

March 19, 1969

TO: Executive Committee - Council of Academic Societies  
FROM: Cheves McC. Smythe, M.D.  
SUBJECT: Agenda - Meeting of March 23, 1969

Dr. Cooper has suggested an agenda for our meeting of Sunday, March 23, 1969, at the Marriott. Supporting material is to be found in previous mailings with the exception of Dr. Clark's resolution.

PROPOSED AGENDA

1. Review of Minutes of previous meeting Dr. Rhoads
2. Report from President Dr. Cooper
3. Progress report on National Library conference Dr. Kinney
4. Description of proposed CAS programs
  - a. National Library of Medicine project Dr. Kinney
  - b. Academic Affairs and Graduate Medical Education Dr. Smythe
  - c. Political action Dr. Tosteson
5. Proposed Committee Structure CAS (Minutes of meeting of February 24, 1969)
6. Support for CAS from General Funds of the Association Drs. Rhoads, Kinney, and Tosteson
7. Resolution Opposing Draft of Graduate Students Dr. Clark
8. Resolution for Support of Research Dr. Tosteson
9. Material for 1969 Annual Program Dr. Smythe
10. Other Business
11. Adjournment

	<u>Total Available</u>	<u>Expended Through 1/31/69</u>	<u>Balance Available 2/1/69</u>
CAS General	13,329.36	9,893.54	3,435.82
CAS Workshop on Graduate Medical Educ.	27,665.00	14,224.98	13,440.02
NLM Project	67,597.00	1,121.54	66,475.46



*The Commonwealth of Massachusetts*

*University of Massachusetts-Boston*

*100 Arlington Street, Boston 02116*

*Folder for  
meeting of  
2/27/69*

TELEPHONE (617) 542-6500

February 28, 1969

Dr. Jonathan E. Rhoads  
Chairman, Department of  
General Surgery  
University of Pennsylvania  
School of Medicine  
Philadelphia, Penn. 19104

Dear Jonathan:

Enclosed is the resolution concerning drafting of graduate students which has now been approved by each of the members of the Executive Committee of the CAS present in Washington. I hope you will be able to present it to the next meeting of the Executive Council of the AAMC for their action.

Many thanks.

Sincerely,

A handwritten signature in cursive script, appearing to read "Sam".

Sam L. Clark, Jr., Chairman  
Department of Anatomy  
School of Medicine

SLC:jf

cc:

Dr. Cheves McC. Smythe

Whereas there is great public demand for increased resources in Health Manpower, a demand being answered by expansion of medical education,

and whereas there is a chronic and increasing shortage of medical teachers to staff the expanded facilities for medical education,

and whereas the chief source of such teachers in the basic medical sciences is the pool of graduate students candidate for the ~~Ph.D.~~ in these basic sciences,

and whereas a high proportion of first and second year graduate students in the basic medical sciences is now being drafted for military service - a process that, if continued, will reduce the output of such sorely-needed teachers by half,

therefore be it resolved that the AAMC take strong and immediate action to convince the Federal Executive of the vital need for these teachers in meeting the health needs of the nation, so that the policy of disallowing draft deferments to graduate students in the basic medical sciences will be reversed.

Duke University Medical Center

DURHAM, NORTH CAROLINA

DEPARTMENT OF PHYSIOLOGY  
AND PHARMACOLOGY

March 11, 1969

POSTAL CODE 27706

Dr. DeWitt Stetten, Jr.  
Rutgers - The State University  
Rutgers Medical School  
New Brunswick, New Jersey 08903

Dear Hans:

I have your letter of February 13 and subsequent communications concerning the resolution which I offered to the Assembly of the Association of American Medical Colleges in Chicago in early February.

