

INTERVIEW I

DATE: April 26, 1990
INTERVIEWEE: EUGENE GUTHRIE
INTERVIEWER: Michael L. Gillette
PLACE: Dr. Guthrie's residence, Easton, Maryland

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G: Let's start today if we may, Dr. Guthrie, with a discussion of the cigarette warning label legislation that followed the Surgeon General's report on smoking and health. When was that?

EG: 1964.

G: And your role in that whole initiative; how did you get involved, first of all?

EG: My beginning in it occurred after the Surgeon General's Advisory Committee had been appointed and had begun its work. That occurred I guess in either 1961 or 1962; maybe 1962. That started under the Kennedy Administration and the major impact to begin that came from the American Heart Association, the American Cancer Society and what was then the National Tuberculosis Association, [when] they went to President Kennedy and asked him if he would appoint a blue-ribbon group to study the cigarette smoking situation and report on it. They felt it was timely, that there was evidence in the medical literature worldwide that indeed cigarette smoking was a serious hazard to health and it ought to be recognized and remedial action taken. He agreed with that and asked the Surgeon General and the Public Health Service to put together an

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appropriate list of candidates from which a selection and appointment could be made.

The Public Health Service undertook that and recognizing the controversy involved, sought to get as representative a group of distinguished scientists as possible, acceptable to all sides of the controversy [in] that they would be fair, as unbiased as possible and do a job that would have credibility in all sectors. And that was no small task. It meant circulating lists of people, broadly, in both the pro- and con-tobacco controversy sides, and that was done. Each side had the opportunity to blackball anyone they wished for whatever reasons, and finally a list of people was then sent forward to the White House, and the President then requested the Surgeon General to appoint the Committee. I believe the number was twelve or fourteen--I forget exactly now--people were appointed to be called the Surgeon Generals Advisory Committee on Smoking and Health. A staff was put together in the Public Health Service to assist the Committee and the task was begun.

That group determined that it would be impossible for them to conduct any direct research of their own. They felt that the best thing they could do would be to review the scientific findings worldwide and bring all of that information together, and then with their collective wisdom and with the help of a cadre of consultants they would distill from that information a conclusion on the health affects of cigarette smoking.

So that was the task they set about doing. And the chap who was appointed as staff director, a physician named Peter Hammel, began that operation and they were at work for at least a year, and I was not

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associated with it at that time. Peter Hammel became ill during the course of the Committee work and his illness was increasingly debilitating to him to the extent that both he and his superiors felt that he could not carry on.

After a year's work there began to be some concern by the people who had urged that this study be undertaken that it was taking an awful long time. They were concerned that because of the potential consequences of any adverse comments toward tobacco, that perhaps, the Committee, and the staff and the Public Health Service and others were dawdling a little bit too long with the thing. So pressure began to be applied, first to the Public Health Service and then on to the White House [as] to, "What is going on with that study? Where is it? What can we expect?" As I say, at the same time the staff director, Dr. Hammel, was becoming more ill, and that's when I got into it. The Surgeon General called upon me one day and said, "Guthrie, I want you to take over Pete Hammel's job. The service is on the line to get this job done and we need to do that."

At that time I was director of the Division of Chronic Diseases.

G: Who was providing the pressure?

EG: [It was] coming from the voluntary health agencies primarily, the three who were instrumental in getting the study underway.

So the Surgeon General told me--first of all I took a look at it to see what the circumstances were and recognized this was a fairly hot potato. I went back to him and I said, "Are you sure you want me to do this? I'm in a wonderful program right now." At that time we were on the front line of doing a whole lot of very exciting things in heart

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disease and cancer and stroke. I really didn't want to stop that. He said, "Let's put it this way. This is going to be an opportunity that you cannot refuse." I said, "I see a lot of potential problems up the line and I've got a feel for the controversy. I want you to give me essentially a blank check on resources, because I understand that the staff did feel that they had a little hard work getting some of the resources they needed. And I would be like to be associated with a first-class job just as you, the Surgeon General, would be. So I think I've got to have your name on my sleeve when I go for resources." [He said,] "You've got it." And that turned out to be essential.

