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ABINGTON MEMORIAL HOSPITAL

Abington, Montgomery County
Pennsylvania

January 2, 1945

Mr. Felix Edgar Wormser, Secy.
Lead Industries Association
420 Lexington Avenue
New York 17, N.Y.

Dear Sir:

David Mooney was admitted to Abington Memorial Hospital 9/21/44 with a history of having licked his hands three weeks before, after rubbing his hands on fresh paint. He was fairly well from that time until the Monday before admission, when he began to vomit, which he continued until admission. He also became constipated about the same time and had retention of urine, voiding only twice a day, although he tried frequently. The evening of admission he began to get twitchings of his face. The three chief complaints at admission were therefore: (1) twitching of the face, (2) vomiting, (3) retention of urine. The physical examination was essentially negative except for twitching of face and distention of bladder.

The following laboratory reports were obtained: Hemoglobin was 8.5 grams, or 55%, Red blood count of 2,440,000 and leucocyte count of 20,000. B.U.N., chlorides, CO2, sugar, phosphorous, and calcium, were all normal. Urine analysis was negative.

An x-ray of wrists for lead line showed changes at the ends of the diaphysis of the ulna and radius that were quite characteristic of plumbism. Like changes were scattered in the metacarpals and phalanges.

The eye examination revealed a neuro-adenitis, mild, and bilateral sixth neuritis, obviously a part of the lead poisoning condition.

The temperature spiked between 100° and normal daily until the day of his death when it became elevated to 105 3/5, with a corresponding increase in pulse and respiratory rate.

The following therapy was administered: Sodium pheno-barbital for the twitchings, alkaline sodium phosphate, viosterol, calcium gluconate, and ascorbic acid. A blood transfusion was also given. The child became progressively worse so that he could not be moved without crying from pain. The twitchings became progressively worse and the child hemorrhaged from the nose and mouth a short time before death on 9/25/44.

We would appreciate any additional information that you have on other cases as to their history, studies and treatment.

Very truly yours,

N 16044

D. F. MAYER, M.D.
Chief Resident Physician