

NORTHWESTERN UNIVERSITY MEDICAL ASSOCIATES

222 East Superior Street, Chicago, Illinois 60611 (312) 649-6940

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Dr. Henry Blackburn
Multiple Risk Factor
Intervention Trial Clinical Center
Laboratory of Physiological Hygiene
School of Public Health
Stadium Gate 27
Minneapolis, Minnesota 55455

file correspondence

Dear Henry:

You were very kind to write on June 1st regarding your concerns as to the future funding of studies aimed at the prevention of atherosclerotic disease.

I agree with you that my stand in relation to the government is a basically conservative one. I am concerned when the professions become unduly dependent upon the government. On the one hand, we seem to constantly ask for money and on the other we similarly state that we do not wish control. With money must go control and in this sense I can realize that the legislators find themselves in a very difficult spot.

I am of course no way opposed to the governmental support of research and indeed recognize fully that the progress that has been made in cardiovascular disease since 1950 has been immeasurably contributed to by the wise investment of tax monies. I also agree with you that the next generation of studies must include a solid investigative effort to determine ways in which cultural, social, and behavioral factors can be influenced to achieve a true preventive effort. In other words you and I are I believe in entire agreement on this. My only concern and disagreement with you would be in the suggestion you have made for line items in legislation specifically earmarked for prevention programs and their research with the understanding that these line items would not be competitive with other research efforts. I personally do not like this for the following reasons.

The history of the lobbying that has been done in the past before the Committees of Congress by scientists would indicate that the individual that is persuasive and evangelistic gets the most money even though his cause may indeed not be the most worthy. Many years ago I saw Dr. Paul White and Dr. Sidney Farber each trying to persuade the same committee members that the money should go to their respective areas of interest. The same exists and is even more a problem today. Congress is not in a position to judge the scientific merits of the arguments presented to it.

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I am therefore basically in favor of a broadly supported research program with determinations as to specific allocations being made by expert committees having presumably expert competence.

Indeed it would be best if one did not even have the competition between institutes which now exists, but that is no longer possible.

I hope that you understand my views on this. I am also hopeful that your concerns as to the attacks being made on preventive efforts may be met by the continued educational job you and others are doing to let the scientific community know the importance of a truly scientifically based prevention program.

With kindest regards, and many thanks for writing

Sincerely,

Oglesby Paul, M.D. J. Roscoe Miller Professor of Medicine

OP:mg

