March 4, 1941

Dr. Philip Work
333 E. 16th Street
Denver, Colorado

Dear Phil:

I had hoped to write you sooner to thank you for your many courtesies to me while in Denver, but immediately after my return, Dr. Kehoe and I went East to discuss this matter with the Public Health Service. They are now getting material together for recommendations for a code for plants of this type, and we hope that after the information is widely enough disseminated, there will be no recurrence of affairs of this type.

I have written Jack Ness today and given him in some detail the analytical results on the other patients that we saw. Those obtained on [redacted] were extremely high, in fact, higher than any we have seen before. A small sample of urine obtained the day before he took off into his last maniacal episode, contained 3 milligrams per liter and the large samples collected over a period of some days, contained in the neighborhood of 2 milligrams per liter. These are astonishingly high results and indicate more severe exposure than we have yet seen. The mean value for normal urinary excretion is in the neighborhood of 0.03 milligrams per liter. Of the group of samples that we obtained, only one, namely, on [redacted], approximated this level, the others ranging between 0.12 and 3.00. One of the men, young [redacted], had 2.00 milligrams per liter at the time we examined him on February 14. This can mean only one thing, and that is, that he has had recent severe exposure, so that his history was not reliable as he gave it to me and further, it is likely that he will have acute symptoms, and this becomes a certainty if his exposure is continued. He may be fooling around with another plant or doing some work at home.

These cases were all very interesting clinically and from the point of view of lead excretion, and it occurred to me that you and Jack might like to present this case or these cases to your local medical group. If you do, I shall be very happy to let you have the clinical notes I

made on the other men and all of our analytical data with suitable comments. If it occurs to you to do this, it would be of considerable interest to follow [redacted] excretion, say once a week, until his urinary excretion returns to normal. We find that symptoms and some disability usually persist until the urinary excretion returns to normal. In most cases this has taken from 6 weeks to 3 months, after the exposure, but in [redacted] case the values were so high that a longer time may be required. I told Jack that if you wish to follow the excretions, to let me know and I will forward suitable containers in mailing tubes and we will analyze them as we receive them and report them to you.

I have been back long enough to definitely miss the "Old Judge". I trust that you are taking good care of him in my absence.

Please remember me most kindly to Ruth and your associates and remember that we are looking forward to seeing you in the spring.

With best regards, I am

Cordially yours,

WM:vr

Willard Machle, M. D.

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