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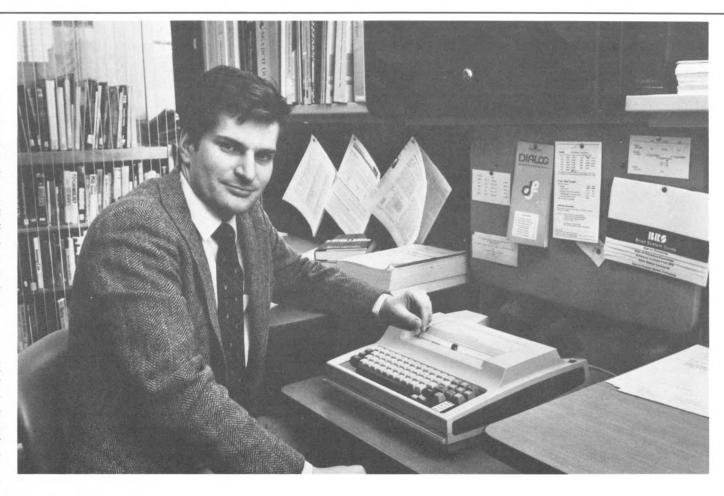
Cornell's Day at Aqueduct

FOUR-HUNDRED NINETY people wanted to be part of the Class of 1989only 80 or 16% were successful. And according to the Director of Student Affairs & Admissions, Marcia James Sawyer, the class male-female ratio accurately reflects the applicant pool. Sixty-one percent of the applicants were women and that same percentage of women makes up the first-year class. If that surprises alumni who remember all-male classes, it shouldn't. Says Ms. Sawyer, "That's close to what it's been for a number of years. In fact, right now over 60% of the student body is women."

The Office of Student Affairs and Admissions processes each and every application and it is a complex, and time-consuming job. But it is designed to give all applicants full and fair consideration. Each applicant is first reviewed for competitiveness—a grade-point average below 3.0 may be one reason for denial. Even those denied at this preliminary stage have a second chance with a review by the Chairman of the Admissions Committee who either concurs or sends the application on for folder review.

Faculty members then conduct folder reviews for non-academic and academic qualifications, and invite applicants for personal interviews. For the Class of 1989, 210 people or 43% received interviews. Due to the sheer numbers, the 7-member committee draws on additional members of the faculty for assistance. In the end, each applicant receives up to four faculty opinions on his or her eligibility.

Almost before the fortunate 80 received their acceptances in the spring and early summer of 1985, the Office of Student Affairs and Admissions was gearing up to select the Class of 1990. Applications were sent out beginning in mid-August, and the deadline for completed applications was set for October 15, 1985. As the review process advances, applicants should receive notification of denial or an invitation for an interview during the first week of February, 1986.



# **New Center Aims at Information Explosion**

IF YOU'VE HAD the feeling you were just barely keeping up with all the headlines, bulletins, news items, articles and publications spewing from your TV set, radio, mailbox and in-basket, don't feel alone. And don't give up. The opening of the Cornell Center for the Study of Medical Informatics may signal a revolution in information delivery of medical information to busy health professionals. Headquartered on the sixth floor of the Research Tower in conjunction with the College's Computer Facility, the new Center is under the direction of Dr. Roy Pollock, Assistant Professor of Medical Informatics.

What is informatics? Literally, it means information science; specifically it means the study of how to use computer technology to deliver medical information more efficiently, more rapidly, and in a more timely fashion. Since information in all medical fields has now burgeoned beyond the scope of any one person's ability to memorize or even note the salient facts, it is logical to call on computers to help handle the immense burden of data. As Dr. Pollock

points out, "Medical knowledge is of no use unless it is readily accessible to clinicians at the time and place it is needed. The search for better methods to store, retrieve, and deliver medical information may well become as important as the new knowledge itself."

The Center will first concentrate on the theoretical and practical aspects of medical information science and the needs and problems associated with creating large scale networks. The College has an excellent head-start here; we're already known as the leader in computer-based records systems for veterinary teaching hospitals. Four other veterinary colleges have already adopted our hospital records system. Then too, Cornell University's department of computer sciences is worldreknown. The Center, the first of its kind in veterinary medicine, intends to build on these strengths to establish Cornell as an internationally recognized leader in this new and important field.

Establishment of the Center for Medical Informatics was made possible by a gift from Mrs. Catherine Snee. Acting Dean, Dr. Charles Rickard, recognized the valuable contribution such support makes, saying "Once again, this proves how important the private support of the friends and alumni of the College is to our ability to seize the opportunity to set the pace in important new areas of medicine and technology."

