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Mr. Richard J. Hannigan
Executive Secretary
American Urological Association, Inc.
1120 North Charles Street
Baltimore, Maryland 21201

Dear Mr. Hannigan:

This letter is to remind you that Mr. McNamara, per his letter of August 19 (copy enclosed), wishes to have his $500 honorarium for the AUA Lectureship at the American College of Surgeons allocated to the Research Fund of the American Urological Association. I hope you will see that this is accomplished.

With warm personal greetings,

Very sincerely yours,

Willard E. Goodwin, M.D.
Professor of Surgery/Urology

WEG:ema
encl.
cc: Mr. Robert S. McNamara
William B. Garlick, M.D.
Frank Hinman, Jr., M.D.
Jay Y. Gillenwater, M.D.
November 9, 1977

Mr. Robert J. Handley
Executive Director
American Urological Association, Inc.
1120 North Clinton Street
Baltimore, Maryland 21201

Dear Mr. Handley:

I am writing to convey your request for the submission of an abstract for the Annual Meeting of the American College of Surgeons, to be held in Boston, Massachusetts.

I hope you will see fit to accept my submission.

With warm personal greetings,

WILLIAM E. GOODWIN, M.D.
Professor of Urology

W.E. Goodwin

Chairman, Research Committee

WILLIAM E. Goodwin, M.D.
Professor of Urology

RECEIVED

INCOMING MAIL UNIT
11/15 NO. 15 OF 07
Mr. Merriam:

Mr. Morris suggested sending you this copy of the talk Mr. McNamara will give on Monday in Dallas, for your information.

Mr. McNamara told Jack he may shorten it from 50 minutes to 40 minutes. He will take care of contacting the group himself regarding the possibility of questions, and will send them one copy of the full text on Friday to arrive on Monday. He said he wanted us to do nothing more. He would handle everything himself.

Marjorie

(The text is warmed Population and BrandtComm. speeches.)
Abstract of a Lecture by Robert S. McNamara to the AUA on "Poverty and Population in the Developing World"

The problems of poverty and population -- problems which feed on one another -- have an overwhelming impact on the lives of the 2 billion people in the 100 countries of the developing world: unless these problems receive more urgent attention than they are getting now, they will in time seriously threaten the political and social stability not only of the developing countries, but of the developed nations as well.

The facts are that in the decade 1965-75, the disparity in average incomes between those fortunate enough to live in the developed world and those who, by accident of birth, live elsewhere, remained immense.

Average incomes in the poorest nations, with populations totalling 1.2 billion, grew at an annual rate of only 1.5% -- about $2 a year. And for tens of millions of individuals in these countries at the lower end of the income spectrum their already substandard levels of nutrition, housing, health, and literacy deteriorated even further. These societies have been unable to meet even the minimum human needs of the vast majority of their people.

The governments of the poorest countries must, then, reorient their domestic policies so that they will both accelerate economic advance, and begin to reach the poor with measures specifically designed to help them to become more productive.

All of this is feasible, but not without greater help from the international community. If poverty is to be reduced, then developed nations must squarely face the fact that current and projected levels of assistance for the poorest countries are disgracefully inadequate.
The progress of the middle-income developing countries -- those with per capita incomes of more than $200 a year -- has been better, and their outlook is more favorable. But, penalized by recent declines in their terms of trade, and by the worldwide recession, they will not be able to recover their per capita income growth rates of the past decade unless a number of major actions are undertaken.

Their governments must take steps to increase internal savings, expand export earnings, and reduce the severe inequities in income distribution. And the international community must find a feasible way of providing them with additional flows of capital on appropriate terms, and reducing the barriers to their exports, particularly their manufactured goods.

But overshadowing all these efforts in the developing world is the complex problem of population.

It now appears that a significant decline in fertility may have at last begun in the developing countries. The data are not yet fully conclusive, but the indications are that the crude birth rates have fallen over the past two decades by nearly 13%.

Further, the decline appears to have been general and widespread. It has occurred in 77 of the 88 countries for which estimates are available.

If these indications are confirmed by the censuses scheduled for 1980, then what we are seeing here is something of historic importance. It would mean that the period of rapid acceleration in the rate of growth of the world's population has finally reached its peak and is now definitely moving downward towards stabilization.

