

UNIVERSITY OF Minnesota

SCHOOL OF PUBLIC HEALTH · LABORATORY OF PHYSIOLOGICAL HYGIENE
STADIUM GATE 27 · MINNEAPOLIS, MINNESOTA 55455

Rome - 13 October
1972;

Dear Henry:

I was glad to hear that you believe there will be time to finish the publication on physical activity and preventive trials. I reviewed some of the problems with Dick in Singapore - and now that some statistical help is on hand - we can clean up a couple of problems that have been delaying things.

The problem with Bacaner is that he is more interested in delayed mechanisms and their study than in giving excuse (or other environmental or behavior factors) a hard look. We have to maintain control of this work or Bacaner will diffuse the effort with time consuming investigations (which may be worthwhile) in other areas.

On the other hand, Al has an independent spirit which has to be guided. I prefer to have problems with this rather than with people who are not quite as likely to develop into bona fide independent investigators. I appreciate the assistance and advice you have given Dawson and am glad that you have given him a careful look at the problem -

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I suggest you paint the office door some color that fits in with the general scheme (of what I presume) contrasting color "leading". As for the inside of the office - I would like to see something of what is being done elsewhere in the labs before deciding - and I would also like to do an audit at the time since cleaning that office out is going to be a chore. albeit a useful one since I expect that I will toss a good many things out.

In writing the protocol, I hope you will give some thought to an exercise questionnaire. Clearly ~~the~~ voluntary changes in physical activity should be controlled and I would be of considerable interest to have a look at the lower end of the activity scale and its relationship to disease (CHD).

I appreciate your efforts to keep me informed. Previous will (I am sure) be a great help and there appears to be little question ~~but~~ ~~that he is competent~~ regarding his competence.

There was three swedes at the seminar and all them were fed up with Sweden ~~to~~ to the point of moving.

as ever

Hannay

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Jerry went over the print outs for Mr. FIT
on MM specific ECG's and their effect on the
upper 10% of risk. It looked to me as if you
might want to have a hand in reporting this
data for the pooling project. - Perhaps the failure
to concentrate cases in the upper 10% of risk
~~was simply~~ in the PPR was simply due to small
numbers - .