Dr. Roy Pollock, Director of Informatics, has already attracted considerable attention in the veterinary community with his experimental program, "PROVIDES" which attempts not only to provide up-to-date information on current tests, treatments and prognoses, but can also assist the clinician in formulating differential diagnoses for selected problems in canine internal medicine. He will be a keynote speaker at the Symposium on Computer Applications in Veterinary Medicine at Texas A & M University in October on the topic "Computer-aided Diagnosis: Past, Present, and Future."

Dr. Pollock holds both the DVM and PhD degrees from Cornell. He served as an Assistant Dean for Curriculum for the Veterinary College from 1981 to 1985. It was in that capacity that he came to realize that many of the problems in medical education resulted from exponentially expanding data bases and that these could not be resolved by traditional methods of instruction and information transfer. He hopes that the Center will help foster collaboration among faculty throughout the campus who are interested in the problems of information transfer, storage and retrieval, and that the results of the research will be of direct practical benefit to veterinarians.

### Veterinary Viewpoints

Veterinary Viewpoints is published four times a year for friends and alumni of the New York State College of Veterinary Medicine, a Statutory College of the State University of New York. Correspondence may be addressed to Karen Redmond, Editor, Schurman Hall, New York State College of Veterinary Medicine, Cornell University, Ithaca, New York 14853-6401. Telephone: 607/256-5454.

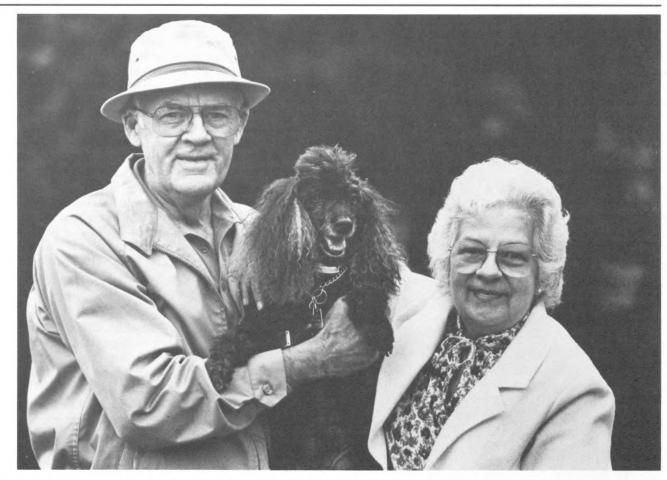
Cornell University is an equal opportunity, affirmative action educator and employer.

VIOLA AND ED HAFFTY watch closely as Dr. Kern checks the eyes of their 12 year-old miniature poddle, Nina. The examination completed, the veterinary ophthalmologist explains that the sight in Nina's left eye continues to be excellent following cataract surgery. Ed Haffty turns to the poodle and clasps his hands together in the gesture of a handshake. Nina obediently lifts her paw to shake hands.

This story is unusual but not because of Nina's cataract surgery because such procedures are common today. And not because Viola and Ed are a deaf mute couple. Far from fitting any "handicapped" stereotype, they are independent, have a busy social life, and are enjoying retirement after working most of their adult lives in manufacturing. They don't depend on Nina for "hearing" as a visually handicapped person relies on a seeing eye dog. Their story is uncommon because of the unique adaptations they have each made to the other's handicap.



Dr. Louis Laratta checks Nina's eyes during one of her post-operative check-ups.



Viola's sister gave them the poodle after they failed to hear a burglary attempt on their home. As an "early warning system", a dog seemed to be a good idea. They called her "Nina" because those were the syllables Viola found easiest to vocalize, never thinking that a dog would, or could, learn their own method of communication—sign language. Nina surprised them by gradually recognizing signs for "goodbye", "shake", "give a kiss", "sit", "go for a drive" and "go for a walk".

It wasn't until 1978 that the Hafftys and Nina had their first appointment for an eye examination at the Small Animal Clinic. Nina, then just 5½ years old, was not responding to signing by her owners and they were understandably worried. To lose visual contact with the small dog was to virtually eliminate interaction between them. Dr. Tom Kern found a proliferation of blood vessels and scarring in the cornea, signs of keratitis or inflammation. He prescribed daily eye drops of corticosteroids and Nina's eyesight returned to normal. Over the next seven years Dr. Kern received periodic reports on Nina's health and occasionally the Hafftys would make the long commute from their Connecticut home to Ithaca for an eye examination.

