1967

Association of Cancer Institute Directors (ACID), 1967

Office of the President

The University of Texas MD Anderson Cancer Center

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Membership of A.A.C.I. as of June, 1967
Rusch, Harold P., M. D.
McArdle Memorial Laboratory
The University of Wisconsin
The Medical School
Madison, Wisconsin 53706

Shubik, Philippe, M. D.
Institute for Medical Research
The Chicago Medical School
2020 West Ogden Avenue
Chicago, Illinois 60612

Simpson, William L., M. D.
Detroit Institute of Cancer Research
4811 John R. Street
Detroit, Michigan 48201

Spratt, Jr., John S., M. D.
Ellis Fischel State Cancer Hospital
Columbia, Missouri 65201

Warren, Shields, M. D.
Cancer Research Institute
New England Deaconess Hospital
194 Pilgrim Road
Boston, Massachusetts 02215

Weinhouse, Sidney, Ph. D.
Fels Research Institute
Temple University School of Medicine
Philadelphia, Pennsylvania 19140

Wood, David A., M. D.
Cancer Research Institute
University of California Medical Center
1282 Moffitt Hospital
San Francisco, California 94122

Talbot, Jr., T. R., M. D.
The Institute for Cancer Research
7701 Burholme Avenue
Fox Chase
Philadelphia, Pennsylvania 19111

Elected President 1967-68
Cross Reference

See ADM - RESEARCH MEDICAL LIBRARY - NEOPLASM LIST for letter to Dr. Oliver H. Beahrs, American College of Surgeons Cancer Commission dated October 12, 1967, regarding the "gray sheet". Copy of this letter sent to all AACI members.
August 21, 1967

William L. Simpson, M. D.
Detroit Institute of Cancer Research
4811 John R Street
Detroit, Michigan 48201

Dear Bill:

I have received the minutes of the last meeting of the Association of American Cancer Institutes and congratulate you upon getting them out so rapidly.

I am enclosing a memo from Dr. Murray Copeland suggesting some factual changes.

Best wishes.

Sincerely yours,

R. Lee Clark, M. D.
Director and Surgeon-in-Chief

bc: Dr. Copeland

RLC:ph
Interoffice Memorandum

TO: Dr. R. Lee Clark

FROM: Dr. Murray M. Copeland

DATE: August 12, 1967

SUBJECT: Provisional Minutes of Association of Cancer Institutes.

Dear Lee,

I have reviewed the Provisional Minutes of the June meeting of the Association of Cancer Institutes and find that the following corrections are in order:

On page 1, under paragraph on "Cancer Congress", it should be pointed out that this has been an ongoing committee for a number of years with many changes in membership. Therefore, the contents of the paragraph should be stricken from the record, beginning with the words, "as originally named......", and ending with the name, "Lester Breslow". The following sentences should be substituted:

"For the fiscal year prior to July 1,1967, the USA National Committee was composed of the following members: Dr.M.M.Copeland, chairman, Mr.Francis Wilcox, Dr.Charles Heidelberger, Dr.Emil Frei,III, Dr.Michael Shimpkin and Dr.Lester Breslow. For the fiscal year 1967-68, Dr.Shimpkin and Dr.Breslow were retired from the committee and the new appointments are: Dr. Chester Stock and Dr.W. Ray Bryan."

On page 2, second paragraph, at the end of the second sentence the word "symposia" should be changed to "Conferences" in con-
TO: Dr. R. Lee Clark
FROM: Dr. Murray M. Copeland

SUBJECT: Provisional Minutes of Association of Cancer Institutes.


I would appreciate some further clarification of Dr. Farber's statement under the paragraphs related to subject matter on "Appropriation for Cancer Centers", on page 3. As you know, we are currently urging that cancer activity receive more visibility in all of the activated Regional Medical Programs, which is not the case in the four which have been implemented recently. The American College of Surgeons, including its liaison arrangements with other national medical organizations, has been selected, under contract, to study appropriate standards for providing the highest level of diagnosis and treatment for cancer patients. They are to make available these standards through the Surgeon General's office of the United States Public Health Service as a measure by which the medical care institutions of the country can evaluate their capabilities and by which individual Regional Medical Programs can estimate where additional support is needed.

From the minutes of the meeting I gather that Dr. Farber feels it is not necessary to have central cancer facilities (cancer centers) in each Regional Medical Program.

I presume that you will let Bill Simpson know of the corrections needed.

Sincerely, Murray
August 7, 1967

Memorandum to: Members of the Association of Cancer Institute Directors
From: William L. Simpson, M.D.
Re: Minutes, roster, etc.

Accompanying this note is a set of provisional minutes for the meeting of A.C.I.D./A.A.C.I. held at the Oklahoma Medical Research Foundation on June 18, 19, 20, 1967.

At the meeting in Oklahoma City several persons asked for lists of the current representatives of the cancer institutes. I enclose a copy of the last roster of members but assume that a revised and up-to-date list will be prepared by the new Secretary-Treasurer when member institutes have filed the names of their representatives as provided in the revised by-laws.

Preparation of these minutes is my last function as Secretary-Treasurer of A.C.I.D. I want to thank all of the members and especially the other Officers who have served during the last several years for allowing me the privilege of this office.

WLS: mv
encl.
ASSOCIATION OF CANCER INSTITUTE DIRECTORS

The Association of Cancer Institute Directors met for dinner in the Regency Room of the Oklahoma City Golf and Country Club on Sunday, June 18, 1967. Members were guests of the Oklahoma Medical Research Foundation on Monday morning, June 19, at which time scientific presentations were made by seven members of the staff of the Cancer Division. Following lunch at the Faculty House, the Directors met in business session at 1:30 p.m. in the Garden Room of the Faculty House.

