It is always an honor to be recognized by a foundation dedicated to the alleviation of human suffering, but it is especially rewarding to be cited by one such as yours which I can observe moving steadily toward its goal.

By ordinary standards your efforts to enlist the American people in a concerted attack on cystic fibrosis would be enough to justify public admiration and gratitude. They have made more bearable the distress and fear of thousands of families stricken by this tragic disease. Your community education programs have enabled parents to face their problem and to realize that much can be done for their children even though a cure for the disease remains to be found.

Your standards, however, demand more of you and frequently produce better ways to advance this valuable work. Especially noteworthy is the recent decision by your board of trustees for the establishment of a nation-wide system of Regional Cystic Fibrosis Research and Teaching Centers to bring to patients in all of our communities the gains which are being made in diagnosis and treatment. Thus you assure there will be no lag between the results of your research support and their practical application.

The Federal Government appropriately has joined the resources of its National Institutes of Health with yours in attacking this complex disease. The two Institutes assigned this research mission have taken important and hopeful steps toward the community aim of better understanding and improved treatment of cystic fibrosis.

Some of these resources have been expended for a necessary basic step of bringing together experts in an international conference to exchange knowledge and for a pilot survey to form the basis of a national survey. Though the survey was preliminary in nature, as you know, it yielded valuable information about the age incidence and distribution of the disease.

Though the Government research mission is comprised of disciplined studies, I might mention there is nothing rigid in the approach or day-to-day orientation of the several Institutes involved. When a new complication or new disease relationship to cystic fibrosis is found by one team, supporting studies are taken up by a more aptly-qualified Institute on the research "campus" at Bethesda, Maryland. Related conditions such as eye changes, or staphylococcal and other pulmonary infections are traced and clarified in the appropriate Institute.

Thus, a promising new anti-staphylococcal drug is tested at the Institute of Allergy and Infectious Diseases, a basic biochemical defect is more effectively studied in the Institute of Arthritis and Metabolic Diseases.

Not all the effort is contained at Bethesda. As does the National Cystic Fibrosis Research Foundation, NIH supports deserving research projects through grants-in-aid to investigators in private institutions. My personal interest in this phase of the effort has been keen ~~since~~ for a number of years. 1958. In ~~that year~~ I had the satisfaction of seeing NIH research grant appropriations for cystic fibrosis increased to $750,000. In 1961, the grants totalled one and a half million dollars. A similar

amount is estimated for 1962. This is in addition to $172,000 expected to be devoted to intramural research.

I assure you I shall maintain this personal interest.

The awful complexity of the disease is well known to you, yet the results are beginning to return to us from these grants. Each result, whether it is a reevaluation of previously held concepts, or an improvement of existing diagnostic criteria--or a totally new set of data--is bringing us closer to our common goal.

Such results, joined with your own, are impressive in their scientific accomplishment and give us all satisfaction; but there must be a special satisfaction to an organization such as yours to know that it is building the Regional Centers that will bring home these gains to our citizens.

WASHINGTON CHAPTER
NATIONAL CYSTIC FIBROSIS RESEARCH FOUNDATION
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FOR RELEASE ALL NEWSPAPERS AFTER 6:00 P. M., June 15, 1961

WASHINGTON, D.C., June 15 -- Senator Lister Hill (D) of Alabama and Congressman John E. Fogarty (D) of Rhode Island were presented tonight with the 1961 Distinguished Service Award of the National Cystic Fibrosis Research Foundation for their extraordinary, continuing contributions to the health and welfare of America's children.

The presentations were made by Robert L. Natal of New York, President of the Foundation, at a dinner at the Statler Hotel given by George Frankel of Greenwich, Connecticut, Foundation Trustee.

Abraham Ribicoff, Secretary of Health, Education and Welfare, and Dr. Dorothy H. Andersen, first American physician to have identified cystic fibrosis, were among the eminent physicians, public health officials and political figures who gathered to honor the two legislators.

It was under Mr. Ribicoff's leadership, when he was Governor of Connecticut, that the State inaugurated the first program in the nation of assistance to cystic fibrosis victims and their families.

Mr. Natal, presenting the awards "on behalf of infants and children afflicted with cystic fibrosis, and their parents," declared that tonight's events were a symbol of the cooperation that must be maintained between government and voluntary health agencies. "Voluntary health agencies do not compete with government health programs," he said. "They complete the job as only free associations of citizens can do it."

(more)

Dr. Kenneth S. Landauer, the Foundation's Vice-President for Medical Affairs, said that cooperation between public and voluntary agencies was absolutely essential to the people's health.

In outlining the work of the National Cystic Fibrosis Research Foundation, he said: "This Foundation is sponsoring a nation-wide network of Regional Research, Care and Teaching Centers to advance opportunities for research and promote better understanding of this catastrophic children's disease.

"A recent survey has shown that not more than 10% of the 25,000 CF patients in this country have had the advantages of earliest possible diagnosis and optimum medical care. Many more children can be helped to live normal lives if modern methods of treatment are instituted early.

"Our program of professional education is tremendously important from this point of view," Dr. Landauer went on, "for teams in our regional research centers will be able to assist physicians in the diagnosis and management of this perplexing, so often fatal disease.

"The best promise for the early solution of the cystic fibrosis problem," he concluded, "to this major threat to children's lives, lies in the coordinated efforts of all responsible health authorities, both public and private."

Among the noted figures in medicine, public health and politics who attended the dinner were: John Bailey, Chairman of the Democratic National Committee; Senator Thomas Dodd of Connecticut; Dr. Luther Terry, Surgeon General of the United States Public Health Service; Dr. Marion Crane of the Children's Bureau; Dr. David Price, Deputy Administrator of the National Institutes of Health; Dr. Justin Andrews, Director of the National Institute of Allergy and Infectious Diseases; Dr. William S. Anderson, Washington District Chairman of the American Academy of Pediatrics; Dr. Joseph Stokes, Jr., Physician-in-Chief of the Children's Hospital in Philadelphia, Pa.; and Dr. Robert E. Cooke, Pediatrician-in-Chief of the Johns Hopkins Hospital in Baltimore, Md.

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