March 17, 1943

Dr. John H. Glynn,
Medical Director,
TheArmour Laboratories,
1425 West 42nd Street,
Chicago, Illinois.

Dear Dr. Glynn:

Please accept my thanks for your letter of March 5, and my assurance that I shall be glad to examine any material which you may care to send me when your booklet is to be reprinted.

Very truly yours,

Robert A. Kehoe, M. D.

RAK ef

KE 0001412

THE
Armour Laboratories

1425 WEST 42ND STREET
CHICAGO, ILLINOIS

March 5, 1943

Dr. Robert A. Kehoe
Kettering Laboratory of
Applied Physiology
University of Cincinnati
Cincinnati, Ohio

Dear Dr. Kehoe:

Thank you for your letter of March 1 calling our attention to certain inaccuracies in the text of our Atlas of Hematology.

I am quite convinced that your position as Chief Medical Consultant for the Ethyl Corporation puts you in possession of more accurate data concerning lead poisoning than we have been able to obtain from the literature. We appreciate your interest in calling these inaccuracies to our attention.

There is little we can do so far as the copies of this booklet which are already widely distributed are concerned, but we will certainly take advantage of your suggestions in the second edition which will be published very shortly. If it is not imposing on you too much I would appreciate the opportunity of sending the copy of this section to you for criticism before the book is again published.

Very truly yours,

THE ARMOUR LABORATORIES

John H. Glynn

John H. Glynn, M.D.
Medical Director

JHG:ah

KE 0001413

March 1, 1943

Armour and Company,
Chicago,
Illinois.

Gentlemen:

I wish to apologize for the lack of information which makes it impossible for me to direct this communication to the proper department or person in your organization. I should appreciate if these comments might be sent to such person in your organization.

My attention has been called by several of my colleagues to your booklet "Armour Atlas of Hematology." The fact that this has occurred speaks rather well for the quality of the booklet and for the distribution which it has received among medical men. It is this very fact which justifies my calling attention to certain statements on page 48, under the heading of "Plumbism." The plate on the opposite page is very well presented, and I have no doubt it will be very useful to a good many men whose experience in the examination of the blood has not given them familiarity with the appearance of basophilic stippling. The text of the discussion, however, is somewhat misleading in two respects. First, it would imply that the presence of stippled erythrocytes in the blood is always an abnormal phenomenon, when, in fact, the presence of stippled erythrocytes up to the level of several hundred per million erythrocytes is rather common in normal blood. In fact, we have found that the mean normal number is approximately 300 per million erythrocytes and that the values may go as high as 1000, and occasionally even more are found not too infrequently. It is also stated that the extensive use of lead compounds in motor fuel has been an immediate factor in providing lead exposure for the drivers of cars and for others who presumably are exposed to the exhaust gases of automobiles. This would imply that stippling of the erythrocytes might well be found to an abnormal extent in the blood of these persons. Actually, the facts as demonstrated by most extensive investigations do not correspond with these statements. It is true that the public and certain specific groups in it are exposed to the exhaust gases of automobiles. However, this is a theoretical consideration only, since the lead exposure of the public by way of ingestion of lead in food materials is of such order of magnitude that it has not been possible to find any significant contribution to public lead exposure made

by the introduction of leaded gasoline into general use. In order to make my point quite clear, I should say that the average American citizen ingests with his food approximately 1/3 of a milligram of lead per day. Only a small portion of this is absorbed, but this quantity is so large in comparison with that resulting from the introduction of leaded gasoline into the community, that no one has been able to find additional evidence of lead exposure or an increase in the rate of human lead absorption and lead excretion since the introduction of the use of leaded gasoline. Accordingly, it is quite clear that there is no hazard to the public health involved in the distribution and use of leaded gasoline, and it is equally clear that persons who are engaged in the handling of leaded gasoline do not have an occupational lead exposure in the ordinary sense of the word.

You will have some curiosity, no doubt, as to why I go to this much trouble to clarify certain facts, and you are entitled to an answer. First of all, as the chief medical consultant of the Ethyl Corporation, I am interested in seeing the facts prevail on this particular subject. More importantly, however, as an experimental and hygienic worker in this field, and as chairman of a committee on lead poisoning of the American Public Health Association, I am doing my best to clarify a situation which has led to a good deal of confusion in the mind of the public as well as that of physicians. At the present time, by reason of the intense war effort, industrial lead exposure is on the increase, and cases of industrial lead poisoning are on the increase. This situation is the result not of the unimportant and theoretical lead exposures that involve the public, but rather because there is a gross increase in the handling of lead compounds in industry under conditions which lead to extensive exposure. The fact that all persons have some exposure to lead has focused an unusual amount of attention on a number of minor opportunities for lead exposure on the part of the public. This has led to quite a number of medico-legal difficulties, which those of us who are working intensively in this field are doing our best to correct. It is in this spirit that I direct this criticism at this booklet.

In conclusion, I think perhaps your company can take a certain pride in the fact that a house publication of this type, which might ordinarily be ignored, is of sufficient high quality as to justify, at least in my mind, the above comments. If there is any question about the validity of the statements I have made, I should be pleased to refer the questioner to the published supporting work.

Very truly yours,

Robert A. Kehoe, M. D.

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