I embarked on that project as the new staff director, in a sense coming in at midstream. By that time the staff had been well organized--this fellow Hammel had done a marvelous job in establishing a search of worldwide literature. We were then located in the National Library of Medicine out on the NIH [National Institute of Health] campus in Bethesda. That was very helpful because we had to bring this literature from wherever it existed to a central location, catalogue it, and then make it available to the advisory committee. And then they organized a group--I say group; they organized a system of using consultants, specialists in a wide variety of fields, everywhere from chemistry to the cancer cell, to review this literature for them and give them feedback, which they then reviewed further. So it was quite a network of worldwide literature coming in, being catalogued, duplicated and distributed and then reporting back, all of this being carefully organized and tabulated.

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The advisory group divided itself into subcommittees to work on certain subject areas, and they would distill certain information; for instance, the affects of tobacco on the lung, on the cardiovascular system, the chemistry of tobacco, the manufacture of the cigarette, what goes into that.

The tobacco industry was asked to provide considerable information, which they did, very comprehensively. The only thing they withheld information on to some degree was some of the additives they put in the cigarettes to give certain flavors and things which they felt were trade secrets which they could not part with. But they attempted to give us, through their chemists, as much information as they wished on the contents of those additives so we could determine whether or not the basic chemicals were hazardous or not.

So I came into the study when the worldwide literature study was organized and producing. And I guess after about a couple of months on the job, I learned that President Kennedy had taken a personal interest in this study and he asked the Surgeon General when did he think we would be able to conclude our study? When the President made that request, the Surgeon General came to the advisory committee and asked us when did we think we could complete the Committee's work. At that point we were, I would say, pretty well on top of all of the information that we'd been given. However, the committee had not begun at that stage to reach a conclusion. So we decided that we would have to work out a game plan to do that. We set a target for the first of the year, January 1964--about six months--to do that job.

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At about that time word came back to me that there was a bounty put out to attempt to break the story in the news media. The first reporter who could get some real hot dope out of there would receive a considerable amount of money and maybe other awards.

G: Who put the bounty up?

EG: I don't know. I never got that information.

But shortly after that the fellow who was acting primarily as our chief information officer allowed a *Time* magazine photographer to come into our office and take pictures. That upset me no end, as you might imagine. He tried to say, "The guy was just taking pictures. There's nothing wrong with that." And I said, "Well, there is something wrong with that. We cannot in any way jeopardize this study by any picture taking, friendly conversations, or what have you on the part of any staff. That just can't go." And I had to dismiss that chap.

G: The public affairs guy?

EG: Yes. I just didn't think he had a grasp of the kind of problem we had. Then that same week the tobacco stocks took a four- or five-point loss on the market on the rumor, supposedly coming from a member of my staff, that we were going to report adversely on the cigarette industry. So a member of the Securities Exchange Commission came out and met with me and said, "Do you know if that were true, you and your staff could be in some serious trouble if there are any attempts made by staff to manipulate the market?" Somebody made a lot of money off of that so-called rumor that was alleged to have come from our staff.

So I met with our staff that very same day and told them of the potential risk of any loose talk and what it meant. I said, "I think at

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this point we had best begin to operate in a fully secure fashion, as though we were working on a top secret defense project." So I asked the Surgeon General to give us that kind of protection. We moved down into the sub-basement of the National Library of Medicine, which was built as a bomb shelter for nuclear war to protect the archives out there. The Public Health Service put twenty-four hour security guards on our offices. We locked all our files and from that point on we operated just like a secret operation.

G: Did you ever have any sense of how the rumor was circulated?

EG: No. I think it was manufactured by somebody else and alleged to have come from us. I suppose somebody made a lot of bucks off that.

G: How did you control the commission members themselves from talking to the press?

EG: They were a remarkable group of people. When we reached that midpoint and set that target of January 1964 that group was 120 per cent devoted to making that as good a report as could humanly possibly be done. It was amazing because these people were as individual and as different from each other as any group of people could be; very divergent backgrounds. Three of them were practically chain-smoking cigarette smokers. All of them were eminent in their fields and as you can imagine, very strong-willed individuals, and yet they cooperated--they fought tremendously over some of the issues, but they cooperated beautifully. That was not the tough part of my assignment. They came through with everything I ever asked of them; gave of themselves unselfishly. As I was able to expand that staff, the staff did the same thing. And I brought people in from all over the Public Health Service and even from

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other agencies.

It was interesting; the project had an aura about it that caused people to really work hard at it and to recognize the importance of it and to discipline themselves to a high degree of professionalism. I was rather amazed at the "chemistry" of the project itself.