Present

Present were: Drs. Copeland with Clark, Condit with Eliel, George Foley with Farber, Horsfall, Lemon, Kimball with Liverman, Rusch, Shubik, Simpson, Talbot, Warren, Weinhouse, Wood, Bodily, Mr. Haskins and Dr. Cook with Dr. Spratt, and Miss Stephan with Dr. Endicott.

Absent

Absent: Drs. Ausman, Curreri, Gellhorn, Jacobson and Moore.

Minutes Corrected

Minutes of the meeting of June 5, 1966 were corrected to show that Drs. Weinhouse and Wood were present and Dr. Talbot was absent from the meeting. It was moved by Dr. Warren that the minutes be approved as corrected. Motion was seconded and passed.

Death of Dr. Silliphant

At the request of Dr. Farber, the Chairman, Dr. David Wood informed the Association of the death on May 29, 1967 of Dr. William Merrill Silliphant, who had met with the Association as the alternate representative from the Cancer Research Institute of the University of California, San Francisco. It was moved by Dr. Wood that the Association of Cancer Institute Directors adopt the following resolution in tribute to Dr. Silliphant:

Resolution

With deep regret the Association of Cancer Institute Directors records its sorrow at the death of William Merrill Silliphant, M.D., on May 29, 1967, and expresses its deepest sympathy to Mrs. Silliphant and the other members of his family in their bereavement. We have long recognized the outstanding contributions of Dr. Silliphant to pathology, to medical education and to scientific administration and held him in the highest esteem as a physician, scientist and friend. His genial companionship and wise counsel as a member of this Association will be sincerely missed by all of us.

The resolution was adopted, with members standing in silent tribute to our late colleague.

Cancer Congress

Dr. Clark initiated a discussion of plans for the Cancer Congress in 1970 by outlining the manner in which members of the American Committee for the International Cancer Congress had been selected by Dr. Keith Cannon of the National Academy of Sciences. As originally named, the U.S.A. National Committee included the following: Dr. M. M. Copeland, Chairman, Mr. Frances Wilcox, Dr. Charles Heidelberger, Dr. Emil Frei, III, Dr. Chester Stock and Dr. W. Ray Bryan. Since the time of the original appointment, Drs. Stock and Bryan have left the Committee and have been replaced by Drs. Michael Shimkin and Lester Breslow.
Invitation from National Academy of Sciences

Dr. Farber read a letter from Herbert M. Gardner of the National Academy of Sciences of the National Research Council inviting the Association of Cancer Institute Directors to name a member of the National Organizing Committee, Tenth International Cancer Congress. It was moved by Dr. Spratt that the Chairman select one or two members to serve on the National Organizing Committee and submit these names to the U.S.A. Committee for appointment. Motion was seconded and carried.

Tentative Schedule Cancer Congress

Dr. Copeland reviewed the steps taken by the U.I.C.C. concerning the Congress, following which agreement was reached that pre-Congress symposia are to be held at Houston on May 22, 23 and 24, 1970; at the conclusion of the pre-Congress conferences, an opening ceremony will be held Sunday evening and the regular meetings of the Tenth International Cancer Congress would follow Monday through Friday, May 25 through May 29.

Pre-Congress Open Houses

It is still hoped that there can be some symposia or "Open Houses" in various parts of the United States prior to and after the Congress. Primarily these would be planned at cities where foreign visitors could easily stop on their way to or from Houston. Dr. Clark stated that he would appoint a sub-committee to plan such pre- and post-Congress visitations or open houses.

Membership U.I.C.C.

The question of special membership by the Association of Cancer Institute Directors in the International Union Against Cancer was discussed at length. After the qualifications for membership in the U.I.C.C. had been reviewed, it was suggested by Dr. Endicott that several institutes might apply for individual memberships. Dr. Copeland outlined the procedure for this. An application must be sent to the Secretary-General of the U.I.C.C. in the Geneva office. It is to be accompanied by an audited financial statement, a copy of the constitution and an annual report for the preceding year. The application will be referred to the U.S.A. representatives on the U.I.C.C. for recommendations; final decisions will be made by the Council.

Changes in By-laws

The Secretary distributed copies of proposed changes in the by-laws to accomplish the objectives outlined at the previous meeting. Following extensive discussion of the proposed changes, the members adopted the new name for the Association as "Association of American Cancer Institutes" on a motion by Dr. Talbot, which was duly seconded and carried. Section 1, Article III - Qualifications for Membership - was revised on a motion by Dr. Horsfall, which was seconded by Dr. Wood and carried, to read as follows: "Membership in this organization will be limited to those American institutes whose principal activities are concerned with the study and/or treatment of cancer. Each such institute shall notify the Secretary in writing of the names of its senior medical executive and his alternate, who will constitute the active membership of the Association".

Oklahoma Health Science Center

At this point Dr. Eliel introduced Dr. Joe White, Dean of the Faculty of the University of Oklahoma School of Medicine, who described plans for development of the Oklahoma Health Science Center. These plans call for the expenditure of $200,000,000 during the next ten years. Following the presentation, Dr. White was thanked by the Chairman for his lucid description of their plans.

Membership in U.I.C.C.

The Committee turned again to the question of membership in U.I.C.C. by the Association of American Cancer Institutes. Following further discus-
sion, it was moved by Dr. Wood that the Association explore and proceed to take such steps as are necessary to nominate an appropriate number of members of the National Academy of Science U.S.A. Committee of the International Union Against Cancer. Motion was seconded by Dr. Horsfall and passed.

