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ETHYL CORPORATION

BOSTON DIVISION

PARK SQUARE BUILDING

BOSTON, MASS.

February 15th, 1943

Dr. R. A. Kehoe
College of Medicine
University of Cincinnati
Eden and Bethesda Avenues
Cincinnati, Ohio

Dear Doctor Kehoe:

Thank you very much for your letter of February 12th enclosing the two printed articles on lead exposure.

We are enclosing herewith copies of the reports of the Industrial Disease Referees in the case of [redacted] vs. Panther Panco Rubber Company.

You will note that their last reports, dated September 7th, 1942, conclude with this statement -

> "In view of the additional information afforded us that prior to March 7, 1938, the employee was required to use gasoline, and that the gasoline contained tetraethyl lead, it is our unanimous opinion that the condition which we found her to be suffering from at the time of our examination was related to the use of gasoline containing tetraethyl lead, as we consider that a definitely toxic substance."

Since these three doctors act as a Board of Industrial Disease Referees, and we believe their findings are considered conclusive in all compensation cases in the Commonwealth of Massachusetts, we knew you would be interested.

Very truly yours,

M. A. Taylor

MAT/M
Enc.
c.c. to Mr. Oscar B. Lewis

C O P Y

In re: [redacted]
vs. Panther Panco Rubber Co.
No. 22812 nr

Industrial Accident Board
State House
Boston, Massachusetts

Gentlemen:

On September 30, 1940 we the undersigned, acting as industrial disease referees, examined the above-named employee. Our study of the case consisted in taking a history from the employee, making a physical and X-ray examination, and later conferring with each other.

[redacted] Age 39, widow, one child living and two deceased. Occupation: Rubber worker with this company for 8 or 9 years, using gasoline as a solvent almost continuously.

PAST HISTORY Influenza in 1918 but otherwise always well except for occasional colds. No other illnesses and no operations. Menstruation normal up until present illness.

PRESENT ILLNESS: About four years ago, this patient noticed irregular menstruation, occasionally having no period for six months. For the past two years she has had practically no flow at all until she had a fairly profuse period about a month ago. On September, 1936, she noticed that both hands were swollen, especially on the left, where the arm, fingers, and wrist were markedly involved. She dates all her symptoms back to this episode. Prior to it she had had considerable cracking and bleeding from her hands, which she attributed to the irritation from gasoline. At that time (September 1936) she had no pain other than in her hands, but now complains of some pain in both lower legs, extending down into her toes, when the weather is cold or wet. When asked more in detail concerning the onset of her illness, she states that she was confined at home for about five weeks, and on returning was able to continue with her work up until April or May 1937. At that time her left hand and arm were markedly swollen with some swelling in the right hand. She gave up work, therefore, until October of that year, although she was not confined to bed in the meantime. On returning she continued to work for perhaps three months and then was incapacitated for 2 or 3 weeks, because of the necessity of having some bad teeth extracted. She again resumed work, continuing at it up until March 1940, although she had been obliged to stay out a few times during this interval because of a return of her symptoms. At no time did she had pain except in her hands, arms, and legs, as described above. There has been no appreciable weight loss. Her appetite is good. She has had no dysuria. She had an attack of tonsillitis in August 1940, confining her to bed for ten days. She has had no shortness of breath but states that she has considerable swelling of the ankles when she

(over)

stands all day. She sleeps well, using only one pillow. She has no definite headaches. She has not been dizzy except for a slight suggestion of it when exposed to gasoline fumes. She says she had some fever during the acute phases of her illness.

PHYSICAL EXAMINATION Well developed and nourished. Pale. Pupils are equal and react to light. Several teeth missing, the rest in excellent condition. Thyroid gland seems slightly prominent. No cervical adenopathy.
Heart is of normal size and regular. Rate, 96. No murmurs heard. Blood pressure, 136/88. Lung fields are resonant. Breath sounds are normal throughout. Abdomen is normal. Liver and spleen not felt. Knee reflexes normal. No oedema of the extremities. No tremor of the fingers. Finger joints show moderate swelling, most marked on the left.
Hemoglobin (T) 70%. Blood smear shows a normal differential count, with slight achromia and slight anisocytosis of the red blood cells. X-ray examination showed no bone or joint pathology.

