

MRS. ROOSEVELT MEETS THE PUBLIC

July 8th, 1951

Participants: ER, John H. Teeter, Dr. Charles S. Cameron, Dr. C.P. Rhodes

Description: ER discusses advances in cancer research with John H. Teeter, head of the Damon Runyon Memorial Fund and Dr. C.P. Rhodes, Vice President of the American Cancer Society.

(30:44)

[NBC broadcaster:] [speaking over advertisement music] You'll see all the celebrities on *Star Night at the Astor* tonight at ten thirty. Staying home? Read *Q* for television programs. Going out? Read *Q* for dining and entertainment suggestions.

[Bob Wilson:] This is Bob Wilson in New York. Formal Korean truce talks are to be held in the ancient walled city of Kaesong on Tuesday. That will be Monday night in the USA, and it's doubtful if we'll learn the progress of the talks until at least Tuesday morning. As to yesterday's meeting, the head of the Allied team termed his mission a complete success. On the fighting fronts we've knocked down three Russian jets in air action and made small gains on the ground. Stay tuned to your local NBC television for the later news.

[Theme music 31:35-31:54]

[NBC Broadcaster:] [speaking over music] The *Mrs. Roosevelt Meets the Public* program today is dedicated to the people who are devoting their time and full efforts to research into the prevention and cure of cancer. Not only the doctors and scientists, but also those who are instrumental in raising the funds necessary to carry on such research. [Music ends] We now join Mrs. Roosevelt and her guests in the Colonial Room at the Park Sheraton Hotel in New York.

[ER:] Good afternoon. We here in the Colonial Room at the Park Sheraton are being allowed a little air, some windows are open today so that you the audience may hear some street noises, and I hope you will just uh feel glad that we have some air. Now to our subject of the day. Cancer is a subject about which all of us in recent years have become acutely aware. We have learned of the tremendous toll that this disease takes on human life, and there are very few of us who have not come into close contact with this disease because it has hit a member of our family or a close friend. In recent years, public education has done much to make us aware of the signs of cancer and where to go for treatment. The American Cancer Society, for many years, has striven to educate the public about cancer and to familiarize us with the problems involved through this education. And they have labored long and hard to raise the funds necessary to carry on the research into the causes, prevention, and possible cure. In more recent years, other foundations and organizations have entered this field. One of the most outstanding being the Damon Runyon Memorial Fund. This organization was founded by friends of the late brilliant writer Mr. Damon Runyon to solicit funds to carry on the all-important cancer research work. To tell about the Runyon Fund and its activities, we have with us today Mr. John H. Teeter, administrator of the Damon Runyon Memorial Fund. To tell of the work of the American Cancer Society, we are fortunate to have with us Dr. Charles S. Cameron, um director and vice president of the American Cancer Society. Also Dr. C.P.

[Cornelius Packard] Rhodes, director of the Memorial Center for Cancer and Allied Diseases, which organization has made much progress in the fight to stamp out cancer. Now I'm going to turn to Dr.

Cameron to give us briefly a description of how the American Cancer Society conducts its activities and how it works with other foundations such as the Damien-Damon Runyon fund. Dr. Cameron. (35:12)

[Charles Cameron:] Yes. Mrs. Roosevelt, may I say first that uh the American Cancer Society was founded as the American Society for the Control of Cancer in 1913. Its founding was the result of an idea which had developed upon uh among a group of prominent gynecologists in the country: that many women were losing their lives because they did not realize the significance of certain early symptoms of cancer. So that the society was originally formed for the primary purpose of educating lay persons. This has continued to be one of its very prominent activities as you have pointed out, and with its growth during the years, others have been added. These are service to the cancer patient and research. The society was reorganized in 1934, and since that time has raised a total of about eighty million dollars, and a quarter of this, or about twenty million dollars, has gone to the support of the research program, which has meant uh enabling the um uh conduct of research in numerous institutions, laboratories, universities throughout the country, and permitting the training of young scientists and physicians of demonstrated ability and interest in this uh very highly technical field.

