May 15, 1936

Mr. T. A. Boyd
Research Laboratories Section
General Motors Corporation
Detroit, Michigan

Dear Mr. Boyd:

I enclose herewith for such use as it may be to you copy of a letter which I have written Dr. H. B. Kirby in reply to his letter to you concerning a patient.

Your manner of handling this is entirely satisfactory and I am very glad to have had the opportunity to reply.

With kindest regards,

Cordially yours,

RAK:is

Robert A. Kehoe,

KE 0011622

[redacted]

[redacted]

N8412

Medical Dept.

Dr. H. V. Kirby
Kirby Bldg.
Harrison, Arkansas
5-8-36

General Motors Research Laboratory,
Detroit, Mich.

Dear Sirs:

I have a patient who is a local oil (Conoco) agent. About one year ago he received an abrasion on hand which did not want to heal. Since has developed into a rough, irregular, red itching plaque. This has continued to spread on that hand and has since spread to other [illegible]? I tried several different kinds of ointment but none seemed very effective. We found that if he would stay away from "Ethyl" gasoline for three or four days the lesion would [illegible]tly.

We are wishing to know if your laboratory tetra [illegible] [tr]eatment would have any suggestion [illegible] to treatment other than staying away from such gasoline.

Sincerely.

H. V. Kirby, M.D.

KE 0011623

May 15, 1936

Dr. H. B. Kirby
Kirby Building
Harrison
Arkansas

Dear Dr. Kirby:

Your letter of May 5th addressed to the General Motors Research Laboratory in Detroit was sent to me by Mr. Boyd of that laboratory for reply.

The skin condition described in your letter is one which is not too uncommon among persons who have continual skin contact with gasoline. It has been our experience that some of the more recent gasoline bases produced by "cracking" processes, are considerably more irritating to the skin than are the usual straight-run gasolines. On the other hand, many of the lesions which persist after the initial gasoline irritation are the result of secondary infection or of the implantation of mycotic parasites. If one is certain that he is dealing with an uncomplicated gasoline irritation, the best treatment is to remove the patient temporarily from exposure and to treat him with any one of a number of healing antiseptic ointments until the lesions have entirely disappeared. After their disappearance the patient may be able to return to his work without recurrence. If he is not able to do this, some relief may be provided by avoiding skin contact as much as possible, and by using one of the protective creams, such as "Protek" (a Devilbiss preparation for protective purposes).

The tetraethyl lead in the gasoline is not a factor in the irritation. Actually tetraethyl lead is much less irritating than gasoline by itself, and in fact it can scarcely be regarded as a skin irritant at all, since it may be absorbed through the skin without any obvious injury or sensation.

I hope this information may be of some use to you and I shall be pleased to know how your patient gets on.

Very truly yours,

Robert A. Kehoe, M.D.

RAK:is
cc Mr. Boyd

KE 0011624

[redacted]

N8412