

# 2 Speaker calls for action on nerve regeneration research

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— The day after the last Wakeman Award banquet two years ago, a group of paraplegics and their families founded Paraplegia Cure Research, an advocacy group, with headquarters in Washington. Its Bermuda Conference and dynamic program have a momentum of their own. PCR fosters research, promotes public and private support, and generates a sense of urgency and purpose.

— Very significantly, the Wakeman Award process itself, under the able direction of Dr. Molly Brazier and Dr. Stanley Appel, has stimulated fruitful meetings and exchanges of ideas.

Tomorrow's Wakeman Neurobiology Conference here at Duke Medical Center attests to this university's ongoing commitment.

## Liberation from wheelchairs

I could go on, but most importantly, underlying this activity, there is solid scientific accomplishment toward Mrs. Gardiner's and our goal of liberating paraplegics from their wheelchairs through regeneration research.

Because, according to scientists, the research effort required will take time, we must have a long-range perspective. As one paraplegic said to me, "If we work on the problem, I may get out of my wheelchair. If we don't, I won't."

It will take understanding and commitment on the part of paraplegics as well as scientists. No longer can we allow the fear of raising false expectations to be an excuse for inaction. Paraplegics are realists, but they hope for and desire continuing commitment to the job at hand. The time is past when paraplegics inquiring about cure-oriented research can be put off by learned descriptions of paraplegia research in general.

Paraplegics deserve in return for their patience, persistence and support of science, straight answers clearly distinguishing these areas of research from that aimed at a cure eventually liberating them from their wheelchairs. Paraplegics are less interested in research *per se* than in the very human results of research.

## Mutual understanding

One must appreciate that scientists require freedom of inquiry so essential to the free flow and development of ideas;



only in such an environment will basic science flourish. The scientists I have known in this enterprise are compassionate and also are motivated by a desire to improve the condition of their fellow man. We must recognize the complexity of this area of science.

A scientist easily could spend his entire life on this problem without finding the answer. There must be understanding on both sides; paraplegics must respect the scientific approach, while scientists must appreciate the urgency felt by paraplegics. There must be continuing, purposeful, and realistic dialogue between the two communities.

## Parallel research efforts

The basic research effort must go on in parallel with other research whose purpose is better accommodation to wheelchair living. It is not a matter of one or the other; both are necessary. All the research on better facilities, devices, rehabilitation and surgical techniques, epidemiology, etc. is important; in fact it is vital and should be encouraged and expanded. It is not unlike working on improvements to the iron lung while developing the Salk Vaccine.

People ask how we can afford such a dual approach. My reply is how can we not afford it? The 1975 Regeneration Task Force Report I mentioned estimated annual world-wide savings from a CNS research breakthrough might approximate \$20 billion. In addition to the 150,000 American paraplegics and their counterparts throughout the world, scientists point to large numbers of sufferers of other neurological disorders who would benefit from such a

breakthrough. They include many forms of stroke, focal epilepsy, chronic multiple sclerosis, cerebral palsy and mental retardation.

While the economic savings would be enormous, the potential savings in human suffering are incalculable. In view of this potential payoff, the current \$5 million annual CNS regeneration research commitment of the U.S. government is woefully inadequate!

## 10-point program

As we recognize Dr. Hamburger and Dr. Weiss, two giants of neuroscience, we look back in awe at their enormous accomplishments. It is also fitting on this occasion to look forward, as our collective business remains unfinished. To help bring it to the ultimate conclusion we all seek, I urge the following "10-Point Program for Action":

1. Form a strategy council of leading scientists from appropriate disciplines to monitor and guide the worldwide effort in regeneration research.

2. Bring about presidential leadership of a major, coordinated "push" for regeneration to eventually cure millions.

3. Increase U.S. government regeneration research support to \$20 million annually.

4. Review regularly, formally and critically the recommendations of the U.S. government's 1975 task force which dealt with "high priority research areas,"

"training," "centers of excellence" and "planning and coordination."

