

The Cotton Dust Papers: Science, Politics, and Power in the “Discovery” of Byssinosis in the U.S. *By Charles Levenstein and Gregory F. DeLaurier, with Mary Lee Dunn.* Amityville, N.Y.: Baywood, 2002. xi + 160 pp. Cloth, \$32.95. ISBN 0-895-03265-1.

Reviewed by Christian Warren

“Monday fever” is a condition long common among cotton-mill workers. Upon returning to work after a weekend’s rest, the affected worker’s chest tightens painfully as his bronchial tubes and lungs swell. Breathing becomes labored; he wheezes and coughs as his airway fills with thick mucus. In the early stages, the Monday fever subsides by the end of the day, and the worker can complete another week in carding or other work that involves handling unprocessed cotton—the jobs most associated with byssinosis, also known as “brown lung.” Byssinosis is far from a mere workplace annoyance, however. Over the years, the discomfort of “Monday fever” often develops into a permanent condition that drains vitality and robs workers of years of life. According to the National Institute of Occupational Safety and Health (NIOSH), 140 Americans—almost all of them from the Carolinas and Georgia—died from brown lung between 1987 and 1996. As with most occupational diseases, the number killed represents the tip of an enormous iceberg of morbidity and deaths chiefly attributed to other causes but hastened by brown lung.

The Cotton Dust Papers is a short book with a big mission, which is to expose “insidious social arrangements—rules of the game—that cause real suffering” (p. 12), and a clearly stated thesis: “a firm will most likely break ranks with others in its industry, admit to a health problem in the workplace, act to ameliorate that problem when it faces a coalition of progressive social actors that forces it to see such moves as being in their self-interest” (p. 148). The subtitle promises a case study that will be subjected to theoretical analysis, thereby rendering its findings generally applicable to other studies. In fact, the authors explicitly start down this road, spelling out their purpose in their introductory section, which is entitled “Theoretical Concerns.” They do not, however, dig deeply enough into their particular subject—let alone the history of the southern textile industry—to yield a satisfying analysis; they have produced instead an idiosyncratic and frustratingly simple overview of what is in fact a subtle disease with a complicated social and political history.

In recent years, medical, labor, environmental, and business historians, as well as scholars from other social sciences, have made good use of the history of occupational illnesses.

Studying sickened workers has proven to be a powerful lens through which to examine businesses, revealing intricate networks of disparate actors at work, as businessmen, workers, unions, reformers, legislators, bureaucrats, and medical professionals have struggled to identify, abate, and adjudicate—or merely ignore—the health risks arising from modern manufacturing. This literature makes clear that the nature of these risks varies widely, on a continuum that extends from the obvious horrors and unambiguous chain of causation tying work and disease in such places as phosphorus-match factories, to the contested and politicized etiology of such chronic occupational illnesses as repetitive stress injury, multiple chemical sensitivity, or sick-building syndrome. It is important, when studying the responses of key actors involved in the discovery and regulation of occupational illnesses, to explore where on this continuum the subject lies—or, to take the historical view, where it is *seen* to lie at particular times in particular places. The book under review offers little of this context.

While *The Cotton Dust Papers* makes clear that researchers both inside and outside the textile industry knew about brown lung from at least the 1930s and provides considerable detail about some of the studies conducted and forgotten between then and the 1970s, it does little to explain why, at a time when considerable scientific and regulatory resources were being applied to silicosis, lead poisoning, asbestosis, and other industrial killers, brown lung received so little attention. Perhaps what is most lacking here is a comparison between the relative dangers posed by cotton dust and other hazards of occupation. It is easy to come away from the book imagining that brown lung and black lung are of a piece in the Grim Reaper's armamentarium, when in fact, in the same period mentioned above, almost 20 times as many Americans (2,787) died from silicosis, almost 70 times as many (9,614) died from asbestosis, and 130 times as many died from black lung, or pneumoconiosis (for earlier periods, the contrast would undoubtedly be even more stark). The point is not that byssinosis is undeserving of a book-length historical analysis, but that no understanding of industry's and government's failure to respond will be forthcoming if these comparisons are not made for every period considered.

The Cotton Dust Papers is clearly a work of advocacy by engaged—and justifiably enraged—scholar-activists, and it may be fruitfully read by anyone interested in the researchers who studied byssinosis and the textile industry's efforts to resist their scrutiny. Some of the book's most interesting sections draw upon industry correspondence, much of which came to the authors through Charles Levenstein's service as expert witness in a lawsuit, *Williams v. Lanier et al.*, brought on behalf of workers with brown-lung disease. This last fact raises a troubling issue about a growing trend in books describing the contests between industries and sickened citizens. The authors of *Cotton Dust Papers* join a growing rank of scholars whose research rests upon

privileged communications acquired from their employers, law firms engaged in high-stakes lawsuits, whether as plaintiffs or defendants. These scholars, we are told to believe, will subject this evidentiary bounty to the same interrogation that historical scholars always employ in pursuit of the unattainable “noble dream” of objective analysis. We are also to accept that disparate power relations between the lawyers and “their” expert witnesses do not muddy the waters. Postmodernism apparently didn’t take.

Christian Warren is academy historian at the New York Academy of Medicine and adjunct assistant professor in Columbia University’s Mailman School of Public Health. He is the author of Brush With Death: A Social History of Lead Poisoning (2000) and “Toxic Purity: The Progressive Origins of America’s Lead Paint Poisoning Epidemic,” Business History Review (Winter 2000). His current research concerns the social and health consequences of Americans’ century-long migration to the great indoors.