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COAL MINE HEALTH AND SAFETY

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HEARINGS
BEFORE THE
SUBCOMMITTEE ON LABOR
OF THE
COMMITTEE ON
LABOR AND PUBLIC WELFARE
UNITED STATES SENATE
NINETY-FIRST CONGRESS

FIRST SESSION
ON

S. 355, S. 467, S. 1094, S. 1178, S. 1300,
S. 1907, S. 2118, S. 2284, and S. 2405

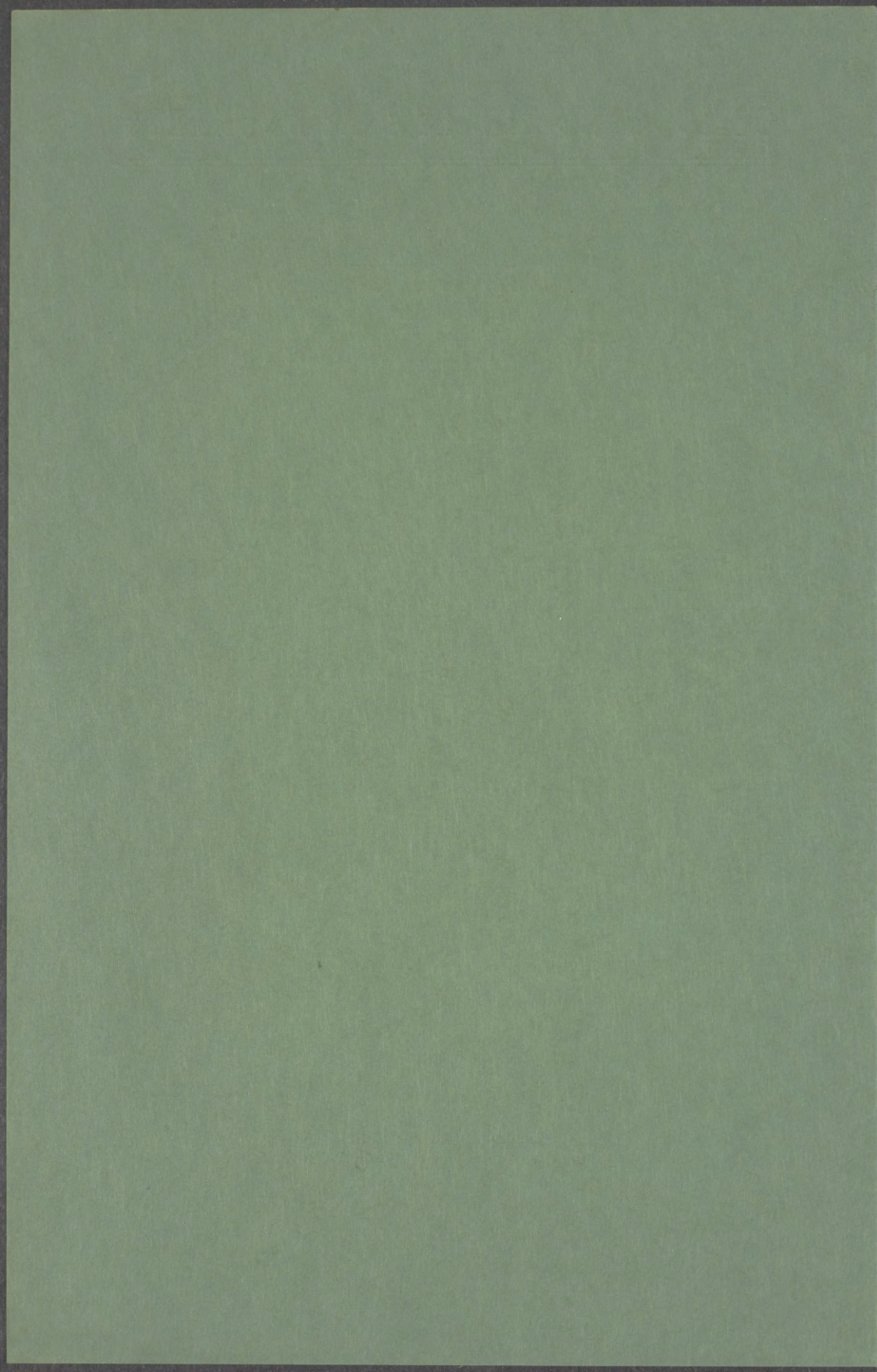
BILLS TO IMPROVE THE HEALTH AND SAFETY CONDITIONS
OF PERSONS WORKING IN THE COAL MINING INDUSTRY OF
THE UNITED STATES

