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THE PROBLEM OF POSSIBLE SYSTEMIC EFFECTS FROM CERTAIN CHLORINATED HYDROCARBONS*

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THE use of chlorinated naphthalenes and compounds of allied pharmacological possibilities is extremely wide, and with the steady growth of the use of electricity is certain to expand much farther. For years it has been known that many of these compounds cause a troublesome acne, and there is a large literature upon this phase of the subject. Our investigations have not been concerned with chloracne but with the possibility of systemic effects following ingestion or inhalation of such products. In the spring of 1936, the Halowax Corporation, a division of the Bakelite Corporation, called our attention to three fatal cases of jaundice in workmen using chlorinated naphthalenes and chlorinated diphenyl, and requested that the subject be investigated as

rapidly and thoroughly as possible.† In brief these cases were as follows:

Patient 1. Male, age 21. The previous medical history of this man was in no way significant except for the fact that he had an attack of jaundice about 6 weeks prior to his fatal illness. Late in December, 1936, he became badly constipated and had much abdominal pain and distention. When admitted to the hospital he was slightly jaundiced and was evidently very ill. He was somewhat anemic and his skin, particularly upon the arms, face, chest and back, showed many pustules. He died after a brief period in the hospital, and at autopsy was found to

† The Halowax Company makes many products besides chlorinated naphthalenes, and it has come to our knowledge that all of these products are indiscriminately called "halowaxes" by purchasers and users, and are lumped together as possible causers of acne and even of systemic disease. Since "halowax" is merely a trade designation, care should be taken to describe compounds by their chemical names and thus avoid condemnations which are both troublesome and misleading.

* Received for publication June 30, 1937.

have a cirrhosis of the liver with acute yellow atrophy superimposed upon it. This man had been exposed to low concentrations of vapors arising from a mixture of tetra and pentachloronaphthalenes, together with approximately 10 per cent of a refined chlorinated diphenyl. While both he and others engaged in the same work had chloracne, there were no other disturbances of health in fellow workmen, nor was there any precipitating cause for the acute yellow atrophy such as treatment with arsphenamine or exposure to dangerous concentrations of carbon tetrachloride.

Patient 2. This was a young man who died in February, 1936, after an acute illness characterized by jaundice. He had been exposed to fumes arising from a mixture of penta and hexachloronaphthalenes. There is no record of chloracne. The patient worked with a large number of other people of whom but one (Patient 3), a close friend, had significant illness.

Patient 3. Another young man employed with Patient 2. He became jaundiced in March, 1936, and died after an illness of 2 weeks. A careful autopsy resulted in a diagnosis of acute yellow atrophy of the liver. Here again no history could be obtained as to a precipitating cause, and there was no record of preceding attacks of jaundice.

In addition to these three very recent fatalities, we have learned of four other possible cases, none of them fatal. All of these have had jaundice and the entire group consists of isolated individuals who have been picked out of large groups having the same exposure. In but one instance, Patient 1, is there record of antecedent disturbance of health, and the general health of fellow workers has been good.

Such cases have not been reported in the medical literature and only occasionally can one find reference to systemic effects of any sort. For example, Courtois-Suffit (1934) reports on work done by Touraine and his associates (1934) who examined 60 workers

who had been exposed to trichloronaphthalene. Of these 13 were found to have mild digestive complaints, anorexia, nausea and vertigo, but Courtois-Suffit remarks finally, "Absorption is certainly possible and we have for proof of it some of the digestive and general complaints which have been due to it. But they appear to be of little consequence considering the mildness of the digestive troubles and the absence of respiratory phenomena."

In Touraine's cases the exposure was to a trichloronaphthalene, whereas the American cases of acute yellow atrophy were exposed to compounds of higher chlorination. Our own experiments indicate that trichloronaphthalenes require enormous dosage, far beyond anything encountered in industry, in order to produce liver damage. Tel'evsky (1927) reported a number of cases of chloracne in persons exposed to chlorinated naphthalenes with a chlorine content ranging from 14 to 53 per cent. He found that the lower the chlorine content the less the acne. Mittelstädt (1935) examined a number of cases of chloracne due to trichloronaphthalene and reported a number of vague general complaints but nothing in the nature of serious disease. Regarding his animal experimentation, Lehmann (1919) reported that animals fed chlorinated naphthalenes refused to eat after a time and that, whether poisoned by inhalation or by feeding, at death showed "peculiar" lesions in the liver. Flinn and Jarvik (1936) gave subcutaneous injections of enormous doses of chlorinated naphthalenes dissolved in paraffin oil to rabbits. The compounds used were as follows:

1. A mixture of tri and tetra chloronaphthalene.
2. A mixture of tetra and penta chloronaphthalene.
3. A mixture of penta and hexa chloronaphthalene.

In addition, sublimate (3) were collected in oil subcutaneously.

None of the animals receiving the sublimate from (2) died after 2 months were quit autopsied. The first deaths among animals receiving (3) occurred on the first day and the last died on the last day. Those receiving the sublimate were even more severely affected. Autopsy in these animals showed striking changes in the liver, entirely characteristic of acute yellow atrophy but suggestive to cause the authors to conclude that "certain chlorinated naphthalenes or impurities in them are capable of producing acute yellow atrophy of the liver in the human."

At the beginning of this paper, Flinn and Jarvik (1936) stated the fact that there have been reports of acute yellow atrophy in men working with chlorinated naphthalenes but give no details to them. These cases are the same as those described at the beginning of this paper.

One may summarize the literature upon systemic effects of these substances as follows:

1. With the exception of acute yellow atrophy in men and Jarvik (1936) there are no even suggestions of systemic effects upon human beings.

2. There is evidence that the degree of chlorination

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1. A mixture of tri and tetrachloronaphthalene.
2. A mixture of tetra and pentachloronaphthalene.
3. A mixture of penta and hexachloronaphthalene.

In addition, sublimates from (2) and (3) were collected in oil and injected subcutaneously.

None of the animals receiving (1) or the sublimate from (2) died, and even after 2 months were quite normal when autopsied. The first death in the animals receiving (3) occurred on the 12th day and the last died on the 26th day. Those receiving the sublimate from (3) were even more severely affected. Autopsy in these animals revealed striking changes in the liver, not, as described, entirely characteristic of acute yellow atrophy but sufficiently suggestive to cause the authors to conclude that "certain chlorinated naphthalenes or impurities contained in them are capable of producing yellow atrophy of the liver in the rabbit."

At the beginning of their paper, Flinn and Jarvik (1936) mention the fact that there have been three cases of acute yellow atrophy of the liver in men working with chlorinated naphthalenes but give no details in regard to them. These cases are undoubtedly the same as those described in the beginning of this paper.

One may summarize the meagre literature upon systemic effects from these substances as follows:

1. With the exception of the mention of acute yellow atrophy by Flinn and Jarvik (1936) there are no reports or even suggestions of serious effects upon human beings.

2. There is evidence (Teleky, 1927) that the degree of chlorination is sig-

nificant in relation to the production of acne. In the work of Flinn and Jarvik (1936) the compounds producing serious liver injury were the most highly chlorinated of those tested, though the chlorine contents as given by analysis vary surprisingly little.

3. There are no published figures upon the amounts of various chlorinated naphthalenes in the air which will produce injury of any sort, and while the work of Lehmann (1919) and of Flinn and Jarvik (1936) point to the liver as a possible site of injury this indication rests upon such extreme dosage as to fail to apply directly to human exposure.

EXPERIMENTAL WORK

In appraising the possible toxicity of any substance met in industry it is first necessary to determine the principal route of absorption. In the case of the compounds under consideration there can be no doubt that inhalation is their chief means of entering the body. They are used hot in a great variety of operations and volatilize in varied degree. They are often applied in solution in such volatile solvents as carbon tetrachloride and toluene. The amounts reaching the air under such circumstances are hardly detectable. It will however be shown that carbon tetrachloride adds to the toxicity of the chlorinated naphthalenes and allied compounds, and if there is possibility of inhaling these compounds in other parts of the factory then inhalation of carbon tetrachloride adds a decided hazard. Under such circumstances solvents such as toluene should be used.

Observation in a number of plants causes us to feel that even though

workmen may be extremely dirty and careless, comparatively little of these waxes is eaten. They are tenacious substances, insoluble in water, and if they get on the hands they stick there and are not transferred to the food.

Skin absorption is the third possible means of entering the body. It may occur but at best must be slight when compared to the steady inhalation of finely divided or gaseous material in the air.

They thrive upon a diet very similar to man, and in the case of these chlorinated compounds it is possible that diet may be very significant. Finally, their normal characteristics have been described so well as to make the detection of abnormalities both easy and certain.

Method of exposure.—The inhalation experiments were carried out in four large air-tight wooden boxes, each capable of holding ten rat cages, size

ing the end of the box meter was placed in the the flow of air in cubic feet could be adjusted and read from a calibration curve. A deflector placed at the entrance pipe into the box was used to assure a uniform distribution of air to the two

At the opposite end of the outflow end—the air from the box was exhausted through a damper and a large central exhaust fan.

About 4 inches from the inflow end the 7-inch pipe into the box was fitted with a deflector of the substances listed. The substances were introduced into the inflow pipe through a specially designed pyrex flask (figure 4), $7\frac{3}{4}$ inches long and of diameter of $1\frac{1}{2}$ inches, which held the heated waxes. The flask was made with a side arm that extended to the top of the flask was ground glass. This was fitted with a short tube of length. This short tube was inserted into a large rubber stopper tightly into a hole cut out of the pipe on the under side (figure 5). The flask in turn was placed over a heater made to cover the bottom of the side arm and top. Rubber tubing connected the side arm with a compressor and a gentle stream of air was passed through the melted wax. The motion and assured uniformity of the stream. Into each flask was inserted a centigrade thermometer kept in place and could be read at any time above the 7-inch pipe which it passed (figure 2).

Approximately 30 gm of chlorinated naphthalene

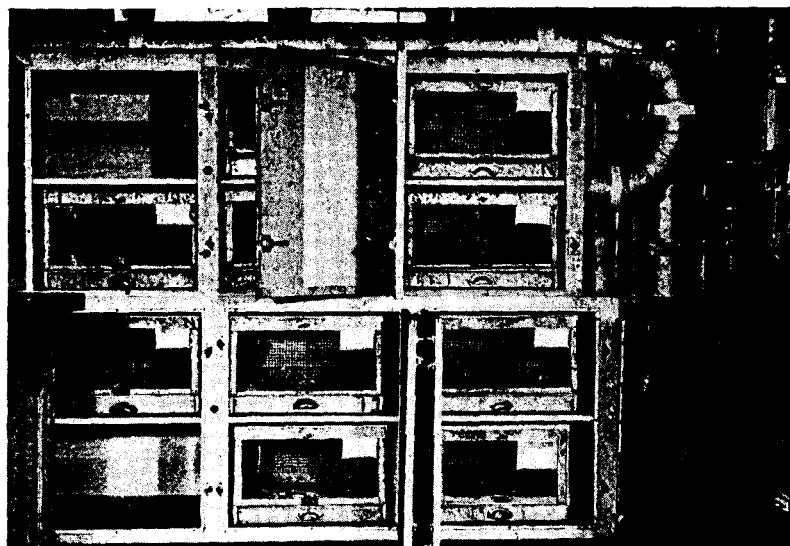


FIG. 1. Front view and inflow end of two boxes with rat cages in place and doors open.

Inhalation experiments are then the most important sources of information, but to them we have added a certain number of observations upon ingestion and subcutaneous injection of various compounds.

Inhalation Experiments

Animals.—White rats have been employed throughout. They permit the use of a large number of animals in a relatively small inhalation installa-

tion. They thrive upon a diet very similar to man, and in the case of these chlorinated compounds it is possible that diet may be very significant. Finally, their normal characteristics have been described so well as to make the detection of abnormalities both easy and certain.

At the center of one end of each box—the inflow end—air was introduced through a pipe 7 inches in diameter (figure 2). Each box was equipped with an individual variable-speed electric blower which blew the air through several feet of 7-inch pipe before enter-

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ages in place and doors open.

x 14", in two tiers of five

When the experiment was press the doors were opened the cages kept in place

enter of one end of each box w end—air was introduced pipe 7 inches in diameter

Each box was equipped ividual variable-speed elec- which blew the air through of 7-inch pipe before enter-

ing the end of the box. An orifice meter was placed in the pipe line, and the flow of air in cubic feet per minute could be adjusted and read off directly from a calibration curve. A vane deflector placed at the entrance of the pipe into the box was adjusted to assure a uniform distribution of the stream of air to the two tiers of cages.

At the opposite end of the box—the outflow end—the air from each box was exhausted through a 7-inch pipe fitted with a damper and connected to a large central exhaust fan (figure 3).

About 4 inches from the entrance of the 7-inch pipe into the box, the fumes of the substances listed were introduced into the inflowing air. Specially designed pyrex glass flasks (figure 4), $7\frac{3}{4}$ inches long and with a diameter of $1\frac{1}{2}$ inches, were used to hold the heated waxes. These flasks were made with a side arm and tube that extended to the bottom. The top of the flask was ground, and into this fitted a short tube $1\frac{1}{2}$ inches in length. This short tube was inserted into a large rubber stopper that fitted tightly into a hole cut out of the 7-inch pipe on the under side (figure 2). The flask in turn was placed in an electric heater made to cover it completely below the side arm and ground glass top. Rubber tubing connected the side arm with a compressed air reservoir and a gentle stream of air blown through the melted wax kept it in motion and assured uniform heating. Into each flask was inserted a long stem centigrade thermometer which was kept in place and could be read at any time above the 7-inch pipe through which it passed (figure 2).

