

June 22, 1963

Ramon A. Morano, M.Sc.
Toxicologist
Department of Health
Office of the Chief Medical Examiner
Tidewater Division
427 East Charlotte Street
Norfolk 10, Virginia

Dear Mr. Morano:

I am somewhat slow in acknowledging receipt of your letter of June 7, having been out-of-town for a week. I am duly appreciative of your willingness to carry out "a limited number" of analyses, and I can assure you that I shall not impose upon you. As soon as I receive word from the Ford Laboratory as to their willingness to carry out a series of analyses, we shall prepare some samples and send a few of them to you. (I am sure that there will be no hesitation on their part, but I have sent formal recommendations to them on several matters, and I want their formal reply before I take any additional step.)

I am pleased to have the record which you sent. We have been following this problem in Cincinnati for nearly twenty years, and have dealt with scattered cases from other areas. I am always glad to have additional information. Incidentally, the absence of "stippling" in a frank case of childhood plumbism is rare, but we have noted this phenomenon in connection with brief periods of massive absorption of lead, when it appears that the blood-forming tissue has been overwhelmed to the point of inability to respond to the stimulus.

I might also suggest to you, should the opportunity present itself again, the desirability of always including a portion of the skeleton among the tissues to be analysed. This tissue, more than any other, gives the clue to the severity and duration of the exposure to lead which resulted in the illness presented.

One other point of lesser importance relates to the analyses of blood obtained post-mortem. It is often the case that the blood has clotted to some extent, and sometimes the clot is firm. It is not possible to determine the lead content of the whole blood under these circumstances, since practically all of the lead is held within the erythrocytes and hence within the clot. One can get an approximate value by analysing the partially or firmly clotted blood, but the concentration of lead therein will be high as

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compared to that of the ante mortem specimen of whole blood. This, of course, is a minor detail, but it is of some importance in certain medico-legal proceedings.

You will hear from me as soon as I can get the procedure of comparative analyses lined up.

Sincerely yours,

Robert A. Kehoe, M. D.

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