER	FILE NUMBER
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AUTHOR: Illinois			
TITLE: Wartime Operations Emphasize Industrial Hygiene Problems of Asbestos Industry			
ORIG. REFS.	VOL.	PP.	DATE
Illinois Labor Bull	3	10, 11	Feb. 28, 1943
		22	
ABSTR. REFS.	VOL.	PP.	DATE

ABSTRACT:

The control of asbestos must be an engineering control because there are no medical means to detect the disease until much harm has been done. Engineering control consists of two important principles: (1) Adequate exhaust; 2, Good housekeeping. By experiment it has been estimated that if the air contains less than 5,000,000 particles of asbestos per cubic foot there is small chance of the workers developing asbestosis. The article lists the procedures in the manufacture of rigid and of textile asbestos products and shows that further protective measures are still needed in most plants.—John C. Curdick.

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MELLON INSTITUTE, PITTSBURGH, PA.

FORM 7-134 B-43

752		752	
AUTHOR: R. Desreulox and M. Giroux		FILE NUMBER: 752	
TITLE: Asbestosis and Pulmonary Tuberculosis.			
ORIG. REF.: Laval. Med. (French)	VOL.: 8	PAGE: 227	DATE: Mar. 1948
ABSTR. REF.:		VOL.:	PP. DATE:

ABSTRACT: The case history of a patient who has worked for 50 years in an asbestos mine. The patient had a long history of cough which increased gradually. He had no other symptoms. He started to run fever and had some weight loss. He was treated with antituberculous drugs for 18 months. Diffuse peribronchial and perivascular changes were seen in the lungs. The first symptoms of asbestosis appeared. The lungs were in the stage of tuberculosis, but the matter could not be decided radiologically and pathologically.

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CLASSIFIED SUBJECT				FELLOWSHIP NUMBER		FILE NUMBER	
#68-1/45				MFC		752	
AUTHOR: E.S. Alden and W.M. Howell							
TITLE: The asbestos corn.							
ORIG. RPTS.	VOL.	PP.	DATE	ABSTR. REFS.	VOL.	PP.	DATE
Arch. Dermat. Syph.	49	312	May '44	JIMAT	26	183	Nov. '44
ABSTRACT:							
The Asbestos Corn. E.S. Alden and W.M. Howell. Arch. Dermat. and Syph., 49, 312 (May, 1944) The author describes corns or warts peculiar to asbestos workers, first noticed by Dermitz in 1930. They have no relation to asbestos of the lungs. One characteristic is that they appear and feel as if a foreign body were present, none is ever found. It is probable, however, that one is present in the very early stages.							
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