



# THE AMERICAN CANCER SOCIETY: A PROFILE

An Address by Mefford R. Runyon



before Annual Dinner Meeting  
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## FOREWORD

Those of us who were privileged to listen to Mefford R. Runyon's address at the Annual Meeting Dinner, October 29th, 1959, were deeply impressed with the vivid way in which he recalled for us the dramatic history of the American Cancer Society. The twelve years of Mr. Runyon's association with the Society, from 1948 until his retirement as Executive Vice President in 1959, were the years of its phenomenal growth. During this time he gave unstintingly of himself, leading, inspiring and aiding the Society.

We are living in times of rapid change. New concepts, new attitudes in medicine, and in the world at large take form almost by the hour. What we accept as commonplace today was undreamt of a few short years back. To preserve elasticity of thought and vigor of imagination it is valuable to recall the challenges of yesterday and how they were met.

This pamphlet has been prepared so that others may draw upon Mr. Runyon's account of the years of change and growth within the Society, and in a measure share in his vision and in his hopes for its future.

Warren H. Cole, M. D.

THE AMERICAN CANCER SOCIETY -- A PROFILE

-- Mefford R. Runyon

It has been my privilege and duty many times to write and talk about the problems, sometimes the accomplishments, and almost always of the statistics of cancer, and of the work of the Society. Here I would like to do something quite different. . . . I would like to give you the feeling of a great army of people from all parts of the country, from all walks of life, from all economic levels and a great variety of social and ethnic backgrounds, banded together for just one purpose -- the conquest of that family of diseases called cancer.

The Society is, after all, the reflection of the people who formed it, who developed it, and who now lead it. So I will discuss the accomplishments of the past forty-five years and some of the current problems.

Herbert Hoover has said, "Ours is a voluntary society and the fabric of American life is woven around our tens of thousands of voluntary associations. That is, around our churches, our professional societies, our women's organizations, our businesses, our labor and farmers' associations, and not least, our charitable institutions." The American Cancer Society is such an institution.

The ACS -- The Largest Voluntary Health Agency

In 1959, the ACS became, I believe, the largest voluntary health agency in the country in point of public support. It is devoted solely to the conquest of cancer -- the second major cause of death in this country --

a disease which takes the lives of as many people each year as live in our largest state, Alaska.

The Society has repeatedly stated publicly that it is an emergency organization. When once it has accomplished its objective, it will consider its mission fulfilled, will disband, close its doors, and go out of business. It is on this basis that it appeals to all Americans for their understanding and for their participation and support.

To appreciate this position and its significance, we must examine briefly the Society's beginning, some highlights in its development, the character of the people who make it up, and the contributions it has already made to the fabric of American life -- and something of the difficulties which confront it at this time.

Cancer is one of the oldest recognized diseases, being mentioned in the earliest recorded history of the human race. Little was known of the disease and little was done about it until near the turn of the last century. In this country the first organized public effort dates back to the early 1900's.

A. M. A. and Gynecologists Appoint Cancer Committees

In 1905, at a meeting of the American Medical Association, Dr. Lewis McMurtry, then President, proposed a committee to prepare a report on cancer mortality. This committee recommended:

1. education of physicians, and
2. education of the public, especially of women.

In May, 1912, at a meeting of the American Gynecological Society in

Baltimore, papers were presented by a number of doctors, including Dr. Howard C. Taylor, father of our own Dr. Taylor, Dr. Thomas S. Cullen and Dr. Reuben Peterson, on Radical Abdominal Operation for Cancer of the Cervix. These papers made such an impression that it was decided a committee should be appointed to collect facts on this form of cancer and work out a plan of action to be presented at the next A. G. S. meeting.

