ADVANCES IN Vol. 2
TUMOUR
PREVENTION,
DETECTION AND
CHARACTERIZATION

CANCER
DETECTION AND
PREVENTION

## Advances in tumour prevention, detection and characterization

Editor: C. Maltoni

## Vol. 2

# Cancer detection and prevention

Proceedings of the Second International Symposium on Cancer Detection and Prevention Bologna, April 9-12, 1973

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## Foreword

At the present time much is expected from cancer detection and prevention

in the fight against tumours.

The major aim of this Symposium has been to convene from all over the world scientists whose fields are the prevention and early detection of tumours, and with different approaches and disciplinary experiences (basic oncologists, epidemiologists, experimentalists, pathologists, clinicians, etc.) to present the results of their own studies, to point out the potentialities of operative tools, to exchange up-to-date information and to discuss future lines, programs and priorities.

The Editorial Board

## Contents

_		
	ecti	ires

	19		
Occupational carcinogenesis C. Maltoni  Aspects of experimental carcinogenesis related to cancer prevention in children  N. P. Napalkov  Carcinogenetic hazards from drugs D. Schmähl			
			41
		· · · · · · · · · · · · · · · · · · ·	48
	56		
Problems in the detection of early malignant tumors of the locomotor system  M. Campanacci  6	63		
Panels			
1. Gastric cancer			
Chairmen: N. Zamcheck, U. S. A. and G. Marcozzi, Italy			
Introduction to the panel on gastric cancer N. Zamcheck	69		
	70		
	81		
	88		
Foetal sulphoglycoprotein antigen (FSA) as a possible precursor of alimentary canal cancers I. P. T. Häkkinen	94		
Skin testing with soluble membrane antigens obtained from fetal stomach and			
normal and malignant gastric cells A. Hollinshead and R. B. Herberman 10	02		
Role of skin responses to tumour-associated macromolecules in the diagnosis of neoplasia D. E. H. Tee	05		
2. Cancer of the colon and rectum			
Chairmen: W. J. Burdette, U. S. A. and L. Barbara, Italy			
	11		
Proliferation and differentiation of colonic epithelial cells in lesions of man and			
rodent M. Lipkin 11	16		
Precancerous changes in ulcerative colitis and its association with carcinoma of			
	18		
	24		
	32		
Carcinoma of the colon and rectum. Discussion	36		
3. Cancer of the lung Chairmen: R. Doll, United Kingdom and D. Campanacci, Italy			
	38		
Epidemiological study of lung cancer in the district of Kolín, Czechoslovakia			
	42		
Some reflections on the epidemiology of lung cancer E. L. Wynder and K. Mabuchi  14	46		

