CONFIDENTIAL

October 13, 1964

C. W. Hite

Asbestos and Cancer Publicity

You have asked for my comments concerning the publicity given on this subject, in newspapers, on the radio and television. First, I think a word about the background of the men involved is in order.

Dr. Irving Selikoff practices internal medicine at the Paterson Clinic in New Jersey, and has been interested in tuberculosis for many years. He is ambitious and unscrupulous, and is out to make a name for himself at the expense of the asbestos industry. His first contact with the asbestos industry was in the summer of 1961, when he called upon me in my office asking permission to visit our Jeffrey Mine to learn something about asbestosis. To the best of my knowledge, he had never seen an asbestos worker or a true asbestosis prior to this. After spending four days with Dr. Grainger discussing our programs and reviewing x-ray films, he told Dr. Grainger in a rather pompous manner that Grainger didn't know anything about reading films and that he, Selikoff, in that short period of time had seen much more disease than he imagined existed. I mention this to illustrate the type of man that he is, for there was absolutely no basis for his statements about disease and our Jeffrey workers.

In 1962, Dr. Selikoff obtained a research grant of about $80,000 from the City of New York to examine members of the Asbestos Workers Union in New York City and in Newark. This study was the basis for all of the subsequent reports which he made. He has done no new work in studying asbestosis, but has traveled extensively and written voluminously to set himself up as a world-wide expert in this field.

Dr. Churg I have not met, but by reputation and hearsay he is a hard-working pathologist in the Paterson Clinic. It is doubtful that he has seen any true pathological specimens of asbestos workers, although he has probably seen a fair amount of pulmonary tissue from people who had some asbestos exposure.

Dr. Cuyler Hammond is the Chief Statistician for the American Cancer Society. During the past years he has received world-wide attention for statistical surveys which he has published; in the main they have been very good articles. You will recall perhaps that Dr. Hammond was the first person to draw significant attention to the association of cigarette smoking and lung cancer. Unfortunately, Dr. Hammond is rather a gullible person and could be taken in by someone like Dr. Selikoff who has ulterior motives.

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The articles which have appeared in medical journals and at various medical meetings have the three doctors' names attached to them. However, it is unquestionable that Dr. Selikoff has written over 90% of each article. These have been presented in the Journal of The American Medical Association, referred to in the American College of Chest Physicians Meetings and, of course, last week at the American Public Health Association. There is no new data since the alleged facts which he gathered in 1962. However, he has used different media to promote his cause.

One of our main complaints about Dr. Selikoff is that he will not define what he calls an asbestos worker. It is well known in the industry that the three types of fiber commonly used, namely, chrysotile, amosite and crocidolite, cause different types of pulmonary disease. Also, when these fibers are mixed singly or together with other potentially toxic dusts such as flux-calcined diatomaceous earth or quartz silica, the disease produced is not typical of any of the fibers or of the silicas themselves. It is different clinically and radiologically. We have repeatedly tried to point this out to Dr. Selikoff and he ignores us completely.

As far as our experience is concerned, I am not prepared to say positively that chrysotile fiber is, or is not, the cause of lung cancer. In our company we have not seen this type of malignancy, but it has been seen in some other companies who have not had the good industrial health program that Johns-Manville has had for many years. We have not seen cases of asbestosis while other companies have, and it may be that, given sufficiently high exposures over a period of time, there may be an association of the chrysotile fiber to lung cancer. On the other hand, we have had very little experience with the use of crocidolite fiber alone and not in mixtures of other dusts. There is very strong evidence that the new type of cancer mentioned last week namely, mesothelioma, will occur only among those people who have had exposure to the blue crocidolite.

Next week at the Waldorf Astoria, the New York Academy of Sciences is sponsoring a meeting on the Biological Effects of Asbestos which has been arranged by Dr. Selikoff. As it was originally conceived, this program was quite biased on the effects of asbestos. We have worked diligently for nearly a year to get the Academy to broaden the scope. I believe that we have been successful, so that now there are experts who are well reknown and well qualified who will come from various parts of the world to discuss the whole field of asbestosis. I know that there are at least three doctors on this program who can refute factually the allegations made by Dr. Selikoff. When the meeting has been completed all the papers which have been presented will be assembled in a monograph and available for distribution. The copy of the program for this meeting is attached to this letter.

As far as immediate publicity is concerned, I would strongly recommend that we do nothing to try to refute present newspaper articles. We could very definitely be put in an untenable position as far as our product is concerned if we denied too emphatically all of the facts that Dr. Selikoff believes in. After we have seen the type of publicity which next week's meeting will generate, then I think that we should plan to act accordingly.

Kenneth W. Smith, M.D.

Attach.

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