Approximately 30 gm. of pulverized chlorinated naphthalenes or 20 gm. of

chlorinated diphenyl were placed in the bottom of each flask and melted in the electric heater. Fresh samples were used every other day, but it was often found necessary to add 20 gm. of new material even after one run since so much had sublimed. Whatever the case, the collected sublimate was



FIG. 2. Electric heater for maintaining chlorinated compounds at a constant temperature in place at inflow end of box.

always removed from the upper part of the flask and a clean top used each day. No sample was ever used for more than two runs.

The flask plus the contents was carefully weighed at the beginning of the run and at the end, and the loss in weight used to calculate the average

amount in a cubic meter of air per minute as determined by a series of

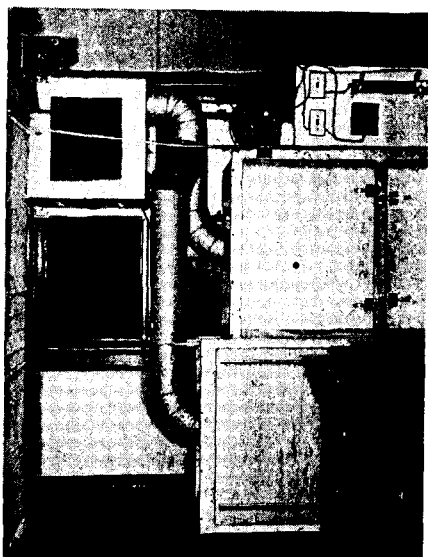


FIG. 3. Outflow end of two boxes showing connections to exhaust system.

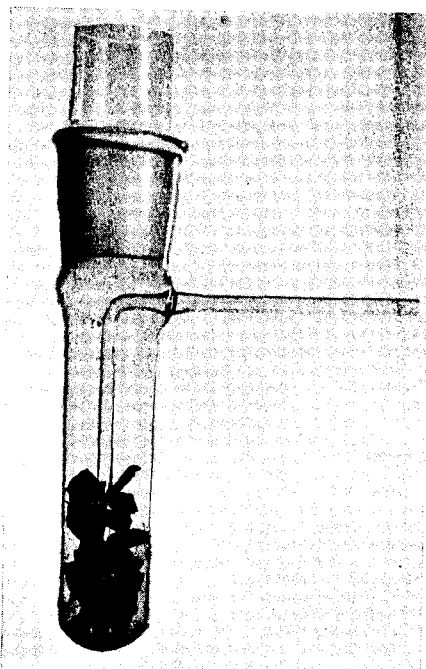


FIG. 4. Pyrex glass flask

flowmeter readings. The figures obtained were not absolute because of slight variations in the air flowing through the boxes and because of deposition of material on the thermometers and on the inside surfaces of the box, but they checked well with direct determinations through air samples.

Approximately 1 hour was allowed for the wax in the flasks to melt and come to a constant temperature. At that time the box doors were tightly closed, air bubbled through the flasks, and the blowers turned on. This was the beginning of the exposure period. By means of rheostats on the fans and dampers in the outflow pipes, the amount of air flowing through the boxes was adjusted and an attempt was made to keep the four boxes as uniform as possible—usually between 165 and 175 c.f.m.

In the first group of experiments the following substances were tested:

1. A mixture of trichloronaphthalenes plus a trace of tetrachloronaphthalene. Chlorine content 49.9 per cent.
2. A mixture of penta and hexachloronaphthalenes. Chlorine content 62.6 per cent.
3. A mixture of 90 per cent penta and hexachloronaphthalenes plus 10 per cent refined chlorinated diphenyl. Chlorine content 63.0 per cent.
4. Chlorinated diphenyl. Chlorine content 65.0 per cent.

The compounds were selected as representing a certain range in chlorination and also because of their industrial importance. In each instance 80 animals were exposed, 10 rats being placed in each cage. They were fed Purina

Dog Chow supplemented eggs, milk and cod liver oil

This first group of experiment begun on July 1, 1936 and exposure to number 2 (pentachloronaphthalenes) was on 16th. The exposure to the compounds ceased upon 18th. On October 15th five animals were taken out from groups 1, 2, and killed after 2 months on 15th, in order to see whether

CONDITIONS MAINTAINED IN IN

MATERIAL

Trichloronaphthalenes plus trace tetrachloronaphthalene

Penta and hexachloronaphthalenes

90% penta and hexachloronaphthalenes plus 10% chlorinated diphenyl

Chlorinated diphenyl

period would bring about the affected livers. An group 3 were similarly re exposure on October 4th for examination on Decem

The average length of exposure was 16 hours daily for 6 days. Each morning at about 9 a.m. the rats were weighed, etc. In order to insure conformity of exposure the rats were shifted on a regular schedule

readings. The figures obtained were not absolute because of variations in the air flowing through the boxes and because of the amount of material on the thermometer and on the inside surfaces of the boxes. They checked well with determinations through air

at least 1 hour was allowed in the flasks to melt and maintain constant temperature. At the box doors were tightly closed through the flasks, the fans turned on. This was the end of the exposure period. Rheostats on the fans and the outflow pipes, the air flowing through the boxes was adjusted and an attempt was made to keep the four boxes as close as possible—usually between 25 and 27 c.f.m.

In the first group of experiments the following substances were tested:

1. A mixture of trichloronaphthalene plus a trace of tetrachloronaphthalene. Chlorine content 62.6 per cent.

2. A mixture of penta and hexachloronaphthalenes. Chlorine content 62.6 per cent.

3. A mixture of 90 per cent penta and 10 per cent hexachloronaphthalenes plus 10 per cent refined chlorinated diphenyl. Chlorine content 63.0 per cent.

4. A mixture of 90 per cent penta and 10 per cent hexachloronaphthalenes plus 10 per cent chlorinated diphenyl. Chlorine content 65.0 per cent.

Animals were selected as representative of a certain range in chlorination because of their industrial

use. In each instance 80 animals were used, 10 rats being placed

in each cage. They were fed Purina

Dog Chow supplemented by lettuce, eggs, milk and cod liver oil.

This first group of experiments was begun on July 1, 1936 and the last exposure to number 2 (penta and hexachloronaphthalenes) was on November 18th. The exposure to the other three compounds ceased upon November 18th. On October 15th representative animals were taken out of exposure from groups 1, 2, and 4 and were killed after 2 months on December 15th, in order to see whether this clear

wax concentrations were somewhat higher at the inflow end of the boxes. Preliminary runs showed that once properly adjusted, wax concentrations in the air remained very uniform from day to day, but to insure absolute safety readings of temperature, air-flow, etc. were made every night between 10:00 and 12:00 p.m. as well as on starting and stopping. At different times during the course of the experiment tests for free chloride were made but were uniformly negative and

TABLE 1
CONDITIONS MAINTAINED IN INHALATION EXPERIMENT FROM JULY 1 TO NOVEMBER 16 AND 18

MATERIAL	CHLORINE CONTENT	TEMP.	AV. CONCENTRATION OF AIR IN BOX		TOTAL EXPOSURE	AV. DAILY EXPOSURE
			mg./cu. m.	range	hours	hours
Trichloronaphthalenes plus traces of tetrachloronaphthalene	49.9	150-160	1.31	High 2.60 Low 0.10	1896	16
Penta and hexachloronaphthalenes....	62.6	160-170	1.16	High 2.19 Low 0.51	1864	16
90% penta and hexachloronaphthalenes plus 10% chlorinated diphenyl.	63.0	165-175	1.37	High 3.17 Low 0.64	1896	16
Chlorinated diphenyl.....	65.0	165-175	0.57	High 1.19 Low 0.23	1896	16

period would bring about recovery in the affected livers. Animals from group 3 were similarly removed from exposure on October 4th and killed for examination on December 4th.

The average length of exposure was 16 hours daily for 6 days a week. Each morning at about 9:00 exposure ceased, and between this time and 4:00 p.m. the rats were cleaned, fed, weighed, etc. In order to secure uniformity of exposure the cages were shifted on a regular schedule, since

showed that under the temperatures used no decomposition occurred.

Table 1 shows the temperatures at which the various substances were held, the average concentrations per cubic meter of air, and the average exposures from July 1 to November 16 and 18.

The concentration of chlorinated naphthalenes and chlorinated diphenyl in the air of workrooms.—Table 1 shows that animals have been exposed to varied concentrations of the substances under

test. The concentrations employed may be regarded as fairly representative of industrial experience. Prior to the initiation of inhalation experiments a number of estimates of chlorinated hydrocarbons in the air of different factories were made and the

in question is passed over heated platinum in an electrically heated quartz tube and the effluent gas scrubbed in a column of glass beads moistened with sodium carbonate containing a trace of sodium sulfite. The beads are then washed down and the chloride deter-

somewhat easier to wash down than Tebbens's but the essential devices are the same.*

In both cases conversion of chlorinated hydrocarbons to hydrochloric acid and subsequent absorption in sodium carbonate should be complete. In our case concentration of acid apt to be very low—the less than 1 mgm. per cu. m. frequently the amount of silver actually formed in the final solution so small that it can not be determined either gravimetrically or by color. For this reason we have been obliged to use the nephelometric process which is sensitive to concentrations as low as 0.1 mgm. per cu. m. of a solution.

It is doubtful if the sample should exceed 1 liter per run. Conversion of the chlorinated compound to hydrochloric acid and subsequent absorption are complete unless the velocity of the gas flow is too low. Another precaution is that the method is not applicable to any chlorinated substance not determined. Furthermore, it distinguishes between solid particles and gases but determines them in terms of the results must, of course, be computed in terms of total chlorine.

At the present time we are unable to give formation as to the amount of chlorinated naphthalenes in the air of different plants, and in a few instances the measurements have been repeated several times. The amounts have been those used in our experiments must be remembered that

* The combustion and absorption apparatus suited to field sampling by Willson Products, Inc., The equipment includes a suction pump with a carrying

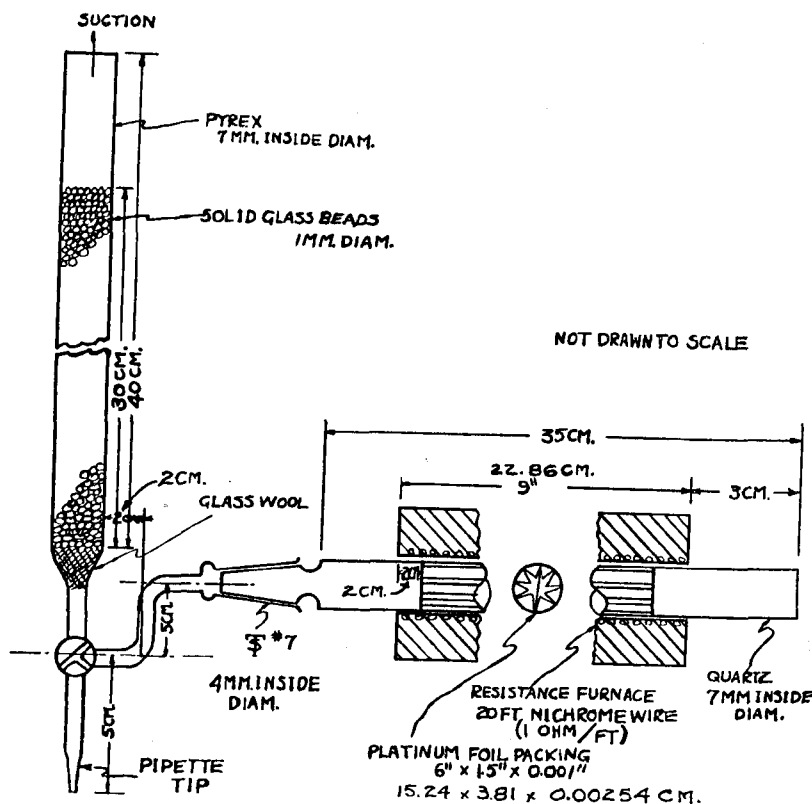


FIG. 5. Dimensioned sketch of combustion tube and absorption apparatus.

concentrations chosen for inhalation experiments depended on these examinations. The technic of analysis and the apparatus employed were the work of Frederick R. Millhiser and William F. Hemperly.

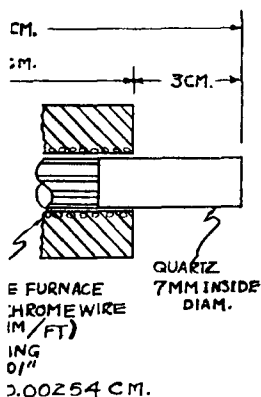
The method and apparatus used for determining concentrations of chlorinated hydrocarbons in air were adapted from well-known procedures. The air

mined nephelometrically as silver chloride.

Tebbens (1937) has recently described a method and apparatus which should be equally satisfactory for this work. In figure 5 we show a dimensioned sketch of the combustion tube and absorption apparatus as used by us in both our laboratory and field problems. The absorption tube is

s passed over heated platinum electrically heated quartz effluent gas scrubbed in glass beads moistened with sodium carbonate containing a trace of silver nitrate. The beads are then washed with water and the chloride determined.

