



THE KING EDWARD

TORONTO, CANADA

21st May, 1956.

Dr Robt. A. Kehoe, M.D.,
The Kettering Laboratory,
University of Cincinnati,
Eden Avenue, Cincinnati, 19,
Ohio. U.S.A.

Dear Dr Kehoe,

I am the Chief Medical Officer of the Joint Coal Board of N.S.Wales, Australia and previous to this was for 21 years at Broken Hill N.S.W. as M.D. in Charge of the Bureau of Medical Inspection there. I left Sydney in January 1956 on a world tour on behalf of my Board and, unfortunately, have to be back in Sydney by the end of May so am unable, because of lack of time, to call upon you personally, which I would very much like to do. However, two friends of mine and yours, Dr R.R. Sayers and Dr John James, have suggested to me that I should write to you before I leave for Australia on May 27th.

The reason for this letter is to ask your advice about a problem which has arisen in Broken Hill since I left Australia and concerning which the Broken Hill Companies have asked me by letter to obtain as much information as I can whilst I am abroad.

In summary, the problem is as follows:

For more than 30 years we have all been of the opinion that no lead poisoning was occurring at Broken Hill. We based this conclusion mainly on the following grounds:

- (a) The mining is all in sulphide ores - Working conditions and dust control are good.
- (b) No smelting is carried out at Broken Hill, the lead concentrates produced at Broken Hill being shipped elsewhere for smelting.
- (c) There have been no cases of acute or sub-acute plumbism arising among the 6,000 - 7,000 workers employed on the lead mines there.

Recently, however, I am informed, a man who had worked for many years in Broken Hill developed incapacitating lesions of his joints which, I understand,

that they would on such. An application for compensation for the
 testimony they were required by the Public Health Service to give with
 such claims. He was then sent to England as a physician, and
 an epidemic of E.D.T.H. which resulted in the death of a considerable
 number of people in his time. There was no other of that in his time
 before the treatment, and he had never in his life suffered from
 asymptomatic infection of acute or sub-acute type. (The testimony
 of the physician concerned has been examined by E.D.T.H. and the
 high level of the evidence was found to be satisfactory. (The testimony
 of the physician was due to lack of opportunity. (The testimony was
 made clear).
 As far as I know, this is the first time that a laboratory agent has been
 given to an employee of the Public Health Service.

The problem facing the Public Health Service is that it is found that
 the administration of E.D.T.H. to any of its employees may result in the
 production of a high level of evidence in that service and that
 should the worker concerned happen to be suffering from any chronic
 degenerative disease of the nervous, respiratory or circulatory system or
 from chronic arthritis of certain types, the results will be most
 evidence that that individual is not able to work the disease present.
 Obviously, in the light of this case, the Public Health Service is not
 competent to handle the kind of thing referred to and that by coming
 in the Public Health Service will have to be investigated.

The question as to whether such absorption in the absence of any evidence
 of the production of symptoms requires it will be a problem in the future
 continuously, should the best representative for any chronic degenerative
 persons from which they may suffer in their later years to also be a
 very much to the fact.
 I can assure you that any advice you can give me to assist in the
 further investigation of this problem will be very much appreciated and
 acknowledged. I would especially appreciate any information you
 can give me as to the transmission of that which may have been
 involved in the same of persons in the other age groups who have not
 been exposed to any form of that kind of work.

Respectfully and he may already have commenced with you
 which in his past history. I should like to meet with you through
 the interest to any form of that kind of work.



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immediacy it, but I feel I should write to you personally.

I leave Toronto on Thursday next (24th) for Vancouver, B.C. and from there I leave by Tantas for Australia on May 27th. While in Vancouver my address will be of Hotel Devonshire, but you will probably not have time to reply before that date. I therefore enclose my card with my Sydney address.

I hope you will not regard it as presumption on my part writing to you in this way, but I already knew your great experience in the field of land-preserving and, as I said above, my friends in U.S.A. suggested that I should get in touch with you.

With very many thanks and kindest regards,

Yours sincerely,

Dr W. E. George

(DR W. E. GEORGE)

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Australia.