

March 13, 1972

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Dear Bill:

The following is running commentary as I thumbed the R. F. Screening Guide which you are updating.

Will you be changing the title to something like Guide to Coronary Risk Detection and Reduction. If so will you be including more on risk reduction techniques and facilities?

Will the audience for the guide be only the affiliates, or affiliates and private physicians?

The new foreword might include mention of provision of special community facilities and the enlistment of needed professional skills in screening and risk reduction. I hope it will include mention of the central importance of definitive controlled trials which should be joined and not diluted or diverted by affiliate programs.

The introduction might do well to mention all the major U. S. studies which have contributed to Risk Factor information, for example all those in the AHA Pooling Project. The introduction might also do well to emphasize the importance of the coming mass controlled trials to public and professional acceptance of the entire preventive approach, and that the success of future prevention programs depends on the effective operation of such trials.

In line with the last Central Committee discussion, the optimal screening program might be listed separately in bolder type, numerated, with the ECG perhaps listed last (because it is not a modifiable risk factor, but a risk indicator).

It might be useful to include negative recommendations; for example the SMA 12, which is low yield in general populations and produces a serious problem of technical errors, "false positives" recalls, etc., and the use of ECG screening alone, which most of us agreed is indefensible.