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NE CENTRAL Files Mrs. Raymond R. Dickey 3046 R Street, N. W. april 7 Washington, D. C. 20007 Dear hus Kengun We are ill so very gratiful for your padaugation nor the Serond Genesis benefit Tuesday evening We have vraved twice is much movey a we have ever done with a benefit hefore + contributions are still coming in - I think everyour there was duply touched by the gallantry and articulationess of the graduates who spoke.
The Washington Post was right_

eren good came doe need a first Lady , & you have made a dramater difference un our resibility and level. of support in the community Thank you very very much for your time your interest and your help Sincerely Teg Dukey Co. Churchan, Sacond Genera Benefit





OFFICE OF MANAGEMENT AND BUDGET

WASHINGTON, D.C. 20503

May 4, 1984

RC CS 1984 MAY -4 PM 3: 16

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1 FE006-11

MEMORANDUM FOR DICK DARMAN

CRAIG FULLER

MIKE MCMANUS

FROM:

JOE WRIG

SUBJECT:

Interview with Pete Earley of the Washington

Post

Heads up: the Washington Post is probably going to do a story on an OMB review of all of the management numbers --savings, cost avoidances, etc. They may try to portray a "disagreement" within OMB. I told Earley that we are conducting our first major management reviews as part of the budget exercise and we normally go through a rigorous analysis before any "data call" is made of the agencies or before any additional effort is made as part of the budget exercise. They may also try to tie this into disagreements between OMB and the Grace Commission. I've checked the Saturday draft radio speech and do not believe any major "savings numbers" are mentioned.

Haven of Life Center, Inc.

We regrette

oh

6500 North Tamiami Trail Sarasota, Florida 33580

3 1984

March 31, 1984

Phone: (813) 355-2275 Phone: (813) 351-3671

4800 PRO14-12 WE 003 PPO05-01

Mrs. Nancy Reagan: Whitehouse, Washington D.C.

Dear Mrs. Reagan;

At Haven of Life Center in Sarasota, Fla, we are working to save baby's lives. A child is killed every 20 seconds in the United States abortion clinics. 95% of those baby's are killed simply because they are concieved at an inconvienent time.

Most of these women don't want to have an abortion, but financially or for other reasons they don't see any alternative. They don't know that Haven of Life Center will council them with all their emotional needs, house them if necessary and pay the medical bills incured, If she chooses to give her baby up for adoption, we work with a licenced adoption agency and if she chooses to keep her child we will help her to raise that child with love and compassion, because we will teach her all about our loving father in heaven, and that nothing is impossible with Him.

We are different from other pro-life groups because we actually have the backing of the "women's rights" groups in Sarasota. (The same women who believe that a women has the right to choose what to do with her own body.) because we are not attacking them, but we are showing them that freedom of choice also goes for the girl who finds herself pregnant and does not want an abortion, but financially thinks that is her only alternative.

Baby's are being saved in Sarasota because of Haven Of Life Center. God has showed us something that works, it doesn't antagonize, it saves lives. We are interested in the total person, physically, emotionally and spiritually.

Right now in Wisconsin, Michigan and New York the paperwork is being drawn up for Haven of Life Centers there. We hope with your help we can work with other organizations and have a Haven of Life Center in every major city in the United States.

We plan to raise funds for our national headquarters building and new housing for the women this summer or early fall with "THE 1984 SAVE A BABY BENEFIT." This will be a black-tie \$300.00 a plate dinner, fashion show and aution, an evening to remember. Art Linkletter has offered to work with us and we will be flying in top entertainers from California. There will be national coverage and with your help this could change the whole United States into seeing what they could do to save baby's lives.

Politically this event couldn't have happened at a better time. President Reagan has always taken a firm stand in what he believes in and that is why we love him and voted for him. It won't hurt America to be reminded of these strengths of his.

There is no doubt in my mind that God is blessing Haven Of Life Center. We've seen miracle after miracle happen before us. The organization is growing by leaps and bounds, and it's just ordinary people like me. Nothing is impossible with our God, because like He told me "Sherry, I'm not interested in your ability, I'm interested in your availability." It's not us, it's Him. Haven of Life Center works and people want to become a part of something that works.

Mrs. Reagan if your couldn't come, we would have a wonderful show and we would raise funds for a beautiful center in Sarasota, but if you would be available to come and model some of the gowns, we would have the start of Haven of Life Centers all across America.

Thousands of babys are being saved right now, but with your help millions would be saved. All of America would love to see our First Lady modeling designer clothes to save baby's lives.

Please pray about this, and our prayers will be with you.

10

Sincerely, In Christ Jesus

Sharon J. Frossi

cc/Carolyn Sunseth Ann Robleski President Reagan

225516

PR005-02

THE WHITE HOUSE WASHINGTON

February 22, 1982 FG 006 12

To The Bohemian Club Membership Committee:

I am pleased to recommend to you William Clark for membership in The Bohemian Club. I have known him and his family for many years and hold him in the highest esteem.

He served as my Chief of Staff for a time during my term as Governor of California. It was my pleasure to appoint him to the bench where he served with such distinction that I named him to the California State Supreme Court. He is now serving me as Foreign Policy Advisor in charge of the National Security Council.

In each and every position that he has held, he has performed in an outstanding manner. But, I'm aware that you, in fulfilling your responsibility on the the Membership Committee of The Bohemian Club, look for more than ability and success in business or profession.

With that in mind, I can recommend William Clark to you with no reservation whatsoever. paraphrase Will Rogers and say I've never met anyone who, after getting acquainted with Bill Clark, didn't like him and hold him in the highest regard. He will be of great service to Bohemia, and contribute to the warmth and camaraderie we value so highly.

Sincerely,

Romed Rea

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Feb 13 82 Caspar Weinberger mem TANDARTINE FIE

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Cap Weerleigers

THE SECRETARY OF DEFENSE

WASHINGTON, THE DISTRICT OF COLUMBIA

February 13, 1982

The President
The White House
Washington, D.C. 20500

Dear Mr. President:

I am sponsoring Bill Clark for non-resident membership in the Bohemian Club, and I am seeking also preferential consideration for membership. If I cannot obtain it, the length of the waiting list indicates it will be at least 25 years before his application will be acted upon. The rules of the Club require that sponsors submit letters from members of the Club "who are particularly well qualified by reasons of (1) present or former active participation in the life of Bohemia, and (2) close association with the applicant, to express an informed opinion as to whether the applicant, if elected, can and will render outstanding service to Bohemia."

Under these circumstances, if you are so inclined, I would be delighted if you could send such a letter concerning Bill Clark. The letter should be addressed to the Bohemian Club Membership Committee and sent to me so I can forward it with the other papers about Bill's application.

Many thanks for anything you can do.

Sincerely,

PR014-12

THE WHITE HOUSE WASHINGTON

February 22, 1982

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Rowed Rag

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Bohaman Club Membership Comm.

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Notherly, Service Service to the well.

RN

WASHINGTON

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May 10, 1984

Dear Mr. Martin:

On behalf of Mrs. Reagan, I wish to thank you for your recent letter endorsing the Mint Museum's invitation to become Honorary Chairman of their 18th Annual Antiques Show in Charlotte, North Carolina. -

I am pleased to let you know that Mrs. Reagan has accepted this kind invitation and we are looking forward to working with the Museum on this project.

If I can assist you with future invitations, please don't hesitate to contact me.

Sincerely,

Ann Wrobleski Director of Projects Office of the First Lady

The Honorable James G. Martin United States House of Representatives Washington, D.C. 20515

AW

WAYS AND MEANS COMMITTEE

Congress of the United States House of Representatives

Washington, D.C. 20515

WASHINGTON OFFICE: 2186 RAYBURN BUILDING WASHINGTON, D.C. 20515 TELEPHONE (202) 225–1976

Letaris de

April 30, 1984

Mrs. Ronald Reagan The First Lady The White House 1600 Pennsylvania Avenue Washington, D.C. 20500

Dear Mrs. Reagan:

COUNTIES

YADKIN (SOUTHWEST)

LINCOLN MECKLENBURG

IREDELL

Although you are unable to attend the 1984 18th Annual Mint Museum Antiques Show, October 5-7, I am writing in support of my constituent, Mrs. E. Reed Gaskin, in requesting that you consider being the Honorary Chairman of this exciting event in Charlotte, North Carolina, by lending your name. We would appreciate your consideration of this request and hope that you will consent to lend your name to this position for the Mint Museum Show.

Best wishes and kindest personal regards.

Sincerely,

Member of Congress

JV

WHITE HOUSE COUNSELLOR'S OFFICE TRACKING WORKSHEET

PR014-12

O - OUTGOING				
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Send all routing updates to Central Reference (Room 75, OEOB).

Always return completed correspondence record to Central Files.

Refer questions about the correspondence tracking system to Central Reference, ext. 2590.

RECORDS MANAGEMENT ONLY

	CLASSIFICATION SECTION	
No. of Additional Correspondents: Media		0
Prime Subject Code: PR 014.1	Secondary Subject Codes: PROIYO	8 J200
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n - 1 - Ronald Reagan - Nancy Re n - 2 - Ron - Nancy	agan	

100 Estates Drive ~ JAMES D. GARBOLINO Suite A Roseville, California 95678 ATTORNEY AT LAW Telephone: (916) 782-4421 May 11, 1984 226940 Mr. Edwin Meese White House Washington D.C. 20500 Re: Vacancy on Placer County Superior Court Dear Ed: Recently Judge Wayne Wylie announced his retirement from the Placer County Superior Court Bench, effective August, 1984. I am seeking the appointment to the vacancy.

I would really appreciate it if you could find time to write a letter to Governor Deukmejian supporting me for the appointment. If at all possible, it would be a tremendous favor if the President could do the same. I realize that I am asking a lot, but I remain an eternal optimist.

I am enclosing a brief statement of my qualifications, so that you can be aware of my professional involvement since 1974.

Although it has only been a week since Judge Wylie has announced his retirement, I have gained the support of the District Attorneys of Placer and Nevada Counties, The Sheriff of Placer County, two chiefs of police, and numerous other law enforcement officers in the CHP, DOJ, Sheriff's Department, and local police agencies. I expect to have a great deal of law enforcement backing.

I know that you have other irons in the fire at the present time, but if there is anything at all that I can do for you, please do not hesitate to ask. My best to Ursula.

Again, thank you for your kind consideration and attention.

Sincerely,

James D. Garbolino

JDG/cr Encl:

JAMES D. GARBOLINO

STATEMENT OF QUALIFICATIONS

Formal education: Graduate, Roseville High School, 1961; Graduate, University of San Francisco, Bachelor's degree, 1966, Juris Doctor Degree 1969.

Specialized Education: National District Attorneys Association, National Institute on Narcotics and Dangerous Drugs; California Specialized Training Institute, courses in Civil Disorder Management and Officer Survival and Internal Security; National Institute of Trial Advocacy.

Legal Experience: Private Practice of law, Roseville, 1974 to present. Special Prosecutor, Placer County District Attorney's Office, 1983. Deputy Attorney General, Criminal Division, Office of the California State Attorney General, 1969-1972; Assistant Legal Affairs Secretary for Governor Ronald Reagan, 1972 - 1974. Consultant to Governor regarding law enforcement matters 1974-1975.

Specialized Experience: Advisor, Attorney General's Task Force on Organized Crime, 1971; Special prosecutor, 1970- 1972; Presided over Governor's Extradition Hearings, 1972-1974; Governor's Liaison with California Highway Patrol, Department of Justice, State Police, and California Military Department, and Office of Emergency Services. Representative to Governor's Emergency Planning Council.

Professional Affiliations: Member, United States Supreme Court Bar, California Bar Association, American Bar Association, Placer County Bar Association, Capitol City Trial Lawyers Association, California Trial Lawyers Association.

Civic Activities: Past Member, Board of Directors, Citizen's Bank of Roseville; Member, Roseville Area Chamber of Commerce; Past President, Rotary Club of Roseville, Past Director, Roseville Area Youth Services. President-Elect, Order of Sons of Italy in America, Roseville Lodge; Past President, Placer County Bar Association; Honorable Discharge, United States Marine Corps.

Dear Mrs. Hodges:

On behalf of the President and Mrs. Reagan, thank you for inviting them to be honorary patrons of the National Symphony Orchestra Ball which will be held on December 7, 1984.

The President and First Lady will be delighted to be honorary patrons of the 1984 ball. They both have enjoyed their past involvement with the orchestra and look forward to continuing to this association.

With best wishes,

Sincerely,

Director, Presidential
Appointments and Scheduling

Mrs. Walter J. Hodges
4100 Cathedral Avenue, N.W.
Washington, D.C. 20016

FJR:jaj

bce: Netta Dickey for honopary chairmanship list

James Rosebush

MRS. WALTER J. HODGES 4100 CATHEDRAL AVENUE, N.W. WASHINGTON, D.C. 20016

RECEIVED

APR 23 1984

AP SIMPORDING

The President and Mrs. Reagan The White House Washington, D. C. 20500

My dear Mr. President and Mrs. Reagan:

As Chairman of the 1984 National Sympathy Orchestra Ball it is an honor to extend to you an invitation to be the Honorary Patrons of this important fund-raising event. Your continuing support of, and interest in, the Orchestra is so meaningful to all of us. We are delighted that the Embassy of France has agreed to be our Sponsor this year. Having the participation of this Embassy and the Ambassador and Madame Vernier-Palliez will make it a very special evening.

The Ball will be held on December 7, 1984 at the Sheraton Washington Hotel. While the Orchestra's home is the Kennedy Center it is truly the Nation's orchestra and we trust you will again be the Patrons of this event.

Sincerely,

Margaret Lodges

Mrs Walter G. Hodges

Name	Date
Mary Rawlins 1	182 5/18/8
/	

May 15, 1984

2:105

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Dear Mrs. Hodges:

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The President and First Lady will be delighted to be honorary patrons of the 1984 ball. They both have enjoyed their past involvement with the orchestra and look forward to continuing to this association.

