UNIVERSITY OF CINCINNATI
COLLEGE OF MEDICINE
GENERAL HOSPITAL

LABORATORY OF APPLIED PHYSIOLOGY

October 26, 1932

Dr. Robert A. Kehoe
c/o Mr. A. E. Mittnacht
Ethyl Gasoline Corporation
Chrysler Building
New York City
New York

Dear Doctor Kehoe:

I am enclosing herewith a letter and report on [redacted] received this morning.

From the data in the report, Mr. [redacted] appears to have died three days after the sudden onset of the acute illness characterized by weakness, nausea, vomiting, dysentery and cyanosis. Certain phases suggest intoxication with a nitro compound but in the absence of any statement as to Mr. [redacted] age or detailed hospital record, we can not exclude even a cardiac decompensation.

I am sorry that we have no more information to forward you at this time. It might be a good plan to have Mr. Mittnacht, or rather have Durham get copies of the hospital record as well as the pathologist's report, and investigate the types of gasoline which he was dispensing. Apparently no attempt was made to examine the other filling station attendants who encountered similar exposure to that of Mr. [redacted] It is something which may be of some value to us to consider doing.

Very truly yours,

Willard Machle

WFM: IS

Investigated by Dr L. W. Sanders

Information was received at Denver, Colo., from Mr. Zadra, Ethyl Gasoline Corporation Field Representative, of the death of a Mr. [redacted] Propr. of the Fat Boy Filling Station, Colorado Springs, Colo. The death was rumored to have been due to exposure to Ethyl Gasoline.

L. A.

Dr./Conway, the Internest in charge of the case and Dr. Ryder, the Pathologist, were visited and the following information obtained.

On Thursday, Sept. 29th, Mr. [redacted] spent the entire morning checking gasoline pumps. There were three non lead containing and one lead containing gasoline pumps. More gasoline was thought to have been withdrawn from the Ethyl pump than from the others. The gasoline withdrawn from the Ethyl pump was estimated to have been 50 gallons. The proceedure consisted of a helper standing at the pumps watching the gagge while Mr. [redacted] stood over a five gallon bucket checking volumns. The gasoline was then poured back into the tank. This proceedure was estimated as having been done about ten times with the Ethyl pump. This was done in the open on a hot day. Mr. [redacted] became ill that afternoon and the assistant proceeded with the work on two or three other pumps, one of which was another Ethyl pump.

Thursday evening Mr. [redacted] was definetly ill with severe nausea and vomiting and severe diorhea. This continued throughout the night and also Friday and Firday night. Saturday morning Mr. [redacted] was sent to a hospital and was seen by a physician (Dr. Conway) at about noon. He appeared to be a very large muscular man definitely ill with nausea and diarhea but with no pain and no C. N. S. symptoms excepting possibly some lethargy. There was no history of previous illness, the patient having been previously unusually healthy and strong. There was no history of mental symptoms associated with P. I. Physical examination revealed nothing excepting ronchi at both lowers. The heart was negative. No diagnosis was made but an acute gastro enteritis due to food poinoning was considered.

A sinking spell was reported by Dr. Mullet Saturday afternoon. The patient became weak dyspnoeic and semi comutose. After this first sinking spell the patient recovered sufficiently to say that he felt much improved and to ask for food which was denied him. Saturday evening a second sinking spell occured. Dr. Conway saw the patient at this time. Condition was simuliar to first sinking spell and now there was an ashen grey color and severe cyanosis. History of exposure had been obtained at this time and Ca was given (The time relation of the Ca therapy not accurately obtained) At this time there was definite consolidation of both lungs at the bases. There seems to have been no elevation of temperature previous to this time. The patient died during the second sinking spell.

Autopsy was not done until the body was embalmed. There were no particularly significant findings. The only points worth mentioning were the repeated mention of the strikingly dark color of the blood, enlargment of the liver and spleen, the rapid darkening (blackening) of the liver and spleen on section; the fact that the cut surface of the liver and spleen (to a less extent) blackened strikingly on application of Amonium Sulphide. The lungs showed striking congestion and localized consolidation, the localization of consolidation being close together and only determined on sections. Attention was called to the granular black pigment in the lungs which was not thought to be ordinary anthracosis. The G. I. tract was given little mention excepting that they contained watery content. There was a large stone found in the gaul bladder but bile was found in the stomach and no obstruction was thought to

have existed. The C. N. S. was not examined. Anti mortem blood examination showed striking concentration of blood with Hb so high it could not be read. Blood count not remembered by clinatian - no morphologic change observed.

A diagnosis of acute lead poinoning was made with no nention of the type or possible source.

The pathologist feels rather definitely that this was a case of lead poinoning. He feels that the proof will rest on the result of tissue analysis he is trying to have done by Dr. Morris. He is unwilling to discuss significance of exposure feeling that it is irrelevant. He is unwilling to send tissues to Kettering Laboratory until Dr. Morris has made his report and until he finds there can be no possible objection from any quarter.

The men at the Filling Station were interviewed. The Chief Helper in the checking proceedure had headaches, nausea and severe diarhea during the afternoon of the checking and later received intraveinous C A therapy as prophilactic treatment from Dr. Conway. He admits that his symptoms might have been psychic.

The Widow was not seen as it was felt that any one representing the Corporation should not appear to be on the defensive at this time. It was learned however from the physicians in charge, that the case had been put in the hands of an attorney of questionable reputation. The attorney however, after finding that the widow had no money, advised her to let the case drop.

Very probably nothing will ######## come of the case legally. If there is a report of lead being found in the tissues however, some action may result.

Signed L W. Sanders M D

Note -

Hospital record could not be obtained on this man, and further efforts to obtain information as to analyses were unsuccessful. No further information of any kind was obtained.