Multiple factor etiology of occupational lung cancer I. J. Selikoff and E. C. Hammond	152
Detection of occult lung cancer by cytological examination  M. R. Melamed  The use of mass radiography for the detection of lung cancer  P. Veeze	161 166
4. Cancer of the urinary tract Chairmen: E. H. Cooper, United Kingdom and D. Manfredi, Italy	
Environmental and occupational factors in urinary bladder cancer J. Clem-	
Histological changes in pre-malignant lesions of the urinary tract C. K. Anderson Identification of the malignant potential of bladder tumours and detection	173 177
methods E. H. Cooper  Mass or selective screening for bladder cancer H. G. Parkes	182
Perspectives in the treatment of cancer of the prostate A. Coune and H. J.  Tagnon	186
	189
5. Uterine cervix carcinoma Chairmen: A. Meisels, Canada and P. Quinto, Italy	
Follow-up studies of untreated cervical dysplasia M. Nasiell, K. Nasiell, V. Vaclavinkova and V. Roger	192
The effects of mass screening on morbidity and mortality from cervix cancer W. M. Christopherson	192
	193
6. Cancer of the breast Chairmen: U. Veronesi, Italy and J. Lacour, France	
Assessment of etiological factors in human breast cancer relevant to prevention F. De Waard	
Some reflections on the etiology of the cancer of the breast E. L. Wynder, R. C. Gantt and P. Hill	195
Histological parameters defining minimal breast cancer P. W. M. D.	197 205
De Yoldi	-
What are the potentialities of thermography for detection of breast cancer in a	212
preclinical stage? N. J. M. Aarts and G. Vermey  Practical mass screening for breast cancer P. Strax	215
	219
7. Recent advances on tumours with particular racial and geographical distribution Chairmen: G. P. Warwick, United Kingdom and F. Bergamini, Italy	
Oesophageal cancer G. P. Warwick  Oral cancer and precancerous conditions amongst 50,915 villagers in four states  of India F. S. Mahta and I. I. Birdton.	223
vi mata 1.5. Menta ana J. J. Pinanorg	226
Recent research on naso-pharyngeal cancer: clinical implications A. G. Levin Recent advances in hepatocellular cancer C. A. Linsell and G. Warwick	230
	236
8. Public health aspects of cancer control Chairmen: A. J. Phillips, Canada and L. Gambassini, Italy	
Socio-economic factors in cancer prevention I. Vodopija	238
Socio-economic factors in cancer detection  Education of the public G. Gästrin  G. Riotton	242
The determination of priorities in cancer detection programmes. B. L. W. L.	244
Table health structures for control I. M. Watson	246 251
Public health aspects of cancer control. Discussion	251 256

_	
Sympo	619
OAIIIDO	Sia

1. Endoscopic diagnosis of gastrointestina	ıl tracı	t neoplasms
--	----------	-------------

Value of aimed endoscopic cytology as diagnostic confirmation in esophageal cancer A. Bigotti, N. Campioni, S. Di Matteo and M. Crespi	259
Endoscopic diagnosis of ulcerated gastric cancer (Type III) in the early stages F. Faggioli, R. Corinaldesi, G. Di Febo, A. Romano and G. Biasco	263
Gastric mass survey with the gastrocamera: Performance and results W. Bergmann, W. Rösner, H. U. Rehs, H. Reiner, T. Székessy, H. Mahmud and H. Oshima	268
Gastric mass survey with 70 mm fluorography: Methods and first results	
J. Treichel, H. Heitzeberg, Ch. Behrendt and E. Friedrich Contribution to gastrointestinal tract cancer diagnosis by endoscopic aimed radio-	273
isotope scanning S. Di Matteo, A. Bigotti, V. Casale and M. Crespi The diagnostic value of X-rays, endoscopy, endoscopy brush cytology and biopsy	278
in a consecutive series of 377 patients with gastric disease A. Serck-Hanssen, J. Marcussen and I. Liavag	283
Duodenoscopy in the early diagnosis of tumoral lesions of the Vater papilla M. Banche, L. Bonardi and F. P. Rossini	290
Duodenoscopic wirsungography in cancer of the pancreas B. Watrin, P. Gaucher, R. Jeanpierre, J. Laurent, G. Mauuary and F. Vicari	292
Colonoscopy in the diagnosis of neoplastic diseases: Limits and possibilities  L. Gennari, P. Spinelli and G. Fariselli	300
The case against routine proctosigmoidoscopy M. S. Jaffe	306
Out-patient detection and prevention of cancer of rectum and sigmoid colon  C. A. Muller	308
Laparoscopy associated with diagnostic localization by radioisotopes in the clinical study of liver tumours G. Lenzi, A. Abbati, A. Rossi, F. M. Gritti, E. Turba, A. Grillo and A. L. Bonazzi	314
Early detection of carcinoma of the esophagus the Research of Esophageal Carcinoma, China  The Co-ordinating Group for	321
2. Cytological diagnosis of lung cancer	
Study of sputum smears in cigarette smokers considered as a high risk population A. Simatos and A. Cattan	325
Cytologic investigation of bronchial secretions in bronchopulmonary carcinoma:  Detection, early diagnosis, selection G. Diaconita	332
The potentialities of cytological examinations of sputum in diagnosing and typing pulmonary carcinomas M. Graziadei, C. Maltoni and D. Carretti	337
Bronchial brushing using the flexible fiberoptic bronchoscope F. De Narvaez, A. D. Boyd and H. R. Baker	340
Bronchial brushing: A survey of 177 cases F. Pinet, H. Pison, M. Coulomb, S. Augusseau, J. C. Froment and J. Mouriquand	342
3. Results of screening campaigns for detection of uterine tumours	
Usefulness of a standardized nomenclature G. Riotton  Cancer of uterine cervix — preventable disease: A study of Indian women	347
U. K. Luthra Cytological mass screening of cancer of the uterine cervix in the province of	349
Florence L. Gambassini  Results of cytological screening for early diagnosis of precancerous changes and	355
tumours of the uterus, in Bologna and Province (1966–1972) C. Maltoni,  A. Palazzini and M. T. Faccioli	
11. A wind 2 in the In . I . Puccion	359