With best wishes,

Sincerely,

FREDERICK J. RYAN, JR. Director, Presidential Appointments and Scheduling

Mrs. Walter J. Hodges
4100 Cathedral Avenue, N.W.
Washington, D.C. 20016

FJR:jaj

bcc: (Netta Dickey for honorary chairmanship list

James Rosebush

THE WHITE HOUSE

WASHINGTON

MEMORA	NDUM	MAY 7, 1984	
TO:	THERESA ELMORE - JAMES ROSEBUSH		
FROM:	FREDERICK J. RYAN, JR., DIRECTOR PRESIDENTIAL APPOINTMENTS AND SCHEDULING		
SUBJ:	REQUEST FOR SCHEDULING RECOMMENDATION		
	PLEASE PROVIDE YOUR RECOMMENDATION ON THE FOLLOWING SCHEDULING REQUEST UNDER CONSIDERATION:		
	EVENT: Honorary Patrons - 1984 Natio	nal Symphony	
	DATE: December 7, 1984 LOCATION: Sheraton Washington Hotel BACKGROUND: See attached	APPROVED FOR Date. Length. DateFJR	
	BACKGROUND: See attached	Jean to bete	
	YOUR RECOMMENDATION:		
	Accept Surrogate Mess Priority Routine	age Other	
	IF RECOMMENDATION IS TO ACCEPT, PLEASE CITE		
	Will be one of the first "social" events after the election and appears to be a tradition for the President and First Lady to be the Honorary Patrons.		
		and	

RESPONSE DUE 5/11/84

TO JEAN APPLEBY JACKSON

THE WHITE HOUSE

WASHINGTON

MEMOR	ANDUM		MAY /, 1984
TO:	JAMES ROSEBU	SH - THERESA ELMORE	
FROM:		RYAN, JR., DIRECTOR L APPOINTMENTS AND SCHEDULING	SCHEDULING
SUBJ:	REQUEST FOR	SCHEDULING RECOMMENDATION	4891 6 YAM
		IDE YOUR RECOMMENDATION ON THE FOREQUEST UNDER CONSIDERATION:	SECEINED DAIMOUTO
2	EVENT:	Honorary Patrons - 1984 Nation Orchestra Ball	al Symphony
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TO JEAN APPLEBY JACKSON

5/11/84

RESPONSE DUE

MRS. WALTER J. HODGES
4100 CATHEDRAL AVENUE, N.W.
WASHINGTON, D.C. 20016

RECEIVED

APR 23 1984

SCHEDULING

April 16, 1984

The President and Mrs. Reagan The White House Washington, D. C. 20500

My dear Mr. President and Mrs. Reagan:

As Chairman of the 1984 National Sympathy Orchestra Ball it is an honor to extend to you an invitation to be the Honorary Patrons of this important fund-raising event. Your continuing support of, and interest in, the Orchestra is so meaningful to all of us. We are delighted that the Embassy of France has agreed to be our Sponsor this year. Having the participation of this Embassy and the Ambassador and Madame Vernier-Palliez will make it a very special evening.

The Ball will be held on December 7, 1984 at the Sheraton Washington Hotel. While the Orchestra's home is the Kennedy Center it is truly the Nation's orchestra and we trust you will again be the Patrons of this event.

Sincerely,

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WHITE HOUSE CORRESPONDENCE TRACKING WORKSHEET

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12

May 25, 1984

227907 PR 014-12

Dear Mr. Bark:

This is in follow-up to my letter to you of May 23, 1984. I am pleased to confirm in writing the telephone call that you received informing you that the President and Mrs. Reagan will be glad to serve as Honorary Co-Chairmen for the dinner on July 18, 1984 honoring Glenn Campbell, Director of the Hoover Institution, for his 25 years of service.

Although they will be unable to be with you for the dinner, the President and First Lady are delighted to participate in the celebration in this special way.

With best wishes,

Sincerely,

FREDERICK J. RYAN, JR. Director, Presidential Appointments and Scheduling

Mr. Dennis L. Bark Hoover Institution on War, Revolution and Peace Stanford, California 94305

Ann Wrobleski - FYI

THE WHITE HOUSE WASHINGTON

Date: 5-31-84

TO:

Debra Balfour

FROM:

JEAN A. JACKSON **Deputy Director**

Presidential Appointments

and Scheduling

Per our conversation. A copy of air letter to Mr. Back inforthcoming.

THE WHITE HOUSE WASHINGTON

TO:

FROM:

MICHAEL K. DEAVER Assistant to the President Deputy Chief of Staff

Information

Z Action

Please enrect the situation THANK YOU!

HOOVER INSTITUTION

ON WAR, REVOLUTION AND PEACE

Stanford, California 94305



May 23, 1984

Dear Mike:

HELP!

We are giving a big dinner in honor of Glenn's 25th anniversary as Director of the Hoover Institution on July 18 (Wednesday, the day before our Board meeting, which we hope you will attend).

The Co-Chairmen are Bus Mosbacher (Chairman of our Board), and Ann Armstrong, Paul L. Davies, Jr., Allan Hoover, and Dave Packard.

We would be very honored (and Glenn would be enormously please) if President and Mrs. Reagan would do Glenn and us the honor of being the Honorary Co-Chairmen for the evening. Could you please get permission for us to do this?

We know that the President and the First Lady would probably not be able to attend. But Glenn, as you know, has great respect for them both, and we think Glenn would be enormously pleased if the President and Mrs. Reagan could serve as Co-Chairmen in an honorary capacity.

I made this request to Bill Sittman last week in a letter. My letter was sent to Fred Ryan's office and I have just been informed that the Reagans cannot attend; but that is not what we have requested.

I hope very much you can help me as soon as possible.

11111

Dennis L. Bark

The Honorable Michael K. Deaver Assistant to the President Deputy Chief of Staff The White House Washington, D. C. 20500 Dear Mr. Bark:

Your recent letter requesting that the President and Mrs. Reagan be honorary chairmen of a dinner to honor Glenn Campbell at the Hoover Institution on June 18, 1984 has been forwarded to me by Bill Sittmann.

We appreciate your interest in having the President and the First Lady serve as honorary chairmen of this very special occasion. Unfortunately, they will be unable to do so due to a longstanding policy to accept only honorary chairmenships in events in which they are able to be personally involved. However, on behalf of the President and the First Lady, please accept our best wishes for a most enjoyable evening in honor of a most deserving individual.

With best regards,

Sincerely,

FREDERICK J. RYAN, JR. Director, Presidential Appointments and Scheduling

Mr. Dennis L. Bark Senior Fellow Hoover Institution of War, Revolution and Peace Stanford, California 94305

FJK:jaj bcc: Michael Deaver

HOOVER INSTITUTION

ON WAR, REVOLUTION AND PEACE

Stanford, California 94305



May 18, 1984

227907

Mr. William F. Sittmann Office of the Deputy Chief of Staff The White House - West Wing Washington, DC 20500

Dear Bill:

As I mentioned to you on the telephone yesterday, a special dinner is being given on July 18 at the Stanford Faculty Club in honor of Glenn Campbell, on the occasion of his twenty-fifth year as Director of the Hoover Institution.

The Co-Chairmen of the evening are Emil Mosbacher, Jr. (the principal host and also Chairman of our Board of Overseers), David Packard, Allan Hoover, and Paul L. Davies, Jr. Anne Armstrong has also been asked to serve as a Co-Chairman, and although Mr. Mosbacher has not yet heard from her as I write this letter, there is every reason to believe she will serve as a Co-Chairman also.

We all hope that the evening will be a memorable one and that it will be not only a richly deserved tribute to Glenn, but also an enjoyable evening for him and for his wife.

I therefore am writing to you to ask whether President and Mrs. Reagan would consider serving as the Honorary Co-Chairmen for this occasion. We realize, of course, that their schedule may not permit them to attend. We also hope, however, that they would be able to agree to join us in this way for this special evening.

Wtih my appreciation, and I hope I may hear from you at your early convenience, since we must begin printing the invitations within 14 days.

Yours sincerely,

Dennis L. Bark Senior Fellow

W. Glenn Campbell

Current positions with Reagan Administration:

- -- Chairman, President's Intelligence Oversight Board, 1980-
- -- Member, President's Foreign Intelligence Advisory Board, 1981-
- -- Chairman, Japan-United States Friendship Commission, 1983-
- -- Chairman, American Panel of Joint Committee on Japan-United States Cultural and Educational Cooperation (CULCON), 1983-
- -- Member, UNESCO Monitoring Committee, 1984

May 17, 1984

Jean Nette Pleasthavalle SUMMARY OF MORE IMPORTANT MAIL RECEIVED FOR MICHAEL K DEAVER REPORT PERIOD: MAY 23, 1984 THRU MAY 23, 1984 PAGE 011

FROM

SUBJECT

DISPOSITION

STATUS

BARK, DENNIS L., MR. ASSOCIATE DIRECTOR HOOVER INSTITUTION ON WAR, REVOLUTION AND PEACE STANFORD, CA 94305 OCT 14, 83

ENCLOSES A OCT 14 83 LETTER TO THE PRESIDENT FROM GLENN CAMPBELL, HOOVER INSTITUTION REQUESTING THE PRESIDENT TO ATTEND RECEPTION / DINNER JAN 10 84 OF THE HOOVER BOARD OF OVERSEERS

179910 BILL SITTMANN FREDERICK RYAN

CLOSED OCT 19, 83 CLOSED OCT 31, 83 GAIL LEDWIG SENT RESPONSE TO MR. BARK DATED OCT 19 83 PER RYAN PLACED ON LRSM AGENDA FRED RYAN SENT REGRET LETTER ON OCT 31 83

BARK, DENNIS L., MR. SENIOR FELLOW AND ASSOCIATE DIRECTOR HOOVER INSTITUTION STANFORD, CA 94305 MAR 30, 84

REQUEST FOR CONSIDERATION OF JAMES WALTER AND JOSEPH EPSTEIN FOR NATIONAL COUNCIL ON ARTS

195628 BILL SITTMANN JOHN HERRINGTON

CLOSED APR 02, 84 CLOSED APR 12, 84 JOHN HERRINGSTON SENT RESPONSE TO MR. BARK DATED APR 12 84

BARK, DENNIS L., MR. SENIOR FELLOW HOOVER INSTITUTION ON WAR, REVOLUTION AND PEACE STANFORD, CA 94305 MAY 18, 84

REQUEST FOR THE PRESIDENT AND MRS. REAGAN TO SERVE AS HONORARY CO - CHAIRMEN'S IN HONOR OF GLENN CAMPBELL'S 25TH YEAR AS DIRECTOR OF THE HOOVER INSTITUTION

227907 BILL SITTMANN FREDERICK RYAN

CLOSED MAY 21, 84 CLOSED PER FRED RYAN MAY 22 84, REGRET LETTER SENT

BARNES, J. HAMPTON, MR. ACTING PRESIDENT EISENHOWER EXCHANGE FELLOWSHIP, 256 SOUTH SIXTEENTH STREET PHILADELPHIA, PA 19102 JAN 25, 84

COURTESY CALL FROM 1984 EISENHOWER FELLOWS IN APR OR MAY

200890 BILL SITTMANN FREDERICK RYAN

CLOSED JAN 30, 84 CLOSED PER FRED RYAN JAN 31 84. PLACED ON LRSM AGENDA

JAJ Called

Dennis Back+

accepted for

President - Mrs. Reagan

talked with D. Balforn in

Mrs. Reagans of a + sent

copy of Letter.



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HOOVER INSTITUTION

ON WAR, REVOLUTION AND PEACE

Stanford, California 94305



May 18, 1984

227907

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The White House - West Wing
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W. Glenn Campbell

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- -- Chairman, American Panel of Joint Committee on Japan-United States Cultural and Educational Cooperation (CULCON), 1983-
- -- Member, UNESCO Monitoring Committee, 1984

May 17, 1984

SA CENTRAL FILE Prudential-Bache 228413 PRO14-12

George L. Ball President and Chief Executive Officer

October 22, 1984

Mrs. Ronald W. Reagan The White House Washington, D.C.

Dear Mrs. Reagan:

You were most gracious to serve as Honorary National Chairman of the Deafness Research Foundation's October 14th benefit, "Listen for Those Who Can't", at The Pierre. As chairman of the Foundation, it's my pleasant task to tell you that almost a thousand people attended the event which raised more than \$450,000 for the Foundation. These monies will be wisely spent directly on research programs for the cure and prevention of deafness. It's hoped that you will take some satisfaction in the significant role you played in making this fund-raiser the huge success it was.

Enclosed is a program from the affair which you may find of interest.

On behalf of the directors, officers and staff of the Deafness Research Foundation, please permit me to again thank you for your support for the Foundation's activities. It is greatly appreciated by us all.

My very best personal regards to you and The

President.

George L. Bay Chairman

Yours

Deafness Research Foundation

GLB:db

Enclosure

¿ "Listen for Those Who Gan't"



A GALA BENEFIT FOR
THE DEAFNESS RESEARCH FOUNDATION



George L. Ball



Burton M. Tansky



Mrs. George L. Ball

We are delighted to welcome so many friends of The Deafness Research Foundation to our second gala benefit, "Listen for Those Who Can't." Our philosophy is to have fun while raising funds—and we hope everyone enjoys themselves tonight as much as they did last year when we filled Avery Fisher Hall at Lincoln Center for a benefit concert with The Pittsburgh Symphony Orchestra, Andre Previn conducting, and raised over \$400,000.

I want to thank Mrs. Ronald Reagan for graciously serving as National Honorary Chairman of tonight's party, as well as my wife, Molly, and my good friend, Burton Tansky, President of Saks Fifth Avenue, for heading our large benefit committee. Their joint efforts made possible tonight's wonderful success.

Your support insures the continuance of the Foundation's medical research program, which over the past 26 years has supported 779 research projects at a cost of approximately \$7,000,000.

Thank you all.

George L. Ball Chairman, Deafness Research Foundation and President, Prudential-Bache Securities, Inc.

