January 22, 1965

Albert B. Sabin, M. D.
The Children's Hospital Research Foundation
Elland Avenue and Bethesda
Cincinnati, Ohio

Dear Dr. Sabin:

A report of the meeting with the Editorial Advisory Board is enclosed.

We wish again to express our thanks to you for attending and to note our feeling that this was a very lively and interesting meeting with many suggestions for us to consider.

Sincerely yours,

[Signature]
Frederick Silber
Managing Editor

FS:rn
Enc.
Memorandum

To: Drs. Adriani, Dameshek, Dubos, Master, Ochsner, Palmer, Rigler, Sabin and Schick.

From: Dr. Joseph Gennis, Director of Publications, and Frederick Silber, Managing Editor


The meeting was held at the Waldorf-Astoria Hotel in New York. Present from the Editorial Advisory Board were Drs. Adriani, Dameshek, Master, Ochsner, Rigler and Sabin. Besides Dr. Gennis and Mr. Silber, the Medical Tribune staff was represented by Drs. A. S. Jacobson, Medical Director, and Benjamin Wainfeld, Medical Staff; Harry Ross, News Editor; Les Barnett, Assistant News Editor; Jack Shafer, Foreign News Editor; Philip Dolan, Picture Editor; Helen Emmert, Layout Editor; and Helen Petrosene, Secretary.

Dr. Gennis gave a brief general review, noting that 1964 had seen the introduction of the Weekend Edition (in April) with its emphasis on feature reporting in depth of medical progress and problems. Among continuing objectives, still to be attained, he said, is expansion of circulation beyond the present list of 170,000 practicing physicians in the U. S. Particularly desirable would be the inclusion of interns, residents and full-time medical school faculty members. Many of these are now receiving the paper by request, and it is recognized that the school faculties represent the source of much important medical news. While it has been felt that an ultimate aim might be to have the paper circulated entirely by paid subscription, there are financial factors that require a careful approach to circulation expansion.

Mr. Silber surveyed some of the year's highlights from the aspect of the paper's content, emphasizing that reporting of medical advances from meetings constitutes the news foundation of editorial operations. During 1964, from the many medical meetings covered by staff in the U. S. and abroad, came 549 separate meeting reports published in the paper.

Medical Tribune's editorials ranged over the many topics of interest to physicians; there was continued emphasis on smoking and health, with 15 editorials devoted to the subject, 11 editorials on drug safety and problems of regulations, and six on auto safety (also a continuing campaign).
Published letters to the editor, Mr. Silber observed, represent a high degree of reader interest. During 1964 there were 372 letters printed. There is always a need for publishable letters dealing with provocative and even controversial matters of diagnosis, therapy and research. Members of the Board were urged to stimulate the writing of such letters to Medical Tribune by colleagues whenever a suitable occasion arises.

Mr. Silber gave an account of a current project initiated by Medical Tribune which demonstrates an enthusiastic response by physicians. During last summer's International Congress of Biochemistry in New York, the Congress Press Committee published a small paperbound book for science writers, "Concepts in Biochemistry." Medical Tribune at that time commented editorially on the value of the book and suggested it be made more widely available, especially to physicians. As a result, the Congress Press Committee and Medical Tribune made arrangements to reprint the book and have Medical Tribune offer 3,000 copies of it, gratis, to physicians requesting it.

The offer was published in Medical Tribune of January 11, 1965. Within the next five days, requests from physician-readers all over the country had exceeded 3,000 (there was no coupon or return envelope; the doctors had to write and mail their requests). At the height of the flood of requests, the Congress committee was able to make an additional 1,500 copies of the book available to handle the overflow. Many of the physicians asking for the book made comments on the value of this service and of Medical Tribune.

Mr. Ross spoke briefly about the year's news-reporting activities. He noted that coverage had been broadened to supply the Weekend Edition, and that an average week finds 30 or 40 meeting programs being reviewed for possible reporting interest. Regional meetings at the "grass roots" level have been given particular attention, with many being reported outside the large medical centers. In a number of cases it has been found possible to ask investigators to send Medical Tribune copies of the papers they present to regional meetings, and the response has been encouraging.

During the summer months, Mr. Ross said, arrangements were made to send staff members to cover important international meetings held in Europe. The results were excellent and much significant material was gathered as each reporter attended several congresses during his three or four-week tour.

Mr. Dolan, speaking on the use of pictures, revealed some rather startling statistics: during 1964, Medical Tribune printed 4,576 photographs, of which 2,800 were of individual physicians and investigators. The weekly average for publication of photographs runs about 100 at present. To select pictures to be published, Mr. Dolan noted the Picture Division reviews a total of nearly 50,000 a year, taken on assignment for Medical Tribune or submitted by photo agencies. (Dr. Ochsner commented that publication of a speaker's photo gives great added visual value to a report from a meeting.)