#### A Meeting of Medical and Lay Leaders

In March, 1913, this committee met with Dr. Clement Cleveland, an outstanding New York gynecologist, and requested that he appoint a committee of laymen and doctors to aid in the establishment of a national cancer society. The following week, a meeting of medical and lay leaders was held at Dr. Cleveland's home in New York City. Mrs. Robert G. Meade, Dr. Cleveland's daughter, always an inspired leader in the work, was present. It happened that all of the laymen who attended this meeting were residents of New York City. They decided not to form a permanent organization at that time, but merely to indicate to the American Gynecological Society the group's willingness to cooperate in such an undertaking. This seemed wise as someone observed, "We are always a little shy of anything that starts in New York", and it was decided that New York should be kept in the background.

A second meeting was held on April 22nd, 1913, again at Dr. Cleveland's home. Dr. Frederick L. Hoffman, statistician of the Prudential Life Insurance Company was in attendance and stressed the increasing cancer

mortality rate. Dr. Joseph L. Bryant suggested that a resolution be adopted to form an organization "for the purpose of putting before the public the necessity of taking steps to reduce the number of deaths from cancer".

### The Society Is Born

The 38th Annual Convention of the American Gynecological Society was held in Washington the first week of May, 1913. The Congress of American Physicians and Surgeons met at the same time. The entire second day of the Convention was devoted to the subject of cancer control. Dr. Hoffman again warned, "I am absolutely convinced that the cancer death rate is increasing and the larger recorded mortality is not primarily due to improved medical diagnosis and more accurate methods of death certification." He concluded his address with ten recommendations, one of which was for the organization of an American society "for the study and prevention of cancer, primarily for the purpose of educating the public at large in the absolute necessity of operative treatment at the earliest indication of cancerous growth."

It is significant that cancer research was not mentioned as one of the functions of the proposed Society.

A meeting of ten doctors and five laymen at the Harvard Club followed on May 22nd, at which the Society was formally created. It was the culmination of lengthy reports, detailed studies and many conferences. The American Medical Association, the Congress of American Physicians

and Surgeons, the American Gynecological Society, the Clinical Congress of Surgeons of North America, insurance companies, interested laymen and laywomen were all involved. Thus the Society at its birth could claim distinguished sponsorship.

The resolution adopted on May 22, 1913 was as follows:

"Resolved, that we form a Society for the following purposes: to disseminate knowledge concerning the symptoms, treatment and prevention of cancer; to investigate conditions under which cancer is found; and to compile statistics in regard thereto."

Two weeks later they named the infant organization THE AMERICAN SOCIETY for the CONTROL OF CANCER.

#### Early Growth - 1913-1922

Nine years later, on May 15, 1922, the Society was incorporated under the membership corporation laws of the State of New York. A national charter had been applied for but the Judiciary Committee of the U. S. Senate decided against it. The national charter was desired because it was believed it would reduce sectional animosity which had been with the Society since its inception in 1913. Mr. Thomas Debevoise, the Society's legal adviser, in a report to the Board on the subject of incorporation, said, "There exists a feeling in the west that those fellows in New York are spending the money we are raising." (Happily, in 1959, some thirty-seven years later, this attitude has passed.)

First Managing Director

In February 1923, the Society created the post of Managing Director in response to demands for a full-time overseer of its increasing activities. After a careful examination of numerous candidates, the Executive Committee selected Dr. George A. Soper, "the epidemic fighter", (who was largely responsible for the location and detention of "Typhoid Mary") at a salary of \$10,000 annually. He served for six years, revealing rare qualities of imagination, industry and perseverance.

One of his important contributions was the formulation in 1923 of a "statement of principles and policies" which contained four points which were to serve as the ground work of the Society's activities throughout the twenties and well into the thirties. They were --

1. The development of the information-gathering function of the Society.
2. The insistence upon accuracy of statement and the use of fear as a motivating force.
3. The necessity of obtaining an endowment fund to meet the minimum running expenses of the Society, and
4. The importance of encouraging the establishment of cancer clinics and cancer institutes.

Dr. Soper observed, "The two main functions of the Society are epidemiological and educational, but it is not enough that a person know what to do, he must be induced to do it. The Society must make skillful use of the principles of practical psychology."

(His advice is just as pertinent today as it was in 1923).

