

CORRES-CHAPMAN



UNIVERSITY OF MINNESOTA
TWIN CITIES

Laboratory of Physiological Hygiene
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March 26, 1980

Carleton B. Chapman, M.D.
President
The Commonwealth Fund
Harkness House
1 East Seventy-Fifth Street
New York, New York 10021

Dear Carlton:

I have belatedly read your fine forward to Ancel's opus. It is splendid. You're quite right that Ancel's book raises more questions than it answers and that is the nature of good science.

I was just a bit disappointed to see the emotional words "evangelical hysteria" and follow-up: "who would have us believe that if a person eliminates all suspected risk factors. . . ." I like to see evangelists and faddists clearly separated from those who are involved and responsible for sound public health recommendations, on the best available evidence. An academic attitude exists which encourages no intelligent action and labels all action as evangelical. The real implications of Seven Countries results, I feel, are societal risk and the evidence of maximal exhibition of inherent susceptibility in an unfavorable environment (and vice versa). Distinguished scientists often take no public health stances, clinging to the luxury of indecision in the permanent absence of "final experimental proof". I suspect this has something to do with current problems of the academic community, problems of the National Institutes of Health--right now taking a hard line on "nothing but the basics", and failures of the science and health professions to lead in prevention of disease and the promotion of health. Enough of this sermon!

Somewhat to our surprise, the telephone book of an application I sent you a couple of years ago, after considerable tightening and the bringing together of many schools and disciplines on this campus, has been approved by NIH. We are simply waiting now to see the effect of the budget constraints. I hope such systematic, prudent attempts to get communities to face and organize their health concerns is not in your purview of "evangelical hysteria". Bogeymen should always be explicitly identified!

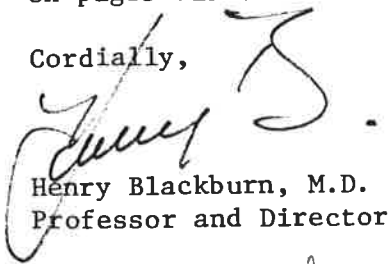
Carlton B. Chapman, M.D.
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I have, until this recent news, had delicious plans for a scholarly visit this summer to the caves of South Africa and Leakey's digs in Kenya and Ethiopia, now out the window. I've been having a good time the last couple of years summarizing for medical audiences what is now known and deduced about the diet and physical activity of early man, during major evolutionary stages. But this community prevention program will require all energies in the next period.

We are hoping that the design of the demonstration, in sequential town pairs, will increase the power of the project to detect change, by combining repetition, simultaneous controls and standard person years analyses, enabling us to say something firm about the effects of systematic health education and community organization.

Finally, I thought you might be interested by the enclosed which I believe should have a wider audience than the readers of Preventive Medicine. It represents the rather remarkable, and quite independent, deliberations of the lipid-disease evidence by groups of distinguished experimental pathologists, clinical investigators and epidemiologists who separately arrived, almost on the nose, at similar conclusions about optimal means and distributions of blood lipid levels for whole populations. My discussion on the nature of the lipid-CHD relationship is on page 668, the epidemiological evidence summary is on pages 612-618, the clinical investigators 711-714 and the experimental pathologists on pages 715-719.

Cordially,



Henry Blackburn, M.D.
Professor and Director

HB:mb

encl.

Prev. Med. Monograph

CORPES - CHAPMAN

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CARLETON B. CHAPMAN, M.D.
PRESIDENT

31 March 1980

Henry Blackburn, M.D.
Professor and Director
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*no connect.
pc 1467*

Dear Henry:

Hold up a minute! My targets--as I'd think you should know--are the many YMCA types (and others) who say that if you run 3 miles a day, 5x a week, you'll add 10 years to your life span; or will never have a myocardial infarct. These are not supportable claims. The reasons for exercising regularly are overwhelmingly plus, and there's nothing but harm to come from evangelical flag-waving and citing evidence that's not evidence.

It all puts me in mind of teatime discussions at Lab Physiol Hyg (I never did like the name) in the late forties and early fifties. I also recall getting into mucho hot water with the Board of Regents U. Texas for going on national TV when Johnson was running against Goldwater. The Texas right-wingers were saying that a vote for Lyndon was a vote for Hubert because 99 per cent of people who have had infarcts are dead within 10 years. Lyndon's bout was, as I recall, 8 years earlier. It was, of course, mallarkey. I cited the VA study which showed that if one recovers from an infarct, has normal ECG and remains symptom-free, his outlook becomes the same as that for those in his age-sex group who've had no infarcts at all. The Regents wanted to fire me but Lyndon asked me to dinner at la maison blanche.

Seriously, the opus so doggedly pursued by Ancel and you others is a magnificent baseline and a prototype of biomedical research on homo sapiens from now on in. It was I who insisted that it be put together in a book and not relegated, piecemeal, to Circ Research.

True, I may be a bit off base because I've not kept up with the field. But I've got to get back on base: this summer I plan to write an "elder statesman" type book on the plight of the male careerist, aged 55-65. I'll begin with the risk factors, in ardent sensible support but not evangelical,

citing critical authors, then will turn, in a heavily anti-analytic section, to depression. The upshot of that section will be that the natural history of depression is to get better. I know! I was in it for 3 years with virtually no relief; but now even Jimmy Carter's ineptitude no longer makes me think of suicide.

As for do-nothing academics, I'm in absolute agreement with you; but I'm not one of them and never was. The last tilt I had with that breed was with Bob Hutchens.

So don't write me off and know that my shotgun blast wasn't meant to belabor you. My intent (as you must know) was and is to call attention to, and pay infinite respect to, a massive piece of honest and imaginative work that, by its very nature, won't be fully appreciated for 20-25 years. Maybe you'll all get Nobels either posthumously or when you're senile.

Thanks for your suggestion: I'll name my bogeymen; but you, lad, shouldn't lead with your chin.

From July 1980 to circa 1985, I'm back into academic harness: I'll be Professor of Science and Medicine (or something like that) at Albert Einstein and Yeshiva.

Warmly,



Carleton B. Chapman, M.D.

CBC:srp



UNIVERSITY OF MINNESOTA
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April 8, 1980

CONFIDENTIAL

Carleton B. Chapman, M.D.
President
The Commonwealth Fund
Harkness House
1 East Seventy Fifth Street
New York, New York 10021

Dear Carl:

I am grateful for your thoroughgoing and vigorous reply. Indeed one should not lead with the chin, especially if its glass. The Anatomy of Depression is crucial to understand. I never conceived what it was until last year my fine lad, aged 27, developed a cerebellar medulloblastoma. Anxiety and depression together approached madness.

Congratulations on your return to Academic Halls.

Regards,

Henry Blackburn, M.D.
Professor and Director

HB:mb