PLAINTIFF'S EXHIBIT AIA-88

DEPOSITION EXHIBIT ENTERLINE 2

September 29, 1943

Dr. Ludvig Hektoen, Executive Director
National Advisory Cancer Council
[illegible] West [illegible] Street
Chicago 10, Illinois

Dear Dr. Hektoen:

Thanks for your letter of September 27. I may state that among the various pneumonoconioses, asbestosis ranks next to silicosis in industrial importance. It is a definite disease entirely resulting in disability in advanced cases. It is characterized by fibrosis which begins about the terminal bronchioles and spreads into the parenchyma of the lung as a diffuse obliterating fibrosis. Chronic fibrous pleurisy and emphysema are essential concommittant reactions.

The numbers of persons exposed to asbestos dust in this country is difficult to establish. Most of the cases have occurred in the fabricating plants of North Carolina and Pennsylvania where the fibrous mineral is woven with cotton to produce asbestos cloth, brake bands, and electrical insulation. A considerable number of persons are also exposed in the electrical industries where asbestos is used in insulating not only wiring but motor armatures. The U. S. Navy has had a real problem from the use of asbestos in insulating marine boilers, electrical installations and other insulating work.

I have always felt that asbestosis probably created no specific predisposition to pulmonary cancer. However, evidence to the contrary continues to accumulate. In the last number of the American Journal of Pathology, Homberger reports 3 new cases making a total of 19 in which the two conditions are associated. For this reason I do not believe that we can afford to neglect the matter much longer.

Under separate cover, I am sending you two copies each of reprints describing earlier Saranac Laboratory studies of the subject.

Sincerely yours,

PRODUCED
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Leroy U. Gardner, M. D.
Director

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