

January 21, 1961

Charles H. Rammelkamp, Jr., M.D.
Professor of Medicine
Western Reserve University School of Medicine
Cleveland, Ohio

Dear Doctor Rammelkamp:

I encountered an article in one of our newspapers concerning a "Mysterious Yugoslav Disease", your hypothesis concerning it, and your proposed method of investigating it under the sponsorship of the National Heart Institute. Making all due allowance for the vagaries and inaccuracies of the daily press, I found myself considerably disturbed by the concept both of the disease and the manner of investigating it, in view of the national and international significance of this matter. For this reason alone, I am willing to run the risk of addressing you in a somewhat unusual manner.

As you may know, some of us in this Laboratory have been investigating the behavior of lead in the animal organism for more than thirty years, and during that period have developed the physiological and clinical methods by which the diagnosis of lead poisoning is best approached in these days. I think I may say, on the background of accumulated evidence, that the diagnosis of lead poisoning is not elucidated but only confused by reliance upon the results obtained in the analysis of the excreta and body fluids after (in close temporal relationship) chelation therapy.

I am also fully familiar with the one-time problem of the use of mill stones repaired with solder for grinding grain. This problem may still exist for aught I know for certain, but let me suggest, on such volumes of evidence as would seem to be sufficient, that the accumulation of lead in the body in amounts that do not produce overt disease in some individuals, has never been known to cause vascular disease, chronic nephritis or any other form of illness or disease. We are talking here about earlier and non-quantitative concepts of the disease of lead poisoning - concepts that never were substantiated, and that, while not totally discarded in our day, for many reasons, are adhered to largely because they are sanctioned by their antiquity. I believe I am familiar with most of the world's literature on this subject, as well as the results of long-term epidemiological investigation, having spent the greater part of my life in the study of this problem.

If it should not be regarded as a somewhat brash (at my age, brashness

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has largely been dissipated) proffering of unsolicited advice, may I further suggest that there are means of getting at this problem, and of obtaining evidence which will be definitive in the diagnostic sense, and specific in relation to the source^s of exposure to lead if such exposure exists. I should be glad to discuss these methods with you, should you feel inclined to look into them. Incidentally, I have some professional contacts in Zagreb which might be extremely valuable to you if you are not already in touch with them. There are some very capable and well-informed people there, with specific reference to the problem of lead poisoning.

If this is all a "tempest in a teapot", I trust that you will not regard my concern in this matter as an unwarranted intrusion. And incidentally, I am not, in any sense, entering into a controversy, but merely offering my help.

Sincerely yours,

Robert A. Kehoe, M. D.

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