G: Were some of the commission members more allied with the tobacco industry and some more with the Cancer Society?

EG: Yes. And as you can imagine, having gone through these various screening devices to sift out who would be acceptable and so forth, they were really a strange group of bedfellows. But as I say, they did a beautiful job working together.

We began a draft of a report and an organization of that draft into a number of chapters.

G: Was that prepared by the staff?

EG: Well, it was actually a joint endeavor. The Committee members would come into town and we would work on sections of the report as a group and then make assignments. We had writers; I had scientific writers on the staff who would get their instruction--they'd sit in on the discussions and then they'd go off to write. Some of the members of the committee themselves would do some of the basic writing. Some of the consultants would do basic writing. Operating under nearly secret conditions, we would mail the drafts out to the Committee for review.

When we got ready for our first completed report draft, I would go to a federal agency's printing office--let's say I'd pick the Department of the Interior--make arrangements with their print shop, usually at night. [I'd] go down with my staff. We would come into their print

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shop without them having any idea of what they were going to print. We would go in there and run off twenty copies of the draft report, gather up everything--all the waste paper and everything else--leave, and we'd never go back to that same place. I would send those draft reports out to the committee; they would review it, make their changes and send it back in. Then I'd have a cadre of writers who would take all their corrections and changes and we'd get ready for another draft.

G: And then go somewhere else?

EG: Then we'd go to the Department of Agriculture. Always on the alert for someone trying to get hold of that report prematurely. It got to be a little wild. But in that way we gradually came down to the final draft.

If you're familiar with the report at all, there is some extremely careful wording on each chapter of the report, each subject area. Let's take for instance the lung. That chapter on the effects of smoking on the lung would begin with the conclusion, a stated conclusion, very carefully worded--I mean those things were written and rewritten and rewritten--to reflect exactly what that group of scientists felt ought to be said about that particular subject. They reached a thoughtful conclusion on each subject in the report.

As a matter of fact, the beginning of that report starts out with four brief chapters on causality, because we began to feel that the American public and even a certain number of the scientific community really didn't understand how you arrive at the decision of whether or not something causes something. It's not a very simple matter. So by George, the Committee wrote a small treatise on causality. It's a masterpiece.

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G: What were the major controversies that were deliberated within the committee?

EG: Well, almost every item in there was controversial to the extent that-- for instance, in lung cancer: were they going to say that cigarette smoking was a contributor to the cause, was it *the* cause of all lung cancer? Of course it wasn't. Was it the principal cause? All these gradations. That's where the controversy came in as to how firm a commitment they could make to the percentage, if you will, or the degree of causality of a given element of cigarette smoke on a given part of the body.

 Their greatest agreement was in lung cancer. They felt that [with] the world's literature, the scientific knowledge that we had as of January 1964, they could come out and say that the bulk of lung cancer in the United States was directly caused by cigarette smoking. That was the first time that had ever been nailed down that strongly, and they did reach that conclusion unanimously. All of their decisions were unanimous or they didn't get in the report. If they couldn't be unanimous, they'd have to back off. They would take it as far as they could go and, as I say, every now and then back off and some members had to really think it over. Each one of those conclusions was very carefully arrived at. If anything the entire report was very conservative. They didn't stretch any element of scientific finding. If there was any error, they erred to the conservative side.

G: Were there some elements that were excluded from the report in the interest of unanimity?

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EG: No. They tackled all of it. The times when they couldn't agree, they would work on it until they found language that satisfied them. For instance, they never did come out in that report and say that nicotine was addictive, because the scientific findings wouldn't let them do that. Habit-forming, yes. But again, our understanding of addiction was not that well developed at that time.

It since has been and, as you know, in subsequent reports, the Surgeon General has declared nicotine an addictive substance and cigarette smoking is really an addiction. Although it's not totally recognized--the public isn't educated to that, the scientific community is, that cigarette smoking is a form of addiction. Nicotine is an addicting drug. We couldn't say that in the 1964 report. We came right up to it, but stopped short of that and went a great deal into the psychology of smoking; psychological aspects of habit-forming. I think we tried to explain the difficulty of people being unable to give up smoking because of the psychological factors associated with cigarette smoking.

That became a complex subject which had not been too well explored. In some areas where the literature and research had just not been done, we had to indicate that, and the report pointed out a number of areas where future research needed to be undertaken.

