

from the lava-flooded lowlands kept coming up with ages between 3 billion and 4 billion years. Therefore, some scientists concluded, the maria basins must first have been dug and then a billion years later, or so, volcanic activity spread lava over their floors. Dr. Wasserburg says this explanation is no longer necessary since the formation of the basins now seems to coincide with the ages of the material on their floors, and it seems plausible that impact heating could have formed molten and re-solidified rock without any need for volcanism.

In general, says Dr. Wasserburg, the evidence tends to indicate that the moon is neither a fossil of the formation of the solar system that had been

dead since the beginning, nor a body that has remained continually active geologically. Rather, he says, it has done the diabolical thing, and gone between, having been active for a long while and then stopped.

Current evidence still leaves a mystery about what was happening to the moon during its first 600 million years. Dr. Wasserburg hopes that samples from the lunar highlands may tell. Apollo 15 will go to Hadley Rille at the base of the Apennine Mountains, and one of the possibilities is that this expedition will bring back rocks from Apennine Mountain front. These could tell some of the story. Dr. Wasserburg guesses that they could be up to 4.2 billion years old. □

AMA CONVENTION

Decline of an American institution?

The 1971 annual convention of the American Medical Association held last week was, like its host city, an expensive facade that belied its actual value. Perhaps it was the less-than-scintillating allure of the Atlantic City boardwalk, the lack of activist demonstrators who took the 1970 AMA convention in Chicago by siege, the sharp drop in AMA membership (only 64 percent of American doctors now belong) and in AMA convention attendance. Some 8,000 physicians came to this and last year's conventions compared with a 16,000-doctor turnout at the New York City convention in 1969. True, some of this year's convention defectors skipped out to San Francisco for a meeting of the American Diabetes Association, which was inadvertently scheduled the same week.

All told the 1971 AMA convention lacked the razzmatazz of some of its predecessors. Papers were, to a large degree, rehashes of old-hat research; scientific exhibits and drug booths were considerably déjà-vu; and with drug samples at conventions now verboten, there were few giveaways beyond soft drinks and bars of soap. However, the convention was saved by one redeeming event: President Nixon touched down in Atlantic City on June 22 to address the AMA House of Delegates. It was the fourth time a President of the United States had addressed the House of Delegates at an AMA convention. Mr. Nixon appeared to be at home in this Establishment of all Establishments (average Delegate age is 59.4 years).

In his address to the house, the President came across with admirable pounce on two issues close to his heart—his desires to thwart an ever-encroaching national health insurance plan and to trump up the war against drug abuse. He asked the AMA doctors for their support. The reply came June

24, in full-page AMA ads in various American newspapers (part of a new AMA public relations campaign). "We accept, Mr. President," proclaimed the ads. "You challenged us to assume the leadership in a national campaign to shape this country's attitude toward drugs . . . to educate America to the serious dangers of drug abuse. We accept that challenge. . . . You challenged us to assume America's health care system . . . to design a system that will insure freedom of choice . . . dedication to quality . . . economic relief for our citizens and protection against catastrophe. We accept that challenge. . . ."

Yet ironically, while an outstanding number of resolutions introduced into the House of Delegates concerned physicians' crackdown on drug abuse in our pill-popping society, most of the resolutions, during a polemical drug-round, were shelved or passed in innocuous versions.

A proposal for forthright control of amphetamines (to prescribe no more than a two weeks' supply of amphetamines for mild depression or for starting diets, to prescribe them only for other well-recognized medical indications, to prescribe them only for patients known by a doctor) was not passed, primarily because the house decided medical ethics should be handled by the AMA Judicial Council, and the council did not introduce the resolution. Also, some Delegates felt the proposal would step on the physician's freedom to practice medicine as he sees it.

Nor was the resolution passed that the AMA urge the advertising and drug industry to eliminate all proprietary drug ads from radio and television. Supposedly Resolution 85—that the AMA lend its full support to plans of the Justice Department to set produc-

tion quotas on amphetamines and to tighten their distribution—was adopted in lieu of the two previously mentioned proposals. Resolution 85, some AMA convention watchers feel, boiled down to buck-passing on drug abuse.

Similarly the suggestion to bring about banning of ads in mass media that promote the use of mood-changing and analgesic drugs was usurped by a milk-toast substitute resolution: to follow studies being conducted to ascertain the relationship between proprietary drug advertising in the mass media and excessive use of nonprescription drugs, to cooperate with the Federal Trade Commission to ensure enactment of proprietary drug ad regulations and to establish effective liaison with the National Association of Broadcasters and the Proprietary Association to ensure more stringent voluntary controls over proprietary drug advertising in mass media.

On a more cheerful note, the House of Delegates came to grips with some relevant issues. They concurred that the AMA should influence President Nixon to proceed with his proposed commission to study a soaring malpractice claim problem, and to assist the commission in its work. They voted to support continuing Government funding for basic and applied medical research, agreed that doctors should work at the 1971 White House Conference on the Aging, tackled the role of the physician's assistant and doctor-paramedical teamwork. They resolved to study potential problems, as well as advantages, of multiple health maintenance organizations. Such organizations, as being contemplated by Congress, would develop in a community or county with clinic, hospital, insurance company or union as its base.

When the House of Delegates comes to grips with issues, the spin off for American society can be considerable, or negligible—it depends. As one of the more powerful lobbying groups in Washington, the AMA can flex its muscles where Congressional legislation is involved. It can raise vibrations in the Health, Education and Welfare labyrinth. Other resolutions become official policy for AMA members, to be implemented by state or county medical societies or by physicians in their practices. However, house resolutions "referred for further study" or "filed" in AMA archives will probably have little impact on American society at large.

Whether the 1972 AMA convention, to be held in San Francisco, will be worth attending, even the most astute medical seer can't say at this time. An AMA spokesman indicated that the AMA is vaguely troubled with the direction its conventions are taking and means to look into the situation. □