

possible to achieve the ideal of no lead exposure, it is pertinent to continue to explore methods by which to form compounds of lead in the body which are less toxic than the lead ion and which hasten lead excretion.

SUMMARY

Four cases of lead poisoning, acute in three and chronic in one, in which the patients have been treated with sodium citrate, are presented. We believe the evidence accumulated leads to the following opinions:

1. Adequate oral doses of sodium citrate will control the symptoms of lead poisoning.
2. Studies of the lead excreted in the urine in these four cases—we lack studies of lead excreted in the feces—do not warrant the conclusion that sodium citrate increases lead excretion.
3. Studies of urinary coproporphyrin are presented.

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The study of patients S. O., and C. S. was made possible by their physicians, Drs. C. H. Duston and Dr. B. F. McKernan, respectively.

The lead urinalyses were performed by B. P. W. Ruotolo and G. W. Boylen, of the chemical staff of the Massachusetts Division of Occupational Hygiene.