

December 30, 1965

L. E. Loveless, Ph.D., President
Laboratory for Experimental Biology
100 N. Euclid Avenue
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Dear Doctor Loveless:

The press accounts of the information put out at the Symposium on Lead in Washington earlier this month were just about as precise and relevant as such accounts are usually found to be, despite the fact that certain representatives of the press were present during the sessions. The only somewhat exaggerated statement that I made (for emphasis), was the one that was reported generally. Whatever else I may have said was either garbled or omitted altogether. This is just about the level of competence and appraisal that I have come to expect of the daily press. Fortunately, practically everything I said has been documented in the literature. I commend the relevant publications to your attention.

I did not prepare any paper for presentation at the Symposium, since the evidence to which I referred had been published. I am sending certain reprints to you, in which you will find the answers to your questions in much better form than I can give them in a letter. I must deny, however, that any data of ours will justify your assumption that the range of concentration of which you speak, in relation to the lead in the blood, is "upper normal." The "normal" range may be defined as that found in the blood of persons who have had no exposure to lead except that incidental to general ambient environmental factors (food, beverages and air). It ranges from 0.01 to 0.05 (inclusive) mg. per 100 grams with but few items at the 0.05 level. The mean value of a large number of observations is slightly less than 0.03 mg. per 100 grams. Values from 0.06 through 0.07 (with an analytical error of ± 0.01) give evidence of some degree of unusual exposure to lead, while 0.08 mg per 100 grams (when verified by multiple analyses) is the least concentration that is associated with occasional cases of intoxication.

There is no value in the blood (or urine tissues) that is indicative of lead intoxication, but only of the danger of intoxication. The incidence of acutal intoxication is very low at the level of 0.08 mg. per 100 grams of blood. It increases as the level in the blood increases, but it is never inevitable at any level. The diagnosis, therefore, must depend upon clinical findings.

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I send several articles on the effects of therapy with "Versenate." In my opinion, there is much in the literature of this subject that had better not have been written, including that concerned with the so-called provocative diagnostic test with this drug. However this is a highly controversial matter, and I cannot take my time or yours to present my views in any detail. I'm afraid we shall have to let time decide these issues. I predict that, ten years from now, there will be much less interest in this specific therapeutic agent.

Cordially yours,

Robert A. Kehoe, M.D.

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