MRS. RONALD W. REAGAN

Honorary National Chairman

&

MRS. GEORGE L. BALL MR. BURTON M. TANSKY

National Co-Chairmen welcome you

to

"LISTEN FOR THOSE WHO CAN'T"

a gala benefit for

THE DEAFNESS RESEARCH FOUNDATION

Tea Dance and Dinner

ENTERTAINMENT BY TONY BENNETT

on

SUNDAY, 14 OCTOBER 1984

from 5 to 9 pm

THE PIERRE

Fifth Avenue at 61 st Street

5 pm: Reception

6 pm: Mr. Bennett

7 pm: Dinner and Dancing to the music of Bob Kardwick

"Listen for Those Who Can't"



Flowers ZEZE Florist, New York Sungram's mixers compliments of Premium Beverage



Mrs. Ronald W. Reagan . National Honorary Chairman

THE WHITE HOUSE August 16, 1984

It is my pleasure as Honorary Chairman of It is my pleasure as honorary Chairman of this evening's benefit for the Deafness this evening's benefit for the Deafness
Research Foundation to welcome an enjoyable
of you has my best wishes for an enjoyable Dear Friends:

This organization's contributions towards the correction and prevention of deafness are great. evening. are great. The roundation s record of accomplishments is a remarkable example of private initiatives at work - an private initiatives at work -- an achievement made possible by the Board, staff and volunteers across the country achievement made possible by the Board, who staff and volunteers across the country starr and volunteers across the country who have extended their personal, financial and emotional support to your efforts.

Although the President and I cannot be with you, please know that you are in our thoughts. with you, prease know that you are in thoughts. the future.

Uaucy Reagan

Deafness Research Foundation Benefit New York, New York

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The Deafness Research Foundation

The Deafness Research Foundation is the only national voluntary organization that is entirely committed to directing public attention and support for research into the causes, treatment and prevention of deafness and other hearing disabilities. The DRF's principal work is that of awarding grants to finance promising new otologic research projects, nationwide.

The Foundation is unique: most of its overhead expenses are defrayed by 2,000 otolaryngologists and audiologists representing all 50 states. Called the Centurions of the DRF, they pay annual membership dues so that all contributions from corporations, foundations and the general public can go directly to the purpose for which they were intended—ear research.

No other voluntary health organization has received such distinction or can claim such support.

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THE DEAFNESS RESEARCH FOUNDATION

"Listen For Those Who Can't" October 14, 1984

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Called - 2284/3

Oct. 11

to deduce PRO14-12

September 18, 1984

SFP 28 1984

G. W

Mrs. Ronald W. Reagan The White House Washington, D.C.

Dear Mrs. Reagan:

On behalf of the Deafness Research Foundation, please let me thank you for serving as Honorary National Chairman of the Foundation's fall benefit, "Listen for Those Who Can't." By lending your name to the cause of ear research, you have helped appreciably in assuring the success of the benefit. There are some 16 million hearing afflicted Americans, and your demonstration of concern for them is enormously helpful.

If perchance you opt to attend the benefit, which will be held on Sunday evening, October 14th, at The Pierre in New York City, we would obviously be delighted. Mr. Albert J. Levine, Executive Director of the Foundation, would be happy to work with your staff in making arrangements for your stay in the city. We will, of course, understand if your busy schedule prevents your attendance.

Please let me know if you would like further information about our benefit. Thank you again for supporting the cause of deafness research. It is deeply appreciated.

Very truly yours,

George L. Ball

Deafness Research Foundation

GLB:jw Enclosures

AN INVITATION TO A GALA BENEFIT FOR THE DEAFNESS RESEARCH FOUNDATION



Listen for Those Who Gan't

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request the pleasure of your company

at

"LISTEN FOR THOSE WHO CAN'T"

a gala benefit for

THE DEAFNESS RESEARCH FOUNDATION

Tea Dance and Dinner

ENTERTAINMENT BY TONY BENNETT

on

SUNDAY, 14 OCTOBER 1984

from 5 to 9pm

THE PIERRE

Fifth Avenue at 61 st Street

5 pm: Reception

6pm: Mr. Bennett

7 pm: Dinner and Dancing to the music of Bob Kardwick

Tickets \$300



Listen for Those Who Can't

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July 02, 1984

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ER

Mrs. Ronald W. Reagan The White House Washington, D. C.

Dear Mrs. Reagan:

On behalf of the Board of Directors of The Deafness Research Foundation, it's an honor to tell you how very delighted we are that you have agreed to serve as Honorary National Chairman of the Foundation's major 1984 fund-raising event, to be held at The Pierre on October 14th. The National Co-Chairmen of this affair, which will be a tea dance and supper featuring entertainment by Tony Bennett, are my wife, Molly, and Burton Tansky, president and chief executive officer of Saks Fifth Avenue. A large, active Committee, and an outstanding under-30 Junior Committee, are working tirelessly to ensure the event's success

Last year, the Foundation raised well over \$400,000 from its first major public benefit, a gala concert by the Pittsburgh Symphony at Lincoln Center. All funds realized from events such as this and the one which you are chairing this year, go directly to support the Foundation's medical research programs, ones which are devoted to the correction and prevention of deafness. Enclosed are some background materials about the accomplishments and ambitions of the Foundation.

If your schedule permits, it would obviously be a pleasure to have you attend the affair on October 14th as the Foundation's guest-of-honor. Amoung the seven hundred guests at the benefit, you will have many old friends, including Preston Long who has been invited to join the Foundation's Advisory Committee.

My best personal wishes to you and The President.

Yours truly

Chairman of the Board

Deafness Research Foundation

TWO MILLION AMERICANS
ARE PROFOUNDLY DEAF...
14 MILLION OTHERS SUFFER
FROM
HEARING IMPAIRMENTS...
OF THE TOTAL NUMBER
ONE MILLION ARE CHILDREN



Deafness Research Foundation
55 EAST 34 STREET / NEW YORK, NY 10016

PROFILE OF THE DEAFNESS RESEARCH FOUNDATION

The Deafness Research Foundation (DRF) is the only national voluntary health organization that is entirely committed to directing public attention and support for basic as well as clinical research on the causes, treatment and prevention of deafness and hearing disabilities. It is a tax-exempt non-profit organization, incorporated in New York State. The DRF was established in 1958 by 'ear-nose-and-throat specialists, businessmen and other public spirited citizens. They were inspired by a woman from New Jersey whom surgery had allowed to hear her children for the first time six years before.

The DRF's principal work is that of awarding grants to finance promising new medical and scientific research projects, nationwide. Since its inception the Foundation has awarded over 650 grants for nearly six million dollars of public contributions.

The Foundation is unique—much of its overhead expenses are defrayed by over 1,700 ear-care doctors, allied professionals and almost all related major medical societies.



Doctors stress that early detection of hearing disorders can save hearing.

They pay membership dues so that other contributions can go directly to research.

No other voluntary health organization has received such distinction or can claim such support.

Life is like a silent film without captions for two million Americans, who are profoundly deaf. They cannot hear and understand other people's voices. More than seven million suffer significant hearing impairment in both ears. All told 16 million Americans are partially or totally excluded from the sounds of life—one million of this number are children.

The figures are staggering yet few Americans know of their magnitude.

Why?

Deafness is an invisible handicap. People don't associate it with pain. Or deformity.

Yet deafness does hurt.

For a child, deafness is a world apart from hearing children. Life is often lonely. Their hearing aids help them receive only faint sound waves that often do not make sense. They read each word in silence. They cannot enjoy a normal education and often don't realize their full potential as adults.

And for the great number of us whose hearing fades as we grow old, deafness can be isolating, frightening and confusing. The elderly often live in a world where safety is constantly threatened.

Life itself is deformed by deafness. \square

FROM THE SOUNDS OF LIFE

"All around me chatting, laughing people on their way to work passed me like ghosts... A vast silence reigned in that busy place. I slid like an observant ghost from pillar to pillar. I did not wish to be noticed by colleagues lest I be engaged in conversation and have to confess my utter inability to hear....

"My wife came to call me for lunch. I could see her anxious, labored effort to shout into my ear. Finally, she took my hand and led me to the stairway. 'Christ,' I thought, 'is this what she is going to live with from now to the end of her life?'"*

^{*}From Loren Eiseley, All the Strange Hours: The Excavation of a Life. Copyright © 1975 by Loren Eiseley. Reprinted with the permission of Charles Scribner's Sons.

THE PRICE OF SILENCE

HOW WE HEAR

1) The External Ear funnels sound to the eardrum. 2) The Middle Ear. Behind the eardrum are a chain of three small bones, the hammer, the anvil and the stirrup. When the drum receives a sound, it and these bones vibrate in harplike sequence and transmit vibrations to the inner ear. 3) In the Inner Ear are two liquid-filled spiraling canals and thousands of tiny hair cells. Science has yet to explain how these cells transform vibrations into impulses that are sent to the brain as coded messages, via the auditory nerve.

The scanning electron microscope lets scientists see the cell in a new way, in three dimension or topographically. Here, rather than look at the surface of a cell, scientists view a slice which shows the structural composition.

RESEARCH: DRF's PROGRAM

RESEARCH: DRF'S PROGRAM

Implants. Researchers discovered that infants and adults affected with severe nerve deafness may nonetheless have some hearing sensitivity left in the inner ear or the auditory nerve. This has led the DRF to fund a number of projects aimed at determining how and whether modern technology can develop an effective electronic substitute for the poorly functioning inner ear or auditory nerve.



The stirrup bone is the smallest in the human body. It is shown here on a penny, to give some indication of size. Both the penny and the bone have been enlarged.

Deafness in the Young. DRF researchers have developed a screening procedure which can be applied to large numbers of children to iden-

tify those with hearing impairments. Other DRF researchers are specialists in the way infants acquire language.

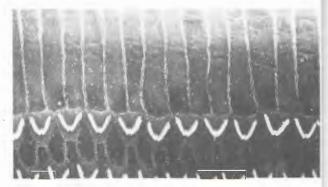
They have shown the importance of early detection of deafness and hearing loss. When no—or diminished—sound reaches the auditory nerve and the brain, the nerve pathways become weakened. Experiments have shown that in the very young the effects of sound deprivation can be offset by putting sound into the ear with hearing aids. Early training is also necessary and DRF investigators hope to find the best way to train severely affected infants and the best amplifying devices to use during their formative years.

In the Elderly. Presbycusis, from Greek words meaning old and hearing, describes hearing impairments first noticed around 60 years of age. It is a form of nerve deafness. No way is yet known to reverse hearing loss due to aging. The many DRF projects aimed at providing clues to all forms of nerve deafness should ultimately lead to more effective treatment.

Clinical Answers. The Foundation also finances projects aimed at finding ways to prevent, heal or provide effective treatment alternatives for other disorders of the hearing system. These include:

 Middle Ear Infection. Of the three million babies born this year, one million will have three or more bouts of middle ear infection before their third birthday, despite standard antibiotic treatment. In some the infection may recur again and again, which may result in learning and language difficulties because of muffled hearing. The condition can even become chronic and cause permanent hearing loss. Since it often goes undetected, DRF investigators are developing a vaccine to prevent middle ear infection.

- Meniere's Disease, which often results in hearing loss and dizziness. It can often be helped but no cure yet exists. Therefore, some DRF investigators are working to develop a more effective method of treatment.
- Tinnitus, ringing in the ears, in its severe unrelenting form seriously affects millions of Americans. It cannot be consistently stopped and, as yet, science does not even know where the ringing originates in the auditory system. The Foundation is attempting to determine its cause, a major step to effective treatment.
- Ototoxic Drugs (injurious to hearing): Some essential medications can damage the auditory system. Others which must be given to an ailing pregnant woman can destroy an unborn child's ability to hear. DRF research seeks to identify all ototoxic drugs or find safe effective medications which will not jeopardize hearing and balance.





(Top) The normal hearing organ seen with a scanning electron microscope, and (below) a hearing organ which has been damaged by exposure to loud noise. At the bottom of this picture, most outer hair cells are missing and at the top. most tufts of hair on the inner ear hair cells are deformed.

• Excessive Noise is the commonest external cause of hearing loss. Reduced hearing is not just caused by industry or war. Premature babies exposed to noise are vulnerable as are people whose resistance is lowered by illness or ototoxic medication. As part of its preventive program, the Foundation is committed to determining the exact effect of severe or continuing noise on the normal inner ear structure. □

SELECTING PROJECTS TO FINANCE

"I have decided not to apply for renewal of my DRF qrant...I have received funding ... so I do not think it would be appropriate for me to compete for 'seed money' with other applicants who are starting new projects...

"We who are engaged in otological research are most fortunate to have an organization like DRF to help us explore new ideas."

Charles W. Stockwell, Ph.D.

Associate Professor

Department of Otolaryngology
The Ohio State University

THE NATIONAL TEMPORAL BONE BANKS (NTBB)

CENTURION SUPPORT: A SPECIAL COMMITMENT

A MATTER OF TIME AND MONEY

Sooner or later research will find solutions for deafness and other hearing disabilities. Medical authorities know that. They've backed us for years.

But without your help, deafness research will be frighteningly slowed ...and the sufferings of millions extended—perhaps for generations.

Right now, the very existence of research is threatened. Government cutbacks have sharply reduced finances for research. More and more investigators with sound scientific projects have turned to the DRF, which is compelled to ask them to wait—sufficient money is not available—while millions wait with them...in silence.

The Deafness Research Foundation is a small organization with a small staff and a large commitment. We do not have the resources of many of the other major voluntary health organizations to solicit and obtain large sums of money. We merely have a tremendous job to do which affects many more people.

Won't you help put an end to the loneliness that can emotionally cripple deaf children and the silence that restricts their adult lives? To the fear that holds the elderly with hearing disabilities hostage?



Send us your tax deductible contributions. Do it soon. Do it to-day. Don't let 16 million wait in silence.



Deafness Research Foundation

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A copy of the last DRF financial report filed with the New York State Board of Social Welfare may be obtained from:

New York State Board of Social Welfare, Empire State Plaza, Albany, New York 12223, or The Deafness Research Foundation.

