



Washington, D.C., December 15 -- Ethyl Corporation made the following recommendations at the U. S. Public Health Service symposium on lead today.

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The antiknock compound industry has always recognized that considerations of public health are of paramount importance, and from its beginnings forty years ago it has continuously sponsored a broad program of basic and applied medical research. That program has been implemented step by step with the advice and recommendations of the Public Health Service. The medical research program has not only encompassed the safe handling and use of antiknock compounds, but its over-all objective is to insure that antiknock compounds at no time present any problem of public health. As a result of this voluntary, industry-supported research, antiknock compounds have been among the most comprehensively studied products, from the standpoint of public health, in modern times.

This background has provided the basis for the current voluntary control of lead antiknock use. Much of the available medical data relating to the public health aspects of lead stem from this industry-sponsored work. The industry will continue such research, and will cooperate in joint studies.

The medical facts presented at the Public Health Service symposium do not justify any action to restrict the use of lead antiknock compounds in gasoline. These facts demonstrate:

1. Lead in air from all sources to which the public is exposed does not present a health hazard. This is shown in the Public Health Service study, "Survey of Lead in the Atmosphere of Three Urban Communities" (Public Health Service Publication No. 999-AP-12) published

2. The same Public Health Service survey, coupled with other Public Health Service findings, shows no significant increase over the past five years in lead concentrations in urban air. Relating these recent Public Health Service data to comparably valid data obtained fifteen years earlier indicates no change over this longer period.

3. Other medical studies have shown no increase in the blood lead levels of the population over the past twenty years or more, despite a substantial increase in lead antiknock consumption and automobile population during this period. Outstanding among these studies has been the work of Dr. Robert A. Kehoe of the College of Medicine in the University of Cincinnati and of Dr. Leonard J. Goldwater, professor of occupational medicine at Columbia University.

4. On the basis of all authoritative evidence, there are no grounds to forecast a health hazard due to any future increase in antiknock compound use. Health hazards, as has been shown, are not proportional to antiknock compound use.

On the basis of these facts, we of Ethyl Corporation therefore recommend:

1. That the present level of controls, as voluntarily established by the antiknock industry with the advice and counsel of appropriate Public Health Service personnel, be continued.

2. That the cooperative program to monitor concentrations of lead in air and in human blood and urine be continued. The recent Public Health Service survey in Los Angeles, Cincinnati and Philadelphia can be used to provide a valid baseline of data. Continuing studies can now be made to expand this sound monitoring background.

3. That additional cooperative research with government agencies, universities, and related industries--to broaden the knowledge of the use of lead antiknocks in relationship to public health--be carried out.

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