NOT DRAWN TO SCALE



Combustion and absorption apparatus.

nephelometrically as silver

(1937) has recently described a method and apparatus which is equally satisfactory for this purpose. In figure 5 we show a dimension of the combustion tube and the absorption apparatus as used by our laboratory and field workers. The absorption tube is

somewhat easier to wash down than is Tebbens's but the essentials of the two devices are the same.*

In both cases conversion of the chlorinated hydrocarbons to hydrochloric acid and subsequent absorption as sodium carbonate should be complete. In our case concentrations in air are apt to be very low—the objective is less than 1 mgm. per cu. m. Consequently the amount of silver chloride actually formed in the final reaction is so small that it can not be determined either gravimetrically or by titration. For this reason we have been forced to use the nephelometric procedure which is sensitive to concentrations as low as 0.1 mgm. per cu. m. of air.

It is doubtful if the sampling rate should exceed 1 liter per minute as conversion of the chlorinated compound to hydrochloric acid and its subsequent absorption are not efficient unless the velocity of the gas stream is low. Another precaution to be noted is that the method is not selective—any chlorinated substance will be determined. Furthermore it does not distinguish between solid particles and gases but determines them all alike and the results must, of course, be computed in terms of total chlorine.

At the present time we possess information as to the amounts of chlorinated naphthalenes in the air of 30 different plants, and in a number of instances the measurements have been repeated several times. Frequently the amounts have been greater than those used in our experiments, but it must be remembered that the rats,

* The combustion and absorption apparatus suited to field sampling is now made by Willson Products, Inc., Reading, Pa. The equipment includes flowmeter and suction pump with a carrying case.

have been exposed for 16 hours to an atmosphere constantly impregnated with the substance under test, whereas human exposure is usually a variable quantity, intense for a short time and then negligible. It is our opinion at the present time that the concentrations of chlorinated hydrocarbons used in our experiments would be dangerous for workers in the case of compounds above trichloronaphthalene in chlorination. Fortunately it is easy to ventilate processes of manufacture which require these substances and to reduce air contamination practically to the vanishing point. Such treatment of the problem at once removes both the possibility of systemic poisoning and the annoyances that arise from cases of acne.

Results of Inhalation Experiments.

1. Animals exposed to a mixture of trichloronaphthalenes plus small amounts of tetrachloronaphthalene. Living animals were apparently entirely normal. Autopsies performed near the end of exposure seemed to show slight swelling of the liver, and microscopic examination occasionally showed swollen and hypergranular liver cells. The changes were, however, never more than slight.

2. Animals exposed to a mixture of penta and hexachloronaphthalenes. No abnormalities were observed in the living animals. Rats were killed and autopsied every 6 weeks. In the first animals sacrificed liver changes were observed. These were swelling of cells, slight granulation and hyalinization. In September and October these conditions were somewhat more advanced, and in November the process became stationary. There were highly

granular cells, hyaline inclusions and mitotic figures, but no more than 2 months previously.

3. Animals exposed to a mixture of 90 per cent penta and hexachloronaphthalenes plus 10 per cent refined chlorinated diphenyl. No abnormalities were seen in the living animals. After 6 weeks the livers showed changes similar to those in the animals exposed to penta and hexachloronaphthalenes. These advanced in grade during August and September and then became stationary.

4. Animals exposed to chlorinated diphenyl. No abnormalities were seen in the living rats. After 6 weeks' exposure there was slight liver damage which advanced during the next 2 months. The changes consisted in slight to moderate swelling of the liver cells, an increased granularity and many mitotic figures. Hyalinization was always present as a result of inhalation of chlorinated diphenyl.

Summary of the first inhalation experiment.—In these experiments careful observation of appearance, body weight, activity, blood, and urine showed no abnormalities of any sort. Yet after 6 weeks' exposure all the compounds with chlorination above trichloronaphthalene caused minor degrees of liver damage, and no changes whatsoever in other organs. There was no acute yellow atrophy or anything suggesting it except that a slight degree of liver damage was always present and was quite clear in the liver sections examined microscopically. This damage had no detectable effect on the health of the animals. They held their weight, ate and behaved normally, being in every respect similar to the many people who have been

exposed to these compounds without illness of any sort.

The functional appraisal of the liver damage caused by certain chlorinated naphthalenes and by chlorinated diphenyl.—There are no tests of liver function useful in such minor degrees of liver damage as were produced in these experiments. Indeed the animals resisted the injury so perfectly as to display no abnormalities except upon histological examination of the liver. The situation was perhaps similar to that met in industry, where, barring acne, the health of workers in these compounds has been good with the exception of the fact that in isolated instances jaundice has occurred which upon at least three occasions has gone on to acute yellow atrophy.

During recent years this disease has been seen following administration of carbon tetrachloride, arsphenamine and cincophen. In the case of carbon tetrachloride it is known that a low calcium diet and alcohol favor the production of liver damage. For the acute yellow atrophy that occasionally complicates use of the other two drugs no cause can be assigned. One cannot produce acute yellow atrophy with arsphenamine, but somehow or other this now and then does happen to patients under antisyphilitic treatment.

It occurred to us that something of the same sort might be involved in this problem. The human cases have been scattered and few. They have been isolated instances out of large groups of healthy employees who have had equal degrees of exposure. It was our idea that perhaps many of these people got liver changes such as existed in our rats, changes not recognizable through

any means other than autnation. If, upon the such changes, they got an disturbance, acute catarrh not a very common diseases which any of us may experience this relatively innocuous over to acute yellow atrophy.

Knowing that our inhalation had liver changes, but a slight to cause recognizable we decided to test their substances known to cause destruction. Carbon tetrachloride alcohol were selected. Hypothese that 1.0 cc. of carbon chloride plus 1.0 cc. of ethyl alcohol per kilogram would kill 14 normal white rats, we reduced to 0.75 cc. carbon tetrachloride plus 0.75 cc. of ethyl alcohol.

This mixture was given by stomach tube to the following groups of rats and with the results of the following tabulation.

Rats fed 0.75 cc. per kgm. of carbon tetrachloride and ethyl alcohol by stomach tube

1. *Trichloronaphthalene plus hexachloronaphthalene.* Fed at 9:00 a.m., Nov. 10, 1936. 10 rats. No deaths.
2. *Penta and hexachloronaphthalene.* Fed at 9:30 a.m., Nov. 10, 1936. 3 died Nov. 11th between 10:30 p.m. and 11:30 a.m.
1 died Nov. 12th at 3:20 p.m.
1 died Nov. 12th at 4:30 p.m.
1 died Nov. 13th between 11:30 a.m. and 12:30 p.m.
1 died Nov. 15th between 14th and 12:30 p.m.
1 died Nov. 16th between Nov. 15th and 9:00 a.m. (stiff).
3. *90 per cent penta and 10 per cent chlorinated diphenyl.* Fed at 10:00 a.m., Nov. 10, 1936.

these compounds without y sort.

ional appraisal of the liver sed by certain chlorinated and by chlorinated diere are no tests of liver ful in such minor degrees age as were produced in iments. Indeed the ani d the injury so perfectly y no abnormalities except ological examination of the situation was perhaps at met in industry, where, e, the health of workers in ounds has been good with n of the fact that in isoc es jaundice has occurred at least three occasions to acute yellow atrophy. cent years this disease has ollowing administration of rachloride, arsphenamine en. In the case of carbon e it is known that a low and alcohol favor the pro-liver damage. For the atrophy that occasionally use of the other two drugs be assigned. One cannot ute yellow atrophy with e, but somehow or other d then does happen to pa-r antisyphilitic treatment. ed to us that something of t might be involved in this The human cases have been d few. They have been ances out of large groups employees who have had s of exposure. It was our rhaps many of these people nges such as existed in our s not recognizable through

any means other than autopsy examination. If, upon the substratum of such changes, they got an acute liver disturbance, acute catarrhal jaundice, not a very common disease but one which any of us may experience, would this relatively innocuous disease go over to acute yellow atrophy?

Knowing that our inhalation rats had liver changes, but changes too slight to cause recognizable symptoms, we decided to test their resistance to substances known to cause liver destruction. Carbon tetrachloride and alcohol were selected. Having information that 1.0 cc. of carbon tetrachloride plus 1.0 cc. of ethyl alcohol per kilogram would kill 14 per cent of normal white rats, we reduced the dose to 0.75 cc. carbon tetrachloride and 0.75 cc. of ethyl alcohol.

This mixture was given by stomach tube to the following groups of animals and with the results found in the following tabulation.

Rats fed 0.75 cc. per kgm. each of carbon tetrachloride and ethyl alcohol by stomach tube

1. *Trichloronaphthalene plus trace of tetrachloronaphthalene.* Fed at 9:00 a.m., Nov. 10, 1936. 10 rats. No deaths.
2. *Penta and hexachloronaphthalenes.* Fed at 9:30 a.m., Nov. 10, 1936. 10 rats.
 - 3 died Nov. 11th between 4:30 and 10:30 p.m.
 - 1 died Nov. 12th at 3:20 p.m.
 - 1 died Nov. 12th at 4:30 p.m.
 - 1 died Nov. 13th between 9:30 and 11:30 a.m.
 - 1 died Nov. 15th between night of Nov. 14th and 12:30 p.m. Nov. 15th. 2 died Nov. 16th between 10:15 p.m. Nov. 15th and 9:00 a.m. Nov. 16th (stiff).
3. *90 per cent penta and hexachloronaphthalenes and 10 per cent chlorinated diphenyl.* Fed at 10:00 a.m., Nov. 10, 1936. 10 rats.

1 died Nov. 10th between 5:00 and 10:30 p.m.

5 died Nov. 11th between 4:30 and 10:30 p.m.

1 died Nov. 11th between 4:30 p.m. and 9:00 a.m. Nov. 12th.

2 died Nov. 12th about 1:00 a.m.

1 died Nov. 13th between 5:00 and 10:00 p.m.

4. *Chlorinated diphenyl.* Fed at 10:00 a.m., Nov. 10, 1936. 10 rats.

1 killed Nov. 10th at 10:30 p.m. (almost dead).

2 died Nov. 11th between 4:30 and 10:30 p.m.

1 died Nov. 12th before 8:30 a.m. (stiff).

1 died Nov. 13th between 9:30 and 11:00 a.m.

1 died Nov. 16th between 10:15 p.m. Nov. 15th and 9:00 a.m. Nov. 16th (stiff).

Controls: Fed at 9:30 a.m., Nov. 12, 1936. 10 rats. 1 killed Nov. 13th for normal liver.

This tabulation summarizes into the facts that:

1. No normal rats were killed by carbon tetrachloride and ethyl alcohol.

2. No trichloronaphthalene exposed rats were killed, and this finding agrees with our inability to find lesions of moment in the livers of the animals that inhaled this substance.

3. The penta and hexachlorinated naphthalene, the mixture of these with 10 per cent chlorinated diphenyl, and finally the latter substance alone seem to have produced conditions lowering the resistance to an agent capable of producing serious liver disease.

4. The sole lesion produced by this test of liver function was acute yellow atrophy usually accompanied by jaundice.

This test of liver function was accomplished with a substance which itself is an organic chloride and curiously enough it is the only substance we were able to find that was effective.

In animals with the minor degree of liver injury which has been described we were unable to produce acute yellow atrophy or any variety of liver effect with arsphenamine, cinchophen, butyl chloride, ethylene chloride and tetrachlorethylene, but carbon tetrachloride was uniformly effective in disclosing the existence of liver damage.

Recovery from liver damage following removal from exposure.—Animals exposed to trichloronaphthalenes plus traces of tetrachloronaphthalene being practically normal on removal from exposure need no consideration. In the case of the penta and hexachlor-

signs of liver injury will be many months in returning to normal.

The effect of high concentrations of trichloronaphthalenes with traces of tetrachloronaphthalene.—The first group of inhalation experiments showed that this material in concentrations averaging 1.31 mgm. per cu. m. of air was relatively innocuous, judged both by direct observation and by the carbon tetrachloride test. This is an interesting fact since such compounds cause acne, though less potently than substances of higher chlorination. In order to explore the matter further one of the inhalation boxes was arranged

TABLE 2
CONDITIONS MAINTAINED DURING INHALATION OF HIGH CONCENTRATIONS OF
TRICHLORONAPHTHALENES PLUS TETRACHLORONAPHTHALENE

MATERIAL	TEMP.	AV. CONCENTRATION OF AIR IN BOX		TOTAL EXPOSURE	AV. DAILY EXPOSURE
		mg./cu. m.	range		hours
Trichloronaphthalenes plus traces of tetrachloronaphthalene	137-200	10.97	High 16.49 Low 5.78	1232	16

naphthalene, rats after 2 months' removal from exposure still showed swollen liver cells, increased granularity, hyalinization and mitotic figures. The condition was not advanced as compared with rats killed at the time of removal from exposure but on the other hand 2 months were insufficient for recovery.

The same findings were true of the mixture of penta and hexachlorinated naphthalenes and chlorinated diphenyl and for chlorinated diphenyl alone.