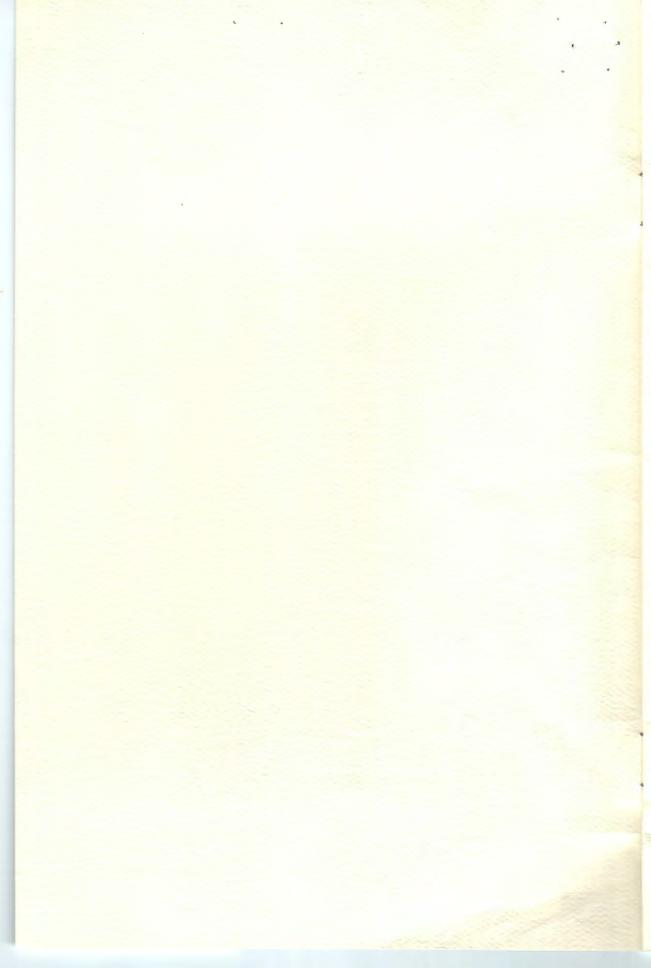


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You'll Know Why More People Can Hear

> The Deafness Research Foundation

The First 25 Years



One In Ten Americans Cannot Hear What They Should:

One Of Them Started DRF

DRF Founder, Mrs. Hobart C. Ramsey



1958

ollette Ramsey knew the dread of living with severe loss of hearing, the same loss millions of Americans knew, but few who aren't deafened can appreciate. Unlike more visible afflictions seeming more worthy, readily receiving public understanding and support, reaction to deafness was ironically silent. Doubly so, since the chances of Americans encountering some degree of deafness, in family members, friends or acquaintances, was probably greater (and is today) than for any other chronic physical affliction. While Mrs. Ramsey was told her cure awaited research.

Then a unique surgical procedure showed her first hand the power of such research – for the first time in years she could hear. She knew at once that the silence before shouldn't be forgotten. Subtle sounds thought relegated to memory returned, as she set about to help, looking through the private sector for ways to contribute and convince others to contribute so research would be stimulated...so knowledge of deafness would grow. In 1958, happy endings like hers were all too uncommon: There must be an organization changing all that.

There wasn't. There was disbelief, questioning and finally the realization that an organization had to be formed. It should raise funds from the American public, foundations and industry to attract more scientists to the field. And it would need a home – a central source to disseminate information and coordinate research. In 1958, that became the Deafness Research Foundation, with Mrs. Ramsey its Founder and first President.

Supported by experts in the field and dedicated lay community leaders, the Foundation quickly became known for its support of timely research which sought the underlying causes of deafness. That approach won endorsement from major medical societies and the involvement of prominent ear specialists remaining with DRF to this day. DRF became the national resource where research could get a start, with the "seed money" the Foundation became best known for.

Two year old Kristina, wearing a vibrotactile aid, part of the work being supported by the DRF.

(Photo Courtesy of Dr. Adele Proctor, Northeastern University)

Twenty-five years and leaps in knowledge about deafness later, DRF's various Scientific Review Committees still evaluate research grants with the same scrutiny they always did, and with the same intent...to see that the best, most promising new research be given a chance. That's why DRF is considered our country's primary catalyst for stimulating interest in and channeling funds towards ear research. Without it, who knows what would have been or would continue to be overlooked.

The list of distinguished professionals associated with DRF demonstrates their belief in the organization. Many of them – no small number of today's prominent ear investigators—owe their beginnings to the visionary funding of the DRF. "Seed money" got them started, so they continue to help.

Now... Many More People Can Hear

Why Can't Some?

The ear is divided into three basic parts—the outer, middle and inner ear—malfunctions in any of which can impair hearing, as can damage to the nervous system connecting the inner ear to the brain.

Ordinarily, sound enters the ear as waves in air through the outer ear, a cylindrical, skin-lined tube to the eardrum where transference of sound energy begins. Anything blocking that travel can diminish hearing—a bug, a leaf—or even excessive build-up of our own natural wax. Growths, tumors, swelling of the conduit lining or adjacent tissues do the same. In all cases, their surgical removal restores hearing. All such obstructions have been investigated by DRF.

But that passage may be partially or completely closed at birth. These "congenital" irregularities also require surgery—a new tube must be constructed—to restore hearing, that is, if what lies beyond, functions normally.

Early DRF funding found a better way to create new openings in deformed ears—new surgical techniques were developed. Hearing could be restored for some, but for others the outer deformities were repeated within, where middle and inner ear parts (or both) were also malformed. But why sometimes a single part instead of multiple parts? DRF's founding principles called again—the answers lie deeper in basic research.

Before birth, primitive ear parts migrate together to form a final whole: interruptions in that travel make a defective ear at birth.

RF was an early supporter (and continues to support) research on the unborn, studies reaching far beyond medicine per se, to embryology (the development of fetal life) and genetics, (how genes and their information are passed along) to determine if such defects are inherited. Some are.

Now much more is known about hereditary patterns of deafness: Parents from high incidence backgrounds can be more intelligently counseled of risks to their children, who can be screened for hearing loss much earlier in infancy—a time DRF helped prove critically important to normal brain and auditory development. Before that was known, many children suffered permanent intellectual and emotional deficiencies simply because sound wasn't reaching their brain and nobody knew it. Other children born deaf were found victims of drugs or of disease their mothers had during pregnancy.

But such understanding could never have occurred without much closer study of the individual parts of the ear—analysis of temporal bones (inner ear structures) from individuals with ear disorders. Because that was impossible in the living, temporal bones from the deceased deaf had to be obtained. Before 1960 there was no organized source of such bones, so DRF formed one—The National Temporal Bone Banks Program.

Now, virtually all of us know the danger of German measles (Rubella) on the unborn child, dangers so broadsweeping to warrant national inoculation against the disease.



Rubella vaccine now prevents what was once one of the major causes of congenital deafness—today many children are still born deaf as a result of known, but as yet, unpreventable causes.

But few know that data assembled by DRF's National Temporal Bone Banks Program—made the crucial link between Rubella and other congenital ear defects.

As a consequence, countless thousands of children have been spared a life with debilitating sensory hearing loss, and many parents have been spared the pain of that tragedy.

Beyond such an extraordinary beginning, DRF's Temporal Bone Banks Program became central to virtually every aspect of ear research to follow: Many professionals consider it the single most significant contribution to otologic research – ever! It has since grown to share resources with the government and education. No one could have fully envisioned all the needs the Temporal Bone Banks Program would fulfill —providing a means to study the inner ear.

The Middle Ear

Julius Lempert—a great innovator and a great teacher, who, through his pioneering efforts, was responsible for turning otology from its preoccupation with infection to a surgical approach to conductive deafness.



ithin our temporal bones is an air-filled chamber, essentially a'cul de sac'communicating to our nose and throat (and thus indirectly to the air outside) via the eustachian tube. This area contains the parts of the middle ear. How they interact with the air we breathe has greatly to do with their condition and ultimately our hearing.

Without knowing it we have all felt the normal action of the eustachian tube as pressure changes (such as at high altitudes in an airplane) create discomfort in our ears, when after a swallow, a yawn or sometimes a pop, the tube opens and a new pressure balance is achieved with relief.

There is no such connection in air between the outer and middle ears because they are separated by the eardrum, yet sound gets through. The vibrating eardrum moves a tiny adjacent bone, the malleus, the first of three connecting bones called the ossicles—the three tiniest bones in the body. The malleus then moves the second ossicle, the incus, in turn moving a third, the stapes, sending the energy of sound on into the inner ear...from waves in air to physical movement of minute body parts.

Imagine interference with any part of that chain of events, from perforations in the eardrum, to fibers affecting its resiliency (it wouldn't vibrate as well), to alterations in the tiny ear bones, they could break, degenerate, stop moving—and you can begin to imagine how sound may not make it through the middle ear. That is conductive deafness.

Conductive Deafness

When DRF's founder, Collette Ramsey's hearing was restored, it was through a revolutionary surgical procedure known as one stage fenestration. Introduced by Dr. Julius Lempert, fenestration became a landmark, for it was the first time otology ventured from involvement with infection to actual surgical treatment of deafness. Dr. Lempert's procedure made an opening in the external semi-circular canal near the fixed oval window leading to the inner ear, thus allowing the transmission of sound vibrations to the fluids of the inner ear.

DRF has since supported and refined many related more advanced surgical techniques in ways as far ranging as studies of materials replacing middle ear parts—metals, plastics, epoxies and others—to adhesives used in that reconstruction and deeper into the under-lying medical issues of wound repair, tissue rejection and tolerance of foreign materials—the very basics of the healing process. Overall a great deal can now be done to repair conduction deafness.

That's wonderful, but it would be even more wonderful to prevent conduction deafness from occurring to begin with. Thanks to research, that is now the case with a number of other middle ear diseases where damage can now be diminished or avoided.

Otitis Media

DRF funding has prevented a great deal of hearing loss through progress against otitis media, inflammation of the middle ear. Although it can affect patients of all ages, the disease occurs overwhelmingly in children under 12 years. It may or may not be caused by bacteria, a distinction that roughly divides it into two forms of the disease with shorter and longer bouts, although there is considerable overlap between the two. Depending on the circumstances, both forms can permanently damage middle ear parts.

The shorter bacterial or acute form is often accompanied by redness, swelling, heat and a thickened fluid production in the middle ear. If the eustachian tube stavs closed through such bouts. trapped fluid can build enough pressure to cause severe pain. These are the classic earaches of childhood. At their worst, they can even rupture the eardrum. But serious as all that sounds, even more serious damage results from recurrent episodes of such infections—erosion of ossicles may begin, scar tissue may form—and unfortunately the child who gets the disease once is more likely to get it again. And 15% of children three years or under can experience enough damage from recurrent cases of otitis media to retard the development of speech and language.



The internationally acclaimed Gallaudet Dance Company, all of whose members are either profoundly deaf or hearing impaired.

Through the years, DRF has worked to bring otitis media under control-microbiologists have isolated and studied the causative organisms. Pharmacologists have developed new drugs, new antibiotics, that are more effective specifically for the middle ear. They rapidly control many cases of otitis media. Along with them, the seriousness of the disease has become better understood and tests to detect its permanent damage more sophisticated, so that damage from this "half" of the disease has been dramatically minimized.

Ironically, some of the very antibiotics that help control otitis media can themselves damage hearing. These ototoxic drugs are monitored for safety by DRF sponsored investigators to make sure what in one way helps isn't damaging in another.

But treatment of the longer term form of the disease is more complicated. This chronic otitis media often has more subtle signs and symptoms, among them a thinner fluid production. It is not controlled by antibiotics, and it has called on every level of basic and clinical science for answers to its cause. Is the structure of the eustachian tube dif-

ferent in susceptible individuals, does it open and close as effectively, is its physiology different, does it interact with its micro-environment the same, secrete the same or different fluids? Can pressure alterations within the middle ear alone effect fluid secretion by middle ear linings, and is the eustachian tube modified by such pressure changes? Which came first, the "chicken or the egg"?

These are but a few examples of questions DRF research has asked, and they only scratch the surface. After years, the immune system of individuals with chronic otitis media is now being considered: maybe chronic otitis media is an autoimmune phenomena, literally an immunologic response against oneself? Maybe it is an allergy? The exact answers haven't been found, but again it's clear, if they're to be found, it will be through basic research.

Otosclerosis

Usually with increasing age (although a definite genetic component is involved as well) the ossicles and joints between them begin to degenerate, or both structures are encroached upon by an abnormal growth of adjacent cells. This is otosclerosis, which obviously hampers movement of the middle ear parts and thus impairs hearing.

DRF funding has touched virtually every aspect of this disease...the sorts of changes that occur in degenerating bones (how the environment of the ear affects minerals in bone) and why the miniature joints lose their flexibility, which took research into the biochemistry of joint materials.

There may also be complex interrelationships between otitis media and otosclerosis – repeated early bouts of OM may accelerate the degenerative process in susceptible individuals; but the exact nature of the connections remain unclear as research to connect them continues.

The same is true of cholesteatoma, growths that are abnormal extensions of the middle ear lining. They too may be encouraged by otitis media. They too cause resorption of bone and damage the middle ear, changing its normal delicate lining to a tougher one, like an outside skin with a protective protein called keratin, the subject of DRF supported studies. But until the exact causes are known, DRF backed research has developed surgical techniques to remove these growths so hearing won't be impaired.

The Inner Ear: Sensorineural Hearing Loss

Tope is not enough. While DRF remains committed to conquering middle ear diseases and preventing their damage, it has always known where research had to go to help the majority of deaf Americans—into the inner ear to grapple with errors in the recording and transmission of sound, where for many music and voices never make it over myriad nerves converging on the brain. That is sensorineural hearing loss.

Short years ago the inner ear was a vast unknown, the fear of which prevented researchers from plunging on. So DRF gave many a push, encouraging emerging otologists geared to conduction deafness to study the complexities of the inner ear. And bit by bit the mystery is being unraveled.

