

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

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In regard to relatives. I suppose we had best see what we make of the brethess and fathers and sons before deciding whether it is worthwhile to make a special effort to find out about cousins, etc. But for the analysis we need to have here the data on the brothers.

All that is required is a list of the serial numbers of all sets of brothers; the computer will then be programed to sort the cards and run the correlations etc. This will be done for the 1/60 data as soon as I get the list of numbers. I am seading a copy of this letter to Andy; perhaps you can check to see that the list is sant here soon.

Henry Blackburn has just written you about the deaths. The total of only It death in 5 years among the men 40-59 in 1960 is extraordinarily low. Since there were just 678 men of those ages in the original cohort, this means a total 5-year death rate of 16.2 per 1000. In comparison, the 5-year death rate of our U.S. valiroad men of the same age is 55.3 per 1000, half from heart disease. Have all 678 Cretans been accounted for? This is important. If we can just onthe all figures, there will be a powerful argument for support of more study on this population with so good a second for heart disease and total mortality.

About the third serum spots, unless you need them for something else, send them here. We may be able to do uric acid (we are checking the method on dried spots) or we could use some to check values after long storage.

I had heard about the symposium in Athens scheduled for May 30 - June 2, 1966. The problem is that I have agreed to go to Norway in late March, I must be on hand for Corfu (August-September?), and the New Delhi Congress is at the end of October. Finally, Dr. Ludd is arranging a symposium in Prague for May.

Janes Laye, Director

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If the Prague meeting is close to but not coincident with the dates for Athens, I maight try to do both; otherwise I really should not try to do either because of the travel cost. If I attend I might plan to present some data from the other areas to compare with those of Crete and Corfu.

In any case, I think it would be a good idea for you to give a report at the Athens meeting, simply giving the data on prevalence in Grete and Corfu in the initial examinations, the results of the 5-year follow-up in Grete, and the total deaths in Corfu for 4 years, i.e. up to October, 1965. A trip to Corfu to check deaths is needed about now anyway but for the Athens meeting it would be essential to make sure that all deaths are known through 4 years.

As noted above, the Grete cohort aged 40-59 in 1960 numbered 678. I am told that this August-September 765 men were examined. We expect to have all the Deck I data for Grete 1965 on punch cards by the first week in December and then we shall quickly see what men were not seen and shall send you the serial numbers so that efforts can start to learn something about those missed—dead, refused, known to be alive but not in Grete, address and dead-or-alive status unknown.

These data will be essential for your and my progress reports to U.S.P.H.S., and for your application for renewal which I suppose should be prepared before too long. On the renewal, I suggest that basic needs would include

- 1) Enough follow-up to know all deaths, and their causes, each year in both Grete and Corfu
- Z) Ten-year re-examinations in 1970 and 171;
- I auggest two surveys in each area to be done sometime in 1967. '68. Actually, I auggest two surveys in each area to be done sometime in 1967. '69. But I think we might be able to do without all the food collection and analysis and use only the I-day records of everything eaten and drunk (except water) on each of 25-30 man on each occasion. When the time comes we'll make every effort to provide personnel to help in the field.

If I cannot be in Athens for the meeting, I'll see if I can visit you for a few days in April. In the meantime, best regards to all.

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Ancel Keys, Director