### International Cancer Symposium

In the fall of 1926 the Society, on the urging of Dr. Soper, and following a National Conference held in 1924, arranged an International Cancer Symposium, one of the most important events in the first two decades of its history. The Symposium brought together 109 leading authorities in cancer control throughout the world. It formulated the future direction of the Society's work.

At the conclusion a series of resolutions was prepared. One included fifteen statements "of practical facts or sound working opinions which should serve as the basis of the campaign which mankind should make against cancer. Another called for the establishment of an international federation of societies for the control of cancer. Another dealt with quackery. Thus, already, we see coming into being the pattern which the Society was subsequently to develop more fully. Professional education, public education, research, international cooperation -- all of the elements of a complete cancer control program.

The Society was praised by almost every medical society in the country for arranging the Symposium. Unexpected interest on the part of newspapers gave it wide coverage. Reporters requested facilities for filing 30,000 words daily. The educational and publicity value was only one of the many unexpected benefits to accrue from the meeting. It was, as the Society's report modestly concluded "a most important gathering."

### Endowment Funds

The Society was in a precarious financial state and one of the most

important of Dr. Soper's 1923 suggestions was an endowment fund. The drive was officially begun in the Spring of 1926, with donations of \$1,000 each from Dr. Taylor, Dr. Frances Carter Wood and Mr. Debevoise; \$50,000 from J. P. Morgan and Company, and \$100,000 from Mr. Edward H. Harkness. By March 1927, after \$600,000 had been collected, Mr. R. G. Cutting notified the Society he would give \$250,000 on condition that at least \$750,000 had been collected by October 1st of that year. This was achieved, and by the fall of 1927 a million dollar endowment had been established. This endowment fund is still intact and the Society has always been designated by the trustees as the beneficiary to receive the approximately \$30,000 of annual income.

#### First State-operated Cancer Hospital

In 1927, another significant first in cancer control occurred. On June 21st the first cancer hospital in the United States, operated by the State, was formally opened at Norfolk, Massachusetts. This is now Pondville. Among those seated on the speaker's platform was Governor Alvan P. Fuller. Thirty-two years later, in 1959, the Fuller Foundation, which he established, gave the Society \$500,000 -- the largest single unrestricted gift it has ever received.

#### A Major Educational Effort

In 1929, Dr. Clarence Cook Little succeeded Dr. Soper as Managing Director. He recognized that anything resembling a country-wide integrated program of lay education did not exist. He believed that previous attempts to educate the laity had been ineffective. Facilities for diagnosis

and treatment were inadequate to meet whatever demand was created by an education program. Here, again, we find early recognition of the mutual interdependence of all parts of the Society's program. Accordingly, in 1930, the Society started plans for a major educational effort with the medical profession. They would be urged to continue the establishment of cancer clinics and hospitals and when this work was well under way a mass educational effort would be organized.

#### The Women's Field Army

Space does not permit any more than a mentioning of the conferences, meetings and so on which finally brought the General Federation of Women's Clubs to decide in November of 1933 to sponsor a vigorous cancer education program within its own membership and to actively aid the Society.

The efforts of Mrs. Grace N. Reynolds, President of the Federation and Mrs. Marjorie B. Illig, Chairman of its Committee on Public Health were, in Dr. Little's words, "absolutely invaluable in bringing about the turn of events" under which the plan for the Women's Field Army of the American Cancer Society for the Control of Cancer was devised. This plan was presented to the Society's Executive Committee in 1936 and was approved. Mrs. Illig, who had been appointed Lay Field Representative the previous year, was authorized by the Executive Committee to "proceed with the organization of the Women's Field Army as rapidly as is consistent with tactful and diplomatic handling of the various situations

in different localities."

In 1936, the first volunteer enlistment drive was conducted and the mobilization of American women to "vanquish this disease" was begun. This was the first large recruitment of volunteers and pointed the way for the continuing development of the mass effort of all of our people to eradicate this disease.

It is interesting that first in a statement of seven objectives of the Field Army was "seeing that women report for periodic physical examinations to detect signs and symptoms that may mean cancer".

