

cc: A. J. Fleming, M.D., Wilmington
J. F. Morgan Haskell, Lancaster

File: C-00227

November 29, 1963

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MAYDOWN WORKS
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Dr. Fleming has passed your letter to me for a reply on the question of the risk involved in working with asbestos. This is naturally a matter of considerable interest to us since as you correctly suspect a considerable amount of asbestos is used in Du Pont plants largely in the form of pipe lagging.

There are many facets to this subject but the two most important are the questions, What is the risk to men who were exposed to asbestos prior to our recognition of the possible risk of cancer? and, What steps should be taken to protect the men who are now potentially exposed to asbestos?

It is hoped that these questions will be answered by studies which are at present underway. For example, the Division of Occupational Health of the U. S. Public Health Service has started an in-plant study to determine the effects of exposures to asbestos fibers and dust. . . . and to develop medical and environmental criteria and procedures for the control of the health risks of asbestos workers. Six plants located in North Carolina, New Hampshire and Pennsylvania have been studied.

That definitive answers to the questions you raise are not yet possible is underlined by the enclosed copy of the report of the Working Group on Asbestos and Cancer. This is a good statement of the present position and contains many valuable suggestions for conducting further research.

In line with their suggestion we hope to start a study of the health of pipe coverers compared with the health of non-asbestos exposed group within the next few weeks. Since this will be a study of existing medical records it is not expected to take a long time to complete and this should at least tell us whether we have a problem. 02



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For immediate application is the knowledge that the control of diseases resulting from asbestos lies in the control of dust and that close attention should be given to reducing the dust exposure of workers with asbestos. This may be done by suitable exhaust ventilating systems where asbestos is handled at a fixed location and by the use of dust respirators where exhaust ventilation is not practicable as is often the case in handling insulation in the plant.

I shall be writing to Dr. Lewis J. Cralley, of the U. S. Public Health Service, who is in charge of their asbestos research program to find out what results are available at this time.

I plan to keep you informed of further developments.

ORIGINAL SIGNED BY
G. J. STAPPE

G. J. Stappe, M.B.,B.S.
Chief, Physiology Section

GJS/dyb
Enclosure

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