

March 12, 1929

Acacia Mutual Life Assn.,
101 Indiana Avenue,
Washington, D. C.

Attn: Dr. J. B. Nichols

Gentlemen:

I have your letter of March 8 in regard to the claim of Mr. [REDACTED]

Mr. [REDACTED] was employed at the General Motors Chemical Company early in 1924. In the course of his work he was handling concentrated ETHYL fluid, which is a mixture of tetraethyl lead and, (at that time) ethylene chlorbromid. Along with several other men he developed an acute intoxication from which he had largely recovered at the time when my first connection with this work began. This was in June, 1924. I did not see Mr. [REDACTED] during the early part of his illness but from the illness which he described and from what the physicians attending him told me, I would conclude that he had a bona fide case of tetraethyl lead poisoning of a mild type. I examined Mr. [REDACTED] shortly after I began the study of this matter at the plant in Dayton, and on several occasions since. He has had an indefinite group of subjective symptoms with almost nothing in the way of physical findings except some degree of increased nervous sensitivity. He had at first a blood pressure somewhat lower than normal and a very easy fatigability. He did not have an anemia, however, nor did he have any of the usual signs of lead poisoning. During the entire period of time since then he has maintained that he is unable to do physical labor without fatigue bordering on collapse. On the other hand his physical responses to exercise under observation have not been abnormal. The result is that I am at a total loss in coming to a definite conclusion as to whether his injury was real or psychological.

One factor in this condition I am sure has been the assurance of his family physician that he has been seriously injured and that he will never again be his normal self. This has had its effect, I am sure, though I can not say to what extent. One thing is certain, that Mr. [REDACTED] is honest in his belief and in his complaints, which brings us to the point of recognizing that his disability even though mental is a real one. It is for this reason that I have advised his employer to pay him for his disability. He was kept on the payroll of the Ethyl Gasoline Corporation up until a very

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few months ago at the rate of \$35.00 per week, I believe, this being his wage at the time he stopped work. I advised that the case be settled on some sort of a cash basis in the belief that if the salary did not continue and that if the matter was brought to a termination he might find it necessary to try work. I felt that if he did try to work rather than being supported in his disability that he would find he was able to and that he would get over his mental as well as physical disability. I can not tell you at the moment just what compensation was given him though I believe that he was given several thousand dollars.

For this man's own good I should like to see him go to work and attempt to earn his own living. I do not believe he can gain any confidence in himself unless he does this. He is laboring continually in the fear of sudden collapse or even death, a fear which I do not believe is justified by his physical condition. I have tried to get him started in other work but I have always been met by his feeling that he is unable to do so, a feeling in which he has been encouraged unfortunately by his own physician. I think that he could begin almost any kind of light out-of-door labor (he could work indoors but I believe it would be advantageous for him to work out-of-doors) and I believe that he could gradually increase his responsibilities and his physical effort to the point of carrying on an average man's work. I would not be arbitrary in stating that he has no physical disability but I have not been able to find any evidence of organic disease of any kind. The man has certain mental abnormalities which I do not believe are of an organic type. I can not say how far they are due to his injury for I did not see him prior to his injury. I have not been able to find adequate evidence of "queerness" in his mental makeup prior to his injury. It is therefore an open question as to whether his mental condition is a residual effect of the absorption of tetraethyl lead or whether this is an entirely mental condition. I am inclined to believe, however, that it is mental and my belief is purely based on the fact that a number of other men whose injury was as great as his and, in some instances greater, have recovered completely and show no residual effect whatever. On the other hand there are several instances of men who, like Mr. Ross, maintain that they are suffering still from the effects of their injury. We are left in a quandary, therefore, from which I see no possibility of extricating ourselves. I have felt that the only fair thing to do in these circumstances is to give the unfortunate man the benefit of the doubt.

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It has been on just this basis that I have kept Mr. Ross under observation to some degree during this prolonged period in which he was compensated fully by his employer, and it was for this reason only that I advised that some disability compensation be made him. The amount was arranged between Mr. [REDACTED] and an attorney for the Ethyl Gasoline Corporation and I can not therefore tell you the amount. I trust that the above statements will satisfy your purpose.

Very truly yours,

RAK:EJ

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