Part 4

FEBRUARY 27, MARCH 7, 12, 13, 14, 18, 20, 26, AND MAY 2, 1969



Printed for the use of the
Committee on Labor and Public Welfare



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WASHINGTON : 1969

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(II)

FOREWORD

During the course of the hearings by the Subcommittee on Labor on coal mine health and safety legislation, numerous witnesses presented oral testimony as well as written documents demonstrating the serious impact of pneumoconiosis, more familiarly known as "black lung," caused by respirable coal dust. However, the most gripping demonstration of the disease was in the slides of actual lung sections presented to the committee during its hearings.

The committee has, with the permission of Dr. Jethro Gough and the U.S. Public Health Service, reprinted in this volume, 12 of those lung sections in order to graphically portray the effect of respirable coal dust on the human lung.

These reprints will enable the Members of the Senate as well as the medical and scientific community to more completely understand the nature of the disease and its impact on the health of miners.

The first eight slides were referred to in the testimony of Dr. Gough (volume 3 of the hearing record). The remaining four slides were submitted to the committee during the medical testimony found in volume 2 of the hearing record.

HARRISON A. WILLIAMS, Jr.,
Chairman, Subcommittee on Labor.

(iii)

FOREWORD

During the course of the hearing by the subcommittee in 1954 on coal mine health and safety legislation, numerous witnesses presented oral testimony, as well as written statements. In addition, the serious impact of pneumoconiosis, now commonly known as "black lung," caused by respirable dust has been clearly demonstrated by the case files in the files of several hearing participants. The committee wishes to bring to the attention of the public the results of the hearing.

The committee has retained the services of Dr. Robert F. Smith and Dr. J. S. Finklestein, respectively, in the conduct of the hearing. In order to expedite the hearing, the files of respirable dust dust on the hearing have been made available to the committee.

These reports will address the hearing of the committee as well as the medical and scientific community. It is the committee's understanding that the results of the hearing will be of benefit to the health of miners.

The committee also wishes to express its appreciation to the hearing participants and the hearing staff. The hearing staff will be responsible for the distribution of the hearing report to the committee during the hearing process. The hearing report is of the hearing report.

Honorable A. William W. ...
Secretary, Subcommittee on Labor



FIGURE 1.—Health tissue of 90-year-old schoolteacher.