G: In terms of defining conclusions, what should be done, warning labels, things of this nature, how did the committee deal with that? Was there any discussion of what--?

EG: Not too much. Again, we were faced with trying to get that report out, and we were not charged with any responsibility about what to do about

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solving the problem. What we were asked to do was to conclude whether or not cigarette smoking was hazardous, dangerous or a problem. Our overall finding was yes, cigarette smoking is a serious public health hazard.

We spent a fair amount of time depicting the extent of that and the seriousness of that hazard and then recommending that the Surgeon General take appropriate action, but we didn't define what appropriate action was. They did ask that appropriate action be undertaken.

G: Was there any discussion or consideration of the effect of smoking on others around the smoker?

EG: Second-hand smoke was not dealt with. There was practically nothing about it at that time, very little. And of course that subject was examined in subsequent reports.

G: In terms of your own role in the committee's deliberations, did you serve as an interlocutor or an arbiter at all?

EG: In some instances. Essentially I found my role to--well, it's somewhat hard to describe. As I've said earlier, I felt this sort of "chemistry" that took place between the members of the committee, the staff, and our consultants was a tremendous asset. So I did everything I could think of to nurture that in terms of selecting staff, keeping staff, moving staff. Certain people would work well with certain people. So I spent a great deal of my time observing and trying to understand the inter-personal relationships going on, to keep things moving, to keep progressing in our deliberations, so that didn't permit me to get too deeply involved in any one area or subject. I had to be generally knowledgeable on all subjects. I had to be aware of everything.

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I also wanted to protect my own role; to be able to see the whole thing all the way through. So sometimes I would make it my task, if I would see a stand-off coming, to find ways to resolve that, utilizing usually other people--consultants, other members of the committee, the chairman. The chairman was quite an elderly fellow, a former medical school dean, a statesman of the first order, Dr. Bayne-Jones, a marvelous man with a great deal of moxie and perception of individuals. Of course he, being the outstanding person that he was, commanded a high degree of respect. So he and I would frequently chat about problems and this going on and that going on. He'd pick my brain; I'd pick his and we'd come up with ways to get around some of our problem areas. The Committee members were extremely individual and, as dedicated as they were, it was sometimes difficult to get them to function as a group in a group process. So I had to spend a lot of my time working on that kind of thing, plus all the mechanics of putting the report together.

I made one great mistake or I let one mistake happen, and it taught me a big lesson which I've never let happen again. I had a secretary who became an indispensable person. Lo and behold, she got pregnant and had to leave. I had allowed her to get herself into an indispensable position. She was the only person on the staff tracking the flow of all papers. She was the fulcrum for all of this movement of paper, and I had to overcome that over a very short space of time. As I said, I taught myself a lesson to never let anybody get to be an indispensable person in an operation of that type.

So the whole report project was a great teaching vehicle for me, one of those experiences that come once in a lifetime and yet you hope

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you never go through them again, because I think it took ten years off my life just going through that project.

To tell you the final story on the amount of secrecy we had to go through: we printed the final report at the Government Printing Office in their military, top secret unit. No civilian report had ever been dealt with in that fashion. The final report was delivered--we held the press conference for the report in the State Department's auditorium where President Kennedy used to have his press conferences. We embargoed that hall. I think there were some two thousand reporters in there, all the different kind of media; print, electronic, photo, etc. The format was, we opened those doors at ten a.m. and let everybody in and then locked the place up. At twelve noon we put the Committee on the stage, together with myself and the Surgeon General, and then opened to questions. They had two hours to read the report and we distributed the report in there, which had been delivered in armored vans. Can you believe that? Now that sounds like a lot of hocus-pocus, but there were so many people trying to get hold of that report and break that story in advance. And it didn't happen.

G: Aside from the pressure to get the report out on a timely basis, was there any other pressure on the Committee?

EG: Extremely little. In fact, I said afterwards I couldn't understand why I hadn't been offered a lovely home down in North Carolina in the mountains. Nobody attempted to bribe me or anything like that. I did have a few phone calls. I went to the University of North Carolina in my undergraduate years and I heard from some old fraternity brothers that I hadn't seen in years. [They] called me up and wanted to have

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lunch with me. I smelled a rat so I would say, "You know, So-and-so, it has been a long time. What are you doing these days?" "Well, I'm with P Lorillard."

