

September 16, 1930

Mr. Robbins B. Stoeckel,  
Commissioner of Motor Vehicles,  
State of Connecticut,  
Department of Motor Vehicles,  
Hartford, Conn.

Dear Mr. Stoeckel:

I wish to thank you very much indeed for your letter of September 8 with the information contained in it concerning the case of illness from the swallowing of Ethyl Gasoline.

The matter came to my attention through the New York office of the Ethyl Gasoline Corporation. One of the men in the New York office quoted Mr. K. L. Bridges of the Standard Oil Company of New York, who had talked with you some days previously. Mr. Bridges had no knowledge of the nature of the case, and merely said that you were considering the possibility of outlining an antidote for such a case of poisoning.

I am writing today to Dr. Hamant to ask for the details of the case. Without in any way prejudicing Dr. Hamant's opinion, I think I should call to your attention the fact that the swallowing of a small amount of Ethyl Gasoline (such as a mouthful) would not be a serious matter from the point of view of lead. It would take much more than the quantity of lead in such an amount of gasoline to produce symptoms of lead intoxication. However, this amount of gasoline of any type would be expected to produce definite symptoms which might even be serious, for the reason that the gasoline is exceedingly irritating to the mucous membranes and might easily produce ulceration of the stomach. Because of the common use of gasoline, and because of the relative infrequency of injury from it we are all too likely to forget its toxicity, and I have been somewhat surprised to find quite a number of instances of injury from gasoline which have been erroneously regarded as instances of lead injury. I think it is fair to say in this instance that any damage received by the individual was almost certainly due to the quantity of gasoline swallowed.

In connection with the use of antidotes for such poisonings as might occur in connection with automobiles, I find it impossible to suggest much that is likely to be of value to you. Much the most serious of such dangers, obviously, is that of carbon monoxide poisoning. So much is known about this that I scarcely need comment upon

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it. As to the poisoning from gasoline, I should say that generally speaking an individual who swallows gasoline usually regurgitates it rather quickly, and that if he does not do so no known antidote is likely to be very effective in preventing the development of illness. Illness from swallowing gasoline is obviously not very common, but illness from inhalation of gasoline is fairly frequent. The treatment consists mainly in the avoidance of further exposure, and so far as I know there are no specific remedies.

Lead poisoning from the use of automobiles has not been seen. It is almost unthinkable that one should ingest a sufficient amount of gasoline to produce lead intoxication, and all of the information thus far obtained either experimentally or as the result of a number of years experience, indicates that the absorption of lead from the handling of lead-containing gasoline and from the exhaust gas is appreciable. Therefore I cannot consider it advisable or necessary to suggest the use of an antidote for lead in connection with automobiles.

It is necessary also, of course, to consider the possibility of Benzol poisoning in connection with automobile fuels. The ingestion of Benzol gasoline in such a way as you have described the ingestion of Ethyl Gasoline, is entirely possible and I think, no doubt, has occurred frequently. The absorption of Benzol is a danger of some consequence, though it is much more likely to be dangerous when absorbed over a considerable period of time. I have never heard of an instance of acute Benzol poisoning, so to speak, from the swallowing of Benzol blends of gasoline. In the first place, one is not likely to swallow any considerable amount, and, just as in the case of Ethyl Gasoline, he is almost certain to regurgitate the greater portion of that swallowed. The damage to the mucous membrane while not exactly instantaneous, occurs very quickly and so far as I know cannot be avoided.

I should consider a very good treatment for the person who had swallowed gasoline, to be the washing out of the stomach quickly. If this could not be done, the ingestion of a considerable quantity of some bland oil, like a mineral oil, or the ingestion of a considerable quantity of milk. The excess gasoline on the surface would be largely absorbed by the oil, and somewhat less well by the milk,

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and thus eliminated from the body with a minimal amount of damage to the alimentary tract.

Very truly yours,

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