

June 9, 1944

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Dr. J. Reinhold,
Biochemical Laboratory,
Philadelphia General Hospital,
34th and Curie Avenue,
Philadelphia 4, Pennsylvania.

Dear Dr. Reinhold:

Thanks very much for your courtesy in sending us the samples of blood from Mr. [REDACTED]. I have been informed of the general clinical background in this case and I was very much interested in the results. I am sending you herewith a copy of the results obtained on two of the samples. As you will note, the third sample gave extremely high results that had no possible relationship to the other two, as a clear indication that the sample had been contaminated in some manner at some point in the process of collection. In view of the fact that the samples were not in our containers, I take it that you did not receive these in time to make use of them. Or perhaps you preferred to use your own procedure. In any case, if our containers finally reached you through Dr. House, I should appreciate it if you would return them to us at our expense.

You may be interested in knowing our technique of obtaining and handling such samples, and therefore do not hesitate to examine the contents of our package if they are available.

I believe the conclusion has been arrived at on clinical grounds, that this man did not have lead poisoning. It appears that the analytical results are in keeping with this conclusion, although I should be very much better satisfied to have analytical results on samples of urine as well as these on the blood. One reason for this point of view derives especially from the fact that this man was believed to have had some exposure to tetraethyl lead. You will be interested in knowing that in tetraethyl lead poisoning the blood values rarely run very high, while the urinary values are often found to be quite high indeed. That is to say that the relationships between the lead concentration in the blood and that in the urine are very different in tetraethyl lead poisoning as compared with inorganic lead poisoning. Moreover, in general, the urinary lead concentration tends to run disproportionately high in other cases of lead absorption and lead poisoning, and for this reason we do not regard blood levels as being an entirely satisfactory evidence of the extent of the lead exposure. In this case, these points are probably of little consequence, but in others they may be matters of real importance.

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I should be very much interested in knowing the results which you obtained and also whether there is any explanation in your mind of the means by which the one blood sample was contaminated.

Sincerely yours,

Robert A. Kehoe, M. D.

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Enc.

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