**Congressional Appropriations**

The members next discussed Congressional appropriations for the National Cancer Institute and regional medical programs and the legal status of institute directors who testify before Congressional committees. Conflicting opinions had been received by various directors from their legal counselors regarding possible consequences of appearing before such committees. Legal opinions ranged from one extreme stating that the chief executive officer cannot disassociate himself from the institution and may jeopardize the tax-free status of the institution if he makes any attempt to influence legislation. At the other extreme was the opinion that it is not only proper, but actually a duty of any citizen to appear before a Congressional committee upon invitation and that such appearance has nothing whatsoever to do with the tax-exempt status of his institution.

**Meeting Adjourned**

At 5:15 p.m. the meeting was adjourned until Tuesday morning. Members participated in a cocktail party at the Faculty Club as guests of the Oklahoma Medical Research Foundation and in dinner at the Beacon Club in downtown Oklahoma City.

**Meeting Re-convened**

The meeting was reconvened in the Garden Room of the Faculty House at 9:15 a.m.

**Appropriations for Cancer Centers**

Dr. Farber opened the meeting by reviewing the recommendations of the citizens Committee for Cancer Center Appropriations. These included the recommendation of $41,000,000 for support of 20 cancer centers and $10,000,000 in non-matching construction money for such centers. He pointed out that Senator Hill was still firmly opposed to non-matching grants for construction.

Dr. Clark appealed to the Association of American Cancer Institutes to provide leadership in development of 20 regional cancer centers and questioned whether the Association would itself be eligible for a planning grant to study the resources for cancer control and needs on a national basis.

Dr. Farber reviewed the history of development of the concept of a series of cancer institutes from the earliest days when cancer research was "outside the main stream of medicine". It was generally agreed that the concept of cancer institutes was not really compatible with the Heart Disease, Cancer and Stroke program. There will probably be at least 50 regional medical programs before that activity can be considered completed, but there does not appear to be a need for that many cancer centers and no need for them all to be on a regional basis.

**Strengthening Cancer Control**

Dr. Endicott suggested two approaches to the problem of cancer control programs. First is the development of specialized cancer centers providing competence in training certain kinds of research, etiology, prevention, etc. These could serve as national or even international centers. The Public Health Service should provide long-range general support for these centers. At the present time it is thought that there might be approximately 20 of these needed. Two, we must simultaneously try to improve
cancer care and training in medical schools. Ultimately some of these medical school related programs may develop into national centers. Dr. Endicott outlined four tools available for accomplishment of the objectives listed:

1. The clinical cancer center. These have not been well accepted by medical schools, but are a most useful part of the cancer center program.

2. Radiation therapy training centers. Grants to establish these were initiated in 1960, at which time the deplorable shortage of trained radiation therapists in the United States was acknowledged. Even with an increase to about 15 such centers, there are only 50 residents in training this year.

3. Cancer clinical training grants. These grants replaced the $25,000 formula grants to medical schools and require that the schools develop strong plans for inter-departmental training programs. They have been well accepted, requests for such grants exceed the funds available at the present time.

4. Cancer center planning grants. These grants have been little publicized and little used. These grants are intended to permit an institution to plan its own strong cancer program.

The question was raised as to whether the Association of American Cancer Institutes could qualify as an applicant for a planning grant and use such a grant to study the resources and needs for cancer centers on a national basis. It was recognized that this could not be done unless the Association of American Cancer Institutes were to become a corporation. Following discussion of the pros and cons of such action, it was moved that the officers be empowered to appoint a committee to examine the purposes and objectives of the organization, the manner of organization and whether it should be incorporated, with a report to the Association at the next meeting. The motion was seconded and carried.

At this point Dr. Farber had to leave and asked Dr. Endicott to assume the chairmanship of the meeting.

With respect to a report on activities of the National Cancer Institute and actions of the Congress with respect to budgets, Dr. Endicott distributed copies of a report, which he had asked Miss Stephan to prepare. Moved by Dr. Warren that the Association congratulate Dr. Endicott and Miss Stephan on the clarity and completeness of this report. The motion was unanimously carried.

The Chairman called on Dr. Clark to present the slate of officers proposed by the Nominating Committee. Nominations were - for President, Dr. Timothy Talbot; for Vice president, Dr. Frank Horsfall; for Secretary-Treasurer, Dr. Henry Lemon. It was moved by Dr. Spratt that these officers be elected for 1967. Motion was seconded and unanimously carried.

After consideration of several possible sites for the next meeting, it was moved by Dr. Lemon that the Association accept the invitation to meet at the Oak Ridge National Laboratory, December 10 to 12, 1967. This was seconded and carried.
A number of potential new members of the Association were named, but by general consent it was agreed to postpone action until the question of incorporation of the Association had been resolved.

The meeting adjourned at 11:30 a.m.

Respectfully submitted,

William L. Simpson, M.D.
Secretary-Treasurer
ASSOCIATION OF CANCER INSTITUTE DIRECTORS

Howard Bodily, Ph.D.
State Department of Public Health
Bureau of Chronic Diseases
2151 Berkeley Way
Berkeley, California 94704

R. Lee Clark, M.D.
Murray Copeland, M.D. (Alternate)
M. D. Anderson Hospital and Tumor Institute
Texas Medical Center
Houston, Texas 77025

A. R. Curreri, M.D.
Clinical Oncology Division
Department of Surgery
Medical School
University of Wisconsin
Madison, Wisconsin 53706

Leonard P. Elliel, M.D.
Oklahoma Medical Research Institute
825 Northeast Thirteenth Street
Oklahoma City, Oklahoma 73104

Kenneth H. Endicott, M.D.
National Cancer Institute
National Institutes of Health
Bethesda, Maryland 20014

Sidney Farber, M.D.
Children's Cancer Research Foundation
35 Binney Street
Boston, Massachusetts 02115

Alfred Gellhorn, M.D.
Institute of Cancer Research
College of Physicians and Surgeons
Columbia University
New York, New York 10032

