

October 18, 1968

MEMORANDUM TO: William Kloepper, Jr.  
The Tobacco Institute, Inc.

SUBJECT: Tobacco and Health Research Procedural Memo

77

Here, as requested, is a memo on the writing and production of Tobacco and Health Research.

I. AUDIENCE

The primary audience is comprised of doctors and scientists. This determines format, content and style. Secondary audience is the news media for which a press release is prepared summarizing contents. A third audience is the "tobacco interested" groups -- companies, organizations, etc. This third audience gets little consideration in the selection and writing of material. However, at one time a special insert was prepared for this group which consisted (usually) of a one-sheet, two-page reproduction of news clippings reporting more simply on some stories included in the publication.

II. SELECTION OF MATERIAL

A. Sources: The inflexible rule is that material should come from primary sources, that is, from accredited medical and scientific journals (sometimes an unpublished paper delivered at a scientific meeting is used). Secondary sources (such as Medical World News, Medical Tribune) are subject to errors and biases of the reporters. Because accuracy is the most important quality that can be given to T&HR, our policy has been to exclude them entirely.

Most papers used in T&HR come from the Council for Tobacco Research library, through the advance distribution of Ken Austin of CTR. Candidates for T&HR are xeroxed and kept for the next issue of T&HR. Other sources should, of course, be watched.

B. Criteria for Selection: First, the reports should be on new research, if possible. It need not always deal with some aspect of tobacco; for example, a report indicating some factor or factors other than smoking may be involved in one of the diseases with which smoking has been associated. Other examples:

- a report in which the statistics of a smoking-associated disease are questioned
- one in which death certificates or classifications of such a disease are questioned
- one showing that many lung cancers may be metastatic from some other organ.
- one indicating that a virus may cause human cancer, whether or not that cancer is associated with smoking
- one on research with animals, indicating that some other factor may be involved with carcinogenesis or ciliostasis

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The most important type of story is that which casts doubt on the cause and effect theory of disease and smoking.

A second major category is medical opinion. The best of this type is the report based on extensive review of the literature (such as Seltzer's 1967 review of heart disease). Second best are those in which a doctor of stature challenges the findings or conclusions of another (Garland doubting Auerbach's interpretations of his lung slides, for example).

Occasionally, a favorable editorial from a medical journal may be used, but these must be chosen with care. An editorial from JAMA or The Lancet is obviously important.

A third major category is CIR-USA news. T&HR has announced annual grants, summarized annual reports, and summarized important papers delivered by Dr. Hockett and Dr. Little. (Usually, the stories were accompanied by a boxed offer to supply complete texts on request.)

### III. WRITING

A. Structure: The usual newspaper practice of leading off with the most important finding is used. This finding may be the most important finding to tobacco, rather than the one considered most important by the author. If there is a second important finding, this is usually placed in the second paragraph. This is followed by detail of who conducted the work and where, and how it was done. The article ends with direct quotations, if the paper contains any good ones. If not, the quotes are paraphrased.

Citations are footnoted at first opportunity in the story. This footnoting has two purposes: It gives a scientific journal aura to the story, and it prevents cluttering up the story with space-consuming identification.

**IMPORTANT:** If the paper contains any conclusions or findings unfavorable to tobacco, these are reported scrupulously. The account of these findings may be terse and placed at the end of the story, but it must be there.

B. Headlines: These should be very carefully written on the premise that doctors and scientists, like other readers, often grab information from the headlines and nothing more. Thus, the headline should strongly call out the point -- Controversy! Contradiction! Other factors! Unknowns!

C. Editorial Comment: The policy has been to allow almost no editorial comment. Very occasionally, comment to the extent is permitted:

1. Explanation of a scientific term which is likely to be outside the average physician's experience (in an item on free radicals or some other area of physics, for example).
2. Notation that a carcinogen being discussed in an animal experiment has not been found in cigarette smoke.
3. Citation of an earlier study, if the present article confirms and/or extends the earlier one, particularly if T&R has reported the earlier paper.

The general rule has been: "When in doubt, don't." Strenuous effort is made to keep the tone strictly reportorial and neutral, and to allow the material to carry itself on its own intrinsic merits and on the placement of the item on the page.

#### IV. CLEARANCE PROCEDURE

The present system is as follows:

A. A list of proposed articles, with brief descriptions and thoughts about the placement, together with attribution of source and date is drawn up. Designated T.I. officers and attorneys review this list, approving, deleting, and adding suggestions where they feel necessary.

B. The approved items are written, along with anything of great importance which has appeared since. A tentative layout is prepared and tentative headlines are written. One complete set of layout, headlines and copy goes to attorneys; one to T.I. officers and three to W.T. Hoyt of CTR with a request that he ask Drs. Little and Hockett for their comments and suggestions. Two sets are kept, with source material attached for easy reference, should a question arise.

C. When the copy is returned, the indication changes are made and new material written, if any item has been rejected.

Fresh copy is then prepared for the printer and sent for typography. The final layout is prepared at this point.

D. When galley proofs are returned, the issue is dummied and returned to the typographer for page makeup. At least eight sets of page proofs are required. Sets for T.I. officers and lawyers and for Mr. Hoyt and Drs. Little and Hockett. One set is kept for the files, and the other is carefully proofread and otherwise adjusted and returned to the printer when the corrections and suggestions come in. Final corrections are made by the printer, and fresh page proofs prepared. These are carefully proofread by at least two people, and names, figures and quotations doublechecked against the original source.

#### V. CIRCULATION

Present circulation uses several different mailing lists, which are enumerated on the attached memo.

#### VI. PRESS COPIES AND RELEASE

It has been the practice to mail first class the copies going to the press, along with a two-page press release. The release consists of a long story describing the major contents of the issue, plus four or five one-or-two sentence "Briefs From TOBACCO AND HEALTH RESEARCH" which some editors may use as fillers. The release requires usual clearance.

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## VII. CORRESPONDENCE

Certain set rules have been developed for the handling of correspondence from M.D.'s and scientists:

1. Every letter, no matter how abusive, must be answered promptly and courteously. Several "forms" are used.
2. Every effort must be made to exclude from future mailings those who request that their names be removed from the mailing list.
3. Careful records of all correspondence must be kept for future reference. This record can be useful in other situations: Where you want to know, for example, a doctor's stand on smoking.
4. Any request for original material should be honored promptly.

## VIII. MISCELLANEOUS

A. The need for accuracy and complete fairness in reporting work is self-evident but is worth reiterating. In event of any error or complaint, correction and apologies are in order. So far as we can recollect, only one error calling for correction ever appeared in T&HR, and this was handled promptly and without rancor on the part of the authors, who were sympathetic to the problem.

B. Permission to use material has never been sought from either publication or authors. This procedure was based on expediency but was backed up informally by some legal discussions concerning copyright. (Apparently the worst that might happen would be a suit for damages which could recover about the amount that would have been paid had the original publication been paid for use of material -- and even this is somewhat hypothetical.) However, worse than damages would be alienation of publication or authors, so this again emphasizes need for aseptic treatment of material.

C. Back and current copies of T&HR are often valuable sources of information in answer to queries from many sources. Issues can be marked up, for example, to cover reports concerning heart diseases, or cancer, or statistics, etc.

Carl Thompson

CT:sdd

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