

d) Carcinogenesis due to trauma and other factors will be covered only with reference to the organ systems discussed in the Surgeon General's Report, thus not including the skin.

3) Cancer Histopathology will be covered as follows:

a) As to the respiratory system, systems of classification and typing of malignant cells

b) So called "pre-malignant change" and malignant transformation

20 c) Observations relating to atypisms, inflammatory and other, including leukoplakia, hyperplasia, metaplasia, carcinoma in situ, atypical proliferation, etc. Note particularly observations as to reversibility or irreversibility.

15 4) Cancer Diagnosis will be covered only if the article reflects controversy over the adequacy of various methods or as it pertains to the problem of the true morbidity and mortality of the disease. Materials relating to confusion of diagnosis as result of metastases to or from the respiratory system will be covered. Include articles with data as to frequency of such metastases.

15 5) Cancer Immunology, except as it relates to therapy, will be included.

B. RESPIRATORY SYSTEM, NO-TOBACCO REFERENCE (CATEGORY 4)

1) Etiology and Epidemiology, not diagnosis or treatment, of those non-cancerous respiratory diseases and conditions listed in the Surgeon General's Report as being associated with smoking, including:

75 a) Chronic bronchitis) includes articles on

b) Pulmonary emphysema) differential diagnosis

c) Bronchiectasis

d) Non-allergic asthma

e) Non-infectious rhinitis, laryngitis, dry mouth, cough, dyspnea, and sputum production

f) Pneumonia, influenza, respiratory tuberculosis only if etiology, epidemiology or relationship to cancer is a subject of the article

100 2) Etiology and Epidemiology, not diagnosis or treatment, of occupational respiratory disease (e.g., silicosis, asbestosis, pneumoconiosis, byssinosis) will be included only if the possible relationships to respiratory cancer or other smoking associated diseases are discussed.

ALTERNATIVE FOR II - B) 2): Delete II B) 2) and substitute:

Etiology and epidemiology, not diagnosis or treatment, of occupational respiratory disease (e.g., silicosis, asbestosis, pneumoconiosis, byssinosis) will be included. *We are reviewing*

3) The Physiology and Function of the Lung will be covered only with respect to the following:

25 a) Adverse effects of non-drug inhalants in animals or man

b) Effects of non-drug inhalants on clearance mechanisms, ciliary activity, loss of cilia, the transport and secretion of mucus and histological and cytological changes or atypisms in the lungs (including hyperplasia, metaplasia, etc.) **3i**

C. CARDIOVASCULAR SYSTEM, NO-TOBACCO REFERENCE (CATEGORY 6)

60 1) Etiology and Epidemiology, not diagnosis or treatment, of cardiovascular diseases, including:

- a) Coronary artery disease, coronary heart disease, or ischemic heart disease (including coronary thrombosis and myocardial infarction)
- b) Vascular disease (e.g., cerebrovascular accident, stroke, Buerger's disease or thromboangiitis obliterans, Raynaud's disease, arteritis, idiopathic gangrene, occlusive vascular disease, atherosclerosis, obliterative arteriosclerosis, aneurysms, hypertension)

In a) and b) emphasis should be placed on:

- 1) the association between cardiovascular disease and exercise, alcohol consumption, obesity, aging, sex factors, marital status, hypercholesteremia or diabetes
- 2) the possible role of genetic, ethnic, dietary, cultural, psychological, emotional, socioeconomic, and occupational factors

2) Excluded will be infectious (including rheumatic) cardiovascular diseases, congenital heart defects, cor pulmonale, congestive heart failure, angina pectoris, cardiac arrhythmias, ventricular fibrillation, hypertension occasioned by renal disorders, tachycardia and bradycardia, unless there is a discussion of the relationship to a disease or diseases otherwise covered in this memorandum.

15 Blood cholesterol united system ~~see nervous mens.~~

3) Articles relating to the factors causing or to the possible pathogenic significance of acute cardiovascular responses.

and in
document
15

4) Articles relating to the possible pathogenic significance of blood chemistry factors (including articles relating to the factors causing changes of possible pathogenic significance of such blood chemistry factors) with respect to a disease or diseases otherwise covered in this memorandum.

"Thousands" - will run through Index

ALTERNATIVES FOR II C) 3) and II C) 4): ~~Holness~~

- 1. Total inclusion
 - a. List
 - b. Annotate

2. Total exclusion

3. Selective screening for HI by a ~~Reader Specialist~~ ^{Cardiologist}

~~a. Si~~

~~b. other~~

4. Selective screening from selected journals

maybe only from separate journals.

exclude appellations? grants? different treatment

Blood chemistry as a category

30

D. MISCELLANEOUS, NO-TOBACCO REFERENCE (CATEGORY 8)

1) Etiology and Epidemiology, not diagnosis or treatment, of various diseases listed in the Surgeon General's Report as being associated with smoking will be listed only, ^{simply} by including:

15

- a) Amblyopia, chemical conjunctivitis, and decreased visual acuity
- b) Cirrhosis of the liver
- c) Peptic ulcer (gastric and duodenal)
- d) Esophageal or gastric irritation

perhaps p. 2

25 Occupational Toxicology

ALTERNATIVES FOR II D) 1):

- ~~1. With microfilm reproduction~~
- 2. Without microfilm reproduction

increased

nothing

2) Literature Dealing with Certain Other Aspects of the smoking and health controversy, as follows:

- a) The problems of statistical and epidemiological studies, such as etiological significance, self selection, deficiencies in sampling techniques and questionnaires, inaccuracies of death certificates or other documents on which survey studies are based, etc.
- b) The difference between association and causation, or between opinions and scientifically proven facts, Koch's postulates, the scientific method, etc.
- c) The problems of extrapolation from animal experiments to the human situation, species differences, etc.
- d) The effectiveness of labelling and advertising regulations.
- e) The proper role of government in matters relating to public health, including the advisability of making recommendations for action on the basis of epidemiological studies and statistical associations.