It may interest you to know of the background of the preparation of that resolution. Tom Kinney and I were asked by Drs. Glaser and Anlyan to prepare a position paper for the Executive Council of the AAMC in relation to NIH support of medical research. This request was made because Dr. Marston expressed an interest in meeting with representatives of the AAMC to discuss the NIH budget for next year. This meeting was scheduled and indeed took place on the Sunday following the meeting of the Assembly. Dr. Marston indicated a desire to discuss the financial needs both for increasing the output of physicians and for maintaining the present level of research activities in American medical schools. The document which I prepared was designed specifically to deal with the latter half of this agenda. It was my understanding that representatives from the Council of Deans were asked to prepare a parallel document concerning medical manpower. On the morning before the meeting of the Assembly, Dr. Glaser decided that it would be wise to present these documents as resolutions to the Assembly. Accordingly, Tom and I spent the hour before the meeting drawing up the statement which you heard. The resolution concerning medical manpower was not prepared. It was therefore impossible to present the resolution concerning medical research in proper context. It was, in short, a case of comically bad political management. Needless to say, I felt somewhat embarrassed to be associated with such an amateurish effort.

Despite these unfortunate practical circumstances, I stand behind both the intent and the content of the resolution. It was offered not as a device for educating the general public with regard to the cultural and technical importance of basic science, but rather to formulate clearly the position of a professional organization in preparing advice to scientifically trained officials of the Federal

Dr. DeWitt Stetten, Jr.

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Government who are charged with the responsibility of administering funds in support of medical education and research. While it is patently misleading to encourage the general public to believe that a specific time table for the solution of practical health problems such as an adequate therapy for cancer or heart disease can be drawn up on the basis of current basic research related to these fields, it is, in my opinion, even more misleading to espouse the view that these problems can be solved without such basic research. It is essential for scientists familiar with these facts to inform their fellow citizens both of the essentiality of the scientific enterprise and of the impossibility of specifying ahead of time the rate of emergence and content of socially useful products from these efforts. Surely this is the central lesson learned by mankind since the renaissance. After all, we have conquered the world (but not yet ourselves) by playing games in the laboratory! It may be, and indeed many elements in the contemporary scene indicate that it will be, considerably less popular to support the cause of pure science during the decades ahead than it has been during the past thirty years. To my mind, this does not reduce, but rather increases the responsibility of citizens familiar with this aspect of our national life to speak out on the issues.

I must make clear that these remarks are not intended to belittle the importance of dealing forthrightly and effectively with the economic and social problems which confront our country now. We need more health manpower. We need to devise new and imaginative ways in which these persons can serve the health needs of our citizens. It is essential to find adequate financial support for these ventures. The primary source must be the Federal Government. However, for the funds necessary to promote progress with these problems to be obtained by reducing the flow of dollars in support of basic medical research would in my opinion be extremely short-sighted. There are many other sectors of our national economy which could be temporarily reduced to provide such funds.

I enclose copies of two statements related to this subject. One is a letter from John Edsall to Senators Kennedy and Brooke, which you have perhaps already seen. The other is an address given by Abba Eban, Foreign Minister of Israel, to a gathering of membrane biophysicists in Jerusalem last summer. It is one of the most eloquent statements of the relation between science and society which I have had an opportunity to hear.

Dr. DeWitt Stetten, Jr.  
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I hope that we will have an opportunity to discuss these matters in person sometime soon.

Best personal regards.

Sincerely,



D. C. Tosteson

DCT:cd

HAE

RUTGERS · THE STATE UNIVERSITY

RUTGERS MEDICAL SCHOOL  
OFFICE OF THE DEAN

NEW BRUNSWICK, NEW JERSEY 08903

February 13, 1969

Dr. Daniel Tosteson  
Department of Physiology  
School of Medicine  
Duke University  
Durham, North Carolina

Dear Dan:

Unfortunately, I had to leave the meetings in Chicago while your resolution of last Sunday was still under discussion. I doubt very much if I should have gotten to my feet under any circumstances. I would, however, like to make one point to you.

Whereas I, of course, agree enthusiastically with the need for continued and growing support of basic medical research, I believe that the argument in defense of this which you presented in your resolution is subject to deep suspicion by the public at large and by the legislators. I refer, of course, to your statement that basic medical research can be shown to have improved the public health. You stated, for instance, that American public health is better at this time than at any time in the past. This is true, yet there are supposedly 14 or 15 countries in the world which have a lower infant mortality rate and which surely spend far less than we do in basic medical research.