Apparently the changes induced in the liver cells by these substances are exceedingly persistent and one must expect that an individual showing any

so that fumes from four glass containers were delivered to the air line instead of one. This resulted in the conditions shown in table 2. The animals subjected to these conditions showed no clinical effects of any sort. After 1 month the liver cells were slightly swollen and over-granular and there were occasional mitotic figures. These changes were similar to the early effects of more highly chlorinated compounds, and progressed only slightly during the third and fourth months. When rats in this condition were given carbon tetrachloride and alcohol, in some instances their livers showed massive central necrosis and

in others this did not develop. rats were used in this experiment one may conclude that with trichloronaphthalenes are in no way as toxic as those of higher chlorination they are not entirely free of effect upon the liver if high enough concentrations are inhaled over long

The effects of high concentrations of penta and hexachloronaphthalenes. There can be no doubt as to the damage done the liver by these compounds but in the concentrations reported no symptoms were observed which could be recognized clinically nothing approaching acute

CONDITIONS MAINTAINED DURING INHALATION OF HIGH CONCENTRATIONS OF
PENTA AND HEXACHLORONAPHTHALENES

MATERIAL
Penta and hexachloronaphthalenes

atrophy occurred except in the case of the use of the carbon tetrachloride. On December 1, 1936, 8 rats were subjected to the conditions summarized in table 3. This experiment was terminated on January 1, 1937, as the animals lost weight and deaths began after 8 months of exposure. Fifty-five rats died during the experiment, 48 of them heavily jaundiced, and 7 for microscopic examination. All were killed by the carbon tetrachloride and 8 lived through the experiment. The livers of the rats killed for examination showed fatty degeneration, central necrosis with necrosis of liver cells and animals showed pronounced

iver injury will be many returning to normal.

at of high concentrations of hthalenes with traces of tetra- alene.—The first group of experiments showed that al in concentrations averaging gm. per cu. m. of air was innocuous, judged both by ervation and by the carbon de test. This is an in- act since such compounds , though less potently than of higher chlorination. o explore the matter further nhalation boxes was arranged

HIGH CONCENTRATIONS OF
ORNAPHTHALENE

CONCENTRATION AIR IN BOX	TOTAL EXPOSURE	AV. DAILY EXPOSURE
range	hours	hours
High 16.49	1232	16
Low 5.78		

nes from four glass contain- livered to the air line instead his resulted in the conditions able 2. The animals sub- these conditions showed no ects of any sort. After 1 e liver cells were slightly d over-granular and there onal mitotic figures. These ere similar to the early ore highly chlorinated , and progressed only ring the third and fourth hen rats in this condition carbon tetrachloride and some instances their livers issive central necrosis and

in others this did not develop. Fifty rats were used in this experiment and one may conclude that while the tri- chlornaphthalenes are in no degree as toxic as those of higher chlorination they are not entirely free from effects upon the liver if high enough concen- trations are inhaled over long periods.

The effects of high concentrations of penta and hexachlornaphthalenes.— There can be no doubt as to the dam- age done the liver by these compounds but in the concentrations so far re- ported no symptoms were caused that could be recognized clinically and nothing approaching acute yellow

the liver after 35 days of freedom from inhalation. It is thus evident that penta and hexachlornaphthalenes are markedly toxic compounds and that recovery from their effects is extremely slow.

The effects of penta and hexachlor- naphthalenes, the mixture of these with 10 per cent chlorinated diphenyl, and of chlorinated diphenyl alone, when inhaled in low concentrations through an 8-hour day instead of a 16-hour day as in the first experiment.—Since steady human exposure to any of the compounds tested would invariably be for 8 hours rather than 16-hour periods, a further

TABLE 3
CONDITIONS MAINTAINED DURING INHALATION OF HIGH CONCENTRATIONS OF PENTA AND HEXACHLORNAPHTHALENES

MATERIAL	TEMP.	AV. CONCENTRATION OF AIR IN BOX		TOTAL EXPOSURE	AV. DAILY EXPOSURE
		mg./cu. m.	range	hours	hours
Penta and hexachlornaphthalenes.....	137-195	8.88	High 14.0 Low 5.75	608	16

atrophy occurred except through the use of the carbon tetrachloride test. On December 1, 1936, 80 rats were subjected to the conditions sum- marized in table 3. This experment was terminated on January 21. All of the animals lost weight and appetite and deaths began after 8 days of expo- sure. Fifty-five rats died, most of them heavily jaundiced, 8 were killed for microscopic examination, 9 were killed by the carbon tetrachloride test and 8 lived through the period of exposure. The livers of the animals killed for examination showed marked fatty degeneration, central in type with necrosis of liver cells. Surviving animals showed pronounced changes in

inhalation experiment was arranged under the conditions shown in table 4 which are quite comparable to those in table 1 except for the shorter inhala- tion periods. Eighty rats were used for each of the three compounds tested. None at any time showed the slightest evidence of illness. Microscopic ex- amination beginning after 6 weeks' exposure showed swollen liver cells, excess granulation, hyaline inclusions and occasional mitotic figures. These changes did not progress and were very similar to those in the animals exposed for 16 hours under the conditions set forth in table 1. The carbon tetra- chloride test was uniformly fatal to them and one must conclude that con-

centrations of these compounds such as were employed cause a certain degree of liver damage even if inhaled for but 8 hours daily. This injury is resisted successfully by the rats just as was the 16-hour injury but it is none the less there and destroys the ability of the animal to resist the carbon tetrachloride test.

Summary of inhalation experiments. The findings that have been described briefly will be amplified upon the pathological side in a further paper by Dr. G. A. Bennett. What has been given is, however, sufficient to indi-

men never inhale enough of any of these substances to get acute yellow atrophy. They may, however, acquire a substratum of liver damage upon which acute yellow atrophy may develop. Experience in a number of plants has shown how easy it is to reduce concentrations of these compounds practically to the vanishing point, and every effort should be made to attain such conditions.

Gross Feeding Experiments

The various compounds used were ground as finely as possible and mixed with a standard balanced ration for

TABLE 4
CONDITIONS MAINTAINED DURING INHALATION OF LOW CONCENTRATIONS OF THREE
COMPOUNDS DURING 8-HOUR INSTEAD OF 16-HOUR PERIODS

MATERIAL	TEMP. °C.	AV. CONCENTRATION OF AIR IN BOX		TOTAL EXPOSURE	AV. DAILY EXPOSURE
		mg./cu. m.	range	hours	hours
Penta and hexachloronaphthalenes.....	149-193	1.44	High 2.58 Low 0.42	920	8
90% penta and hexachloronaphthalenes plus 10% chlorinated diphenyl.....	150-197	1.66	High 3.30 Low 0.56	912	8
Chlorinated diphenyl.....	153-174	0.93	High 3.23 Low 0.03	920	8

cate that compounds more highly chlorinated than trichloronaphthalene are capable of causing liver injury when inhaled steadily in quite low concentrations. It is an extraordinary thing that even the most searching examination fails to show injury in any other region. It is not easy to grade the toxicity of the different compounds tested, but the chlorinated diphenyl is certainly capable of doing harm in very low concentrations and is probably the most dangerous. Industrial experience combined with these experiments make it appear probable that work-

the white rat. The food was placed in a single container, at which the 10 animals in a cage had an equal chance, the amount of the compounds added being reduced as the number of rats lessened during the feeding period. The experiments were designed to give an idea as to the possible toxicity of the compounds selected and, if toxicity was observed, some idea as to the site or sites of damage.

The experiments were successful in both respects, and indeed one may anticipate that future appraisals of the possible toxicity of chlorinated hydro-

carbons may often be made by gross feeding and do not require a gross rate apparatus and the exposure necessary for inhalation experiments. An essential reason for this opinion is in the identity of the lesions produced by both methods, and the fact that different compounds so far as toxicity is concerned seem to arrange themselves in the same way they are administered.

Trichloronaphthalene plus tetrachloronaphthalene.—Feeding began on May 4, 1936 and continued until November 2, 1936. During this time 3 gm. of this mixture was added to the food for 10 rats and this concentration was maintained throughout the experiment. All animals were killed except one which died on Nov. 2. There was a loss of weight and no apparent wasting illness of any sort. The death was due to some respiratory infection which was attributed to the material inhaled.

Histological examination showed slight changes in the liver of great significance.

Tetra and pentachloronaphthalene.—Feeding began on June 1, 1936 at a dosage of 0.5 gm. daily for 10 rats. All the animals sickened and 5 were either killed or died on June 29, 1936.

At autopsy both gross and microscopic examination showed the liver was the organ most affected. The liver cells showed hypergranulation, hyperplasia, necrosis and vacuolation. There were also necrotic cells and a tremendous accumulation of fat.

Penta and hexachloronaphthalene.—Feeding began May 4, 1936 at a dosage of 0.5 gm. daily for 10 rats. By

inhale enough of any of these to get acute yellow fever may, however, acquire some of liver damage upon which yellow atrophy may develop in a number of experiments. It is shown how easy it is to get concentrations of these compounds which are toxic to the vanishing point. Very effort should be made to get the best conditions.

Feeding Experiments

Various compounds used were fed as far as possible and mixed with a standard balanced ration for

CONCENTRATIONS OF THREE
-HOUR PERIODS

CONCENTRATION IN IN BOX	TOTAL EXPOSURE	AV. DAILY EXPOSURE
range	hours	hours
High 2.58 Low 0.42	920	8
High 3.30 Low 0.56	912	8
High 3.23 Low 0.03	920	8

rat. The food was placed in a container, at which the 10 rats in a cage had an equal chance, of the compounds added to the food as the number of rats during the feeding period. The experiments were designed to give to the possible toxicity of the compounds selected and, if toxicity was observed, some idea as to the site of damage. The experiments were successful in this respect, and indeed one may expect that future appraisals of the toxicity of chlorinated hydro-

carbons may often be made by simple feeding and do not require the elaborate apparatus and the expense necessary for inhalation experiments. The essential reason for this opinion resides in the identity of the lesions produced by both methods, and the fact that the different compounds so far studied seem to arrange themselves identically so far as toxicity is concerned whichever way they are administered.

Trichloronaphthalene plus traces of tetrachloronaphthalene.—Feeding began on May 4, 1936 and continued until November 2, 1936. In the beginning 3 gm. of this mixture were added to the food for 10 rats each day, and this concentration was maintained throughout the experiment. All the animals were killed except the last which died on Nov. 2. There was no loss of weight and no appearance of wasting illness of any sort. The single death was due to some variety of respiratory infection which had no relation to the material inhaled.

Histological examination showed slight changes in the liver but nothing of great significance.

Tetra and pentachloronaphthalenes.—Feeding began on June 29, 1936. A dosage of 0.5 gm. daily was employed. All the animals sickened gradually and were either killed or died by August 29, 1936.

At autopsy both grossly and histologically the liver was the single organ affected. The liver cells showed swelling, hypergranulation, hyaline inclusions and vacuolation. Here and there necrotic cells were found. There was a tremendous accumulation of fat.

Penta and hexachloronaphthalenes.—Feeding began May 4, 1936, a 3 gm. dosage being used. By June 6, nine

rats had died. The last one was obviously ill and was killed for autopsy examination. All animals lost weight from the beginning and were ill. At autopsy the liver alone was affected, the lesions observed being similar to those that have been described for tetra and pentachloronaphthalenes but worse.

90 per cent penta and hexachloronaphthalenes and 10 per cent chlorinated diphenyl.—Feeding began May 4, 1936 on a 3 gm. dosage. On May 16th feeding was stopped but all the animals went on to death, the last dying on June 8th. An autopsy the liver lesions were extremely severe and of the usual type.

On account of the high toxicity of the 3 gm. dosage, four rats were given a 0.5 gm. dose every other day. Feeding began June 24, 1936 and the last animal was killed Sept. 11th. There were no deaths but all the animals lost weight. At autopsy the liver as usual was the single organ affected, the lesions being characteristic and extensive.

Chlorinated diphenyl.—Feeding began May 4, 1936 on a 3 gm. dosage and was discontinued on May 10th. Seven of the 10 rats were dead by May 12th. The three remaining rats gained in weight but were sacrificed for autopsy purposes on July 8th. The liver changes began at once. There were no changes in other organs.

A second group of 10 rats was fed a much smaller dose—0.5 gm. every other day. Feeding began May 20, 1936. The first rat died on May 29th and four more before June 24th. The remaining were sacrificed. Those rats that died showed losses in weight, while those sacrificed had recovered

their initial loss in weight and were gaining. The liver lesions were similar to those found in rats fed penta and hexachloronaphthalenes plus 10 per cent chlorinated diphenyl but not so marked.

Summary of gross feeding experiments.—Of the various materials fed rats in large doses trichloronaphthalene plus traces of tetrachloronaphthalene was quite innocuous. Tetra and pentachloronaphthalene showed definite liver damage. Penta and hexachloronaphthalenes caused a similar grade of injury. The addition of chlorinated diphenyl to penta and hexachloronaphthalenes increased the toxicity. Chlorinated diphenyl alone produced liver lesions but in the dosage used was less effective than when mixed with highly chlorinated naphthalenes. In no case did the compounds used produce acute yellow atrophy but the lesions observed indicate this might be possible if one found a dosage which could act for the proper period of time.

Feeding Precise Doses by Stomach Tube

The compounds employed were suspended in gum acacia. In figuring the dosage the total amount a man of 50 kg. would inhale in an 8-hour day assuming an air concentration of 20 mgm. per cu. m. was first calculated and reduced to milligrams per kilogram. The rats and rabbits received this dose each day. The compounds used were those employed in the gross feeding experiments and the results were essentially similar though the lesions were less severe.

Subcutaneous Injections

The same gum acacia suspensions were injected subcutaneously into rats

and rabbits, the dosage being calculated on the basis of 4 mgm. per cu. m. of air. Again similar results were obtained. In all such experiments there must of necessity be differences in the degree of effect but invariably the liver was the sole organ affected and the lesions were those already described many times.

