

*EATON* Inc.  
LABORATORIES  
NORWICH, NEW YORK



March 13, 1950

Dr. R. A. Kehoe  
Kettering Laboratories  
College of Medicine  
Cincinnati 19, Ohio

Dear Dr. Kehoe:

Many thanks for your advice in the question of the lead ointment tubes. I have passed this on to our packaging engineer.

I am sending you separately a bottle of our latest product, Foralamin, an antihistaminic, and enclose a folder on this. You might want to keep this on hand in case you develop symptoms of a cold. Those of our staff who have used it find it does appear effective in aborting colds. Its low incidence of side reactions and absence of a benzamine linkage, which may be the cause of agranulocytosis, are points in its favor.

Sincerely,

A handwritten signature in dark ink, appearing to read 'R. J. Main'. The signature is fluid and cursive, with a long horizontal stroke at the end.

R. J. Main, Ph.D.  
Medical Editor

jf  
Enclosure

N13164

March 3, 1950

Dr. R. J. Main,  
Medical Editor,  
Eaton Laboratories, Inc.,  
Norwich, New York.

Dear Doctor Main:

I have been delayed in replying to your letter of February 10, and I hope I can give you some information on your question.

First, let me say, that the use of lead tubes for the purposes indicated is not very good practice. The very fact that such questions can be raised as those which have occurred to you, introduces a certain amount of liability into the situation. In my opinion, it is much better not to allow these questions to be raised. During the war tubes made large-ly of lead were used for a number of purposes which would not ordinarily be sanctioned. However, the effort was made to coat these at least on the inside, either with a layer of tin or with some plastic material which would prevent attack on the metallic tube. This is good practice, in my opinion, and anything less than this should be discouraged.

Despite what has been said above the opportunity for lead intoxication, as a consequence of the absorption of any material through the skin under the conditions referred to in your letter, is almost, if not quite, negligible. The absorption of inorganic compounds of lead through the skin even in the presence of wounds and contusions and abrasions, is practically non-existent. Therefore, if it is quite certain that a material introduced into one of these containers is to be applied on the skin only, there can be very little question of hazard. I would have no fear that such an actual hazard would exist, but I still say that it is bad practice, since the question can be raised, and it is very difficult to prove, in the individual case, that a claim of injury made on this kind of cause, is completely invalid. I think it would be unwise to allow the question to be raised in connection with food materials, tooth pastes, various other materials of that kind, including therapeutic agents.

It is always a pleasure to hear from you, and I hope that if you have any other questions that I can answer from time to time, you will not hesitate to let me hear from you.

Sincerely yours,

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Robert A. Kehoe, M. D.

RAK ef

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*ELT* LABORATORIES Inc.  
NORWICH, NEW YORK



February 10, 1950

Dr. H. A. Kehoe  
Kettering Laboratories  
College of Medicine  
Cincinnati 19, Ohio

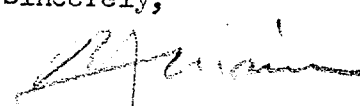
Dear Dr. Kehoe:

Once again I must infringe upon your generosity to ask your advice about lead. It happens that we here always use tin or aluminum collapsible tubes for ointments. However, very recently we were asked by a chain of drug stores to produce some ointments for them and they supplied us with lead tubes. We noted that in these new tubes that most of them were somewhat discolored on the inside with a grayish powder which I would guess to be perhaps lead carbonate. Since these ointments include such things as sulfonamide ointments and certain first aid ointments containing weird mixtures of zinc oxide, essential oils etc., etc., and because these could be applied to open wounds and burns, I am wondering whether there is any possibility of lead poisoning from their use. Of course no ingredient would be placed in a lead tube which would actively react with the lead since this would soon destroy the tube. Do you happen to know of any reports in the literature which would suggest that there is a danger in such practices?

You may be sure that I will be most appreciative of anything you can tell me.

With best regards, I am

Sincerely,

  
R. J. Main, Ph.D.  
Medical Editor

jf

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