Mrs. Illig served as Commander until 1943 and soon after her resignation Mrs. Harold V. Milligan was appointed National Commander of the Women's Field Army, and continued in that role until this office was discontinued by the Society in 1951.

The results achieved by the Women's Field Army greatly aided the establishment of the Society as a national organization. In recognition of the part which women played in the work of the Society, the office of Woman Vice-President was set up. The first incumbent was Mrs. R. E. Mosiman of Washington, now an Honorary Life Board Member.

The active participation of the General Federation of Women's Clubs with the A. C. S. has continued throughout the years. At its last annual meeting, under the influence of Mrs. E. Lee Ozbirn, currently the Federation's First Vice President and an Honorary Life Board Member of the Society, a resolution was passed urging its members to give full support

to major health organizations such as the Society.

### Towards Reorganization

But even with these developments the Society, in the early forties, was still small and its program incomplete because the disease was not being attacked in the fundamental way which would ultimately develop a cure or means of prevention.

The first step in the contemporary stage of the Society's history was taken on a windy afternoon late in November of 1943 when Mrs. Mary Lasker visited Dr. Little at the Society's offices at 350 Fifth Avenue. She asked him some pointed questions about the Society. "What had it done in the past, what was its present program, and what plans did it have for the future?" She had become actively concerned about the cancer problem as the result of the death of her cook.

### Research Funds

About this time Mrs. Lasker had come across an article by Dr. C. P. Rhoads, (a great pioneer cancer fighter, recently removed by untimely death) in a pamphlet published by the New York City Cancer Committee. Dr. Rhoads stated that there was no single hospital or research center which had as much as \$500,000 a year to pursue research looking toward a cure for cancer. The annual income of the American people at that time was about 250 billion dollars, and in business \$500,000 wasn't adequate even to launch an advertising campaign for toothpaste. But no single laboratory had that amount with which to try to conquer the number two cause of death in this country. What a challenge! What an opportunity!

Mrs. Lasker conferred with her husband, Albert D. Lasker. He was disturbed at the deplorable state of affairs but his own health and the pressure of business would not allow him to become active in the cancer movement. He suggested that Emerson Foote, one of his young associates, might be willing. Foote, whose parents had both been victims of the disease, was deeply interested. He met with Dr. Little and they spent long hours discussing ways and means of enlarging the cancer movement. This was the beginning of the reorganization of the Society and the reorientation of its program. It is a fascinating story of the interest and imagination displayed by many people.

Assistance from the READER'S DIGEST

Things continued to happen. At lunch one day in August of 1944, Mrs. Lasker and Mr. Foote spotted Lois Mattox Miller, an outstanding medical reporter and editor of the READER'S DIGEST, to whom they told the problems they were facing in the campaign for funds for the American Cancer Society. Mrs. Lasker disclosed some frightening statistics and stated that the Society was raising no funds whatsoever for research. Mrs. Miller wrote an excellent piece which took about two-thirds of a page in the DIGEST and persuaded Mr. DeWitt Wallace to allow her to add a line asking for contributions to be sent to the Society. This first article in October, 1944, and two other short pieces in the spring, brought the Society more than \$120,000 in direct contributions. Almost incredible!

Reorganization and Allocation of Funds for Research

The Laskers recognized that the \$800,000 raised by the Society in 1944, largely through the efforts of the Women's Field Army, was pitifully inadequate for the job it faced. Never ones to criticize, except constructively, they agreed to pay half of the salary of a campaign director for 1945 if the Society would hire Mr. Leo Casey, a man with an excellent record as a fundraiser. This was agreed to.

Dr. Frank E. Adair was then the President of the Society. Mr. Casey suggested Eric Johnston, President of the United States Chamber of Commerce, as Chairman for the 1945 campaign. Dr. Adair agreed, and Mr. Johnston accepted. Another step in the Society's expansion was accomplished.

Mr. Casey resigned just as campaign plans were crystallizing. It looked for a time as though the Society would either have to postpone its 1945 drive or conduct it on a much narrower basis.