Uh, our activities are supported entirely by voluntary contributions; I suppose everybody knows today what a voluntary health agency is. I suppose there's a voluntary health agency for everything from infantile paralysis to the California Redwood. But we feel that cancer is particularly important because uh of the major diseases which confront us I think it is the one which is most susceptible of substantial relief here and now. Um to this end the society, through its affiliated divisions in the various states, support and initiate the development of new cancer clinics and provide aid in a variety of forms for cancer patients who need it. The program of education has been extended to include the doctors, both practicing physicians in the form of refresher courses and uh young doctors in training who are permitted to have from one to three years of intensive work in cancer diagnosis and treatment. Uh the funds which are raised by the society are divided somewhat as follows. Sixty percent stays in the division where it was raised, and 25 percent comes to the national organization to be reallocated in the form of research funds, and 15 percent comes to the national organization for the development of educational materials. In carrying out this uh research program, we have the benefit of a subcommittee of the National Research Council called the Committee on Growth, which consists of about one hundred and twenty of the country's leading scientists in various disciplines of-of science. (38:15)

[ER:] I would like to ask you a question; I don't know whether it's a question any uh research has been done in. Um comparatively speaking, what is the comparative death rate among children between polio, cancer, and, let us say, heart disease, because I believe those are the three diseases children suffer from most.

[Charles Cameron:] Well, I can-I can only give you those figures on the basis of children between five and fourteen, which is what I think children means in the vitality and mortality statistics record, and cancer is the leading cause of death from disease; it is exceeded as a cause of death by accidents. [ER: Accidents?] Yes, then comes heart disease, and polio is well down the list.

[ER:] That really means then, that in proportion, you should be spending more, shouldn't you, then um almost anything else [Charles Cameron: Yes.] except perhaps prevention of accidents. Well, you should be thinking about that.

[Charles Cameron:] Well, that's right, I think that's where that might lead you and I-and I feel like we should be uh and I hope someday in the not too distant future we can be.

[ER:] I have always felt that research should go on jointly in all these diseases because it has always seemed to me that in research, uh it was the rubbing together of minds that sometimes happened on

something, and that it was not so certain that each type of research should be carried on in a separate field. Am I wrong in that or--

[Charles Cameron:] No, I think the record bears that out.

[ER:] You think it does?

[Charles Cameron:] Yes.

[ER:] Well, I'm interested because I've always uh felt inclined to think that that would be so. Well now, Mr. Teeter, will you tell our audience something about the Damon Runyon Memorial Fund and how it operates? (40:08) [ER coughs]

[John Teeter:] I should be very happy to do so. Uh the fund was originally uh started by Mr. Walter Winchell, four days after Damon Runyon died, December 10, 1946. Uh Mr. Winchell was a very great friend of the late Damon Runyon, and Damon Runyon died of cancer of the throat. He went on-- Mr. Winchell went on the air on December 14 and suggested that some funds be used for cancer research. I don't think at that time anyone had the conception of what would grow out of that small beginning. Well, it has grown very rapidly, and today uh I think that it can be called a very successful agency in the field of cancer research. Now many people would ask why did the fund decide to go into cancer research? Uh there are many other fields uh that cancer--

[ER and John Teeter overlap]

[ER:] Is it all used, the money that you collect for research?

[John Teeter:] All the funds that are taken in are paid out for cancer research without any deductions whatsoever from the contributor's dollar. Now the reason we selected research was that uh while it was well recognized that their patient care is a sincer-- is a serious problem. Uh, if one uh just takes a brief computation and figures that two hundred fif-- thousand people die each year from cancer, and that the average hospitalization of a terminal case is about one hundred days, and the average cost per day is about fifteen dollars, that involves a cost annually of three hundred million dollars if you were going to try to take care of the patients. So it seems much more log-logical in a limited amount of money to concentrate on the cause and control. And uh our thinking of the Runyon Fund, as exemplified by Mr. Winchell, the founder and treasurer; Mr. Dan Parker, the sports editor of *The Daily Mirror*, the president; Mr. Leonard Lyons, of the *Post* is uh vice president; and Leo Lindy, of Lindy's Restaurant, is the secretary. And they have been very successful in this period of time, collecting a little over five million one hundred and forty-eight thousand dollars, and I should add twenty-eight dollars and seventy one cents because we have this very interesting telegram from the children of Bethlehem, New Hampshire, adding the twenty-eight dollars and seventy-one cents. (42:18)

[ER:] Oh, I think our audience would enjoy this telegram. May I read it?

[John Teeter:] I -- please do.

