Misleading Conclusions

Liddell (1998) delineated the pre-determined conclusion that the QAMA-McGill researchers planned to expound in the last paper of the series: that the health effects of chrysotile were 'innocuous."

> "For men first employed in Asbestos, mine or factory, they [the SMRs] were very much what might have been expected for a blue collar population without any hazardous exposure. SMRs in the Thetford Mines area were almost 8% higher, but in line with anecdotal evidence concerning socio-economic status. At exposures below 300 (million particles per cubic foot) x years, (mpcf.y), equivalent to roughly 1000 (fibres/ml) x years- or, say, 10 years in the 1940s at 80 (fibres/ml)—findings were as follows. There were no discernible associations of degree of exposure and SMRs, whether for all causes of death or for all the specific cancer sites examined. The average SMRs were 1.07 (all causes), and 1.16, 0.93, 1.03 and 1.21, respectively, for gastric, other abdominal, laryngeal and lung cancer. Men whose exposures were less then 300 mpcf.y suffered almost one-half of the 146 deaths from pneumoconiosis or mesothelioma; the elimination of these two causes would have reduced these men's SMR (all causes) from 1.07 to approximately 1.06. Thus it is concluded from the viewpoint of mortality that exposure in this industry to less than 300 mpcf/y has been **essentially innocuous**, although there was a small risk or pneumoconiosis or mesothelioma." [Emphasis added]

The QAMA McGill researchers thus concluded that nearly half of the deaths (72) that they attributed to asbestos exposure were inconsequential because these deaths did not