Table 2:

Observed and Expected Number of Deaths Among 370 Asbestos Workers from 1.1.63 to 4.30.67

Cause of Death	Observed Deaths	Expected Deaths +
Total, cancer (all sites)	49	8.6
Cancer of lung, pleura, bronchus, and trachea	27	2.3
Bronchogenic carcinoma	(24)	++
Pleural mesothelioma	(3)	+++
Peritoneal mesothelioma	2	+++
Cancer of stomach	3	0,6
Cancer of colon and rectum	5	1.2
Cancer of all other sites combined	1	4.5
Asbestosis	(15)	
Heart and circulatory disease including stroke	22	28.5
All other causes of death	8	10.4
Total, all causes	94	47.5

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- + Based upon US mortality data disregarding smoking habits.
- ++ United States data not available, but figure should be only slightly less than 2.3.
- +++ United States data not available, but these are rare causes of death in general population.

Table 3:

Analysis of deaths by cause among 632 asbestos insulation workers

Jan. 1, 1943 through March 31, 1968

Cause of Death	1.1.43 to 12.31.62	1.1.63 to 3.31.68	Total
Bronchogenic Carcinoma	42	27	69)
Pleural Mesothelioma	(3)	(3)	(6)
Peritoneal Mesothelioma	4.	10	14 /20
G.I. Carcinoma	. 29	9	38
Cancer other sites	/ 17	8	25
Asbestosis	12	18	(30)
All other causes	148	35	183
Total deaths	255 +	110	365 +
Cancer all sites	95 (37 %)	57 (52 %)	152 (42 %)
Asbestosis	12	. 18'	60)
All other causes	148	35	183

+ Plus 7 who died before 20 years from onset (1 cancer)

Table 3 records the mortality experiences to March 31, 1968. It demonstrates that of the 632 men followed from January 1, 1943 to March 31, 1968, there have been 372 deaths. Sixtynine of these have been due to bronchogenic carcinoma. Twenty deaths were found to be due to mesothelioma, six pleural and fourteen peritoneal. This is in addition to one man who died of bronchogenic carcinoma who also had a histologically distinct peritoneal mesothelioma found on post mortem. It is of interest that 38 deaths were found to be due to cancer of the stomach or colon. Thus, 42% of the deaths were due to cancer of some type and, in addition, there were 30 deaths - or almost 10% - caused by asbestosis.

Analysis of these data suggests a number of observations. First, although the percentage

(ELI in DD 1968