polluted or non-polluted areas and the difference between the prevalence of respiratory disease among non-smokers in polluted and non-polluted areas is small.

Among cigarette smokers, respiratory disease increases with the amount smoked and appears to be more common in polluted than non-polluted areas. Further, some studies have demonstrated that differences in prevalence of bronchitis between workers exposed and not exposed to inhalation of dust are confined to cigarette smokers.[26]

Dr. D. V. Bates, specialist in diseases of the chest, Royal Victoria Hospital, Montreal, said there is evidence that a small part of the increase in chronic respiratory disease could be due to living in modern cities, but that cigarettes unquestionably are the major agent.[27]

Dr. C. W. L. Jeanes, Executive Secretary of the Canadian Tuberculosis and Respiratory Disease Association informed the Committee that the Association is of the opinion that community air pollution is much less important than personal pollution of cigarette smoking as a factor in the production of chronic lung disease. He pointed out that in ordinary air pollution the bronchial tubes are not exposed to the concentration of pollutants one can readily see in cigarette smoke.[28]

With respect to lung cancer, the Committee recognizes that cases of lung cancer occur in those who have never smoked cigarettes or inhaled any form of tobacco smoke and that non-smokers living in the cities show slightly higher rates for lung cancer than those living in the country. In these cases, air pollution may be a factor but some believe the very small difference is mainly due to occupational risks in the towns.[29] However, it is the cigarette smoker who appears to be especially susceptible to whatever additional risk for lung cancer may be presented by certain types of air pollution or other factors such as asbestos or uranium dust inhalation. Further, in Finland, for example, where the population is largely rural and air pollution is a minor problem but cigarette smoking widespread, the lung cancer rate is one of the highest in the world.[30]

The Committee has noted that the same types of epidemiological studies are used to study the effects of cigarette smoking as are used in air pollution research. Any modern air pollution studies must allow for individual smoking habits as well as for choice of occupation and residence. Therefore, one cannot suggest that air pollution is a more important health hazard than cigarette smoking and, at the same time, condemn the studies which have demonstrated the harmful effects of smoking, as some critics do.

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[26] World Conference on Smoking and Health, September 1967. A Summary of the Proceedings, page 86.

[27] Minutes—No. 20—February 27, 1969, page 658.

[28] Minutes—No. 24—April 21, 1969, page 857.

[29] World Conference on Smoking and Health, September, 1967, A Summary of Proceedings, page 33.

[30] Minutes—No. 44—Thursday, June 19, 1969, page 1956.