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Dr. Gilles R. Dagenais

President

4th International Conference on Preventive Cardiology

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**CANADA** 

Dear Gilles:

Congratulations on your initiative in getting the program started for Montreal 1997. Of course I would be pleased to be a member of the scientific program committee. I have only a few preliminary comments about the outline of topics, which I find excellent and comprehensive.

For children and youth, Ron Lauer probably has the most balanced view of the question of screening in children.

On the epidemiology of cardiovascular disease is Russell Luepker, the new principal investigator of the Minnesota Heart Survey would address in an appropriate way your topic "Decline in CVD mortality: reduction in incidence or fatality."

On community-based prevention studies, in my view, the soundest expert in issues of design, who is also capable of a very clear presentation to the medical audience, is David Murray of the Minnesota Heart Health Program, whose presentation in Oslo on this issue was well-received.

Primary and secondary prevention I would think Martijn Katan would be a most valuable person to present the impact of diet and Jukka Salonen the impact of antioxidants.

On the impact of alcohol, I think Michael Criqui of the University of California, San Diego, gives the most skilled and balanced analysis of this issue.

On the impact of exercise, Steven Blair of the Cooper Institute makes a very effective and balanced presentation.

Under children and youth, Darwin Labarthe would give an excellent summary of the tracking of risk factors.

Under primary and secondary prevention, Tom Pearson might effectively address the impact of new treatments for stroke and ischemic heart disease and the prevention of sudden death.

Tom Kottke of the Mayo Clinic might effectively address cost benefits of primary and secondary prevention.

I look forward to thinking about this program in greater detail. As a general comment, I think your decision to support the third world candidates for attendance and your session on developing countries and countries in rapid transition is an important and wise one.

As another general issue, I think it would reflect the freshness and pioneering spirit of the Canadian approach to look for new ISFC leaders among younger investigators in all the fields of bench, clinical and epidemiological studies, for the leadership of this conference, keeping the older leaders in a relatively quiet, chairmanship role. I was more than a little put off, and so were a number of other people, with the "Hollywood Awards" ambiance of the Oslo presentations, though it was overall, a superbly run conference.

Cordially,

Henry Blackburn, MD

Henry (m)

Mayo Professor of Public Health

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