(Laughter)

But that's as far as it ever went.

G: So did you have lunch with them?

EG: No, I never met with them. Heck, no. You talk about clean as a hound's tooth. But I was kind of disappointed that nobody really tried to get to me.

G: And was that fairly common throughout the--?

EG: Yes, as far as I know. Now I tried to keep tabs on the Committee members pretty well, and occasionally they would get a call from a reporter who would want a story, something like that, but it was always overt. As far as I could tell there was no covert activity going on.

G: And no pressure on the Surgeon General from the Hill?

EG: No. We were protected from that. I didn't get any of it. If he got any of it he never relayed it to me. I felt very good about that.

G: What was the reaction to the report, the release of it?

EG: Well, of course, it was the news-maker of the year and we couldn't have asked for greater publicity for the report. It was front-page news worldwide. We released it on a Saturday morning out of respect to Wall Street. That was the advice we got from--I forget where that came from but anyway, they asked us not to release it during a working day. So we had a Saturday-morning release. It was carried in all the Sunday papers.

G: Which probably gave you more circulation than--

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EG: Right. As I say, we got absolutely excellent media coverage. It was a best-seller at the Government Printing Office for several years. So we couldn't have asked for any greater amount of publicity from the study.

Then after the report--you want to go ahead with the follow-up to the report?

G: Yes.

EG: After the report was issued, of course it brought about a great deal of comment. The report was widely disseminated. It was discussed everywhere. It of course was interpreted as a major setback for the tobacco industry. The tobacco industry had tried to in a way poo-poo it, but they couldn't go too far because they'd approved the scientists on the Committee. They couldn't blast the Committee. I think they were sort of hamstrung as how to handle it, a little bit confused on that. So they just didn't say a heck of a lot about it. They cooperated with us in the production of the report quite well. I can't say perfectly well because they didn't. There was information they withheld and we don't know to this day on some of that. But for the most part they tried to cooperate in that sense.

I forget exactly the time interval--of course we disbanded most of the staff, although the Surgeon General did keep a unit called the Smoking and Health Unit, and put it in my Chronic Disease Division. I went back to my old job and we set up this shop--I believe it was called the Office of Smoking and Health--to continue to disseminate information from the report, because we had collected the worldwide scientific literature on smoking and health. We made those archives available to anybody who wanted to use them and they continued to be used. Each year

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subsequent to that report the Surgeon General has issued a new report on special areas of concern, not on the whole subject.

The Public Health Service began to study further individual subjects, such as the cardiovascular system; that was one area where we could only say that cigarette smoking was a contributor to heart attacks, but we couldn't say it was the main cause. We just didn't have enough information. So there was a lot of new research begun following the report and subsequent Surgeon Generals' reports dealt with them. Subsequently we've been able now to identify more precisely the effects of nicotine and tobacco smoke on the cardiovascular system. And that's what's happened: many additional details have continued to come from research since that report.

We also organized a National Interagency Council on Smoking and Health. We joined with the three basic organizations that were the major contributors to getting the report started in the first place-- Heart, Cancer, and Lung--and added several more voluntary health agencies and formed what we called the National Interagency Council on Smoking and Health. That was the first time that a multitude of health agencies had come together on one issue, in this instance, smoking. The Council undertook to develop a national strategy to work on the problem of cigarette smoking and health. The Council was quite successful. As you might imagine those voluntary health organizations were quite jealous of their own areas to work in, and very frequently found themselves in competition on the smoking subject. But in this instance they worked together. That was a very interesting development, and the Public Health Service fostered that and I was asked to take a personal

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role in trying to get that off the ground and keep it going--at least to get it going so it would thrive on its own accord. As far as I know that's still going.

Now then, the difficult part came in trying to get that small office of Smoking and Health to grow and develop into some substantial focus on their major public health problem in the federal government. That's where we ran into problems on the Hill. The tobacco states were very effective in squelching any budget for this subject, and kept that little unit pretty starved for funds. Everything we did subsequent to that report--at least that I was associated with--when we would go to Capitol Hill or any of the interagency meetings in Washington, the tobacco industry was heavily in place to thwart any effort that we put forward. Of course they could command a vast array of expensive resources. When we would go to hearings of congressional committees, two-thirds of the hearing room would be tobacco industry staff, attorneys, lobbyists; and here we'd be, a little group of four or five people and maybe another half dozen from the voluntary health organizations. So they could just overwhelm us all the time. Their presence was constantly felt.