Again the Laskers offered their help. They brought the John Price Jones Company into the picture, persuaded them to take over the fund-raising drive, and agreed to pay their expenses on condition that the Society would set aside 25% of all the money raised for cancer research. The Executive Committee willingly agreed. The campaign went forward.

The Crusade succeeded beyond fondest expectations and \$4,292,491.00, over five times the previous year's amount, was raised. And research, the keystone of the Society's subsequent program, was under way.

The complete reorganization of the Society proceeded apace, with new by-laws, a new Board setup, a new Executive Committee. The philosophy was firmly established of combining the interest and skills and influence of doctors and of lay people into an effective, hard-hitting nationwide volunteer organization, determined to stamp out cancer at the earliest possible moment.

The transition to the new was not easy and when bold, imaginative men of business affairs such as Elmer H. Bobst, Emerson Foote, James S. Adams, Albert Lasker, Alfred Sloan, General John Reed Kilpatrick, Eric Johnston, came into the picture and attempted to work with the medical leadership which had served the Society so long and well, there were many stormy sessions.

Here the patience, prestige and broad vision of the Society's President, Dr. Adair, and the drive and imagination of Dr. Rhoads came into full play. Their persuasiveness and vision smoothed out the differences and the Society moved forward into constantly enlarged areas of influence, of organization, and of public confidence and esteem, and progress towards its goal.

#### The Society's Distinguished Leadership

No profile of the Society would be complete without mention of Henry Von Elm, long-time Treasurer in the early days, or Vic (James) Stuart, another Treasurer and always staunch defender of the prime importance of the National Society; or General William J. Donovan and

Dr. C. C. Nesselrode, who passed on to their rewards this last year, or Dr. Charles C. Lund, Dr. Alton Ochsner, Dr. G. V. Brindley, Honorary Life Board Members, and a host of other physicians who as Presidents and Chairmen of important committees have conceived and directed its medical affairs. And Governor Walter J. Kohler and Dr. Eugene P. Pendergrass, Dr. L. T. Coggeshall and Dr. Warren H. Cole, and Ruddy (Rutherford) Ellis, who as the responsible officers of the Society during the past two years traveled around the country repeatedly explaining our new fund-raising policy to Divisions, to Units and to the press. Their imprint on the Society will always remain.

Significant Accomplishments : 1945-1959

Between 1945 and 1959 the Society as an organization, and the war on cancer in this country, expanded almost unbelievably. I would like to comment briefly on what appeals to me as the most significant accomplishments during this fifteen year period and the part the Society played in them.

1. Stimulation of Government Interest in Cancer Control

After the reorganization in 1945, leaders of the Society recognized that if this disease were to be conquered in the foreseeable future, it would only be through research, research and then more research, and that since the welfare of all the people is involved, the federal government should enter the picture in a substantial way. This meant long, careful and persistent education of those who control the government's purse strings. Mr. Lasker and Mr. Adams took the initial lead in

arranging for expert testimony to be given before Appropriations Committees. There is no doubt that the information given by such leaders as Dr. Rhoads, Dr. Sidney Farber, Dr. I. S. Ravdin and a host of others, over a long period of years, and Mrs. Lasker's own indefatigable efforts, have been determining factors in the present level of support not only of the National Cancer Institute but of other Institutes of Health as well.

Mr. Lasker early realized that the problem of informing Congressmen on these health subjects was a difficult and continuing one which could not be accomplished by appearing for a few hours once a year before committees. He urged the Society to provide a full-time representative in Washington whose responsibility it would be to bring to the attention of Congressional leaders, at all appropriate times, the cancer challenge and to urge them to take effective steps to protect the health of the people. The Society, on January 1, 1952, engaged the services of Colonel Luke Quinn, a Public Relations Consultant, who now represents, in addition, other health agencies and the Association of American Medical Colleges.

Mention should be made here, too, of the important roles in government appropriations being played by Senator Lister Hill and Congressman John E. Fogarty, who were honored by special Lasker Foundation Awards at the American Public Health Association meeting in Atlantic City recently.

