

October 31, 1944

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Mr. Philip Drinker,
Harvard University School of Public Health,
55 Shattuck Street,
Boston, Massachusetts.

Dear Phil:

On the subject of pentachlorophenol we have really very little information except that obtained on experimental animals. We have made a few observations of a more or less casual type in connection with the dipping of lumber in various mixtures of pentachlorophenol in solvents. In general, it can be said that these dipping solutions contained about 5% of pentachlorophenol. Despite certain efforts made to control the skin exposure of these workers to the dipping solutions, the fact remains that they sometimes have a very extensive and intensive exposure. So far as we have been able to establish there have been no ill effects of such exposure with the exception of minor dermatoses. It is said that skin irritation can be controlled fairly satisfactorily by the use of barrier creams. This may or may not be true, and I mention it only to acquaint you with the status of current thought and behavior on this subject.

I believe I am familiar with everything that has been done and with all the observations that have been made. It is fair to say that there is no precise information on the subject. The users and the distributors will tell you, as they have told me, that there have been no serious difficulties and no evidence that the dipping solutions are dangerous or even irritating, except to people with sensitive skins. I doubt if this is the whole truth, but at least it does seem to be reasonably certain that serious or fatal cases of pentachlorophenol poisoning have not occurred as the consequence of extensive skin exposure of individuals to solutions of pentachlorophenol up to 5%, in petroleum solvents.

We hope to have an opportunity to study this problem in detail and we are making arrangements to that end. If there is sufficient urgency from the military point of

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view, I would appreciate knowing about it, since it might be possible to expedite this work.

Very truly yours,

Robert A. Kehoe, M. D.

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