But as welcome as this is, the fact remains that the current rate of decline in fertility in the developing countries is too slow to avoid
their ultimately arriving at stationary populations far in excess of acceptable levels.

Unless governments, through appropriate policy action, can accelerate the reduction in fertility, the global population may not stabilize below 11 billion. That would be a world none of us would want to live in.

But governments can take action, and can accelerate the process, given the resolve and determination to do so.

The critical point is this: for every decade of delay in achieving a net reproduction rate of 1 -- replacement-level fertility -- the ultimate steady-state world population will be approximately 15% greater.

Governments, then, must avoid the severe penalties of procrastination, and try to hasten the process forward.

But how?

The causes and determinants of fertility reduction are extremely complex, but it appears likely that there are a number of key linkages between that reduction and certain specific elements of social and economic development.

The factors that appear to be the most important are: health, education, broadly distributed economic growth, urbanization, and the enhanced status of women.

These factors are at work in the developing world today, but their progress is too slow to be fully effective.

Without additional intervention on the part of governments, the current population in the developing world is going to continue to grow at rates very substantially in excess of those that would permit far more economic and social progress.
There are two broad categories of interventions that governments must undertake: those designed to encourage couples to desire smaller families; and those designed to provide parents with the means to implement that desire.

The first set of interventions sets out to alter the social and economic environment that tends to promote fertility, and by altering it to create a demand among parents for a new and smaller family norm.

And the second set of interventions supplies the requisite means that will make that new norm attainable.

Both sets of action are urgently needed; both sets of action must be urgently pursued.

We know that eventually the world's population will have to stop growing. That is certain.

What is uncertain is how. And when. At what level. And with what result.

We who are alive today can determine the answers to those questions. By our action -- or inaction -- we will shape the world for all generations to come.

We can avoid a world of 11 billion, and all the misery that such an impoverished and crowded planet would imply. But we cannot avoid it by continuing into the next quarter century the ineffective approach to the interrelated problems of population and economic development that characterize our attitudes today.
October 10, 1977

Mr. Robert S. McNamara
President
The World Bank
Washington, D. C. 20433

Dear Mister McNamara,

The American Urological Association was honored when it was informed that you would deliver our sponsored lecture at the forthcoming meeting of the American College of Surgeons. Our first Vice President, Dr. William B. Garlick, will be attending that meeting as an official representative of the AUA.

Dr. C. Rollins Hanlon has forwarded us a copy of your August 19, 1977 letter to him through which we learned that you are donating our $500.00 honorarium to the Research Fund for the promotion of clinical and laboratory research designed to improve the practice of urology.

As Treasurer of the American Urological Association, I want to thank you very much on behalf of our membership for your generosity in making this $500.00 contribution to our Research Fund.

Sincerely yours,

Paul J. Schildt, M.D.
Treasurer

PJS:RJH:alk

cc:    C. Rollins Hanlon, M.D.
       AUA Officers
October 16, 1977

Mr. Robert E. McEachern
President
The World Bank
Washington, D.C. 20433

Dear Mr. McEachern,

The American Urological Association has honored me with an invitation to attend the October 1977 meeting of the American College of Surgeons. Our Executive Committee has extended the invitation to me as an official representative of the AUA and I am pleased to accept.

Dr. C. Pollitt's list of topics for the meeting and the opportunity to participate in the 50,0000.00 dollar fund of the Research Fund for the Promotion of Urological Research. I want to express my appreciation to you for your kind assistance in making this possible.

Sincerely yours,

[Signature]

Dean T. Snell, M.D.
Treasurer

American Urological Association, Inc.

EXECUTIVE COMMITTEE OF OFFICERS

M. H. Unthank, M.D.
President

The World Bank
Washington, D.C. 20433

Dear Mr. McEachern,

The American Urological Association has honored me with an invitation to attend the October 1977 meeting of the American College of Surgeons. Our Executive Committee has extended the invitation to me as an official representative of the AUA and I am pleased to accept.

Dr. C. Pollitt's list of topics for the meeting and the opportunity to participate in the 50,0000.00 dollar fund of the Research Fund for the Promotion of Urological Research. I want to express my appreciation to you for your kind assistance in making this possible.