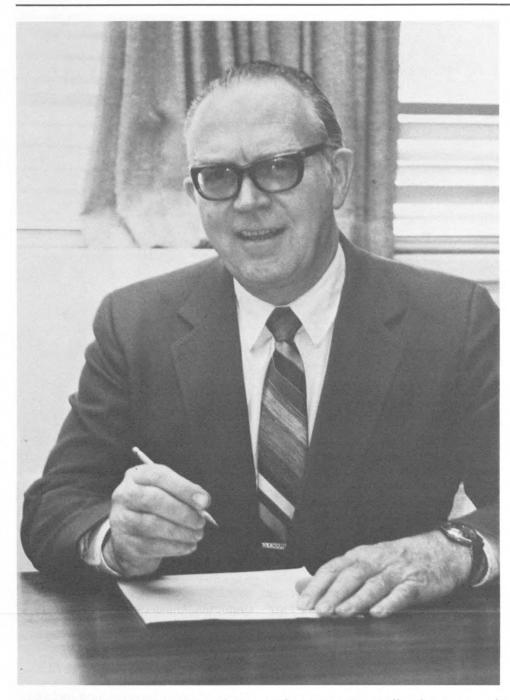
Then, two years ago, Nina's eyesight began to fail once more. Although she could still read signs, Viola and Ed had noticed slight changes in her behavior that signaled an increasing difficulty in seeing. Dr. Kern's examination showed that Nina was developing a cataract in her right eye but because cataract surgery normally leaves dogs farsighted, that is able to see at a distance but not close up, Dr. Kern discouraged surgery while Nina could still read hand signs.

Sadly, within a year, cataracts in Nina's left and right eyes completely blinded her to these subtle visual cues. The medical records kept on Nina during her hospital stay prior to cataract surgery read, "Out for a walk at 6:30 and 8:30 a.m. She "looks" for cars. Not visual—she falls over curbs and prefers to be carried." If the surgery was not a success, Viola and Ed were considering euthanasia.

Although a canine senior citizen, Nina's overall health made her a good surgery candidate. In the brief operation, Dr. Kern removed the cataract from Nina's left eye in a procedure that made a 150° incision around her cornea to remove the opaque lens. (It is routine procedure to remove only one cataract in older animals, leaving the other eye operable if there are future complications.) By the next day, Nina was responding to light in the left eye, and within two days was "sighted" once again.

Nina's eye was healing well by the time she went home and at a six week post-surgical check the ophthalmologist was able to write "Nina has healed remarkably well from her cataract surgery." Dr. Kern feels the surgery results were nothing short of spectacular, leaving Nina with much better than average eyesight after such a procedure. Some indication of this was her ability to read signs almost from the beginning.

A recent check-up discovered no sign of deterioration in the left eye. Nina, Viola and Ed happily "converse" even though the dog's right eye is still clouded with cataract. Still, Nina can recognize her favorite hand sign again, the one that means "let's go for a ride".



CHARLES RICKARD, DVM, Ph.D. and Acting Dean of the New York State College of Veterinary Medicine has been an integral part of the College for more than 40 years although his roots in veterinary medicine go deeper than one lifetime, indeed back two generations to his grandfather, a horse doctor in Nebraska. Dr. Rickard's own father came east chaperoning a boxcar full of recalcitrant cattle. The train stopped at Troy, Pennsylvania, so that's where the Rickard family made their home. Dr. Rickard chose to follow in the footsteps of his grandfather and in 1943, he graduated from Cornell University with a Doctor of Veterinary Medicine degree. Before he graduated however, he aguired some first-hand knowledge of the hog business thanks to the machinations of Dr. Gordon Danks, then Professor of Surgery.

This large sow had 15 pigs and those were not doing well. Six of them were pretty good so I said to him 'I'll go half with you. I'll buy the feed if you raise them in your cellar.' Well in two weeks he came in looking awfully sad. He told me his mother said the pigs had to go. By this time they weren't little things anymore and I imagine they were causing some trouble. So I took my three and Dr. Rickard took his three

and went to Dr. Miller (in Anatomy) and asked him to raise them with his pigs and they'd split them between them. So I think he was down to  $1\frac{1}{2}$  pigs in the end. But it was during the war and difficult to get meat so that was alright."

**Dr. Gordon Danks**, Professor Emeritus, COR '33

Two years followed in private practice then it was back for a Masters in Microbiology and a resumption of his ties with the College of Veterinary Medicine. This time he was on the other side of the desk—as an assistant, then associate professor of clinical pathology.

He taught the sophomore pathology laboratory and some lectures when I was a student—so that's how long I've known him. One of the best lecturers.

Dr. Francis Fox, COR '45

By 1950 he was appointed Professor of Veterinary Pathology and in 1952 he took a year's sabbatic to study comparative human and animal pathology in the pathology department of the University of Michigan's Medical School. Back once more at the College, he was frequently consulted by clinical staff.

He's very fair minded, very deliberate, and he never made excuses. Once I had a dog in the clinic with uremia. I knew it was uremia because I could smell it on its breath. But the pathology tests came back normal. Well, the students were kind of laughing about that because I'd said it was uremia. But I said, "Alright, we'll send over another sample tomorrow." And that sample came back showing uremia. Dr. Rickard never made excuses for that first sample because he'd been a practitioner and he knew that the urea was going to build up in the blood and one day it could be normal and the next abnormal. He let the students know they shouldn't rely on tests to diagnose a disease. They should use them to confirm a diagnosis.

