

September 2n, 1960

The Laurel Pottery
Box #2073
Stockton, California
Attention Mrs. Christainson

Dear Mrs. Christainson:

In accordance with our telephone conversation I am sending herewith a copy of the report of our findings on two cups from a set of household ware that was responsible for the production of lead poisoning in two young persons (newly married) who had used the ware for general table purposes for a period of about three weeks. The tests applied are described in sufficient detail to inform you of what was done. The test with acetic acid is an old one that has been employed for many years in the trade.

It is my hope, for the sake of the safety of many people, as well as for your industry, that this set was a part of only a small batch of ceramic ware that for some reason was not fired properly. The significance of such a mistake, if it was that, is of course quite significant, and something would have to be done to ensure that it would not occur again.

If there is anything we can do to advise or assist yourself and your associates in this matter, we shall be glad to do so.

Very truly yours,

Robert A. Kehoe, M. D.

RAK:ss

Enclosure - report

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Name: [REDACTED] (Hospital #385059)
Material: Urine and Blood
Submitted: 8-23,25-60 by Dr. Duffey, Cincinnati General Hospital
Required: Lead, Arsenic and Trace Metals Analysis

URINE

Analysis Number - 60A-6547
Volume - 32 ml.
Mg. As/Sample - Nil*

*Sensitivity of method = 0.0005 mg.

BLOOD

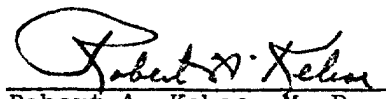
Analysis Number - 60A-6517
Weight - 20.0 Grams
Mg. Pb/100 Grams - 0.06 (Spectrographic)
Mg. Pb/100 Grams - 0.07 (Dithizone)

Trace Metals - No unusual concentrations of heavy metals.

The failure to find arsenic in this sample of urine of small volume, may or may not be of any significance in connection with the history of this illness, because of the time factor involved. For present purposes, it is merely negative, and makes no contribution to the interpretation of the illness. It can be said, however, that if any very considerable quantity of arsenic (enough to induce acute illness) had been absorbed, recently, this negative result would hardly have been obtained.

The concentration of lead in the blood is indicative of the absorption of abnormal quantities of lead, probably quite recently. (In view of the history, onset and course of this illness, and also of the findings in the case of the husband (William Avery) it is virtually certain that the concentration of lead in the blood of this patient a few day's earlier than this was somewhat above the threshold value of 0.08 mg. per 100 grams of whole blood. At the same time, it is apparent that this patient absorbed a somewhat lesser quantity of lead than did her husband.

Signed:


Robert A. Kehoe, M. D.
Reported: 8-29-60

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