It may well be that, in the long run, the initiation and sponsorship of the cancer research program in this country and persuading Congress of the part which Government must necessarily play in the total fight on cancer will prove to be the most important contribution made by the American Cancer Society in the war on this disease.

The emergence of the Government as the financially dominant partner of the Society has assuredly brought the total conquest of cancer much nearer. It also unfortunately has raised questions in some quarters as to the continued essentiality of the Society itself, particularly in the field of research. While we cannot, in the foreseeable future, hope to have nearly as much private funds available as Congress gives to the National Cancer Institute, neither of us has ever had enough to support all worthwhile projects.

We effectively perform another essential role in providing an additional source of research funds to which scientists may appeal if they are turned down by the government--as they may appeal to the government if they are turned down by the Society. Nothing would have a more deadening influence on research in cancer than the scientist having only one agency to look to for support. That would be stultifying monopoly.

The Society has taken the lead in developing an effective working relationship with the National Cancer Institute, thereby setting the

pattern for a harmonious liaison between a voluntary health agency and a government partner.

The Society is a movement of the people, and it follows that its educational and service efforts are more effective and persuasive because of the personal contacts involved than those which can be provided by governmental agencies.

Moreover, without the aid of the volunteers, which only the Society could enlist, it would have been completely impossible to carry out the smoking study or to embark on the current Cancer Prevention Study.

Because our medical policies are determined by physicians in private practice we can bring the latest techniques of diagnosis and therapy to the general practitioner in the most acceptable manner.

As President Eisenhower well said recently, he would decry anything which would substitute federal funds for non-federal support of medical research and training, and which would discourage further expansion of such support.

No, the Society's mission is still unfulfilled. Do not be misled by any feeling that it is any less urgent now than it ever has been.

Both we and the National Cancer Institute are needed in our respective roles and we both are needed in larger measure than ever before.

## 2. The Research Program

In 1945, when the Cancer Society initiated the research program it allocated to it about one million dollars of the four million raised that year. In the same year the total National Cancer Institute appropriation was some \$600,000, of which about two-thirds, or \$400,000, was for research.

Fifteen years later, in 1960, the total federal appropriation to the National Cancer Institute was \$91,257,000. The Cancer Society raised nearly \$31,000,000 for its 1960 program. From all sources, at least \$95,000,000 supported research in 1960 - nearly seventy times as much as in 1945.

The Society's own program was set up initially under scientific advice provided by the National Academy of Sciences through its Committee on Growth. This Committee promoted a program of research fellowship training and of projects in cancer research in many medical schools and laboratories throughout the country.

The Society's Research Committee, under the imaginative leadership of James S. Adams, set up a program of institutional grants, providing fluid funds directly to carefully selected institutions to be distributed by proper local committees. The program's purpose was to stimulate cancer research and to permit the pursuit of promising

leads without delay. This rather divided supervision of what, after all, was a single program, continued until 1955, when the Society decided to survey its whole role in this field.

A Research Policy Survey Committee was set up. After long deliberation, it recommended that the Society should itself set up directly its own advisory committees to report directly to the Board, through the Research Committee. This reorganization plan was approved by the Board. The Research Advisory Council and six Advisory Committees were recruited. Dr. George W. Beadle, later a Nobel Prize Winner, was the first Chairman of the Council, a position he still fills with distinction.

Mr. Charles D. Hilles and Dr. Coggeshall took the lead in piloting the reorganization plan through the Society's Committees and Board.

The role of the Research Committee is now clearly one of management, with all scientific questions being considered by its Advisory Council.

Under this new setup our program has expanded both in financial resources and in scope. Additional faculty-level positions providing

tenure careers for the most promising young scientists have already been given to eight institutions. Grants are now being made assuring support of individual researchers for periods up to five years. The costs imposed upon the medical schools in providing the facilities in which the research is carried out have been recognized. Our contribution towards these indirect costs has been increased over the years from 8% to 15%, and currently, to 25% of the grant. This is still less than full reimbursement.

The Society has also played a vital role in promoting more adequate federal appropriations to the National Cancer Institute.

