

Lead Industries Association

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April 29, 1949

Robert A. Kehoe, M. D., Director
Kettering Lab. of Applied Physiology
University of Cincinnati
College of Medicine
Cincinnati 19, Ohio

Dear Bob:

At the risk of seeming to plague you unduly about this and that, I would like to get your reaction to another and to me a very interesting question.

The April, 1949 issue of the Consumers' Research Bulletin contained the following item:

"Tooth marks in orange and yellow orange crayons provided chemists of the Connecticut State Experiment Station with a clue to the illness of a 2-1/2-year-old boy who suddenly turned blue in his crib. The child was saved from death by quick action of doctors at the hospital to which he was rushed. Analysis of the crayons indicated the presence of lithopone, a white paint pigment. The chemist pointed out that lithopone is essentially a mixture of barium sulfate and zinc sulfide and reasoned that the zinc sulfide would, if taken internally, react with the acid gastric juices to generate hydrogen sulfide. It may have been absorption of hydrogen sulfide into the blood stream that caused the serious condition which nearly brought death to the baby."

I have been in communication with Dr. Harry J. Fisher, who is in charge of the Department of Analytical Chemistry at the Connecticut Agricultural Experiment Station and have his confirmation that the above is the correct expression of his opinion.

KE 0014754



Robert A. Kehoe, M. D.

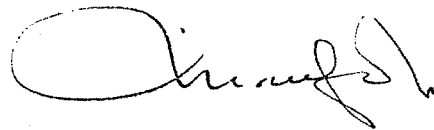
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Well and good. If we are to accept this etiology, why do we not hear of similar childhood cases caused by ingestion of lithopone paints, analagous to the lead paint cases in infants and children with which we are all too familiar?

Have we been missing the boat?

Sincerely,

A handwritten signature in dark ink, appearing to read 'R. A. Kehoe', written in a cursive style.

mb/sd

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