xii Contents

New ways of reducing morbidity and mortality from cancer of the uterine cervix L. I. Charkviani, R. A. Chitiashvili, D. D. Gogeliani and T. I. Kvesitadze Evolution, experience and achievements of a uterine cancer detection program in Puerto Rico I. Martinez	363 366
Puerto Rico I. Martinez  Experience with cancer detection in Jamaica (1966-1972) D. C. Watler and K. Robinson	372
A mass survey of gynecologic cancer in Korea J. K. Lee, S. W. Kim, K. Y. Rah, J. K. Choi, T. H. Lee, Y. S. Choi and B. K. Moon  Statistical analysis of observer errors in cervical screening A. Lambourn and	377
H. Lederer	383
Re-screenings for cervical cancer M. Grönroos and R. Punnonen  Fate of women with detected cancer of the genital organ during mass examinations (1966-1968 to 1971-1972) S. Soszka, W. A. Kazanowska, D. Filipowska and J. Goszczyński	388
Observations on the evolution of cervical lesions in women P. Bagović, M. Bačić, J. Ivić, M. Bolanča, I. Vodopija and S. Audy	398
4. Screening for breast cancer	
The value of clinical examination in breast diseases C. Johnsén, N. Bjurstam, K. Hedberg, A. Hultborn and N. Johansson	404
Thermography in the diagnosis of breast diseases: A preliminary report C. Johnsén, N. Bjurstam, K. Hedberg, A. Hultborn and N. Johansson	409
Practical aspects of early diagnosis of breast cancer with the aid of thermography and mammography O. Melander	414
Mammography in the diagnosis of breast cancer N. Bjurstam, K. Hedberg, A. Hultborn, N. Johansson and C. Johnsén	416
Mammography screening for breast cancer in the province of Florence G. C. Maltoni and M. Cappellini	420
Importance of mammography in cancer detection: Contribution of cytology. A radio, anatomo, cyto and clinical confrontation A. Vandenbroucke-Vander-	
wielen, M. A. Sergent-Miller and H. Maisin  Needle aspiration cytology in the diagnosis of breast cancer K. Hedberg,	422
N. Bjurstam, A. Hultborn, N. Johansson and C. Johnsén  The results of screening in Ravenna and Province for early diagnosis of preneoplastic lesions and tumours of the uterus and the breast G. Buzzi, A. Ama-	429
dori, M. Casotti, A. M. Uguzzoni and C. Maltoni Breast screening of executive women at the B.U.P.A. medical centre  J. B. Davey,	432
B. H. Pentney and A. M. Richter  Early breast cancer detection in a Swedish city. A preliminary report on health screening of half the population of a medium sized Swedish city. S. Jakobs-	434
son, O. Melander, B. Lundgren and T. Norin Scheduling of examinations for early detection of breast cancer R. L. A. Kirch	437
and M. Klein  The results of screening in Bologna and Province, 1967-72, for early diagnosis of preneoplastic changes and tumours of the breast C. Maltoni, G. Corradi,	447
F. Grosso and L. Pieri Eight years of experience in prevention and detection of breast cancer	451
I. Mlinarić, M. Bašić and Š. Knežević Early detection of breast cancer in Israel Z. Teva and N. Trainin	453 456
5. Identification of high risk groups	
Prediction of cancer incidence in Finland for the year 1980 T. Hakulinen,	ACI
L. Teppo and E. A. Saxén  Cancer in young Connecticut adults, aged 15-29 years, 1950-1969 B.  Christine, P. Sullivan and J. Flannery	461 466