**Dr. Ellis P. Leonard**, Professor Emeritus, COR '34, Director of the Small Animal Clinic 1948–

Dr. Rickard went on to earn a Ph.D. in Pathology from the University of Michigan, Ann Arbor and by 1955, he was a diplomate of the American College of Veterinary Pathologists. But all of his activities weren't limited to the classroom and laboratory. In addition to building a reputation as an exceptional lecturer, he was beginning his long involvement and concern with the administration of the veterinary college.

Dr. Habel first met Dr. Rickard when they went rabbit hunting with anatomy's Dr. Mac Miller. Later, they spent numerous weekends together keeping order when their boy scout sons went on overnights.

He was an excellent teacher. We sent a survey out once to past years of students and asked them to rate the classes. I think he got the best rating as a teacher. I remember that we'd belonged to a group of "subversives" that got together and held seminars in the evening and then we met for coffee at the Statler during the day. One of the things that came out of those meetings was the General Committee.

**Dr. Robert Habel,** Professor Emeritus

In 1965, Dr. Rickard became Chairman of the Department of Pathology. Despite the elevation in rank and increased administrative duties, he still managed to devote considerable time to teaching.

I was always impressed by his ability to walk into a classroom, calm, cool and with no notes—and give the best lectures I think I've ever heard. The other thing that impressed me was his feet—he must have size 15 feet.

Dr. Alexander de Lahunta, COR '58

But teaching wasn't the only talent for which Dr. Rickard earned respect.





We'd come in on Saturday mornings for pathology laboratory and Dr. Rickard would pick up these museum blocks in one hand and *palm* them for the entire time it took him to describe the specimen. Now those blocks could weigh 10, 15 pounds a piece, and some were as big as a horse's skull, and he never even shook. We'd take bets on when he'd drop one, but he never did.

Dr. William Rebhun, COR '71

During the Sixties, Dr. Rickard took a year's sabbatic leave to study at the Electron Microscope Section, Federal Research Institute for Virus Diseases of Animals, Tuebingen, West Germany. In 1962 he established the oncology laboratory for cancer research at the college and from 1965 to 1976 he was principal investigator for research projects on feline and canine leukemia.



Neither howling wind, nor sea spray, nor muck of marsh will deter him. He climbs rocks, hauls in fish, and sails on with his button-down shirt crisply pressed, his tie straight, his pants creased. The Cornell image is intact!

**Dr. Donald Abt**, Associate Dean, University of Pennsylvania, School of Veterinary Medicine

A member of the College's long-range planning board from 1979, Dr. Rickard became heavily involved in the mission and future of the College. He was involved in college research planning, fiscal and personnel management and capital development. He served on the College Advisory Board, the Internal Board of the Diagnostic Laboratory, the College Biohazards Committee, the Bovine Research Advisory Committee and the Equine Research Advisory Committee. In 1980 he also took on additional responsibilities as a Professor of Aquatic Animal Medicine and in 1981

we shopped for a few hours. No pictures allowed really, but all of us had our cameras. I bent over to watch a woman spin wool and there was a noise and commotion behind me. An older lady, all covered, had grabbed Dr. Kirk's and Dr. Rickard's camera straps and was hollering in Arabic. She thought they had taken pictures of them. A NO NO. They hadn't. Dr. Rickard's hands were in his pockets yet. Noise worse, more people, more noise, more people, but Roy Pollock and I kept walking like we didn't know them, as then we'd all be in the soup. Finally cops came and they could only open their cameras and remove their film. As soon as Dr. Kirk did this, all happy. Dr. Rickard didn't even open his. He just stood innocent like. We all bought myrrh, frankincense, gold and even rugs. Getting a taxi home wasn't too

**Dr. John King**Excerpt from his sabbatic diary

Since December 1984, Dr. Rickard has also been Dean Rickard, taking over the responsibilities for the College's administration while the search for a new dean went on. His talents as an able administrator and leader are frequently called upon.

He's the worst I've ever had to work with. I'd go in (to his office) resolved to say "no" this time and come out having agreed to take on three more things.