We worked up a project to publicize one of the research findings that had been developed after the report had been issued. I forget now whether we or the Cancer Society did a sample survey of the American physicians: how many physicians were still smoking six months after the report was made public. Well, from that survey, which was a carefully done survey, it was determined that there were approximately one hundred thousand physicians who had stopped smoking. So our PR staff said,

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"Man, there's a story. Let's get a poster out that says, 'One hundred thousand physicians have stopped smoking.' And let's put it on every mailbox and every mail truck in the United States." We had a great idea, we thought. So we had an artist draw up the poster, sent some high person in HEW over to the Post Office Department to get their permission. The Post Office Department had a public affairs poster project for all their facilities and equipment.

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G: You were saying that there used to be an insert or a place on mail trucks and mailboxes where you could have public service announcements.

EG: That's correct. So we received approval from the Post Office Department to put our poster on their facilities. We then went to the production of I don't know how many thousands of copies of this poster, which was a black and white poster. It was terrific. About the eleventh hour when these posters were to be delivered all over the country for placement in post offices, mail trucks and boxes, the Chairman of the Agriculture Committee--I don't know whether it was the House or the Senate--made a call to the Postmaster General to tell him that there were some signs going up on his trucks that shouldn't go up. The next thing we knew we got word back from the Post Office Department that we couldn't put the signs up. Of course that was a very big blow. So we tried to figure out how we could deal with that, and somehow or other a story was leaked to the *Washington Post* that this thing had been held up.

And the reason it had been held up was that there was no attribution to the hundred thousand physicians. There was no fine print to say how that number had been determined.

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(Interruption)

EG: So that was the first obstacle. After discussions with all the appropriate people, it was determined that something had to go on that poster to indicate where the information came from. The tobacco interests made inquiries such as, "Let's have a list of the hundred thousand. How do we know it's a hundred thousand? We want the names of all those hundred thousand physicians." Well, of course this was a sample survey so no such lists existed. So in the course of the next few weeks we had to bring out all of the research data on that study and prove to various people all over Washington that this was a bona fide scientific survey, the findings were legitimate, and that statistical consultants from around the country verified that it was a legitimate claim to make, "a hundred thousand physicians," and that a statement could be placed on the bottom of this poster saying this was obtained from a scientific sample survey, done such and such and so forth. Accordingly, appropriate stickers were printed up and stuck on these posters and because of the story in the *Washington Post*, which gave a front-page story of the way the tobacco industry had held up this public service poster, the Post Office Department had to acquiesce and let it go. We got them out and it was a very popular poster all over the country.

But that kind of thing went on with our budget hearings, with the early hearings on the labeling when the labeling legislation was developed. The hearings that were held on that: "Well, what kind of label do you want to use? How big should the label be?" I can remember countless hours in the Secretary's office of HEW with Secretary Wilbur Cohen. Wilbur Cohen was a hundred per cent behind the legislation and

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trying to get labeling. But he was exasperated with the constant arguments that were thrown up as to what size label, what kind of wording would go on the label. We spent months working out words, choice of words, location of label, how often would it have to appear on the back of--you just can't imagine how that was tied up in many, many hours of negotiation and compromise, compromise, compromise, compromise to try to arrive at something acceptable to all parties.

G: How did the idea of having a warning label on cigarette packages emerge, do you recall?

EG: I don't know specifically, but the concept of labeling itself was a controversial subject even among the advocates of doing something about smoking, as to how much effect it would have. The net result of those discussions were, "Well, it's better than nothing. It may not have an overwhelming effect, but--." A lot of the thinking on those things was that our society had made smoking so easy and such a, quote, "natural" thing to do--you couldn't even go to a restaurant where there wasn't an ashtray on every table. There were always matches at your left or right hand. It was just so convenient to smoke that really it was going to take a major effort in a whole wide variety of different settings to begin to turn society around and away from smoking. One of those things would be to confront people with the dangers of smoking every time they picked up their pack of cigarettes, there'd be that warning label on there. To a certain number of people, that would be effective. If you could remove ashtrays that would help people who would not like to smoke. So it was gradually developed into a strategy to try to work on all these various fronts and make as much progress as possible.

