

R CAVALLI
CHEVRON RESEARCH
RICHMOND

VIA WUI*

CHEVRON RCMD

152-31
pg emetic

669095

ICIPHARM

26.10.76

CHEVION CHEMS USA

DR R D CAVALLI

CC DR A CALDERBANK JEALOTTS HILL

CC DR SLADE P PICT FERNHURST

CC MR BARRETT ICI USA

CC DR D M FOULKES JEALOTTS HILL

1. CLINICAL DATA ON 796 IS CERTAINLY WEAK. HOWEVER OUR MEDICAL ADVISORS HAVE STATED THAT A VOLUNTEER STUDY IS NOT FEASIBLE FOR ETHICAL REASONS. EFFECTS OF COMPOUND AT DOSES ABOVE 2MG ARE MOST UNPLEASANT ALTHOUGH NOT THOUGHT TO BE TOXICOLOGICALLY SERIOUS.

IF A STUDY WERE POSSIBLE, IT WOULD HAVE TO BE VERY CAREFULLY CONTROLLED, MEDICALLY SUPERVISED AND CARRIED OUT IN HOSPITAL, STARTING AT 2 MG DOSE LEVEL. I SUPPORT THE IDEA OF SUCH A STUDY TO PROVIDE HARD DATA BUT THIS IS NOT ETHICALLY POSSIBLE IN THE UK. ANY POSSIBILITY OF DOING IT IN USA? IN THE ABSENCE OF HARD EVIDENCE, I HAVE PRODUCED A DRAFT REPORT MAKING THE CASE FOR ADDITION AT 5MG IN 10ML (CTL/R390) COPIES OF WHICH HAVE BEEN SENT TO OSPENSON BY POST AND BY DIRECT TRANSMISSION VIA WILMINGTON. WE BELIEVE THIS CASE ADEQUATE FOR PROPOSED EUROPEAN REGISTRATION. COMMENTS?

2. CASE BH.116/76 IS UNDER INVESTIGATION THE CONCENTRATION OF SPRAY SOLUTION USED WAS EXTREMELY HIGH. THE MIXTURE BEING 1 LITRE GRAMOXON, 1 LITRE REGLONE, 1 LITRE MICRONAL PLUS 5 LITRES WATER A MOST UNUSUAL BLEND. THE KNAPSACK SPRAYER LEAKED ON TO WORKERS BACK RESULTING IN A LARGE BURN BUT SPRAYING APPARENTLY CONTINUED. WE HAVE NO INFORMATION ON TREATMENT EXCEPT DIAGNOSIS WAS T.B. UNTIL 7 DAYS BEFORE DEATH (A TOTAL OF APPROX. 4 WEEKS ELAPSED FROM START OF SPRAYING TO DEATH). OXYGEN MAY WELL HAVE BEEN GIVEN. WILL SEND MORE INFORMATION WHEN AVAILABLE.

DR ROSE

AVLONTEX MACCLESFIELD

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reply & also acknowledge receipt of his report - N/S to call PPD Braum to confirm.

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