

OAK RIDGE INSTITUTE OF NUCLEAR STUDIES
 INCORPORATED
 P. O. BOX 117
 OAK RIDGE, TENNESSEE

MEDICAL DIVISION

March 2, 1951

To: Consultants of the Medical Division

We are again sending you a brief report on our activities and asking your continued help in carrying on the program of the Medical Division.

Because of the large number of residents being called into military service from our participating schools, the number of residents able to spend time in Oak Ridge has greatly decreased. We have arranged to have a group of physicians who are officers in the Air Force spend four-month periods of duty in Oak Ridge. These men follow a program similar to that of the residents from the medical schools, and during their stay they take the one-month basic isotopes course offered by the Training Division of the Institute. The Air Force is interested in developing a group of men familiar with radiation problems, and this program appears to be mutually beneficial to the Medical Division and the Air Force.

The first advanced course in the medical uses of isotopes to be offered by the Institute has just been completed. The course was given by a group of twenty-five distinguished lecturers and by the members of the Training and Medical Divisions of the Institute. Over 40 physicians from 22 states attended the course. The Medical Division facilities were used extensively and four clinics were given based on patients studied here.

Our clinical program continues to emphasize Ga^{72} . Further data collected bears out the preferential distribution of this metal in areas of bone formation or destruction. Additional studies on the behavior of this material in the body are under way. While the clinical results of treatment of primary and metastatic bone tumors have not been encouraging in most cases, a number of observations warrant further trials in primary osteogenic sarcoma and extension of the study to additional types of bone tumors.

Intraperitoneal or intrapleural colloidal Au^{198} has been used in the palliative treatment of intractable pleural effusions and ascites due to neoplasm. The results suggest that this study should be expanded so that this procedure can be more adequately evaluated.

Several other projects involving smaller numbers of patients are under way.

Some of our most valuable studies have been obtained at autopsy. Up to the present there have been 16 deaths and 16 autopsies. In all cases but one, isotope distribution studies of the tissues have been coordinated with histologic studies. In all recent cases, autoradiograms have been made from tissues.

The continued cooperation of our consultants has been appreciated. The patients referred have generally been carefully selected and suitable for atomic energy studies planned.

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In some instances we have wished for a larger number of patients. We are particularly desirous of admitting more patients with polycythemia, Hodgkin's disease, and chronic myelocytic leukemia.

We are enclosing a list of the groups of patients we are able to accept. Thank you again for your help.

Sincerely,

Gould A. Andrews, M.D.
Chief Clinician

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We are able to accept patients with the following types of disease

1. Metastatic carcinoma of the prostate with bone metastases of osteogenic type, in whom there is no further effect to be obtained by orchiectomy and hormone therapy.
2. Primary bone tumors with metastases.
3. Any type of primary or metastatic neoplasm in which bone involvement is present and is the main cause of symptoms. Patients should be in reasonably good general condition.
4. Pleural metastases from any type of carcinoma in which recurrent pleural effusion is the main problem, preferably without massive intrapulmonary lesions.
5. Carcinomatosis of the abdomen, without obstruction of the urinary or gastro-intestinal tract, in which ascites is the main cause of symptoms.
6. Carcinoma of the thyroid not amenable to surgical therapy.
7. Active Hodgkin's disease previously treated; patients for whom there is not satisfactory treatment, but who are not terminal.
8. Multiple myeloma.
9. Chronic myelocytic leukemia.
10. Polycythemia vera.

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PARTICIPATING MEDICAL SCHOOLS

ALABAMA

Medical College of Alabama

ARKANSAS

School of Medicine
University of Arkansas

GEORGIA

College of Medicine
University of Georgia

School of Medicine
Emory University

KANSAS

School of Medicine
University of Kansas

KENTUCKY

School of Medicine
University of Louisville

LOUISIANA

School of Medicine
Louisiana State University

School of Medicine
Tulane University

MISSISSIPPI

School of Medicine
University of Mississippi

NORTH CAROLINA

Bowman-Gray

School of Medicine

School of Medicine
Duke University

School of Medicine
University of North Carolina

OKLAHOMA

School of Medicine
University of Oklahoma

SOUTH CAROLINA

Medical College of the
State of South Carolina

TENNESSEE

Meharry Medical College

College of Medicine
University of Tennessee

School of Medicine
Vanderbilt University

TEXAS

School of Medicine
Baylor University

Medical Branch
University of Texas, Galveston

M. D. Anderson Hospital
University of Texas, Houston

Southwestern Medical College

VIRGINIA

Medical College of Virginia

School of Medicine
University of Virginia

OAK RIDGE INSTITUTE OF NUCLEAR STUDIES

Incorporated

P. O. Box 117

Oak Ridge, Tennessee

We regret that because of the large number of inquiries about admission to the hospital of the Medical Division at Oak Ridge, it is necessary to send a form letter in reply.

The Medical Division's Cancer Research Hospital has been set up for the purpose of studying the treatment of certain types of malignant disease with radioactive materials. Many medical centers throughout the United States have been using radioisotopes for treatment in a small number of patients for several years. Only a few types of disease have been found to be benefited by such treatment up to the present.

The opening of the new hospital in Oak Ridge does not immediately make possible the use of any new form of treatment. This hospital serves as an additional center for giving the kinds of radioactive elements which are already in use, and as a place for the study of potential new kinds of treatment. The location of the Medical Division in Oak Ridge is advantageous for the utilization of short-lived radioactive elements which cannot be shipped long distances because they lose their activity during the time required for transit. However, there is at present little evidence that the short-lived isotopes will be of special value in treatment. The possibilities in this direction are now being explored with animal research.

Because the Medical Division hospital in Oak Ridge has only 30 beds, it obviously can care for only a limited number of patients. It is a research hospital and will not have all of the usual facilities for diagnosis, surgery, and X-ray therapy such as can be found in the many fine medical centers throughout the country. With these unusual limitations and opportunities, the Medical Division Hospital will study only a few specific diseases at any one time. Patients will be accepted only after they have been studied and referred here by the southern medical schools which cooperate in this program.

Sincerely yours,



Marshall Brucer M. D.

Chairman

Medical Division

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