



UNIVERSITY OF MINNESOTA
TWIN CITIES

Laboratory of Physiological Hygiene
School of Public Health
Stadium Gate 27
611 Beacon Street S.E.
Minneapolis, Minnesota 55455

April 4, 1980

Dear Friends:

A Community Program to Prevent Heart Attacks and Strokes

As changes go in your life, we hope for the better, so changes go on in MRFIT and at the Laboratory. We've developed some new ideas. What is really needed to prevent first heart attacks and strokes? As individuals and families, we need to improve our health behavior and lower our risk factors. That is very important in middle years when we are found to be at high risk.

But equally or more important may be to get all people and community resources working in this direction. Changes to healthy behavior would be encouraged rather than discouraged in leisure, in work and in our social environment. Probably most important is that heart attack, stroke and cancer risk factors not get high in the first place! That means healthy behavior starting young. Thus, we look toward programs for youth as well as adults, and for the whole community.

The Laboratory with others across the University Campus, have been working five years now to develop an "ideal" community program. It would approach whole Minnesota communities with public education, professional education, community leadership and organization and enhance existing prevention facilities

Our proposal is to develop such a program in a systematic way in progressively larger Minnesota communities with rigorous evaluation of its effects. The idea and program were recently approved by the National Institutes of Health.

Change in MRFIT Staff Effort

In this new effort, you and MRFIT pioneered. Its result will be a significant proportion of professional effort of Dr. Blackburn and Dr. Mittelmark directed toward this new Minnesota Community Heart Attack Prevention Program.

In recognition of Dr. Richard Grimm's effective and devoted service over four years to MRFIT participants in the hypertension clinic, in researches related to MRFIT needs, and in national MRFIT policy and procedures, I am happy to appoint him Principal Investigator for MRFIT, replacing my title and much of Dr. Mittelmark's current responsibility. Dr. Richard Crow will remain Co-Principal Investigator with continued responsibility for your MRFIT annual examination. Dr. Mittelmark will remain parttime to help with organizational matters. I will remain simply a co-investigator, just to keep my finger in and to continue to have as much contact with you as possible. But the leadership responsibility now lies with Dr. Grimm as Principal and Drs. Crow and Mittelmark as Co-Principal Investigators.

MRFIT Newsletter
April 4, 1980
Page Two

Help me welcome Dr. Grimm to his new responsibilities. He will surely continue to encourage you to make the changes desirable for your health and for the successful outcome of MRFIT, this long and important study of heart attack prevention.

Cordially,

A handwritten signature in black ink, appearing to read 'H.B.', with a large, stylized flourish that loops around the letters.

Henry Blackburn, M.D.
Professor and Director

HB:mb