problems of ignorance and inexperience in the use of modern medical services.

The removal of a different kind of barrier—the time lag between discovery and effective application of new knowledge—is a goal of the regional medical program. In his health message this year, President Johnson stated:

> Its purpose is to translate research into action, so that all of the people of our nation can benefit as rapidly as possible from the achievement of modern medicine.

Title I of H.R. 15758 extends the regional medical program through fiscal year 1973 and clarifies and improves certain aspects of the program.

You will recall from your consideration of this legislation in the summer of 1965 that it was introduced as a result of the findings of the President's Commission on Heart Disease, Cancer, and Stroke. The Commission found that medical science has created the potential to reduce the heavy tolls of these diseases but that this potential was not being realized for many of our citizens.

The Interstate and Foreign Commerce Committee played a major role in clarifying both the nature of the program and the direction in which it was to go.

The basic objective of this program is to assure that the people of this Nation, wherever they may be, will benefit from the advances of medical science against the threats of heart disease, cancer, stroke, and related diseases.

As an additional dividend, this program will have an impact extending far beyond the control of specific diseases. The physicians and other health workers involved in the regional medical programs will be applying their new knowledge and new techniques to patients being treated under the medicaid, medicare, and other health programs. The lessons learned in the regional medical programs cannot help but enhance the quality and efficiency of these other activities.

The progress already made has justified our expectation that this program would significantly improve the effectiveness and quality of medical care for those who suffer from the major killer diseases.

The program is already bringing together diverse groups in the health field in an unprecedented fashion and in a manner that results in a consideration of the unfilled health needs of the region, rather than those of the individual institutions. Despite the present shortage of manpower, the program has been successful in recruiting throughout the Nation talented persons willing to make firm career commitments to achieving the goals of the program.

The programs have earned the support of the major health resources, professional and voluntary, at the national and regional levels. They have helped overcome hostilities and divisions which have existed in some cases for generations.

Indeed, there has been a positive response to this committee's mandate in the original legislation that this program would be community based—that the responsibility for planning and organizing the operation of the program would belong to the region, not to the Federal Government.

As evidence of this response almost 1,000 medical institutions are participating in the regional medical programs, including every med-