

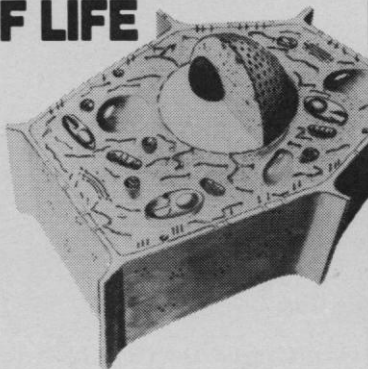
# Since the genetic code is linear, why aren't we all shaped like spaghetti?

We are just beginning to understand how nature creates three-dimensional molecules on a linear framework. Biologists have found that in at least one case, evolution has devised a protein hinge to swing the parts into place. This is just one of many exciting discoveries explained in Ernest Borek's new book, *THE SCULPTURE OF LIFE*.

Borek, acclaimed for his achievements in both molecular biology and science writing, tells about: the truth behind the old wives' tale that children grow in their sleep; the hardy microbe that lives happily in nuclear reactors; the virus that beat Buckminster Fuller to an idea by several million years; the prospects for genetic engineering and human cloning....

*THE SCULPTURE OF LIFE* is essential reading for anyone interested in man's understanding and control of nature.

**ERNEST BOREK**  
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## LETTERS

### Community Mental Health

In the article (News and Comment, 17 Aug. 1973, p. 638) describing the experiences of Georges Reding in the community mental health program in Franklin County, New York, Constance Holden seems to miss the point and, in so doing, loses the opportunity to get across a very important principle of community work. Rather than demonstrating that "Any doctor who tangles with the politics of established medicine is likely sooner or later to get his wings clipped," she simply demonstrates that, if someone speaks and acts in a manner likely to provoke others, he will be successful, and if those provoked are in a position to do something about it, they will.

In this era of the community mental health movement, Reding's approach to patient care could hardly be considered a "threat" to the establishment. Quite the contrary, many of his activities were very much in tune with the spirit of this movement. His work in orienting hospital staffs to the care of the psychiatric patient is a fine example. However, before the value of a distinct psychiatric program in a hospital was recognized, physicians hospitalized acutely ill psychiatric patients on general medical wards; this practice still continues on an informal basis in many communities that lack psychiatric services. The rationale for developing separate medical and surgical wards in a hospital is to concentrate the resources and programs most likely to be needed by each kind of patient in one place. In the case of psychiatric patients, this enables the staff to develop a therapeutic program for the patients as a group, and to make their entire day a health-directed experience, rather than simply leaving them to fritter away their time between doctors' visits.

The concepts Reding espoused in the areas of preventive care, crisis intervention, the use of "primary caretakers," and the importance of follow-up, are all strongly emphasized in community mental health programs. That these are concepts that have been slow in gaining acceptance and difficult to implement does not diminish the importance that "establishment" psychiatry attributes to the development of such services. It is unfortunate that Reding did not provide for the same kind of painstaking education of community leaders regarding what mental

health is all about, and why he was doing what he was doing, that he appeared to give the hospital staffs.

One of the most important lessons to be learned by the community psychiatrist, one unfortunately not taught in traditional residency and psychoanalytic training programs, is that, while the community will accept innovation, because its proponent places it under the medical mantle, "The doctor says so," that is simply not enough. If an innovation is to be accepted, it must be presented in the marketplace of ideas with persuasive arguments showing why it is better than competing ideas. This component of community education, so strongly emphasized in community mental health, is too often neglected by those who do not appreciate its importance.

It seems to me that the Franklin County legislators were simply saying: With all our faults, we are muddling through as best we can. Their willingness to support a mental health program at all suggests that not only did they recognize those faults but they wanted to do something to overcome them. On finding themselves stuck with someone intent on proclaiming virtue throughout the county and on using that stance as justification for dispensing with the basic respect that we all owe our fellow men and which is central to what mental health is all about, they reacted in a manner that is hardly surprising.

The positions of at least a few of those people who were so freely criticized should have been presented in Holden's report. In a situation like this, both sides of the argument deserve a hearing.

