

Excerpts from letter dated June 3, 1954
Dr. Hervey B. Elkins, Chief of Laboratory,
Mass. Division of Occupational Hygiene, to
Manfred Bowditch

What I am really writing to you about is the question of what may be called prophylactic use of EDTA in lead workers. I think we are all agreed that the use of this drug is, at present, justified not only in acute cases of plumbism as is frequently found in children; but also in industrial cases which are to a large degree chronic.

There is now talk, and I am not sure that it is not more than talk, of giving EDTA to workers who have no clinical symptoms of lead intoxication but who show blood changes, increased coproporphyrin, or possibly who have merely increased urinary or blood lead levels. These employees would be treated without being removed from lead exposure.

Another step would be to give all workers with harmful lead exposure similar treatment. A further step would be to give the EDTA to all individuals with but potential lead exposure. Finally, it might be added as an enriching ingredient to bread or even put in water supplies.

. it seems to me that a line should be drawn somewhere and the thing that worries me is not so much where the line should be drawn as who will draw it. Should it be the medical profession, government agencies, or should we look to your organization for guidance?

I would be greatly interested in your thoughts on this matter. I have a hunch that it may be taken up, to some extent, at the AMA meeting in San Francisco. At the moment I forget whether or not you are planning to attend that event. Our physician, Dr. Broadhurst hopes to be there, but in any event, your opinion, both because of your experience, knowledge, and affiliation would be most valuable.

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