**Dr. Roy Pollock,** COR '78 On the Occasion of Having Lost Another Round

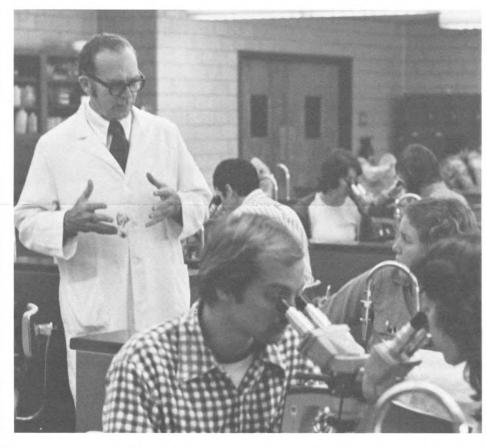
Now that Dean Phemister has been appointed and will assume his duties on October 14th, Acting Dean Rickard is able to make plans of his own and in December after more than 40 years of teaching, research and service to the College he plans to retire. On September 21, a dinner will be held in his honor at the Statler Inn and friends and associates from over the years will be there to offer their best wishes and congratulations on a long and productive career.

I've known him as a friend and a tremendous leader. Dr. Rickard has always been an extremely thoughtful man. He has a tendency to help other people and support and bolster those around him.

**Dr. Louis Leibovitz,** Director of the Laboratory for Marine Animal Health, Woods Hole

Dr. Leibovitz' words are sure to be seconded by many others. It is very certain that we will miss the support and direction, the kindness and encouragement Dr. Rickard gave us all.





The areas of research included virus induction of leukemias and sarcomas, characterization of tumor-producing viruses, and chemical co-carcinogenesis. He also designed and supervised the establishment of a specific pathogen free (S.P.F.) cat colony to aid the studies.

As if that weren't enough work for any one person, in 1969 he was appointed Associate Dean of the College of Veterinary Medicine. In the years that followed, he was instrumental in the development and formation of Aquavet, a program to train veterinary medical students to deal with disease and increase productivity in aquatic animals. Held each summer at Woods Hole, Mass., Aquavet is a cooperative effort between the College and the University of Pennsylvania School of Veterinary Medicine, and was the first of its kind on the East coast.

as the Acting Chairman of the Department of Microbiology. From 1980 to 1983 he sat on the Committee on Animal Health, Board on Agriculture and Renewable Resources, National Research Council. Until 1985, he was also editor of the Cornell Animal Health Newsletter, a monthly publication with information on animal care.

In recent years, Dr. Rickard has acted as the College's coordinator and representative for a program that supplies expertise and problem-solving assistance to Saudi Arabia. Harvard is consulted on human medical problems, Rice on architecture, and Texas A & M on agriculture.

February 17th, 1984, Dahran, Saudi Arabia

A lazy day today. We went to the Zuk with John Telford. He left us there and

## -CORNELL—— AT AQUEDUCT



## "Cornell College of Veterinary Medicine Cup" to be awarded

The New York State College of Veterinary Medicine at Cornell University will be part of the 1985 Breeders' Cup festivities when they host their own Cornell Day at Aqueduct on October 30th, the Wednesday before the race. The day starts with an informational poster session and exhibit in the Main Clubhouse from 9:30 a.m. until 12:30 p.m. during which faculty from the New York State College of Veterinary Medicine will be on hand to discuss everything from the feeding of the racing horse, breakdowns, and colic surgery to respiratory problems, equine drug testing, the latest regulations on equine viral arteritis, exercise physiology, and orthopedic surgery. Visitors may also view video presentations on an equine abdominal exploratory surgery, a demonstration of the newest anesthetic agents, an endoscopic look into the respiratory tract, and an arthroscopic examination of an equine joint.

Cornell's poster session is designed to graphically present highlights of a topic while the individual researcher and/or clinician is available to answer specific questions and provide additional information. Horseowners, breeders, trainers and racing enthusiasts are invited to meet members of the faculty and discuss their own favorite topics while they take a look at what the New York State College of Veterinary Medicine has to offer in equine research, services and facilities.

Cornell's Day at Aqueduct culminates with the awarding of the first "Cornell College of Veterinary Medicine Cup". Dr. Robert Phemister, newly appointed dean of the New York State College of Veterinary Medicine, will present the trophy to the winner of the 7th race.

A special booklet entitled "The Horse" covering the latest developments in equine nutrition, reproduction, drug testing, colic management, genetics, behavior, vaccine development and the College's equine services and facilities will be distributed during the poster session. Advance copies may be obtained through the Office of Public Information, New York State College of Veterinary Medicine, Cornell University, Ithaca, New York 14853.

THE NEXT TIME you're driving down the two-lane asphalt in the Northeast and you catch a glimpse of what looks like the latest agribusiness in action—look again. You may be seeing a pork producing farm. In the past, the Midwest raised most of the pork we ate, but with the big New York City market in our own backyard, New York State's pork producing industry has finally discovered an incentive to grow.