Contents	Хііі
Cancer rates for uterine cervix and breast, observed at an early detection clinic:  Presentation of some characteristics of these two populations of cancers  Y. Fassin	472
Relative rates of breast and cervix cancers in mass screening: Evaluation of high- risk groups H. Maisin, A. Vandenbroucke-Vanderwielen, M. A. Sergent-Millet	478
Some possibilities for establishing risk groups in the female population by mass screening for gynecological cancer L. Vodopija, P. Bagović, M. Bačić, J. Ivić, M. Bolanča and S. Audy	488
The epidemiology of invasive carcinoma of the cervix in Georgian SSR (1965–1971) D. A. Gvamitchava, L. I. Tcharkviani, Z. J. Khitarishvili and T. I.	491
Kvesitadze Further studies in the aetiology of uterine cervical cancer in South India V. Shanta and A. Ramachandra	494
Ethnic and geographic factors in high buccal pharyngeal cancer rates in Canada  D. I. Anderson	502
Some high risk groups in cancer of the oesophagus J. C. Paymaster, P. Gangadharan and D. N. Rao	507
Modern X-ray diagnosis of carcinoma of the colon and rectum  Antecedents of colorectal cancer: Ulcerative colitis  J. Altaras	520 525
6. Organizations of mass screening campaigns	
A new approach to cancer detection A. I. Sutnick, D. G. Miller and J. W. Yarbro	529
A multiphasic mobile cancer detection unit: Cancer control implications J. Lynch, H. T. Lynch, W. Harlan, M. Swartz, J. Marley, L. Meyer, E. Grinnell,	533
C. Kraft, H. Guirgis and A. Krush Delay deters cancer detection A. J. Krush and H. T. Lynch	541
Early detection cancer screening: 8 years incidence and findings in 10 cooperative rural settlements F. Ch. Izsak, H. J. Brenner and J. Medalie	544
Health education activities in Hungary A. Nagy and J. Métneki The significance of team work in the early detection of breast cancer in women	560
P. Bagović, M. Bolanča, Z. Maričić, P. Nola, M. Ribarič and I. Vodopija Evaluation of publicity and self-detection procedures for breast cancer D. J. Hill	563 566
Psychopathological profile of the population attending a cancer detection clinic Y. Fassin, G. Van Hemelrijck and P. Ch. Van Reeth	570
7. Paraneoplastic manifestations and malignancy associated changes	•
Cell alterations related to cancer (MAC according to Nieburgs) M. Martuzzi, D. Amadori, A. Ravaioli and F. Padovani	573
Cytological features of squamous metaplasia and nuclear structures of the cylindrical bronchial cells in patients with lung cancer M. Martuzzi, A. Saragoni and L. Lazzari	579
Nuclear cell structures in mastopathy and related lesions concomitant with	586
Morphological features of ductal hyperplasia, ductal papillomatosis and lobular hyperplasia associated with breast cancer M. Martuzzi, A. Saragoni,	592
A. Ravaioli and M. Savoia  Blood cell types associated with bovine lymphosarcoma. The occurrence and significance of nuclear malignancy associated changes in the blood of normal and leucotic cattle V. E. O. Valli, B. J. McSherry, J. H. Lumsden, M. E.	374
Smart, H. H. Grenn and B. Heath	598