DISCUSSION

These experiments leave no doubt as to the possibility of systemic effects from the chlorinated naphthalenes and chlorinated diphenyl. As in the case of the effects upon the skin, the degree of chlorination seems to determine the systemic toxicity, and it is a striking thing that when trichloronaphthalene is reached systemic effects are never marked and are produced with the greatest difficulty. It is most remarkable, too, that all the compounds tested attack the liver and the liver alone. During the past few months we have determined the organically combined chloride in the livers of animals very severely poisoned by penta and hexachloronaphthalenes but have found no increase over normal figures, though the livers, as determined histologically, were very severely affected. At the present time we are conducting inhalation experiments on a chlorinated diphenyl containing 55 per cent of chlorine instead of 64 per cent as in the case of the experiments reported in this paper and on a compound with a chlorine content between tri and tetrachloronaphthalene. We are also determining the degree to which the diet may increase or decrease toxicity, this being suggested by similar work upon carbon tetrachloride.

In the basis of these experiments

and on many field determinations of different compounds in the rooms, it appears safe and certainly easily attained, to say that the air breathed does not contain more than 0.5 mgm. per cu. m. of these compounds above the level of naphthalene. In the case of compound concentrations of 0.5 mgm. per cu. m. are permissible. We know from many examinations in many plants that such concentrations have been greatly exceeded during the last 20 years, and we are confident that our rat experiments have been inexorably constant. Time and careful observation will change these opinions as time goes by but today we are convinced that the use of these compounds is safe. Impregnating tank arrangements utilizing the hydrocarbons are easy to safeguard. Compared with lead tetraethyl and many

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s, the dosage being calculated on a basis of 4 mgm. per cu. m. In all such experiments we gain similar results. In all such experiments of necessity be differences of effect but invariably as the sole organ affected lesions were those already many times.

DISCUSSION

Experiments leave no doubt of the possibility of systemic effects of chlorinated naphthalenes and diphenyl. As in the case of lesions upon the skin, the degree of irritation seems to determine the toxicity, and it is a striking fact when trichloronaphthalene is used that systemic effects are never observed. It is most remarkable that all the compounds which attack the liver and the lungs during the past few months have determined the organically chlorinated in the livers of animals severely poisoned by pentachloronaphthalenes but have no increase over normal figures, in the livers, as determined histologically, were very severely affected. At present time we are conducting experiments on a chlorinated naphthyl containing 55 per cent instead of 64 per cent as in the experiments reported earlier and on a compound with a low content between tri and tetra naphthalene. We are also studying the degree to which the increase or decrease toxicity, suggested by similar work on tetrachloride. The basis of these experiments

and on many field determinations of different compounds in the air of work-rooms, it appears safe and it is certainly easily attained, to ventilate so that the air breathed does not contain more than 0.5 mgm. per cu. m. of any of these compounds above trichloronaphthalene. In the case of the latter compound concentrations of 10.0 mgm. are permissible. We know from many examinations in many different plants that such concentrations have been greatly exceeded during the past 20 years, and we are conscious of the fact that our rat exposures have been inexorably constant whereas human exposure is never so ordered. Time and careful observation may change these opinions as to standards, but today we are convinced they are safe. Impregnating tanks and other arrangements utilizing the chlorinated hydrocarbons are easy to hood and to safeguard. Compared with benzene, lead tetraethyl and many other com-

pounds, these substances are very little toxic and operations employing them can easily be safeguarded. It may be argued that where possible trichloronaphthalene should be used, but this compound will cause acne and if employed very carelessly might do more. Furthermore, higher chlorination is often essential for highly practical reasons. The solution consists in thoroughly adequate ventilation plus good housekeeping around all wax containers.

A final word of caution bears upon the use of carbon tetrachloride as a wax solvent. Obviously this compound adds readily to the toxicity of the highly chlorinated waxes. If carbon tetrachloride is used, ventilation should be excellent, but in our opinion it would be better to dispense with carbon tetrachloride and depend on other solvents, especially upon those containing no chlorine.

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DISCUSSION

DR. CECIL K. DRINKER: We have had quite a long morning, but since Dr. von Oettingen has to leave, I am going to ask him to say a word.

DR. W. F. VON OETTINGEN (Director, Haskell Laboratory of Industrial Toxicology, Wilmington, Delaware): I wish to congratulate Dr. Drinker and his group on the very interesting and excellent work on the subject. I also wish to congratulate the Halowax Corporation on the fact that they didn't spare any effort to elucidate the problem so that the dangers which apparently are connected with the use of this material can be controlled.

I personally believe that there is no toxic material which cannot be used safely if it is handled properly. In order to handle such materials properly during the different operations it is absolutely essential to be familiar with the toxicity and especially with the mechanism of the action. Since there is no animal which corresponds in all its physiological characteristics to the human being it is important that such compounds be studied with different species of animals so that one can get a cross-section of the potential dangers.

In addition, this fact illustrates the importance of the pre-employment and periodical examination of workers in such work. As was pointed out by Dr. Drinker, there are individuals who are apparently more susceptible to certain toxic agents than others. On the other hand, we have to try to detect the very first signs of incipient poisoning in order to prevent more serious damage. In the present instance it is very difficult to find these very first symptoms because there are no adequate methods, but I trust that in time the scientific profession will supply the medical profession with adequate methods which will allow the physician to determine incipient damage of the organ before serious clinical symptoms become manifest.

Thank you.

Afternoon Session

DR. CECIL K. DRINKER: In this discussion I will call on one or two individuals and I shall expect others to speak as their notes

incline them to. First of all I shall ask Dr. Sayers if he will open the discussion for us.

DR. R. R. SAYERS (Chief, Division of Industrial Hygiene, National Institute of Health, U. S. Public Health Service, Washington, D. C.): Dr. Drinker, Ladies and Gentlemen: It gave me a great deal of pleasure to have the opportunity to listen to the excellent and interesting discussion and presentations made this morning. Dr. Drinker, and I might add, the members of the Halowax Corporation, have discussed this matter with us, as well as the manufacturers of the diphenyls.

We have been doing some work but not nearly as extensive as that carried on here. The work that we have been doing seems to confirm the work that Dr. Drinker has carried on. I think there are certain parts of it that we can very well keep in mind.

We are dealing with toxic substances, but we are dealing with toxic substances each and every day in industry—harmful substances, hazardous substances. That these can be controlled is well known, no matter what they are, and that we can use them and use them in a safe manner. Dr. Drinker has called your attention to the fact that this apparently has been done and can be done in any of the plants where halowax is used. I have information from one or two of the other men who are in the audience that in plants where damage has been done—skin damage and apparently liver damage to some of the workers—the manufacturers have since corrected the conditions and apparently have adequate engineering control supplemented with adequate medical control.

After all, the proof of the pudding is in the eating. If the man does not get the disease your engineering control is successful. If he does get the disease, no matter what you have done in the way of engineering, you haven't been successful. We must go hand in hand. Neither profession alone can be successful. We have got to work together whether we like it or not. I happen to like it.

There is one other thing. As far as materials are concerned I think we ought to be

smart enough to use every one successfully. If this material is adapted for a certain purpose it. Another material that is obvious to this for insulation purposes was flammable, caused a disaster approximately 167 men lost say approximately 167 because never just sure whether it was. It might have been one or two were quite sure that 167 lost it happened when they had insulation with this material. They had electric cable. It was covered with armor on the outside. It was and was being lowered into a approximately 3000 feet deep. to a steel rope. It slipped to the bottom of the shaft. When inspecting it he set it on fire. The carbon fire killed those men in the mine. Many of course escaped.

Here we have one hazard. Now we have another one, due to the toxic materials. We evaluate them. Certain of them I am informed, are also flammable not just sure how flammability probably decreases as chlorination increases. But also increases as your chlorination increases, according to Dr. Drinker. I think that checks with other hazards to balance and control them. I feel quite sure we can.

Perhaps we can find other materials better even than this material. At present time I am advised that it is better. I am advised that in submarines, it is quite important to have a non-flammable substance for their electrical wire.

DR. CECIL K. DRINKER: Thank you for your care to say a word?

DR. ALBERT S. GRAY (Chief, Bureau of Occupational Diseases, Connecticut Department of Health, Conn.): Dr. Drinker, I don't know anything that I can say except that this material in Connecticut

to. First of all I shall ask if he will open the discussion

SAYERS (Chief, Division of Hygiene, National Institute of Public Health Service, Washington): Dr. Drinker, Ladies and Gentlemen: It gave me a great deal of pleasure and the opportunity to listen to the most interesting discussion and I made this morning. Dr. Drinker might add, the members of the Corporation, have discussed with us, as well as the manufacturers of diphenyls.

We have been doing some work but not as extensive as that carried on here. It seems to me that we have been doing seems to me that Dr. Drinker has carried out there are certain parts of it which we will keep in mind.

Working with toxic substances, but working with toxic substances each day in industry—harmful substances. That these substances are well known, no matter how, and that we can use them in a safe manner. Dr. Drinker has called our attention to the fact that this has been done and can be done at the plants where halowax is used. Information from one or two men who are in the audience where damage has been done to the liver and apparently liver damage to the workers—the manufacturers have corrected the conditions and have adequate engineering contented with adequate medical

the proof of the pudding is in the eating. If the man does not get the disinfecting control is successful. If the disease, no matter what it is in the way of engineering, has been successful. We must go on. Neither profession alone is successful. We have got to work together we like it or not. I have

nothing other thing. As far as material concerned I think we ought to be

smart enough to use every one of them successfully. If this material is particularly adapted for a certain purpose we should use it. Another material that was used previously to this for insulation purposes, which was flammable, caused a disaster in which approximately 167 men lost their lives. I say approximately 167 because they were never just sure whether it was 167 or 168. It might have been one or two more but they were quite sure that 167 lost their lives. It happened when they had insulated a cable with this material. They had an armored electric cable. It was covered with lead armor on the outside. It was 1200 feet long and was being lowered into a mine shaft approximately 3000 feet deep. It was lashed to a steel rope. It slipped and fell to the bottom of the shaft. When the foreman was inspecting it he set it on fire with his carbide cap-lamp. The carbon monoxide from the fire killed those men that were in that mine. Many of course escaped.

Here we have one hazard, a fire hazard. Now we have another one, a health hazard due to the toxic materials. We have to evaluate them. Certain of these materials, I am informed, are also flammable. I am not just sure how flammable they are but flammability probably decreases as your chlorination increases. But your toxicity also increases as your chlorination increases, according to Dr. Drinker, and I think that checks with other findings. We have these hazards to balance but we can control them. I feel quite confident that we can.

Perhaps we can find other substances that are better even than this material. At the present time I am advised that we have no better. I am advised that in ships, such as submarines, it is quite important to have a non-flammable substance for the insulation of their electrical wire.

DR. CECIL K. DRINKER: Dr. Gray, would you care to say a word?

DR. ALBERT S. GRAY (Director, Bureau of Occupational Diseases, State of Connecticut Department of Health, Hartford, Conn.): Dr. Drinker, I don't think there is anything that I can say except that we used this material in Connecticut and we had a

number of so-called cases. All I can say is a confession of ignorance on our part at that time and I was very glad to see that your digging into the literature as thoroughly as you have hasn't elicited any further information than we were able to get, basically. About all we could find was about the two cats that our friend, Lehmann, experimented with. We got in touch with him and he confessed that the amount that he had given the cats and his method of determining it were probably subject to very serious scientific criticism, and we agreed with him on that point.

We felt, and I am very glad that it is what you feel as a result of your experiments, that if we put in an efficient ventilation system sufficient to prevent the dermatitis, we probably wouldn't have liver damage. That is what we did entirely empirically.

I think that is about all I have to say. I have been delighted to be here and to have as many members of my staff here as I could jack out of the office. We have been delighted to listen to the discussion.

DR. CECIL K. DRINKER: May we now make the discussion general and those who have questions please volunteer.

MR. MANFRED BOWDITCH (Director, Division of Occupational Hygiene, Massachusetts Department of Labor and Industries, Boston, Mass.): I would like to second very strongly what Dr. Sayers has said with regard to the approach to this problem in proper control rather than by prohibition, which seems to me wholly unnecessary not only in this case but in the case of other toxic substances with which we have to deal. The problem of proper ventilation seems to me relatively simple from what I have heard of the situation thus far. The problem of maintaining that ventilation properly does not seem to me quite so simple. I think it is going to be quite necessary that there should be a very adequate inspection of the plants using the materials and I can assure you that that will be the case here in Massachusetts.

When this trouble first broke in this state a little over a year ago we issued a quite strongly worded warning letter to all plants using these substances and it has all along

been my plan to follow that up with a further letter bringing the situation as we now know it, as a result of Dr. Drinker's work, to the attention of users in this state. In that letter we shall unquestionably advocate the concentrations that Dr. Drinker has suggested this morning.

One point that I think is worth commenting on in that connection is the question of identification of the substances. It is extremely important from the state administrative point of view that employers using these substances should know what they are using. They are identified at present only by numbers. If we list those numbers in a warning letter which we send out there are likely to be changes in those numbers. The Halowax Corporation is a progressive concern and it is going to be putting out bigger and better halowaxes all the time. The company's cooperation in this present investigation has been such that I feel assured that they will take the proper steps to see that we in the state offices and also the users of the products will know what we are using.

I wonder whether Mr. Brown would care to say anything about that.

