

be different, but not necessarily, than the dosages that would affect fabrics or trees or other things.

Mr. FELTON. So you would exercise section 108(k), then, only in relation to No. 1 or No. 2?

Dr. MIDDLETON. Health of people.

Mr. FELTON. Including sick people?

Dr. MIDDLETON. Health of all the people, including sick people. Let us not forget that we are talking about large numbers of people. By its very nature, air pollution seldom, if ever, affects only a few people at a time. In an area of polluted air, everyone is affected, to one degree or another. Most of the effects are neither seen nor immediately felt, but they are nonetheless real. It may take 20 years, or even more, for emphysema to develop, even among people who live where the air is heavily polluted. This is a real threat to the health of tens of millions of urban dwellers. Furthermore, the numbers of people who already have respiratory disease and who are particularly vulnerable to air pollution are by no means small. I believe Dr. Landau has some figures on this.

Dr. LANDAU. Based on data from National Health Survey for the period July 1966 through June 1967, the number of people in the United States with bronchitis, without mention of emphysema, was 3,980,000; emphysema, without mention of bronchitis, 726,000; bronchitis and emphysema, 197,000.

The same National Health Survey estimates that there are 5,380,000 people in the United States who have asthma. This would make more than 10 million people who have respiratory ailments which studies have demonstrated are associated with air pollution.

Mr. AUERBACH. May I suggest that we go through that list of questions that you presented in the order we have them. We can come back to any which you want to clarify.

Mr. CARPENTER. As a preamble to that let me read a couple of paragraphs from the transcript of January 18, which Mr. Daddario called to my attention as exemplifying his concern. He was talking to Dr. Blomquist.

What do you see that we used to do in order to be able to come to such a clear understanding about this or to a much clearer one than presently exists so we can eliminate this confusion and have a level of confidence about the criteria established by which people can then move ahead and get support and be willing to act under emergencies as they arise?

Then, on a following page, Mr. Daddario states:

Wouldn't it have a great deal of effect on what we are willing to pay if we could know that it does have an ill effect at a quicker level than we expect or if we can understand that it does not? If it does in fact aggravate those who already have some kind of an illness, we would then approach it in a different way altogether.

So, if you want to read the questions, then, and your replies, that might carry us on.

Mr. AUERBACH. OK. Do you want me to read them? I guess we had better do that.

The first question:

A variety of data suggests that air pollution is not getting worse from year to year in major cities. These facts indicate that the hazard lies in the air pollution episode when weather conditions magnify normal pollution loads to the atmosphere.