



WILLIAM H. FRAMPTON, M. D.
BOX 367
CHARLESTON, S. C.

December 23, 1937

Dr. Robert A. Kehoe,
College of Medicine,
Cincinnati, Ohio.

Dear Dr. Kehoe:

Please accept my thanks for your kind letter of December 10 and also the container for the specimen of urine. The specimen was collected yesterday and immediately mailed to you. I would thank you to let me have a report on it as soon as possible. Also many thanks for the reprints.

The delay in securing the specimen was due to the fact that this man left Charleston on a similar mission the day after we held our conference. He has just returned. Because this man continues to present a troublesome picture I am re-viewing the case again.

From November 29, 1937, to December 4, 1937, he was cleaning and corking a tank which had contained Esscene. He worked in the tank from eight to nine hours a day but only with a gas mask on two occasions. The rest of the time he had a handkerchief over his nose. According to the instruments used the tank was free of gas before he went in. When he arrived in Charleston on the afternoon of December 4, his symptoms were nervousness, gas on stomach, and dizziness. His physician prescribed for him, a mixture of bismuth and paregoric. He called on me two days later and the only symptoms which he then had were continued nervousness and considerable fear. I put him under observation without doing anything further about it. You will remember that we are dealing with a neurcotic individual who has had these identical symptoms for the past five years. We decided to do nothing until after the examination of the urine or until he developed other symptoms.

On this second recent trip from the city he was again cleaning a tank which had contained Esscene and he tells me that he was in the tank less than one hour and during that entire period of time he wore a gas mask. After his return to the city he consulted me and stated that he had lost the dizziness and nervousness. Yesterday he complained of pains in the posterior muscles of both lower extremities. He described the discomfort as being one of soreness. It was not typical of a sciatica. Feeling that, perhaps, this condition might be a vitimine deficiency the result of a long continued gastritis, I prescribed vitimine B. This morning he sent for me and I visited him at his home. He was unable to work because he had a restless night and this morning the pains have increased and seem to be largely in the calves of both legs. He also has some weakness and pain in the muscles of the upper extremities. It seems to me that he is suffering from soreness and weakness in the long muscles of the extremities. I suggested that he go to the hospital for us to work his case out and find out just what the cause is. He said he did not feel that badly and would rather wait until after Christmas. I prescribed Asperin and Codein for him.

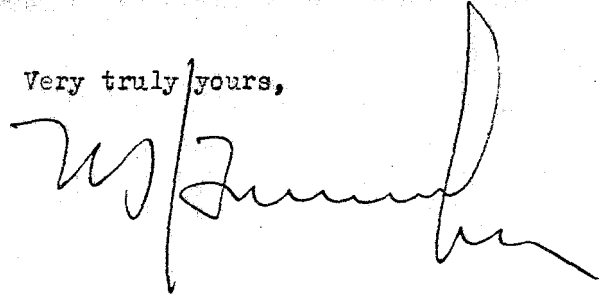
You were very kind to outline to me the symptoms of ethyl lead poisoning but unfortunately we did not discuss the treatment.

Kindly let me hear from you as soon as possible regarding the examination of the

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urine. If you find a sufficient ammcunt of lead and think this man is suffering from lead poisenning and think it urgent enough please telephone me. Uniti I hear from you I will institute the treatment as outlined in Dr. Machle's re-print.

Very truly yours,

A handwritten signature in cursive script, appearing to read 'W. H. Frampton', written in dark ink.

WHF/o

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