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MEMORANDUM

TO: All Member Associations
Members of Executive Committee

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APR 26 1979
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NIAGARA FALLS, N. Y.

AIA/20/1/10/HAS

FROM: Sir Neville Stack

11 April 1979

ESTIMATES OF THE FRACTION OF CANCER IN THE UNITED STATES RELATED TO OCCUPATIONAL FACTORS (THE "ESTIMATES" PAPER)

(The following deliberately over-simplified comments on the above paper are provided as background material for laymen)

The quality of scientific publications often used as a basis for regulatory action by the United States Departments of Health, Education and Welfare (HEW), and of Labor, had been sternly criticised by a wide range of academics and others well before the publication of the HEW paper "Estimates of the Fraction of Cancer in United States Related to Occupational Factors", often referred to more briefly as the Estimates Paper.

The Estimates Paper has received much detailed criticism, not only from spokesmen for the various industries alluded to in that paper but also from academia, the scientific press and even from other US Government agencies.

The Estimates Paper has been criticised on many grounds but the three most fundamental are:-

Using misleadingly high estimates of the number of people in a work force exposed to different occupational carcinogens.

Using further misleadingly high estimates when predicting the number of this exposed workforce which will develop cancer from their exposures.

Frequently assuming that all those who are in any way exposed to potential carcinogens are exposed to equally heavy concentrations; this ignores the fact that most published studies are based upon the experience of those most heavily exposed.

Critics have further observed that, were the predictions of the Estimates Paper sound, the "epidemic" of occupationally related cancer in the United States expected by the authors of that document would already be occurring - and it is clear, on the basis of data published by the US National Cancer Institute, that it is not.

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The authors of the Estimates Paper have asserted that they believe its reasoning to be sound and its conclusions justified but have not, so far, replied to their critics with any rigor or precision. The authors of the Estimates Paper note that asbestos is a "well-studied example" of an occupational carcinogen and, in developing their predictions, devote much attention to the asbestos exposed workforces of the World War II era.

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The Paper, and the furore it has engendered, are of concern to AIA. The AIA does not wish to enter the dispute, already involving so many authorities from so many different sources, but is resolutely of the view that it would be most improper for the Paper to influence Government policy, in the US or elsewhere, until it can be subjected to adequate peer review.

TNStack

Sir Neville Stack

cc Chairman, Medical Advisory Panel
Dr. H.C. Lewinsohn
Dr. P. Kotin

A 18060

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To: J.L. ??

Dr. Walter W. Neville

CC: NIOSH

Do you want to follow up on this 4228 4220

U.S. DEPARTMENT OF LABOR
OCCUPATIONAL SAFETY & HEALTH ADMINISTRATION
ANALYTICAL LABORATORY
390 WAKARA WAY – P.O. BOX 8137
SALT LAKE CITY, UTAH 84108

FTS 588-5287 524-5287
Area Code: 801

or should we just send samples.

April 5, 1979

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Gentlemen,

We are interested in purchasing various types of relatively pure asbestos for our quality control program. We need about one pound (500g.) or less of material. If you can supply us, please let us know, and also what the approximate purity is.

We are also interested in knowing where we can purchase laboratory size quantities of Polyox (water soluble resins).

Sincerely,
Walt Neville

800-621-0737 St Louis

Local lab supplies

Samples sent:
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1 lb R6-144
+ literature in
144A deport

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SAFETY & HEALTH

Doctors say cancer is a bum rap for industry

Specialists say the federal focus should be on smoking and alcohol—not pollutants

In the federal government's war on cancer, industry has been identified as the major enemy. Over the past several years, laws and regulations have ordered companies to reduce the amounts of suspected cancer-causing substances that they discharge into the air, water, and workplace. But many physicians and health professionals are becoming concerned that these government programs, while well-intentioned, are misdirected and will fail to achieve any appreciable reduction in cancer deaths.

