On October 29, 1963 the cataract was removed from the right eye and on April 19, 1964 the cataract was removed from the left eye. In each instance the postoperative vision has been 20/20 and the patient is now wearing glasses which give her this vision.

A fee for these services is enclosed. Yours very truly,

ARNOLD W. FORREST, M.D.

DECEMBER 28, 1959.

Dr. R. H. McMaster, The Wm. S. Merrell Co., Cincinnati, Ohio.

DEAR DR. McMaster: I meant to catch you during the conference to tell you that I had decided it would not be advisable for me to accept your generous offer an honorarium for my contribution to the MER/29 conference. Because of my Government affiliation and also because I am currently a member of the Metabolism Study Section which may have to pass on grant applications in connection with projects involving your company, acceptance of an honorarium might be misunderstood by some. Therefore, I am returning your check with

might be misunderstood by some. Therefore, I am returning your check with thanks. My expenses to this meeting were paid by the National Heart Institute. I enjoyed participating in the conference and I believe it served a very useful purpose in bringing together people studying MER/29. The new information that the studying MER/29 is the work of the few that we presented at the meeting represented primarily the work of the few weeks preceding the conference and so I had not had time to communicate with you about it before. There are several serious questions raised by these findings. First, we do not know yet whether 24-dehydrocholesterol is or is not atherogenic to the same extent or to a greater extent than is cholesterol. Second, we do not know yet whether 24-dehydrocholesterol has other biochemical effects that make it unsafe to treat with MER/29. I know that you are, of course, anxious to obtain FDA approval to market the drug but I do not feel that this would be wise in view of the new data.

What are your own thoughts on this matter? Have you any suggestions as to the kinds of information that should be sought in order to clarify the status of the drug?

Again, many thanks for your hospitality and for arranging a valuable conference.

Sincerely yours,

DANIEL STEINBERG, M.D. National Heart Institute.

[Inter-Department Memo, Feb. 18, 1960]

To: Those concerned.

From: Frank N. Getman.

Subject: Minutes of MER/29 meeting, February 17, 1960.

The following notes represent the pertinent questions raised and constructive suggestions made during yesterday's meeting on MER/29.

## I. CLINICAL BACKGROUND

Morson requested breakdown on patients with pre-treatment cholesterol blood levels of over 250 mg.

Richardson, Jr.—what will be the doctor's reaction to Princeton Symposium? We feel that it will be the most terrific selling tool that Merrell has ever had, since it is a frank discussion of the product—we are telling both the good with the bad. (Getman.)

Morson pointed out that Hollander used the dosage of 750 mg per day to reduce the tissue level of cholesterol and has wondered whether 250 mg. per

day would do this.

Blohm answered that he believed it would, since higher dosage does not increase reduction of blood cholesterol levels. While we cannot prove beyond doubt that we reduce tissue levels at 250 mg. it has been universally accepted by our clinicians that tissue level reduction does occur at this dosage.

Networks star