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moderately increased. The alveolar-arterial PO_2 difference at rest was at the upper limit of normal with an arterial PO_2 of 82 mm Hg. The patient was unable to exercise. Diffusing capacities for carbon monoxide by steady state, single breath and fractional uptake techniques were all reduced; and the 'absolute shunt', measured while breathing pure O_2 , was increased.

One year later his chest roentgenogram was unchanged (fig. 2) and physiologic studies showed increasing restriction.

Lung biopsy in August 1968 revealed a greatly thickened pleura and a solid, rubbery lung. Sections showed advanced pleural and interstitial fibrosis (fig. 3). Clusters of siderophages filled some alveoli and a few asbestos bodies were seen in these spaces and in the adventitia of bronchioles (fig. 4)

Discussion

Asbestos has been used for more than a thousand years. Its outstanding qualities of incombustibility, indestructibility and flexibility, as well as its