was designated as the coordinating agency for industrial hygiene activities in the national defense effort. The program worked closely with the Army, the Navy, the Maritime Commission, the War Production Board, the War Manpower Commission, the Department of Labor, and other agencies in providing adequate protection for industrial manpower. One of the program's major activities was the protection of employees in Government-owned, contractor-operated munitions plants. During the war years, the program also initiated pioneer studies in aviation medicine, effects of exposure to elevated and reduced pressures, and the efficacy of breathing apparatus.

At the end of World War II, emphasis was shifted from a strong research effort to the development of programs in State and local governments. As a result of this activity, occupational health programs are found in 86 jurisdictional units in 41 States. Because of this shift of emphasis, the administrative location of the program was changed from the National Institutes of Health to the Bureau of State Services. In 1949 the program established a regional center in Salt Lake City, Utah, to provide services to the Western States. In 1951 the research and investigation activities of the program were moved from Washington to Cincinnati, Ohio.

There is little doubt that the work of the program has a significant role in bringing about improved health conditions in industry. In addition to its research and investigative activities, it has served as a training ground for many individuals who were ultimately to become outstanding leaders in the field of occupational medicine and hygiene. The training of these individuals, who later went into private industry and universities, was probably the dominant factor in elevating industrial medicine from a first-aid endeavor to the high-prestige level that it has today in providing total preventive health services for workers. Although much remains to be done in the provision of medical services for workers in small plants, the Nation can look with pride to the occupational health services which are being provided by our major corporations.

Changing times bring about changing concepts and problems. Although the program is yet concerned with the classical occupational diseases which have not been totally eliminated, its present planning embraces the concept of the total health of the industrial worker. It is known that although occupational diseases constitute a part of the total morbidity-mortality problem, a much larger proportion is due to those diseases in which the occupational component has not been fully defined. With this in mind, the program is now planning attacks on broad disease entities rather than isolated disease problems. For example, a respiratory disease research unit is being established which plans to attack the total problem of occupational respiratory diseases rather than directing concentrated effort to specific disease conditions such as silicosis or coalworkers' penumoconiosis.

4. Level of operations. (See table 1.)

Program: Division of Occupational Health.
Department or agency, and office or bureau: Department of Health, Education, and Welfare; Public Health Service; Bureau of State Services (Environmental Health).