New York is not a big pork state yet, although the number of pigs outnumbers sheep and goats. According to Dr. Barbara Straw, Veterinary Extension Agent in the Diagnostic Laboratory, New York State may lag 20 to 30 years behind the leading pork producing states. Dr. Straw is one of the people helping the state's pork producers make up for lost time. She was recruited for the position of Veterinary Extension Agent from North Carolina State University's School of Veterinary Medicine where she was Assistant Professor of Swine Health Management in the Department of Food Animal & Equine Medicine. In North Carolina, there are fewer pork producers than in New York State, but the farms are larger and thoroughly modernized. Improvements in pork producing are measured in increments, by fractions of cents rather than in pennies as in New York State. So it's here that Dr. Straw feels she can make a contribution to the state's development.

When Dr. Straw graduated from the University of Minnesota with her DVM degree in 1976, pork was \$.60/lb. and in those days farmers could raise pigs inefficiently and still make money. Dr. Straw feels those days are gone forever. With a current selling price of approximately \$.48/lb. today's farmers make a profit only if they can raise pork for less. The efficient operations can do it for \$.38/lb. That's a selling price of \$76.00 on a 200 pound pig.

Dr. Straw enjoys working with food producing animals on this type of economic basis; her Ph.D. Thesis was entitled "The Effect of Animal Factors, Management and Disease on Productivity of Finishing Pigs." Although she was in private practice for two years in Minnesota, and conducted extensive field research while enrolled in the Ph.D. program at the University of Minnesota, she now works mainly with veterinarians and 50% of her calls are referrals. When she visits a farm, she looks at the overall management of herds to define the biologic capabilities of the herd and determine what keeps them from reaching it. Frequently, production problems originate with poorly converted buildings and their less than adequate ventilation. Pen size also encourages the spread of disease. On the older farms, pens usually house 50



finishing pigs when 30 is the ideal. Also, old floor surfaces may be deteriorating, and subsequently difficult to keep clean. Adding fuel to the health hazard fire, some barns have pits beneath the pen areas where it has been convenient to store manure but where gases and bacteria also accumulate.

Farms built today are built to discourage bacterial buildup and accommodate larger numbers of pigs with fewer health problems. The moderatelysized operations easily house in confinement 200 sows and their 2,000 offspring. On such farms, the routine use of large amounts of antibiotics in the feed, a practice that is drawing more criticism, should not be necessary. In Dr. Straw's opinion, antibiotics will not cover up bad management and housing. With today's emphasis on natural and additive-free foods, she feels it is perhaps inevitable that antibiotics be banned, despite the fact that the scientific evidence is lacking to demonstrate they really are a hazard. Even without the stimulus of an eventual ban—the future trend in pork production must be to end a reliance on antibiotics and become more efficient.

But even on a modern establishment, a "crisis" situation is not uncommon. It may be that a number of young are failing to thrive, or that the sows are aborting or failing to breed. In determining what disease is present and at what levels, Dr. Straw has found that the "crisis" is really an indicator of a continual low level problem. She has conducted extensive research in many of the more problem-prone areas of food animal production including hormone use and growth promotion in steers and feedlot cattle, respiratory disease in swine, growth promotants, implant retentions, environmental monitoring of livestock facilities, the effect of disease on performance, and the prevalence of Haemophilus pleuropneumoniae and swine dysentery in New York State.

In her official capacity, Dr. Straw has travelled in New York State as far east as Poughkeepsie, south to Hornell, and west, over to Buffalo. She finds that pork producers still face one common problem throughout the state—the lack of a large, central slaughtering plant. The local plants are small and smaller plants are less apt to have the financial resources to constantly upgrade equipment in a field where technology is rapidly changing. As the operation becomes more outdated and inefficient, the return to the pork producer decreases and the price of slaughtering increases. As a consequence, many pork producers in New York State may travel as far away as Pittsburgh for slaughtering facilities and a competitive price.

Despite the problems, Dr. Straw sees a bright future for pork producers in New York State, and she looks forward to helping them make the changes they need to succeed.

## **Room For Improvement**

Remember all those summertime chicken barbeques, the weiner roasts, the steaks sizzling on the grill? While you were flipping the burgers, a special committee of the National Research Council was taking a close look at the meat and poultry we eat. Their good news is that meat and poultry in general is wholesome and safe. The bad news is that there is room for improvement in its inspection.

Dr. Robert Wasserman of the New York State College of Veterinary Medicine chaired the committee whose report, "Meat and Poultry Inspection: The Scientific Basis of the Nation's Program", was made available in mid-July. The U.S. Department of Agriculture's Food Safety and Inspection Service (FSIS) had asked the committee to provide a scientific appraisal of current and recently introduced changes in the inspection system, as well as to propose innovations to improve the program. It was the committee's opinion that although the FSIS is "effective in assuring that apparently healthy animals are slaughtered in clean and sanitary environments", inspection could be improved considerably by introduction of new technologies for detecting microbial and chemical contaminants and revision of inspection practices to incorporate the principles of risk assessment.