3. Change in Public and Professional Attitudes

Another outstanding accomplishment has been in the changed attitude of both the medical profession and of the public toward cancer. A belief that cancer was a disease hopeless of cure, and a disgrace to admit, has been replaced by one of understanding. Now the belief is accepted that in their early stages many cancers can be cured, and that the responsibility for going to the doctor in time rests with the individual involved. This change in outlook of our entire popula-

tion has had incalculable effect on the success of the nationwide attack on this disease.

In professional information the prompt, accurate dissemination of knowledge of the latest techniques of diagnosis and treatment to physicians stands as an outstanding achievement. Through the publication of magazines, through movies, through articles in medical journals, through the imaginative use of television and kinescopes, through meetings, symposia and conferences, doctors throughout the length and breadth of the country are kept up to date on developments useful to their patients. Physicians' alertness to the possibility of cancer when a patient presents himself, and their readiness to use all new techniques and drugs refute those who decry a medical monopoly of which they claim to be the victims.

#### 4. The Society on the International Scene

In 1956, through the generosity of Mrs. Lasker and Mr. Bobst, we invited as guests of the Society, delegates from some thirty foreign countries to attend the National Cancer Conference in Detroit, to visit the National Cancer Institute in Washington, the ACS National Headquarters and several of the Divisions of the Society. The idea

was that these visitors would return to their own countries and perhaps organize similar movements.

These beginnings are bearing fruit all around the world. There is a growing cancer attack in many countries by both government and volunteers.

Discussions have taken place between President Eisenhower and Mr. Khrushchev, looking toward international cooperation in the field of cancer research as well as in other fields of medical research. The Society supports the proposal to set up a new International Institute of Health at Bethesda.

5. The Society's Role in Control of Cancer of the Cervix

Another great accomplishment of the Society is its program aimed at eliminating cancer of the cervix as a major death threat to women. Realizing early the unlimited possibilities of the Papanicolaou technique as a means of detecting cancer of the cervix in its earliest, most curable form, the Society, under Dr. Charles S. Cameron's imaginative leadership, pioneered in spreading this information among doctors; in winning their acceptance; in providing the necessary facilities and technicians to make the test generally available; and finally, in persuading women to present themselves for the test at appropriate intervals. The spectacular drop in mortality from cervical cancer since

1946, when the Society first began to urge physical examinations, is another testimonial to its attack on this disease. Now it is possible to look forward confidently to a day when cancer of the cervix as a cause of death will be virtually eliminated.

6. The Society's Role in Control of Lung Cancer

And, finally, the breakthrough in lung cancer is another milestone in the service of the Society to the American people. Unwilling to accept the mounting testimony of retrospective studies, the Society undertook a massive, prospective study of its own. Possible only through the intelligent, persistent and devoted efforts of thousands of volunteers, extending over several years, the smoking habits of 188,000 men were studied in relation to mortality. From this and from many other studies, both here and abroad, came evidence which the Society has accepted that excessive cigarette smoking is the major cause of lung cancer.

The latest evidence of determination to face and act on this problem is a resolution passed by the American Public Health Association in Atlantic City recently. It points out that if present trends continue, lung cancer will claim the lives of more than one million present school children in this country before they reach the age of 70. The Association calls upon health authorities to undertake a broad educational effort, especially among young people, to prevent cigarette smoking and it urges health authorities to collaborate with voluntary

health organizations and with educational authorities in this effort.

The American Cancer Society is undertaking an intensive educational effort directed at school children to inform them early, before their smoking habits are formed, of the hazards which they run.

As part of its general educational program the Society will continue to inform the public as new information is developed.

The cigarette industry has recognized the health menace in its product. In no industry in such a short time has such a major production revolution occurred. Now through filters, special papers, and so on, manufacturers claim the removal of more and more noxious tars and nicotine, trying to indicate to the public that their cigarette is safer. The burden of proof is clearly upon the industry to demonstrate that the use of its product is safe.

#### 7. Volunteers as Crusaders

The Cancer Society's imaginative, consistent use of all of the means of mass communication and of volunteers has been one of the most noteworthy evidences of what an aroused people can do to protect itself.

