

HEALTH SERVICES RESEARCH CENTER  
(MRFIT CLINICAL CENTER)

4506 SOUTHEAST BELMONT STREET, PORTLAND, OREGON 97215, TELEPHONE (503) 233-5921

August 12, 1974

*pc intervention team*

Henry Blackburn, M.D.  
Lab of Physiological Hygiene  
Stadium Gate 27  
University of Minnesota  
Minneapolis, Minnesota 55455

Dear Henry,

Again very many thanks for the perfect blend of work and pleasure.

I am very impressed with your operation but as you asked me to criticise any and every aspect of what I saw I will do so--but I really feel I have no right to because results are what count and I hope our results will be as good as yours. Another problem, of course, is that your participants are different from ours--among whom college graduates are in a minority.

The first intervention being in a lecture theatre offered very little, if any, opportunity for the participants to meet each other or to start to get to know--rather than see--their health counselors, nutritionists, etc. I was astonished to note that the delicious cherries and cantaloupe slices were not finished, although I did my best!

The short time I spent in one of the later intervention groups makes me feel I can offer one suggestion which I am sure will help--have everybody sit round a table or an arrangement of tables; then people can lean forward as well as back and relieve some of the gluteal ischemia. Usually our participants have brought various things with them varying from cuttings from newspapers to beef terryaki and this gives them somewhere to put things. Also when we have our shopping exercises we put the cartons, samples, etc. on the tables.

I was surprised how little the participants spoke during the admittedly short time I was there, and it was almost as if they put their hands up to ask permission to talk--better or worse I know not--but different from the way we do it where our participants do most of the talking.

We have no uniforms of any sort--no white coats, etc. In fact, as far as clothes are concerned, you cannot tell participants from

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staff. The women in the staff are encouraged to wear the sort of clothes that do not disturb the blood pressure readings of the men.

Finally, I am sure that the Audio Visual <sup>Video-tape</sup> has helped us enormously, enabling one group to learn from another.

As far as the first and third screens I attended--I have no suggestions to offer.

I hereby extend an official invitation to you to visit our MRFIT facility--preferably after school is in and some snow has fallen.

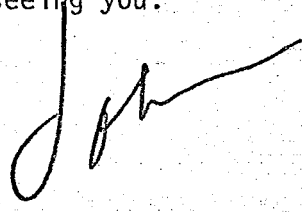
Please let all members of your staff know that I appreciated my visit, thanks to their helpfulness and pleasant attitude. Keep running. Greetings to Dr. Knappe. I hope he enjoys his stay in this country.

I hope you will put something together by way of suggestions to alter the present hypertension intervention program.

Thank you again for the professional and social pleasures--from 1st screen to 7th intervention--from Spaghetti L'emporium to Saint-Croix Matterhorn!

Best wishes and I look forward to seeing you.

John Wild, M.D.  
Project Director



JW/kmm

UNIVERSITY OF MINNESOTA  
TWIN CITIES

Laboratory of Physiological Hygiene  
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August 20, 1974

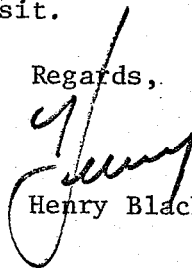
John Wild, M.D.  
Project Director  
MRFIT Clinical Center  
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4506 Southeast Belmont Street  
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Dear John:

Many thanks for your note and excellent suggestions. We will be able to use them. Your impression of our "other sessions" wasn't typical. We actually have a great deal of participation in all but the Orientation. On the other hand, and again we are all speaking without data, I am not impressed that a lot of chit-chat and ventilation does much. But we are working toward more participation, self teaching and testing.

It was delightful to have your visit.

Regards,



Henry Blackburn, M.D.

HB:jp