

American Medical Association

February 27, 1967

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Cincinnati, Ohio 45219

Dear Bob,

Upon my return from the National Cancer Institute workshop in Montreal I was distressed to find your letter of February 16. Thank you for the copy of the statement you made in Harrisburg. I will return it as soon as possible and, if I have any questions or comments, will drop you a further line.

This letter is to set the record straight between us in regard to my discussion of Charles Hine's paper. Fortunately, despite the fact that I only received his paper 10:30 the night before I had to discuss it, I wrote out my comments on some hotel stationery. You may have trouble reading my writing but I enclose a photocopy of the portion which pertained to you. Please note that I was never flippant about you nor did I intimate that you "take lightly the welfare of the public." My emphasis was that, if Bob Kehoe, the dean of us all in the field of lead, has only tentative data upon which to give advice regarding the setting of atmospheric lead levels, we cannot wait to have "authoritative advice" before doing something about air pollution. I hope very much, Bob, that you will use your tremendous experience and authority to provide leadership in what nearly everyone recognizes is necessary, namely, the taking of reasonable steps to maintain satisfactory air quality.

I have never been an experimental toxicologist so I have never been in a position to provide leadership in this area. My field of competence is in epidemiology and I feel that we cannot disregard the higher levels of lung cancer in urban than in rural areas nor the increasing disability from pulmonary emphysema. It seems to me we must give more consideration to the leadership which the public expects from us. We cannot wait ten or twenty years until we prove the association between pollutants and respiratory disease. As a matter of fact, we don't yet know how to design definitive studies.

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At the National Conference on Air Pollution in 1962, Barry Commoner said, "I believe that the history of modern pollution problems shows that most of them result from the same general fault. We have been massively intervening in the natural world without being aware of many of the biological consequences until the act has been performed and its effects--which are difficult to understand, and sometimes irreversible--are upon us." Doctor Commoner is a botanist but the principles he enunciated apply to the field of medicine as well as to other scientific areas. We do not have the data we need and I believe, rather than make statements in public for the press to pick up as "a little bit of air pollution may be good for all of us," which was quoted out of context from Carl Dernehl's remarks, we should express our concern when we feel it. It is my conviction that increasing air pollution is a menace to respiratory health and I conceive it my duty to state this conviction as a citizen and as a chest specialist, even though I am chief editor of a professional journal. My comments about you seemed timely to me because of our conversation the day before I made them. They were made with respect for your ability and integrity.

Doctor Hine's manuscript, which he tells me he wrote at the last minute so that it was only typed the late afternoon of the day before he presented it, is to be polished and submitted to the Archives for consideration. I would like to send it to you for review. It will probably be in better shape than it was when he presented it. I trust you will accept this assignment for us.

With kind regards,

Cordially,



Katharine R. Boucot, M. D.

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