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Dr Tuttle 313A

Columbia University
in the City of New York

[NEW YORK 32, N. Y.]

DEPARTMENT OF RADIOLOGY
RADIOLOGICAL RESEARCH LABORATORY
630 WEST 168TH STREET

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Dr. L.W. Tuttle
Medical Branch, Division of Biology and Medicine
U.S. Atomic Energy Commission
Washington 25, D.C.

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Dear Dr. Tuttle:

In view of Dr. Warren's letter of October 7, and yours of October 26, both to me, regarding the desirability of long-time studies on thyroid cancer patients treated with I-131, I was quite surprised at Dr. Dunham's letter to Dr. Frantz stating that the AEC was reluctant to support such a project. I wonder if this is a case of too many people getting involved in the correspondence, and clouding the real issue.

There can be no doubt that the AEC is interested in obtaining all possible information on long-time effects of appreciable doses of whole body radiation. Up to the present time, most of the individuals receiving such therapy were those with a generalized malignant disease, whose general condition could hardly be considered normal. Usually an abnormal blood count, and abnormal cells, were present from the beginning of treatment. However in patients being treated for metastatic thyroid cancer, the general condition, and the blood picture may be excellent. Some of these patients are receiving whole body radiation at the rate of approximately 100 r every month or six weeks, and fairly accurate estimates can be made of these doses. Some of these have now been carried on for a year or more, still in good health, and continuing studies on them should be definitely worth while.

We hope in some way to be able to carry on the treatment of these patients, even if, as I told Dr. Warren in my letter of October 14, the support of the Cancer Foundation is altered. But unless we have further aid, it is not going to be possible to follow the factors he particularly mentioned, - complete hematological picture, electrolyte balance, spermatogenesis, plasma proteins, etc.

Dr. Dunham states that the AEC is supporting several projects using radioactive iodine and is reluctant to initiate any new support in this field. I should think this might depend on what the expected

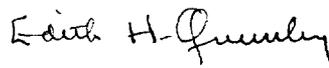
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data might be. I don't know what the other projects are, except for a small one held here by Dr. Werner for study of thyrotrophic hormone. But I do believe that, with the possible exception of Memorial Hospital, we have available the largest series of patients on whom significant studies of the effects of repeated appreciable doses of whole body radiation can be studied.

In your letter to me on October 26, you state "We are keenly interested in additional data in such cases, particularly when the whole body dose can be estimated reasonably accurately. I believe it would be worth while for Dr. Frantz to submit a project". Dr. Frantz did not emphasize this aspect in her letter of November 8, thinking that it was evident from the earlier correspondence, and possibly in the pressure of handling daily correspondence, Dr. Dunham did not realize the background of the problem.

I am, therefore, asking you to review the situation, in the light of the entire correspondence, and of the importance of this particular aspect of the problem, and let me know what you think might be done. If the AEC has a policy of not paying for hospitalization of patients, we can try to get funds for this elsewhere. But it will still be necessary to have a small sum to pay for the desirable tests which at present we can't have done, and a certain amount of additional technical help. I will greatly appreciate your personal consideration of this matter.

Yours very sincerely,



Edith H. Quimby

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