

Statements

1. Smoking related diseases are such an important cause of disability and premature death in developed countries that the control of cigarette smoking could do more to improve health and prolonged life in these countries than any other single action in the whole field of preventive medicine (WHO Technical Report Series 568, 1975).
2. When a seat of a port general cargocrane must be comfortable for the cranedriver both during crane operation - when he is sitting in a strongly stooping position - and during intervals, it must be provided with the possibility to vary the horizontal position of the backsupport.
3. Comparison of resting-ECG's coded according to the Minnesota Code is justified only after re-classification of all ECG's by the same observer in a blinded fashion.
4. It should be kept in mind that economic cost-benefit studies concerning smoking are not conclusive, since the true gain from reducing smoking will be in human terms and in the reduction of ill-health and premature death, rather than merely in monetary terms (WHO Technical Report Series 568, 1975).
5. The basic concept of the thermophysiological model developed by Stolwijk c.s. with which the thermal comfort can be quantified deserves wide scale application in industrial medicine.
6. The presymptomatic stage of coronary atherosclerosis is - thus far - not detectable with techniques applicable to mass screening.
7. In spite of the being available of criteria which must be met by the temperature resistance of the clothing of forklifttruck drivers the adequate way of protecting these people against low temperatures poses major practical problems.

8. Great caution is necessary in classifying ST-segment depression on the exercise-ECG as ischemic, especially when it occurs during the recovery phase.
9. When increased risk indicators for coronary artery disease (CAD) must be coped with efficiently, this will entail not only a change in attitude of the people but also a change in the management organization of general practitioners.
10. Many social physicians play the part of industrial physician, only few industrial physicians play the part of social physician.

A. Schelling

Rotterdam, 3rd December 1975.