MR. SANDFORD BROWN (President, Halowax Corporation, New York, N. Y.): There are some aspects of this situation on which I think I can enlighten the medical and state and civic authorities, with respect to the commercial and practical aspects. If you go into the research laboratories of any large chemical manufacturing company today you will find anything from one to a thousand different new chemical products which have not yet been put on the market. Some of those may or may not be toxic. The problem so far as the chemical manufacturer is concerned is a question of timing. You have heard this excellent presentation given this morning by the Drinker brothers as to the work that they have done here. Should you take a product of which you have developed, say, 5 or 10 gm. and spend \$50,000 on research to determine whether or not it is toxic or should you wait until you have determined whether you have a market for it?

If you are producing only one hundred substances a year you can see that that would run into boxcar numbers in the way

of dollars and cents before you ever sold any. That is the problem we have had in this case. It has been on the market for 25 years. Until within the past 4 or 5 years there has never been any intimation that it would cause any systemic effects. Thousands and thousands of workmen have dealt with millions and millions of pounds of certain of these materials, particularly the trichloronaphthalenes. Then we come to the higher stages, combined with chlorinated diphenyl and other products, and suddenly this problem is presented to us.

We had asked various authorities interested in public health, going back over a period of 15 to 20 years, to investigate it but there wasn't much enthusiasm for it. Mr. Bowditch suggested that we take it up with the Drinker brothers at this institution, which we did. You know the results of that work.

Now so far as these changes are concerned, they are beyond our control to a certain extent. We will manufacture a product—let's call it 1234. It has certain chemical and physical characteristics. It is supplied to a cable manufacturer. It is composed of certain constituents. There may be some tetrachloronaphthalene, trichloronaphthalene, paraffin, a little pitch or bitumen, and possibly some chlorinated diphenyl. It does a certain job but he wants it to a little more plastic or he wants its viscosity or the specific gravity changed. Possibly by a change in those constituents of only 1 per cent we can get that particular property. We can't sell it to him as the same product so we put a new number on it. Basically, however, if the variation in the chlorinated naphthalene or the chlorinated diphenyl constituent hasn't changed, the toxic property of that will not change.

When it comes to a question of cooperating with the state authorities in that connection, if there were some major change made in a product we would have no hesitancy in advising them and we would also advise our customers. Virtually every consumer of these materials at some time or another has been given their technical or chemical designation along with their various properties, whether they be physical or chemical.

Those are some of the practical problems

with which all manufacturers are confronted today, particularly in the synthetic organic field where the change is so rapid that our salesmen can't even keep up with the requirements sometimes, in knowing what to do.

MR. F. R. KAIMER (Assayer, York Wireworks, General, York, Pa.): I am certainly pleased to have this opportunity to say a few words in reference to the experience with the use of our York plant. I perhaps should say again in this case experience is the best teacher. I have had a great deal of trouble at York with the problem at York with the use of these materials through the experience from the use of these materials.

It is only 1½ years ago that a man in the neighborhood of 50 to 60 years of age with various degrees of this acne was brought to me. I all know. Eight or ten of these men were severely afflicted—horrible sores on their skin condition was such that they had to be cut out. One man died and the diagnosis was made that it was due to exposure to vapors but we are not sure. It was an atrophied condition of the skin at the autopsy but we are not sure that it was or was not connected with the work. Knowing the man as he was employed, with the suspicion that he had, he appeared thin, pallid in his appearance. I cannot say from my poor knowledge of the physical make-up of the human body that he presented a healthy appearance. However, it was only for a 6 month period of his employment. He complained of this constipated condition and he was advised that he see his home and he rapidly developed to the point where he died in the hospital and in a very short time.

More serious than that perhaps was the fact that we had 50 other men in the plant as far as the acne was concerned. The first reaction that several of these men had was to throw it out of the plant. They didn't want to work there for treating wire. But we said but not so easily done as we thought. As well have thrown our business and said, "We'll close the plant."

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with which all manufacturers of chemicals are confronted today, particularly in the synthetic organic field where the develop- ment is so rapid that our sales departments can't even keep up with the research depart- ments sometimes, in knowing what they are doing.

Mr. F. R. KAIMER (Assistant to Man- ager, York Wireworks, General Electric Co., York, Pa.): I am certainly pleased to have this opportunity to say a few words with reference to the experience we have had at our York plant. I perhaps should say that again in this case experience alone has been the best teacher. I have lived with the problem at York with the men who went through the experience from its beginning.

It is only 1½ years ago that we had in the neighborhood of 50 to 60 men afflicted with various degrees of this acne about which you all know. Eight or ten of them were very severely afflicted—horrible specimens as far as their skin condition was concerned. One man died and the diagnosis may have attrib- uted his death to exposure to halowax vapors but we are not sure of that. There was an atrophied condition found as a result of the autopsy but we are not definitely sure that it was or was not connected with his work. Knowing the man as I did when he was employed, with the superficial examina- tion that he had, he appeared to me very thin, pallid in his appearance, and I would not say from my poor knowledge of the physical make-up of the human being that he presented a healthy appearance. How- ever, it was only for a 6 months' period from the time of his employment that he com- plained of this constipated condition and we advised that he see his home physician. It rapidly developed to the point where he was in the hospital and in a very short time he died.

More serious than that perhaps is the fact that we had 50 other men in very bad condi- tion as far as the acne was concerned. The first reaction that several of our executives had was to throw it out—get it out of our plant. They didn't want anything like that for treating wire. But that was easily said but not so easily done. We might just as well have thrown our business to the four winds and said, "We'll close up," because

there was no substitute and there is none today in spite of all the efforts we have made through our own research laboratories to find one.

But we did develop—and I was most closely associated with it—and set up a routine for bringing these men back to nor- mal health conditions. A number of them were sent to Dr. John H. Stokes and to Dr. O. H. Perry Pepper of the University of Pennsylvania Hospital, and the others to Dr. Isaac R. Pels at Johns Hopkins. Through their recommendations and studies we employed a trained nurse and two local physicians and you might say established a small hospital and its facilities at the plant. Through the application of quartz light, x-ray, mechanical removal of comedones and the treatment of pustules that devel- oped in later stages, an utterly strict routine where the worst cases were adminis- tered to each day for a period of 15 to 20 minutes, another group who were less seri- ous three times a week, and still another group once a week, we have in this year and a half brought each and every man back to a normal skin condition. Those who were very seriously afflicted do show scars, but otherwise their skin is as healthy in appear- ance as my own. I tell you we are very proud of the fact that they are still all em- ployed and the amount of halowax that we are using today is even greater in quantity and in types than we were using a year and a half ago.

With the adequate ventilation system we have installed, with the routine for change of clothing from street clothing to work clothing when they come to work and the reverse of that process, with the assurance that a shower will be taken before the street clothing is again put on, we have found no recurrence of this skin trouble. Each and every man working with halowax products, either from solution, from solid compounds or handling the wire insulated and treated with it, is examined twice yearly with a com- plete physical examination, including blood analysis and efforts to determine any liver damage.

However, there is the point which was very definitely brought out this morning. We do not know as yet when this thing starts. I believe it would be of great help

to us all in industry if some very fundamental work was done on humans, as Dr. Jones mentioned before we came into this meeting, some control in fundamental work to determine some method whereby we may determine the inception of any liver disorder.

We have had our men examined in groups three times since the trouble developed and nothing has shown up in any one man. We have learned and appreciate the fact that we must handle hazardous materials, but we have learned how to handle them. It has been a very great experience for us and for myself, and again the best teacher.

DR. CECIL K. DRINKER: Can you recollect the air concentration that you are maintaining now with your present ventilating equipment?

MR. F. R. KAIMER: We have had two examinations made of the air by Mr. William F. Hemperly and they average from 0.2 to 0.6 mgm. per cu. m. We recently discovered one condition which was found as the cause of a high reading in one of the examinations. The compound is one that is not manufactured by the Halowax Corporation that is used rather infrequently, perhaps not more than 50 gallons of it in a 6 month period. It is in the form of a paste, reduced with solvent to a paste form, and it was not known that it contained a chlorinated solvent in certain percentage. We discovered it only recently through the analysis of a sample and we found that that was the cause of throwing the results off to a high value. It was then about 8 mgm. per cu. m., I believe. That is going to be eliminated now. That is a combination of toluene and carbon tetrachloride solvent. When that compound is exposed to the air the chlorinated solvent odor is completely masked by the toluene. It is lost. I was able to detect it only by removing the head of the drum and immediately smelling the odor of carbon tetrachloride. As soon as that head was removed for a period of 10 seconds the toluene predominated and we had no knowledge of the other being in there.

MR. ARTHUR G. BEYER (Research Engineer, United American Bosch Corporation,

Springfield, Mass.): Do I understand you to say that those men who were afflicted are back on the same job?

MR. F. R. KAIMER: They all returned to normal skin health, as I say, and are working on the same job.

DR. CECIL K. DRINKER: Dr. Schwartz, you have seen a good deal of this general subject.

DR. LOUIS SCHWARTZ (Medical Director, Dermatoses Investigations, United States Public Health Service, New York, N. Y.): I am primarily interested in dermatitis and it was only because of my researches in that field that I happened to come across information given to me by Dr. Gray that there were some cases of yellow atrophy of the liver attributed to halowax. I can only talk from personal experience about the skin cases. I know from what I have seen and from what I have heard from doctors who have been treating these cases that if they are treated like an ordinary acne vulgaris and kept away from further large exposure they all get well, with the same results as acne vulgaris. Those who have large pustules may have scars resulting and those who have superficial pustules or only comedones won't have any scars.

As far as prevention goes, I felt even before this investigation was undertaken that this substance, like any other poisonous substance, can be handled and used in industry provided proper safety precautions are taken, and I so advocated at the meeting in Pennsylvania when this was discussed.

About ventilation and safety precautions, I think that while we cannot, with our present knowledge, detect by any chemical tests the early symptoms of intoxication from this substance, the skin offers an easy way of proving whether your method of ventilation is efficient or not. If there are any cases of acne or of this dermatitis occurring in a plant where halowax or the chlorinated naphthalene or chlorinated diphenyls are used, then that shows that there is sufficient concentration of these substances in the air to cause plugging of the follicles and to cause a skin condition. If there is sufficient concentration to do that there may be

sufficient concentration to poisoning in the few people sensitive to the action of the compounds. Everybody is not hypersensitive to them. If they were, of the people who have been hand stances, more would have disease and it would have been very much earlier. This material was in Germany as early as 1914.

While I cannot add any methods outlined here for such as ventilation and so forth, if you go into a plant and find any acne present among the men using this material you will know you have a sufficient concentration of the substance in the air and consequently sufficient to be dangerous to the few hypersensitive to its action.

DR. CECIL K. DRINKER: The critical point in regard to the problem of mining these substances in a plant is pointed out this morning by several pieces of apparatus. It has seemed desirable to have men who are here that during the last few years, while we are learning, that we endeavor to confine our analyses to one rat, so that at least our results are comparable as we can make them to place.

I don't know much about the subject; perhaps, Mr. Kaimer, an idea or two about that.

MR. WARREN A. COOK (Hygienist, Bureau of Occupational Diseases, State of Connecticut, Hartford, Conn.): Minimization of the halowax wouldn't be preferable to properly discuss the method throughout the country for the elimination of chlorinated naphthalene.

DR. CECIL K. DRINKER: As far as that is concerned it is better to discuss with Mr. H. Brandt afterward. But determining some uniform standard while at least is, I think, of general interest to us.

[ass.): Do I understand you those men who were afflicted the same job?

KATMER: They all returned to health, as I say, and are working the same job.

K. DRINKER: Dr. Schwartz, a good deal of this general

SCHWARTZ (Medical Director, Investigations, United States Service, New York, N. Y.):

I am interested in dermatitis and the cause of my researches in that happened to come across information to me by Dr. Gray that there was a case of yellow atrophy of the skin exposed to halowax. I can only draw my personal experience about the skin from what I have seen and have heard from doctors who are reporting these cases that if they are an ordinary acne vulgaris from further large exposure, well, with the same results as

Those who have large pustular scars resulting and those official pustules or only come to have any scars.

At the convention goes, I felt even investigation was undertaken that, like any other poisonous material, be handled and used in an adequate proper safety precautions. I also advocated at the meeting that in a case when this was discussed, ventilation and safety precautions that while we cannot, with our present knowledge, detect by any chemical means the symptoms of intoxication, the skin offers an easy way of telling whether your method of handling is efficient or not. If there are any cases of this dermatitis occur where halowax or the chlorinated or chlorinated diphenyls that shows that there is suffocation of these substances in the plugging of the follicles and in the condition. If there is sufficient ventilation to do that there may be

sufficient concentration to cause systemic poisoning in the few people who are hypersensitive to the action of these hydrocarbons. Everybody is not hypersensitive to them. If they were, of the thousands of people who have been handling these substances, more would have contracted this disease and it would have been reported very much earlier. This material was used in Germany as early as 1914 or 1915.

While I cannot add anything to the methods outlined here for safety in the way of ventilation and so forth, I can say that if you go into a plant and find that there is any acne present among the workers with this material you will know that there is sufficient of the substance in the air to cause acne and consequently sufficient perhaps to be dangerous to the few people who are hypersensitive to its action.

DR. CECIL K. DRINKER: There is a practical point in regard to the question of determining these substances in air. My brother pointed out this morning that there are several pieces of apparatus for doing this. It has seemed desirable to a number of the men who are here that during the next couple of years, while we are in a position of learning, that we endeavor, if we can, to confine our analyses to one piece of apparatus, so that at least our results will be as comparable as we can make them from place to place.

