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WILMINGTON, DELAWARE

CHEMICAL DEPARTMENT
EXPERIMENTAL STATION

June 13, 1934

Dr. Robert A. Kehoe
Mettering Laboratory of Applied Physiology
University of Cincinnati
Cincinnati, Ohio

Dear Dr. Kehoe:

Your experimental studies concerning lead levels in the blood and the urine, which you mentioned during the conference we had on Monday evening, June 4, have a direct bearing upon the work we are now carrying out for Dr. W. H. Kraemer. You will probably recall that Dr. Kraemer is attempting to base his clinical treatment, with colloidal lead preparations, on the blood lead-level rather than upon the sum total of the clinical symptoms which has heretofore been the principal guide. Although we are not far enough along to know whether this can actually be done, preliminary observations have been encouraging.

In view of your finding that the blood lead-level is not constant, but rises during the day, increases after meals, exercise, etc., a clinical interpretation of our analytical data would be erroneous unless these normal variations in the lead content of the blood could be taken into consideration. Would it be possible for us to obtain full details concerning your experimental work and results in this connection?

We are particularly interested in knowing whether the blood lead-level was followed in the cancer patients who were treated with the colloidal lead preparations, and on whom studies dealing with lead excretion were made and published in J. Lab. Clin. Med. 18, 171 (1933).

Any suggestions that you may care to give us in our attack upon this problem will also be greatly appreciated.

Yours very truly,

EXPERIMENTAL STATION

C. E. Willoughby

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