## THE UNIVERSITY OF MICHIGAN

## CENTER FOR RESEARCH IN DISEASES OF THE HEART

Tecumseh Health Study 130 South First Street Ann Arbor, Michigan 48108

January 19, 1971

Dr. Henry Blackburn Institut de Medecine 12 Rue de Condolle 1205 Geneva Switzerland

Dear Henry:



Joe Doyle has asked me to serve as Chairman of the Nominating Committee for the AHA Council on Epidemiology. The most important position to be filled, of course, is that of Chairman. I have discussed this matter with Joe and also some others informally and there is no question in our minds that you would be by far our first choice. I will refrain from giving you the reasons for this view, to save you the embarrassment of hearing your praises sung, but Is merely ask you to write to me that you are willing to be nominated. Would you please let me know by return of post, if possible.

I do most earnestly hope that you will express you willingness to serve. I realize that the Chairmanship involves attendance at a number of AHA Board and Committee meetings but, as you and I have said to each other before, these are all critical action stations in these critical times for epidemiology, — and I can think of no one better qualified than you to man them. These qualifications are not only inherent in your professional stature but also relate to your connections with the NHLI and the ISC. I do look forward to your positive response.

With all good wishes as always,

Sincerely yours,

Fel.

Frederick H. Epstein, M.D. Director and Professor of Epidemiology

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cc: Dr. J.T. Doyle
Mr.L.P. Cook

INSTITUTE OF SOCIAL- AND PREVENTIVE MEDICINE UNIVERSITY OF ZURICH

32 Gloriastrasse 8006 Zurich/Switzerland March 15, 1977

Dr. Henry Blackburn
Professor and Director
Laboratory of Physiological
Hygiene
University of Minnesota
Stadium Gate 27
Minneapolis, Minn. 55455, USA

Dear Henry,

When I got back from San Diego - where I could see much, much too little of you - I found a nasty letter from a German professor who accuses me of talking cholesterol when "my" own data from the Tecumseh Study show its unimportance. Needless to say, I never saw the Nichols paper until after it appeared in print. I am now writing to ask if you and David Jacobs have some report or (no. 97) for the Dan Diego meeting. I had for some time planned to discuss this whole matter, among others, in a paper I was asked to over by Franz Gross). I would be grateful for any information you megève article several times, - but it is only a brief though very important statement.

Done /

Another favor... I enclose the first page of a paper by Ancel which I would also like to quote but I don't know where it comes from. Ancel once sent it to me. The source is nowhere apparent between pages 59 and 75! May I have the reference?

I am not sure I told you that Leon and I had a short and frank talk in San Diego. We only spoke of personal matters. Work in Tecumseh was not mentioned. Perhaps, with time, the wounds might heal.

It will be good to see you in Kronberg though, again, there will be little opportunity, I fear, to sit down quietly for a while.

With every good wish, as always,

Enclosure

TCol.

Yours,

Prof.Dr.F.H.Epstein

Lindenstrasse 37 8008 Zuerich, Switzerland 22 May 1983

Dear Henry,

It is Whitsun and I am sitting at home, waiting till the dawn breaks, i.e. Doris wakes up. Hence the headless letter... Ever so many thanks for three batches of mail! First of all, most urgently, the matter of the history of CVD epidemiology, — I am relieved that you would like to cut the whole undertaking down to size, both with regard to the questionnaire and the publication. You will recall that I, too, was bothered about the amount of information sought in your questionnaire and we discussed this when I phoned you from Bethesda. However, I was then persuaded that one might give it a try. As I said, I am relieved that you now feel the way you do and I would suggest that you trim the questionnaire accordingly which should not be much work at this stage. I would offer to do it but I am not sure what you have in mind with item # 12 mentioned in your letter. Meanwhile, I'll try and draw up a list of recipients of this enquiry; you are right,— it will be quite formidable. The idea of an editorial in Circulation is excellent, I think.

I am most grateful for your having sent me the two manuscripts, including the one about your AES talk. I believe, if I may say so, that these are two very major contributions which, for the first time, provide a systematic approach to the vexing problem of tying together information from prospective data on individuals and those based on the community picture. Your explanation of why cholesterol becomes less predictive with age is ingenious and I would agree with it in the sense that the predictiveness decreases but is not lost, as has been claimed by our friends from Framingham. I have shown in a talk in Holland some 15 years ago (published in the Hart Bulletin by Lex Arntzenius) that this is not true, using their own data from the "blue books" and I took issue by correspondence with Don Fred rickson years ago when he gave the St.Cyr Lecture in London. As you may know, I was asked to give a lecture last Fall in Barcelona at the ESC Working Group meeting on "Is there an age limit to the prevention of CHD?" and I showed, among a bunch of other tables, the one of which I attach a copy. The gradient gets less with age but is by no means lost. The same is true of the Pooling Project data, though they end with baseline age 55-59.

Lastly, many thanks for the copy of your comments on the recent "Wynder Workshop". Ernst's recommendations are, as you said, "pure Wynder" and I sent some changes of my own to Gerald Berenson. The basic problem relates to the issue of screening and you spent most of your time, most properly, addressing this question. Incidentally, Bill Weidman and Peter Kwiterovitch were both at the meeting and they both seemed to go along with the recommendations made in the report by the "clinical section". Personally, I am and always have been a "screener" though what I wrote in my Griffith Lecture, published in Circulation in 1972 got lost for 10 years, until Geoff's article in the BMJ and the WHO report on primary prevention: namely that what I then called the "Clinical-individual approach" and the "Community approach" are not alternatives but complementary. I believe children should be screened but Ernst makes the matter much too simple and the practical measures to be taken must be defined very carefully. It would be good to talk about all this rather than write.

Thank you again ever so much and ever so many good wishes and regards,

Yours cordially, as ever,