Furthermore, probably the greatest single achievement of basic medical research in the past generation is the elucidation of the biochemical mechanisms behind the process of genetic transmission, including the resolution of the genetic code. As far as I am aware, there is no single disease, the treatment of which has been improved as a result of this work. There is no single patient whose life has been prolonged because of the work of Watson, Crick, Nirenberg, and all the others. This, of course, does not mean that the future will not demonstrate the practical benefits of this research. I am confident that it will. But the members of Congress are, I am sure, pretty tired of this line of argument. They have been told for so many years that, if you give us more money to do more basic research, we will find for you the cause and cure of cancer. I therefore suggest to you that far more convincing arguments will have to be found if the entirely commendable goal that you seek is to be secured.

For a more complete review to the layman's reaction to your line of argument, I suggest the book published a couple of years ago by Dan Greenberg, then on the staff of Science magazine. Whereas in the overwhelming majority of cases practical benefits do result from basic science discoveries, the time interval is sometimes longer than one presupposes. The reduction of



fertility which can be brought about by treatment with extracts of corpus luteum was first noted in 1898 and now, 70 years later, progestational pills are finding real usefulness. The mathematics of prime numbers has been under continuous scrutiny by some of the best intellects in the history of the world, and yet it is my understanding that no one has found a single practical application of prime numbers or of the theories which relate to them. These facts, unfortunately, have leaked out, and I fear that the sophisticated layman could today counteract some of the arguments which you propose.

Please do not construe any of this to mean that I am opposed to further support of basic science. You know my own background well enough to know that this could not possibly be the case. We must, however, seek more convincing arguments. The old ones, I am certain, will no longer suffice.

It was good seeing you. With best wishes,

Yours as ever,

*Hans*

DeWitt Stetten, Jr., M.D., Ph.D.  
Dean

S/h

cc: Dr. Robert Berson

MINUTES

EXECUTIVE COMMITTEE  
COUNCIL OF ACADEMIC SOCIETIES

March 23, 1969

Washington, D.C.

Present: Drs. Jonathan Rhoads, Dan Tosteson, Thomas Kinney, Sam Clark,  
Harry Feldman  
Absent: Drs. Ralph Wedgwood, James Warren, John Nurnberger  
Staff: Drs. John Cooper and Cheves Smythe

Dr. Rhoads read the minutes of the previous meeting; Dr. Tosteson moved their approval.

Dr. Cooper reviewed briefly the events of the past few months and stressed his attempts to reach a deeper understanding of the programs of the Association, to get to know the various people involved better, to arrive at more effective comprehension of the budgetary and financial position of the Association, and to accomplish the move of the Association from Evanston to Washington.

Dr. Kinney analyzed the recent National Library of Medicine meeting and summarized his perceptions of it. There was general agreement with his concept of this meeting. Dr. Smythe summarized his presentation to the Board of Regents of the Library to be made on March 24, 1969. This will include a report of the conference and the Association's follow-up. This led to a detailed discussion and analysis of the conference and its dominant theme. The conclusions were that the presentation to the Board of Regents should stress, (a) support for the biomedical communications network, especially as a teaching aid and not as a collection of superior hardware; (b) emphasis on the formation of a strong resource center; (c) recognition of the strength and power of goal directed learning with descriptions of floors of knowledge and qualifying examinations, but, at the same time, recognizing that such developments might not be considered to be proper functions of the National Library of Medicine; (d) support for further exploration of the application of computer-stored materials to clinical teaching and problems; (e) little emphasis on the precise organizational mechanisms through which the BCN might discharge its mission; (f) heavy emphasis on the willingness and determination of the Council of Academic Societies to immediately initiate support of the Library; (g) reaffirmation of the intent to publish a report of the conference promptly, and to recruit a staff to undertake

a more substantive effort to determine from the world of medical education the inputs required for optimal planning by the Library. (Dr. Smythe's presentation to the Library on March 24, 1969, stressed the points noted above.)

In further discussion of the NLM project, it was decided that the Steering Committee for the conference should serve as an "editorial committee" for its report. This Committee, upon submission of its report, would be discharged having completed the task to which it was assigned. In the meantime, the Council of Academic Societies would appoint another standing committee on the NLM-BCN development.