5. Increase the awareness and support of the U.S. Congress and the American public.

6. Strengthen the commitment of concerned U.S. and international voluntary health organizations to advance regeneration research in a coordinated manner.

7. Increase the support of foundations, corporations and other private sector groups having coincidence of interest and untapped potential.

8. Establish a private sector fund to take advantage of research "targets of opportunity" promptly as they may arise.

9. Institutionalize, for as long as necessary, the Wakeman Award and associated activities at Duke University; increase its visibility substantially; and orient it to ensure recognition of recent scientific contribution toward the donor's stated purpose of "liberating paraplegics from their wheelchairs through central nervous system regeneration research."

10. Review and publicize progress on this program on an annual basis until the solution is found.

I hope all of you here this evening will do all you can to further this noble effort. Thank you again Mrs. Gardiner and Duke University for leading the way. If ever there was an opportunity to alleviate human suffering, this is it.

## Respiratory therapists on tube

Members of the respiratory therapy staff enjoyed brief careers as TV stars earlier this week to promote Respiratory Therapy Week in North Carolina.

R. Alan (Rick) Leonard, explained to WTVD-TV (channel 11) news reporter Shauna Singletary, that the week had been designated to call attention to the relatively new and fast-growing allied health profession.

Respiratory Therapy Week, which concludes today, was designated by a proclamation from Gov. James B. Hunt Jr.

Leonard, Robert Maynard and other respiratory therapists were filmed on the job by channel 11 for a news feature and public service announcements.

Respiratory therapists are employed in the diagnosis, management and control of disorders associated with respiration and respiratory related systems.

Since September 1970, Duke and Durham Technical Institute have offered a 24-month associate degree program in respiratory therapy, under the medical direction of the Department of Anesthesiology.

The respiratory therapist is trained in the therapeutic use of aids to the breathing process such as medical gases, oxygen administering apparatus, humidity and aerosol devices, positive pressure ventilation, mechanical airways and cardiopulmonary resuscitation.

## Turkey will try to outlast football

Since next week's Thanksgiving turkey probably will become the main course of a long weekend of feasting, while the now-traditional football encounters continue through Sunday, you might like to know (during a timeout or between bites) what all you're celebrating.

Thursday, of course, is Thanksgiving Day, both by presidential proclamation issued yearly since 1789, and as set forth by Public Law 90-363. (Both designate the fourth Thursday in November.)

Then Friday is "Yourwelcomegiving Day," so designated by a fellow in St.

Joseph, Mich., for the purpose of creating a four-day weekend.

On a more serious side, Saturday, Nov. 25, is the anniversary of the 1973 presidential order lowering the maximum speed limit to 55 mph as an energy-saving measure.

In addition to fuel conservation, initially projected at 200,000 barrels a day, the speed cutback has been credited with saving an estimated 9,000 lives each year.

Finally, next Sunday, while not Thanksgiving, is the holiday's anniversary. In 1789, both houses of congress requested President George Washington to recommend a day of public thanksgiving.

Nov. 26, 1789 became the first Thanksgiving Day by a presidential proclamation issued Oct. 3 of that year.



"If I fall will you call an ambulance at halftime?"



'WHAT CAN I SAY?'—Well, Mel Ray can and did say some words about computing. The university's vice chancellor for data processing was the Nov. 7 speaker at this year's first meeting of the Duke Management Club. The four categories of computing in which data processing potential is greatest for an institution like Duke, Ray said, are patient care, instructional computing, research and administrative computing. In the patient care category he noted the Duke Hospital Information System (DHIS) which was developed here by Duke and IBM. Over the next 10 years, Ray predicted, computer-assisted office work "will become as commonplace as the telephone," contributing significantly to administrative productivity. It will include reminder systems such as automated calendars, filing systems, typing aids and electronic mail, eventually eliminating much of the heavy volume of paper that carries information from here to there. (Photo by John Becton)

## Intercom

is published weekly by the Office of Public Relations, Duke University Medical Center, Box 3354, Durham, N.C. 27710.

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