[ER:] "The children of Bethlehem, New Hampshire, population 985, today asked us to forward to you for the Damon Runyon Cancer Fund, penny fines paid by them totaling twenty-eight dollars and seventy-one cents, in this town's weekend reinforcement of the Blue Laws of a hundred and fifty years ago. Blue Law Day was revived here in connection with the town's sesquicentennial celebration, and a deep desire with the approach of Independence Day to impress upon the people the wonderful freedom we Americans enjoy today. Our time-townspeople admire your unceasing fight against evil forces and your splendid

Americanism at all times. In this weekend's celebration, practically the entire town was arrested for breaking an antiquated Blue Law and publicly put in stocks and pillories by the chief of police. Check for fund follows in mail." I think that's a delightful story! [ER laughs]

[John Teeter:] Well, Mrs. Roosevelt, that's just an example of the source of funds that came-came-come to the Runyon Fund, which had-- does not conduct a particular drive but uses special events such as the (unclear term, possibly Borough) 24-Hour Telefund, [ER: Yes.] uh the fighting of Sugar Ray Robinson against an opponent, and other sources of that nature. Special events are our source.

[ER:] Well thank you very much, Mr. Teeter. Now, Dr. Rhodes, I want to turn to you. I understand of course, as everybody does the need for alerting our people to the very serious facts about cancer. Don't you think, however, they can be alerted without being alarmed? (44:10)

[C.P. Rhodes:] I do indeed, Mrs. Roosevelt. I can see no justification for fear, which is always ruinous, but respect for a serious disease problem brings with it the determination to push forward our knowledge through research, through education, as Dr. Cameron said, until we can eliminate many of the deaths which now occur.

[ER:] Well, would you say that in the last few years, considerably more hope has been developed for the person who is stricken by cancer and who gets treatment quickly? Recognizes it quickly?

[C.P. Rhodes:] Oh, I know that to be true. Now our cure rates for cancer of particular organs are steadily and substantially improving. Now for example, some five years ago, in one institution, the cure rate for patients with cancer of the urinary bladder was only 7 percent. Today, it appears to be 25 percent, and is still rising. Our cure rate for certain forms of cancer of the voice box, of the larynx, rather extensive, was only 12 percent five years ago, and now appears to be over 50 percent. And that sort of substantial advance which we have-- are achieving through the availability of these research funds and these educational activities.

[ER:] Well, that is encouraging, I think, but now, Dr. Cameron, is this greater hopefulness which Dr. Rhodes has mentioned for several kinds of cancer reflected in the general overall rate of cure versus mortality?

[Charles Cameron:] Uh I-I think they are, I think they are reflected. The uh returns uh are slow in coming in, but uh I think that uh the evidence that we have turned up in the past three or four years uh certainly indicates that uh these uh remarks of his uh have general applicability. For example, I think it was only a year and a half ago that Dr. [Louis] Dublin of the Metropolitan Life Insurance Company pointed out that there had been an 11 percent decline in the death rate from cancer of all causes among insured white females aged um eleven to seventy-four. Uh this was a very significant finding because the work was meticulously done. In Connecticut, uh where the figures are based on an unusually searching uh registry of cancer which is statewide, there has been a-- an 11 percent increase in the curability of all cases of cancer. The rate was 22 percent patients surviving at the end of five years in 1938, whereas for the patients examined in 1943, uh there were 33 percent surviving. Now this is a very substantial increase and we think quite significant of a trend. A study which we conducted in Vermont indicated that um about twelve years ago, only 20 percent of all patients admitted to Vermont hospitals were considered curable -- patients with cancer. That number had increased to 52 percent in a study done ten years later. Now it is curious that in view of these rather optimistic figures which I've cited, uh which Dr. Rhodes has hinted at, that uh we continue to have more people die of cancer every year. Well, the reason-- there are three reasons. In the first place, our total population is increasing very significantly. Secondly, the proportion of older persons in the population is uh growing at a very rapid rate. We have about three times as many people over the age of forty-five today as we had in 1900. And of course, the third reason is that with

more readily available medical services, cancer is being called for what it is and accurately diagnosed today, whereas I'm sure fifty years ago it wasn't--

[ER:] It just wasn't known. (48:07)

[Charles Cameron:] Yes.

[ER:] Well, that-that I think is understandable. Dr. Rhodes, you are director of one of the great laboratories engaged exclusively in cancer research. What useful discoveries have been made in this research?

