

Lead Industries Association

420 LEXINGTON AVENUE

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TREASURER

July 25, 1944

Dr. Robert A. Kehoe
University of Cincinnati
Kettering Laboratory of Applied Physiology
Eden Avenue
Cincinnati 19, Ohio

Dear Dr. Kehoe:

You probably remember that you and I had an interesting discussion about the use of the x-ray in diagnosing lead poisoning in children, when we met in St. Louis a short time ago. At that time, I pointed out to you that Dr. Edwards A. Park, of the Johns Hopkins Hospital who had done a large amount of study on this subject, apparently had made a serious error in his paper of August, 1933, in the "Journal of Pediatrics," making it appear that the "shadow" actually contained large amounts of lead. (He had confused milligrams for grams.)

I called on Dr. Parks a short time ago and had a most delightful discussion with him. He was frank to admit the error in the light of the evidence I presented, and promises to make a correction. He is, however, still adhering strongly to his views that the "shadow" is caused by lead and he is now of the opinion that although there may not be lead in the "shadow" itself, lead through alteration of the bone structure is the reason for its appearance.

That may be true, but the "shadow" is known to occur in rachitic children or in children who have absorbed other metals. It seems to me, therefore, that the x-ray is a most untrustworthy diagnostic tool. In fact, I was interested in reading one of the reports of the Queensland lead poisoning literature that you were kind enough to let me examine stating, I recall, that out of 19 children alleged to have had lead poisoning, 12 did not show any "shadow," which is one of the reasons why the use of the x-ray is apparently not held



Dr. Robert A. Kehoe

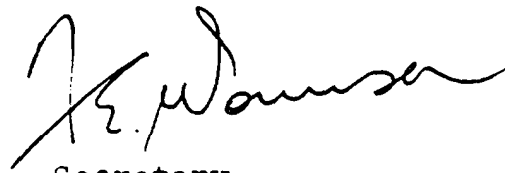
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in high regard among the Australian medical circles to
detect lead poisoning in children.

With kindest regards,

Very truly yours,



Secretary