



THE GEORGE WASHINGTON UNIVERSITY

Department of Otolaryngologic Surgery

14 April 1968

2529 I Street, N.W.  
Washington, D.C. 20037

*P.S. Why don't you communicate this to the info. of OTC, and to the Poison Control Center Clearinghouse of PHS?*

*J-L*

Dr. Joshua Lederberg  
c/o The Washington Post  
Washington, D.C.

Dear Dr. Lederberg:

I was interested in your article appearing in the Washington Post on 13 April 1968 concerning mace and its relation to tear gas.

I am enclosing a reprint that may interest you. You will note that the solvent triethanolamine is effective in removing tear gas and has been widely used in industry. We have also found by using tissue toxicity tests in animals that it is not toxic locally to tissue. Greater emphasis of its use in contaminated individuals should probably be given.

Sincerely,

*John P. Adams*  
John P. Adams, M.D.  
Professor and Chairman

JPA:c

Prof. J. Lederberg  
Department of Genetics  
School of Medicine  
Stanford University  
Palo Alto, California

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Thank you for the reprint. (My literature assistant had, in fact, just dug up the title.) I am still trying to find some responsible investigation of the pharmacology of chloroacetophenone; not with much success, so far. Dr. Kalman (in Pharmacology here) thinks it may have a systemic (parasympathetic?) action, e.g., for lacrimation; the local irritation would be an incidental byproduct, and, indeed, safer compounds might be found. If you have found any reports bearing on this question, I would be delighted to know.

SCHOOL OF MEDICINE UNIVERSITY HOSPITAL 900 23RD STREET, N.W. WASHINGTON, D.C. 20037

APR 18 1968

*sincerely*  
*Joshua Lederberg*

*J.P. ADAMS*