

CONFIDENTIAL

May 26, 1954

TO: Tobacco Industry Research Committee

FROM: O. Parker McComas, Chairman

SUBJECT: Appointment of Scientific Director  
and  
Scientific Advisory Board Meeting - May 17, 1954.

On May 17th our Scientific Advisory Board met for the second time.

In the course of discussing qualifications and candidates for Scientific Director, it became more and more apparent that Dr. Little filled the bill perfectly. Finally, the question was posed to Dr. Little, would he be available for the post. He said that he was unable to answer at that time. Subsequently Dr. Little left the meeting to attend a previous luncheon engagement and, in his absence, members of the Scientific Advisory Board unanimously agreed that the finest possible solution would be to have Dr. Little assume the post of Scientific Director on a part-time basis with a young, able doctor to assist him on a full-time basis.

Following this, I contacted the Sub-Committee responsible for the selection of a Scientific Director and was authorized to offer the position to Dr. Clarence Cook Little. I am happy to report that today I have received word from him that he accepts the position of Scientific Director on a part-time basis for the period of a year from June 1, 1954. This, I am sure you will agree, is a great step toward the accomplishing of our objectives. Please treat this information as confidential until the public announcement of it is made by Tobacco Industry Research Committee headquarters.

In addition to this important news I know you will be interested in other developments at the Scientific Advisory Board meeting.

Dr. Clarence Cook Little, Acting Chairman, presided at the meeting which was attended by the following: Drs. Cattell, Jacobson, Kotin, Lynch and Reimann. The TIRC was represented by me, as well as by Mr. Hoyt and Mr. Hill. Dr. William F. Rienhoff, Jr. was unable to attend.

Dr. Little opened the meeting by explaining that the TIRC had a responsibility to the public to keep them advised as to what the Committee was doing; that Hill and Knowlton, Inc. had prepared a press release covering the Committee's allocation of funds for research projects and an invitation to scientific institutions such as hospitals, universities and other medical research organizations to submit proposals for specific research projects for consideration by the Committee's Scientific Advisory Board. Following this a photograph was taken of the members of the Advisory Board in order to have a picture available in case of requests from the press.

In view of the Committee's interest in the subject of statistics Dr. Little had invited Dr. E. B. Wilson to confer with the Board on that subject. Following are the points taken up on the agenda in order:

1. Statistical Research

Dr. Wilson is retired from Harvard University and is considered the outstanding medical statistician in the United States. During Dr. Wilson's distinguished career he has been president of the Social Science Research Council, president of the American Statistical Association, former chairman of the American Society for the Control of Cancer, and president of the American Academy of Arts and Sciences.

The subject of statistical research was the first item on the agenda so that Dr. Wilson could express his views and leave to catch a train to Boston. I prefaced Dr. Wilson's remarks by explaining that some members of the TIRC viewed the problem of medical statistics research as separate from the work of the Advisory Board and the Scientific Director. Dr. Wilson stated that he felt this would be inadvisable for the reason that statistical research and laboratory research went hand in hand and actually were inseparable. Statistical studies, he said, were essential in evaluating methods and results of other research. Compilations of data from local, national and international sources could be done outside of the Advisory Board, Dr. Wilson said, but this type of research could not be called scientific. Conclusions from it could be interesting but untrustworthy.

Dr. Wilson talked at length about the shortage of good, competent medical statisticians. He said that the shortage was particularly great in fields dealing with organic disease as most good medical statisticians preferred dealing with infectious disease. He explained that the American Cancer Society was sufficiently concerned with the problem that it had financed a project at Yale University to develop competent people for the study of non-infectious disease statistics.

Dr. Wilson emphasized the necessity of having statistical counsel in at the beginning as well as the end of any experimental design to assure its accuracy and dependability.

The Advisory Board expressed the desire to have authority to appoint a statistical consultant to the Board, and recommended that any statistical research be under the purview of the Board and directed by the Scientific Director. It was agreed that a flexible attitude should be maintained and the questions reviewed from time to time.

One member of the Scientific Advisory Board went so far as to say however, that if statistical research were done and published apart from the advice of the Scientific Advisory Board he felt he would no longer wish to be associated with the Board.

## 2. Applications for Research Grants

Attached is an application blank which was approved by the Scientific Advisory Board for use by those requesting funds from the TIRC.

Specific grants were discussed and the following procedure suggested:

1. Foundations making general requests should be asked for a specific type of proposal and given application forms.
2. The TIRC is not to deny any project but, as a policy matter, to table them when not acted upon.
3. Regular reports with a minimum spacing of one year will be required on all grants with an optional increase in frequency by the Scientific Director or upon advice of the Scientific Advisory Board.
4. Efforts should be made to see that any results of such grants are published only after confirmation of their scientific worth.

Following this, requests in hand for grants were reviewed. The following three categories were decided upon:

1. File without action.
2. Table for further investigation by Scientific Director.
3. Send application blank for more detailed information.

Of the 60-odd requests for grants thus far received, a total of 17 were considered worthy of follow-up and fall in category 3 immediately above.

## 3. Meeting Dates

Regular meeting dates were discussed and it was felt that the third Monday of each month would be a good date except during the vacation period. The Executive Secretary is to confirm this with the members of the Board including Dr. Rienhoff who was absent. June 18 was chosen for the next meeting subject to possible previous engagements which those present were not aware of. June 22 was selected as second choice.

4. Other Action

The Scientific Advisory Board considered the advisability of adding cardiovascular, infectious health and public health experts to the Scientific Advisory Board and, between now and the next meeting, will contemplate recommending such action to the TIRC.

The subject of information for the Scientific Advisory Board was discussed, and Dr. Little recommended the gathering of all information possible in one central spot - bibliographies, etc. I asked the Executive Secretary to report on what material was available with individual tobacco companies and to explore what could be done to index all available information and make it available to the Scientific Advisory Board.

The subject of examining old Tuberculosis Association x-rays was broached, and it was felt that they might be useful if they could be studied and any x-rays indicating other than TB be set aside. The Executive Secretary was requested to check with the National Tuberculosis Association to discover what can be done in reviewing TB roentgenograms.

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Speaking for Tom Hoyt, John Hill and myself, I would like to say that following the second meeting of the Scientific Advisory Board I am more impressed than ever with the composition of the Board and our good fortune in having assembled this group to advise us. That this feeling is shared by others outside of our industry was pointed up by a statement made in the meeting that Dr. Cameron and others in the National Cancer Institute have expressed gratification with the way TIRC is going, and have indicated they want to assist wherever possible.

O.P.McC.

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