Sincerely yours,

[Signature]

Dean T. Snell, M.D.
Treasurer

American Urological Association, Inc.
October 7, 1977

Dear Dr. Sohn:

As you may know, I have been asked to serve as the AUA Guest Lecturer at the American College of Surgeons' meeting in Dallas on October 17.

Enclosed is a copy of a lecture I propose to give which I am sending to you at the suggestion of Mr. Richard J. Hannigan.

Sincerely,

Robert S. McNamara

Dr. Herbert Sohn
4640 North Marine Drive
Chicago, Illinois 60640

cc: Dr. Frank Hinman, Jr.
    Mr. Richard J. Hannigan (w/enc)
Mr. Robert S. McNamara  
President, The World Bank  
Washington, D.C. 20433

Dear Mr. McNamara:

Thank you for your letter of August 19 allocating your $500 honorarium to the Research Fund of the American Urological Association. I am bringing your generosity in this matter to the attention of the Executive Staff of the AUA.

Looking forward to seeing you in Dallas.

Sincerely yours,

C. Rollins Hanlon, M.D., F.A.C.S.

cc: William B. Garlick, M.D., F.A.C.S.  
Willard E. Goodwin, M.D., F.A.C.S.  
Mr. Richard J. Hannigan  
Frank Hinman, Jr., M.D., F.A.C.S.  
Walter S. Kerr, Jr., M.D., F.A.C.S.  
William H. Muller, Jr., M.D., F.A.C.S.  
Paul J. Schildt, M.D., F.A.C.S.
American Railroads of Wisconsin
82 EAST SIXTH STREET, CHICAGO, ILLINOIS 60604

Mr. Robert S. McCarver
President, Western Rail
Washington D.C. 20035

Dear Mr. McCarver:

Thank you for your letter of August 1, 1960, and for enclosing your 1960 report on the Research Fund of the American Railroads Association. I am printing your letter in this matter to the attention of the executive staff of the ARA.

Looking forward to seeing you in Detroit.

Sincerely yours,

C. Rollin Hentzen, M.D., F.A.A.R.

cc: William G. Gerlach, M.S.
    William E. Grace, M.D., F.A.A.R.
    M. Alexander, M.D., F.A.A.R.
    Frank Henneman, M.D., F.A.A.R.
    Walker E. Keen, M.D., F.A.A.R.
    William M. Miller, M.D., F.A.A.R.
    Paul S. Smith, M.D., F.A.A.R.
Will you ask him to do it?

Best,

[Signature]
Dear Ms. Giffin:

Thank you for your recent letter. I had earlier expected that I might be able to provide an advance copy of the full text of my lecture to the Clinical Congress, but unfortunately that now appears unlikely.

I am, however, enclosing an abstract of what I plan to say, with the hope that you may find it useful.

Sincerely,

Robert S. McNamara

Ms. Sue Giffin
Media Relations Manager
American College of Surgeons
55 East Erie Street
Chicago, Illinois 60611

August 19, 1977
Dear Dr. Hanlon:

I want to thank you for your inquiry as to whether I would like to have the $500 honorarium for my forthcoming lecture allocated to a charity.

I have thought about the matter, and would like to have it allocated to the Research Fund of the American Urological Association.

I look forward to meeting with you and your colleagues in Dallas.

Sincerely,

Robert S. McNamara

C. Rollins Hanlon, M.D., F.A.C.S.
Director
American College of Surgeons
55 East Erie Street
Chicago, Illinois 60611

cc: Dr. Willard E. Goodwin

JLMcCullough:mmm
August 19, 1977
July 27, 1977

Robert McNamara
2412 Tracy Place, N.W.
Washington, D.C. 20008

Dear Mr. McNamara:

Each year at the Clinical Congress, several program participants are invited to meet with the lay and medical media in press conferences to discuss their presentations.

Because of its potential news value, your lecture, "Poverty & Population in the Developing World", has been selected for inclusion in the 1977 press conference schedule.

Your press conference has been tentatively scheduled for Sunday, October 16, from 2:00 P.M. to 3:00 P.M., in Room E-402 of the Dallas Convention Center.

We would appreciate an early confirmation of this arrangement if it meets with your approval and does not conflict with other plans you have made for the Clinical Congress. We are enclosing a postcard for your convenience in responding. By specifying hotel and arrival information, you will help us locate you in Dallas if members of the media have additional questions or wish to interview you.

