

JAMES H. BIRNBAUM, M.D.
42 WALL STREET
UNION SQUARE, NEW YORK 10
APRIL 10, 1953

Att. Mr. Guddi,
Diamond Alkali Co.,
80 Lister Avenue,
Newark, N.J.

Dear Mr. Guddi:

The following is a report of my conference with Dr. Donald Birmingham, who is Chief of the Dermatologic Section of the Division of Industrial Hygiene of the U. S. Public Health Service. First of all, Dr. Birmingham was very much impressed with the diagnostic job which we have done and I told him that much of this was due to your cooperation and your willingness to go along with tests, etc. I shall try to repeat the gist of the conversation just about as it took place.

Dr. Birmingham noted the fact that the Monsanto Chemical Co. had had a previous episode of chloracne where 100% of the working staff were involved in their West Virginia plant. This occurred in 1952 and at that time Dr. Birmingham was called in and advised that the plant be re-engineered from scratch and this is exactly what happened. I asked him then about the possibility of establishing some rapport among the medical departments of the various companies manufacturing similar or identical chemicals and he felt that there was no chance of this taking place. He could not explain why.

We then came down to the specifics of our present problem at Diamond, and Dr. Birmingham stated that he was willing, if it could be cleared with the Health Department of the State of N. J., who apparently are very touchy about states' rights, to come in to our plant with a team of engineers, and do various samplings and spectroscopic examinations of atmosphere to try to determine where the offending chemical is most prevalent in the plant, and to try to determine such were exactly what its nature is.

As regards the present cases, he advises that every man in the plant be subjected to a similar series of urine tests as were done on the original five. He strongly advises that all men who have shown porphyria in the urine up to the present time, who are four in number, be hospitalized. I asked him whether the tests could not be done on an ambulatory basis, and he said he felt hospitalization would be preferable because then the alcoholic consumption of the men could be controlled. He feels very strongly that alcohol may be the synergistic cause with industrial exposure in the production of overt signs and symptoms of porphyria. He goes on to suggest

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that the men be kept in the hospital for a period of 7 to 14 days and that at the end of that time a liver profile be repeated on them. This would at least give us an exploratory idea of how reversible the situation is in each case.

In this same mail I am writing a letter to Dr. Birmingham asking him if he is willing to make this survey, since he needs this for his superiors. The serious question which remains in his mind is the question of irreparable liver damage; if this is indeed the case, we are faced with a very serious situation.

We then discussed alternatives. The alternative suggested by me was that we take one man at a time, but Dr. Birmingham pointed out that by the time we got to the second man the "panic button" would be pushed, so to speak, and this would delay our finding out the very important and basic question of reversibility of this process.

As regards a case like Dale Renner, who has been out of the plant for at least five years to my best knowledge, I would like to point out to you that in the May 1961 issue of the Archives of Dermatology, a definite relationship between porphyria and diabetes is set up. The authors postulate that the diabetes is caused by the deposition of iron pigments from incompletely metabolized hemoglobin in the pancreas. Therefore it would be well to test each and every one of the involved individuals with a glucose tolerance test to make sure there is no early onset of diabetes.

From a personal point of view, I would urge that this matter be taken up at once with your main office, especially with the chief medical officer of the company, so that we may get to the root of this thing with all possible speed.

Very truly yours,

James Blumenthal
 JAMES BLUMENTHAL, M.D.

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