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ASSOCIATED ETHYL COMPANY LIMITED

Registered Office: THE ADELPHI, LONDON, W.C. 2

Address all communications until further notice to:
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OUR REF. ST/3/310.

YOUR REF.

28th February, 1947.

Dr. R.A.Kehoe,
The Kettering Laboratory,
College of Medicine,
University of Cincinnati,
OHIO.

Dear Dr. Kehoe,

Attached hereto is a letter signed by Dr. Cassells, but which is, in fact, a joint opinion with Dr.Davison concerning the case of [redacted] one of the men, who,you will recall, contracted lead intoxication at Falmouth in 1945. We would be grateful if you would let us have your opinion regarding the point raised in the last paragraph, namely the permanence of mental symptoms following TEL poisoning.

For your information we are also enclosing copies of two other letters regarding Drury. These will give you a better picture of his history and will undoubtedly be of some value in your records.

Yours sincerely,

J R A Bevan

MAP/am.

KE 0021508

[redacted]

N 24606

BRITISH ETHYL CORPORATION LTD.

NORTHWICH,

CHESHIRE.

26th February, 1947

J.G. Leaf, Esq.,
Associated Ethyl Co. Ltd.,
Artillery House,
Artillery Row,
LONDON, S.W.1.

Dear Mr. Leaf,

[redacted]

With reference to your letter of 6th February about this man, the result of the analysis which was carried out on a sample of his urine by Mr. E.R. Smith of the Courtauld Institute, is as follows:-

Urine Sample received 27.1.47. from Falmouth

	Vol ml.	Mg Lead in Sample litre	U G	gm. ash	Mgm. Pb/ gm. ash	S.G.
[redacted]	434	.0120 .028	.037	6.20	1.95	1018 Clear.

(E.R. SMITH).

This result shows that [redacted] now has a normal amount of lead in his urine and is no longer suffering from active lead intoxication.

His oddity of behaviour, bad dreams, sleeplessness, depression and confusion, which are mentioned in Dr. Andrews' letter of 15th November, 1946, a copy of which was sent to Mr. Bevan, must therefore be

(a) the result of previous lead intoxication

(b) due to an inherent nervous instability

(c) due to an inherent nervous instability aggravated by lead intoxication

(d) the result of some other toxic factor which is still operating.

KE 0021509

(Contd.)

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J.G. Leaf, Esq.,
The Associated Ethyl Co. Ltd.

26th February, 1947

In considering these one must take into account the following facts:-

With regard to (a) it is extremely rare indeed, if not actually unknown, for the mental symptoms and signs of tetra ethyl lead intoxication to be permanent. When recovery occurs - as, according to Dr. Coleman's letter of 8th March, 1946 to Professor Dodds, it did do - one does not look for a return of symptoms. If they do return it is unlikely that lead intoxication is the cause.

With regard to (b) there is evidence in the history which I took from [redacted] when I saw him that he had in fact some inherent nervous instability in that his reactions to certain incidents in his life were somewhat abnormal.

With regard to (c) it is reasonable to accept as probable that lead intoxication aggravated his nervous instability and precipitated the mental illness on account of which he was admitted to Bodmin Mental Hospital.

With regard to (d) there is certainly a possibility that his condition as described on 15th November, 1946, may be due to medication which he has received since his discharge from Bodmin Mental Hospital as Dr. Davison suggests, and this possibility should be investigated.

In the meantime for the information of ourselves it would be helpful to have an expression of Dr. Kehoe's views on the question as to whether he has known of any case of tetra ethyl lead poisoning (or of lead encephalopathy from inorganic lead) where the mental symptoms have been permanent. If the case should come to court and Dr. Davison or I be obliged to appear, it would sustain our confidence appreciably to know that no cases showing permanent mental derangement are known to Kehoe.

Yours sincerely,

DAVID A.K. CASSELLS.