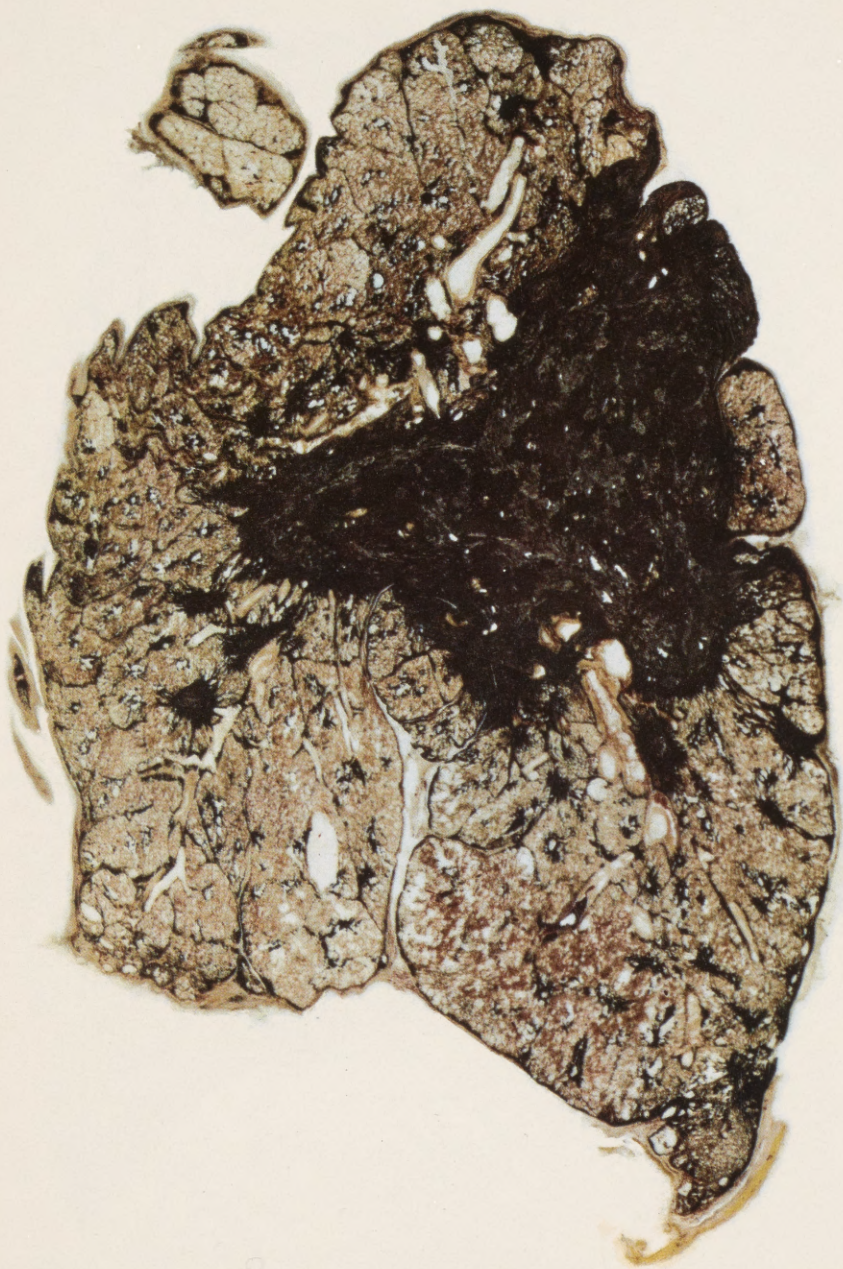


FIGURE 2.—Progressive massive fibrosis (40-year-old miner).

