BOOK REVIEWS

Occupational Diseases and Industrial Medicine. By Rutherford T. Johnstone and Seward E. Miller. (Pp. vii + 482; illustrated. 84s.) Philadelphia and London: Saunders. 1960.

The authors, both physicians and university professors with considerable experience of industrial medicine, have written this book in response to a demand in the U.S.A. It has two parts; the first deals with the practice of industrial medicine and the second with occupational diseases.

Part I includes chapters on the duties of the industrial physician, hygienist, and nurse, various insurance programmes, man's reaction to stress, the rehabilitation of the injured, job placement of the handicapped and the diagnosis of occupational diseases, including the use of the clinical and toxicological laboratory. It will be of interest to the non-American reader because it gives a well written and vigorous account in just over 100 pages of American methods of practice and their development.

The accident and safety phase had its origin in the early years of this century with the passage of workmen's compensation laws. Industrial medicine was concerned almost wholly with traumatic surgery and compensation medicine. With the broadening of compensation laws there came the occupational disease and industrial hygiene phase which was well organized by about 1930. The present phase of health conservation started at the beginning of World War II, when the U.S.A. suffered a serious shortage of manpower. It became necessary to protect the health of the worker and employ the handicapped and older workers to the best of their capabilities. This is broadly the pattern of development in Great Britain, but in this country there has not been the same stimulus to prevention provided by compensation laws and insurance schemes, and so far there has been less emphasis on industrial hygiene which embodies the measurement of health hazards.

It is quite clear that the good American plant physician has fundamentally the same aims as the good British industrial medical officer. "First and foremost he must be a good clinician and know his plant." "His medical services must have the full backing of management and labour" and so on.

It seems likely, however, that more time is spent in small plants by the physician in the U.S.A. than in Great Britain. "On the average, one hour per day, twice a week, is required for a small establishment of 50 to 75 workers. Establishments of 500 to 600 employees require some physician twice daily." The type of medicine practised is summarized as follows:

First, assistance in placing men in jobs commensurate with their physical and mental abilities. Second, prevention of disease caused by the working environment. Third, practising constructive medicine aimed at im-

proving and maintaining health, particularly keeping emotional tensions from undermining health. And finally, medical treatment for occupational disabilities and treatment of non-occupational emergencies.

Part II, with some 350 pages, contains 13 chapters on occupational diseases and an appendix with the threshold limit values adopted by the American Conference of Governmental Industrial Hygienists. In addition to the classic and common occupational diseases such as the cancers and pneumoconiosis and those caused by noxious gases, hydrocarbons, the metals, ionizing radiations, and physical agents, there are chapters on synthetic resins, plastics, and propellants, and fuels and oxidizers. These are clear and well written chapters and will be valuable to any industrial physician. The sections on treatment are valuable because of the authors' wide experience as clinicians dealing with occupational diseases from discovery to recovery. It is only necessary to disagree with them on points of detail. Most British workers would not agree with the conviction that asbestosis does not predispose to the development of lung cancer or that arsenic is only a suspected cancer producing agent. It is odd, too, to find the statement that the pathology of mill fever is unknown, without reference to the classic studies of Caminita and his colleagues in the U.S.A. Reference might have been made to the International Labour Organization's classification of the Pneumoconioses (*Occup. Safety Hlth* (1959), 9, 63). This is a good attempt to achieve international uniformity, which, it is stated, has not yet been accomplished.

In the next edition it is hoped that the authors will relate the references at the end of each chapter to the text, and that there will be better pictures of chest radiographs and whole lung sections, even if it makes the book more costly.

This book with its balance of idealism and practicability contains one of the best accounts the reviewer has read of modern methods of industrial medical practice and a good description of the more important and newer occupational diseases. Without any doubt, it will be valuable to industrial physicians both inside and outside the U.S.A.

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Modern Occupational Medicine. 2nd ed. Edited by A. J. Fleming and C. A. D'Alonzo. Associate Editor: J. A. Zapp. (Pp. 587; 66 figures + 1 coloured plate. 90s.) London: Henry Kimpton. 1960.

This compact volume on occupational medicine is compiled by 22 authors, all of whom are employed by E.I. du Pont de Nemours and Company of America. It is divided into eight sections, each dealing with different aspects of the industrial physician's work. Lack of space has made it necessary to deal mainly with general