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Vleminckx solution (sulfurated lime), the Vicq d'Azyr bundle (thalamomammillary), the Minkowski-Chauffard syndrome (hemolytic jaundice), Higoménakis's sign (clavicular), von-Recklinghausen-Appelbaum disease (hemochromatosis), and so on ad nauseam. At length they decided that this flagellation had gone on long enough, and that thenceforth they would use descriptive names, like centigrade, wherever possible. So at least the doctors are coming down to earth, and I profoundly hope that our editors will come along with them. . . . I wish the Emily Posts of nomenclative etiquette could realize, at long last, that the intelligent way to honor the memory of Celsiusa champion of sound common senseis to leave his sensible temperature scale with the sensible name that he gave it.

D. A. Ross

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Peer Review System

One of this country's most successful collaborative operations which links the entire health-oriented scientific community to the federal government, namely the National Institutes of Health (NIH) and National Science Foundation's system of research grant evaluation by peer review, is now undergoing serious attacks and is in danger of dissolution.

Opponents of the peer review system argue that the larger, better staffed and equipped universities and research institutions are more successful in the competition than are the smaller less distinguished ones, and that there is considerable geographic imbalance in distribution of research funds. This is not a valid argument against the present national competitive system if our goal remains high-quality scientific achievement, since much of the most imaginative and high-quality research is coming from the established institutions. It is an argument, however, for providing institutional funds for universities in less populated areas so that they may attract high-quality teaching faculty and build their resources. Grants of this nature have been provided in the recent past by the National Science Foundation, and it is to be hoped that this type of support will be continued, but not substituted for the present system.

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Opponents also argue that the study sections do not concern themselves with "relevance" but recommend support purely on the basis of scientific merit. The corollary argument is that basic research has no goal and is "undirected." An imaginative, well-designed research project always has a significant goal, and usually in the long run becomes more obviously relevant. Clearly defined and biologically significant goals and the asking of important and pointed questions are prime criteria in the present evaluation system. It is a mistake to give priority to a project of third-rate scientific merit aimed directly at a difficult problem of human disease over a high-quality proposal directed toward an understanding of a basic biochemical mechanism. This country can well afford the modest investment in the latter but can ill afford the entrenchment of mediocre investigators in a socially "relevant" area. The argument for quality in science, both basic and applied, must outweigh all others if we are ever to answer our more difficult "relevant" medical problems.

Perhaps the greatest threat to the present system of standing committees for grant review at the national level is the growth of NIH center grants and contracts which are not now reviewed by study sections. Despite sincere assurances from responsible senior officials that the individual project grant and the study section systems are not under attack, they will attenuate spontaneously because it is much easier and safer for individual investigators to come in under the large umbrella. Applications for research grants and fellowships will automatically fall off, and diminishing demand will be used to justify a diminishing program.

If we must live with center grants and contracts, they should be reviewed rigorously by the regular standing study sections and advisory panels composed of working scientists, using the same criteria of merit as are applied to individual applicants. Multidisciplinary applications can be reviewed piecemeal and in toto by appropriate study sections and pruned accordingly. One wonders whether the current complaint of "bureaucratic interference" leveled at the NIH is not simply part of the effort to bypass the present system of quality control.

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