Frank L. Horsfall, Jr., M.D.
Leo Wade, M.D. (Alternate)
Sloan-Kettering Institute for Cancer Research
New York, New York 10021

Leon O. Jacobson, M.D.
Argonne Cancer Research Hospital
950 East 59th Street
Chicago, Illinois 60637

Henry M. Lemen, M.D.
Eugene C. Eppley Institute
42nd and Dewey Avenue
Omaha, Nebraska 68105

James P. Liverman, Ph.D.
R. F. Kimball, Ph.D. (Alternate)
Oak Ridge National Laboratory

Biology Division
Post Office Box Y
Oak Ridge, Tennessee 37830

George E. Moore, M.D.
Robert K. Ausman, M.D. (Alternate)
Roswell Park Memorial Institute
Buffalo, New York 14203

Harold P. Rusch, M.D.
McArdle Memorial Laboratory
The University of Wisconsin
The Medical School
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Philippe Shubik, M.D.
Institute for Medical Research
The Chicago Medical School
2020 West Ogden Avenue
Chicago, Illinois 60612

William L. Simpson, M.D.
Detroit Institute of Cancer Research
4811 John R Street
Detroit, Michigan 48201

John S. Spratt, Jr., M.D.
Ellis Fischel State Cancer Hospital
Columbia, Missouri 65201

T. R. Talbot, Jr., M.D.
The Institute for Cancer Research
7701 Burholme Avenue
Fox Chase
Philadelphia, Pennsylvania 19111

Shields Warren, M.D.
Cancer Research Institute
New England Deaconess Hospital
194 Pilgrim Road
Boston, Massachusetts 02215

Sidney Weinhouse, Ph.D.
Fels Research Institute
Temple University School of Medicine
Philadelphia, Pennsylvania 19140

David A. Wood, M.D.
Cancer Research Institute
University of California Medical Center
1282 Moffitt Hospital
San Francisco, California 94122

August 7, 1967
George T. Pack, M. D.
Pack Medical Group
139 East Thirty-Sixth Street
New York, New York 10016

Dear George:

I was most interested to learn from your recent letter that you are planning a cancer institute. This is a great idea, and knowing you I am sure it will be outstanding. If there is any way that we can be of help we should like to do so.

Generally speaking, the institution you are building would be eligible for participation in ACID. I shall send you the present by-laws of this organization. We are now studying a proposal to change the name to the Association of American Cancer Institutes. A subcommittee has been appointed to study the ramifications of the situation and to see whether federal, state, and philanthropic institutions can be incorporated into a single non-profit body or whether this would involve us in legalities concerning membership, lobbying, etc. The ACID organization has been extremely useful in getting the various institutions in this country to work together to exchange ideas and personnel and to cooperate in our efforts to attain a mutually dedicated goal. Also, I think we have all derived a great deal from the intimate information gained during the ACID meetings which would not have otherwise been possible.

I have another idea relative to this but will wait until I can discuss it with you personally, as it will require your kind of knowledge and considered judgement as to appropriateness since the proposal I am thinking about would constitute an international organization.

I agree with you entirely regarding the Tenth International Congress and its present Program Committee, and would like to appoint a surgeon to this group. I am contemplating requesting that Murray be made cochairman of the Program Committee as well as Secretary General. This would keep him fully advised during the developmental phases of the program and since he will be responsible for the physical arrangements, the planning could then proceed as the program is evolved. I would like to have you serve...
on the Program Committee as surgeon and believe that as vice-president of the UICC this would have an excellent effect—both insofar as getting clinical and surgical problems adequately considered for the Tenth Congress and assuring their acceptance at the international level. Please think about this and let us know. I realize we must not ask too much of you; you have always asked too much of yourself without the addition of outside duties.

My very best regards and sincere appreciation for your help in Washington. You said exactly what I had in mind but could not voice.

Sincerely yours,

R. Lee Clark, M. D.
Director and Surgeon-in-Chief

cc: Dr. Murray M. Copeland
June 14, 1967

R. Lee Clark, M.D., Director
University of Texas M. D. Anderson Hospital
Texas Medical Center
Houston, Texas 77025

Dear Lee:

I was interested in the A.C.I.D. organization. As you know, I have reached emeritus status at the Memorial Hospital, although I have surgical privileges there. Our Foundation has grown, and we have a considerable sum of money and a 16-acre tract of land along the Palisades on the Hudson where we are contemplating building a small cancer institute.

On this account I am interested in the requirements for the A.C.I.D., and I would like to know the organizations which are represented. We are undoubtedly ineligible at the moment, but I think we might qualify for eligibility after our research institute has been completed.

I shall write to you later concerning the last meeting in Washington. I am more incensed than ever, may I say, about Dr. Heidelberger's (or, as you call him, "Dr. Heidelberg's") arrogance in neglecting to name a clinician on the Program Committee, and particularly one located in Houston. I believe there should be a co-chairman of the Program Committee as a whole, and that co-chairman should be a clinician, and he should be on the staff of the M. D. Anderson Hospital.

Furthermore, I feel very strongly that Henry Kaplan, although he is a distinguished scientist, should not be entrusted, solely, with the arrangement of even the program on Radiation Therapy, because his principles and application of irradiation to the treatment of cancer are a bit controversial. Having sat with him in several conferences, I believe him to be not too interested in surgical therapy. I would insist, if I were you, that there should be a surgeon on the Program Committee, and that, furthermore,
there should be a co-chairman on Radiation Therapy, and I would suggest that co-chairman to be Gilbert Fletcher, whom I think is the best radiation therapist in the world today. The co-chairman should be in Houston.

I am writing to Francis Wilcox about this, although I know he is strong for Dr. Heidelberger as they are both from Wisconsin.

