

January 15, 1945

E. C. Holmblad, M.D.
28 E. Jackson Blvd.
Chicago, Illinois

Dear Dr. Holmblad:

I am attaching a letter from Dr. D. A. Sanders pertaining to the A.A.I.C.H. program and particularly to the talks on "Aluminum and Silicosis" for which we had tentatively selected Doctors Irwin and Hannon.

There is considerable food for thought in what Dr. Sanders has said and I wish you would give me your valuable opinion and recommendations in this connection.

If the April meeting is not cancelled in line with Dr. Byrnes' request and if it is decided not to invite Irwin and Hannon to participate in the program, I would like to have your suggestions as to other subjects and speakers for the program.

Very truly yours,

H. H. Newquist, M.D.

HRN-JH

cc - Dr. Frederick W. Globe
Dr. C. C. Washington
Mr. Warren Cook
Dr. Robert A. Kenoe ✓

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C. A. BANDER, M.D.
710 North Plankinton Ave.
Milwaukee 3, Wisconsin

December 27, 1944

Dr. A. N. Newquist
The Texas Co.
135 E. 42nd Street
New York, N.Y.

Dear Doctor Newquist:

My only comment on the A.A.I.P.S. program is on the aluminum therapy talks by Irwin and Hannon. I have followed their work very closely, have visited several of their clinics and have just recently been given permission by them to treat a few silicosis cases on a purely research basis.

The fact of the matter is that the value of aluminum in silicosis cases having symptoms still is obscure and unproved. Roy Gardner's cases show this and Roy so stated quite positively at the A.A.I.P.S. meeting in St. Louis last May. Yet, Irwin and Hannon are selling the treatment to industry as a proven effective agent and are recommending it without qualification to all industries having a silicosis hazard. Every time they are asked to appear on a medical program, they jump at the opportunity because the implied endorsement adds prestige to their therapy. They definitely "jumped the gun" on their nation-wide publicity last year. The unions in several industries, especially the ceramic, now are demanding that aluminum therapy be installed. Plant executives in those industries are proceeding with the treatment because they consider it "good labor relations."

We had Roy Gardner's excellent discussion of this problem last year, which was truly scientific, whereas some of the results expressed by Irwin and Hannon are on a very doubtful scientific basis. If they have been asked to appear on the program, there probably is nothing that should be done about it. If they have not been asked, I suggest that you reconsider the idea and even write Roy Gardner for his opinion. I might add that Irwin and Hannon never have been on the Industrial Hygiene Foundation programs for the reasons I have given.

I believe that aluminum as a preventative may have a place in a few industries with silica hazards which are difficult to control, but the vast majority of dust trades can reduce the dust dissemination to safe limits by proper ventilation. The aluminum set-up in such plants unquestionably will cause a lessening of efforts to control the dust. Also, I am very doubtful that any real benefit results in the treatment of actual cases, beyond the psychic effect of something being done for them. That is my belief at this time and until more scientific proof is available, which we have not had from Irwin and Hannon.

I should appreciate your considering my remarks as more or less confidential and hope I have made my objections clear. By having them on the program we are fostering an as yet unproven commercial enterprise which will require many more years of clinical research before anyone should be asked to buy it.

The rest of the program looks fine. If I can be of any help in further developing the program, please call on me.

SINCERELY YOURS,

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