## 8. Tumour specific antigens

The carcinoembryonic antigen (CEA) and a normal colonic mucosa antigen (NC) in neoplastic and non-neoplastic disorders of the gastrointestinal tract G. Tappeiner, H. Denk and J. H. Holzner	
Further comparisons of separated intestinal cancer, fetal intestinal and normal intestinal soluble membrane antigen and the role of tumor related antigens in the diagnosis and treatment of intestinal cancer A. Hollinshead, P. Gold and R. Herberman	608
Evaluation of specific antibodies in human sera by a CEA antigen isolated with a modified method E. Sega, F. Isabella, M. Crespi and G. Citro	616
Serum alpha-fetoproteins in chronic liver diseases and primary cancer of the liver in children and adults J. Milosavljević, M. Stajić, D. Filipović, N. Vilhar and J. Teodorović	621
Immunochemical studies on a tumour-associated antigen in human lung cancer E. Sega, P. G. Natali and G. Citro	627
Soluble membrane antigens of human malignant lung cells T. H. M. Stewart, A. C. Hollinshead and R. B. Herberman	632
Specific soluble membrane antigen of malignant and normal breast cells: Delayed hypersensitive skin reactions in cancer patients  A. Hollinshead, W. Jaffurs,  L. Alpert and R. Herberman	638
Application of serum alpha feto-protein assay in mass survey of primary carcinoma of the liver The Co-ordinating Group for the Research of Liver Cancer, China	647
Critical	655
Index of authors	650

## Lectures

## Developments in cancer prevention through environmental control

John Higginson

International Agency for Research on Cancer, Lyon, France

#### Introduction

While there are several approaches to the problem of cancer control, the present discussion is largely oriented to the role of the environment in human cancer.

Cancer prevention through the identification and subsequent removal of causative factors was clearly implied by the work of Potts in the late 18th century. This approach was later expanded in the occupational studies of the present century which provided the base for modern environmental carcinogenesis. However, the full potential of the epidemiological method in cancer control was only fully appreciated after the extensive studies on lung cancer and cigarette smoking in the fifties. Today the potentials and limitations of epidemiology and experimental carcinogenesis, which form the basis of environmental carcinogen studies in man have been established. Nonetheless, it has become increasingly clear that it may not be possible to initiate preventative measures following the identification of the cause of a cancer, in the absence of a suitable social and technological background. Thus, man has proved notoriously unwilling to change a pleasurable cultural habit, such as cigarette smoking, no matter how hazardous. The modern oncologist must therefore take into consideration both the legislative and the social aspects of prevention, in addition to the scientific problems.

## The role of epidemiological studies

The major contributions of the epidemiological method to cancer control include the following areas:

1. The identification of environmental hazards to which man is already exposed, e.g.

asbestos, cigarettes, occupational risks, etc.

2. The observation of changes in the incidence of a specific cancer, indicating the possible entry of a new carcinogenic agent into the environment. Such secular changes are illustrated by the associated increase in cigarette smoking with the rise in lung cancer, and the appearance of mesothelioma following exposure to crocidolite.

3. An improved understanding of the biology of human cancer can be used:

(a) to explore the action of suspected environmental stimuli through the appropriate biochemical investigations, e.g. the development of comparative metabolic studies in human and animal tissues (Montesano and Magee, 1970);

(b) to determine the nature of animal models best approximating to the situation in man as a basis for the establishment of systems for testing suspected carcinogens, e.g.

selection of dog for testing aromatic amines as a bladder carcinogen;

(c) to permit the application of sophisticated laboratory techniques to epidemiological studies on human cancer, e.g. endocrine studies in breast cancer (Bulbrook and Thomas, 1964; Bulbrook and Hayward, 1967); sero-epidemiological studies on African childhood lymphoma (Biggs et al., 1972).

4. The identification of levels of exposure to potential or known carcinogenic stimuli in the environment which do not apparently modify the incidence of cancer. Such studies are invaluable in assessing whether or not an 'acceptable risk' level does exist for man.

More recently, in addition to investigations on the direct carcinogenic effects of external stimuli, changes in host susceptibility, e.g. nutritional and immunological status, as a result of exogenous stimuli, have received attention (Doll and Vodopija, 1973). The epidemiological method is equally suitable for such studies.