With best regards, I am

Sincerely yours,

George T. Pack, M.D.
ACID MEETING
DETAILED AGENDA

Sunday, June 18th

6:30 and 7:00 p.m. Transportation leaves Downtown Holiday Inn for Regency Room, Oklahoma City Golf and Country Club for cocktails and dinner.

9:00 p.m. Return to Holiday Inn.

Monday, June 19th

8:45 a.m. Transportation leaves Holiday Inn for Oklahoma Medical Research Foundation.

9:00 - 12:00 Presentation of Cancer Section Program, Goddard Auditorium and tour of Foundation.

Noon Lunch at Faculty House, Garden Room.

1:30 - 4:30 p.m. Meeting at Faculty House, Garden Room.

5:00 - 6:00 Cocktails at Faculty House with staff and faculty.

6:00 Return to Holiday Inn.

7:00 Dinner at Beacon Club, Starview Room, 32nd floor, First National Bank Building, 123 North Robinson, (4 blocks East and 1 block North of Holiday Inn. Transfer to Beacon Club elevator at 29th floor.) Shuttle transportation available or walk.

Tuesday, June 20th

8:45 a.m. Transportation leaves Holiday Inn for Faculty House.

9:00 - 12:00 Meeting, Garden Room, Adjourn

Noon Lunch, Faculty House
ASSOCIATION OF CANCER INSTITUTE DIRECTORS
Oklahoma Medical Research Institute
Business meeting Monday, June 19; and Tuesday, June 20, 1967

Agenda

1. Correction and approval of minutes of meeting of June 5, 1966
2. Plans for Cancer Congress in 1970
3. Plans for developing testimony on needs of cancer institutes and for presenting material to House and Senate Committees
4. Revision of by-laws to recognize membership by institutions rather than individual directors
5. Definition of institutions eligible for membership
6. Report on legislation and activities of the National Cancer Institute
7. Report on Oklahoma Regional Planning for Heart Disease, Cancer and Stroke
8. General discussion of Heart Disease, Cancer and Stroke Program
9. Discussion of plans for development of an Oklahoma Health Center by Dean James L. Dennis of the University of Oklahoma School of Medicine
10. Election of officers for 1967
11. Other business
In order to change the name, constitution and by-laws as agreed at the meeting of the Association of Cancer Institute Directors in June 1966, the following specific amendments would appear to be required. Words to be deleted are in parentheses; those to be added are underlined.

ARTICLE I

The name of this organization shall be the:

THE ASSOCIATION OF CANCER INSTITUTES (DIRECTORS)

ARTICLE III

Membership

Section 1 - Qualifications for Membership: Membership in this organization will be limited to (the senior scientific executives of) those institutions and autonomous divisions and departments of institutions whose principal activities are concerned with the study and treatment of malignancies. Each such institute shall notify the secretary in writing of the name(s) of its representative(s). These representatives will constitute the active membership of the Association.

(Section 4 - Honorary Membership: The Association may elect as corresponding members the scientific directors of cancer institutions of foreign countries. Eligibility for nomination and the election procedure will be as outlined in Sections 1, 2 and 3.)
ASSOCIATION OF CANCER INSTITUTE DIRECTORS
Oklahoma Medical Research Institute
Business meeting Monday, June 19; and Tuesday, June 20, 1967

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10. Election of officers for 1967
11. Other business
MONDAY - JUNE 19 '67 (ACI0 mLg)

Dr. Ellis -
1. Discussion ARla Med Fd.
2. To look for Cl. Ca Res Center
3. Across Short - Med Sch Hop
4. Academic Affiliation
   All full time
   No Adm or Financial Fnd Affiliation
   AIl Staff Carries a Corresponding
   Medical School Dept. Affiliation
5. Financing
   Budget 2.1 M x Grants x funds raised in AR-LA
   Endowment 1.5 M
   Will be 2.1 M by 1970 (Stan. Trust)
6. Phy Facilities
   40,000 sf
   15,000 - CA
   15,000 - Heart
   10,000 - Psychosomatic & Neurovascular
7. Program of Research
   - Predominately Biochemistry
     - Predoctoral Students (28) now
       working in the Foundations Courses in Med. Sch.
   and at Hermann (Okla U.) Research in Foundation
Research Counsel or Direction
Heart in lipids
Ca - variable

1. Continuity -
Due to busy appointments
No University Tenure

Dr. Paul Condit - Cancer Program
1. Clinic 60 to 60 outpt. a week
  10 beds

2. Leukemia is principal chemotherapy unit
3. Studying cell abnormalities
4. Eg. Cecal Ca upper air passages
   Methotrexate
   Coordinate with Ra & Dept. in Med School.

5. Exploratory Therapy - a principal effort to get maximum returns from use of a minimum no. of patients. (Methotrexate 9 4 days in test)?

Dr. Chanes -
Methotrexate Studies - Renal effects & excretion
Renal tubular excretion Cancer renal toxicity

Dr. Griffin -
Alkaline Phosphatase Specific action
Dr. Richard Hollakley - Human Cancer
Autosomal Dominance vs Human Cancer
Lymphocytes cultured 76 hrs. used for chromosome
coanalysis.

Dr. McGuffie - Viruses and Leukemia
Cytoplasmic - DNA viruses as found in
Animal Tumors

Dr. Thomas Schissel - Carcinogenesis
Dr. Kel Morgan - Generation cycle of cells + Drug

and Irradiation

Dr. Condit - Site of action Tolu and Compounds

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Am As CA Is TAC I
February 22, 1967

Dear A.C.I.D. Members:

Accompanying this note is a set of provisional minutes for the Association of Cancer Institute Directors meeting held June 5-7, 1966. It is a source of some embarrassment that I must, for the second time in four years, admit that I have lost a briefcase with many notes and letters by having the trunk of my car rifled. In this instance the notes taken at the meeting are among the missing papers and I must ask you to help me reconstruct the list of persons who attended that meeting. I am sure that I have overlooked some members (and maybe included some who were not there). Will you examine the list and notify me of errors?

