

December 1, 1950

Dr. J. R. F. Williams,
Boots Pure Drug Co. Ltd.,
Station Street,
Nottingham, England.

Dear Doctor Williams:

Please accept my thanks for your letter of November 15, and for the information about B.A.L. glucoside. As my letter probably indicated, we are especially interested in the use of the agent on patients. We see enough patients from time to time that it would be entirely possible to work out our observations on the effect of the material, within a reasonably short period of time. Inasmuch as the product is undergoing clinical trial in your country, perhaps we would be wise to wait a while rather than to undertake its use at this point. Certainly there is no good reason for our trying it out experimentally on patients at this time, if such clinical tests are under way.

If you think that we could be of assistance in contributing to the knowledge of this subject, by carrying out some observations on the toxicity of the product itself, we should be glad to do so. Our efforts had probably better be devoted to the study of toxicity in relation to chemical stability, since we have not been engaged previously in any examination of the anti-arsenical activity of any of these products. If you have any suggestions along this line as to what we might do that would be useful, I should be glad to have them. If in line with your suggestion you should care to send along some quantity of the product by which the experiments could be conducted, we should appreciate it very much. Otherwise I am disposed to feel that we might wait a while, before undertaking to use the product.

We are very much interested in this situation, and I sincerely hope that we can be kept informed of the developments, so that we can begin our work at the earliest feasible time. If the glucoside could be used effectively in connection with persons who have been unduly exposed to lead in industrial work, it would serve an exceedingly useful purpose. It goes almost without saying, in informed and intelligent medical circles, that the only proper approach to this problem is the prevention of hazardous absorption of lead. This can be done adequately. Unfortunately it is not done, and therefore one has the problem of dealing with persons who are not actually ill but who cannot continue their work within a lead trade because of the risk involved, and who cannot be returned to their jobs promptly or even after a short time, because of the fact that the lead exposure associated with their work is hazardous. We could do a great deal in properly selected cases, if we had a means

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of getting rid of the absorbed lead in a more expeditious manner, and with safety. No such method is available at the present time and it seems unlikely that such a method will be available. On the other hand, if this could be accomplished by the administration of B.A.L. glucoside, the product would come into rather wide use for this purpose. If it is to come to use for this purpose, it must be done properly, for otherwise its use has within it the seeds of a very serious abuse. It will be picked up by every enthusiastic physician as a treatment for lead poisoning, and it will be used instead of prophylaxis. For this reason we shall want to investigate it thoroughly.

Sincerely yours,

Robert A. Kehoe, M. D.

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