OPINION At the present time this patient shows a moderate anemia which seems of the hypochromic type, with a tachycardia and a moderate amount of arthritis which presumably is of the toxic variety, inasmuch as the x-ray fails to show any bony changes. The tachycardia and anemia, and her history are suggestive of exposure to Benzol. It is our unanimous opinion that we should receive additional information concerning the chemicals used in her work, before offering a more definite opinion as to the causation of her present incapacity. Also more complete blood studies, such as could be made at the Leary Laboratory, would be of value. We will file a supplemental opinion on the receipt of further data.

Verytruly yours,

Cadis Phipps
Humphrey L. McCarthy
Louis Curran

October 29, 1940

In re:
Carmella Perrotta vs.
Panther Panco Rubber Co.
No. 22812 ck. nr

Industrial Accident Board
State House
Boston, Mass.

Gentlemen:

We the undersigned, acting as industrial disease referees, have been over the blood findings in the above-named case and are submitting the following supplemental opinion.

These blood studies show no evidence whatever of any blood disturbance at the present time but because of the persistent tachycardia, it is still our wish to be given information concerning the chemicals used in her work, because of the possibility that she may have had some toxic effect from them in the past which is responsible for her incapacity, in spite of the fact that her blood has recovered from whatever changes may have been present.

Very truly yours,

Cadis Phipps
Louis F. Curran
Humphrey L. McCarthy

THE LEARY LABORATORY
49 Bay State Road,
Boston, Mass.
Tel. Ken. 2121

File No. 22812CK
NR

BLOOD REPORT

Date October 24, 1940

Dr. Industrial Accident Board
Patient Mrs. [redacted] vs. Panther Panco Rubber Co.

Hemoglobin.....14.9 grams.....93% Dare

Polymorpho nuclear leucocytes.....73%

MetaMyelocytes..... 9%

Eosinophiles..... 1%

MastCells..... 0%

Lymphocytes.....17%

Monocytes..... 0%

Myelocytes..... 0%

Anisocytosis.....slight

Poikilocytosis....very slight

Polychromasia.....none

Achromia.....none

Blasts.....none

Platelets.....numerous

Stippling.....none

Erythrocytes per cu. mil....4,970,000

Leucocytes per cu. mil.....5,100

The Leary Laboratory

FHD

November 14, 1940

In re: [redacted]
vs. Panther Panco Rubber
No. 22812 ck nr

Industrial Accident Board
State House
Boston, Massachusetts

Gentlemen:

We the undersigned, acting as industrial disease referees, have considered the report from the Industrial Accident Board relative to the materials used by this employee in her work and are offering the following supplemental opinion.

It is our unanimous opinion that this woman did not suffer any untoward effects from the substances used in her work (such as Varsol etx.). At the present time we can find no evidence of incapacity. Previously, she apparently had some Arthritis (probably of infectious origin) accentuated by a mild to moderate degree of anemia.

Very truly yours,

Cadis Phipps
Louis F. Curran
Humphrey L. McCarthy

COPY

September 7, 1942

In re: [redacted] vs.
Panther Panco Rubber Co.
No. 22812 ck nr (77283)

Industrial Accident Board
State House
Boston, Massachusetts

Gentlemen:

We the undersigned, acting as industrial disease referees in the above-named case, have been over the additional information relative to the chemicals used by this employee in her work, and we are noting the following.

At the time of our first examination, September 30, 1940, we were suspicious that her condition was related to some chemical poisoning and requested additional information from the Board. We were told that instead of using gasoline, etc., for removing dirt, the employee used ordinary soap and water in cleansing rubber soles, and that occasionally she was obliged to use Varsol for taking off particularly stubborn dirt, and that this Varsol was "a straight distillate of napthene base crude." Because of our inability to discover any substances used in her work which might cause either a severe anemia or else affect the patient in respect to a tachycardia etc., we concluded that the patient did not suffer any untoward effects from the substances used in her work and that therefore probably she had suffered previously from some Arthritis (of probably an infectious origin), accompanied by a mild to moderate degree of anemia.

In view of the additional information afforded us that prior to March 7, 1938, the employee was required to use gasoline, and that the gasoline contained tetraethyl lead, it is our unanimous opinion that the condition which we found her to be suffering from at the time of our examination was related to the use of gasoline containing tetraethyl lead, as we consider that a definitely toxic substance.

Very truly yours,

(signed)

Cadis Phipps, M.D.
Humphrey L. McCarthy, M. D.
Louis F. Curran, M. D.