To assist us in preparing a press release about your lecture, we would appreciate receiving a copy of your speech (or an abstract) by August 31, 1977. If a paper is available, we will duplicate it for the media.

Thank you for your attention to these matters. We appreciate your cooperation, and look forward to seeing you in Dallas.

Cordially,

Sue Giffin
Media Relations Manager

SG:gc
Enclosure
Abstract of a Lecture by Robert S. McNamara to the ACS on "Poverty and Population in the Developing World"

The problems of poverty and population -- problems which feed on one another -- have an overwhelming impact on the lives of the 2 billion people in the 100 countries of the developing world: unless these problems receive more urgent attention than they are getting now, they will in time seriously threaten the political and social stability not only of the developing countries, but of the developed nations as well.

The facts are that in the decade 1965-75, the disparity in average incomes between those fortunate enough to live in the developed world and those who, by accident of birth, live elsewhere, remained immense.

Average incomes in the poorest nations, with populations totalling 1.2 billion, grew at an annual rate of only 1.5% -- about $2 a year. And for tens of millions of individuals in these countries at the lower end of the income spectrum their already substandard levels of nutrition, housing, health, and literacy deteriorated even further. These societies have been unable to meet even the minimum human needs of the vast majority of their people.

The governments of the poorest countries must, then, reorient their domestic policies so that they will both accelerate economic advance, and begin to reach the poor with measures specifically designed to help them to become more productive.

All of this is feasible, but not without greater help from the international community. If poverty is to be reduced, then developed nations must squarely face the fact that current and projected levels of assistance for the poorest countries are disgracefully inadequate.
The progress of the middle-income developing countries -- those with per capita incomes of more than $200 a year -- has been better, and their outlook is more favorable. But, penalized by recent declines in their terms of trade, and by the worldwide recession, they will not be able to recover their per capita income growth rates of the past decade unless a number of major actions are undertaken.

Their governments must take steps to increase internal savings, expand export earnings, and reduce the severe inequities in income distribution. And the international community must find a feasible way of providing them with additional flows of capital on appropriate terms, and reducing the barriers to their exports, particularly their manufactured goods.

But overshadowing all these efforts in the developing world is the complex problem of population.

It now appears that a significant decline in fertility may have at last begun in the developing countries. The data are not yet fully conclusive, but the indications are that the crude birth rates have fallen over the past two decades by nearly 13%.

Further, the decline appears to have been general and widespread. It has occurred in 77 of the 88 countries for which estimates are available.

If these indications are confirmed by the censuses scheduled for 1980, then what we are seeing here is something of historic importance. It would mean that the period of rapid acceleration in the rate of growth of the world's population has finally reached its peak and is now definitely moving downward towards stabilization.

But as welcome as this is, the fact remains that the current rate of decline in fertility in the developing countries is too slow to avoid
their ultimately arriving at stationary populations far in excess of acceptable levels.

Unless governments, through appropriate policy action, can accelerate the reduction in fertility, the global population may not stabilize below 11 billion. That would be a world none of us would want to live in.

But governments can take action, and can accelerate the process, given the resolve and determination to do so.

The critical point is this: for every decade of delay in achieving a net reproduction rate of 1 -- replacement-level fertility -- the ultimate steady-state world population will be approximately 15% greater.

Governments, then, must avoid the severe penalties of procrastination, and try to hasten the process forward.

But how?

The causes and determinants of fertility reduction are extremely complex, but it appears likely that there are a number of key linkages between that reduction and certain specific elements of social and economic development.

The factors that appear to be the most important are: health, education, broadly distributed economic growth, urbanization, and the enhanced status of women.

These factors are at work in the developing world today, but their progress is too slow to be fully effective.

Without additional intervention on the part of governments, the current population in the developing world is going to continue to grow at rates very substantially in excess of those that would permit far more economic and social progress.
There are two broad categories of interventions that governments must undertake: those designed to encourage couples to desire smaller families; and those designed to provide parents with the means to implement that desire.

The first set of interventions sets out to alter the social and economic environment that tends to promote fertility, and by altering it to create a demand among parents for a new and smaller family norm.

And the second set of interventions supplies the requisite means that will make that new norm attainable.

Both sets of action are urgently needed; both sets of action must be urgently pursued.

We know that eventually the world's population will have to stop growing. That is certain.

