

April 1, 1944

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Captain Burchell E. Horn,
Building 1237 Research Section,
Camp Davis, N. C.

Dear Captain Horn:

Your letter of March 14, addressed to the Medical Department of the Standard Oil Company of New Jersey, was forwarded to me by Dr. Woody, in accordance with his letter to you.

After considering the information you have given, I find it very difficult to come to the conclusion that your present condition is in any way due to your inhalation or aspiration of gasoline. I can well believe that the deep inhalation of concentrated vapors of gasoline would produce a temporary feeling of suffocation. However, it is not to be supposed that this would cause more than temporary discomfort. We have seen a number of persons who have actually aspirated liquid gasoline into their lungs under somewhat similar circumstances as those described by you. One of these individuals had a rather stormy time for a few days as the result of considerable chemical irritation of his upper respiratory tract and lungs. However, he recovered and was none the worse from his experience. I cannot imagine any mechanism whereby gasoline vapors inhaled in high concentration for a short time would produce any serious injury. From the examinations to which you have been subjected it would appear that you do not have any demonstrable organic damage, and therefore I think that there is no possible relationship between your present symptoms and the accident which you describe. Actually it has been rather well established that there are no significant residual effects from the brief inhalation of gasoline vapors. If you are thinking in terms of the lead content of these vapors, you can eliminate this from your consideration. Not only is there no important effect upon the lungs or heart due to exposure to tetraethyl lead, but it is also quite clear in this case that you were not exposed to any significant quantity or concentration of lead vapors. Under the conditions you describe, the vapors would contain only the minutest traces of tetraethyl lead.

Very truly yours,

Robert A. Kehoe, M. D.

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