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Records Series Title <u>R & D Administrative Files</u>	
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File Code No. <u>16-5-22</u>	
Carton No. <u>1</u>	
Folder No. <u>Blood Reimbursement Approval</u>	
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Found By <u>Karen Holmes</u>	
Dates <u>1962-1975</u>	

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BERKELEY: DONNER LABORATORY AND DONNER PAVILION

Dr. James L. Born

January 22, 1962

Re: Test subjects

Dear Jim,

The K^{40} project is the only study I have at present that calls for subjects who should receive payment. In addition to me, the project involves Dr.'s T. Sargent, H. Parker, and R. Ganatra.

It is our intention in this study to resolve certain technical problems in whole body K^{40} counting and to evaluate its significance, particularly its validity as a direct means for measuring lean body mass. Measurements to be made on subjects include:

 K^{40} counting K^{42} counting

Body density

Total body water with tritium.

Serum potassium

The procedures require the subject to remain in the Laboratory a full day (8 hours) and occasionally to return for an hour the following morning. Potassium- 40 and K^{42} counting consume most of this time. Urine samples are taken at intervals over a period of 24 hours, but the subject need only return the specimens in the vials that are given him. At least one blood sample is required for serum potassium (to determine exchangeable potassium) and for tritium assay.

At present the study calls for 10 healthy, young men. It is our understanding that \$25.00 is reasonable compensation for the time, inconvenience, and blood withdrawals required of these subjects. It is also difficult to get subjects for less than this amount.

Sincerely,



William Siri

WS:je

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Records Series Title	R & D Administrative Files
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From our previous studies on iron absorption we found that iron absorption from the gastrointestinal tract was occurring in two phases.

In order to study further the nature of these phases with disease it is necessary to study 4 normals as follows:

Each normal will undergo 4 separate studies, each of these separate studies will be carried in the following manner:

5 uc. of Fe⁵⁹ with varying amounts of carrier ferrous salt will be given to fasting subjects by the oral route and 20 uc of Fe⁵⁵ will be given I.V. Blood samples will be drawn at 15 minutes intervals for a period of 6 hours, a total body count will be performed 2 weeks later.

Each of these separate studies will be carried in the same patient at 2 weeks intervals, the varying factor being the carrier dose administered orally.

It is expected that that we will obtain a linear relationship between dose and percent absorbed only when the carrier dose is used in large amounts indicating that these two phases of iron absorption are due to the involvement of two different mechanisms rather than one.

Iron deficiency and overload will then be studied if this proves to be correct.

A. S. Winchell

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