3. Patient responded to MER/29 therapy. Reduced from 600 mg/% to less than 400 mg/%. Plaques were reduced. Before adjusting diet, etc. as high as 1,400 mg.
4. MER/29 dosage range:
   June & July 1960—1 cap daily
   Aug 1960—2 caps daily
   Sept. Oct. Nov—1 cap daily
   Dec taken off MER/29 when severe dermatitis and hair change occurred
5. Symptoms since December, 1960:
   1. Dry, flaky alligator type skin ichthyosis type with secondary infection, then yeast, mold, monilial type in crotch and inner thighs (before antibiotic
   2. Loss of scalp hair
   3. Hair color change from dark brown to light blond, also eyebrows, etc.
   4. Loss of libido
   5. Skin condition such that patient finds it almost impossible to move to move around and carry out usual work, etc.
6. Patient referred to Dr. Herman Schultz who happened to have two more patients whose dermatitis may have been touched off by MER/29. These two patients are profiled on attached forms.
7. Dr. G. had office call all important drug stores to not to fill or refill his MER/29 Rx until further notice.

On Tuesday, February 7, 1961, I suggested to Dr. G. that he call Dr. McMaster or other doctors at Merrell to report this seemingly severe dermatitis and hair problem that may or may not have been caused by MER/29.

[Inter-Department Memo, Feb. 13, 1961]

To: Department of Medical Research.
From: Wm. J. Phelan, #48727, Houston, Texas.
Subject: MER/29 Patient Report of Dr. Kaplan.

1. Age—69, Sex—M, retired
2. Diag. Prim:
   Chronic coronary insufficiency, rare anginal pain
   Elevated cholesterol
   One myocardial infarction seven years ago
3. MER/29 dosage:
   1 cap daily for only three weeks
4. Concurrent medication: Peritrate and nitroglycerin
5. Reason took off MER/29:
   1. Swelling in several places in skin of furuncle (boil) type
   2. Severe monilial mold type dermatitis in crotch and folds of arms and legs.

   Dr. K. reported that this patient had never had skin trouble before.
6. Patient was referred to Dr. Herman Schultz (Derm.) who told Dr. K. that he (Schultz) was presently treating two more patients whose severe dermatitis may have been caused by MER/29.
7. Dr. Schultz presented to Dr. K. an opinion that the sharp drop of chol. brought about by MER/29 may disrupt the fatty protective film of normal skin and leave the skin susceptible to many infections. This opinion was disputed by Dr. Glantzberg. Dr. G.'s patient was in somewhat the same difficulty and still had around 400 mg/% and had been on MER/29 for some six months.
8. At this point Dr. Kaplan also learned of the dentist being treated by Dr. Schultz (referred to him by Dr. Salinger) as "being close to death" in a hospital and had his office telephone all important drug stores to stop filling and refilling his MER/29 Rx until further notice.
9. Having spotted this note from Dr. K. in two different drug stores on Friday I called for and got an appointment to see him today and promised him that I would (or Cincinnati would) keep him informed of any similar severe dermatitis possibly caused by MER/29. Dr. K. told me that Dr. Julian Fractman (one of my pre-marketing men) was also concerned of this.