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Banks

Dear Dr. Lederberg:

Thanks very much for your comments, your reprints, and for returning my questionnaire on international health. I will be sure to send a summary of replies to you when they are all in.

Further to our conversation-it seems reasonable for me to make some more comments on international health and our relationship to it. Regardless of our individual training, it seems to me that when we accept a position at a medical school we become health workers and should accept also some willingness to think about health problems on a broad scale. The mission of health workers, when we wear that cap, should be the improvement of the quality of human life. This may sound dreamy and abstract but nevertheless worth aiming for through whatever small/increments we can manage. You may recall the WHO definition of health as complete physical, mental, and social well-being, and not just absence of disease. It should be recognized that each clinical event - "providing patient care"- represents a breakdown in what ought to be a function of promoting and maintaining health. In his State of the Union address a few days ago President Nixon put a lot of stress on preventive medicine, and as time goes on I am hopeful that the clinicians can enter a real partnership with all sorts of other people in a maturing system of health maintenance. (For the long view it is no detriment to have no medical credential; in fact, the possession of a traditional MD might restrict the range of thinking and options). Boundaries between countries no longer mean very much from the point of view of transmission both of pathogens and of ideas. One of the greatest ill effects of poverty, both here and around the world, is that we all lose the benefit of the contributions that could have been made, but were not, by people who never had the chance. This terrible wastage of talent and creativity should be reduced as much as possible, and here I think is a valid field of concern for international health. If you don't already know it, you would enjoy reading Mark Twain's story, "Captain Stormfield's Visit to Heaven", which is very apropos in this regard.

Some traditionalists might consider that these comments are not really in the province of medical schools, but I am convinced that the point of our educational programs should be to prepare our students for functioning in the world of 20 or 30 years from now. If we teach only the technicalities of today's state of the art we will have lost much of our impact for the future, which is where a lot of our thinking ought to be. One thing that should be done is to raise the status of some fields, such as health education. After all, if surgery was once considered fit only for barbers, maybe there is hope for other fields too. The most immediate way in which we can exercise our concerns about the world picture now and into the future is to involve our students in our teaching and in special programs such as my proposed colloquium series. These should bear upon many viewpoints besides the medical (=clinical).

Just as progress in molecular biology has erased borderlines between much of classical chemistry, physics, and biology in a mechanistic synthesis, I think that we are on the way to a similar sort of development with respect to "quality of life". Concerns with population, pollution, ecology, senseless warfare, including actual and potential, conventional, C, B, and nuclear, and so much else may also find expression in a common core that hopefully will be amenable to some sort of rigorous analysis, as has been done with the nature of genetic material. This sort of thing should be no less within the jurisdiction of people concerned with health. I really don't know the extent to which these issues form a part of our curriculum, or of the bull sessions of

the students, but I think that discussions along these lines ought to be fostered and encouraged. These concerns are likely to be of overwhelming dominance in the years to come.

With regard to the labs at Ft. Detrick, it seems that the facilities could be best used if converted along lines that you have suggested. An ideal model might be something like the Marine Biological Laboratory at Woods Hole, Massachusetts. There is a corps of resident scientists, supplemented in the summers (and other times) by visiting scientists, students, and others with a lively program of seminars and exchanges. If something like this could be arranged, on a world-wide basis, to make Detrick a center for international meetings and conferences as well as for short- and medium-term scholarly study, specializing in ~~conquering~~ infectious and vector-borne diseases, it would be a real ~~new~~ base for biological peacefare. Enclosed is a copy of an announcement from NIAID about the sort of studies they feel desirable for biological control of vectors. One other thing, besides all the labs and specialized facilities available in the Washington area, there is the new Fogarty International Center at NIH, which is particularly concerned with international affairs, and has space for visiting foreign scholars-in-residence. They, and others, could become involved in any development plans for Detrick. Whether the site could be deeded to WHO, and whether they would want it, is something that I can't comment on.

One other comment on national policy. The thousands of displaced aerospace scientists, engineers, and technicians could and should be involved in work to improve human welfare. Many of these people could be brought more or less directly into health, not only from the laboratory aspect (perhaps after some training and orientation) but from the management viewpoint through study of health needs and possible ways for meeting them. Other more directly technical projects, such as urban transportation systems, pollution control in industrial processes, monitoring systems, &c. should be right up the alleys of many of the engineers. If the government should start some neo-WPA for these people, we should take care to see that health aspects of their work are not neglected.

Yours,



Paul F. Basch