

Dr. Richard W. D. Turner  
Cotterlings  
Ditchling  
Sussex BN6 8TS  
Tel: Hassocks 3392

Dr. Richard W. D. Turner  
Cardiac Department  
Western General Hospital  
Edinburgh  
Tel: (031) 332-2525

Professor Henry Blackburn,  
University of Minnesota,  
Division of Epidemiology,  
611 Beacon Street S.E.,  
MINNEAPOLIS,  
Minnesota 55455.

*file Turner*

23rd August, 1988.

Dear Henry,

Thank you very much indeed for sending me your new publications list for which I am most grateful. Apologies for the delay. Once again I marvel at your multiple activities.

This is a brief preliminary note to re-establish "keeping in touch" and I will write a better letter later to tell you of our monumental problems with the Common Agricultural Policy of the EEC. This is a major handicap in the UK owing to the colossal subsidies on dairy and beef farming to reduce the price and increase consumption of the products of the cow and intensive animal feed including battery hens for multiple eggs. The CAP also necessarily involves us in the problems of the Third World, which are increasing.

Could your secretary very kindly send me the current name (if she has now married) of Patricia Hausman, and her address, at the Centre for Science in the Public Interest. I want to ask her to send to the Lancet, at my expense, a copy of her remarkable book on The Science and Politics of Fat and Cholesterol. She did not reply to a letter I may have misdirected, which is unlike her.

Many of our problems are similar to those which the US has experienced for similar reasons, but you have the enormous advantage of Freedom of Information which we still lack. Consequently we have to rely on unofficial, but useful, "leaks".

For reasons which are well understood, the UK continues to top the international list for epidemic CHD. We have another difference from the US in the sharp distinction between the Royal College of Physicians and clinical cardiovascular nutrition with recommendations uninfluenced by "political, economic and practical" (PEP) reasons. The conventional prudent diet is taken for granted.

However, official policy in the UK is that of the DHSS which insists on taking account of PEP considerations, denies the relevance of the prudent recommendations, but only accepts the "total fat and especially saturated fat" and specifically and explicitly excludes any recommendation of dietary cholesterol or polyunsaturated fats. Consequently the public are confused especially since the British Heart Foundation takes the opposite view to the AHA in only supporting more "research" without the application of what has already been established. In other words, the research is mainly in the Interests of the Scientist rather than that of the Public.

*IF  
Please  
Call  
CSPI  
for address*

(202)  
332-9110

I am still engaged in analysing in detail the influence of cows and the Common Agricultural Policy on CHD. Remarkably dairy and beef farming, together with intensive animal feed, cover most of it.

The opposition to pulling out of the CAP is horrendous, but most EEC countries violently refuse to change to taking account of the public health because the incomes of farmers would be affected. Our stores are much larger than those in the US.

With kind regards,  
Yours sincerely,

*Richard*

R W D TURNER