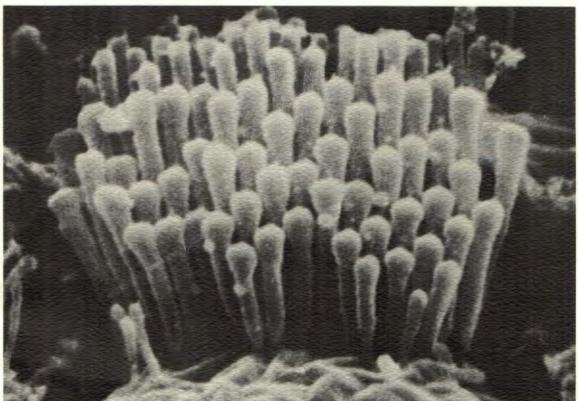
Deeper in our skull lies a masterpiece of design, fluid filled labyrinths, passages through our temporal bones where sensitive linings bathed by liquid register turns of our head, move fluids which affect our hearing, our balance, our orientation in space. This is the inner ear.

Picture a tiny finger delicately touching water, picture ripples moving from it and you would see a crude analogy to the stapes bone sending sound throughout the inner ear, as "waves" bending some 40,000 tiny hairs in their wake. The movement of those hairs registers sound.

The micro-structure of inner ear hair cells was not known until DRF backed research began unfolding their picture from countless microthin sections (from the National Temporal Bone Banks Program) seen for the first time through an electron microscope. DRF was a pioneer in funding research that looked down the spiral chamber of the cochlea (an inner ear passage named for its resemblance to a snail shell) to discover importance in the position of the hairs: At one end of the cochlea they were excited by low sounds, at the other end by high ones, and their membrane base was found not a passive anchor, but an active part of a highly organized hook-up with nerves emanating from beneath, where charges went on like electricity along a wire. And a literal explosion of inner ear research began.

Knowing the location of these hair cells eventually helped separate different types of deafness – damage to or loss of hairs in certain sections of the cochlea produced particular sorts of deafness.

Electron microscopic picture of a single hair cell. In humans the inner ear contains 40,000 such hair cells.



o Courtesy of Dr. James Saunders, University of Pennsylvania

When DRF began, tests as crude as ringing bells beside a baby's head were standard.

Sound Deprivation

n the developing auditory system it was found that too little sound, particularly in children under three years of age, had a permanently damaging effect, but if hearing loss were caught early enough, such deficiencies could actually be diminished. Without sound stimulation during the years when a child's brain forms, hearing and the senses beyond are permanently dwarfed. These children never reached their full potential and by the time hearing was found the culprit, it was too late to help. Now, computers and electronics probe the brain and tell clearly the type and location of certain forms of deafness. Then therapy, including sound amplification, can be developed to help many of these children through this critical phase of development - their only chance to get a good start in life.

Noise Damage

As bad as too little sound is too much noise—it weakens and causes inner ear hairs to soften and stop responding to vibrations, and with that loss of function goes hearing. When DRF began, experts debated about whether excessive noise caused hearing impairment. Now noise damage can be measured and DRF researchers are often consulted by government and industry for medical opinion on the impact of ear damage due to excessive noise. But there are other ways hair cells are damaged from the normal toll of life. Aging causes an inner ear hearing loss in some individuals known as...

Presbycusis

Bit by bit, hair cells function less effectively during the process of aging, when many try hearing aids for relief. DRF researchers have been a part of improving hearing aids through their transition from the original large and cumbersome units to the tiny, transistorized units of much greater clarity today. But even with these improvements, hearing aids do not help everyone, a fact which used to be far more frustrating to patients who didn't know why.



DRF supported scientists have determined that with some acoustic reinforcement children with as little as ten percent hearing ability can actually improve in sensitivity.

Basic research has greatly improved how patients adjust to hearing aids, because it can explain their limitations and thus help eliminate false hopes. For instance, discrimination of speech, now known to be quite separate from the ability to hear or not hear sound as speech, was found rooted in some hair cells more than others. In practical terms this knowledge linked with new diagnostic technology can give intelligent predictions of what life with a hearing aid might be like.

So basic research has become a powerful tool for professionals guiding the hearing impaired. We all conjure fears far beyond our symptoms until someone helps us understand exactly what is occurring. This appears particularly true in counseling the deaf, because progressive hearing loss is also a step by step isolation from one's fellow man, often reacted to with alienation towards the world at large. Even a minimal loss of hearing can dramatically affect personality, but such individuals can be drawn out with encouragement and understanding.

Photo Courtesy of Lexington School for the Deaf)

Cochlear Implants

If none of the aforementioned parts of the ear work and nerves beyond them do, then it has long been obvious that getting "sound" onto those nerves—a microphone instead of an "ear"—could in theory be the solution. As is often the case, life in theory can be far from fact.

That is the state of cochlear implants today: These instruments placed in the inner ear receive sound and send it onto nerves beyond damaged ear parts so sound as electrical impulses can go on—to the brain, but as it turns out, what the brain receives is very different from normal hearing. There is little discrimination of speech, no marked distinctions in sound, just a form of "stimulation" reaching the brain.

In the case of a child or the profoundly deaf, this may in fact have impact; at least it is some connection with the outside world. But beyond breaking such isolation, the role of cochlear implants is at present limited.

That is not to say the principle is dubious, but only that a tremendous amount more research is required for implants to work effectively. DRF's position is to take the lead, to go deeper again and encourage researchers who may be capable of deciphering the extraordinarily complicated code that the thousands of tiny hairs orchestrate to make sound as we know it. Often the more we learn, the more we need to know: The research results to come will be vast.

Meniere's disease

Another perplexing inner ear disease research is groping to solve is Meniere's disease where fluid pressure builds in the inner ear. Victims may have episodic dizziness, pressure in the ear and fluctuating hearing loss.

DRF research has studied the chemical composition of inner ear fluid, questioned its origins—is it secreted as a new substance or filtered from the blood—and why could it change with disease? Somehow this is all related to the increased fluid that distends inner ear structures—stretching their capacity to contain and drain it. And that can eventually cause deafness.

There are surgical procedures to drain the fluid of Meniere's disease, but in some cases they can cause more hearing loss than the original condition. And Meniere's disease can come and go—the patient who has it one year may not have it the next.

So basic research continues, without great show, looking for the "quiet" breakthroughs that will ultimately cure and prevent deafness.

By the time they are 65, one of six Americans will have significant hearing loss. These senior citizen's impairments are serious enough to require manual communication.



How You Can Help

s encouraging as all this progress has been in the last 25 years, when middle ear problems have been better treated and understood, when, through basic research, knowledge of the inner ear has dramatically increased—a fundamental tragedy remains. There are still two million profoundly deaf Americans and fourteen million others who suffer from serious hearing impairments. Of these sixteen million, one million are children.

If breakthrough research in the last frontiers of deafness is to occur, it will come from the efforts of pioneers. Now, as when DRF began, these scientists are often the least entrenched in standard patterns of thought—they offer unique perspectives and new hope. They are the scientists whose research the DRF is dedicated to support.

The Foundation's philosophy is a hopeful one—its history important in otologic research. To this day, every publicly donated dollar goes directly to research because of the admirable goal of a dedicated group of ear professionals—the Centurions of the DRF. Their yearly contributions, for the most part, underwrite the fundraising and operating costs of the Foundation.

Twenty-five years ago the DRF was begun by one dedicated and determined individual to fill a need. During that time, many questions have been answered, but many more remain.

Countless individuals have been helped and many more have been spared the isolating affliction of deafness through the pioneering efforts of the Deafness Research Foundation. But we must meet the increasing research challenge that lies ahead during our next 25 years.

We hope you will join the Founder's spirit in dedicating your support toward alleviating the nation's most prevalent chronic affliction, loss of hearing.





Deafness Research Foundation 55 EAST 34 STREET/NEW YORK, NY 10016 212/684-6556 (TTY) 212/684-6559

THE Dearness Research Foundation

SPRING 1984 RECEIVER

55 E. 34th Street, New York, N.Y. 10016



Guests enjoy Lincoln Center's Grand Promonade before DRF's benefit concert,

LINCOLN CENTER GALA KICKS OFF '84

The Pittsburgh Symphony, under the direction of Andre Previn, performed before a sellout crowd at the DRF's benefit gala, "Listen For Those Who Can't," held on Sunday, October 2nd, at 3:00 pm in Lincoln Center's Avery Fisher Hall.

The event was an unqualified success, which netted \$250,000 and set the stage for the Foundation to expand its research grants program for 1984. Based on proceeds of the concert, this year 62 research projects around the country will be funded, up from 45 in 1983. (A detailed description of this year's grants will appear in the next issue.)

After intermission, DRF Chairman George L. Ball, President and CEO of Prudential-Bache Securities, presented a bronze sculpture of the inner ear to DRF Founder Collette Ramsey in recognition of her founding the DRF 25 years ago.

Champagne was served to all the guests before the performance and approximately 1000 guests holding patron tickets enjoyed the elegant post-concert buffet in the Grand Promenade.

The Foundation is deeply grateful to all those who lent their support and made the event such a resounding success.

"Listen For Those Who Can't" was the culmination of a very successful year for the Foundation, with increased contributions and significant expansion in several areas of public visibility. Direct contributions totaled \$464,368 for 1983, which represents a 20% increase over the previous year, excluding Centurion income, which also showed a substantial increase for the year.

(continued on page 2)

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DRF Chairman George L. Ball, President & CEO of Prudential-Bache Securities, presenting DRF Founder Mrs. Hobart C. Ramsey with a bronze sculpture of the inner ear at "Listen For Those Who Can't."

Lincoln Center Gala continued from page 1

Centurion Generosity

Centurions, the professionals whose annual dues enable publicly contributed dollars to go to the research grants program, responded generously to several special Silver Anniversary appeals and added 300 new members to the roster. This added support increased Centurion income by \$25,000, for a total of \$188,000 for the year. In 1984, a stepped-up membership campaign is planned and Centurion dues have been increased, a move which is expected to substantially raise the level of Centurion support to the Foundation in 1984.

New England Chapter

The New England Chapter of the DRF did their usual fine job of fund raising for the Foundation and contributed \$20,000 towards the research grants program. Special thanks go to chapter President Mrs. Robert C. Seamans, and Chairperson Mrs. Judith Chasin.

DRFA Funds a Grant

Every year since its founding in 1978, the DRF Auxiliary (DRFA), has made a substantial donation to the Foundation and this year is no exception. Under the leadership of President Arlene Keim, \$10,000 was donated to the Foundation by this group of Centurion wives and other concerned lay people.

Visibility Boosted

Directly as a result of the efforts of DRF Board member John Morrissey, an unprecedented number of public service announcements in the form of print, broadcast and television spots found their way to the media this year. In fact, the estimated value of air time and advertising space made available to the Foundation amounted to \$1,287,000. Print ads appeared in Vogue, Newsweek, Time, Science Digest and National Geographic, among others.

Again this year, direct mail has been a successful part of the Foundation's fund raising and visibility program. Since 1982 the DRF has mailed to 350,000 households, with a better than 1% response rate and an approximate \$20 average gift. For 1984, the DRF will reach out to one million households and hopes to gain another 10,000 individual contributors.

Executive Director's Message



Albert J. Levine

With the new year, the DRF begins its second quarter century. What was ably begun 25 years ago by Mrs. Hobart C. Ramsey, has provided a firm foundation for what remains to be accomplished. Twenty-five years ago the DRF was "one-of-a-kind"—an organization dedicated to research into the causes and cures for all types of hearing disorders. In single-minded pursuit of that goal, the DRF has grown to become the largest competitive private source of otologic research funds in the country, and the Foundation is still one-of-akind-the country's only national health organization devoted exclusively to raising funds for ear research.

Millions of dollars, painstaking

work and hundreds of experiments have produced breakthroughs in the medical treatment of virtually all middle ear disorders. Even more importantly, knowledge has grown about the inner ear and its workings, the harmful effects of noise on that structure, and the suspected toxic effects on the inner ear of otherwise therapeutic drugs.

Still, it is sobering to consider what remains to be learned. The inner ear, with its enormous complexity, has yielded its secrets grudgingly. Nonetheless, progress is being made.

The research results to come will be vast as the last frontiers of deafness are explored. Now, as then, the DRF will continue to support pioneering researchers whose visionary work opens new doors and offers renewed hope.

As indispensable now as in the early days of the Foundation are the Centurions of the DRF, a group of dedicated ear-care professionals whose annual goal is to cover the operating costs of the Foundation. Because of their support, the DRF has the distinction of being one of the very few national health agencies to which every publicly donated dollar goes entirely to research.

So, as we redouble our efforts for the future, our mandate is clear—to build upon the work begun 25 years ago, so that the millions of hearing impaired Americans who wait for answers will know the miracle of hearing.

CFC-A New Venture for the DRF

This past year saw the acceptance of the Foundation as one of the 42 national voluntary health organizations selected to participate in the Combined Federal Campaign (CFC). The CFC functions in a manner similar to United Way, soliciting contributions from federal employees both nationally and abroad. Over four and one-half million federal employees will be appealed to on behalf of this campaign. It remains to be seen in the coming year exactly how many federal employees will designate the DRF as their charity of choice, but the Foundation is optimistic that inclusion in the CFC will raise both funds and visibility in the coming year.

(A 1983 financial statement of the Foundation can be found on page 8.)



Centurions Honor DRF Founder Mrs. Hobart C. Ramsey



Mrs. Ramsey being presented with the Centurion honor roll of endowment fund contributors by Howard House, M.D.

In recognition of the establishment of a living endowment fund in honor of DRF's Founder, Mrs. Hobart C. Ramsey, the Centurions of the DRF, at its annual meeting in October, presented Mrs. Ramsey with a scroll listing the names of those Centurions who had already contributed to the fund.

The living endowment fund was begun in recognition and appreciation of Mrs. Ramsey's founding the DRF 25 years ago. The goal of the living endowment is to raise \$100,000 so that the income will provide sufficient funds to support a research project each year in Mrs. Ramsey's name—during her lifetime and thereafter. The Centurions have made a substantial start in the drive and the Foundation is appealing to Mrs. Ramsey's good friends and admirers to add their support as well.

