UNIVERSITY OF MINNESOTA

file copy

Multiple Risk Factor Intervention Trial Clinical Center Laboratory of Physiological Hygiene School of Public Health Stadium Gate 27 Minneapolis, Minnesota 55455 (612) 373-3586

September 5, 1975

Mr. Carl W. Kraening 3539 Vincent Avenue South Minneapolis, MN 55412

Dear Mr. Kraening:

Through Audrey Malmgren, our screening clinic visit technician, I learned of your curiosity about our programs and your interest in preventive medicine. I am taking the liberty of sending you copies of some of our thinking on this issue. We agree with you that the only way to go, in the costly, spiraling, technological monstrosity of modern medicine, is to seek cost-effective ways of reducing disability and premature deaths.

Because of the particular politics of the relationships between individual parts of the university and administration we have never directly approached legislators or the legislature, nor has the School of Public Health, of which we are a department. However, we have occasional contacts with individual legislators and would welcome a visit from you. Mr. John Arlandson went through our laboratory this week and also received one of our second level screening examinations and an exercise stress test. We would welcome a visit from you and hope that we can arrange a discussion of the health matters of interest to you legislatively.

I am leaving tomorrow for a two week visit to the very exciting North Karelia project that you may have seen on NBC National News on September 3. Our laboratory is responsible for demonstrating that this area of Finland has the highest heart attack rate in the world and the people finally got tired of reading newspaper articles in their own country about their dubious record standing. Local leadership approached the Finnish Heart Association and the legislature for help on doing something about it and the whole province of 180,000 people, largely small towns and rural, is engaged in a multiple risk factor intervention program, with comparable goals to our program at this laboratory, and with a very exciting inleaders, women's organizations, public health nurses, volvement of opinion industry and agricultural participants. The neighboring province will serve as a comparison to determine whether they can turn around the severe disability from I would be happy to see you after September 21 heart attacks and strokes. entirely at your convenience.

Another area in which I am anxious that Minnesota take some leadership is to stimulate discussion between the scientific community, the agricultural enterprise and the food industry. We have too long worked at crossed purposes and in certain areas the picture is getting a little ugly with the active involvement of industries and parts of the economy that feel threatened, eg., by the idea that every body may not need more milk, or that more and more per capita consumption of fats, cigarettes, etc. may not be socially or medically desirable. I believe Minnesota would be the place to start a dialogue and I think it would be quite appropriate that legislators be involved in such a dialogue. I am now working with Vice President Hueg of the University to begin such a dialogue, probably this Fall, in a very quiet non-public manner, I hope without emotion and press releases. We feel here that we can all gain by talking to each other in a dispassionate and disinterested fashion.

I see that this letter may begin to strain your eyes. I assure you I do not talk as profusely as I write. If you have a personal or professional interest in this area, we would very much look forward to hearing from you.

Cordially yours,

Lucy Seeker

Henry Blackburn, M.D.

HB:jp enclosures - 2 Med open

pc: Audrey Malmgren Sean Stauffer