

other countries are an important contribution to total deposition. This scientific consensus, in turn, was influential in the decision by 19 European nations to reduce SO<sub>2</sub> emissions by 30% (2).

Such reduction in regional SO<sub>2</sub> emissions is an example of the sort of approach that I suggested as being based on considerations other than detailed SRRs. Although I do not denigrate the use of SRRs to develop acid deposition control strategies, neither am I willing to whitewash their present uncertainties.

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#### REFERENCES

1. A. Eliassen and J. Saltbones, *Atmos. Environ.* 17, 1457 (1983); A. Eliassen, *ibid.* 12, 479 (1978); Ø. Hov et al., *Evaluation of Atmospheric Processes Leading to Acid Deposition in Europe* (Air Pollution Research Report 10, Commission of the European Communities, Paris, 1987).
2. L. Hordijk, *Atmos. Environ.* 20, 2053 (1986).

#### Fund-Raising and NIH

I would like to clarify a recent article by Constance Holden (News and Comment,

24 Feb., p. 1000) that did not give a clear representation of the highly overblown "controversy" concerning the fund-raising activities of the foundation I founded and its role in the administration of a grant from Bristol-Myers. The foundation was formed in June 1988 for the initial purpose of administering the Bristol-Myers grant that I was awarded in April 1988, since I was informed by my division director that the National Cancer Institute did not want to be involved in the administration of the grant. I was *never* informed at the time of my inquiry of any government regulations or policy specifically designed to administer an extramural grant, such as a Cooperative Research and Development Agreement (CRADA), of which I was informed 8 months after my initial inquiry and 6 months after the foundation was formed. In fact, the benefactor of the grant did not feel that a CRADA was appropriate for the grant, since the research that was being funded was based on my own proposal and did not have commercial potential. My serving on the foundation and my acceptance of a small management fee (which Bristol-Myers did not object to) for the expenditure of my own time outside of my official duties was approved verbally in September 1988, and in writing in October

1988, by the assistant director of NCI, Elliott Stonehill. The backtracking by the NCI to cover *their* administrative oversight by stating in January 1989 (10 months after the grant award) that my request for administering the grant via my foundation had been denied only occurred *after* the disclosure that I was trying to raise additional funds for the foundation via direct mail solicitation by the Watson & Hughey Co. Although this company has received a lot of "bad press" lately, it is simply not true that they have misrepresented themselves or the foundation in the mailings, which in fact, have been approved by the U.S. Postal Service. As stated by Holden, National Institutes of Health officials acknowledge that there is no official policy regarding this type of activity. Neither is there a policy regarding the founding and administration of non-profit foundations, of which there are several at NIH, while being in the employ of the federal government. If the appropriate officials at NCI had done their homework when the grant was awarded, this entire incident would have been avoided.

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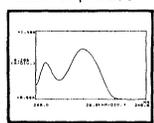
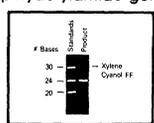
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