

March 18, 1966

Dr. M. K. Williams
London School of Hygiene and
Tropical Medicine
Keppel Street
London, W.C.1., England

Dear Doctor Williams:

I agree that it will be wise for us to wait for an opportunity to meet and talk about many of the aspects of clinical lead poisoning, and the industrial hazard associated with excessive absorption of lead. My objection to the term "lead absorption" is a personal one in which my feelings are involved; the term has been used to describe persons who are not disabled or acutely ill, but are "leaded" and not really well. It has been a basis for inaction in some instances. I really have no objection to the term "excessive lead absorption" or its equivalent, if it is used by a physician who does something to see that the exposure is reduced to a safe level - unfortunately, a goodly number of industrial physicians of the old school, in this country, are resorting to chelation therapy, while these men continue at work, in order to reduce their "body burden" rather than their exposure and rate of absorption. This I consider to be naive, irresponsible and immoral professional performance, while being also ineffectual.

Incidentally, I expect to be in London for a week, or two (perhaps), prior to or after the Vienna Congress, and I'd like nothing better than to meet and talk with friends and colleagues in London and specifically in the London School of Hygiene.

With kindest personal regards,

Sincerely,

Robert A. Kehoe, M.D.

RAK:wp

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