

February 25, 1971

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Division of Biology & Medicine
U.S. Atomic Energy Commission
Washington, D.C. 20545

Dear Frank:

During Doctor Goldstein's visit to our laboratory in Seattle, the question of long-term follow-up of irradiated subjects was discussed briefly. Following our discussion, we received a letter from you inviting us to consider submitting a separate protocol and you suggested that we consider several points to implement this program. We have given much thought to the problem and have consulted various knowledgeable individuals including:- Glenn A. Warner, M.D., Staff Radiotherapist, Tumor Institute of The Swedish Hospital Medical Center; Raymond Marty, M.D., Staff Radiotherapist & Director of the Division of Nuclear Medicine, Tumor Institute of The Swedish Hospital Medical Center; Hans O. Sjogren, M.D., Chairman of the Department of Immunology/Virology, Pacific Northwest Research Foundation; Dr. Ingegerd Hellstrom, Research Associate Professor of Microbiology, University of Washington and Karl Erik Hellstrom, M.D., Professor of Pathology at the University of Washington. Prison officials as well as convicts were quizzed at some length as to how best to implement the follow-up study. In answer to your letter I am going to follow your format.

1. Extent of examination:

- a) It was felt that a routine examination was unnecessary.
- b) Gross testicular examination by palpation should suffice as far as physical examination is concerned. Those inmates remaining in the penitentiary, of course, will be having testicular biopsies and close inspection will naturally occur. The group, as a whole, felt that routine periodic chest x-rays should be taken, since any tumor forming in the testis is most likely to metastasize to, and is often revealed first, in lung tissue.

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2. Frequency of examination:

It was agreed that, while in prison, once every six months, and after release from prison, once per year.

3. For how long should the examinations be continued:

The consensus was twenty to twenty-five years.

4. By whom should the examination be performed:

It was decided that the subjects residing in Oregon, should be examined by Dr. Daniel DiIaconi, F.A.C.S., who, by and large, has performed most of the biopsy procedures and is acquainted with the subjects. Those not wishing examination by Dr. DiIaconi and/or living closer to Seattle, should be examined by Dr. Heller. Those subjects located in areas other than Oregon and Washington should be examined by a local physician on a reimbursable basis.

The question of transportation has been discussed with the majority of inmates on the radiation program in Salem. Their suggestions are: 1) that transportation to and from their home to Seattle or Salem should be provided; 2) that overnight hotel costs and meals also be provided; 3) that they be compensated for time lost from their then present employment. Parenthetically one inmate suggested that this may cost a lot of money because he may have a very nice robbery planned for that evening. In addition, the inmates agreed that a \$50.00 honorarium would act as a great motivating force in their complying; 4) the inmates have suggested that they would not return to any institution of any sort, but would allow the examination to be performed only in a private physician's office. They furthermore suggested that, on release they be given post cards or stamped envelopes with appropriate forms where they could confidentially express to Dr. DiIaconi and to myself any change in address they might have. This information, obviously is not to be revealed to any law enforcement agency.

5. Should Dr. Paulsen's subjects (with his approval) also be included:

The answer to this is yes, whether it be performed by Dr. Paulsen or by us, because the numbers in toto, at best, are going to be small for drawing any general conclusions.

6. What methods will be used by Dr. Heller to encourage the subjects to return for an exam:

The methods have already been started by discussing the problem with the inmates and the inmates themselves are all for having such periodic re-checks, plus, of course, receiving the funds as outlined above.

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You state that " I am sure that many other aspects will also need to be given in depth consideration ". One aspect is included in the next point.

7. The other consideration mentioned by prison officials and especially by convicts is that, at any given time, they may well ne incarcerated at a location other than Salem or Walla Walla. In investigating this further, we find that the only agency that will be aware of their incarceration and therefore, their whereabouts, will be the Federal Bureau of Investigation. If they were located at another institution, arrangements then could be made by the local prison or gaol physician and/or an outside physician residing in that town or county.

You may recognize from this that this is only a very preliminary approach to the problem and much more in dpeth discussion will be required.

Best personal regards,

Carl G. Heller, M.D., Ph.D.

CGH/cmm

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REPOSITORY: DOE-RICHLAND
COLLECTION: GSS HUMAN TEST SUBJECTS SUTDIES
PRISONER STUDY

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FOLDER: 1780 - HELLER PACIFIC NW RES. FOUNDA.

ASSIGNED NUMBER: RLHTS 94-0009

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