"The country cannot afford to spend vast amounts of money to chase the wrong culprit in cancer incidence," says Dr. Harry B. Demopoulos, a pathologist with the New York University School of Medicine. Instead, Demopoulos and other health officials believe that more attention should be focused on the personal habits of individuals, because, they say, there is medical evidence that certain practices can contribute significantly to the cancer death rate. Such habits include smoking, excessive alcohol consumption, and poor nutrition.

Consumer responsibility. Because of the economics involved, the issue of assessing what is to blame for cancer is controversial, and the philosophy espoused by these medical people has heated up the debate. If heavy industries such as steel and chemicals are made to bear the burden of cancer prevention, it means that they must continue to install expensive equipment to control the emissions of suspected carcinogens and other air pollutants. If the finger is pointed at cigarettes, liquor, or foods high in fat, the manufacturers of those products will undoubtedly lose sales.

More important, this new philosophy is causing a stir because it leaves the greatest responsibility for preventing cancer with the consumer. "It's easier for the public to blame smokestacks rather than themselves as the causes of cancer," says Demopoulos. Indeed, health officials who have blamed personal habits have been severely criticized by the press, government officials, and other members of the health profession. In an extreme case, New Jersey State Senator John M. Skevin asked the state's attorney general to investigate Elizabeth M. Whelan, a research associate from the Harvard School of Public Health, who founded the American Council on Science & Health.

Whelan's group has argued that there is little to connect so-called cancer clusters in New Jersey with industrial pollution. But Skevin has charged that the group is an industry "conspiracy" set up to blame all cancer on cigarettes, alcohol, and lack of exercise. Another of



Researcher Whelan: Under attack for debunking the notion that there is a cancer epidemic.

Whelan's statements—that National Cancer Institute data do not back up the common notion that there is a cancer epidemic—also was greeted with hostility and led to allegations in the press that she had accepted money from a foundation linked with industry. Actually, Whelan says, she has meticulously avoided accepting funds from industry but did take a grant of $100,000 from the Sarah Scaife Foundation in Pittsburgh, which owns considerable stock in Gulf Oil Corp. "It's a sad situation when you stand up and say there is no cancer epidemic, and you're labeled as an industry spokesman," she says.

But many worry that such views as Whelan's understate the adverse impact that industrial activities may have on public health. "People cannot control whether the air is polluted or their clothes are treated with carcinogens," says Joseph H. Highland, a staff scientist with the Environmental Defense Fund. Dr. Anthony Robbins, director of the National Institute of Occupational Safety & Health, cautions: "We have to be careful that we are not implying to workers that all other hazards will go away if smoking is stopped."

But doctors are concerned that insufficient epidemiological data are increasingly being used to justify costly government rules. During a recent cancer symposium in New York attended by more than 200 health professionals, Dr. Merrill Eisenbud, professor of environmental medicine at NYU's School of Medicine, criticized the Environmental Protection Agency's costly requirement that cities install activated carbon to filter out trihalomethanes, suspected carcinogens, in drinking-water supplies. Trihalomethanes, he says, have been present in drinking water since the latter part of the 19th century, when chlorination began.

Questioning Califano. Under heavy attack by these health specialists is a statement made by Health, Education & Welfare Secretary Joseph A. Califano Jr. attributing at least 20% of all cancer to occupational causes. Demopoulos believes that closer to 5% of all cancer is caused by workplace conditions. The "real culprit" is cigarettes, he says, which may account for as much as 27% of cancer deaths each year. According to the NYU pathologist, National Cancer Institute data show that excessive alcohol consumption may be responsible for an additional 10% of all cancer deaths, while poor nutritional habits may account for as much as 40% of total cancer deaths.

Predictably, the heavy industries have been encouraged by these recent statements. And William J. McCarville, director of environmental affairs at Monsanto Co., says that such new views may have an impact on the enforcement of federal laws.

On the other hand, one of the main targets of this new philosophy, the tobacco industry, discounts these views. An official at the Tobacco Institute, an industry trade group, says that many industries have blamed their own problems on tobacco, and he repeats the tobacco industry's position that research linking smoking with cancer deaths is not conclusive. ■

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