

ESSO STANDARD (SWITZERLAND)

AIR MAIL

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ZÜRICH, Schmidhof

November 13, 1960

AM-88

TML

Mr. G.W. Butler
Marketing Coordination
Standard Oil Company (N.J.)
30 Rockefeller Plaza
New York 20, N.Y.

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Dear Mr. Butler,

Since we wrote our AM-88 of October 18, 1960, we have had an opportunity to personally talk to Dr. Kehoe about the local TML situation.

Dr. Kehoe was under the impression that, what he said in his presentation to the Swiss Lead Committee at Berno in July 1960, might not have been interpreted in exactly the sense it was meant. We, therefore, arranged for a meeting between Dr. Kehoe, Prof. Hoegger (prominent medical member of the Committee) and Dr. Ruf (who was also present at the first discussion and who gave us the information contained in our letter to you of August 15, 1960). This meeting took place on October 31, 1960, in the presence of our Products Advisor, Dr. A. Messmer.

In essence, this is what Dr. Kehoe said:

- " The tests completed by July 1960 (when Dr. Kehoe made his first presentation on TML to the Lead Committee) and the limited time available for these tests did not allow to obtain scientific proof regarding the effects of TML. Since tests are underway at the present time it will, however, be possible to furnish some proofs in the foreseeable future. On the other hand, those tests which were completed by July 1960 did substantiate certain assumptions and this made it possible for Dr. Kehoe to assume the responsibility of recommending the use of TML in the U.S.

Dr. Kehoe stressed the fact that the introduction of TML in the US was made possible only by his positive attitude. He maintained that since it is permitted to use TEL there is no reason to put a ban on TML.

In reply to a specific question by Prof. Hoegger regarding the degree of toxicity of TML versus TEL, Dr. Kehoe said that experience proved that the use of TEL in megas in controlled concentrations has had no adverse effects and can be considered as not dangerous. This is backed up by controls extending over a period of more than thirty years.

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" TML is less readily absorbed by the human skin than TEL. In this respect TML is less dangerous. On the other hand, as a result of its higher volatility, more lead gets into the atmosphere during evaporation of mogas containing TML than would be the case with TEL. This increases TML's relative toxicity.

**) Expressed in numbers Dr. Kehoe believes that TML's toxicity is about two to two and a half times that of TEL. However, since experience proved that the use of TEL does not involve any hazards to public health, this - according to Dr. Kehoe - also applies to the use of TML.

Dr. Kehoe emphasized that this is his personal opinion and that he will be able to produce evidence of the harmless nature of TML only at a later date, i.e. when the tests which are underway now will have yielded sufficient data. He has, however, no doubt that these results will be positive. "

**) With regard to this paragraph it should be mentioned that Prof. Hoegger, Dr. Ruf and Dr. Messmer were under the impression that Dr. Kehoe's statement was a summary and referred to operational toxicity. Basing on literature received the other day on TML, however, we rather suspect that Dr. Kehoe only had the operational inhalation hazard in mind. Possibly, there is just another misunderstanding here.

Dr. Ruf to whom we talked after the meeting said that Dr. Kehoe, this time, sounded somewhat more positive and that some of his statements varied from those made in July.

Dr. Kehoe, in turn, felt that his statements were identical and may have been partly misinterpreted.

Both, Dr. Ruf and Prof. Hoegger welcomed the opportunity of thoroughly discussing the whole problem and the latter promised to pass on this latest information to the Lead Committee accordingly.

Obviously, from a supply and quality point of view fast action to secure official clearance to use TML in Switzerland would be highly desirable. We understand from our Supply Manager, Mr. W. Müller, that this question was also discussed at the recent Vienna Supply Meeting and you may rest assured that we fully appreciate the problems arising from a ban of TML in this country.

The question now is what action we can take to obtain official clearance with as little delay as possible.

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- a) From a technical point of view we have a clear situation. We know the advantages offered by TML and we also know that there are no negative aspects regarding engine life.
- b) The medical aspect, however, is a different story. You will agree that Dr. Kohoe's presentation to the Lead Committee and his latest statements during his second visit are not too convincing, particularly when you keep in mind that you face a group of rather conservative and cautious men who took a good many years to prepare a final report on TEL. Incidentally, this report is not yet ready and - according to latest information - will hardly be handed to the competent Government people this year.

After having studied the report on the test carried out by the Mottering Laboratory, in our own opinion, the medical documentation on TML is rather thin. In fact, it is one test, in one place covering 15 men during six weeks.

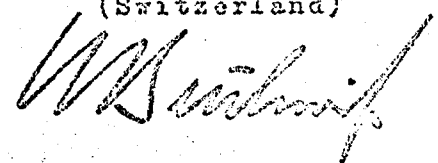
Though the picture is not very encouraging, we have decided - after contacting a very prominent member of the Lead Committee - to go ahead now and submit an official request for acceptance of TML to the competent Federal Authorities. To this end, will you please

- 1) send us any written documentation, pamphlets etc. both on the technical and medical aspects of TML which we can use to complement our application.
- 2) give us the latest status on what countries have either no objections to or have already switched to TML in partial or complete replacement of TEL.

Any other assistance you may be able to offer will be highly appreciated.

Very truly yours,

ESSO STANDARD
(Switzerland)



R. Bruhwiler

cc/ Mr. W.A.M. Greenen
Mr. F.O. Canfield
S. & T. Advisor, London

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