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June 19, 1961

C. W. Hite

Division Managers Meeting
June 21, 1961

You may wish to discuss the following information at your forthcoming meeting.

For many years, British and South African medical authorities have associated lung cancer with the inhalation of asbestos fibers. In recent years, American writers have reported numerous cases of cancer not only of the lung, but in other parts of the body, associating these conditions with asbestosis. While we have not had many cases of cancer in our Company these are numerous enough in other companies to cause me some concern.

Two weeks ago, a meeting was called in Washington by Dr. Harold Magnuson, Chief of the Occupational Health Division, U. S. Public Health Service. I was invited along with Dr. Paul Cartier, Thetford Mines; Dr. Arthur Vorwald, former head of the Saranac Laboratory and now at Wayne University; Dr. O. A. Sander, a specialist in industrial pulmonary diseases in Milwaukee; and Dr. Myril Shaw, Secretary of the Asbestos Textile Institute. Also present were several men from the U. S. Public Health Service who carried out the Diatomaceous Earth Survey a few years ago. It is Dr. Magnuson's responsibility to protect the health of the American worker and he called the meeting because he had become concerned over the asbestos and cancer question.

The immediate cause for calling the meeting was a report by Dr. Tom Mancuso who under the auspices of the University of Pittsburgh had studied the health of workers in a brake lining plant in Pennsylvania. Dr. Mancuso reported that there were 19 cases of lung cancer among 31 people who had asbestosis. This is a phenomenally high incidence. In addition, the incidence of abdominal cancer was 50 times higher in this group than would be anticipated in the normal population. Because it is a recognized fact that inhalation of certain fumes in the dye industry can cause cancer in parts of the body other than the lung, it was felt that the same might be true for inhaled asbestos.

At the end of our all day meeting, there was an unanimous decision that a problem exists in the asbestos industry. The question of whether or not an association exists between asbestos and cancer should be answered preferably by an authoritative group such as the U. S. Public Health Service rather than by University workers. Although Dr. Magnuson has the authority to investigate any American industry in which he feels a health problem exists, he would prefer to be invited by the industry to undertake a survey.

Dr. Magnuson indicated that he would set aside two million dollars in his budget if he is invited to study our problem. There will be no direct expense to industry other than making men and records available to the survey team. The whole program would be correlated with studies carried on in other parts of the world where different types of asbestos fiber are used. It is expected that a preliminary report could be ready in approximately 5 years.

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Last week, Dr. Shaw and I reported the results of the Association meeting to the Asbestos Textile Institute. Their Board of Governors voted to invite Dr. Magnuson to survey that part of the asbestos industry. Letters have been sent to member companies requesting approval of this action.

I believe that we should participate in such a survey, realizing that if asbestos is incriminated as a cause of cancer, it might affect our Company business quite seriously. However, I feel that it is better to have the question answered by factual evidence rather than by hearsay. Certainly we could be no worse off than we are today when many doctors and lawyers quote medical texts associating cancer and asbestos. On the other hand, if the U. S. Public Health Service finds that no relationship exists, it would be of tremendous value in our future Workmen's Compensation cases and product liability suits.

Kenneth W. Smith, M.D.

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