In accepting the scroll, presented by Howard House, M.D., Mrs. Ramsey expressed her gratitude to the Centurions for initiating the effort and cited the special significance she felt personally for their action to honor her.

Following is a list of Centurions who generously contributed to the Collette Ramsey living endowment in 1983:

Endowment Fund Contributors

Nathan Adelman, M.D. Thomas A. Akin, M.D. Bobby Ray Alford, M.D. Beverly W. Armstrong, M.D. H.A. Ted Bailey, Jr., M.D. Pat A. Barelli, M.D. Stuart Barton, M.D. William L. Barton, M.D. Richard J. Bellucci, M.D. Thomas J. Benda, M.D. Cyrus Blanchard, M.D. Stanley M. Blaugrund, M.D. Charles D. Bluestone, M.D. Roger Boles, M.D. Wesley H. Bradley, M.D. Ralph J. Caparosa, M.D. Paul L. Chodosh, M.D. Jack D. Clemis, M.D. James M. Cole, M.D. John Cole, Jr., M.D. Richard J. Cummings, M.D. Edwin P. Dierdorff, M.D. Hamilton S. Dixon, M.D. Gerald M. English, M.D. J. Brown Farrior, M.D. Nelson Fernandez-Blasini, M.D. Newton D. Fischer, M.D. Elio J. Fornatto, M.D. A. Leo Franklin, M.D. John P. Frazer, M.D. Joseph Freman, M.D. John H. Fritsch, M.D. Ormond Frost, M.D. Richard R. Gacek, M.D.

Gale Gardner, M.D. Tawfik F. Girgis, M.D. Michael E. Glasscock, III, M.D. Loring W. Pratt, M.D. Victor Goodhill, M.D. Richard J. Grayson, M.D. Cecil W.J. Hart, M.D. Del L. Hawk, M.D. J.V.D. Hough, M.D. Howard P. House, M.D. A. Paul Keller, Jr., M.D. Frederick N. Klippert, M.D. Clair M. Kos, M.D. Watson B. Larkin, M.D. Francis E. LeJeune, Jr., M.D. Albert J. Levine Eusebio G. Lim, M.D. David J. Lim, M.D. Gerson Lowenthal, M.D. Howard W. Lowery, M.D. Brian F. McCabe, M.D. T. Manford McGee, M.D. James W. McLaurin, M.D. Charles S. Meinstein, M.D. Cary N. Moon, M.D. William C. Morgan, Jr., M.D. Toby S. Morgan, M.D. John Gail Neely, M.D. Patrick J. Noonan, M.D. John G. O'Hurley, M.D. Robert H. Ossoff, M.D. Lup Quon Pang, M.D. Michael M. Paparella, M.D. James J. Pappas, M.D. Simon C. Parisier, M.D.

Peter N. Pastore, M.D. Walter A. Petryshyn, M.D. Charles D. Prewitt, M.D. G. O'Neil Proud, M.D. Mendell Robinson, M.D. Harry Rosenwasser, M.D. Richard L. Ruggles, M.D. Allan A. Scheer, M.D. Harold F. Schuknecht, M.D. George E. Shambaugh, Jr., M.D. Edward F. Shaver, Jr., M.D. John J. Shea, M.D. James L. Sheehy, M.D. Roger A. Simpson, M.D. Thomas Timothy Smith, M.D. Howard W. Smith, M.D. Francis A. Sooy, M.D. James T. Spencer, M.D. Lloyd A. Storrs, M.D. J. Brantley Sydnor, M.D. Harold G. Tabb, M.D. Arthur T. Toole, III, M.D. Enrique A. Vicens, M.D. Richard L. Voorhees, M.D. Peter A. Wallenborn, Jr., M.D. Paul H. Ward, M.D. Roger E. Wehrs, M.D. Wendell A. Weller, M.D. George H. Williams, M.D. Eiji Yanagisawa, M.D. C. Dwight Yates, M.D. Harvey Yeager, M.D.

Gold Lapel Pin for Sale by Centurions

A limited supply of this handsome cochlea-shaped lapel pin/tie tack (see picture) in 14-karat gold is now being offered by the Centurions of the DRF for \$150 each.

Measuring slightly over 1/2" in height, the three-dimensional lapel pin is an artist's rendition of the intricate convolutions of the inner ear. Previously offered at \$300 each, the new price reflects the current lower price of gold. Proceeds from the sale of these pins go to the Centurions' fund, which substantially supports the operations of the Deafness Research Foundation.

Orders can be placed by contacting Sally Strickler, Associate Director of Development, at DRF headquarters in New York.



Modern Hearing Aids: Improved Fit and Technology

In the past five years, hearing aid technology has improved markedly, so that hearing aid users who have not recently visited an ear specialist or an audiologist may not be aware of what is currently available. President Reagan's "going public" with his hearing problem and using an aid has brought hearing impairment to the public's attention and has prompted many inquiries as to what prostheses are now available on the market.

Today's hearing aids are more sophisticated instruments with increased versatility in design and function and many hearing problems not medically or surgically correctible can be substantially improved with amplification. In addition, evaluation procedures which are used to determine the correct hearing aid for a specific hearing loss have improved within the past five years.

The following are examples of how modern hearing instrumentation has been developed for the benefit of the hearing impaired.

Selective Amplification

Hearing losses are like fingerprints, no two are quite alike. Some people suffer from an inability to hear high-pitched sounds, with their low-pitched hearing ability normal or minimally impaired. Others have the opposite problem; a loss of hearing for low-pitched sounds with better or normal high-pitched hearing. Still others have the same amount of hearing impairment for all sounds.



Each type of hearing impairment requires a different hearing aid response, and the degree of hearing loss and the cause must also be considered when selecting hearing aid parameters. A large variety of hearing aid performance features are available today and they have been designed to try to accommodate the variety of hearing loss characteristics helped by amplification.

Thus, "selective amplification," contoured to accommodate the characteristics of a given hearing loss, is rapidly becoming a standard hearing aid feature.

Special Needs

Most hearing impairments that require amplification are due to a disturbance in the inner-ear organ called the cochlea. This type of sensorineural hearing loss has as its unique characteristic a loss of hearing for moderately loud sounds, but lesser impairment for loud sounds. This phenomenon is called recruitment. It means that as sounds become louder, less and less power from the hearing aid is required in order for the individual to perceive sounds "normally."

A hearing aid which amplifies the same amount for any loudness level entering the aid would not be appropriate for this type of hearing problem. Fortunately, today many hearing aids can be equipped with an "automatic volume control" which monitors the level of sound coming into the aid and adjusts the hearing aid's amplifying power "automatically" to maintain maximum user comfort for a variety of listening situations.

Some hearing aids today come equipped with directional microphones. These microphones are designed to pick up sounds coming straight at the hearing aid louder than sounds coming from any other direction. When confronted with a noisy environment, the user can find a directional microphone of great value in overcoming the interference of noise coming from the sides or behind.

Some people have one ear which, because of the degree or type of hearing impairment, cannot benefit from a hearing aid on that ear. Yet, the sounds that would usually be heard by that ear are important and should not be missed. In this case, some people can benefit from the use of a CROS hearing aid. This special type of aid works by placing a microphone at the "dead ear" side, but feeding the information to the better ear where it can be heard and used effectively. Thus the

(continued on page 9)

Beethoven's Deafness—A Curse, or a Boon?

Beethoven's Seventh Symphony was chosen for DRF's October 2nd benefit concert, "Listen For Those Who Can't," because it was written when the composer was severely hearing impaired. Following is a brief discussion of Beethoven's progressive hearing loss and how it affected his work, prepared by DRF Board Associate Director, Marion Downs.

Beethoven's deafness was responsible for the despair, frustration and hostility that plagued him during his most productive years. Yet it is possible that he would never have composed his magnificent later symphonies, piano sonatas and quartets had it not been for the deafness that brought him such personal misery.

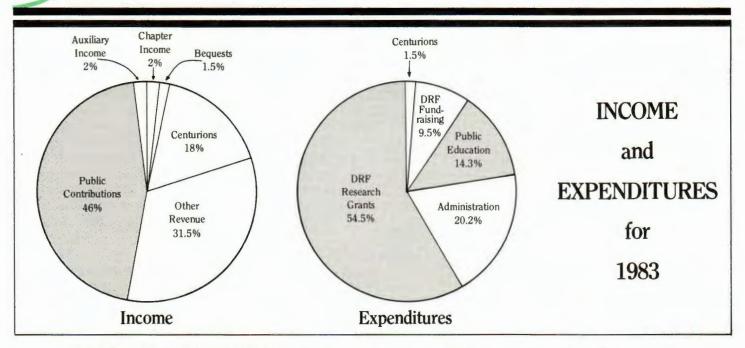
When he was only 25, Beethoven noted that he had a bothersome hear-(continued on page 10)



Ludwig Van Beethoven

THE DEAFNESS RESEARCH FOUNDATION

annual Report



DEAFNESS RESEARCH FOUNDATION - Annual Research Grants to Institutions

	1984 Grants	Total Granted Through 1984		1984 Grants	Total Granted Through 1984
CALIFORNIA (96 grants, \$735,880)	•	4 10.000	FLORIDA (10 grants, \$86,551)	0.085	F7 445
California Institute of Technology (2) Cedars of Lebanon Hospital (2)	\$ _	\$ 10,660 15,932	University of Florida College of Med. (7) University of Miami (3)	9,875	57,447 29,104
	_	3,840			29,104
Children's Hospital Society of L.A. (1) Ear Research Institute (29)	_	139,853	GEORGIA (5 grants, \$35,528) Emory University Medical School (5)	_	35.528
Franklin Hospital—University of					00,020
California, San Francisco (1)	_	4,980	HAWAII (3 grants, \$29,500)	10 000	20 500
Hope for Hearing Research Foundation		44.000	University of Hawaii (3)	10,000	29,500
(UCLA) (1)	_	10,000	ILLINOIS (32 grants, \$353,506)		
Huntington Memorial Hospital (1)		600	Northwestern University Med. School (10)	_	76,904
Stanford University (4)	10,000	40,000	Rush-Presbyterian-St. Luke's Med. Ctr. (1)	_	8,800
University of California, Berkeley (2)	_	20,00	Southern Illinois University (8)	39,989	79,857
University of California, Davis (5)	10,000	49,922	University of Chicago (12)	_	177,945
University of California, Irvine (3)	_	27,839	University of Illinois at Chicago (1)	10,000	10,000
University of California, Los Angeles (33)	19,998	283,625	INDIANA (5 grants, \$43,521)		
University of California Medical Center,		10.000	Purdue University (1)	_	9.946
San Diego (5)	19,975	49,975	University of Indiana (4)	9,240	33,575
University of California, San Francisco (7)	10,000	77,954		3,310	00,010
COLORADO (16 grants, \$165,601)			IOWA (26 grants, \$239,308)	80 000	000 000
University of Colorado Sch. of Med. (16)	_	165,601	University of Iowa (26)	30,000	239,308
CONNECTICUT (15 grants, \$143,599)			KANSAS (11 grants, \$92,177)		
University of Connecticut Health Center (3)	_	30,000	Institute of Logopedics, Wichita (1)	10,000	10,000
Yale University (12)	_	113,599	University of Kansas (10)	_	82,177
DISTRICT OF COLUMBIA (1 grant, \$2,284)			LOUISIANA (26 grants, \$277,527)		
Gallaudet College (1)	_	2,284	LSU Medical Center (17)	_	216,497
		_,_0	Tulane University (9)	_	61,030

