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Copy to: Mr. W. A. Schnedeker.
Dr. G. H. Gehrman.

GRASSELLI CHEMICALS DEPARTMENT

February 25, 1946.

Dr. R. A. Kehoe,
Kettering Laboratory of Applied Physiology,
Cincinnati, Ohio.

Dear Dr. Kehoe:

At the suggestion of Dr. Gehrman, we are writing you regarding a problem which has developed in our Insecticide Department.

Until October, 1945, we employed about 30 women in this Department, at which time they were replaced by men. At the present time there are about 80 men in the Department, of which about 55 are subjected to possible exposure, as follows:

- 3 men on Towers, working with powdered arsenic and arsenic acid.
- 3 men on batch tanks, working with lead and calcium arsenate solutions.
- 4 men on dryers, working with dry lead and calcium arsenate.
- 35-40 men in packing crew, working with powdered lead and calcium arsenate.
- 10 men on Litharge furnaces.

During the time the women were employed, we sent Dr. Foulger of the Haskell Laboratory of Industrial Toxicology copies of our monthly routine examinations of these women, together with blood pressure scorings. We have never sent him reports of examinations of the men.

Dr. Foulger has written us to the effect that more precautions should be taken in the handling of Calcium Arsenate, and he based his recommendation on the blood pressure scorings made on women during the periods when this compound was being made and packaged. The scorings made during the periods when Lead Arsenate was being made were apparently satisfactory.

With the exception of three employees who had symptoms which might have been caused by lead absorption, and from whom we sent specimens which you reported as being within normal limits, we have had no complaints from any of the Insecticide Department employees which resembled lead or arsenic absorption.

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Dr. R. A. Kehoe

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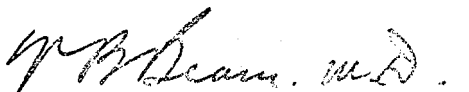
However, if a hazardous condition exists, which Dr. Foulger says we actually have, we want to correct it as soon as possible.

We would like to have your opinion regarding the best method of handling this situation. I have suggested that, if possible, quantitative tests for arsenic absorption be made. If this is possible, can these tests be made by your Laboratory? I have also suggested that air analyses for arsenic be made in the Department, but it appears that this would be quite time consuming, so it was decided that, if tests can be made on the employees, this be done first. If these are normal, air analyses would not be necessary. If abnormal, then air analyses could be made.

If you agree with my suggestions, and if you can make these tests for us, please let us know the procedure to follow, and the number of men which should be checked. If you have any other recommendations, we should be glad to have them.

Very truly yours,

W. A. SCHNEDEKER, WORKS MANAGER



V. B. Beam, M.D.
Plant Physician.

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