

the majority this is a minor finding and not the cause of illness or death; in a few the condition is advanced.

Including all necropsies and all lung cancer cases, the incidence of primary pulmonary carcinoma in our necropsy service over this period is 0.3 per cent. Omitting the 35 cases showing asbestos deposits and the 2 cases of lung cancer in asbestosis, the incidence rate is 0.21 per cent.

Among the asbestosis cases (35) the incidence of lung carcinoma (2 cases) is approximately 6 per cent. Whether this is to be taken as of significance, especially in comparison to the general rate, is questionable. The series of asbestosis cases is small and the possible statistical error great.

It has seemed desirable, in addition, to record the observation that advanced asbestosis may lead to bronchial epithelial metaplasia of a type encountered in other locations where cylindrical epithelium may give rise to squamous-cell carcinoma.

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