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Oglesby Paul, M.D. Northwestern Memorial Hospital 303 East Superior Street Chicago, IL 60611

Dear Oley.

Due to the exigencies of time and your necessarily firm hand in distributing the discussion at Kronberg, it was neither possible nor entirely appropriate to interject the enclosed short discussion in the Saturday morning session. I have forwarded copies of this to Dr. Greten and assume that you will be the final editor of that session. I will be interested to seewwhether you will allow the enclosed comments, as a contribution to that discussion.

Your comments helped me greatly understand some of the problems you have about a public stance of Dr. Stamler or myself and others. It is apparently a part of your basically conservative philosophy which is quite rightly concerned about government programs. You may be misinterpreting my consideration of the role of government in this in that I certainly want no more government prevention programs than do you. I do believe, though, that the government has a very important role in providing resources for the academic and private sector to develop and test preventive strategies in the mass. This, I believe, is our essential battle now with the academic community resenting the monies coming to preventive trials. It might be helpful if your attitude which obviously includes a desire to forward the preventive concerns, could be toward supporting the next generation of needed studies; that is, studies on how best to influence cultural, social and behavioral factors. Your Kronberg comments indicated that you saw this as a field of future and this is what we're really talking about. But these cannot be at the level of individual and small group interventions only. They need to be well designed community strategies with strong research evaluative components. We have almost no possibility of getting such programs funded, it seems to me, unless it can be within certain legislation on prevention and control or health education or demonstration centers in the Heart Act. I am personally quite concerned about the continued academic warfare in which clinical and basic investigators are attacking those of us carrying out investigations in prevention. This is totally unjustified and would disappear if there were line items in these legislations which clearly rendered these funds non-competitive with those for the other researches. The present situation has the scientific community, even the public health community, pitted against itself and it would be useful if your strong voice were to support these efforts. The present situation in NIH. If not independent, at least extra and earmarked monies.

Sincerely,

Henry Blackburn, M.D.

HB:jp enclosure

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