

July 15, 1936

Dr. Graham Edgar
Ethyl Gasoline Corporation
Chrysler Building
New York City
New York

Dear Dr. Edgar:

I have your letter of June 6th enclosing correspondence concerning the case of alleged lead poisoning in Lawrence, Kansas. No doubt you have Dr. Sanders' reply of June 9th.

Yesterday I called Dr. Jones and after some conversation with him, found that he was very skeptical of any influence which lead may have played, and quite open to conviction that lead was in no sense responsible for this man's illness. I sent him some of the literature on the subject and offered to carry out analyses which would determine the question of lead exposure, if he felt it desirable. I think this will conclude the case from the point of view of the physician.

I am attaching herewith a letter written to Mr. Spees of the City Service Oil Company in regard to the matter, as well as a copy of my letter to Mr. Berg.

Very truly yours,

RAK:ls

Robert A. Kehoe, M.D.

RE 0021884

July 15, 1936

Mr. H. R. Berg
Ethyl Gasoline Corporation
1917 Buchanan Street
North Kansas City
Missouri

Dear Mr. Berg:

I enclose herewith copy
[REDACTED] Mr. Spies in relation to the case of
[REDACTED] Lawrence, Kansas. I believe the letter
itself is self-explanatory and that no further action
will be required. If any further developments come to
your attention, please forward the information to me.

Very truly yours,

RAM:is

Robert A. Rohrer, H.D.

cc Dr. Edgar

KE 0021885

July 15, 1936

Dr. H. Penfield Jones
Lawrence
Kansas

Dear Dr. Jones:

I am fulfilling the promise made in our telephone conversation of yesterday by sending you a series of articles which have to do with the problem of lead absorption in relation to leaded gasoline, as well as an article of my associate's on gasoline dermatitis which I think will be of considerable interest to you.

I call your attention specifically to the discussion and the citation of all the literature on the subject of Ethyl Gasoline in an article entitled "An Appraisal of the Lead Hazards Associated with the Distribution and Use of Gasoline Containing Tetraethyl Lead - Part I" which was published in the Journal of Industrial Hygiene in March 1934. An article on the same subject - Part II - gives rather crucial evidence, I believe, of the lack of lead exposure associated with the handling of gasoline at filling stations.

I think I need say no more than is discussed in these articles other than to repeat to you what I said in our telephone conversation. Lead in gasoline has been in continuous distribution in this city and in a few neighboring cities since 1924. We have had occasion to study a number of men under conditions of exposure during this entire period, and as you can well see from the articles, we have investigated this subject over a wide area. Not only have there been no cases of lead poisoning in any of the men whom we have seen, but there have been no evidences of lead absorption as shown by an elevated lead excretion. It is my honest opinion that the handling of leaded gasoline is not more dangerous from the point of view of lead absorption than is the handling of any other type of gasoline. You will perhaps realize that in this country and in foreign countries there must be at least half a million people engaged in occupations in which they have more or less continuous exposure to leaded gasoline. The absence of lead poisoning over a period of now more than ten years can not be regarded as fortuitous therefore.

KE 0021886

Dr. Penfield Jones

In looking over the record of your physical examination, I can not see any evidence indicative of lead absorption. I am, therefore, constrained to feel that your case was one of more or less characteristic gasoline dermatitis with recurrence on recurrent exposure. As to the x-ray findings in the bones, I think you are quite safe in disregarding these as evidence of lead absorption since even in the hands of experimental workers on subjects with known lead exposure, it has not been found possible to demonstrate radiographic evidence of lead absorption in the skeletons of adults. X-ray findings among children are very useful and very significant, but this is not the case in adults.

Despite what I have said above, if you are still convinced that there were some evidences of lead absorption in the case of this man, I should be glad if you would say so, in which case we can investigate the facts further by a study of your patient's lead excretion. If you should wish to have certain analyses made, let me know at once and I will send you the necessary containers for obtaining samples.

Very truly yours,

RAK:is

Robert A. Kehoe, M.D.

C O P Y

July 15, 1936

Mr. Warren T. Spies
City Service Oil Company
Chicago, Illinois

Dear Mr. Spies:

Your letter of June 30th addressed to the Ethyl Gasoline Corporation, 310 South Michigan Avenue, concerning the illness of one Mr. [REDACTED] of Lawrence, Kansas, has been referred to me for reply.

You are doubtless aware of the fact that contact with gasoline on the part of persons with susceptible skin may result in the production of a dermatitis. After examining the report of Dr. Jones on this patient, it seemed rather apparent to me that Mr. [REDACTED] was suffering from such a gasoline dermatitis. There was nothing in the picture to indicate lead absorption, and moreover, skin irritations are in no sense of the word characteristic of injury due to lead. In view of the essentially negative clinical findings, I called Dr. Jones on the telephone and discussed the case with him, pointing out the lack of evidence of lead absorption and expressing my own opinion that the x-ray findings in adults are entirely without meaning from the point of view of lead absorption. I found Dr. Jones rather skeptical of the significance of lead in this case, and I believe my conversation left him convinced that lead was in no sense to be blamed. I have taken the trouble to send him some of the literature on the subject which discusses the points of interest in connection with cases of this type, and I expect to hear from him as to his final conclusions in the matter. I feel quite certain that Dr. Jones will conclude that lead poisoning is not a factor in this man's illness and I trust that this action will bring this case to a conclusion. If there are any further questions which I can answer in the matter, I shall be glad to do so.

Very truly yours,

RAK:is

Robert A. Kehoe, M.D.

KE 0021888

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