I don't know much about this phase of the subject: perhaps, Mr. Cook, you have an idea or two about that.

MR. WARREN A. COOK (Chief Industrial Hygienist, Bureau of Occupational Diseases, State of Connecticut Department of Health, Hartford, Conn.). On the determination of the halowax I wonder if it wouldn't be preferable to have Mr. Hemperly discuss the method he has been using throughout the country for the determination of chlorinated naphthalenes.

DR. CECIL K. DRINKER: I think so far as that is concerned it is best to leave that to discussions with Mr. Hemperly and Dr. Brandt afterward. But the question of determining some uniformity of technic for a while at least is, I think, a matter of general interest to us.

MR. WARREN A. COOK: I am not quite sure that I have in mind exactly what you want in that regard. In connection with sampling?

DR. CECIL K. DRINKER: Yes, In connection with the whole technic of determining the material in air, length of sampling, type of apparatus, and so forth. It has been suggested that we endeavor to agree upon some uniform procedure for that and as figures begin to come in, as they will in the course of the next couple of years, we will at least have them on a comparable basis.

MR. WARREN A. COOK: In that regard there is no question but what the determinations and results of analyses of the concentration of injurious materials in air, correlated with pathological findings or freedom from pathological findings, are real factors in further substantiating toxic limits which are originally given us from animal experimentation. In order to obtain data which are of value along that line it is desirable to know to what extent, in terms of milligrams per cubic meter, workers are exposed to in breathing any potentially injurious material.

It seems to me that one of the things that should be done, which many of the plants and many of the organizations equipped to make determinations of injurious materials in air should do, is to make an effort to develop one group and series of results which will represent average exposures of workers to chlorinated naphthalenes. In getting that figure I think that it is of great importance that we should consider average daily exposure. There is a tendency very often in taking samples of air to determine maximum exposures, to get the exposure over a 15 or 20 minute period when the worker may be actually tending a pot where the material is being used, whereas during the subsequent half hour he may be 40 or 50 feet away from that particular location. Therefore, for one thing, it seems to me it would be extremely desirable to obtain information in as many plants and as many locations as possible of the average exposure, taking into consideration not only the worker's maximum exposure while actually

at work with these materials but also his much smaller exposure and possibly even lack of exposure as he may go to other parts of the room or even to other departments during the course of the day.

Another type of determination which seems to be extremely desirable to have is concentrations of the chlorinated naphthalenes at certain reference points. I believe that Mr. Hemperly very carefully duplicated these reference points in each of the plants where he took his determinations. He took the samples, I believe, at breathing level and a certain measured distance from the pots where the chlorinated naphthalenes were being handled, so that next year he could go back to those same locations or others could take determinations at those same locations, which are definitely fixed and recorded, and learn whether, due perhaps to clogged pipe lines or to fans which might become loaded with the condensed chlorinated naphthalene, there might be poorer ventilation than originally designed and higher concentrations of the chlorinated naphthalene than originally determined.

It seems to me that it would be an extremely desirable thing to have made available for all of us who are making these determinations these reference points so that in Massachusetts and in Connecticut, at one plant or at another, a considerable group of workers could be taking samples at this one particular point with reference to the source of generation of the vapor. Such results would permit a comparison of knowledge between plants.

In that regard it happens that there is a committee of the American Public Health Association which is charged with the development of chemical methods for determination of atmospheric contamination such as that now under consideration. It seems to me that it might be a very desirable project for that committee to consult with the investigator of the Halowax Corporation and suggest to all of those who are doing work of this type, after some discussion, what reference points could be adopted and also what should be done in connection with getting these average exposures. As a matter of fact our committee will discuss that very feature and possibly include it in our report

before the A. P. H. A. in October as one of the projects which we shall carry out at that time.

As I have not given this consideration, I am afraid my discussion is not as connected as I might wish it to be. We have a real problem here and one that deserves some study.

DR. CECIL K. DRINKER: Would it be of service to the American Public Health Association Committee if a sub-committee from this meeting, collected perhaps by my brother and those of you involved with these problems, were to make a recommendation to the A. P. H. A. as to the things you have brought up and as to suitable apparatus, and let the final statement come from the Association after they have considered that material?

MR. WARREN A. COOK: I think that would be a splendid idea because we have a bulk of information on this particular material. A number of individuals have given much thought to the development of apparatus, both the combustion method which we have here and also the continuous record type of apparatus which Professor Drinker mentioned this morning. I think that it is a sufficiently important project that a sub-committee made up from this group could give that committee a very definite steer.

[Personnel of the Sub-committee: W. A. Cook, chairman, A. L. Coleman, H. B. Elkins, W. B. Fulton, S. W. Gurney, E. R. Hayhurst, W. F. Hemperly, F. W. Sehl, and A. N. Setterlind.]

MR. HERVEY B. ELKINS (Chemist, Division of Occupational Hygiene, Massachusetts State Department of Labor and Industries, Boston, Mass.): In connection with what Dr. Schwartz has said, I am not sure that I am in complete agreement as regards the use of skin lesions as warning agents. It is my understanding that in insulated wire plants the chlorinated diphenyls are very commonly compounded with the chlorinated naphthalenes. It is also my understanding that these are more likely to cause a severe skin irritation than the straight chlorinated naphthalenes. On the other

hand, from Dr. Drinker's judgment that the straight chlorinated naphthalene was nearly as toxic a mixture of it with a small amount of chlorinated diphenyl.

In the condenser factor, in our cases there is no chlorinated naphthalene used and no acne of the type reported in the reports on the insulated

DR. R. EMMETT KELLY (Dermatologist, St. Louis, Mo.): I have nothing to the laboratory; I have been quite a little humiliated in the last several years at our plants where we have been using this chlorinated diphenyl. Our observation that although we did have a more or less series of skin eruptions which were not able to attribute as to cause, but impurity in the benzene we used, the chlorinated diphenyl, with any systemic reactions at all. We have examined them very carefully from what laboratory tests might help us and from the point of view. Also from chlorinated naphthalene alone there have been no cases of poisoning reported.

I don't believe that we can put laboratory results into the field without paying considerable attention to the volatility of different substances and the way they are being used.

DR. JOHN A. HOOKEY (Dermatologist, Halowax Corp., Mich.): I have had considerable experience with the dermatological problems. The experience at the Wyandotte definitely was that the skin lesions did increase when chlorinated naphthalene was used rather than the straight naphthalenes.

From the discussion we have had I think the observation I have made that the chances are that the problems will disappear all by themselves is probably true. However, certain precautions, certain measures, you might say, should be taken in hiring men who are going to handle these products, even tho

H. A. in October as one of which we shall carry out at

Given this consideration, I think the discussion is not as connected with it to be. We have a real one and one that deserves some

DRINKER: Would it be of the American Public Health Association if a sub-committee from collected perhaps by myself or one of you involved with these to make a recommendation. As to the things you have said as to suitable apparatus, all statements come from the fact that they have considered that

MR. A. COOK: I think that is a good idea because we have information on this particular number of individuals have brought to the development of both the combustion method here and also the continuous apparatus which Professor mentioned this morning. I think it is an important project committee made up from this to give that committee a very

of the Sub-committee: W. A. n, A. L. Coleman, H. B. Elulton, S. W. Gurney, E. R. Hemperly, F. W. Sehl, and d.]

MR. B. ELKINS (Chemist, Division of Hygiene, Massachusetts Department of Labor and Industries): In connection with what Dr. H. A. has said, I am not sure of a complete agreement as regards lesions as warning agents. Understanding that in insulated chlorinated diphenyls are compounded with the chlorinated naphthalenes. It is also my understanding that these are more likely to cause irritation than the straight chlorinated naphthalenes. On the other

hand, from Dr. Drinker's work one would judge that the straight chlorinated naphthalene was nearly as toxic at least as the mixture of it with a small amount of chlorinated diphenyl.

In the condenser factory where we had our cases there is no chlorinated diphenyl used and no acne of the type described in the reports on the insulated wire factories.

DR. R. EMMETT KELLY (Monsanto Chemical Co., St. Louis, Mo.): I can't contribute anything to the laboratory studies but there has been quite a little human experimentation in the last several years, especially at our plants where we have been manufacturing this chlorinated diphenyl. It has been our observation that although on one occasion we did have a more or less extensive series of skin eruptions which we were never able to attribute as to cause, whether it was impurity in the benzene we were using or to the chlorinated diphenyl, we have never had any systemic reactions at all in our men. We have examined them very closely both from what laboratory tests we thought might help us and from the clinical viewpoint. Also from chlorinated diphenyl alone there have been no cases of systemic poisoning reported.

I don't believe that we can transpose the laboratory results into the actual humans without paying considerable attention to the volatility of different substances and the way they are being used.

DR. JOHN A. HOOKEY (Consulting Dermatologist, Halowax Corporation, Detroit, Mich.): I have had considerable experience with the dermatological angle of this problem. The experience at the Halowax plant at Wyandotte definitely was that the dermatosis did increase when compounds were used rather than the straight chlorinated naphthalenes.

From the discussion we have heard today I think the observation Dr. Drinker made that the chances are that dermatological problems will disappear along with the other is probably true. However, I think that certain precautions, certain insurance measures, you might say, should be taken in hiring men who are going to work with these products, even though we are going

to attempt to get the concentrations low. We saw this morning that the effect of these products was on the liver and that if some one working in these products developed liver damage from some other source the chances of his having serious trouble was increased. Therefore, inasmuch as there is no test to tell whether a person has had liver disease, certainly in the preliminary medical examination of applicants for work the history at least should be gone into very carefully for a history of previous liver diseases.

There are other things that should be taken into consideration also. One is the history of syphilis, because syphilis does have an effect on the liver. If there is any history of syphilis I don't think that that man should be hired. A Kahn test should be taken and I think that it would be a good plan to take Kahn tests on men at stated intervals, because they might develop syphilis after they are hired.

I think those things should be done even though we feel that if the concentration of these vapors in the air is kept as low as was recommended this morning, the chances of having toxic effects are very small.

MR. F. R. KAIMER: I would like to clarify a point of Dr. Hookey's.

You mentioned at the beginning of your talk that your experience in acne condition was more pronounced from the compounds of various materials with chloronaphthalene than with the straight chloronaphthalenes. Did you mean by that, that the acne condition actually was more pronounced with the compounds than with the straight chloronaphthalene or was that due to the fact that you were in a plant operated in a different fashion? In other words, you handled your numerous wire compounds in more of a batch operation. That is my understanding from Mr. Brown.

Is it a fact that the straight chloronaphthalenes are less harmful in so far as acne is concerned or is it because of the handling of batch compounds?

DR. JOHN A. HOOKEY: That is a question that would be difficult to answer. I based my statement on the fact that in taking a general survey of these cases after I started working with them the men in the plant said

that they developed acne more often and more severely after they started making compounds. It may be that it was in the method of the handling.

MR. F. R. KAIMER: You say that the condition increases with the increased chlorine content and we are attributing the acne primarily to the chlorine radical. If that is true, what are we to associate insofar as these various other constituents are concerned, such as various plasticizing agents? How much do we know about those insofar as development of acne is concerned? Some of these compounds have a half dozen constituents in them other than chlorodiphenyl and chloronaphthalene. We are at the present time considering the chloronaphthalene as the basic element responsible for the acne condition which we have. We know very little about what the other materials may or may not do.

DR. JOHN A. HOOKEY: I don't know about these other materials. Perhaps Dr. Schwartz would know something more about them.

DR. LOUIS SCHWARTZ: It is well known in industry that there are many compounds that cause acne. For instance, paraffin acnes and oil acnes have been known for a long time. Paraffin acnes, wax acnes, are simply a mechanical plugging of the follicles of the skin by the minute particles of wax that fall on the skin. I think that the acne caused by these chlorinated naphthalenes and diphenyls, because it is caused by both—I was down at the Swan Chemical Company where they make chlorinated diphenyls and they have acne there just the same as over at Wyandotte where they make the chlorinated naphthalenes—I believe that that is caused by the same thing, a blocking up of the follicles of the skin, the formation of the comedone and then the comedone becomes infected and forms a pustule. They don't all pustulate because they don't all become infected. Many of these men never have any pustules. They just have little white elevations on their skin.

In those people who are in the acne age, the youngsters of 18, 20, 22 and 23, acne

vulgaris is most apt to occur. The sebaceous glands are most active and they seem to have it much more than the older people in whom the sebaceous glands are not so active.

We keep a clipping of all articles relating to industrial dermatitis in my office and I recently read an article in a German magazine in which they report in Germany a similar acne condition from chlorinated phenols and chlorinated benzenes and solid waxes. It seems that this acne-like condition is not peculiar to halowax or chlorinated naphthalenes or diphenyls but can occur with any condition that blocks up the sebaceous follicles of the skin.

DR. ROYAL MEEKER (Special Agent, State of Connecticut Department of Labor, Hartford, Conn.): I am full of questions. As a statistician I am a little bit suspicious of averages, so I should think that we should take maxima as well as averages in getting at the threshold dose or the dangerous impregnation of the atmosphere with these poisonous compounds. I just wanted to drop that as a hint for this committee to consider in its work.

