

October 4, 1932

Dr. P. H. Kilbourne
870 Fidelity Medical Bldg.,
Dayton, Ohio

Dear Doctor Kilbourne:

Several days ago I examined your patient Mr. [REDACTED]. After going into Mr. [REDACTED] history carefully and after have examined him, I do not feel that his present condition is due to exposure on his part to dusts in the course of his work. Undoubtedly he did have some exposure to dusts containing chromates. Apparently there was nothing more than a superficial irritation since none of the characteristic chromate lesions developed in the nose.

In my opinion, his present condition is of an infectious type and is very like that of any other person with a posterior sinus drainage. I feel that many of these infections are allergic and I have seen a number of them respond very well indeed to desensitization with autogenous antigens. I should feel if Mr. Gerard has any significant anatomical abnormalities of the nose, these should be corrected. I doubt the presence of polypi but if they are present he can not expect to recover except as they are removed. In any case either before or after surgical interference, I should feel it desirable to culture out his upper respiratory flora and to give him skin tests to determine any specific sensitivities. He should then be desensitized, I think, to any organisms to which he shows a sensitivity.

The tendency to allergic reactions which is shown in Mr. [REDACTED] history, is strengthened somewhat by the presence of a relatively high eosinophile count 790 (4%). My physical examination did not disclose any remarkable abnormalities outside of the condition of the nose and throat.

Cordially yours,

RAK:IS