

eases of the skeleton; of the latter, one man is particularly interested in the pelvic bones. There is one person in the country who can rightfully be called a pediatric neuroradiologist.

One must agree with Mitchell that "a foundation of trained clinical observation is necessary" in medicine. It is hard to see how this makes specialization unnecessary. Even if man's capacity for knowledge were limitless, his time to acquire it is not. A boy with a removable brain tumor or a surgically curable congenital cardiac malformation would benefit more from being seen by a physician with relevant special experience than by one without it.

Specialization is not evil; what is to be deplored is *specialism*, a parochial attitude. The general physician is not immune to it, as we can see when he deplores specialization.

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Automatic Language Processing: Source of Funds

In discussing the report of the Automatic Language Processing Advisory Committee, National Academy of Sciences—National Research Council entitled *Language and Machines: Computers in Translation and Linguistics*, Bryce Nelson reported an interview with R. Ross Macdonald, director of the Georgetown University Machine Translation Research Project (6 Jan., p. 59). According to the article Macdonald denied that the National Science Foundation had ever supported the Georgetown MT group—as stated in the Automatic Language Processing Advisory Committee report. "Macdonald argued that this was one of the errors in the report, since it was known that all NSF money given to the Georgetown project came from the CIA." It happens that the National Science Foundation did make grants (G-2723, G-3867, and G-5513) of \$106,000 to the Georgetown MT Project. My authority for these figures is page v of the Georgetown University Machine Translation Research Project "General Report" (June 1963) prepared by R. Ross Macdonald.

A. HOOD ROBERTS

Automatic Language Processing
Advisory Committee, National
Academy of Sciences,
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10 FEBRUARY 1967

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