

Congress and within CPR itself believe that its growth would be faster if it were not a new program competing within a tight NIH budget with older and better established medical research programs. Next year the CPR budget, if approved by Congress, will provide \$16.4 million for contraceptive research, which, while representing an increase of nearly 60 percent from the current year, is not the kind of money Egeberg's advisers were talking about.

Senator Joseph D. Tydings (D-Md.) has introduced a bill to establish a national agency for population and family planning which would be outside of NIH and on the same level with it in HEW's hierarchy of health agencies. This measure, still in committee, has been opposed by the Nixon Administration, partly on the grounds that creating the proposed center would tend to separate contraceptive research from related research carried on or supported by NIH. Another objection cited is that the center would put contraceptive research under the same administrative roof with family-planning services, functions which HEW officials say should be kept separate. The existing Center for Population Research is part of NIH's Institute for Child Health and Human Development.

Shultz says that present trends point toward ultimately establishing an institute for population research within NIH. The Egeberg committee has recommended that such an institute be created within the next 2 years. Shultz says, however, that the establishment of such an institute now, when the CPR program is still relatively small, could lead to an unfortunate diversion of funds from research to the requirements of administrative overhead. This argument for delay in uplifting the program in the administrative hierarchy is questioned by some CPR people.

Important questions of research management can be considered apart from the type of administrative structure provided for the contraceptive research program. The general view appears to be that NIH should take a more "directed" or product-oriented approach and that this will in fact be encouraged by two new administrators who are soon to take office. One of these is Louis M. Hellman, until recently chairman of the department of obstetrics and gynecology at the State University of New York Downstate Medical Center; he will become Deputy Assistant Secretary of HEW

for Population Affairs under Egeberg. The other is Eugenia Rosenberg, now chief of the Medical Research Institute at Worcester City Hospital who will become chief of the CPR contraceptive development branch under Corfman.

Hellman also is expected to try to strengthen the "lead agency" role for which the CPR was designated by President Johnson when this agency was established in 1968. One question likely to generate controversy will be concerned with the size of certain contracts awarded by the AID Office of Population Research. Several of these are larger than some scientists at HEW think can be justified. In their view, not enough is known yet about the matters under investigation to warrant large-scale programs of directed research.

Insofar as the complete development of marketable contraceptives is concerned, a major issue has been raised by Carl Djerassi, professor of chemistry at Stanford and president of Syntex Research (*Science*, 24 October 1969). Djerassi is concerned that the high cost of the toxicological studies required by the FDA for new contraceptive drugs will discourage pharmaceutical companies from developing such drugs. He has proposed that such studies be financed by the government, with the pharmaceutical company agreeing to repay the government through royalties if the drug should be sold commercially.

Much could be done to improve family planning and to lower birth rates if more people were more strongly motivated to use existing contraceptive technology. But many who are committed to contraceptive research believe that, while neither approach should be neglected, it is easier to change technology than motivation. This idea is at the heart of what seems a compelling argument in favor of the government's pressing harder for major new advances in this still underdeveloped field of biomedical research.

—LUTHER J. CARTER

RECENT DEATHS

Nicholas M. Alter, 77; retired pathologist, Johns Hopkins Hospital, Baltimore, Md.; 21 March.

Henry H. Baker, Jr., 63; professor of chemistry, U.S. Naval Academy; 19 March.

Seligman B. Bamberger, 74; retired

vice president of the Delaware Chemical Company; 6 April.

Arlie R. Barnes, 77; retired chairman, board of governors, Mayo Clinic and former president, American Heart Association; 24 March.

Joseph T. Beardwood, 74; professor emeritus of medicine, University of Pennsylvania; 14 April.

Ralph E. Campbell, 72; professor emeritus of obstetrics and gynecology, University of Wisconsin; 25 March.

Robert C. Clothier, 85; former president, Rutgers University; 18 March.

Warren F. Draper, 86; former Deputy Surgeon General of the United States; 19 March.

Thomas F. Goreau, 46; professor of biological and marine sciences, State University of New York, Stony Brook and the University of the West Indies, Jamaica; 22 April.

Clair A. Hannum, 69; retired professor of zoology, Wichita State University; 5 April.

Amy Hewes, 93; professor emeritus of economics and sociology, Mount Holyoke College; 25 March.

Chester Hyman, 52; Birely Professor of Investigative Dermatology, University of Southern California School of Medicine; 19 April.

Paul MacClintock, 79; emeritus professor of geography, Princeton University; 23 March.

J. H. Mathews, 88; former chairman, chemistry department, University of Wisconsin; 15 April.

Loye H. Miller, 95; retired professor of biology, University of California, Los Angeles; 6 April.

Joseph C. Morris, 67; former vice president of Tulane University; 4 April.

J. J. Ochse, 78; professor emeritus of tropical horticulture, University of Miami; 21 March.

J. Earl Rudder, 59; president, Texas A&M University; 23 March.

Danely P. Slaughter, 58; former clinical professor of surgery, University of Illinois; 11 April.

Alfred H. Sturtevant, 78; Thomas Hunt Morgan professor emeritus of biology, California Institute of Technology; 5 April.

Benjamin D. Van Evera, 68; chemistry professor, George Washington University; 9 April.

Charles C. Wilson, 74; professor emeritus of education and public health, Yale University; 9 April.

David Wdowinski, 73; former assistant professor of psychiatry and psychology, New School for Social Research; 3 May.