HAROLD BOESCHENSTEIN 2/24/56

To E C. Ames -

Dear Ned -

Many thanks for the thought you + Bill Hazard have already given to the "Schepen problem" + the willingness of the old Fireman to help.

I have talked at length with Marshall Beech and he will be in touch with you + Bill. We are following your advice + are going to take full advantage of you —

Beck

Dear Beck:

After talking yesterday with John Black, Marsh Burch, and Bill Hazard, I have put down the following suggestions pretty much off the top of my head. Most of them were discussed yesterday. Burch may have covered them with you. For what they may be worth in this form, here they are. If you want me to help, I'm like a firehorse waiting to get out of the station.

The situation created by publication of Schepers' articles suggests that such steps as the following be taken:

1. Prepare a memorandum for salesmen in lay language to give them a story to tell when the problem is thrown at them in the field. This would develop the thought that Schepers' findings apply only to the most unusual conditions and have to do only with extremely fine fibers not in commercial production. This should be drafted by Messrs. Black and Burch with the assistance of Dr. Bishop.

2. Take the draft to Dr. Schepers and get his agreement that it accurately interprets his findings. This concurrence might be either a long-hand notation on the draft, or a letter stating his acquiescence in the statement as a reasonable interpretation for laymen of the findings set forth in his articles. This might be useful should it ever be necessary to rebut him as an expert witness.

3. Pin down the chronology in such a way as to throw doubt on the authenticity of Schepers' findings as they relate to Gardner's earlier work. Gardner never published a fully documented report about his inhalation experiments but in his 1941 report as Director of the Trudeau Foundation he stated that his experiments at Saranac had "demonstrated" that exposure to the dust of glass wool involved no hazard to the lungs because this Fiberglas material was not inhalable." This language is unqualified by weasel modifiers or weakening words. Gardner said "demonstrated" not "indicated." In an interim report earlier he qualified "demonstrated" with "apparently." Until Schepers got into the act, Gardner's findings have been accepted, without equivocation, by public health authorities, industrial hygienists, insurance actuaries, et al, as authoritative. In a sense, Schepers is desecrating the memory of Dr. Gardner by exhuming from his files ten years post-mortem, data that Dr. Gardner certainly would have brought to our attention had he regarded it as being of sufficient importance to modify the conclusions that he had reported to us as definitive. The two-year inhalation experiments were completed in 1941. Dr. Gardner died in 1946. In 1956 Schepers comes forth with this blast to cast doubt on the integrity of Gardner's work.

4. Probe for evidence that publication of the articles by Schepers may be a breach of faith. The files may no longer be available to show whether a formal contract was executed or whether Dr. Gardner undertook the work in the late '30's on the basis of a letter agreement. It is likely that there was an understanding of some nature that reports on the experiments would not be published without prior consent. My recollection is that this was a two-way street. We were careful not to quote Gardner without his consent; it is reasonable to suppose that Saranac was under a similar obligation not to publish without our consent. Obviously Schepers' articles cannot be expunged from the record now. But this point, if established satisfactorily, might help persuade Schepers to acquiesce in the "layman's version" suggested above.

5. Reactivate the medical advertising program along the pattern followed in the late '40's and early '50's. This was a modest program. I think we had six insertions a year each in JAMA and in MODERN MEDICINE. By alternating the insertions we had one ad each month. This was a low-budget program. Its long-range objective was to provide a continuing framework of reference to familiarize physicians with Fiberglas products. There is sufficient mention in medical literature to permit this program to be carried on effectively. More can be developed. Schepers' articles do not alter the fact that Fiberglas products are described elsewhere in medical literature as nontoxic, nonallergenic, nonirritating, etc. Lest such a campaign would seem to be "protesting too much" it should be handled by an agency qualified to sidestep the many pitfalls that beset any campaign aimed at the medical profession.

6. Employ or assign a qualified, competent industrial hygienist full-time to pull together the whole program.

7. Sponsor a new investigation at an institution other than Saranac to develop new findings to update and parallel those reported by Schepers. (Be sure that this institution has unassailable integrity.) This may take at least four or five years and a good many thousands of dollars, but it is basic and essential.

8. Appraise the present standing of the Saranac Laboratories by developing outside information to determine whether Schepers is indulging in genteel blackmail: To find out, for example, whether Saranac's business is slipping and whether he resorts to alarmist tactics to sell the Laboratory's services. Gather such information on a confidential basis, perhaps through Bowditch via Hazard, as a weapon in reserve.

9. Study the health record compiled by Fiberglas employees in Newark. This should be set up as a project to be supervised by an outside industrial hygienist consultant. It may involve an extensive chest x-ray program, study of sick absenteeism, and correlation of such data with insurance claims experience, workers' compensation cases, etc. Such evidence is empirical, but if the data are studied and correlated and interpreted by an independent industrial hygienist of reputation, they could be extremely useful and significant in many situations.

February 24, 1956