What is uncertain is how. And when. At what level. And with what result.

We who are alive today can determine the answers to those questions. By our action -- or inaction -- we will shape the world for all generations to come.

We can avoid a world of 11 billion, and all the misery that such an impoverished and crowded planet would imply. But we cannot avoid it by continuing into the next quarter century the ineffective approach to the interrelated problems of population and economic development that characterize our attitudes today.
To Dr. Erskine

Will you do the biographical sketch on India asked for
2st as know Oct & then
you will be in India during
the Summer.

Best wishes,

Bn
May 24, 1977

Mr. Robert S. McNamara
2412 Tracy Place, N.W.
Washington, D.C. 20008

Dear Bob:

Doctor Frank Hinman, of San Francisco, who is a Regent of the American College of Surgeons, is going to have the pleasure of introducing you in October. He's asked me for some biographical material about you. Most of what I know, of course, is anecdotal.

Would you be good enough to send me a copy of your curriculum vitae?

Very sincerely yours,

Willard E. Goodwin, M.D.

WEG:ema
January 28, 1977

C. Rollins Hanlon, M.D.
Director
American College of Surgeons
55 East Erie Street
Chicago, Illinois 60611

Dear Doctor Hanlon:

Thank you very much for sending us a copy of your January 18, 1977 letter to Mr. Robert S. McNamara.

Your letter informs us that Mr. Robert S. McNamara, International Bank for Reconstruction and Development, will present the AUA sponsored lecture at the October 17, 1977 Clinical Congress. Your letter further indicates that the $500 which the AUA annually pays to support this lecturership may or may not be requested depending on whether Mr. McNamara would like to have the honorarium paid to a 501(c)(3) scientific and charitable corporation. Under our tax exemption, we are precluded from making grants to charities that do not have the 501 (C)(3) IRS status.

With best wishes, I am

Sincerely yours,

Richard J. Hannigan
Executive Secretary

cc: Dr. Walter S. Kerr, Jr.
Dr. William B. Garlick
Dr. Paul J. Schildt
Dr. Frank Hinman
Dr. Willard E. Goodwin
January 26, 1978

Dear [Name],

Thank you for your report dated [Date].

Your recent report on the current state of [Project/Department] is greatly appreciated. I have reviewed it and found it to be comprehensive and well-researched. The findings are insightful and will contribute to our ongoing efforts in [related area].

I strongly believe that your recommendations and suggestions will help us move forward in a positive direction. I look forward to discussing these points further with the [relevant parties].

Please feel free to contact me if you have any additional questions or concerns.

[Signature]

---

[Handwritten notes in red ink and crossed out text]
January 18, 1977

Mr. Robert S. McNamara
International Bank for Reconstruction
and Development
1818 H Street, N.W.
Washington, D.C. 20433

Dear Mr. McNamara:

Thank you for your letter of January 4 indicating you will present the American Urological Association Lecture at our Clinical Congress on October 17, 1972.

It is most gracious and generous of you to offer to forego the honorarium, and, as I understand it, the expense reimbursement as well. If you wish this allocated to a charity, please let me know.

Dr. Edwin W. Gerrish, Director of the Department of Assembly here at the College, will be in touch with you about further details.

With renewed thanks and best wishes.

Sincerely,

C. Rollins Hanlon, M.D., F.A.C.S.

cc: Walter S. Kerr, Jr., M.D., F.A.C.S., President, American Urological Association
William B. Garlick, M.D., F.A.C.S., Secretary, AUA
Willard E. Goodwin, M.D., F.A.C.S., Chairman, ACS Advisory Council on Urology
William H. Muller, Jr., M.D., F.A.C.S., Chairman, ACS Board of Regents
Mr. Richard J. Hannigan, Executive Secretary, AUA
January 1947

Ms. [Handwritten] Members

International Bank for Reconstruction
and Development
1876 H Street, N.W.
Washington, D.C. 20433

Dear Mr. Member:

Thank you for your letter of January 31st, 1947
presented to the American Association for
Education on October 11, 1946.

I am most forward and appreciate your offer to
provide the necessary forms and expenses for
these purposes. If you are willing to accept these
forms as well, I would be happy to proceed with
them.

I am now available to assist you further.

