



Standard Oil Company of California

225 Bush Street, San Francisco, CA 94104

Tony Lane Whitaker
- do we have 22 DEC 1976
any more info? 4703

J. A. Spence, PhD
Manager
Environmental Health & Toxicology
Safety and Health Division
Personnel Department

John
2) Lewis Smith

November 11, 1976

M. S. Rose, Ph.D.
Imperial Chemical Industries, Ltd.
Central Toxicology Laboratory
Alderley Park
Nr. Macclesfield Cheshire
SK10 4TJ
ENGLAND

Dear Mike:

Thank you for your prompt response regarding the emetic. I have advised Nils that the last arguments will be sufficient to send to EPA with our first submission. However, I do feel that they may well request further work and that demonstration of the dose/effect relationship of PP 796 as an emetic in man may be asked for.

The following "Paraquat Poisoning Incidents" from the "Garden Club News" are of interest and any further information you could supply would be of interest: BH 119/76, BH 120/76, BH 121/76, BH 124/76, and BH 242/75. If details on BH 121/76 and 120/76 are available, we would like to inform EPA about these cases, with respect for the identity of the victims, of course. I would also be especially interested in the duration of the clay treatment in cases BH 119/76 and BH 242/75. }

As you know, recently a middle-aged Japanese, Mr. Shiroma, died following paraquat ingestion despite treatment. Jon Ford discussed this case with the decedent's family and learned that he had been a heavy drinker since World War II. The entire week prior to his ingestion of paraquat he had been on an alcoholic debauch. (Jon's report is being sent to you under separate cover). This may account for the severity of his hepatic injury, which is believed to be the cause of death. Autopsy reports and hospital records are not yet available, but have been arranged for. Interestingly enough, Dr. Bernstein said that Shiroma's initial liver function tests were normal and did not become abnormal until the second day. Perhaps when all records are available we will be able to sort this out.

Please thank Lewis for his prompt response to my solicitation of comments on our paper. I have taken his suggestion about the binding, but am not in a position to do much about the oxygen business. Although I personally agree that we should be cautious about the use of low FiO₂ for the reasons you gave, there is strong clinical feeling in this country that it is a good idea. Fisher encouraged Bay in its use, and I tried to minimize its importance as best I could. I await the results of your continued research.

One last matter - has any progress been made on the problem of studying the hematologic effects of paraquat?

Practice your tennis, as our weather usually permits outdoor play in the spring.

With personal regards,



Richard D. Cavalli
Staff Product Toxicologist

cc: Dr. A. L. Calderbank