This could not have been done without the year after year work of numberless cancer crusaders. In April, at the time of the fundraising and educational Crusade, they faithfully call on their neighbors in all sorts of weather, not only to ask for financial support but to give

information about cancer's seven danger signals, the necessity of annual physical checkups, and to comfort victims of the disease.

Too many people disregard the life-saving possibilities of the Crusade.

The million cured cancer cases, and the one out of three who are now being saved, owe their lives to it in large measure.

### Fund-raising Problems

A major problem facing not only the Society but the whole American people is the alarming conflict over the support of philanthropy in this country. The menacing feeling that we may no longer be free to go directly to the American people for the support of our cancer programs, the personal attacks on our leaders and volunteers, the duplication by other groups, of programs which have been carried on by the Society for years, open advice to the public not to contribute, and sly attacks on the accuracy of our figures will, in the long run, boomerang. They will result not only in slowing the attack on cancer but in damage to the total cause of philanthropy.

The slogan of "Give Once for All" is thoroughly misleading and, if widely adopted, it would, in my opinion, constitute a near national calamity. There is no acceptable evidence that it is now, ever has been, or ever will be, possible to raise all of the funds which are necessary for philanthropic and charitable organizations through a single monolithic drive. It is, of course, theoretically possible to have only one drive, to raise as much as possible, and then divide the pie among the supplicant agencies as far as it

will go. This would inevitably weaken the agencies and their capacity to provide their essential public services. It would, in our case, even more importantly place a nationally conceived and executed cancer program under the local control of hundreds of United Fund Budget Committees by giving them the power to grant or withhold funds. Let's face the facts -- whoever controls the purse, controls the program.

The American Cancer Society reached a decision as to its policy in this matter by democratic action of its representatives from all parts of the country. I urge the United Funds to respect this decision of responsible, dedicated and unselfish citizens, to cease its attacks on the Society and its leaders and to devote its fund-raising efforts to the fuller support of agencies which participate voluntarily in them. I also urge cancer volunteers to support fully the efforts of the United Funds and Community Chests in raising money for services in their own towns and cities.

#### Need for Effective Rating of Health Agencies

On the other hand, there is a multiplicity of health agencies which appeal to the public for national support, both financial and personal. This burgeoning of high sounding organizations, many of them concerned with a small part of a specific disease area with an almost purely local operation, or with duplicating services already being adequately provided, may in the end result in confusion and overlapping which will diminish the effectiveness of each of them. People who are responsible for these campaigns

should be honest and forthright in presenting them to the public for what they truly are with all the facts clearly disclosed. I wholly support the right of any organization to appeal to the public for funds for any purpose, providing its case and its cause are fairly and completely presented so that the public can make an intelligent decision to give or not to give. I believe that for the protection of both the public and the agencies, a sort of Dun and Bradstreet rating bureau should be set up independently of the agencies themselves. This should appraise organizations who seek public support on a national basis, including not only the health agencies but also the welfare causes and the United Funds, some of which are unnecessarily setting up or supporting duplicating agencies to provide services already available from the Cancer Society. This is a needed guide for the always generous American people in carrying out their philanthropy.

The American Heart Association and the American Cancer Society have taken a step in this direction by urging the appointment of a commission to define the major areas of chronic disease in this country and to set up criteria for the information of the public.

ACS -- A Citizens' Movement

The Society is a means to an end -- not an end in itself. Anything which advances the victory over cancer by one day, we wholeheartedly welcome. Unfortunately, as of the moment, this day of victory appears well in the future. The Society must therefore continue its role of a

citizens' movement - supported, manned and directed by them. It can always operate with more flexibility than a government department. It must continue to act as a watchdog and stimulus to federal activity, making certain that governmental efforts are continued.

The staff throughout the country -- the result of long and careful selection and training -- is superb. The combination of an urgent cause close to everyone, of incomparable Board leadership and of staff competence and devotion has made the Cancer Society in 1959 the country's foremost voluntary health agency, as a million cured cancer victims bear thankful witness.

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