

DR. MAURICE
UNIVERSITY

January 28, 1941

Dr. W. Kennedy Waller
University Hospital
Baltimore, Maryland

Dear Doctor Waller:

I am replying somewhat belatedly to your letter of January 15th written to my associate Dr. Schradin and giving information about Mr. Witter. I apologize for the delay in replying, but Dr. Schradin is out of the laboratory on an extended trip and I have been out of my office on account of a recent encounter with the local epidemic of Influenza, or whatever it may be called. I wish to thank you for the information about Mr. Witter, and I am very glad to know that he is continuing to improve.

The last record of analysis made on the urine and blood of Mr. Witter is dated November 18th, 1940. At this time the urine showed 0.27 milligrams per liter, and the blood 0.07 milligrams per 100 grams. This is a high level, particularly in the urine, but it is in keeping with the previous results obtained on Mr. Witter and in our opinion it is sufficient evidence of the reason for the delay in his recovery. In previous instances we have found that symptoms persist until the analytical data approach the normal levels. It seems probable that by this time the lead concentrations in the blood and urine have reached substantially normal levels. This conclusion would seem especially to be justified by the fact that observations made on some of the other men have shown a reduction in the lead concentrations to practically normal levels. Mr. Witter's exposure was apparently greater than the others and a somewhat longer time would be required to get back to normal.

Referring again to the analytical data above, one might assume that there is some error in the collection or analysis of the urine sample because of the wide discrepancy between the result in the blood and that in the urine. If this were a case of inorganic lead poisoning, I should think some such error had occurred. However,

we have found frequently, in connection with cases of this type, that the discrepancy between the urinary and the blood concentrations is quite considerable. The results, as I have given them to you, are plausible, therefore, and the urinary result is not far from correct.

It seems probable that you will wish to check the blood and urine concentrations on Mr. Witter at an early date. If so, we should be glad to supply the necessary containers on your request. We should be glad to make the analyses for the sake of our own information as well as for the advantage of Mr. Witter.

Very truly yours,

RAK:is

Robert A. Kehoe, M.D.

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