Hovember 25, 1968

Mr. R. A. Guidi - Cleveland

Mr. R. Chonoles - Hewark

Attached is a letter I have received from Dr. Poland of the United States Public Health Service, as well as a copy of a Permission Statement which would be required prior to checking individuals. Please note in Dr. Poland's letter that he requests an invitation to visit the Newark Plant. Attached you will also find language which I feel might be satisfactory to the Company along these lines. Relating to the individual's Permission Statement, Dr. Poland also wishes to photograph employees at Newark, for Health Service records. This would have to be added to the Permission Statement.

With regard to the study of diabetes, I have discussed the problem of glucose challenge with both Drs. Bleiberg and Poland, and it might be possible to indicate to the employees at what time the meal or Glucola' should be taken. We might also consider supplying that meal, which Dr. Bleiberg feels might consist of one or two cheese sandwiches, so as to avoid an individual having a high fat meal or high protein meal, thereby throwing off some section of the blood studies. The alternate might be to give the oral dose of Glucola's as a substitute for the meal.

Dr. Poland has discussed the psychological symptoms mentioned in the German literature with Atlanta people, and feels administration of the linnesota Multiphasic Personality Inventory would be fruitful. It would allow for either agreement or disagreement with the German findings as related to the people at this Plant. Suggestions were made that a test not exceeding 400 questions would permit a profile to be obtained, which would be realistic. The test could be performed in the Plant at lunch time, or taken home.

Please let me know if there is objection to the administration of this Inventory. It would present some difficulty in selling to the Union, since historically, Unions are against testing of their people.

RC/nc

R. CHONCLES

Attachments

ec: Dr. R. W. McBurney

DS 00007017



DEPARTMENT OF HEALTH, EDUCATION AND WELFARE PUBLIC HEALTH SERVICE

November 20, 1968

COMMUNICABLE DISEASE CENTER ATLANTA, GEORGIA 30333 TELEPIONE (404) 633-3311

> Mr. Robert Chonoles Diamond Shamrock Chemical Corporation 80 Lister Avenue Newark, New Jersey 07015

Dear Mr. Chonoles:

I am writing to summarize the items we have discussed in recent telephone conversations.

First, my superiors in the USPHS, suggest that I should have a written contract with Diamond Shamrock (a signed letter is sufficient) stating that you invited us to conduct a health survey in your Newark factory. Explicit in the letter should probably be something to the effect that the corporation has final editorship over any report we release and with these revision and censorship powers you will allow publication of any results that we feel are significant.

Secondly, I think we should have all the workers participating in the study sign a volunteer consent slip of some type. I am enclosing a copy of one I suggest.

Thirdly, one of the most important correlations with porphyria cutanea tarda is diabetes mellitus. I think we should perform a blood glucose determination after a glucose challenge. The latter can be a meal, but because of the staggered work shifts, it might be best to give a palatable oral dose of glucose such as Glucola^R.

Finally, we would like to access or disprove the many psychologic symptoms the German literature ascribes to chlorinated phenols. Perhaps the most impartial and unbiased accessment of this would be a multiphasic personality test, a short standard computerized form. I am enclosing a copy of the MMPI.

I am looking forward to hearing from you about these suggestions. Please feel free to contact me if any questions arise.

Alan P. Poland, M.D. Toxicology Laboratory Pesticides Program

DS 00007018

Permission Statement

I understand the U.S. Public Health Service is conducting an industrial survey concerning the general health of the workers in the Diamond Shamrock factory. The purpose of this survey has been explained to me by the management and the USPHS physicians. I do do not voluntarily consent to undergo a medical history physical examination and submit to the requested blood and urine sample collections. I further understand any medical conditions discovered during this survey will be conveyed to the plant physician for further investigation and/or treatment.

Signatur	e	· · · · · · · · · · · · · · · · · · ·
Date		

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