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**Occupational and Environmental Lung Diseases, continued**

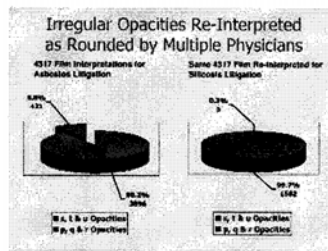
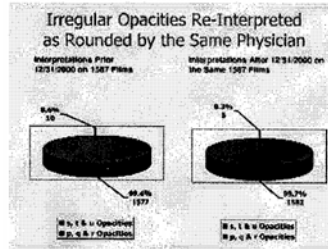
**SILICOSIS: EXPLAINING THE INCONSISTENCY BETWEEN DECLINING PUBLIC HEALTH STATISTICS AND THE EPIDEMIC IN LITIGATION**

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**PURPOSE:** During the early part of the last century, silicosis and silicotuberculosis were major causes of mortality among workers exposed to silica dusts. By the end of the century, the National Institute for Occupational Safety and Health (NIOSH) had reported an 84% decrease in silicosis-related mortality during the period 1968 to 1999. However, even though the data demonstrate a decline in mortality over the last century the number of silicosis lawsuits filed in the last few years has skyrocketed. For instance, one large insurer suddenly experienced more than 25,000 silicosis claims in twenty-eight states and over 17,000 silicosis claims were filed in Mississippi alone.

**METHODS:** The study analyzed 9,875 cases of silicosis from eight states that were removed to U. S. District Court. In addition, medical data from the Manville Trust for a large numbers of these same claimants were analyzed. Radiographic patterns from multiple interpretations for shape of small opacities were examined.

**RESULTS:** Of 8,629 plaintiffs matched with claimants in the Manville Trust, it was determined that 5,174 (60%) had already filed an asbestos claim. Of 4,317 chest films originally interpreted in asbestos litigation, 3,896 (90.2%) were classified with small opacities of primary shape s, t, u. When the same 4,317 films were interpreted in silicosis litigation, the primary shape of 4,304 (99.7%) were now classified as p, q, r. One physician alone interpreted 99.4% of 1,587 chest films in asbestos litigation with a primary shape of s, t, u, and afterwards re-interpreted the same 1,587 in silicosis litigation as 99.7% having small opacities primarily p, q, r shape. Other anomalies with the diagnoses in the 9,875 claimants will be presented.



Glenn RE, Kalish PW and Krutz F. Silicosis: Explaining the inconsistency between declining public health statistics and the epidemic in litigation, Chest 128, Suppl 4: 214S, 2005.