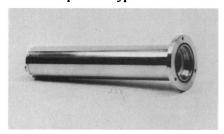


## **EMI GENCOM PMT HOUSINGS FOR**

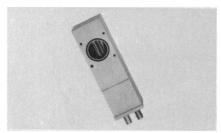
- : Broadband Photon Counting
- : General Lab Use
- : O.E.M. Applications

EMI Gencom PMT Housings are unsurpassed for flexibility, ease of use, litetite construction, and RFI shielding. They are designed by engineers with years of Photomultiplier Application experience.

The "B" type shown above uses the unique Bayonet Lock, is available in STD and RFI versions, with and without flange and provides space for AC-DC Power Supply if required. It accommodates all EMI 2" tubes and some competitive types.



The QL-30 is similar in design and fits all EMI 1-1/8" tubes. When supplied less flange, the slim line design allows compact packaging for OEM use. RFI shielded version available.



The new "S" Housing for side looking (squirrel cage) PMTs fits all tubes of this type, EMI or others. STD or RFI shielded versions available.

All of these new designs give improved performance at lower cost. Available from Stock.



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# EMI GENCOM INC.

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friend to express my protest at the injustice and harassment he is now suffering, which is of a much more sophisticated form than I experienced.

ZHORES A. MEDVEDEV Division of Genetics,

National Institute for Medical Research, Mill Hill, London NW7 1AA, England

### **Project Seafarer**

We on the National Research Council committee studying the biological and ecological effects of the extremely low frequency radiation associated with the Navy's Project Seafarer are very much aware of public concern over Seafarer's proposed construction.

We are interested in gathering and examining all relevant scientific data and ask that such materials or references be submitted to us in writing as soon as possible.

J. WOODLAND HASTINGS

Committee on Biosphere Effects of Extremely Low Frequency Radiation, National Research Council, 2101 Constitution Avenue, NW, Washington, D.C. 20418

## New Guanylic for Old

We are studying the possible role of the unusual nucleoside neoguanosine (1) in mutation. The only currently reliable sources of neoguanosine and neoguanylic acid are old (pre-1965) samples of commercial guanylic acid, in which they occur as impurities. Such samples can no longer be purchased, and the details of their manufacture have been lost (2).

We appeal to our colleagues to search their dusty shelves for old bottles labeled "Guanylic Acid," and, if these contain a brownish powder, to send them to us. In our experience, the older and darker the better; white samples are too pure. We will be happy to return an equal weight of contemporary guanylic acid if requested.

> JOHN A. GRUNAU JOHN W. DRAKE

Department of Microbiology, University of Illinois. Urbana 61801

#### References

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- (1963); R. Shapiro and C. N. Gordon, *Biochem. Biophys. Res. Commun.* 17, 160 (1964). Private communications from the Nutritional Biochemicals Company (now ICN Pharmaceuticals, Inc.) and the Schwarz/Mann Division of Becton, Dickinson and Company.

#### **Health Care: Service or Business?**

Philip H. Abelson's editorial "Costeffective health care" (14 May, p. 619) contains much wisdom. A mysterious facet of human nature is the inability to learn from experience. The greater the separation between "providers" and "utilizers" of a service, the more expensive and less appropriate the service will be. Every intervening step reduces the accountability of the server and the ability of the served to obtain what they want. A major effort should be made to develop a system of adequate medical care for all coupled with an awareness that care does in fact cost money, and that it is, therefore, in the patient's interest to utilize the least expensive service that is satisfactory.

It is clearly cheaper and more efficient to add oil to an automobile's engine than to keep putting in new engines when the old one runs dry. We don't seem to have the same understanding about the human machine. Those of us with responsibility for health care must try to persuade individuals to utilize that which is already known regarding health maintenance. Such an effort would be both cheap and effective

One matter is not touched on in Abelson's editorial. This is the effect on the medical care system of being transformed into a "business operation." Properly, the goal of medical practice is the provision of a service; the result, due to the gratitude of those served, is the remuneration of the individual providing the service. The introduction of business techniques tends to reverse this situation; the goal becomes the production of a profit. This methodology, in which strikes and boycotts are used as negotiation devices, is antithetical to the essence of medical care, which is a completely voluntary contract between two individuals. The transformation of the medical care system by the methodology of business is leading to the demise of medicine as a healing art.

We have several options regarding health care. We can embalm ourselves in our unrealistic system that treats obesity with pills, employs pills as contraceptives, and flattens ears in the name of psychological support. Or we can realize that how we live largely determines what we become and how we shall die. I wonder if the American people are willing to take the economic and psychological risks of the latter choice.

GEORGE L. SPAETH

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