tist who is already of Nobel Prize class can now get away with blowing his own glassware, preparing his own standard reagents, answering his letters. . . ."

I know only one Nobel Prize winner. But he and countless other scientists I know do many routine but essential tasks like those described by Ziman. Consider the participants in Project Halo, who observed fluctuations in total ozone from Baja California to New England during the annular eclipse of 10 May 1994. Each of 21 Project Halo teams was equipped with an instrument that measures total ozone and water vapor. The teams included representatives from seven universities, the U.S. Geological Survey, two secondary school teachers, and amateur radio and astronomy groups. They performed a wide variety of routine tasks, repairs, and last-minute software fixes under serious time constraints, often in a field setting.

If Ziman is right, all the Project Halo participants are of Nobel Prize class. While the implications of this are pleasant to contemplate, isn't it more reasonable to assume that the vast majority of working scientists continue to perform the kinds of routine tasks listed by Ziman?

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British Gene Therapy Center

A ScienceScope piece of 13 May (p. 895), commenting on Kay Davies' decision not to take up the post of director of the Medical Research Council's (MRC's) new Clinical Sciences Centre (CSC), reports a number of comments that appear to cast doubt on the future of research in the new Hammersmith Hospitals Trust.

Although we are disappointed about Davies' decision, we remain optimistic about the future of research in the new Trust. In particular:

- The MRC remains fully committed to the CSC; a replacement for Kay Davies is now being sought; and the new laboratory building, with excellent facilities, opens next month.
- The Royal Postgraduate Medical School, which has attracted the highest ratings in a number of recent reviews by the Higher Education Funding Council for England and the U.K. Department of Health, for example, remains at Hammersmith Hospital.
- The government's formula for funding the excess costs of postgraduate research is satisfactory.
- The new Trust, one of the largest in the National Health Science, is the dominant service provider in west London and has a powerful concentration of specialist services which will provide the patient flow required to sustain high-quality research. The Trust has adopted the academically led clinical directorate structure, which was one of the foundations of Hammersmith's success.
- The combination of Charing Cross with Hammersmith has brought additional strength in several important areas, notably neurosciences, cancer, and rheumatology.

For these reasons we do not share the pessimistic tone of the ScienceScope piece. The new Hammersmith Trust, with its associated postgraduate and undergraduate medical schools and institutes, is already a powerful force in research, service, and teaching. Now that the uncertainty as to site is behind us, we can build for the future.

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Seaborgium: Name Not Yet Approved by ACS

E. Kenneth Hulet, in a statement (Letters, 22 April, p. 491) regarding the proposed name seaborgium for element 106, incorrectly says that the name has been accepted by the American Chemical Society (ACS) Committee on Nomenclature. The Committee on Nomenclature has asked the Nomenclature Committee of the ACS Inorganic Division, in consultation with the ACS Division of Nuclear Chemistry, to consider this proposed name and to report to the ACS Committee on Nomenclature at its annual meeting in November.

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Corrections and Clarifications

The News & Comment article "NSF eyes new South Pole station" by Jeffrey Mervis (24 June, p. 1836) mentioned the principal investigators of three of the four teams making up the Center for Astrophysical Research in Antarctica. The fourth is Mark Hereld, senior research associate at the University of Chicago, who is responsible for the South Pole Infrared Explorer telescope.