

June 9, 1939

[REDACTED], 651 Richmond Street, Cincinnati, Ohio

37 years of age - married - no children (no miscarriages or stillbirths)

Employed by Eagle-Picher Lead Company.

C.C.

Has had pain in left side of belly for past months - normal otherwise. Was laid off from work Monday, June 5, account of no work.

Appetite fair - eating three meals a day including breakfast. For breakfast has bacon, eggs and toast.

Best weight 187 since working. Usual weight 180-185.

Present weight 170.

Believes has lost some of grip of left hand. Hand and arm cramp at times. Has had no disability. No sickness during past year. Some constipation, for which pills were taken - about three per week. No constipation now.

Occupational

Was in "shaking out" in 1937. Began in 1930 - started in "shake out", continuing until 1934 without lost time, then transferred to yard work, handling bark and pig lead, where continued through 1936. Then in "shake out" in 1937, working there until February, 1938, then to yard again. Was never disabled but felt bad at times with stomach. During last 8 or 9 months has been engaged in "cleaning up" in shop in addition to some yard work. States it was dusty but he wore gauze type mask while sweeping. Washed his hands at noon before eating and in evening when finished working. States he could taste dust at times - "tasted like chalk, sort of sickening and sweet".

He saw Dr. Clark one visit last week and was referred here - was given no medication.

Had been seeing the company physician at regular intervals and was given cathartic pills. Also took two Nature's Remedy cathartics weekly. No other medication. About a year ago the company doctor gave him a quantity of large white tablets (Ca ?) to take when routinely examined. Told him to eat no pork meat. At that time he had no complaints.

Systems

G.I.

For the past two months appetite fair but not as good as usual. Breakfast couple of eggs, bacon, bread and usually milk. Pork chop sandwich at noon and one pint of milk. Meat, potato and other vegetable at night - no coffee. Occasional nausea but no vomiting. About March last vomited for two days and was seen at home by a Dr. Wagner of Clark Street. Was told he had "stomach upset". Constipated past year and takes company cathartic pills regularly

Hemorrhoids at times - no bleeding. Never jaundiced. Has been having cramps and pain in lower abdomen mostly on left - none in epigastrium. Cramps occur usually in morning and forenoon. Teeth have been aching and gums bleed easily.

G.U. Occasional nocturia - no frequency, pain or burning. G.O. in 1929 - treated for six months at Shoemaker Clinic. No history of syphilis.

C.R. No cough or pain in chest. Occasional "colds". No hemoptysis and until recently no afternoon fatigue. About three weeks ago had intense pain over precordium lasting 30 minutes - had to lie down - disappeared and no symptoms since. No shortness of breath.

Neuro. Quite nervous recently - "pretty bad nights at times". Awakens and unable to sleep. No dreams. Occasionally on awakening in a.m. feels dizzy and "head swims". Has occasional pain in left arm extending from elbow to hand. None on right side. Has pain in left hip and extending down left leg. Pain is "deep seated" and no hyperesthesia of skin.

Family and Past History Mother living and well. Father dead-past eighty years. Three brothers living and well - one dead of T.B. Five sisters living and well - one dead (post operative). Family have been healthy. He had measles in childhood - no other disease. Has been healthy all of past until past few months. No operations. Only injury was large laceration of back with razor in 1924.

Physical Examination

Age 37. Height 5'10". Weight 168-1/2. Temp. 98.2. Pulse 84. Resp. 20. Blood Pressure 138/78. Grip: Right 120, Left 105.

Patient is a well developed and well nourished male Negro, not acutely ill. Skin is clear and mucous membranes good color. Posture is erect.

Eyes Pupils are equal and regular. React to L and A. Arcus senilis present.

Ears Negative.

Nose Some enlargement lower turbinates, but ample passage. Mucous membranes good color.

Mouth and Throat Tongue furred, in midline, no tremor. Teeth poor - lower molars on left have large caries. Two gold crowns on upper incisors. Teeth dirty and discolored. All fairly firm. Gums infected. Recession about lower incisors, particularly lower centrals where gums are boggy and exudate expressed. There is a lead line present medially

lower left molar and lower incisors. Tonsils small - appear healthy. Pharynx clear.

Glands No adenopathy - trachea midline.

Chest Well formed chest - expansion is good and equal. Large scar across entire back over upper chest. Lungs clear on P and A.
Heart: Rate and rythm are regular. Sounds of good quality. No murmurs. Reacts well. Heart not enlarged.

Abdomen Liver and spleen not palpable. No masses. Some tenderness over lower left abdomen. No spasticity of muscles. No hernia. Rings are small. No luetic scar noted.

Reflexes K.J. ++++ Bicep +++ Abdomen + Crem. + Romberg negative. No tremor.

Extrem. Equal in size and no atrophy of any muscles noted. No tenderness of skin or on deep palpation.

Impression

Lead intoxication. Pyorrhea and dental caries.

Blood

6-9-1939

RBC 4,760,000 WBC 7,450
Poly. 55.5 Band. 9 Lymph. 28 Mono. 5.5 Eosin. 1.5
Baso. 0.5 Stippling 146

6-13-39

RBC 4,940,000 WBC 6,700
Poly. 61.5 Band. 11.5 Lymph. 22.5 Mono. 3 Eosin. 1
Baso. 0.5 Stippling 116

Lead Content (6-9-1939): Mgs Pb/100 gms (Spectrographic) 0.135
Mgs Pb/100 gms (Dithizone) 0.115

Urinalysis

Faintly acid to Methyl Red. Albumen and sugar negative.
Microscopic: Occasional pus cells and occasional casts in uncentrifugalized sample.

Lead Content (6-9-1939): Mgs Pb/Liter 0.35

Leslie J. Schradin, M.D.

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Blood

6-21-1939

Stippling 54

651 Richmond St.

37

June 9, 1939

2 Indefinite abdominal discomfort, occasional cramps in hand and arms, weakness of left hand, constipation, insomnia and restlessness. Lead line, excessive stippling of erythrocytes and greatly elevated lead concentration in blood and urine.

3 Two to three months ago.

4 Labor, in white lead manufacturing plant. Handling pig lead, and boxes, cleaning and sweeping in shop.

5 1930

6 none

7 none

8 Rest, freedom from exposure, catharsis

9. (a) Potentially disabled for some weeks, and should not return to former occupation.

(b) Six to ten weeks

(c) Cannot return to former work or employment. Could do light work if free of all lead exposure.

10 none no

11 { Patient not seriously disabled but is heavily and dangerously "loaded".
Record of examination appended for full information

University of Cincinnati
1920

July 6 1939

1 Excessive lead absorption with blood changes, greatly increased concentration of lead in blood and urine, and early lead intoxication.

2 none

3 no

4 none required

5 none required

6 no

7 within few weeks

8. Cannot return to former occupation. Can do equivalent work in six to ten weeks from onset of illness

9. no permanent impairment

10 no

11 none required

12 —

13 no

14 no

Date

Treatment

Amount

6-9-39

Physical examination, and laboratory procedures including complete blood examination, chemical urinalysis, analyses of blood and urine for lead

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