[C.P. Rhodes:] I believe, Mrs. Roosevelt, that very important discoveries have been and are being made in a number of laboratories. Uh these fall in three groups. The first group of discoveries of practical importance, directly applicable today to patients who may have cancer, is our ability to better diagnose cancer at a stage when it is still easily curable. Now very real strides are being made, in large part by our ability to examine the fluids, discharge from bodily orifices and to establish the presence in these fluids of cancer cells, or even those cells which may be uh in the process of becoming cancer. And immediate measure can be taken to eliminate the source of the beginning cancerous focus. The second area concerns our very greatly enhanced ability uh to remove a cancer already developed but still rather sharply localized to a particular organ. Now this comes about through a broad and extensive series of research activities, which are giving us better surgeons, better internal medicine, better control of the postoperative complications in patients subjected to surgical or radiological measures for the control of cancer. And so we have these rising cure rates that Dr. Cameron referred to.

And finally, the area of the control of cancer which is already scattered widely throughout the body. We now uh have real knowledge of certain chemicals which appear to have the ability-- which do have the ability to restrain the growth of cancer. Even though it can't be removed, it can be stopped uh in its continual growth and progression in some very sensitive forms. Now the types of chemicals which will exert this effect are becoming known, and they can be prepared artificially, and a great many similar chemicals can be prepared and tested. And we now have a large number uh which in a highly artificial condition are capable of what we call preferentially injuring cancer as compared to normal cells, in a ratio of a thousand to one; very profound differential effects. And we hope these artificial conditions can be carried over to direct application to man in the next few months or years. And finally, we believe that data are coming to hand by which we can measure rather precisely the fundamental chemical disturbances which are present in the patient who shows changes which will become cancer, and we hope these can be defined more accurately and corrected before cancer occurs. That will be true cancer prevention if it can be done. (51:03)

[ER:] And now from your-your discoveries, do you feel that there is one cause of cancer or are there are number of causes?

[C.P. Rhodes:] Well, I'd have to simplify my answer, Mrs. Roosevelt, somewhat. Uh there are a number of causes of cancer. Uh they are basically the same in mechanism. There can be a number of chemicals, for example, which will cause cancer, uh as do certain physical agents, like sunlight and x-ray. We suppose they act in a similar fundamental fashion, in changing the reproductive equipment of the individual cell. And we know now how to measure these changes, and how to destroy the cell which has been changed uh in an artificial conditions in experimental work. So I think very substantial progress is being made.

[ER:] Well, that's very interesting. What percentage of the patients who come to the hospital thinking they have cancer actually have it?

[C.P. Rhodes:] Oh, a very large number. Uh that is a very impressive fact. For example, of all of our patients who come to our hospital with the suspicion uh in some sense they believe that they have cancer of the breast, women, about 50 percent do not have cancer of the breast at all. [ER: I see.] And even of the 50 percent who do, uh well over half are entirely curable.

[ER:] I see. So that really um they should never be afraid, they should always go and find out.

[C.P. Rhodes:] On the contrary, I think the disease should be regarded with dignity and respect, but never with fear because fear is always devastating, and it makes impossible the-the institution of proper methods of treatment. But when respected and regarded as a proper antagonist, then we can fight this condition adequately.

[ER:] Well, do you find that many patients are diagnosed by local doctors as having cancer, uh and after you hospital examination, which is of course a much more careful and elaborate one, you-you then find that they really haven't got it? And that that's really what happens, isn't it? A local doctor, in order to be careful, must try-must try it even before--

[C.P. Rhodes:] Well no, Mrs. Roosevelt, I have very high respect for local doctors. [ER: Mhm.] Uh this is a very important medical institution which must-must not be-be-be uh-uh minimized, but recall that cancer is a very complex problem in its diagnosis, it can-it can present itself in a variety of ways. The techniques of diagnosis are complex and troublesome and require much training, the sort of thing that Dr. Cameron's organization gives to so many bright young men. And this is not the fault of the local doctor, he cannot expect to do everything. He can be alert and aware of what should be done, and the ability of him to do this is increasing very rapidly with these educational programs that have been instituted.

[ER:] And periodic checkups would probably help a great deal.

