March 14, 1949

Dr. Frank H. Cutler,
220 East South Temple,
Salt Lake City, Utah.

Dear Doctor Cutler:

I have been a little delayed in answering your letter of March 2 because of the necessity of taking a trip out of town. Meanwhile, however, a set of containers with instructions for the collection of samples has been forwarded to you, and you should have these by the time you receive this letter.

From what you tell me about Mr. [redacted], I would not suppose that he has had any significant exposure to tetraethyl lead in the handling of samples of gasoline. It is, of course, conceivable, that the gasoline had been handled so carelessly as to give rise to some exposure, but apparently it is not generally appreciated that the concentration of lead in commercial gasolines is so low as to give rise to little or no lead exposure on the part of persons who handle such gasoline. In order to illustrate my point I should say that we have examined a large number of refinery and filling station handlers of gasoline. Now only have we never seen a case of lead poisoning in such people, but we have never found any evidence of lead absorption among these people. Moreover, we would never expect to see a case of neuritis in any person exposed to tetraethyl lead, since even in frank cases of tetraethyl lead poisoning, relating to manufacturing operations, neuritis has never been seen as a clinical result. In other words, tetraethyl lead poisoning is different in its characteristics from inorganic lead poisoning, and the clinical picture is so different, in fact, that the usual type of illness from the absorption of inorganic lead is not seen following absorption of tetraethyl lead.

Despite these remarks, we have always taken the position that we should be on the look-out for any possible difficulty, and therefore I should be glad to give you any possible assistance in connection with the diagnosis, and/or treatment of your patient, Mr. [redacted]. It is with this idea in mind that I have sent containers for the collection of blood and urine, since by the analysis of these samples we shall be able to determine whether or not Mr. [redacted] has had any significant exposure to lead compounds.

In order that I may clarify my statement with reference to the clinical picture of tetraethyl lead intoxication, I am sending you herewith a reprint of an article written on this subject by one of my associates, which summarizes the information obtained by ourselves over a period of years up to the time the article was written. Very little useful information could be added to this article at this time.

Cordially yours,

Robert A. Kehoe, M.D.