	1984 Grants	Total Granted Through 1984		1984 Grants	Total Granted Through 1984
MARYLAND (11 grants, \$79,590) Johns Hopkins University Sch. of Med. (9) John F. Kennedy Institute for	_	59,600	OHIO (43 grants, \$413,956) Case Western Reserve Sch. of Med. (3) The Christ, Good Samaritan &	_	38,821
Handicapped Children (1)	_	9,990	University Hospitals, U. of Cin. (1)	9,758	9,758
University of Maryland Sch. of Med. (1)	10,000	10,000	Cleveland Clinic Foundation (1)	9,685	9,685
MASSACHUSETTS (43 grants, \$383,458)			Ohio State University College of Med. (35)	40,000	329,284
Beth Israel Hospital (3)	_	23,692	University of Akron (2) University of Cincinnati (1)	_	20,000 6,408
Boston State Hospital (2)	10.000	20,000			0,400
Boston University (1) Harvard Medical School (8)	10,000	10,000 72,473	OKLAHOMA (3 grants, \$17,413) University of Oklahoma		
Massachusetts Eye & Ear Infirmary (15)	_	122,293	Health Sciences Ctr. (3)	10,000	17,413
New England Medical Center Hospitals (1)	_	10,000	OREGON (15 grants, \$118,646)	10,000	11,110
Northeastern University (2)	10,000	20,000	Oregon Health Sciences University (2)	19,965	19,965
Tufts University School of Medicine (2)	_	20,000	University of Oregon Medical School (13)	-	98,681
University of Massachusetts Med. Ctr. (9)	10,000	85,000	PENNSYLVANIA (50 grants, \$427,967)		
MICHIGAN (35 grants, \$291,514)			Carnegie-Mellon University (3)	_	29,824
Henry Ford Hospital (4)	-	24,904	Children's Hospital of Philadelphia (1)	_	8,899
University of Michigan, Kresge Hearing	00.000	20,000	Eye and Ear Hospital, Pittsburgh (10)	9,780	97,665
Research Institute (2)	20,000	20,000	Thomas Jefferson Medical School (12)	_	83,712
University of Michigan Medical School (19) Wayne State University Sch. of Med. (10)	_	156,959 89,651	Pennsylvania State University-	10.000	
		03,031	Milton S. Hershey Medical Center (4)	10,000	40,000
MINNESOTA (35 grants, \$247,864)			Presbyterian Hospital-University of PA Medical Center (4)		27,406
American Academy of Ophthalmology and Otolaryngology			Temple University Health Sciences Ctr. (7)	_	51,565
(Subcommittee on Noise) (9)	_	33,000	University of Pennsylvania Med. Sch. (9)		88,896
St. Joseph's Hospital (1)	_	5,800	RHODE ISLAND (2 grants, \$19,795)		
University of Minnesota Med. Sch. (25)	29,922	209,064	Brown University (2)	_	19,795
MISSOURI (20 grants, \$197,204)			SOUTH CAROLINA (5 grants, \$31,681)		
Central Institute for the Deaf (1)	7,837	7,837	University of South Carolina (5)	8,124	31,681
Jewish Hospital of St. Louis (5)	_	50,000	TENNESSEE (13 grants, \$109,418)	-,	
Washington University Sch. of Med. (14)	10,000	139,367	East Tennessee State University (2)	-	19,900
NEBRASKA (9 grants, \$65,529)	0.000	20.001	University of Tennessee (8)	10,000	62,620
Creighton University Sch. of Med. (3)	9,790	29,381	Vanderbilt University Sch. of Med. (3)	_	26,898
Father Flanagan's Boys Home, Omaha (1) Lincoln Medical Research Foundation (3)	10,000	10,000 9,860	TEXAS (58 grants, \$431,263)		
University of Nebraska Sch. of Med. (2)	_	16,288	Baylor College of Medicine (24)	9,900	186,910
NEW JERSEY (4 grants, \$30,120)			Callier Hearing & Speech Center (6)	-	3,000
Mountainside Hospital (3)	_	21,000	Methodist Hospital (10)	_	74,868
Princeton University (1)	_	9,120	University of Texas Health Sciences Center, San Antonio (8)	10,000	72,898
NEW YORK (107 grants, \$851,179)			University of Texas Medical Branch,	10,000	12,030
Albert Einstein College of Medicine (6)	-	60,000	Galveston (7)	8,048	64,302
Albany Medical College (8)		73,750	Univ. of Texas, Southwestern Med. Sch. (3)	_	29,285
Clarkson College of Technology (1)	9,451	9,451	UTAH (10 grants, \$101,000)		
Columbia University College of	10.000	100 001	University of Utah (10)		101,000
Physicians & Surgeons (15) Cornell University College of Vet. Med. (1)	10,000	102,201 9,950	VERMONT (1 grant, \$3,881)		
Lempert Institute of Otology (1)	_	5,000	University of Vermont (1)		3,881
Manhattan Eye, Ear and Throat Hosp. (10)	_	72,541	VIRGINIA (5 grants, \$45,000)		
Mary Imogene Bassett Hospital (1)	_	10,000	University of Virginia (5)	10,000	45,000
Mt. Sinai School of Medicine (12)	_	95,955	WASHINGTON (23 grants, \$219,470)		
New York Hospital-Cornell University		F 4 000	University of Washington (23)	19,951	219,470
Medical College (9) New York State Department of Health (4)	10,000	54,000 40,000	WEST VIRGINIA (4 grants, \$33,658)	/	
New York State Department of Health (4) New York University Sch. of Medicine (15)	10,000 $10,000$	109,634	West Virginia University Med. Ctr. (4)		33,658
SUNY, Downstate Medical Center (3)		18,766	WISCONSIN (5 grants, \$50,000)		30,000
SUNY, Buffalo (2)	_	20,000	University of Wisconsin (5)	20,000	50,000
SUNY, Stony Brook (2)	10,000	20,000		20,000	
SUNY, Upstate Medical Center (16)	_	142,931	CANADA (9 grants, \$88,023) University of British Columbia (1)		10,000
V.A. Hospital, Bronx (1)	_	7,000	University of Toronto (8)	_	78,023
NORTH CAROLINA (21 grants, \$171,476)			PUERTO RICO (2 grants, \$20,000)		. 0,020
Bowman Gray School of Medicine (9)	10.000	51,845	University of Puerto Rico Med. Sch. (2)	10,000	20,000
Duke University (3) East Carolina University (3)	10,000 10,000	29,661 29,970	The second secon		
University of North Carolina (6)	10,000	60,000	TOTAL: 779 grants	\$611,308	\$6,653,387

NEW AND INCREASED SUPPORT IN '83

In 1983, 23 new corporations and foundations chose to support the work of the DRF. Another 22 previous contributors increased their gift. The Foundation is deeply grateful to the following new and long-time contributors for their support of otologic research through the DRF in 1983:

Donors Who Have Increased Their Gift

Allied Corporation
American Financial Corporation
Foundation
ARC Music Corporation
Bodman Foundation
Charles Edison Fund
Conoco, Inc.
Contran Corporation
Emtech Laboratories, Inc.
General Telephone & Electric
Corporation
Getty Oil Company
Griffith Family Foundation
Hoyt Foundation
Kimberly-Clark Foundation

Peierls Foundation

Perkin & Squier Company
Charles L. Read Foundation
Sexauer Foundation
Student Loan Marketing Association
Sidney, Milton & Leoma Simon
Foundation
Suburban Propane Gas Corporation
Texploration Oil & Gas, Inc.
Western Electric Company

New Contributors to the DRF

American Express Company H. L. Bache Foundation, Inc. **Baldwin Securities Corporation** Edith C. Blum Foundation Cadbury Schweppes (USA), Inc. Ira W. DeCamp Foundation R. R. Donnelly & Sons Company **Dreyfus Corporation** Baltimore Gas & Electric Company The William & Mary Greve Foundation Herman E. & Estelle Goodman Hershey Foods Corporation Heublein Foundation Earl C. Hull Foundation Maryland Shipbuilding & Drydock Company

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Foundation
Manhattan Life Insurance Company
McConnell School, Inc.
Panwy Foundation
Sandoz, Inc.
Stanton Foundation
Xerox Corporation



The Receiver is an information service of the Deafness Research Foundation. Please address all correspondence to Editor, Receiver, The Deafness Research Foundation, 55 East 34th Street, New York, NY 10016, or call 212/684-6556. (TTY) 212/684-6559.



The cast of the National Theater of the Deaf's production, "The Hero with a Thousand Faces."

New England Chapter Fund Raiser

A benefit performance of the National Theater of the Deaf's world premiere production, "The Hero with a Thousand Faces," was sponsored by the DRF's New England Chapter. Judith Chasin was Chairperson of the October 7th event.

Held in Kresge Auditorium at MIT, the event's honorary Chairmen were Massachusetts Governor Michael DuKakis and his wife, Kitty, and state Senator Chester Atkins and his wife, Cory. Approximately 700 guests attended the performance. As is true of all National Theater of the Deaf productions, it was a combination of verbal and manual communication, enabling both the hearing and deaf to enjoy the play.

THE DEAFNESS RESEARCH FOUNDATION

STATEMENTS OF SUPPORT, REVENUE AND EXPENSES AND FUND BALANCES

Year ended September 30,

		,
	1983	1982*
SUPPORT:		
Contributions:		
Unrestricted (includes Centurions' contributions of \$188,045 in 1983		
and \$163,957 in 1982)	\$ 624,336	\$ 567,971
Restricted (Note 3)	82,000	71,050
Donated media services*	_1,287,000	41,700
Total support	1,993,336	680,721
REVENUE:		
Investment income	53,226	121,665
Gain (loss) on sale of securities	273,213	(115,433)
Total revenue	326,439	6,232
Total support and revenue	2,319,775	686,953
EXPENSES:		
Program services:		
Public education	131,519	144,123
Donated media services*	965,250	31,275
Total public education	1,096,769	175,398
Research grants	501,079	461,525
Total program services	1,597,848	636,923
Supporting services:		
Fund raising	101,572	103,932
Donated media services*	321,750	10,425
Total fund raising	423,322	114,357
Management and general	185,966	154,085
Total supporting services	609,288	268,442
Total expenses	2,207,136	905,365
EXCESS (DEFICIENCY) OF SUPPORT AND REVENUE OVER EXPENSES	112,639	(218,412)
FUND BALANCES, beginning of year	1,287,464	1,505,876
FUND BALANCES, end of year	\$1,400,103	\$1,287,464

^{*}Donated media services represents air time and advertising space made available to the Foundation at no charge. The estimated fair market value of these services amounted to \$1,287,000 and \$41,700 for the fiscal years ended September 30, 1983 and 1982, respectively, and have been included as contributions and expenses on the statements of support, revenue and expenses for the related years. The related costs have been allocated to public education and fund raising in proportion of usefulness to those programs.

A copy of the last financial report filed with the Department of State may be obtained by writing to: New York State, Department of State, Office of Charities Registration, Albany, NY 12231, or The Deafness Research Foundation, 55 East 34 Street, New York, NY 10016.

Conference on Amplification To Be Held

A "state-of-the-art analysis" and report on amplification devices for the hearingimpaired will be given at a conference to be held in Washington, D.C. this year.

Sponsored by the Deafness Research Foundation and Gallaudet College, the conference will be held on Gallaudet's campus.

On a date yet to be chosen, the conference participants will review and analyze three primary areas of concern in the field of amplification: 1) technological developments and the current

status of hearing aids; 2) current audiometric procedures in testing and fitting hearing aids, and 3) psycho-social considerations, including a review of factors that influence the degree to which individuals who could benefit from hearing aids will wear them.

Four nationally recognized authorities in each of these three fields will be invited to participate in the conference. These individuals will prepare papers in advance of the conference, at which they will make summary presentations.

In addition to these national authorities, some 30 other persons who have considerable interest and expertise in the subject due to their present responsibilities or research in the field of amplification will be invited to attend by the DRF and Gallaudet.

The results of the conference will be summarized into a report which will be available through Gallaudet's Office of Research Utilization and Publications. It will also be publicized nationally by the college office.



Conference facility at Gallaudet College, the site of the upcoming symposium on amplification devices.

Hearing Aids continued from page 4

person is able to hear sounds from both sides with the one useable ear.

Fine Tuning

Many hearing aids today are equipped with tiny controls that can be adjusted by the person who is fitting the hearing aid to the user. These can be used to adjust or "fine tune" the tone, power and automatic features of the hearing aid. Thus, a precisely selected hearing instrument can be even further modified to accommodate the user's ultimate sound quality preferences.

Real Hearing Aid Measurement

How a hearing aid will perform on a real ear is not the same as how it performs on a machine designed to measure hearing aid function. Modern hearing instrument technology now allows today's hearing aid dispenser to look at measurements generated on real ears or with carefully designed acoustic mannequins which show the hearing aid's actual performance characteristics more precisely than has been possible before. This means that hearing aid selection and adjustment can now be made with a greater degree of precision than was previously available.

"Hearing losses are like fingerprints, no two are alike..."

Smaller and Smaller

Hearing aids have become smaller and smaller over the years and the public has responded to this trend with enthusiasm. Nine years ago, 4.3% of the hearing aids sold in the U.S. were allin-the-ear styles. Today, 43.4% of all hearing aids sold domestically are allin-the-ear. The canal aid, an aid which sits only in the canal portion of the ear

(with all the components and battery included) is now being marketed and is gaining popularity.

In the Future

There is no question that modern instrument science is growing in sophistication and complexity. The field will continue to evolve so that more and more hearing impaired individuals will benefit from the use of hearing aids in the future. The marriage of many disciplines—physics, electronics, biomedical engineering and research, audiology—all will continue to make these advances possible.

In an attempt to bring together different disciplines to share advances and possible new directions to benefit the hearing impaired, the DRF and Gallaudet College will co-sponsor a symposium on the state of the art of amplification devices.

(See article above.)

This article was prepared for the Receiver by audiologist David J. Smriga.

Harry Rosenwasser Honored with DRF Achievement Award

Harry Rosenwasser, M.D., DRF Director of Medical Affairs, was presented with the DRF Achievement Award at the 1983 Centurion Annual Meeting in Anaheim, CA. The presentation was made by DRF Founder, Mrs. Hobart C. Ramsey, in recognition of Dr. Rosenwasser's long and dedicated years of service to the Foundation in his capacity as Director of Medical Affairs, a post he retired from effective December 31st, 1983.

Dr. Rosenwasser became a Centurion in 1964 and assumed the position of Director of Medical Affairs in 1970. His long and distinguished career in otology began over fifty years ago at Mt. Sinai Hospital, New York City, where he is Professor Emeritus of Otology. Dr. Rosenwasser won early recognition in the specialty when he first identified and described Glomus Jugulare Tumor, a tumor of the middle ear and mastoid. One of the most com-



Harry Rosenwasser, M.D., being presented with the DRF Achievement Award by Mrs. Ramsey at the Centurion Annual Meeting.

mon tumors affecting the ear, it is now rapidly recognizable because of Dr. Rosenwasser's early work.

Always active professionally, Dr. Rosenwasser is a past President of the

Otologic Society, and a recipient of that society's Award of Merit—the highest honor in ear medicine.

The October 24th presentation caps a lifetime of service to the deaf and hearing impaired through his professional involvement in teaching, research and clinical practice. During his years at the DRF he has worked enthusiastically on the research grants program, and as a distinguished elder statesman of otology has offered encouragement and advice to young investigators.

In Memoriam

The Deafness Research Foundation mourns the passing of James D. Wise who ably served the DRF for the past 14 years, first, as President of the Foundation, and later as an active consultant. He was a good friend who will be missed.

Beethoven's Deafness continued from page 4

ing impairment. By the time he finished the Seventh Symphony, at 31, he had become severely hard-of-hearing. He was able to conduct the piece, being in touch with its essential rhythms, but could not fully appreciate it.

Later when he conducted his Ninth Symphony, he could hear none of it; he was not even aware of the audience's ovation when it ended. The Ninth is an entirely cerebral act of a man whose remembered sounds are transposed to paper, whereas the Seventh represents the glimmerings that still related Beethoven to the world of sound.

Descriptions confirm that his hearing loss was most likely a sensorineural or nerve loss. Sensorineural hearing loss is usually characterized by better hearing in the low pitches than in the high pitches, and this is precisely what Beethoven described.