Following these reports, there were comments by Board members and considerable discussion of some of the matters raised, continuing through luncheon and the afternoon session. The following summary covers the comments and discussion.
Dr. Master found a problem in the headlining of reports from meetings, where the headline was written on the top report but did not alert the reader to the existence of other reports in the same article. (It was noted by the staff that this problem has been approached and improvements made, but it still needs work.) Dr. Master made several other comments: he thought a vertical index of contents might be easier to read than the horizontal; many of Oldden's "Clinical Trials" cartoon strips seem incomprehensible to him; there should be more foreign reports; he finds all the major sections of the paper good; abstracting from current international medical journals might be valuable as news; some of the editorials contain language which may be ultra-sophisticated for many physicians.

Dr. Dameshek agreed that the headlining of medical reports is a problem, and suggested separate sub-headings for each distinct report. It was agreed that this should be undertaken. Dr. Dameshek also made the following points (noting that he also felt that the paper was doing an over-all fine job): In reporting international medical news, it should be realized that not all of the good medicine is being done in the U.S.; there should be more coverage of medical developments behind the Iron Curtain. (On this point there was discussion of the problem of evaluating good and poor medicine in reports received from field sources. Dr. Sabin urged more use of advisers who were familiar with the scene to get a view of practice and research in other countries.)

Dr. Dameshek commented on advertising and readership matters, asking what the ratio of advertising to editorial content is now. He was informed by Dr. Gennis that the standard is still a maximum of 20 pages of advertising in a 32-page paper, and with three issues a week it is rarely running more that 16 or 17 pages. He recalled that when occasional 40-page papers were being published last year there appeared to be an overwhelming ratio of advertising; this has leveled off in three editions so that the reader is not overwhelmed. In reply to another question from Dr. Dameshek, it was noted that the response to Pulse of Medicine poll questionnaires sent out with the paper to a random cross-section of readers had provided a gauge of reader interest. Prior to publication of the Weekend Edition, these returns had consistently run 20 to 25 per cent; there was a slight drop when the Weekend Edition appeared, but the figures have climbed back even above 25 per cent. There is now almost equal readership of the three editions.

Dr. Rigler's observations included a suggestion that the foreign news page should not contain reports on what Americans say at meetings abroad, but should confine itself to coverage of foreign work exclusively. (Dr. Sabin felt this might be valid but he would not omit altogether the coverage of reports given abroad by U. S. investigators.) Dr. Rigler also emphasized the importance of always giving the names of the institution with which an investigator is affiliated. Further, Dr. Rigler felt that more attention should be paid to the work of NIH and medical news from Washington generally, since the impact of government is now coming so strongly into the medical scene. He urged that Medical Tribune give serious thought to publishing regular listings of postgraduate courses for physicians to meet the rapidly increasing need and demand for such education.
(Dr. Sabin seconded this, observing that Ohio now has a remarkable radio network operating in graduate education for hospital staffs.) Dr. Rigler felt that Medical Tribune's guest editorials ("Current Opinion") may reflect an over-emphasis on the eastern seaboard, and there should be an effort to spread geographical representation farther to the west.

Drs. Adriani and Ochsner, asked to comment on reception of the paper in the New Orleans area, felt there was a drawback in not sending it regularly to hospital and medical school people and hoped this problem could be met. Both expressed commendation for the job being done; Dr. Ochsner was particularly pleased with the antismoking campaign, which he thought had exerted a marked effect on physicians.

Dr. Sabin thought the paper was being published with a high degree of competence and realized what difficulties lie in the problem of selecting the news to be published. He had been disturbed by a headline, which he felt was inaccurate, on a story about rhinoviruses; the matter of getting accurate headlines is of extreme importance, he noted, and might be aided by having writers submit headline suggestions with their articles. He agreed that medical school faculties, interns and residents should receive the paper, if at all possible. He commended the distribution of the Biochemistry Congress book as an important service, noting that non-technical summaries are as good for scientists as they are for science writers. (Copies of the book were provided for Board members.)

Finally, there was a discussion of editorial policy around a question raised by Dr. Gennis relating to the paper's position on the reporting of adverse drug reactions. Seeking the advice of the Board, Dr. Gennis noted that Medical Tribune had been engaged in generalized discussions with a pharmaceutical manufacturer who was upset by what was felt to be "a lack of balance." By this they meant that the paper should always try to include the context of drug benefits, even in reports dealing with adverse effects. Dr. Gennis said he felt the context is established by the sum total of all reports and could not be incorporated in each separate news report. Board members agreed that this position seemed to be correct, in as much as the manufacturer's comments were invited when adverse developments were reported and that an independent position is maintained by the paper.

At the same time there was a recommendation, urged by Dr. Sabin, that the paper include names of its responsible editors on the masthead, together with the Advisory Board listing, so that the positions taken in editorials would be properly attributed.