With warmest thanks and best wishes,

Sincerely,

C. [Handwritten]

C. [Handwritten]

Cc: [Handwritten]
Mr. Robert S. McNamara
The World Bank
Washington, D.C. 20433

Dear Bob:

Thanks for sending me a copy of your letter to Rollins Hanlon. As you can imagine, I am delighted that you will accept the invitation to present the American Urological Association lecture at the College of Surgeons in October. I am certain it will be a great occasion.

You should by all means be reimbursed for your travel and expenses while in Dallas, and as far as the honorarium is concerned, if you don't want to keep it, you should accept it anyway and then give it as a tax deductible gift to the education fund of the American Urological Association.

I'll talk to you more about it when I see you in Baltimore.

With warm personal greetings and best wishes,

Very sincerely yours,

Willard E. Goodwin, M.D.

WEG:ema
Dear [Name],

Thank you for sending me a copy of your letter to Rolleston Hanlon.

As you can imagine, I am delighted that you will accept the invitation to present at the American Urological Association meeting at the College of Surgeons in October. I am certain it will be a great experience.

You arrived by all means of transportation for your travel and expenses where it is possible and as far as the AUA conference.

I'll talk to you more about it when I see you in [Location].

With warm personal greetings and best wishes,

[Name]
Mr. Robert S. McNamara  
2412 Tracy Place, N.W.  
Washington, D.C. 20008  

Dear Mr. McNamara:  

This letter relates to the October 19 letter you received from Dr. Willard E. Goodwin. It constitutes an official invitation from the Board of Regents of the College for you to present the American Urological Association lecture at the 1977 Clinical Congress of the American College of Surgeons, to be held in Dallas from October 17-21, 1977. You were nominated by the American Urological Association for this honor, as Doctor Goodwin indicated.  

This lecture is scheduled for Monday, October 17, 1977, from 10:30 - 11:30 a.m. in the Arena, Convention Hall. It has been customary to speak on a topic of broad interest to urologists as well as to surgeons in other specialties, and Doctor Goodwin's letter indicated the interest of his committee in having you discuss specifically the Third World and the population explosion. For your information, a list of previous AUA lecturers is attached.  

In sponsoring this lecture, the AUA grants an honorarium of $500 plus reimbursement for travel and expenses. I sincerely hope you will find it possible to accept this invitation. It would be most helpful if we could have an indication of your plans as soon as convenient.  

With kindest wishes.  

Sincerely yours,  

C. Rollins Hanlon, M.D., F.A.C.S.  

CRH:jk  
Enclosure  

cc: Walter S. Kerr, Jr., M.D., F.A.C.S.,  
    President, American Urological Association  
    William B. Garlick, M.D., F.A.C.S., Secretary, AUA  
    Willard E. Goodwin, M.D., F.A.C.S., Chairman,  
    ACS Advisory Council on Urology  
    William H. Muller, Jr., M.D., F.A.C.S., Chairman,  
    ACS Board of Regents  
    Mr. Richard J. Hannigan, Executive Secretary, AUA
AMERICAN UROLOGICAL ASSOCIATION LECTURERS

1967
Paul S. Russell, M.D., F.A.C.S.
32 Fruit Street
Boston, Massachusetts

Title of Lecture: "Tissue Immunity and Organ Transplantation"

1968
Jerome W. Conn, M.D., F.A.C.S. (Hon.)
University Hospital, 1405 East Ann Street
Ann Arbor, Michigan 48104

Title of Lecture: "Curable Hypertension Due to Primary Aldosteronism. Advances in Preoperative Diagnosis."

1969
Victor F. Marshall, M.D., F.A.C.S.
525 East 68th Street
New York, New York 10021

Title of Lecture: "The Relation of Urology to Other Specialties; or the Problem of the Tight Little Island"

1970
Luther L. Terry, M.D.
Vice President for Medical Affairs
University of Pennsylvania
121 College Hall
Philadelphia, Pennsylvania 19104

Title of Lecture: "The Best of All Possible Worlds"

1971
Charles A. Barry, M.D.
NASA Manned Spacecraft Center
Houston, Texas 77058

Title of Lecture: "The Status of our Knowledge Concerning Man's Response to Weightlessness"

1972
Robert M. Zollinger, M.D., F.A.C.S., F.R.C.S. (Eng) (Hon)
Ohio State University Health Center
410 West Tenth Avenue
Columbus, Ohio 43210

