



MINING JUSTICE



Like many occupational diseases, the coal industry's representation of Pneumoconiosis (Black Lung disease) was rooted in mischaracterization, denial and lies.

For over a hundred years, as miners in West Virginia died from exposure to coal dust, the coal industry and doctors on their payroll refused to acknowledge the problem and denied the very existence of the disease.

When it became apparent to the public that miners were suffering from abnormally high numbers of chronic lung conditions, mine operators attempted to extoll the virtues of the symptoms, claiming that the choking and coughing would clear the miners' lungs and keep them healthy. Doctors on their payroll even produced studies which claimed that it helped prevent tuberculosis.

It was Dr Donald Rasmussen at Miners Memorial Hospital and his colleagues Dr IE Buff and Dr Hawey Wells who provided medical evidence and played a crucial role in the recognition of Black Lung disease.

When Dr Rasmussen moved to the Miners Hospital, he observed that many coal miners were suffering from severe breathing problems.



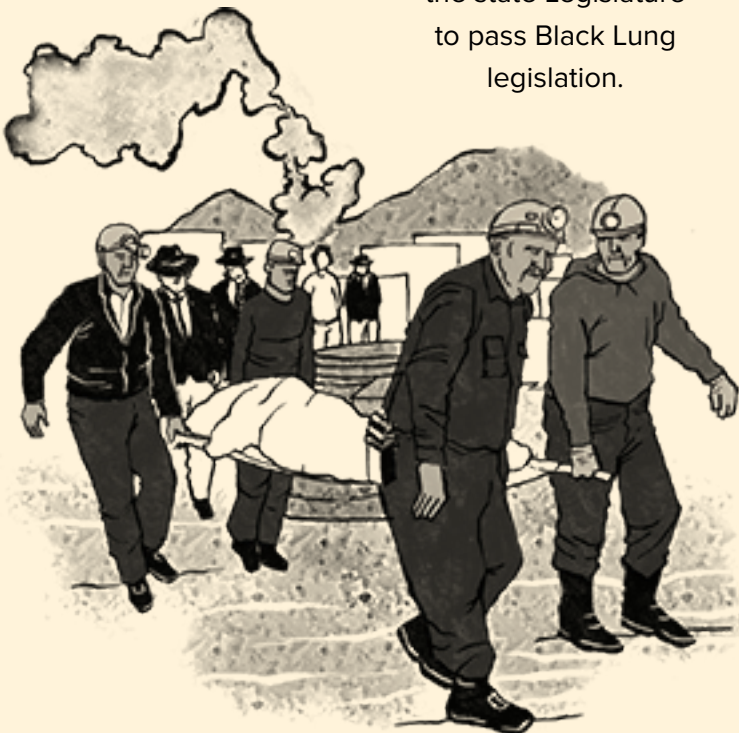
As a result, he began dedicating a good portion of his time to studying Black Lung disease. Dr Rasmussen's evidence-based approach and detailed research helped to prove that coal mine dust causes breathing problems that may not show up on x-ray and may not show up without quality exercise testing.



Dr Rasmussen became a vocal advocate for miners — at a time when their union was doing little about Black Lung.

He was one of the key players in the group called Physicians for the Miners' Health and Safety that provided medical support for miners' experiences with Black Lung disease at a time when most of the medical community refused to even acknowledge it. Dr Rasmussen, Dr Buff and Dr Wells helped spark growing concerns about Black Lung disease throughout the coalfields, when they spoke in union halls, schools, and churches; they testified before the Congress and joined several protest rallies.

The Black Lung issue came to national attention after a methane and coal dust explosion killed 78 miners in West Virginia on 20 November 1968. In the wake of that tragedy, coal miners went on strike on 18 February 1969, protesting the failure of the state Legislature to pass Black Lung legislation.



By 5 March, when the state Senate began debating the bill, more than 40,000 of the state's 43,000 miners were on strike. Drs Rasmussen, Buff and Wells played a central role in backing the strike and pressuring the state Legislature to pass its first Black Lung law. They helped counter many medical professionals who continued to deny that Black Lung was a serious health threat. Their advocacy contributed to the passage of the landmark 1969 Coal Act which set the first federal limits on miners' exposure to coal mine dust and created the federal Black Lung benefits system for miners disabled by the disease.