COLLIS P. HUNTINGTON MEMORIAL HOSPITAL
HARVARD MEDICAL SCHOOL
BOSTON

September 16, 1940.

Outline and revised draft returned with the letter. Subsequently returned to him in accordance with my letter of Dec. 6th

Dr. Robert A. Kehoe,
University of Cincinnati,
Cincinnati, Ohio.

My dear Dr. Kehoe:

First of all, let me congratulate you on this paper. Inasmuch as most of it is your own work, I think it represents an accomplishment of which you may well be proud. While I do not have adequate personal experience to evaluate some of it, I feel sure of its value and, therefore, approve of the report as a whole.

As you have asked, I am going to make some suggestions for changes, though they are not very great. I notice on page 3 and 4, where you talk about treatment, that you speak of the inadequate way it is treated, and I wonder whether you thought the paper I gave you was inadequate. If you will tell me what you think, I will be glad to go over my carbon copy and try to correct it. After all, this report will be used frequently in litigation and I think it should be gone over with this idea in mind so that no difficulties will occur by our lack of specificity in statement. For instance, note the place I have marked on page 5 and 6. There are also others in the report which I have not marked. I have also made a note on page 18. On pages 21 and 22, I would add that stippling and basophilic aggregation are not as good a quantitative value as justified by the figures, for they vary during the day and vary considerably from day to day though the cause of this variation is not known. On page 24 I object to the examination of single fecal evacuations. What is meant is fecal evacuation per day, or total excretion per day, for a man might well have more than one bowel movement per day. This is mentioned on page 25 also. On page 27, at the top, I should like to suggest, though I do not think you will approve of it, that either twenty-four-hour or eight-hour samples should be collected. The liter content may have errors. I also think this paragraph is not very clearly stated. Page 28 -- a small change. Page 29 -- top paragraph.-- should there not be a suggestion here as to what constitutes a concentration of possible lead poisoning? Pages 29 and 30, of course, refer to absorption in industry, and I think there should be a statement that the analyses must be done soon after work stops, because of a rapid drop; also, that the analyses must be done by experienced analysts, that the methods are tricky, and that poor determinations give an entirely erroneous impression, as the figures are such that they give the impression of accuracy. It is my experience that when arguments occur as to whether a person has lead poisoning or not, it is very difficult to controvert a urine analysis finding even though one is sure that the analysis is at fault. A chemist cannot do one or two lead determinations a year and depend upon his accuracy. This I think should be brought out very specifically.

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On the top of page 42, the report seems rather verbose and unnecessarily complicated. The last sentence of the first paragraph contains the meat of the idea. On the bottom of page 43, I should like to add some such thing as this: "In a high calcium and high phosphorus diet, as obtained with milk, the bones are kept well supplied with calcium so that an active deposition of salts is not so likely". As you well know, there is also recent evidence for this and for the fact that intestinal absorption of lead seems to be reduced with a high calcium diet.

There is one fundamental thing about the report which I think you could improve. It deals largely with a technic for avoiding lead poisoning which will be quite new to many industrial physicians, yet in it you have no specific suggestions of what should be done in order to put it through effectively. In other words, I think it is an excellent theoretical discussion of the problem of avoiding lead poisoning, but is not sufficiently practical in its description of how the method should be set up and used. In this discussion I also think stress should again be laid on the necessity for accuracy of the determinations and that it should be stated specifically that the value of the method is entirely dependent upon this.

Again let me congratulate you on it. I really think it is a "swell" job. If you have an extra copy of it, I should like very much to have one.

Very sincerely yours,

Joseph C. Aub

Joseph C. Aub, M.D.

JCA:HA