Title of Lecture: "A Loser Today--A Winner Tomorrow"
1973
The Honorable Jerry L. Pettis
U.S. House of Representatives
Washington, D.C. 20515

Title of Lecture: "Health Problems: American and Chinese Perspectives"

1974
Abel J. Leader, M.D., F.A.C.S.
The Medical Towers
6600 Fannin
Houston, Texas 77025

Title of Lecture: "Elbows, Stomachs, and the Future of Man"

1975
Francis D. Moore, M.D., FRCS (Edin, Eng. C.I) (Hon), FACS, Boston, Mass.

Title of Lecture: "Manpower Goals in American Surgery: an Inevitable Implication of the National Study"

1976
Sherman M. Mellinkoff, M.D.
Los Angeles, California

Title of Lecture: "Is Medical Education a Stone of Sisyphus?"
Dear Will:

Marg and I are leaving this afternoon for Asia to be gone two or three weeks, and I therefore want to reply very briefly to your letter of October 19 in which you urged me to accept an invitation from the American College of Surgeons to be present in Dallas October 17-21, 1977.

I should like to accept, not because of the American College of Surgeons, but because of you. However, the Annual Meeting of the Governors of the International Monetary Fund and the World Bank will be held in the first part of that month, after which a number of the Finance Ministers remain in Washington in order to engage in discussions with me. I think it extremely unlikely therefore that I would be able to break away long enough to visit Dallas even for one or two days. I regret that this is the case, but I see no way around my scheduling difficulties.

I tried to telephone you today without success and will call again immediately upon my return.

With best wishes to you both.

Sincerely,

Dr. Willard E. Goodwin
254 Bronwood Avenue
Los Angeles, Calif. 90049

RMcN:ms
October 19, 1976

Mr. Robert S. McNamara
2412 Tracy Place, N.W.
Washington, D.C. 20008

Dear Bob:

This letter concerns the American College of Surgeons and the fact that you are going to be asked to be the visiting lecturer to represent the American Urological Association at the meeting of the American College of Surgeons to be held in Dallas, Texas, October 17-21, 1977. (I am not empowered to issue the invitation which must come from the executive secretary of the American College of Surgeons, but I have been asked to contact you to find out if it would be possible for you to give what is called the American Urological Association Lecture on the first day of the meeting, October 17, 1977. The lecture has been endowed by the American Urological Association in the magnificent amount of $500. plus expenses, and presumably that's what you would receive if you were able to accept this invitation.... which I might say is very warm-hearted.)

For your information I am enclosing herewith some cuts from the American College of Surgeons News Bulletin at the most recent meeting in Chicago where Dean Sherman Mellinkoff, of the UCLA Medical School, was the guest speaker. He chose to speak about medical education and in one part of these cuttings you will find a description of his lecture-to-be and in another part a summary of what it was, which in my view turned out to be very successful, indeed.

Through chance I happened to sit on the committee that made the decision to select you as the designated "AUA Lecturer for 1977", and their idea was that you could bring something of importance to American surgeons concerning the Third World, the population explosion, and what if anything can be done about it. I know that this is a topic that's of interest to you and perhaps even dear to your heart, and I hope you will be able to accept this suggested lectureship. The audience is usually not very large, perhaps only about 200 people. I think in your case, because of your obvious fame, the audience might be larger but I wouldn't be sure of that.

The lecture is usually given on a Monday morning right after the opening of the meeting by the President of the American College of Surgeons.
Mr. Robert S. McNamara  
October 19, 1976

The lecturer is usually introduced by the "Regent" of the American College of Surgeons, who represents American Urology. In that case, this is Frank Hinman of San Francisco who is my classmate from medical school and my good friend.

This is an exploratory letter. I hope that if you are able to give this serious consideration, you will let me know very soon as the American College of Surgeons likes to plan these things far in advance, and if you think you can accept this speaking engagement (which I think you should do because I believe that a forum of American surgeons is important), the ultimate invitation will come from Doctor C. Rollins Hanlon, who is the medical and executive director of the American College of Surgeons in Chicago.

With warm personal greetings and best wishes,

Very sincerely yours,

Willard E. Goodwin, M.D.
Professor of Surgery/Urology

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encl.

cc: C. Rollins Hanlon, M.D.