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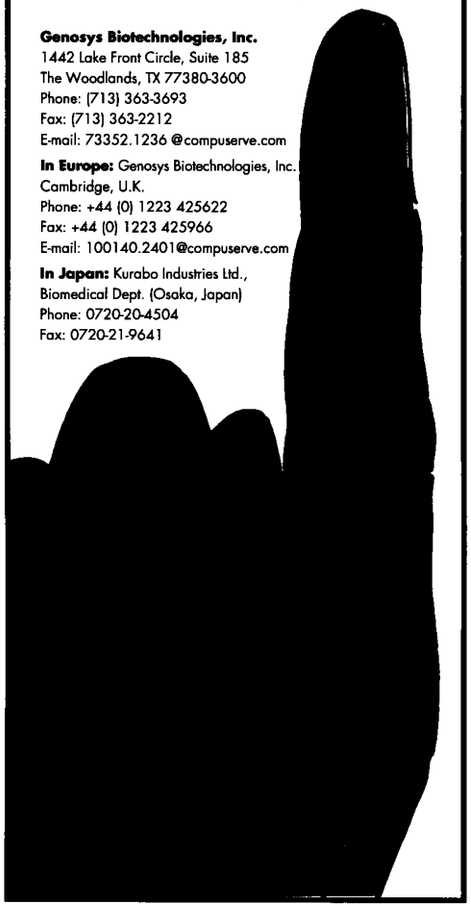

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is a major sponsor of research in the United States, we believe it has a special role to play in promoting such change. We ask that

1) The total dollar amount for FIRST awards be increased even if this decreases awards for established researchers (FIRST awards should also be granted for teaching and technology development projects).

2) Young scientists be involved to a greater extent in the grant review process.

3) The yearly funding for individual investigators be capped so that more investigators are supported (funding requested beyond a certain level should be denied except in exceptional circumstances).

4) NIH create a small grant program that would emphasize rapid proposal review, encourage the formation of interdisciplinary research groups, and provide funding for new researchers and for exploratory studies.

5) NIH require career counseling to be part of each training grant.

6) NIH act to eliminate restrictions on principal investigator (PI) status (the increased opportunity for all Ph.D. scientists to initiate research projects with proper credit can only increase the quality of science).

7) Agreement to a code of professional ethics be a requirement for an individual receiving a grant (practices that unfairly impede the careers of other scientists should carry strong penalties, such as the loss of PI status).

8) Increased interaction between NIH and the private sector be encouraged in order to foster the development of new technology initiatives.

9) All NIH grantees be required to participate in some form of public education (such as taking a day to explain their work at local schools) in order to increase public awareness of the benefits of research to society.

The future quality of U.S. scientific research is at stake.

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1. B. J. Hardy, S. I. McDonough, S. Orzack, *Young Sci. Network Dig.* [online] **1523**, 1 June 1994 (item 7).

With respect to Marshall's article "Does NIH shortchange clinicians?" it has been my perception that this "shortchanging" began with a decline in support for educational enrichment programs accessible to medical schools. The cost and duration of basic medical education and the lock-step nature of medical education as maintained by most medical schools and academic health science centers denies potential physician-investigators a career track. Training is particularly lacking in opportunities for nonlaboratory types of research that are appealing to many Ph.D.'s. More physician-investigators need skills in systems science, information management, health services research, epidemiology, biostatistics, health law, and health economics and related areas. I realize that many programs exist outside NIH in health services research, but NIH's priorities, many of which are geared to the development of marketable interventions and technology, detract from studies that reduce costs and improve outcome at the physician-patient interface.

John S. Spratt
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Roy Silverstein, president of the American Federation for Clinical Research, suggests that a special NIH study section be set up to give special attention to clinical proposals that fall just below the payline. I have another suggestion. Why not fund the same percentage of clinical studies and nonclinical studies that are submitted to each study section? For example, if 35% clinical studies and 65% nonclinical studies are submitted in a session, then 35% clinical applications and 65% nonclinical applications should be funded. This funding method would eliminate much of the bias and dissatisfaction that now prevails.

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■

Peer-Review Study

Eliot Marshall's 12 August News article "Congress finds little bias in system" (p. 863) describes a General Accounting Office (GAO) report that complacently concludes, "peer-review processes appear to be working reasonably well." The GAO found no regional or institutional bias, but noted that assistant professors or other junior faculty were underrepresented on review panels. Should grants be spread like oil on water? Are junior faculty members experienced and unbiased enough to allocate grants? Would anyone run a business, select a professional sports team or symphony orchestra, or stock an art museum in this way?

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The recent GAO study of peer review at the National Science Foundation (NSF) and the National Institutes of Health asked the wrong questions. Not asked were the questions, Does the peer-review system encourage the development of new ideas or the reworking of old ones? and Does peer review encourage young scientists to break out in new directions or to remain under the leadership of older scientists? The answers are hard to quantify, but important.

The record of discovery provides a clue to the answers. A list of the five most important advances in the physical sciences in recent years might include high-temperature superconductors, the quantum Hall effect, scanning tunneling microscopy, quasicrystals, and carbon-60. All of these came from small (university research group scale) science, but only one was discovered at an American university. None was supported by the NSF. Perhaps the NSF needs to take a lesson from the management of IBM-Zurich, where two of the five discoveries were made.

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NIH Research Collaboration

A misquote in Rachel Nowak's recent article about the inventorship questions surrounding the BRCA1 gene (News & Comment, 14 Oct., p. 209) may serve to undermine research collaborations between National Institutes of Health (NIH) scientists and their colleagues in universities and industry. The article attributes to me the statement that "intramural researchers are supposed to have a formal agreement if they enter into any form of collaboration with a partner in industry or university." The statement I actually made was that NIH scientists engage in a broad spectrum of research collaborations and that agreements are necessary for any formal collaboration. It is important to clarify this point to avoid the impression that NIH attempts to formalize all of its collaborative interactions. On the contrary, NIH encourages its intramural scientists to engage in a wide variety of scientific collaborations, including those that, appropriately, remain informal.

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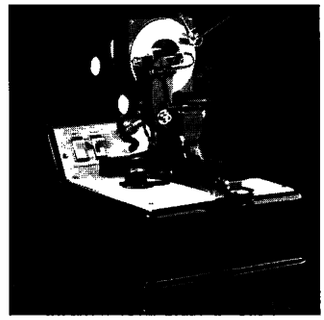

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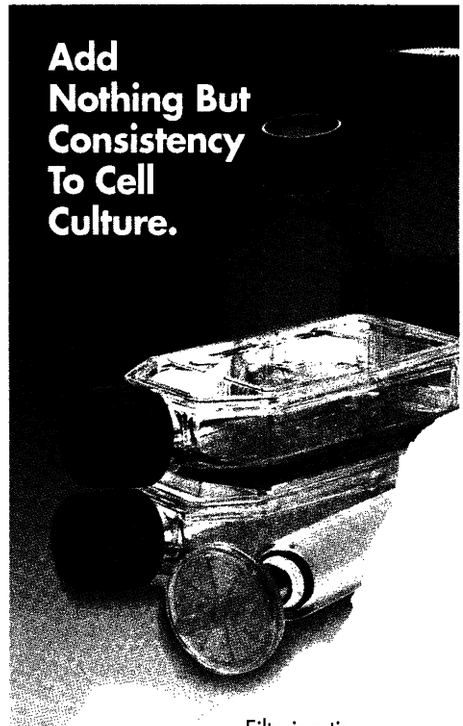

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