

sistance at headquarters, where they must be approved. When research proposals to NIMH are sent from these hospitals, they are stalled at BMS headquarters, rarely getting a chance for review at NIMH. A friend who had worked for 2 years on a research project at Lexington, on a design approved by the NIMH Addiction Research Center there, worked for another year on it at Fort Worth before being informed by the BMS that he should not start it. Is it any wonder that the morale at these institutions is low and that NIMH feels that funds should be spent at the local level?

For narcotics addiction, as with cancer, any promising approach to treatment must be tried, evaluated, modified on the basis of follow-up, reevaluated, and so on. The term "rehabilitation of addicts" implies only intent. There is no technique known to be effective. The need is not for further demonstration programs, for "demonstration" implies that one has some knowledge to demonstrate. We need frankly experimental programs, starting with patients already in our hospitals. A unique disease like narcotic addiction demands novel approaches, and the theoretical bias of most psychiatrists in the BMS blinds them to possibilities of other therapeutic approaches, for example, the use of operant conditioning procedures.

These opinions are based on my experience as a resident in psychiatry for 2 years at the Lexington hospital, and for 2 years as the deputy chief of the addict service at the hospital at Fort Worth.

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Walsh's statement that "There is no question that many physicians feel that the lines on legitimate treatment are blurred and that narcotics laws have been enforced in a way that has created what medical men regard as an atmosphere of harassment" is an understatement that grossly distorts the actual situation. The simple fact is that maintenance of an addict on narcotics is prohibited to any reputable physician. Legal intrusion into the treatment of drug addiction has forced the AMA to establish strict standards of "legitimate medical practice" that would be unthinkable in any other area of medicine. Radically different views exist on the proper medical management of

coronary occlusion with anticoagulant medication, yet no one would even consider the suggestion that any one form of treatment should be prohibited. But this in effect has happened in the field of drug addiction. The standards have been set by high-level committees which have had limited practical experience in dealing with the drug addict as a patient. In fact, past criminal prosecution of physicians (not a mere "atmosphere of harassment") has prevented any reputable physician from having any experience whatsoever in the maintenance treatment of drug addiction. . . .

It is the historically legitimate function of the medical profession to alleviate human suffering irrespective of the therapeutic benefits that can be achieved. There is no medical ethic that states that self-imposed suffering should involve a different attitude from that taken toward other forms of suffering. Need it be said that we treat the melancholic patient who harms himself physically or with self-accusations without any critical reference to the fact that the torture is in a very real sense self-imposed. Accordingly, there is no justification in medical ethics for placing the entire emphasis on the "treatment" or "cure" of the drug addict to the complete exclusion of any consideration of the relief of his suffering—which is indeed very real, even though partially (and only partially) self-imposed.

While it may still be debatable whether legal intrusion into, and regulation of, the medical management of drug addiction is justifiable, there can be no doubt that such intervention is a serious obstacle to the development of a full range of programs for the medical and psychiatric management of the drug user.

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BSCS: A Happy Partnership

In his review of the Biological Sciences Curriculum Study publications (14 Feb., p. 668), J. K. Brierley says, "It is a little surprising that the school teachers on the various committees let some of the text through, but so often a schoolmaster is humbled into silence by a scientist. . . ." I admit to being one of the schoolmasters who worked with the scientists on the BSCS materials, but I certainly do not admit

that we were "humbled into silence" during our 3-year partnership.

My first day on the project began with a lengthy and vociferous argument with G. Ledyard Stebbins about how evolution should be presented to high school students. I do not mean to imply that Dr. Stebbins's ideas on this matter were changed that afternoon, but the ice was broken, and the teachers held their own as regards what they knew best: the conditions in American high schools and the kinds of students who would use the new materials. Some teachers did remain silent the first summer at Boulder, but for the next summer's writing conference those shy people did not return. Perhaps it was the policy of BSCS to select articulate teachers to replace "humble schoolmasters." To put it bluntly, Arnold Grobman (the director) and his staff used loudmouths like me to keep the scientists aware of the reality of the classroom. And to their credit, the scientists were most cordial and most patient. The association resulted in making the scientists more aware of the kind of audience the materials would reach and the problems the high school biology teacher faces. And of course it was a great learning experience for the teachers, whose views of biology were brought up to date.

We may have made some mistakes in our selection of materials included in the texts. None of us thought there could be entire agreement about what should be included in a high school biology course. It was in part for this reason that three different courses were produced. At the very least, each of these courses broke the traditional taboos of high school biology by dealing with human reproduction and presenting a straightforward account of evolution. Trials in hundreds of schools with thousands of students indicate that the modern concepts presented by these courses can be successfully taught to tenth-graders. The excitement of the exploratory laboratory problems and of the study of science as an ongoing process of inquiry has proved contagious; other teachers and their students want to try out the new materials.

The success of the BSCS publications rests, in good part, upon a happy working partnership of the scientist and the high school teacher. Teachers are looking forward to a continuation of that happy partnership.

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