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Dear Dr. Pezerat:

I find it extremely difficult to read intelligently your hand-written letter of January 1, 1981, and I must ask you to pardon an old man with serious disabilities including near and irreparable blindness.

I gather, however, that you and presumably a number of your colleagues are involved in the old discussion of the significance (for diagnostic purposes) of stippling of the erythrocytes in the peripheral blood of the human being, as well as the occurrence, quantitatively, of certain chemical changes in the blood. I cannot carry on the controversies as to the significance of these microscopic and chemical features of the blood, for the reason that my near blindness will not permit me to read or to write without much time-consuming effort. Let me close off such discussion with me, by saying that the interpretations of the rate of the excretion of lead, itself, in the urine, under a variety of conditions, coupled with the determination of the concentration of lead in the blood, have eliminated the necessity for studying (for purposes of control of lead poisoning in industry), by the much less specific changes in the blood. Stippling of the erythrocytes in the blood served a somewhat useful practical purpose at one time, but this is no longer a valid procedure. The present efforts of industrial control must be directed toward limiting the exposure to lead in the industrial environment so as to keep such exposure within safe limits, while watching medically the employees, individually, to make sure that they are not being exposed to lead otherwise. That is, to check the workmen symptomatically and in the terms of physical signs, accompanied periodically with analyses of lead in their urine or blood. These are the modern methods, and nothing less will do the task effectively.

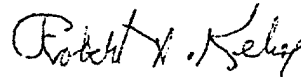
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I studied this lead problem in industry for some years, and then I carried out a study, which should have been done long ago (at least 150 years ago), in the toxicological laboratory. I was overtaken by a serious cerebral accident before I was able to publish a report on the latter study. Having recovered, to some degree, I have undertaken, very slowly, to prepare a report for publication. This is now nearing completion, although some further months will be required for that purpose. At that time, and not before, you will have such answers as I can provide for your questions. I am now an old man, with considerable visual disability (among others), and can do nothing other than this necessary work.. I am sorry to be so slow about finishing it, but that cannot be helped. I sincerely believe that most of the serious questions which I, among others, have had in the past, will be answered in this publication. At any rate, I hope so.

With best wishes to you and my deepest regards for the many physicians, and others, who have felt troubled by this problem.

Sincerely yours,



Robert A. Kehoe, M.D.
Professor Emeritus of
Occupational Medicine

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