Presently, federal inspectors examine animals before slaughter and carcasses and cuts of meat after butchering for lesions or other signs of disease. They monitor to ensure the cleanliness of meat packing plants, the lack of contaminants in meat products and the accuracy of labeling. To accomplish this, inspectors rely primarily on their eyes, hands, and noses.

The situation has changed dramatically over the years, the committee pointed out. "New information, new technology, and new health concerns have severely tested the efficiency and adequacy of the present labor-intensive inspection system," it said. Many of the new health hazards cannot be detected by the antemortem and postmortem inspections required by law.

Meats are now sold in a variety of forms—canned, cured, dried, fermented, precooked, and frozen, in addition to fresh. Flavorings, coloring, preservatives, and other additives may be mixed with meat during processing. Livestock and poultry farms practice

mass production methods which may involve routine use of antibiotics, growth hormones, and commercial feeds prepared from grains cultivated with the use of chemical fertilizers and pesticides.

Effective monitoring of both infectious organisms and chemicals needs to begin on the farm and in feedlots, where much of the exposure takes place, the committee pointed out. However, FSIS statutory jurisdiction does not extend that far, and the issue is further complicated by the fact that other government bodies—namely the Food and Drug Administration and the Environmental Protection Agencyalso have responsibility in control of additives and pesticides. The committee recommended that "means be found" for FSIS to coordinate control and monitoring of hazardous agents where they enter the meat and poultry food

FSIS now monitors the presence of about 100 chemicals in meat and poultry under its National Residue Program, initiated in 1967. The committee claimed that the program is "not demonstrably adequate to ensure maximum protection of public health." It urged FSIS to design a system "to ensure that no one person is consistently exposed to levels of chemicals in excess of an established tolerance level."

The committee also recognized that the final barrier to food-borne infection can be the kitchen. Proper refrigeration, thorough cooking, and careful handling to prevent cross-contamination from raw meat to other foods can control outbreaks of disease, even if the meat carries infectious organisms.

The committee also identified technologies best suited to FSIS's needs. They included new imaging techniques, particularly ultrasound, for examining animal organs and detecting bone fragments and other materials in meat; prepackaged testing kits for rapid identification of residues or diseases in animals before they leave the farm; and a computer-assisted information transfer system to improve communications with FSIS and increase efficiency of operations. The committee's final recommendation was for the "establishment of reasonable, measurable objectives for the nation's meat and poultry inspection program."



The International Committee for Contraception research of The Population Council has funded research by Patrick W. Concannon, Ph.D., Department of Physiology, on "Bioactivity of an Antiprogestin in Immature Female Dogs." At the same time, the National Institutes of Health recommended funding for the research project, "Optimizing Breeding Efficiency in the Domestic Dog", on which Dr. Concannon is co-investigator. Dr. Bill L. Lasley, of the Zoological Society of San Diego is principal investigator. Dr. Concannon's work looks at fertility in dogs and the ways to both prevent and improve it. The availability of a reliable, simple, and inexpensive contraceptive for bitches would reduce the great number of unwanted puppies, while improving fertility among dogs in kennels and breeding colonies would both reduce the number of dogs needed and provide economic advantages for dog breeders.

The Department of Physiology has begun a 5-year training program under the direction of Dr. Robert H. Wasserman and with funds from the National Institute of Arthritis, Diabetes, Digestive & Kidney Diseases. The program is designed to offer research training for postdoctoral students including physiologists, physicians, biochemists, and veterinarians, with an interest in the study of renal and/or intestinal diseases. They will be introduced to the most recent approaches and techniques for the study of biosynthetic (DNA, RNA, protein) processes, transport phenomena, hormone action, structure and function of brush border cytoskeleton, control of cell proliferation and cell differentiation in various transporting epithelia. The training program is based on the concept of a preceptorships whereby the trainees will be under the aegis of one of six preceptors-Drs. R. H. Wasserman, K. Bevenbach, A. Bretscher, R. Corradino, A. Quaroni, and G. Sharp. The major emphasis of the program will be laboratory work leading to the initiation of an independent research project, and each individual's program will be geared to the trainee's own career goals. Two trainees will be admitted to the program during the first year, the number increasing to four by the second year.

Bud C. Tennant, Professor and Chief of Medicine in the Department of Clinical Sciences, is principal investigator in the study of "Hepatitis, Aflatoxin and Hepatocarcinogenesis". The project has received \$84,734 from the National Cancer Institute to continue study into the role of aflatoxin in the development of primary hepatocellular carcinoma in individuals with chronic hepatitis B virus infection.