[C.P. Rhodes:] I-I believe uh very sincerely they are of very great importance indeed. Uh the trend to the use of periodic checkups is increasing, we know that very early cancer can be pec-picked up in this way at a stage when it is easily curable. It makes a lot of difference to cure a woman's cancer of the womb, a very simple operation that does not interfere with her social or family life, as compared to the major procedure required if this has been neglected. [ER: Yes.] And they can--the cancer can be picked up early now by office procedures by the local physician, if he becomes interested in doing it. (54:31)

[ER:] If he becomes interested. Well, that's very worthwhile knowing. Now, Dr. Cameron, from time to time, we read in the press about miraculous new discoveries for the cure of cancer. How does the medical profession feel about such reports being released to the press? Can they be taken seriously, or should they- should we wait until they've been checked?

[Charles Cameron:] Well, I think doctors in general would much prefer to have um such reports um not presented until they are consonant with the observed facts, and as a rule, they're not. As a rule, they- they're rather exaggerated accounts of uh the report of a perfectly well-meaning and uh um competent scientists. So that I feel uh some of the responsibility rests with uh the press. On the other hand, one can't deny the uh eagerness with which reporters and editors uh look for the day when a great headline can be written. You'll remember not so long ago, some imaginative pollster asked a hundred uh newspaper editors what was the biggest news they could publish, and uh a lot of them said uh "Way found to end all war", but two of them said "Peace from cancer." They just--

[ER:] Well, that I think is very natural. Well, Mr. Teeter, you being the businessman and uh-- tell us what the needs for the next few years are in--from your point of view and will greater funds bring greater results, do you think?

[John H. Teeter:] I would like very much if I made a sketch for you why there is a concentrated effort particularly on the research part. And it stems back from our period during the war, when the Office of Scientific Research and Development was formed to mass men and money and materials against single objectives, be they atomic bombs, proximity fuses, guided missiles, radar, what it may be. At that time, I had the pleasure of working as one of Dr. Bush's aides in that organization. It was then thought that it would be possible to attack the medical problem, such as cancer, with the same techniques: men, materials, and money. And that is exactly what is happening today. And the purpose of this reor-research team, which constitutes a portion of the American Cancer Society, the National Cancer Institute, which is a government agency, and the Damon Runyon Fund, and the Atomic Energy Commission, all working as a radial research team, bringing their results together. I think uh requir-- has used now approximately I would say a hundred seventy-five million since 1938. The research intensively started since 1944. But this is beginning to show results, and I think that we could grow at the rate of about, uh let us say, thirty percent a year, which represents the amount that you can train the manpower, because no matter what you get-- try to do in research, you must always come back to the man who has to do it. [ER: Now let's--] Our training program is the fundamental thing, so I think we could use uh-- oh, if we're using ten million in research today, per year, we could increase it each year at a fixed rate of thirty percent and get-- hopeful results.

[ER:] And do a good thing. Well, in conclusion, Dr. Rhodes, what exact advice would you give anyone anxious to be prudent and sensible about their own health and their family's concerning the threat of cancer? (57:57)

[C.P. Rhodes:] To regard this serious disease with great respect. To interest uh himself in the work of the American Cancer Society, the Damon Runyon Fund, the local and national organizations which are carrying on uh this activity, designed to lessen the death rate and in time to eliminate the disease entirely, if that be possible. And finally, to have frequent, regular health examinations by qualified local physicians to pick up the earliest forms of this disorder when it can be treated effectively and easily.

[ER:] That is very good advice, I think, for all of us. Uh and there are hospitals, aren't there, in other areas?

[Rhodes:] Oh yes, [ER: Hospitals are all over--] there are a great many very good hospitals.

[ER:] Well, that is I think something everyone should find out: what hospital uh they can go to and get the best possible advice. And now our time has come to a close and we have to say goodbye to our audience. I want to thank all of you, Dr. Rhodes, Dr. Cameron, Mr. Teeter, for coming here today, because I think this information is of vital importance to the people of the nation. Thank you very much.

[Theme music begins 59:17]

[NBC Announcer:] (speaking over theme music) Next week at the same time, NBC television will again present *Mrs. Roosevelt Meets the Public*. We earnestly invite you to join us. Portions of today's program, which originated in the Colonial Room of the Park Sheraton Hotel in New York, were on motion picture film.

[Theme music ends at 59:45]

[New music 59:46 - 1:00:29]

[NBC Announcer:] NBC television.

[NBC chimes]

(1:00:49)

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