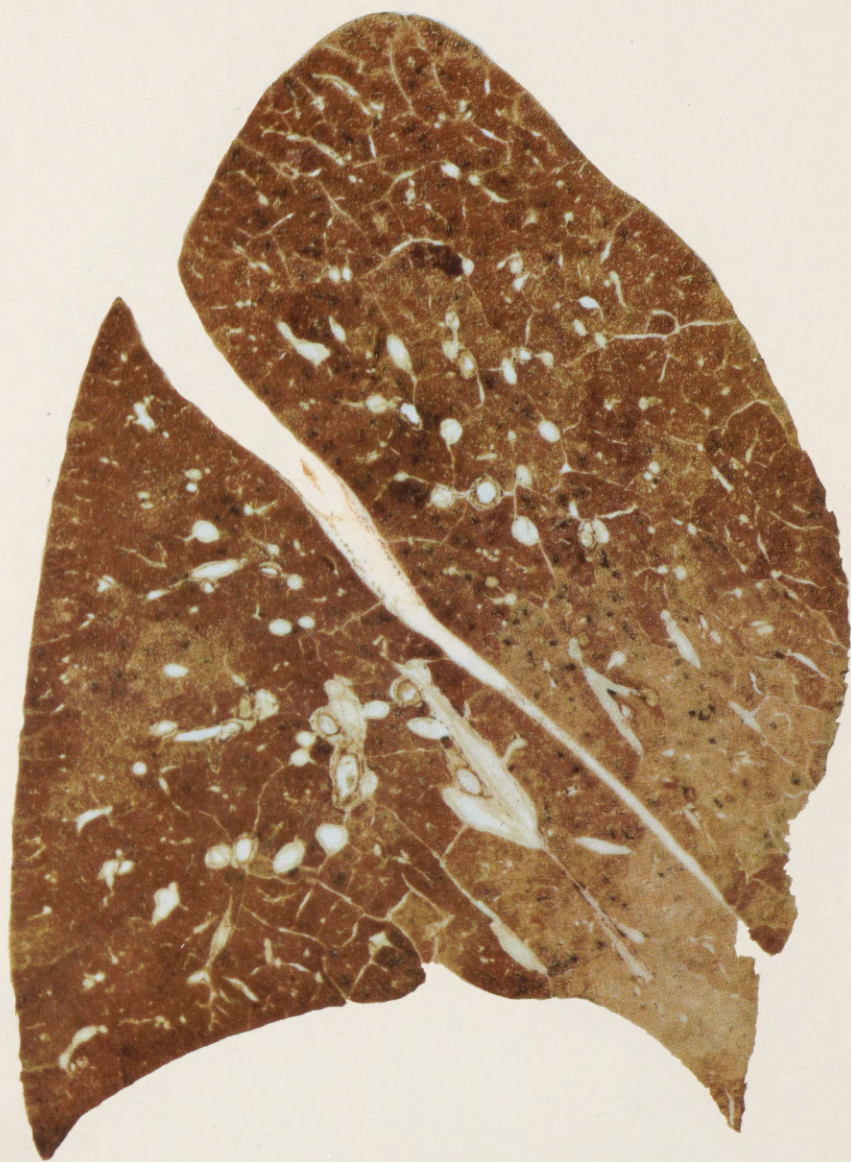


FIGURE 3.—Ten years in the mines.

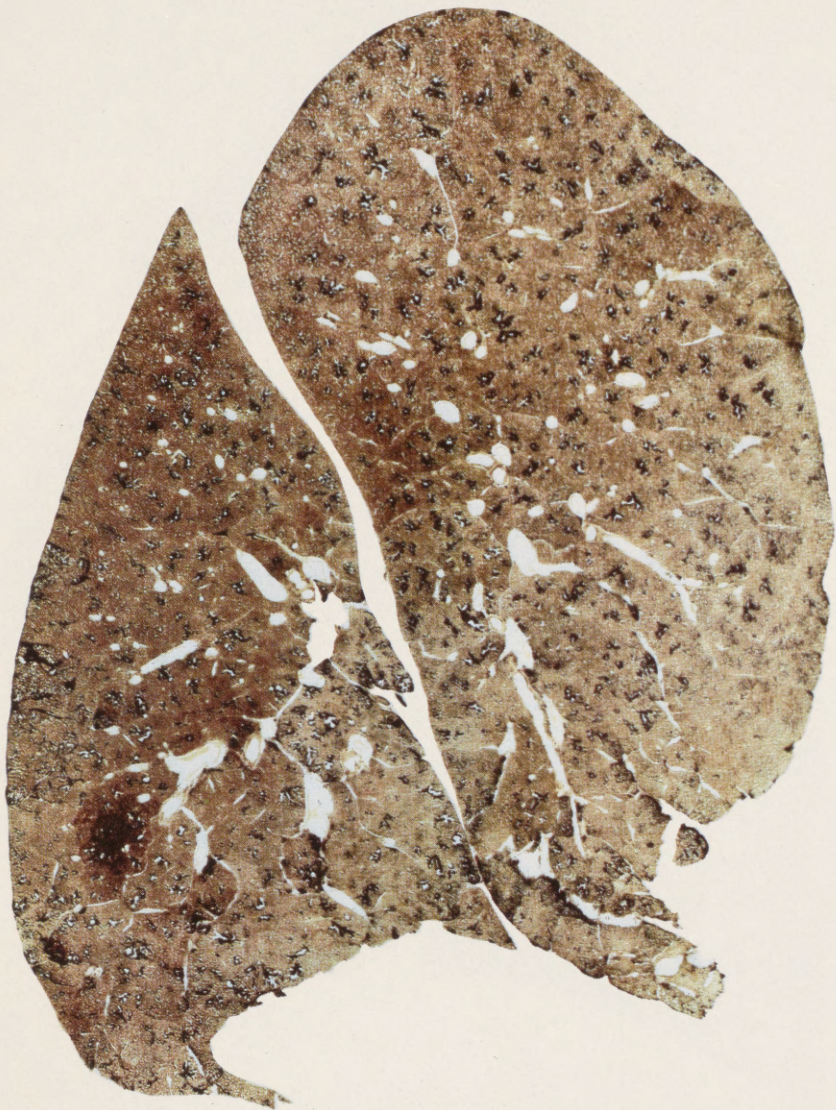


FIGURE 4.—Twenty years in the mines.



FIGURE 5.—Between 20 and 30 years in the mines.



FIGURE 6.—Simple pneumoconiosis with focal emphysema.



FIGURE 7.—Progressive massive fibrosis.



FIGURE 8.—Progressive massive fibrosis—death from heart failure—46 years in the mines.



Public Health Service.

FIGURE 9.—Healthy tissue.



Public Health Service.

FIGURE 10.—Pneumoconiosis.



Public Health Service.

FIGURE 11.—Advanced stage.



Public Health Service.

FIGURE 12.—Progressive massive fibrosis.

