three said, "You can't put Edwards and Cooper and Stone in the same pot and expect soup."

At the heart of the matter is money. During the years that Shannon was building NIH, he was frank to admit that he was fostering intellectual excellence, science for science's sake.

Then in 1966, President Lyndon Johnson put the first pinhole in the nation's biomedical research balloon by suggesting that people might not be getting their money's worth from their investment. His view of the NIH mission was that it should be geared to making sick people well.

Johnson scared the biomedical community, which protested that he did not understand the delicate and unpredictable process of research. "You can't get 'payoffs' on demand," scientists said, while also criticizing him for getting involved in research at all.

The same scientists who so vigorously insist that you cannot buy results also declare that unless more money is pumped into biomedical research there will be no progress and this country will lose its preeminence in the field. They seem to be asking to have it both ways.

The question of the proper mission of the NIH still needs to be answered, and with it the proper role of the federal government in support of that mission. Should NIH concentrate its resources on basic and clinical research, as it has done traditionally until the wars on cancer and heart disease came along? Or should NIH broaden (or dilute) its resources to include health care delivery, even on a small scale through euphemistically named "control programs" and "demonstration projects"?

If these difficult matters can be resolved, the troublesome issue of the relationship of NIH to the rest of HEW, of which it is a part, may also be dealt with. Were that to happen, one might know who is running NIH—its director or the assistant secretary for health (*Science*, 1 March).

The fact that Edwards and Stone are at odds is important for several reasons. Their troubles are symptomatic of the uneasy relationship between the federal government and the biomedical community at large. They are representative of the tension that has existed for years between the two agencies. NIH, with its near autonomy, has never fit comfortably in the giant bureaucracy that is HEW. And the strain between Edwards and Stone is indicative of the problems that may be inevitable between any assistant secretary who is trying to manage the entire health enterprise and any NIH director who is not simply a yes-man.

It is a matter of control. When Richard Nixon entered the White House in 1968, he launched an Administration intent on gaining firm control of the government. "Management" became an important concept in Washington, whether one liked it or not.

In health, the job of centralization began with Merlin K. DuVal who, when he was assistant secretary, tried to extend the authority of his office over NIH, the Food and Drug Administration (FDA), and other health agencies in HEW (*Science*, 15 September 1972). DuVal made a sufficiently good start that, when he was succeeded by Edwards, who had been FDA commissioner, the way was open for a real centralization of power. Within HEW, Edwards' office expanded and acquired new status. Health got its "h" capitalized; people at NIH began referring to Edwards' empire as "H."

It was H that hired Stone. DuVal recommended him to Edwards. The two men met and got along. Approval from the HEW Secretary and the White House was swift. Stone was appointed in May 1973. A virtual unknown to the scientific community, he had a good record as dean of the new University of New Mexico School of Medicine in Albuquerque. He was a Republican. He had actually studied management at the Massachusetts Institute of Technology.

White House advisers were frank to admit that both Edwards and Stone were chosen to be team players. Said one, "They were picked because of their approach, which is to be loyal to government, not to themselves or to a cause."

Edwards, it appears, is indeed loyal to the idea of coordinating the myriad of health-related activities of HEW; to him, NIH is just part of the picture.

Edwards frequently has observed that the United States has no such thing as a national health policy and he wants to be the man to give it one. To that end, we now have the Forward Plan for Health, covering fiscal years 1976–1980. There are those, including

Think Tank Funds Are Leaking

Because of a fit of senatorial pique most of the Department of Defense's (DOD) Federal Contract Research Centers (FCRC's) are going to have to live with less money for the current fiscal year. According to Capitol Hill observers, Senator John L. McClellan (D–Ark.), chairman of the Senate Appropriations Committee, was angered recently when his fellow senators literally amended to death a bill giving funds to the Department of Housing and Urban Development and other agencies and sent it back to his committee. Not wanting the incident repeated, McClellan on the eve of sending the DOD bill to the floor ordered the committee staff to cut $1 billion from it in small bits and pieces to assure smoother sailing before the Senate.

As a result, the FCRC's were cut, and most of the cuts survived subsequent compromise with the House. The Rand Corporation will receive only $7.6 million from the DOD in fiscal 1975, instead of the $8.7 million it got last year. The Center for Naval Analyses will receive $9.05 million, or $0.5 million less than it received in fiscal 1974. The Aerospace Corporation suffered a $1.6 million cut in its $11 million basic research budget, and will get a total of $77.2 million.

Also cut was Lincoln Laboratory which received $18 million last year and will get $15.75 million this year. MITRE Corporation, which received $8.5 million last year, will get only $7.45 million this year. Another FCRC, ANSER, will receive $2.1 million after a $300,000 reduction in its basic research program from last year.

The FCRC's have often had a rough time getting their budget requests through Congress, so McClellan's arbitrary cuts were nothing new. But some escaped the scalpel: the Applied Physics Laboratory at Johns Hopkins ($45.3 million); the Applied Research Laboratory at Penn State ($7.1 million); and the Institute for Defense Analyses ($10 million).—D.S.