

September 1962

Mr. H. F. McCabe
Benefits Advisor
California Texas Oil Corporation
380 Madison Avenue
New York 17, New York

Dear Mr. McCabe:

Re: site you concerning the man
Caltex (Philippines) Incorporated
11, 1962, concerning a Caltex
employee claimed he sustained injury
while handling apparently blood
in 1956 and a claim is being made

Office has requested that
be raised in the letter

J. E. Murray dated
whose private physician
from handling
tetraethyllead between

this period of time resulted in thrombophlebitis, for which he
recently required operative treatment.

Physicians representing the company reportedly have stated
their opinion that there was no causal relationship between his work
and injury. Apparently all safety precautions were followed so that
tetraethyllead intoxication was prevented.

From our experience in producing and handling tetraethyllead
for over thirty-five years it is possible to make the following
general statements:

(1) In a group of approximately 15,000 lead handlers in United
States refineries we have noted no increase in incidence of
thrombophlebitis in tetraethyllead handlers over that found in the
general population. Incidence of such a condition in a refinery
employee who blends tetraethyllead into gasoline is in our opinion
purely coincidental.

(2) Even in the occasional cases of individuals who have
become ill from entering leaded gasoline storage tanks without
using proper equipment and safety procedures, there has been no
evidence of thrombophlebitis in our experience or in published

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reports of other observers which we have reviewed.

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Our program for controlling toxicity from handling tetraethyllead has been based primarily upon as nearly absolute containment of the fluid and its vapors as possible until mixed with gasoline, after which the hazard of the gasoline predominates and no additional organic or inorganic lead hazard is found. Refinery employees used as blenders are at no risk except in event of accidental spill. No hazard pay is justified or paid anywhere to our knowledge for work involving tetraethyllead handling.

In our experience, it is frequently necessary for company physicians to disagree with an employee's personal physician who may be expected to have a strong bias in favor of his patient and inadequate knowledge of the true hazards and conditions of work. If we understand the question properly, therefore, we agree with the conclusions reportedly expressed by your medical department and feel sure that the Workmen's Compensation Commission will have little difficulty reaching a proper decision. If the basis of the claim should in fact be a leg injury perhaps resulting from a fall in the plant and later followed by development of phlebitis, it would be an entirely different story.

Please advise your company physician to write us directly, if there is need for further assistance.

Very truly yours,

Frank Princi, M.D.

cc -

R. F. F. DeVerville, M.D.

Sidney L. Danner, M.D.

H. M. Ball

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