In spite of what you said at luncheon, Dr. Drinker, I still think it is rather important to determine how the plugging of the pores actually does occur, whether they are plugged as Dr. Schwartz has suggested, from the particles falling on the outside of the skin or whether they are plugged, as so many doctors have informed me, from inside as it were. The fumes are breathed, the substance gets into the blood stream. It is thrown off through the pores of the skin and the pores are plugged. I think it is rather important to determine that because it seems to me, from the slight knowledge that I have of the industrial application of halowax compounds in insulating wires, that the plugging of the skin, if it is just an outside plugging, may take place either from handling a solid substance or from the coating on the wire after it becomes cold.

I haven't heard anybody say anything about those Massachusetts cases of very severe dermatitis and I am not so sure but what there was some question of liver damage there. Nobody has said anything about them at all. There is no question there

that the condition, whatever conditions might have been, came cold wire, in a confined

I think this needs a great deal of Dr. Drinker, than you and have been able to give it as curious about is the way we the protective labor laws in both the employer and the employee.

I listened with very great interest to the expositions of suggested protection of halowax, chlorinated naphthalenes and diphenyl. It seemed to me that it left very much to be desired. I am curious why the application of the powder, if it is necessary, as to use this rather dangerous substance, should be done in a practically closed place, Dr. Drinker, I wish Mr. Reeves of the Rockwell Corporation to tell how the it. If I am any judge of safety devices they have been eliminating entirely from all contamination from fumigated halowax as anyone. I am curious about the application of halowax, either in the wire or where it is applied to the under hooding and with ventilation, and it seems to be an

MR. B. H. REEVES (Vice General Manager, Rockwell Corporation, New Haven, Conn.): I am very glad to tell of our experience to help the picture along. Our experience has been more or less parallel with that in as much as we manufacture wire. We have avoided the picture that he ran into, probably the fact that shortly after 1920 benzene as a solvent for asphaltum.

We got into anemia difficulties with benzene fumes and had to install a ventilating system to remove the fumes from the machines and the compounds to the wire. I am curious about the installation of that equipment to get a substitute for benzene out of the picture.

We are still in the same position as far as finding a substitute for wax. There is none that we have found as good as wax, especially when we went to

apt to occur. The sebaceous glands are not so

pping of all articles relating dermatitis in my office and I article in a German magazine report in Germany a condition from chlorinated benzenes and solid as that this acne-like condition is similar to halowax or chlorinated naphthalene or diphenyls but can condition that blocks up the pores of the skin.

MEEKER (Special Agent, Connecticut Department of Labor, Housatonic, Conn.): I am full of questions. I am a little bit suspicious. I should think that we should be as well as averages in getting the dose or the dangerous in the atmosphere with these compounds. I just wanted to get a hint for this committee to work.

What you said at luncheon, I still think it is rather important how the plugging of the pores occurs, whether they are plugged. Schwartz has suggested that the pores are plugged, as so we have informed me, from inside the fumes are breathed, the fumes into the blood stream. It is through the pores of the skin and plugged. I think it is rather difficult to determine that because it is from the slight knowledge that industrial application of halowax in insulating wires, that the skin, if it is just an outgrowth, may take place either from the substance or from the wire after it becomes cold. And anybody say anything about Massachusetts cases of very is and I am not so sure but some question of liver damage. There is no question there

that the condition, whatever the complications might have been, came from handling cold wire, in a confined area of course.

I think this needs a great deal more study, Dr. Drinker, than you and your associates have been able to give it as yet. All I am curious about is the way we can administer the protective labor laws in order to protect both the employer and the employee.

I listened with very great interest to the expositions of suggested pots for the application of halowax, chlorinated naphthalene and diphenyl. It seemed to me that they left very much to be desired. I don't see why the application of the halowax compound, if it is necessary, as I assume it is, to use this rather dangerous substance, can't be done in a practically closed pot. If you please, Dr. Drinker, I wish you would ask Mr. Reeves of the Rockbestos Products Corporation to tell how they have handled it. If I am any judge of equipment and safety devices they have come as near to eliminating entirely from the atmosphere all contamination from fumigated or evaporated halowax as anyone. All of the application of halowax, either in the melting pots or where it is applied to the wire, is done under hooding and with ventilating apparatus, and it seems to be entirely adequate.

Mr. B. H. REEVES (Vice-president and General Manager, Rockbestos Products Corporation, New Haven, Conn.): I will be very glad to tell of our experience if it will help the picture along. Our experience has been more or less parallel with Mr. Kaimmer's in as much as we manufacture the same type of wire. We have avoided the serious picture that he ran into, probably due to the fact that shortly after 1923 we were using benzene as a solvent for asphaltic materials.

We got into anemia difficulties with benzene fumes and had to install a complete ventilating system to remove all those fumes from the machines that applied the compounds to the wire. Following the installation of that equipment we were able to get a substitute for benzene, so we got it out of the picture.

We are still in the same fix as every one else is as far as finding a substitute for halowax. There is none that we know of. Consequently when we went to the use of halo-

wax we had a head start as far as the ventilating system was concerned, since ours was already installed and adaptable to a compound with a benzene solvent rather than a melted halowax compound. In order to keep the fumes of a highly volatile solvent under control we did develop a practically complete enclosure for the container in which the compound was placed and exhausted that container in order to prevent any escape of the fumes from it. When we changed to the halowax compounds we followed the same scheme of applying the compounds and used a completely enclosed pot. There is a hole in one side for the wire to go in and one on the other side for the wire to come out. There is enough exhaust suction on the enclosure to prevent any fumes from getting out of the openings where the wire enters and leaves. Of course periodically it is necessary to open the pot to replenish the compound or make adjustments. In that case we have the ventilating system interlocked with the door that the operator opens so that when he opens it he increases the amount of air travel about ten-fold.

DR. ROYAL MEEKER: What is the velocity when the door is open?

Mr. B. H. REEVES: With the door wide open, at breathing level the velocity is 200 feet. That is the linear velocity. We check that every week on every opening at every machine with a velometer, a small instrument which is easy enough to operate and reads directly. Whenever the velocity falls below that figure the pipe connecting that machine is taken down and cleaned, because there will be condensation inside the pipe to cut down the air flow and reduce the ventilation efficiency.

DR. ROYAL MEEKER: What do you think of that trap device shown?

Mr. B. H. REEVES: I don't know what to think of that. I don't know whether it would be practical or not. I was going to ask Dr. Drinker whether in passing the air laden with halowax fumes through the boxes of rats there was any deposit of halowax in the enclosure.

DR. CECIL K. DRINKER: Yes. It is detectable readily through the outflow pipe.

MR. B. H. REEVES: Those in the far end probably didn't get the concentration.

DR. CECIL K. DRINKER: We change the position of the boxes each day. The ones furthest away move into the nearest position, so that over a period of weeks all are exposed equally.

DR. EMERY R. HAYHURST (Consultant in Industrial Hygiene, State Department of Health, Columbus, Ohio): I would like to ask if it wouldn't be possible to put a cold water line around that trap and deposit it all before the air escapes from the trap.

MR. B. H. REEVES: We have tried cooling the surface of the exhaust pipes in order to concentrate the deposit in one place and make it unnecessary to remove long lengths of the ventilating system. While we have found a slight advantage in doing so it hasn't at all paid for the expense. It is much easier to take the piping down. Consequently I doubt the possibility of removing it all by cooling the surfaces of the trap. It might be possible, by building a labyrinth of refrigerating coils, to collect it. But then you would have the problem of removing it from the coils after you had collected it and it would involve rather complicated procedure.

DR. B. L. VOSBURGH (Medical Director, General Electric Company, Schenectady, New York): We have heard about the possibility of preventing liver damage and skin trouble among manufacturers of wires and cables and so forth, but like the old rhyme, every dog has fleas and the fleas have fleas, we also have customers who use wires and cables in tunnels, in enclosed spaces, splicing them together and doing all sorts of things. I am not at all certain that we know what the concentration of these chlorinated hydrocarbons is under those conditions.

About the time we were having so much trouble at our York factory some of our customers began complaining. We thought we were having a hysteria of halowax mania throughout the country. Some of their

complaints were bona fide. We had no difficulty in handling cold wire and the men had no skin trouble. Yet when they did the same thing with possibly the application of heat in tunnels, ships and so forth, they actually did develop trouble.

We have used, of course, the icterus index in following some carbon tetrachloride cases and I wondered what you have to say about that. Is that of no value at all in the case of liver damage in this material?

DR. CECIL K. DRINKER: I don't think so until it gets so extreme that we know it any way.

DR. B. L. VOSBURGH: I did write down a few questions that came to mind. Some of them have been answered and some are foolish but I shall ask them anyhow.

It occurred to me that if trichloronaphthalene has been proved to be practically innocuous, isn't it a problem of research largely for the Halowax Corporation to use only that one material adopted with other known chlorinated compounds to meet the requirements of customers? That is one of the foolish ones probably, but I shall just ask it.

Furthermore, how long is it reasonable to expect the liver to recover after it has been pretty well damaged. I talked to you and you said you hadn't worked that out with the animals as yet.

DR. CECIL K. DRINKER: In that case we set aside a certain number of animals to recover, after knowing that a certain amount of damage had been done. Then we started to kill them but we invariably ran out of rats before they ran out of lesions. We don't know how long it lasts.

DR. B. L. VOSBURGH: Have you given them calcium and glucose as you would with carbon tetrachloride?

DR. CECIL K. DRINKER: Not yet, but we are doing an experiment now with one group on a very high calcium diet and another group on a calcium free diet. The whole question of calcium in the diet, of giving milk daily to these people may be worth while.

DR. B. L. VOSBURGH: I have a few questions in mind. I would like to know what Mr. Brown would say about the possibility of using only this chlorinated naphthalene.

MR. SANDFORD BROWN: I would like to simplify our problem exceedingly from the commercial standpoint. From the toxicity standpoint. I think that Mr. Kaimmer would object because he would not like the technical effects he desires. The same thing applies to the industry where we are using chlorinated products.

The problem as we see it is to simplify our problem exceedingly from the commercial standpoint. Our program for this continuing work will be done under the leadership of the Drinker brothers, is to try to demarcate and whether or not it is a complicated chemical structure, some one thing that causes the trouble we could take hexachlorocyclopentadiene remove 1 per cent of some of the elements with which we are working and eliminate the toxicity of a lovely solution. Whether or not we are able to attain that I don't know, but it is one of the things we have in mind.

As I said before, that is the question with which all manufacturers of synthetic organic products are faced at some stage, either in their commercial developments. The question of timing as to when to do the work, how much you know, whether you know how to do it or not, to learn that first.

DR. CECIL K. DRINKER: I have some other important matters to discuss. The meeting adjourned.

DR. R. R. SAYERS: More questions with regard to what I have said on syphilis? If you are going to have all your workers who have

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DR. B. L. VOSBURGH: I just had those
questions in mind. I would like to hear
what Mr. Brown would say as to the possi-
bility of using only this one innocuous
chlorinated naphthalene.

MR. SANDFORD BROWN: That would
simplify our problem exceedingly, not only
from the commercial standpoint but from
the toxicity standpoint. But if we did so
I think that Mr. Kaimer would be the first
to object because he wouldn't be able to get
the technical effects he desires in the cable.
The same thing applies throughout all the
industry where we are using these higher
chlorinated products.

The problem as we see it, and it is one
which we intend to study further (we have
our program for this continuous work that
will be done under the direction of the
Drinker brothers), is to try to find a line of
demarcation and whether or not within this
complicated chemical structure there is
some one thing that causes the trouble. If
we could take hexachloronaphthalene and
remove 1 per cent of some unknown consti-
uent with which we are not now familiar
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a lovely solution. Whether we will ever be
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As I said before, that is one of the things
with which all manufacturers of these syn-
thetic organic products are confronted at
some stage, either in their laboratories or in
commercial developments. It is largely a
question of timing as to when you should do
the work, how much you should do, and
whether you know how to do it. You have
to learn that first.

DR. CECIL K. DRINKER: Unless there is
some other important matter I will declare
the meeting adjourned.

DR. R. R. SAYERS: May I say a word
more with regard to what Dr. Hookey stated
on syphilis? If you are going to eliminate
all your workers who happen to develop

syphilis during the time they are working
for you, you are probably going to lose some
very important employees. It would seem
that it would be worth while to give serious
consideration to seeing that conditions are
proper and suitable for them to continue
working for you and that they have proper
treatment. In other words, I don't believe
that is a good or sufficient reason for dis-
charging those employees who do develop
syphilis. We have not found that to be
true in other places and I question whether
this is one of the places. I may be in error.

MR. SANDFORD BROWN: I want to take
this occasion to express on behalf of the
Halowax Corporation my thanks for the
excellent cooperation we have received from
various state authorities and our customers
as well in this investigation. I believe you
have all formed the opinion, based on what
you have heard this morning, that our whole
motive here is to conduct this on an ethical,
scientific and constructive basis.

In collaboration with the Monsanto
Chemical Company we have a much more
comprehensive program in view to carry on.
Therefore we want to continue that same
type of cooperation.

There is one thing that I want to bring up
in that connection, which will have to be
observed by the state authorities, when they
go out to make these inspections. That is
the necessity of not creating mob hysteria
on the part of the workmen in the plants
where these inspections are made. Mr.
Hemperly has run into some very interest-
ing situations in the various examinations
he has made. I know that he would be glad
to relate them and give the benefit of his
experience to the heads of any of these state
departments who will have the direction of
this work. Otherwise I can see where we
will be unable to get the full coöperation of
not only the individual workmen but the
plant foremen and the management, and we
must have that if we are to get the results
that we are shooting for over the next sev-
eral months or years. This thing may con-
tinue, probably will continue for years.