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The ideas espoused by Georges Reding, while perhaps innovative for Franklin County, New York, have been used in a number of variations in many different communities. Perhaps the most innovative idea is that he would try to be successful while at the same time alienating large elements of the community. (This too has been tried many times, and it did not work then either.) In community mental health work, as in most other systems, success cannot be attained without first having some harmony with the people who

provide the funds (the county officials) and with other important dispensers of similar services (local physicians, and so forth). Antagonizing these elements, regardless of the correctness or brilliance of the ideas, almost always leads to failure. Successful people in community mental health, the Peace Corps, and VISTA (as well as in many other systems, such as universities) have had to learn these skills, or find other tasks which do not demand such patience, tact, and diplomacy, or find other situations in which they may be more insulated from their deficiencies in these areas. Even if the idea is right, the proper timing and necessary community support must be there or the idea must wait. (One can also learn that despite one's expertise sometimes the idea itself is *not* right and one's own judgment needs to be modified by others. It is a good, humbling, enriching experience.)

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Constance Holden's allegation that the resistance to change is stronger in small rural communities is unsupported. Her report suggests that the medical community of Franklin County rejected Reding's ideas; the fact may be that they rejected Reding's personality and approach—not his ideas.

I have been deeply involved in setting up life-style clinics for the poor in four northern counties including Franklin County. Our services include well-child care, preventive dentistry, family planning through Planned Parenthood, nutritional advice, and transportation to and from the clinic. All services are provided without charge to the patient. Evaluation of preschool children is carried out by nurse-pediatricians. These clinics represent a radical change in health care delivery.

We have opened one clinic in Franklin County and plan very shortly to open another in Hogsburg, New York, a village on the St. Regis Indian Reservation. Contrary to Holden's statement concerning resistance to change, we have found the physicians of Franklin County extremely cooperative. Our efforts have been spearheaded by Barbara Maguire, coauthor with Reding of the report of his experiment published in the *New England Journal of Medicine* (1).

I admire Reding's work very much.

I believe he has made a major contribution. Certainly his work deserves careful scrutiny by others in the psychiatric field. Nonetheless, it seems quite clear that Holden's conclusions are not at all supported by facts. It appears that Reding was not rejected by the establishment, but rather his rejection may have been an autoimmune phenomenon initiated by his treatment of other physicians.

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#### References

1. G. R. Reding and B. Maguire, *N. Engl. J. Med.* **289**, 185 (1973).

#### Scientists as Economists

The controversy which has developed about Forrester's world model (Letters, 22 June, p. 1236) interests and surprises me. One would gather from some critics, in *Science* and elsewhere, that Forrester and his colleagues had performed a positive disservice to mankind, and to the free world in particular, by publishing their results. In my view, any attempt to make a national or a world model which will enable us to assess, however imperfectly, the possible future, is of immense value.

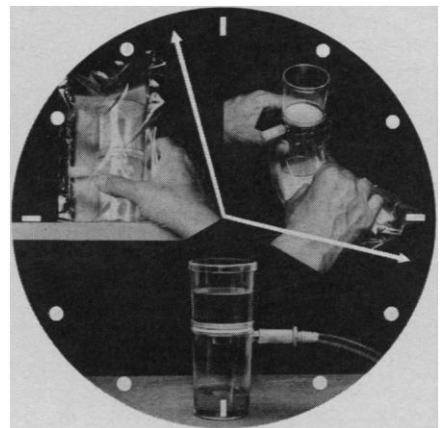
Keynes showed the governments of the world how to avoid the full consequences of deep economic depression. No one has yet shown how the vicious effects of the present inflation, which is playing havoc with the economies of all the democratic world, may be reversed or softened. And it is this rapid decrease in the value of money which has brought penury to science, as well as insuperable problems to governments. For most of us, the real standards of living are falling. No effort to understand why is wasted.

I suggest that if more scientists interested themselves in these complex economic questions, instead of leaving them to accountants and financiers, a growing ability to develop measures which would stabilize economies would inevitably develop. Techniques which led to the present worldwide economic mess are not necessarily those which will lead to a solution.

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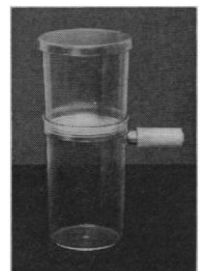
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