Vaccine Step-Up Needed

➤ UNLESS INDUSTRY moves in faster than it now appears, a crash Government program will be needed to put the Sabin oral poliovirus vaccine into production, the chairman of the Subcommittee on Health and Safety of the House of Representatives Committee on Interstate and Foreign Commerce reported.

Rep. Kenneth A. Roberts backed up Rep. Paul G. Rogers (D.-Fla.) a member of his subcommittee, who told Dr. Albert B. Sabin at the hearing that "the committee will do what it can to put oral vaccine on a crash program.

In the course of questioning, Dr. Sabin was asked how the United States could move ahead faster.

"Immediate operations are possible," Dr. Sabin answered, 'to be discarded." "even if some batches have

However, he said we should plan for mass production and let the six or more pharmaceutical companies now making Salk vaccine know what place this killed virus vaccine will have in the future.

In an interview, Dr. Sabin told Science Service that "there is no scientific reason to have both Sabin and Salk vaccine once there is enough of the oral live virus vaccine. Until we have enough, of course both must be used."

President Kennedy's proposal for Federal financing of \$1,000,000 worth of the new Sabin vaccine for possible use in communities threatened with epidemic "is only a small step," Dr. Sabin said.

"To have millions of doses lying in reserve is not the best approach," he added.

He told the subcommittee that the Soviet Union makes 20,000,000 doses of the live vaccine each week and will have a capacity sufficient to sell cheaply or give away supplies to countries that need it.

"If we could plan not only for small

lots but for international health programs," he said, "we could mass produce the vaccine at a cheaper price for the United States and have something for the world."

He estimated a possible cost of at least one-tenth of the Salk vaccine, now selling at 20 cents top price.

"One British pharmaceutical company can make as many as 500,000 to 2,000,000 doses of Sabin-type vaccine from the kidneys of one monkey," the witness said. "This company has 50,000 doses ready, and already Brazil, Uruguay and other South American countries have shown an interest in receiving a supply."

He said that polio is appearing in Asian countries for the first time and they would need vaccine. China and Japan are reporting more than previously. Egypt had 1,700 cases last year and Israel had 700.

Administration of a live poliovirus vaccine program in this country need arouse no question of dictatorship and upsetting the American voluntary system, Dr. Sabin said.

In Cincinnati, the Board of Health a year ago promoted a program administered in two ways, which he holds up as a pattern for the nation. In Cincinnati schools, 111,000 children received vaccine that had been kept in a frozen state and was still good after four years. In addition, 265 private physicians opened their offices and gave vaccine free. To aid the doctors, the health department opened 34 clinics.

It is expected that the U.S. Public Health Service will be ready to license the Sabin vaccine in a matter of weeks so pharmaceutical companies can start production. Chas. Pfizer & Co. is farthest ahead because of vaccine already made in its London plant.

• Science News Letter, 79:207 April 1, 1961

MEDICINE

Recurrent Breast Cancer

➤ A 30-YEAR SURVEY of breast cancer at the Pennsylvania Hospital has shown that occasionally patients with recurrent and spreading breast cancer survive for many years.

The situation does not warrant a "let the patient die in peace" attitude, Drs. Charles K. Zug, III, and Charles H. Cretzmeyer Jr., told the American College of Surgeons sectional meeting in Philadelphia.

Favorable response to hormone treatment and other therapy is "sufficiently frequent to warrant an all-out therapeutic effort," the doctors said.

They cited ten cases of improvement to support their belief. Late recurrence of breast cancer is not uncommon, the doctors said. The cases recurred as late as 22, 23, and 19 years. Six-year, ten-year and 12-year survivals after recurrence were also reported.

Statistics presented on all cases of breast cancer seen over the 30-year-period included

The absolute five-year survival rate was 36%. The cure rate of ratients treated by radical operations was 34%. For 229 patients treated in the last ten years, the five-year cure rate was 41% and for those treated by radical operation it was 49%. The cure rate for all patients without involvement of armpit swelling, or auxiliary nodes, was 51%, but this fell to 24% when such nodes were involved.

The term "cure" implies freedom from any evidence of breast cancer, whereas the term "survival" implies only that the patient is alive.

Twenty-one cases were reported of cancer in both breasts, but the investigators said they felt that the second tumor is usually the result of spreading from the first. Occasionally, however, they said two independent primary tumors occur.

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