Possible individuals to staff this committee and to carry the project forward were discussed.

The failure to activate the Committee on Graduate Medical Education was decried. This Committee is to be asked to meet and to organize itself on Monday, April 21, at the Drake Hotel in Chicago. Drs. Richard Ebert, Leighton Cluff, Halsted Holman, Jay Bollet, and Willis Hurst were mentioned as potential additional members from the field of Internal Medicine.

Two proposals for support for the programs of the Council of Academic Societies from the general funds of the Association were discussed. One was for staff, i.e. a professional, his secretary, and their expense, about \$50,000 a year. A second was for the assignment of dues from individual members of the AAMC to the Council of Academic Societies.

There was more support for the former, although many attractive features of the latter proposal were recognized. Dr. Cooper assured the Committee that once his comprehension of the financial status of the AAMC became clearer, he would set about seeing to it that the CAS received the support its potential importance as an integral part of the AAMC warranted. Dr. Smythe agreed to seek any data available on the allegiances of individual members and what projections for support of the CAS might be derived therefrom.

It was further agreed that until support for additional staff was mobilized, it would not be wise for the CAS to institute additional programs that it could not carry out adequately.

The Committee structure suggested in the minutes of the last meeting was discussed. The need for active productive standing committees on graduate medical education and the NLM-BCN project was reaffirmed as noted above. Until more staff support is available, committees on curriculum, etc. and the economics of medical faculties should be held in abeyance. The need for a nominating committee is self-evident. The CAS will strongly urge on the Executive Council a Committee on Committees or its equivalent.

The need for the CAS to develop a program oriented to the requirements of its component disciplines to make their voices heard in the solicitation of public support for their programs was discussed extensively. It was agreed that this was an item of the highest priority, which should be among

the first responsibilities assigned to the expanded staff, but that anything that can be accomplished in the interim should be initiated now.

The resolution against the indiscriminate drafting of graduate students is to be forwarded to the AAMC Executive Council in an effort to martial more general support for this position.

The history of the resolution in support of biomedical research was received and reviewed as information.

It was agreed that the CAS annual program in Cincinnati, Ohio, should be held on Saturday and Sunday afternoons, November 1 and 2, 1969.

On Saturday afternoon, the central theme will be "The Role of the Sciences Basic to Medicine in the Medical College." Drs. Philip Cohen, Paul Sanazaro, Jacques Barzun, Arthur Kornberg, Eugene Braunwald, Frazier Mustard, Peter Stewart, Dan Tosteson, Sam Clark, Donald Seldin, Lou Welt, Francis Moore, Hollifield Smith, A. Dorfman, and Robert Pitts were suggested as speakers. On Sunday afternoon, the program will be concerned with the business of the CAS with heavy emphasis on the NLM-BCN project. The NLM is to be asked to prepare a working demonstration or exhibit. The agenda will include minutes, reports on or from the Executive Committee, the President of the AAMC, the Treasurer of the CAS, progress reports on the graduate medical education and NLM conferences, and the nominating committee. Reports on pending legislation, minority group admissions, student unrest, and further descriptions of NLM developments may round out the afternoon.

Letters from the American College of Physicians and from others of the specialty colleges seeking sustaining or contributing membership in the Association were discussed by Dr. Cooper. The interrelationship between these applications and the efforts of the Council of Academic Societies were explored.

The major educational drive of such colleges is in continuing education. Accordingly, their entry into the AAMC fold is a commitment toward the development of a more active program in this area. How they interrelate with the CAS is, and will remain, a problem for a short period of time. The Association is not in a position to mount additional programs at this time, nor is the CAS able to expand its scope of work without additional staff. Accordingly, it was decided that the optimal course of action was to respond positively to these letters and to suggest that the Association sit down with the colleges to begin to explore other optimal methods for their interrelationships. A good time to initiate the first of such discussions might be on April 20 at the time of the meeting on Graduate Medical Education at the Drake Hotel.

The meeting was adjourned at 4:00 p.m. It was tentatively agreed that the next meeting will be scheduled for either Monday, June 23, or Wednesday, June 25, in and around the next meeting of the Executive Council. It will probably be held in Washington, D. C.

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