Drew M. Noden, Ph.D., Associate Professor of Anatomy, will continue study on the "Origin and Patterning of Head Muscles, Bones, and Nerves" thanks to a grant from the National Institute of Dental Research. The overall objectives of this project are to define the embryonic origins of all craniofacial tissues and to catalogue the interactions between these diverse components that are necessary for the normal development of the head and face. Research this year has concentrated on the fate of lateral mesoderm adjacent to the myelencephalic region of the brain. A second avenue of research concerns the interactions between myogenic and connective tissue-forming mesenchymal populations. The final avenue of research pursued this year concerns analysis of an inherited craniofacial malformation in Burmese cats. The next year of this project will be devoted to completing mapping of cephalic lateral mesoderm fates and an analysis of innervation and fiber type development in muscles formed by heterotopically grafted myotomes.

### **New Director Appointed**



# Dr. Playter To Head Teaching Hospital

The position of Director of the Teaching Hospital, vacant since the retirement of Dr. Kirk in July, has been filled with the appointment of Dr. Robert F. Playter. Dr. Playter is presently Professor and Head of the Department of Small Animal Medicine & Surgery at the College of Veterinary Medicine, Texas A & M University. He will assume his new duties at Cornell on November 1, 1985.

Dr. Playter was born in Perth, Western Australia after his mining engineer father met and married his mother while working on an overseas assignment for an English mining firm. The family returned to Canada shortly before World War II and another transfer soon followed, this time to Great Neck, New York where Dr. Playter attended high school. Following

graduation and 2 years of military service in the U.S. Army, he enrolled in the undergraduate program at Kansas State University and earned his degree in 1959. By 1961, he had received his DVM degree from Kansas State. After nine years in private mixed practice, Dr. Playter joined the faculty of Texas A & M University as an assistant professor in veterinary medicine and surgery. He completed his master's degree in veterinary medicine and surgery at the University; his thesis was entitled, "Lamellar corneal transplantation: Comparison of a simplified technique utilizing a contact lens splint supported by tissue adhesives with a standard suture graft procedure." He was chief of the small animal clinic from 1976-1977 and has been head of the Department of Small Animal Medicine & Surgery since

Dr. Playter is a diplomate of the American College of Veterinary Ophthalmologists and sat on their examination committee from 1976 through 1981. In addition to teaching undergraduate and graduate courses in veterinary ophthalmology, he conducts eve clinics, seminars, and programs on canine and other small animal ophthalmology. Between 1973 and 1981 he held regular yearly eye clinics to determine the presence or absence of inherited eye diseases in purebred dogs for dog breed associations throughout Texas, New Mexico, and Oklahoma. He is a frequent and popular speaker at University seminars and meetings of Texas's many veterinary medical associations.

His scientific publications have included examinations of the development and maturation of a cataract, lacrimal cyst in two dogs, and the differential diagnosis of ocular hyperemia. Dr. Playter was a consultant on Hurov's Handbook of Veterinary Surgical Instruments and Glossary of Surgical Terms, and author/editor of the autotutorial program "The Development and Maturation of a Cataract". He has coauthored articles on the automated generation of veterinary student duty schedules, and retinal lesions associated with induced canine ehrlichiosis. He has also written on the workings of a small animal clinic, and the causes, diagnostic features and treatment recommendations of a postorbital or retrobulbar abscess.

In 1975, Dr. Playter earned the Norden Laboratories Distinguished Teacher Award, and from 1979 until 1983 he was listed in *Men and Women of Science*. He received the "1980 Public Service Award" from the Humane Society of Brazos County for his consultant work with the society. He is a state and federally accredited veterinarian formerly associated with a stateregulated livestock processing plant and an auction company. Dr. Playter is a member of the Texas Veterinary Medical Association and has served on their evaluation and critique committee, small animal practice committee and budget and finance committee. He is a member of the American Veterinary Medical Association, the American Association of Veterinary Clinicians, the American Animal Hospital Association, and a delegate to the Association of American Veterinary Medical Colleges and a member of its executive committee. He was president of the Brazos Valley Veterinary Medical Association between 1966 and 1968, and an officer of the Kansas Veterinary Medical Association. He also sat on the review panel for the National Board Examination Committee from 1980 until 1982.

Dr. Playter and his wife Kay have three children, all of whom are grown. Their two daughters have their homes in Texas; their son is a senior at Ohio State University. They will be bringing along their two dogs, a golden retriever and a doberman pinscher, but although Dr. Playter looks forward to some hunting and fishing in the Northeast, the dogs won't be very helpful. "About all they hunt is the food bowl", claims Dr. Playter. Both Dr. and Mrs. Playter are looking forward to the winter with enthusiasm and he hopes to try skiing on the local slopes. Dr. Playter also holds a private pilot license and, since he's heard of the locale's reputation as the glider capital of the world, he anticipates testing the air currents.

Veterinary Viewpoints

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