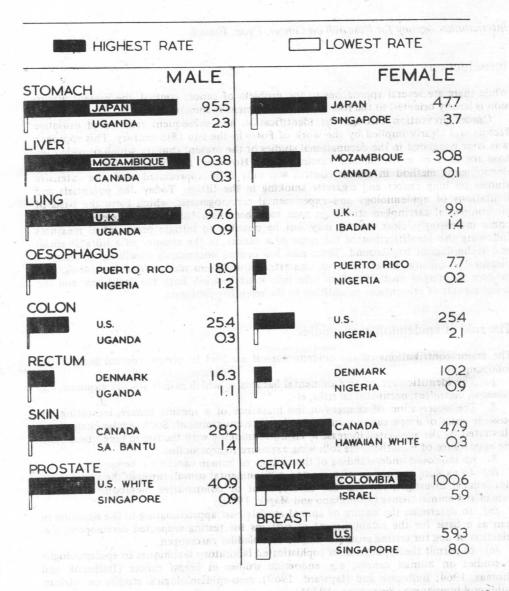


FIG. 1 Age-adjusted cancer morbidity rates with theoretical low rates illustrating cancer incidence in areas of high and low cancer rates. Black bar represents areas with the highest known cancer rates; white bar represents those with the lowest reported rates.

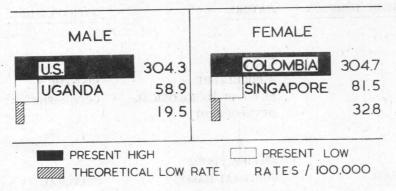


FIG. 2 Age-adjusted cancer morbidity rates with theoretical low rates, indicating the theoretical low rate that could pertain if the lowest incidence rates were summated from all countries.

#### Cancer and the environment

Amplifying earlier epidemiological studies, it has been calculated by various authors that the aetiology of approximately 80% of cancers in western industrialized countries are directly or indirectly dependent on environmental factors (Boyland, 1967; Doll, 1967; Higginson, 1969) (Figs. 1 and 2). That this calculation is a reasonable estimate is suggested by analysing the aetiology of individual cancers of known cause (Higginson, 1969). Thus, 90% of cancers of the mouth and lung are caused by factors which have already been identified. On the other hand, for cancers of other sites, such as colon, rectum, stomach and breast, no satisfactory hypotheses as to aetiology are available.

While individual susceptibility has an important role, even for such strong carcinogenic stimuli as cigarette smoking, non-hereditary factors, with a few exceptions, would appear of paramount importance (Haenszel, 1961; Haenszel and Kurihara, 1968) as suggested by studies on migrant populations. Although host factors may be of significance in relation to cancers of the breast and genital system, it cannot be excluded that such factors may not be wholly or partly dependent on environmental stimuli possibly often operating in utero or in very early life. From the viewpoint of practical prevention, Huebner's 'oncogene' hypothesis, if confirmed, would not reduce significantly the necessity to identify environmental factors, since the theory implies that the latter activate the 'oncogene'.

## Identification of exogenous carcinogenic factors

While from a philosophical viewpoint carcinogenic stimuli may represent the interaction of a multitude of factors, e.g. historical, climatic, sociological, etc., such a vague approach to identification has so far led to few practical benefits. Thus, a distinction should be made between such distant and relatively immeasurable factors and 'intermediate' or 'immediate' stimuli (Fig. 3). These terms are not used here with the same connotation as 'proximate' or 'ultimate' carcinogen as in experimental carcinogenesis, but tefer to stimuli which can be expressed in quantitative or qualitative terms for practical purposes, e.g. specific chemicals, cultural habits, etc.

#### Method of exposure

Man is most commonly exposed to exogenous carcinogens through direct contact, inhalation, ingestion or by the parenteral route. Direct contact occurs in certain occupations, e.g. shale oil workers, or as a result of a cultural habit, e.g. betel chewing. Occupational