

THE DELAWARE HOSPITAL

AND

TRAINING SCHOOL FOR NURSES

FOURTEENTH & WASHINGTON STREETS

WILMINGTON

C. A. HUME, Business Manager

LUCILE E. DUGAN, R. N., Directress of Nurses

May 12 1934

Dr. Robert Keyhole:
Dept. Chemistry
University Cincinnati Ohio.

My Dear Dr. Keyhole:

Under separate cover, I am sending you a specimen of Urine and Feces obtained from a patient under my care in the O.P.D. of The Delaware Hospital. Will you please analyze same for Lead as this Patient is in close contact with Tetra-Ethyl- Lead.

In brief, his History is as follows:

1. Lower Abdominal cramps past two years.
 2. Insomnia or restless nights interrupted with frightful dreams.
 3. Constipated for several years.
 4. Ringing in Ears, past two years.
 5. Change in outlook on life.
 6. Occasional joint pains.
 7. Bleeding from throat past six weeks- about five small Hemorrhages in all.
 8. Three Fainting Spells in past six weeks.
- Patient has lost 7 lbs. weight in two weeks and has noticed that the eating of raw food, such as apples gives him upper Abdominal pain.

The Patient who is a married man has noticed for past several years that he is gradually becoming impotent.

Past Medical History and Family History: Negative.

Physical Examination : Disclosed the following positive findings:

B.P. 110/60 Palpable sub-Maxillary Nodes, Bilateral.

Lungs: Negative

Heart sounds are distant but no murmurs heard. A slight Hypertrophy of the prostate gland.

A blood count which was checked several times showed nothing abnormal. His Urinalysis was negative. A Gastric Analysis disclosed Hyperacidity in all eight specimens ^{5, 6, 7} ~~total~~ , and free acids. There was Occult-Blood in the 7th & 8th specimens. These specimens were each withdrawn at 15 minute intervals.

This Patient is working as a Mechanic specializing in Carburators. Due to this work he is constantly coming in contact with gasoline containing Tetra-Ethyl-Lead. Because of this fact I am desirous of ruling ^{out} a possibility of Tetra-Ethyl-Lead Poisoning

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before looking for other sources^{as} a cause for this trouble. I have had this patient for three weeks¹ on an Egg and Milk diet. His pains have become somewhat less acute, and he is now enjoying two to three good nights sleep per week. I have also kept him away from his work for a period of ten days now.

I realize that it is necessary to consider a possibility of Gastric Ulcer, Gall Bladder infection and Peritoneal Tuberculosis. If you have any pamphlets on Tetra- Ethyl- Lead, please send them to me. I would appreciate it very much.

If there is any charge associated with this examination, please send a bill to me and I will see that you are recompensed. Thanking you mostkindly again, and hoping this has not caused you any inconvenience, I remain,

Sincerely Yours,

O.M.Stern , Chief Res. Physician.

O.M.S./ N.R.

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