

March 16, 1942.

Mr. R. L. Forney, Director,
Industrial Division,
National Safety Council,
20 North Wacker Drive,
Chicago, Illinois.

Dear Mr. Forney:

Thanks very much for sending me the latest revision of "Health Practices Pamphlet #3, 'Lead'".

I can not claim to have taken the time to go over this pamphlet, line by line, for my work will not permit any such expenditure of time at present. However, I have read it through and I can say honestly that I think it is a very good pamphlet and that it should accomplish a great deal of good. I have extracted several pages on which there are either slight typographical errors or other small matters which, in my opinion, could be corrected to advantage. Only two points have been criticized severely, and one of these is a mere matter of expression. I refer here to the paragraph 17, page 8, which extends over into page 9. I have rewritten part of this, since I think it is misleading. I have also eliminated your reference to obtaining samples under the supervision of a physician in this same paragraph. This, I think, is necessary for the mere supervision of a physician, who is usually not a chemist, is not a sufficient safeguard against the contamination of samples. It apparently is not appreciated that urine samples obtained in any other than the most meticulously careful manner will be inevitably contaminated, and instead of giving useful results, will be grossly misleading. The average doctor knows as little about the prevention of such contamination as does the average plant manager.

A second, and more serious criticism, will be found on page 11, where certain categorical statements are made concerning the non-toxic effect of lead when deposited in the bones and the likelihood of danger from reversal of the flow of lead from the bones into the blood stream. The clinical and experimental evidence of recent years, obtained not only in this but in other laboratories, casts such doubt on these statements as to render them somewhat untrustworthy. Dr. Aub would take exception to this statement. Others would support him and quite a number of others would support me. Without laboring the point, I think this should demonstrate that the subject is at least controversial, and I think you are not wise to include such controversial

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statements in a paper which does not presume to present detailed medical and physiological information. This, of course, is entirely up to you, but I believe if you have occasion to revise this book five years from now, you will have to delete this portion of this paragraph as being untrue and misleading. My own opinion, based on extensive experience and comprehensive experimentation, is that lead in the skeleton exerts a very important influence on the total lead metabolism of the body, and, in fact, urinary lead excretion is in large measure an expression of the total lead content of the body including that in the skeleton. I have no reason for bias, since I have not expressed any hypothesis on the subject of the form in which lead exists in the skeleton, but I have yet to see experimental evidence which demonstrates that lead can be mobilized from the skeleton at any greatly increased rate by any of the methods which have been suggested for that purpose.

Very truly yours,

Robert A. Kehoe, M. D.

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P. S. I am returning herewith the pages with indicated corrections and retaining the balance. I am also sending several articles on methods of lead analysis which will be useful not only because these methods are satisfactory in themselves, but because they give reference to other methods that yield results of comparable accuracy. This will enable you to set up your list of references and will save me the trouble of doing it for you.

Enc.

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