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DOES SMOKING CAUSE CANCER?

Some Research Shows It,
but It's Still Much a Mystery



The real story of the connection between smoking and lung cancer, as seen by cancer experts at this time, is given in the following testimony—latest information on a subject that concerns millions of people. Experts describe, too, the newest surgical cures and some promising new chemical controls for cancer.

Quotations are from official House Appropriations Committee records.

Cigarettes and lung cancer were discussed by Dr. Cornelius P. Rhoads, director, Sloan-Kettering Institute of the Memorial Cancer Center, New York City:

“In our institution, Dr. Winter with Dr. Graham made the first American statistical study of the correlation of cancer of the lung with smoking, and particularly with the smoking of cigarettes. There have been eight other studies confirming these observations, including those of Dahl and Hill in England.

“We believe that there is a very real relationship between smoking and occurrence of lung cancer. Smoking certainly is not the only cause of lung cancer, nor does in any sense everybody who smokes excessively get lung cancer, but there is a correlation between smoking and the amount smoked and occurrence of lung cancer, which is a problem of rapidly increasing proportions.

“More recently they have been able to show that the tar produced by artificially smoking cigarettes will cause cancer of the skin in experimental animals. There is a very extensive study under way in another institution . . . In this study large amounts of this tobacco tar are being produced by artificially smoking cigarettes in an ingenious machine. The chemicals

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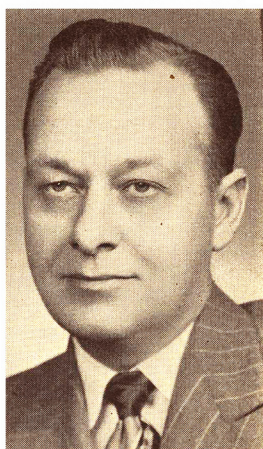
DR. SIDNEY FARBER



DR. CHARLES CAMERON



DR. C. P. RHOADS



DR. NORMAN TOPPING

In sight: a cure for 50 per cent of all cancer patients

which cause the cancer in animals are being extracted from the tar, and their identification is expected in the near future.

"Methods of preventing this, or eliminating from the tobacco the active principle, are under study; as are possible methods for neutralizing the cancer-producing effects of this tar in animals."

Pipe smoking and cigars, as related to cancer, were discussed by Dr. Norman Topping, vice president of the University of Pennsylvania:

"At the American Epidemiological Society meeting I heard a paper on this subject of the relationship between smoking and cancer of the lung. I was quite interested in one aspect of it, and that was that there was a definite correlation, as Dr. Rhoads has said, between cigarette smoking, but there was no correlation between cigar smoking or pipe smoking. The implication there is that it was not the tobacco necessarily which caused the cancer of the lung, but that something in the process of—perhaps the peculiarities of—the cigarette smoking were correlated with cancer of the lung, rather than tobacco per se. Otherwise you would find it in heavy cigar smokers as well, which they did not find."

Dr. Rhoads added:

"This chart [indicating] shows the relationship between smoking and the occurrence of cancer of the lung, from the British study and the American study. When the number of cigarettes smoked per day increased, the mortality per 100,000 of lung cancer increases sharply."

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Dr. Charles Cameron, medical director, American Cancer Society, said:

"It has been suggested that people who smoke are more tense, more nervous, and have a different hormone composition from the people who do not, and that cancer in the lung and conceivably elsewhere may receive emphasis from this, and not from the mechanical act of smoking.

"Since you have brought up the question of the difference between cigarettes and cigars, I venture to say that people who smoke cigarettes are more nervous than people who smoke cigars. But that is an example of the complexity you get into when you start to analyze a specific possibility."

Women smokers and cancer were discussed by Dr. Rhoads:

"This is a matter which the statisticians are having quite a battle about at this time. I have been to a discussion of that not too long ago. There is an increase of lung cancer in women. It is not anywhere near so marked as the increase in men, but then the use of tobacco by women is not nearly so great."

Detection and treatment of cancer were appraised. Dr. Rhoads said:

"I believe substantial progress [in cancer control] has been made, and more is to be expected . . .