At the same time as I ask your help in identifying those present, may I also ask those who attended the dinner on Sunday night at the Century Association to reimburse Dr. Frank Horsfall for that dinner? His note was also lost in my briefcase, but I think each of us owes him $12.54 for the evening.

With respect to the spring meeting of the A.C.I.D. (or Association of Cancer Institutes as agreed last June), Dr. Farber has advised me that his schedule for the week of May 22 is too heavily committed to permit him to schedule a meeting in Oklahoma City at that time. Len Eliel had been informed by someone in Dr. Farber’s office that he had no commitments on the 22nd and 23rd without realizing that the rest of the week was so heavily committed to meetings.

Dr. Farber has suggested that the meeting in Oklahoma City be delayed until June 18, 19 and 20 with the usual schedule of arrival in Oklahoma City on Sunday night, June 18 in time for dinner and at least a social gathering. Will you please check and return the enclosed card to indicate if you can attend a meeting on those dates, and also to add or delete names of persons to the list that is a part of the accompanying minutes?

Cordially yours,

William L. Simpson, M.D.
Secretary-Treasurer

WLS:mv
encl.

returns from Conrad June 16
ASSOCIATION OF CANCER INSTITUTE DIRECTORS

The Association of Cancer Institute Directors met for dinner on Sunday, June 5, 1966 at the Century Association. The Directors were guests of the Sloan-Kettering Institute on Monday, June 6, and heard presentations of scientific work from ten staff members at the Donald Walker Laboratory in Rye, New York. The Sloan-Kettering Institute entertained the Directors on Monday evening at the Union Club. The Directors met in business session in the Kerb Lounge of the Memorial Cancer Center, Tuesday, June 7, 1966.

Present

Present were: Drs. Ausman, Bodily (for Breslow), Brown, Clark, Copeland, Curreri, Eliel, Endicott, Farber, John Foley (Nebraska), Foley (Boston), Hollaender, Horsfall, Jacobson, Lemon, Moore, Spratt, Simpson, Talbot, Vanderwarker, Wade and Warren; and Miss Stephan.

Absent

Absent: Drs. Breslow, Gellhorn, Rusch, Shubik, Weinhouse and Wood.

Meeting Convened

The meeting was called to order by the Chairman at 9 a.m.

Minutes Approved

Minutes of the meeting of the Association of February 5, 1966 were approved as distributed by the Secretary on a motion by Dr. Horsfall.

Change in Name

The members considered the possibility of expansion of the Association and at the same time recognized the need to define the qualifications for membership. After lengthy discussion, it was moved by Dr. Eliel, seconded by Dr. Spratt and carried that the name of the Association be changed to the Association of Cancer Institutes. Inasmuch as such action would require a change in the by-laws, it was agreed that the by-laws should be examined and that changes might be suggested so as to define the qualifications for membership, etc. Moved by Dr. Spratt that the suggested changes be circulated by mail in advance of the next meeting and that the President appoint a committee of members to recommend such changes. The motion was carried.

Publicity

Problems of publicity such as have affected cancer institutes recently were discussed. Although it was generally agreed that publicity concerning cancer research has served useful purposes in the past, there has recently been excessive publicity given to premature results. Dr. Wood suggested that Directors should review all releases before they are given to science writers. Dr. Endicott indicated that the major problem was education of the scientist so that he could communicate effectively with representatives of mass media. Institutions of substantial size can probably handle these problems best by appointment of an information officer who has had a background in newspaper work.

Animal Legislation

Dr. Endicott reported that the Poague Bill regulating traffic in animals had passed the House of Representatives. It is anticipated that a second bill to be introduced as an administration bill would give the Secretary of Health, Education and Welfare authority to up-grade animal care in laboratories. Construction funds may become available for improvement of animal facilities. Following discussion of a possible resolution concerning
care of experimental animals, the Secretary read the following excerpt from minutes of the meeting of May 14, 1962:

"The Association of Cancer Institute Directors recognizes, on the basis of long concern with animal experimentation, that the quality of animal research is greatly influenced by the health and well being of the experimental animals employed in that research. In the furtherance of this conviction, the Association hereby endorses the statements published by the Animal Care Committee of the National Research Council on rules for the humane treatment of experimental animals.

"It is recognized that individual problems in which animal experimentation is required vary and must be regulated within each qualified scientific institution. It is, therefore, recommended that each member institution adopt as its basic animal care policy the rules for humane use of experimental animals referred to above and that the adoption of such a basic policy be affirmed to the President and Secretary of this Association in writing."  

It was agreed that this resolution should be reprinted in the minutes of the present meeting and that members be asked to notify the President and Secretary of their compliance with the regulations concerning the care of experimental animals.

Progress towards implementation of the Heart Disease, Cancer and Stroke legislation was next discussed. There appeared to be a consensus that the planning funds available through the Heart, Cancer, Stroke Council will be allocated only to applicants who present programs in all three of these categorical areas. The Heart, Cancer, Stroke Council will probably refer single area applications to individual institutes within the National Institutes of Health for review and possible funding.

The National Cancer Institute has allocated most of the $800,000 available in fiscal 1966 for planning grants in the cancer field. It is expected that $800,000 more will be available for planning grants for cancer centers in fiscal 1967. Applications for such planning grants are not limited by the restrictions imposed on applicants for the broader heart, cancer, stroke planning grants.