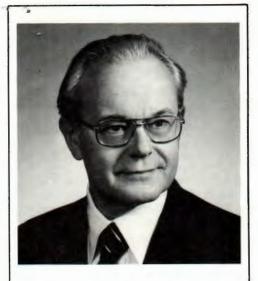
The terrible agony of deafness in an artist whose art depended upon hearing can only be described as Beethoven himself wrote in a letter to his brothers in 1802: "...but only consider that for six years past I have fallen into an incurable condition. "...it is critical to recognize that deafness may have had a beneficial effect on Beethoven's art"

aggravated by senseless physicians, year after year deceived in the hope of recovery, and in the end compelled to contemplate a lasting malady, the cure of which may take years or even prove impossible. Born with a fiery, lively temperament, inclined even for the amusements of society, I early was forced to isolate myself, to lead a solitary life."

But it is critical to recognize that deafness may have had a beneficial effect on Beethoven's art. In the popular fashion of the day, Beethoven had been a "virtuoso"—a brilliant performer of his own compositions. As his hearing loss increased, he could no longer perform his own compositions. His inability to perform his own works may be a boon to music lovers today, for as Schauffler states, "It threw him wholly into composition. He no longer wrote solo pieces for the advertisement and display of his own dexterity at the keyboard. In composing from pure inclination, Beethoven was the first important composer to throw the full weight of his influence towards establishing the art on a basis of music for music's sake."

And so it may be said that even as Beethoven freed music, his deafness freed him from the physical constraints imposed by the sense of hearing. Once liberated from these constraints, he entered another compositional realm.

A boon to mankind—an agonizing tragedy for the composer—this is what we must conclude about Beethoven's deafness.



Walter A. Petryshyn, M.D., Is New DRF Medical Director

Walter A. Petryshyn, M.D., a former Chairman of the DRF Board of Directors, succeeded Harry Rosenwasser, M.D., as DRF Medical Director in January. Dr. Petryshyn will handle all medical matters for the DRF as well as oversee the administration of its research grants program.

Dr. Petryshyn, a practicing otologist in Upper Montclair, NJ, and Clinical Professor at New Jersey College of Medicine in Newark, has been associated with the DRF since its inception in 1958 and a member of the Centurion Club since its beginning in 1963. During this association with the DRF, Dr. Petryshyn has served as Research Coordinator, Medical Advisor and Secretary. From 1976 to 1979, he was Chairman of the Board of Directors and Chief Executive Officer. He remains the only two-time recipient of the DRF's Award of Achievement.

We are very pleased and grateful that Dr. Petryshyn has assumed this new responsibility.

NEW MEMBERS JOIN THE DRF BOARD

ROBERT W. CANTRELL, M.D. Centurion President Charlottesville, VA

New Board member and Centurion President Dr. Robert Cantrell's accomplishments as an otolaryngologist have won recognition not only in the field, but have included him in Who's Who in America and Who's Who in the World. Fitz-Hugh Professor and Chairman of the Department of Otolaryngology—Head & Neck Surgery at the University of Virginia, he is an active researcher, clinician and teacher.

Dr. Cantrell has published extensively in major medical journals and frequently lectures around the country. He is a consultant to many organizations, among them the National Naval Medical Center, Bethesda, MD, and to the Surgeon General of the U.S. Navy. Dr. Cantrell is a board member of many national and regional medical societies, including the American Board of Otolaryngology, the American Academy of Otolaryngology—Head & Neck Surgery and is a recent past President of the Society of University Otolaryngologists.

Married and the father of four, Dr. Cantrell resides outside Charlottesville.



Robert W. Cantrell, M.D.



Mrs. Claude C. Cody, III

MRS. CLAUDE C. CODY, III President, Deafness Research Foundation Auxiliary Houston, TX

Muriel Cody brings many years of volunteer experience to her post on the DRF Board of Directors. The wife of long-time Centurion, Claude C. Cody, III, she has been active in the Houston area for a number of years in organizations as varied as the Junior League, Southern Garden Club, Texas Medical Association Auxiliary Board and Phi Beta Kappa of Houston, where she served as Executive Secretary. Other volunteer efforts include work at the Clinic of Neurosensory Disorders.

In addition, through affiliations with area museums and garden clubs she has lectured on gardening, nature, fine arts and antiques. Mrs. Cody has been an active member of DRFA since its founding in 1978 and was elected President for 1983–84, the term of her board membership.



Help us help them. They can't hear you.

Deafness
DRF
Research
Foundation

55 East 34th Street New York, NY 10016 (212) 684-6556/6559 TTY

1983 NAMED GRANTS

The following 1983 grants are named for individuals whose bequests to the DRF provide yearly income sufficient to fund a research project;

Alfred M. F. Kiddle University of Puerto Rico Investigator: Joseph Santos-Sacchi, Ph.D.

Alice E. Moulton Southern Illinois University Investigator: Leonard P. Rybak, M.D., Ph.D.

Agnes B. Noyes Albany Medical School Investigator: Steven M. Parnes, M.D.

The following 1983 grants honor companies, foundations and individuals whose contributions enabled the DRF to support a research project;

American Express Foundation Columbia University Investigator: Anthony F. Jahn, M.D. American Financial Corporation

Foundation

Ohio State University Investigator: Thomas F. DeMaria, Ph.D.

and Ohio State University

Investigator: Lowell L. Williams, M.D.

Harriett Ames Charitable Trust SUNY, Stony Brook Investigator:

Jean K. Moore, Ph.D. John W. Anderson Foundation Indiana University

Investigator: Michael R. Petersen, Ph.D.

Address Correction Requested

Barco of California University of California, Los Angeles Investigator:

Donald E. Morgan, Ph.D.

Mary W. Harriman Foundation **Duke University** Investigator:

Nell B. Cant, Ph.D. Don & Sybil Harrington Foundation Baylor College of Medicine

Investigator:

Glenn C. Thompson, Ph.D.

Hoge Foundation University of North Carolina Investigator: Jiri Prazma, M.D.

Hoyt Foundation Princeton University Investigator:

Martha Constantine-Paton, Ph.D.

Fred Maytag Family Foundation University of Iowa Investigator: Paul J. Abbas, Ph.D.

Ambrose Monell Foundation Stanford University Investigator: Anne S. Yeager, M.D.

William T. Morris Foundation University of California at Davis Investigator: Michael D. McGinn, Ph.D.

Paul & Louise Oberkotter Northeastern University Investigator:

Adele E. Proctor, Ph.D. Sandoz, Inc. Eye & Ear Hospital, Pittsburgh

Investigator: Jonas T. Johnson, M.D.

Schumann Foundation New York State Department of Health Investigator: Martha G. Pierson, Ph.D.

and

SUNY, Upstate Medical Center Investigator: Richard R. Gacek, M.D.

Walter Scott Foundation Columbia University Investigator:

Maxwell Abramson, M.D.

Simon Foundation Mary Imogene Bassett Hospital, Cooperstown Investigator: William J. Richtsmeier, Ph.D.

Seth Sprague Foundation Children's Hospital of Philadelphia Investigator:

Roger R. Marsh, Ph.D.

Suburban Propane Gas Corporation University of California Medical Center, San Diego Investigator: Jeffrey P. Harris, Ph.D.

and

University of Washington Investigator:

Josef M. Miller, Ph.D. A. Alfred Taubman University of Tennessee Investigator:

Tai-June Yoo, M.D. Xerox Corporation

Massachusetts Eye & Ear Infirmary Investigator: Thomas L. Eby, M.D.

DRF Auxiliary University of Washington Investigator: Patricia K. Kuhl, Ph.D.

Centurions University of Utah Investigator: Donald K. Eddington, Ph.D.

THE DEAFNESS RESEARCH FOUNDATION 55 East 34 Street New York, N.Y. 10016

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THE WHITE HOUSE

WASHINGTON

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May 23, 1984

Dear Mr. Ball:

N

On behalf of Mrs. Reagan, I am pleased to inform you that she has accepted your kind invitation to become honorary chairman of the 1984 Deafness Research Foundation's major fundraising event which will be held in New York on June 5th.

Please contact me at 202/456-7905 to discuss the details of her chairmanship.

With Mrs. Reagan's best wishes,

Sincerely,

Ann Wrobleski Director of Projects Office of the First Lady

X

Mr. George L. Ball Prudential-Bache Securities President and Chief Executive Officer 100 Gold Street New York, NY 10292

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228614

THE WHITE HOUSE WASHINGTON

The letter went to her. montgameny + a copy was sent to her. Feeder.

frankly but

Dear Mr. Montgomery:

Thank you for your recent letter inviting the President and Mrs. Reagan to serve as members of the Honorary Committee for the dedication of a statue of John Wayne which will be placed in the Great Western Savings Plaza in Beverly Hills, California on July 22, 1984.

We appreciate your extending this invitation to the President and the First Lady. Although they deeply appreciate this honor, they must regret your invitation due to a longstanding policy to serve only on committees on which they are able to participate personally. However, on behalf of both them, please accept our best wishes for a most memorable occasion in tribute to an outstanding American.

With best regards,

Sincerely,

FREDERICK J. RYAN, JR. Director, Presidential Appointments and Scheduling

Mr. James F. Montgomery Chairman of the Board Great Western Financial Corporation 8484 Wilshire Boulevard Beverly Hills, California 90211

cc: William Feeder

bcc: Mark Weinberg

GREAT WESTERN FINANCIAL CORPORATION

GREAT WESTERN SAVINGS

A Federal Savings and Loan Association

228614

James F. Montgomery

CHAIRMAN OF THE BOARD

May 23, 1984

President Ronald Reagan The White House 1600 Pennsylvania Avenue Washington, D. C. 20500

Dear Mr. President:

We, at Great Western, would be very honored if you and Mrs. Reagan could join the John Wayne family and us, along with a group of prominent fellow Americans, as members of an Honorary Dedication Committee to pay tribute and to honor a modern-day patriot -- John Wayne.

The tribute involves the dedication of the 21-foot bronze sculpture of Mr. Wayne, mounted on horseback in his typical and well-remembered Western character. The sculpture will be dedicated in the Great Western Savings Plaza on Wilshire Boulevard on Sunday, July 22, just before the opening ceremonies for the Olympic Games in Los Angeles. It is our desire that this monument to John Wayne serve as a continuing reminder of the truly great scope of the man -- his ideals, strength, and vision. The bronze sculpture is the work of Harry Jackson, world-renowned Western artist, and has already captured international attention.

We would be privileged to have both you and Mrs. Reagan join us as members of the Honorary Dedication Committee.

Sincerely,

James F. Montgomery

JFM: jpr

ROGERS & COWAN, INC.

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WM. (BILL) FEEDER Senior Vice President

May 23, 1984

Mr. Mark D. Weinberg Assistant Press Secretary to the President THE WHITE HOUSE Washington, D.C. 20500

VIA AIR EXPRESS

Dear Mark:

As per our conversation this morning, this is the letter from James F. Montgomery, Chairman and Chief Executive Officer of Great Western Financial Corporation, inviting President and Mrs. Reagan to join the Honorary Dedication Committee to honor John Wayne.

While the letter gives some of the details, I am enclosing a more detailed description of what the event is.

As you know, the President received Harry Jackson in The Oval Room a few months back, when Jackson presented him with one of his bronzes.

I know you are going out of town -- and that is why I am air-expressing this to you. I appreciate your getting me an approval as soon as practical.

Please know, Mark, that all of use here at Rogers & Cowan appreciate the cooperation you always give us.

With personal regards, I am

Cordially,

William Feeder

Senior Vice President

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Bill Feeder ROGERS & COWAN 275-4581

for immediate release

MASSIVE 21-FOOT-TALL, SIX-TON BRONZE SCULPTURE OF JOHN WAYNE BY FAMED WESTERN ARTIST HARRY JACKSON TO BE UNVEILED JULY 22 IN BEVERLY HILLS AT GALA DEDICATION EVENT AT GREAT WESTERN SAVINGS

John Wayne will find a permanent home in Beverly Hills

July 22 with the unveiling and dedication of "The Great"

Westerner, a 21-foot-tall, six-ton monumental bronze sculpture

by world-famed Western artist Harry Jackson, featuring the

"Duke" astride a stallion, in the Plaza at Great Western

Savings, at Wilshire and La Cienega Boulevards.

James F. Montgomery, Chairman and Chief Executive of Great Western Financial Corporation, will host a colorful dedication ceremony, which will be attended by key international personalities from the entertainment industry, art, social, governmental, business and regligious areas.

A highlight of the event will be one of the few West

Coast appearances of Wayne's seven sons and daughters. Headed

by Michael Wayne, the family includes Toni La Cava, Patrick,

Ethan and Marissa Wayne, Melinda Munoz and Aissa Khule. In

addition, many of Wayne's 23 grandchildren are expected to

attend the ceremony.

lst Add...Massive 21-Foot-Tall, Six-Ton Bronze Sculpture Of John Wayne By Famed Western Artist Harry Jackson To Be Unveiled July 22 In Beverly Hills At Gala Dedication Event At Great Western Savings

The monument, commissioned by Great Western Savings, is the largest Jackson has ever made, and is to be shipped to Los Angeles from his studios in Italy, where it has been three-and-a-half years in the making.

"Great Western is very proud of the close working relationship it shared with John Wayne prior to his death," Montgomery stated. "We had the very special opportunity to work with the 'Duke' on both a professional and personal basis over a period of time that we at Great Western will always cherish.

"The sculpture of John Wayne will be a constant reminder to us of the truly great scope of the man -- his ideals, strength and vision which contributed to the total man."

"This is a wonderful tribute to my father," stated film producer Michael Wayne, who has visited Jackson's Tuscany studios several times to view the work in progress. "He would have been proud to be the subject of this great Harry Jackson sculpture."

Jackson explains his greatest work to date thus: "It is the 'Duke' playing his longest-running role -- the interpreter of the indomitable spirit of the West I believe in."

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In addition to the monument's portrayal of Wayne, the statue's base features reliefs depicting the wild action of a cattle stampede and, on the reverse side, the solitude of a range burial, the two representing the life and death of a cowboy.

Jackson is now considered one of the foremost artists of American Western subjects, and his work can be found in leading museums and private collections around the world, including those of President Ronald Reagan, Britain's Queen Elizabeth II, and Italy's President Sandro Pertini, among many others.

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