"Of all the patients acquiring cancer, we are curing about a quarter. We could cure half if the best methods presently available were applied. That would mean a lot of people. We believe that we could cure more than half if the present research under way continues to be supported and yields results as good as have been achieved."

Dr. Sidney Farber, scientific director, Children's Cancer Research Foundation, Boston, Mass., had this to say:

"Dr. Rhoads pointed out that 25 per cent of the people are saved now. If we could educate the public . . . [and] the medical profession to the extent we would like, 50 per cent would be saved. The remaining 50 per cent are not saved today because of a lack of knowledge on our part (1) to recognize cancer early enough and (2) to cure certain forms of cancer we cannot treat by methods of proved value.

"There is still no diagnostic test which would permit us to take a drop of your blood, or of mine, at this minute and to say with certainty that there is or is not cancer, or to name the part of the body where the cancer is. There is still no understanding of the basic derangement of the cell . . . which makes it become a cancer cell, which would permit us to recognize it early or to pick out a specific form of treatment for that kind of cancer and that kind of cancer only."

New surgical cures were described by Dr. Rhoads:

"This picture [indicating] illustrates cancer of the oral cavity. Here, because of a research development resulting in a new operation, and a means of protecting the patient against the complications at-

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tendant on these radical operating procedures, cure rates for cancer of the voice box and other parts of the oral cavity are rising rapidly . . .

“This patient has been cured. He has been well for five years with no sign of the disease. An enormously destructive cancerous growth, if localized to the tissue in which it arose, can be removed and reasonable rehabilitation attained . . .

“Similarly, in the cancer of the female pelvis, there was instituted about six years ago a very major program because we felt that the cure rates were disgracefully low, somewhere about 30 per cent. Of the women acquiring this disease . . . two thirds were doomed, not only to death, but to a most agonizing, protracted and unpleasant course of dying . . . Operations, at first thought impossible, were developed by which much more extensive removal of the pelvic content, including the cancer, could be done . . .

Here are six of these women who have had the operation, . . . the first group that has been subjected to this radical operation . . . They have been now for five or six years useful, happy citizens.

“By the application of these principles—not necessarily this operation in all cases—rates [of cures] are moving up from about 30 per cent to about 50 per cent . . .”

New chemical controls for cancer were explained. Dr. Rhoads:

“There are chemical procedures being developed which permit the temporary control and restoration of reasonable, but not complete, health to patients who formerly were beyond control. There are methods for the restraint, but not the cure, of widely disseminated cancer scattered widely throughout the body . . .

“We have been interested in certain hormones—chemicals like hormones. Those are chemicals formed by the glands of internal secretions, such as the testes and the gland near the kidneys . . .

“We feel that we have made a real advance. Not only have a great many chemicals of this hormone type been prepared and tested, with the temporary relief of many individuals of cancer of the breast, but a very substantial program is going on involving the use of other chemicals which have the ability, selectively, to injure or destroy the cells which compose cancer without the same destructive action being exerted on the normal tissues of the body . . .

“It was said for a great many years that it would be impossible to find a chemical which would destroy cancer cells and not harm the normal cells, but we now know this assumption was untrue.”

Progress against leukemia was reported. Dr. Rhoads:

“From this program . . . a number of new compounds have come to hand which can be employed to achieve the temporary restoration of a pattern of health in many children, and some adults, with leukemia, a form of cancer of the blood . . .

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“In a new compound which came out of the program . . . we think an improved substance is at hand. Of 45 children treated, 25 showed very substantial improvement, and of these, 11 were insusceptible to aid by compounds previously available. These children are not cured, but they are restored to either apparent partial health, or almost complete health, for periods from months to years, mostly months.

“We have no reason to suppose that these effects cannot be very much improved. We believe that they can.”

Increasing survival rates in cancer were listed by Dr. Cameron:

“Here is the analysis of the experience of the changing picture with respect to the female policyholders of the Metropolitan Life Insurance Co. There has been an 11 per cent decline in the death rate from cancer among those women in a 10-year period.

“In the age group of 55 to 64, when cancer is at its peak, the percentage decline amounted to 15 . . .

“So here is the evidence that we are doing a better job. It is due not only to improved treatment techniques, the extension of surgery and higher-voltage radiation beams and so on, but it is also due to this earlier diagnosis which we have been talking about.”



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