Dr. Endicott stated that the improvement of cancer training and research called for a two-pronged attack. First, the National Cancer Institute should attempt to strengthen every medical school in its cancer education by means of cancer clinical training grants. Second, the National Cancer Institute should strengthen the existing cancer centers and make provisions for new ones for both research and training. This will require the use of cancer center planning funds initially.
Single Instrument Support

Members turned to discussion of the single instrument support program for cancer centers. Dr. Endicott reviewed the examples of such support at the McArdle Laboratory and Institute for Cancer Research in Philadelphia, and Dr. Horsfall reviewed the steps by which the single grant had been developed for Sloan-Kettering. Although the Public Health Service will probably not extend the single instrument support widely until more experience has been gained in those centers where it is now being tried, Dr. Endicott indicated their willingness to explore any combination of grants and contracts that would appeal to an individual institution.

Invitation to International Cancer Congress

Dr. Clark stated that the American Committee of the International Union Against Cancer had approved the request from the M. D. Anderson Hospital and Tumor Institute that the 10th International Cancer Congress be held in Houston in 1970 and that they would present this request to the International Union in Tokyo. He invited the Association of Cancer Institute Directors to act as a co-sponsor of the Congress with M. D. Anderson as host. He explained that this would not involve financial support from the cancer institutes. It was moved by Dr. Horsfall that the Association of Cancer Institutes enthusiastically supports the invitation to hold the 10th International Cancer Congress in Houston in 1970 and that this endorsement be communicated to the committees responsible for extending the invitation.

Adjournment

The meeting was adjourned for luncheon in the cafeteria of the Keb Lounge.

Meeting Reconvened

Following luncheon the meeting of the Association was reconvened.

Fringe Benefit Survey

The Secretary presented a brief summary of the survey that had been conducted on fringe benefits for employees of cancer institutes. He agreed to circulate a more comprehensive report to the members at a later date.

Dues

Following some discussion it was moved by Dr. Horsfall and seconded that expenses of the Association be met by assessment of dues or registration fees for attendance at meetings and that some such provision be considered in connection with the proposed revision of the by-laws. Motion was carried.

Officers

The Secretary called attention to the fact that officers for 1967 should be elected at the fall meeting of the Association. The Chairman agreed to designate a nominating committee well in advance of that meeting so that there would be time for them to give full consideration to their recommendations.

Next Meeting

Inasmuch as the International Cancer Congress in Tokyo and associated travel may interfere with the fall meeting at the usual time, it was agreed that a meeting will be called for Bethesda probably on September 25, 1966 if there is sufficient business to require one, and that if there is not, the fall meeting will be dispensed with and the next regular meeting will be held in April or May 1967 at the Oklahoma Medical Research Foundation.

Human Experimentation

Members next joined in a discussion of problems related to experimentation with human subjects. At the Chairman's request, Dr. Horsfall reviewed in detail the procedures that have been set up to evaluate proposals for investigation and to secure informed consent from subjects.
Copies of the outline of procedures used at the Memorial Cancer Center and representative forms for consent were provided by Dr. Horsfall and are attached to these minutes.

Dr. Horsfall Thanked

Members of the Association expressed their appreciation to Dr. Horsfall and the Sloan-Kettering Institute for the fine arrangements for the meeting and for their generous hospitality during these three days.

Adjournment

The meeting adjourned at 2:15 p.m.

Respectfully submitted,

William L. Simpson, M.D.
Secretary-Treasurer
I understand that the doctors at Memorial Hospital and James Ewing Hospital are engaged in research and the study of the nature of disease and of new methods of diagnosis and treatment. I have been informed of the nature of a new procedure or study under clinical investigation known as PRODUCTION AND USE OF ANTIBODY SPECIFIC FOR LEUKEMIA.

Drug treatment of children or adults with acute leukemia can occasionally produce periods where the patient temporarily returns to complete good health. Unfortunately, these periods are almost always of short duration and the leukemia comes back. It is thought that there are a few leukemic cells remaining which are not destroyed by the drug and which then grow and cause the return of the leukemia. It is believed that it may be possible to use antibody against the few remaining leukemic cells so that the children might be permanently cured. This antibody, it appears, can only be made in other human beings.

I have been informed that leukemic cells are withdrawn from a leukemia patient. The cells are then specially treated by irradiation to inactivate them and are thereafter injected into a volunteer patient who is suffering from advanced cancer. The cancer patient is expected to produce an antibody against the leukemic cells.

Serum containing the antibody is withdrawn from the blood of the cancer patient, using every possible precaution to exclude cancer cells, bacteria and viruses from this material.

It is hoped that injection of the serum containing the antibody will prolong the life of the leukemia patient or otherwise be beneficial to him, and with this knowledge I hereby consent to my child's participation in the project and injection of the serum into my child.

I have been offered the opportunity for further discussion of this procedure with my child's physician.

Although I understand that the purpose of this procedure or study is to develop improved methods of diagnosis or treatment, I understand that at the present time no representation can be made that my child's participation will be directly beneficial to him (her), or that my child will be cured.
I voluntarily consent to the performance of this procedure on my child and his (her) participation in this study with an understanding of the known possible effects or hazards that might occur in the course thereof, and the further understanding that not all effects of such procedure are known.

Patient Number _______________    Patient Name ____________________________

Date ________________________    By: ________________________________

Signature and Relationship to Patient

Witness: ______________________

NOTE

If there is anything that you do not understand about this explanation, ask the doctor for further information.

PHYSICIAN'S STATEMENT

I have offered an opportunity for further explanation of this procedure or study to the individual whose signature appears above.

