

TV TO BROADCAST CANCER THERAPY

**Color Telecasts Planned From
Medical Centers to Doctors
in Key Cities of Nation**

PROGRESS WILL BE SPREAD

**American Society, Columbia
System Join in \$250,000
Program of Hour Weekly**

By **KALMAN SEIGEL**

An ambitious program of medical education, in which closed-circuit color television will bring developments in cancer therapy to a third of the nation's doctors simultaneously, was announced yesterday by the American Cancer Society and the Columbia Broadcasting System.

The program—a new tool in the war against cancer—is designed to expose the maximum number of doctors to current therapeutic developments by giving them front seats in the operating room or laboratory although they are thousands of miles from the scene.

Plans are afoot to get the program under way in about six months. A weekly one-hour program, running fifty-two weeks, will emanate from large medical centers to thirteen cities east of Chicago. If the program goes well, it was said, it will be extended to six additional cities through to the West Coast.

The program was disclosed at the closing session of the thirty-ninth annual meeting of the board of directors of the cancer society at the Park Sheraton Hotel.

The board approved a report of its medical and scientific committee calling for development of the plan "within the limitation of an expenditure of \$250,000."

Clinical and Technical Aspects

Dr. Charles S. Cameron, medical and scientific director of the society, said such a series of television presentations would give doctors, at ease in clinics, hospitals, or society chambers "better than over-the-shoulder visibility." He likened it to "the clinic demonstration method," which he termed "the most effective form of medical education."

The announcement of the plan, briefly detailed in the committee's report, was confirmed and amplified later at a conference with Frank Stanton, president of the Columbia Broadcasting System, and Dr. Peter C. Goldmark, vice president in charge of the system's laboratories.

They said the proposal was "beyond the planning stage." Mr. Stanton said a search was being made for suitable sites for receivers and that the most likely places would be hospitals, medical society buildings, clinics or universities.

He explained that Columbia was making available its circuits and its technique, developed in the presentation of similar programs recently for medical association conventions. Dr. Goldmark said special equipment, designed and built by Columbia, would be made available to the society under an arrangement yet to be worked out.

The presentations, which will be carried by radio relay, will go first to New York, Baltimore, Philadelphia, Washington, Lancaster, Johnstown and Pittsburgh, Pa.; Cleveland, Toledo, Boston, Providence, Detroit and Chicago.

Later, Dr. Goldmark said, the program may be extended to Rock Island, Omaha, Denver, Salt Lake City, San Francisco and Los Angeles. He said the University of Pennsylvania Medical School and the University of Kansas Medical School used the technique as part of the regular course of study and that more medical schools were getting the equipment.

Availability to Large Groups

He also disclosed that special large screens would be used. A screen three by four feet, he said, would enable 500 doctors to see well. He said use of an eidiphor screen would enable a theatrical of physicians to look on.

Dr. Goldmark also observed that 55,000 to 60,000 practicing doctors of the nation's total of 157,000 were concentrated in the selected cities. He said the program envisaged rotating the major medical centers from which the presentations will emanate.

Mr. Stanton noted that a color recording would be made simultaneously for presentation in cities with no radio relay facilities. He emphasized that the program was "not a commercial venture." He said a Tuesday period, from 6 to 7 P. M., Eastern standard time, was under study as a likely hour for the presentation.

At the close of the society's annual meeting Gov. Walter J. Kohler Jr. of Wisconsin was named chairman of the board, succeeding Maj. Gen. William J. Donovan, wartime head of the Office of Strategic Services. Dr. Harry M. Nelson, a gynecologist and associate professor at Wayne University, Detroit, was elected president. He succeeds Dr. Charles C. Lund of Boston.

Other officers named were Dr. Warren C. Hunter of Portland, Ore., and Mrs. R. E. Mosiman of Seattle, vice presidents; James S. Adams of New York, vice chairman of the board; Lane W. Adams of Salt Lake City, treasurer; Rutherford L. Ellis of Atlanta, secretary, and Dr. Howard C. Taylor of Columbia University College of Physicians and Surgeons, chairman of the medical and scientific committee.