Lead Industries Association

420 LEXINGTON AVENUE

NEW YORK, N.Y.

CLINTON H. CRANE, PRESIDENT
F. H. BROWNELL, VICE PRESIDENT
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FELIX EDGAR WORMSER, SECRETARY AND TREASURER

May 21, 1940

Dr. Robert A. Kehoe
University of Cincinnati
Cincinnati, Ohio

Dear Dr. Kehoe:

A few weeks ago I received a letter from Mr. Whiting, Vice President of the Liberty Mutual Insurance Company, Boston, copy of which is attached. Yesterday I had the opportunity of lunching with Mr. Whiting and Dr. Aub and we discussed the subject he brings up.

Dr. Aub was kind enough to tell me that you contemplated having a meeting of a group of doctors to revise the booklet on lead poisoning prepared some years ago by the American Public Health Association. It may be that some of the things you have in mind with your group will have a direct bearing on Mr. Whiting's suggestion to us. Therefore, I am writing to inquire if you have any recommendations with reference to Mr. Whiting's suggestion that might be mutually helpful.

Dr. Aub told me that you probably will be in New York some time in June and if so perhaps we can meet here to discuss the subject. If so, I shall be more than pleased to make my arrangements conform to yours if it is at all possible.

With kindest regards,

Sincerely yours,

F. W. Wormser
Secretary.

COPY

Liberty Mutual
Insurance Company

175 Berkeley Street
Boston, Mass.

April 3, 1940

Secretary, Lead Industries Association,
420 Lexington Avenue,
New York, N. Y.

Re: Treatment of Lead Poisoning

Dear Mr. Secretary:

I hope you will be willing to give consideration to a proposal upon the above subject for the reason that, broadly speaking, liability insurance companies have no interest in the many large industrial processes using lead compounds than to assist their policyholders in the minimization of the lead poisoning hazard. As you already know, there has been very substantial progress during the past twenty-five or thirty years in the minimization of the degree of exposure to lead absorption itself produced by various types of what we call "engineering revision" of the lead-using processes themselves. However, there are still occurring enough genuine cases of industrial lead poisoning to give the problem of lead poisoning a continuing economic importance.

The efficiency of the medical treatment of individual lead poisoning cases is evidently an important factor in this situation. For the industrial plants of such size that a competent lead toxicologist can direct the medical treatment, excellent results are being obtained in reducing the total days of disability almost to the vanishing point. In contrast, where the average practicing physician handles the lead poisoning case, the treatment or even the genuine diagnosis of the lead poisoning is often handled inefficiently. The basic research on lead poisoning that was sponsored by your Association (or the National Lead Institute?) and conducted at Harvard University by Dr. Joseph C. Aub, et. al., has proven of very practical value in the efficient handling of acute lead poisoning, as I have noted in repeated specific instances.

Since the publication of the Harvard lead poisoning research in 1926, many additional studies on the subject have been made by members of the medical profession and have been published in medical literature. These have included proposed methods of diagnosis of incipient lead poisoning, statistics of the frequency of poisoning

Secretary, Lead Industries Association April 3, 1940.

cases in particular processes and medical treatment of active cases. Attempts have also been made in particular cases to apply medical prophylaxis against lead poisoning under a given concentration of exposure (presumably only slight exposure) of which I might mention offhand (1) the daily ingestion of ammonium chloride and (2) administration of certain vitamins.

In this present-day situation my feeling as a layman is that the workers in lead industries who become somewhat poisoned therefrom would be substantially benefitted if all of the physicians who treated their cases could have available for consultation an authoritative and concise statement of the present medical consensus of opinion on lead poisoning treatment. I refer, of course, not to the lead toxicologists but to the average physician who necessarily handles so many of the cases of this type in the numerous small plants that have some form of handling lead or its compounds. With the ever-increasing knowledge every physician needs for the treatment of his patients, I suspect that many of them are not at present familiar with what your Harvard lead research demonstrated in the relation of calcium metabolism and lead poisoning, yet such knowledge may be vital, I have been told, in the treatment of extremely acute lead poisoning. Of practical value also may be some of the other more recent medical developments in this field.

My specific proposal for your consideration is the sponsorship by your Association of a brochure on Medical Treatment of Lead Poisoning prepared jointly by several outstanding lead toxicologists of your own selection. Once this pamphlet were published, efficient distribution thereof could be made through purchase by the liability insurance companies, member companies of your Association and in other manner that might suggest itself to you.

Insurance companies as such cannot appropriately sponsor such a medical practice undertaking since it does not lie within the scope of our business. If you prefer not to sponsor the undertaking yourselves, would you care to consider the possibility of arranging for sponsorship through the Council on Industrial Health of the American Medical Association?

Very truly yours,

(signed) S. E. Whiting,
Vice-President & Consulting Engineer.