Signed: ________________________

Date _________________________
MEMORIAL HOSPITAL
JAMES EWING HOSPITAL

PATIENT'S CONSENT (NEW PROCEDURE, STUDY OR DRUG UNDER CLINICAL INVESTIGATION)

I understand that the doctors at Memorial Hospital and James Ewing Hospital are engaged in research and the study of the nature of disease and of new methods of diagnosis and treatment. I have been informed of the nature of a new procedure or study or drug under clinical investigation known as

**THERAPEUTIC TRIALS OF ________________________________**

This procedure consists of administration by mouth, intravenously, intramuscularly, or into the body cavities of one or more chemicals that may have some therapeutic effect on disease. These chemicals may be toxic (not all possible hazards or effects are known) and, therefore, the exact dose to be used and the effect on the disease cannot be predicted. However, all drugs used have been carefully tested as much as possible, and studies in animals indicate that they may be of use in treating human disease.

I have been offered the opportunity for further discussion of this procedure or drug with my physician.

I understand that the purpose of this procedure, study or drug is to develop improved methods of diagnosis or treatment, but that at the present time no representation can be made that my participation will be directly beneficial to me.

I voluntarily consent to the performance of this procedure or participation in this study with an understanding of the known possible effects or hazards that might occur in the course thereof, and the further understanding that not all effects of such procedure or drug are known.

Patient Number_________________________  Patient Name_________________________

Date_________________________  BY:_________________________

Signature and Relationship to Patient

Witness:_________________________

**NOTE**

If there is anything that you do not understand about this explanation, ask the doctor for further information.

CIC-Chemo
PHYSICIAN'S STATEMENT

I have offered an opportunity for further explanation of this procedure, study or drug to the individual whose signature appears on the reverse side hereof.

Signed: ____________________________
I understand that the doctors at Memorial Hospital and James Ewing Hospital are engaged in research and the study of the nature of disease and of new methods of diagnosis and treatment. I have been informed of the nature of a new procedure or study under clinical investigation known as PRODUCTION AND USE OF ANTIBODY SPECIFIC FOR LEUKEMIA.

It has been explained to me that drug treatment of children or adults with acute leukemia can occasionally produce periods where the patient temporarily returns to apparent complete good health. These periods, however, are almost always of short duration and the leukemia comes back, probably because there are a few leukemic cells remaining which are not killed by the drug and which then grow and cause the return of the leukemia. It is thought that it may be possible to use antibody against the few remaining leukemic cells so that the children might be permanently cured. This antibody, it appears, can only be made in other human beings.

Persons agreeing to participate in the study planned will help show whether antibody can in fact be made which, when injected into a leukemia patient, will kill the leukemic cells without damaging the normal cells. During the study the participants would receive injections of human leukemic cells that will either be obtained directly from patients or will be grown in tissue culture. These cells will have been given enough x-ray to make them unable to grow (a somewhat similar technique is used to make some polio vaccine - in that case, the virus is killed and then injected so that it makes anti-polio antibody). Injections of cells will be given several times, probably two weeks apart. The cells will be injected under the skin. This may produce a small painless red bump which will go away shortly. Two weeks after the last injection, a blood sample will be taken. If, after laboratory tests, it is thought that the blood taken contains antibody that will kill the leukemic cells without damaging normal cells, serum from a blood donation will be used to treat the child from whom the leukemic cells were obtained originally. It may also be possible that other children or adults with the same type of disease may be benefited.

Many volunteers in the past have been injected with large numbers of live leukemic cells (cells not inactivated by irradiation) and not one of these volunteers has ever been reported to show any evidence of leukemia.
I have been offered the opportunity for further discussion of this procedure with my physician.

I understand that the purpose of this study is to develop improved methods of diagnosis or treatment, and that my participation may in no way be useful in the treatment of my disease.

I voluntarily consent to the performance of this procedure and participation in this study with an understanding of the known possible effects or hazards that might occur in the course thereof, and the further understanding that not all effects of such procedure are known.

Patient Number ____________  Patient Name ________________

Date ________________  By: ________________________________

Signature of Patient

Witness: ________________________________

NOTE

If there is anything that you do not understand about this explanation, ask the doctor for further information.

PHYSICIAN'S STATEMENT

I have offered an opportunity for further explanation of this procedure to the individual whose signature appears above.

Signed: ________________________________

Date ________________________________
MEMORIAL HOSPITAL
JAMES EWING HOSPITAL

PATIENT'S CONSENT (NEW PROCEDURE, STUDY OR DRUG UNDER CLINICAL INVESTIGATION)

I understand that the doctors at Memorial Hospital and James Ewing Hospital are engaged in research and the study of the nature of disease and of new methods of diagnosis and treatment. I have been informed of the nature of a new procedure or study or drug under clinical investigation known as Ca$^{47}$/Sr$^{85}$ AND TETRACYCLINE STUDIES IN BONE DISEASE.

This diagnostic procedure uses one or more radioactive isotopes. The amount of radiation delivered to the body and to other individuals is known and is considered safe. Each tetracycline test consists of an intravenous injection of a standard dose of tetracycline following which blood samples are drawn at variable intervals during the first 24 hours and thereafter once or twice daily for the following two days. Urine is also collected at the same intervals. The whole test may have to be repeated at intervals in order to evaluate the effect of treatment.

I have been offered the opportunity for further discussion of this procedure or drug with my physician.

I understand that the purpose of this procedure, study or drug is to develop improved methods of diagnosis or treatment, but that at the present time no representation can be made that my participation will be directly beneficial to me.

I voluntarily consent to the performance of this procedure or participation in this study with an understanding of the known possible effects or hazards that might occur in the course thereof, and the further understanding that not all effects of such procedure or drug are known.

Patient Number _______________ Patient Name __________________________

Date ________________________ By: __________________________________

Signature & Relationship to Patient

Witness: ______________________

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NOTE

If there is anything that you do not understand about this explanation, ask the doctor for further information.

CIC 085