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The National Interagency Council helped develop that sort of strategy, and specific anti-smoking projects would fan that out through their various branches. We'd try to work with members of Congress to get an understanding of that strategy, and to recognize that this was going to be a long process in trying to overcome this. You couldn't do it overnight. We made a major impact with this study and the publicity that flowed from it, but it couldn't stop there. There had to be a continuing effort and that's why we tried to get a budget for the Office of Smoking and Health, and tried to develop a program with multi-facets in it.

As a case in point, I put on or tried to put on a major conference at the American Public Health Association annual meeting to look at the problem of cigarette smoking in the American society and how could we deal with that problem, and overcome the three hundred-plus thousand deaths, millions of chronically ill people each year. How to reduce the public health problem to its smallest amount in the shortest period of time. What would have to be dealt to accomplish that objective?

Well, we decided one major portion of the problem was the advertising industry. We would have to deal with that in the advertising industry. Another major portion of the problem was the growing of tobacco as a major industry in a number of states. That has to be faced, so how do you deal with that?

We wanted a representative of each of the problem areas on the APHA program. I tried to get top-flight individuals from each area. I went to the advertising industry, and do you know, person after person after person had to turn down appearing on that program. They were

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literally scared to death that their publications or their agency would no longer receive tobacco advertising if they came down and talked about how the advertising industry could handle that on the APHA program.

I finally got in touch with a man who had made his millions in the advertising business and didn't care anymore and for personal reasons was an advocate of non-smoking.

G: Who was that?

EG: That was Emerson Foote. He was president of one of the big ad companies for a long time.

G: Had he lost a relative through--?

EG: I think he had and in fact I think he had been sick himself from smoking, and he wanted to make a contribution. I went to the academic agriculture institutions to get somebody from a university to speak on that side, and those men were scared to come for fear their endowment funds would be affected. Between these two, the advertising and the tobacco industry together were an unbeatable lobbying force in trying to deal with the American smoking problem.

Well, to make a long story short, I finally got representatives of advertising, agricultural, taxation, and manufacturing to participate in the program of APHA, and as a matter of fact they did spell out a game plan that they felt could be reasonably undertaken if there was broad enough support in the Congress. It was estimated that maybe as much as 10 per cent of the advertising industry could be related to tobacco ads. But given a period of time to replace that with other ads, no one company was that heavily involved that they couldn't work out of it if they were given a reasonable period of time.

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G: So it was a gradual implementation.

EG: When we looked at the agricultural side, we remembered, we had experience in World War II of converting a lot of farming in the Midwest to sugar beets in order to produce alcohol. And they converted, in that instance almost overnight, farms that had traditionally raised corn and wheat and other crops into sugar beet production. Given a ten- to fifteen-year period with federal subsidy, the agricultural representatives determined that we could convert the tobacco-farm economy into other cash crops given a period of time and with subsidization to make the conversion. If they were willing to do it, it could be done. There was the sugar beet precedent for doing that, and it was thought economically feasible. So we looked at all those things to see if we couldn't develop a federal policy to achieve a ten-fifteen year conversion objective, but we couldn't get to first base with that as a full-fledged federal policy. As I say, the opponents were just too powerful.

But in retrospect, in looking at where we are today and the costs to the country of not having done that, it would have been the cheapest and most productive thing to do. When you look at the costs we have incurred in death and disability and shortened life span of a lot of our most creative, productive minds in the country, it would have been cheap indeed to have formed some sort of a national coalition and policy; to have put this public health problem behind us for the most part.

G: Was there an alliance between the Tobacco Institute and the AMA?

EG: Yes, there was.

G: Tell me about that.

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EG: Well, of course, a lot of the powerhouses in the AMA were from southern states, the same southern states that were tobacco states. So there was a very close relationship among those members of Congress and those leaders in the American Medical Association. It was not difficult for them to become bedfellows. I know in my meetings with the AMA to try to get their support and to try to get them to take a front position we were relegated to the back room. It was very difficult to even get resolutions out of the house of delegates that had any substance, for that very reason.

G: Did it have to do with the AMA's opposition to Medicare, do you think?

EG: Well, there were a lot of things. I'm sure they were trading votes, no question about that, because Medicare was a big threat at that time. There were a lot of changes going on in Medicare legislation that were of great concern to the AMA, and they knew they had the votes of the southern blocs, and to jeopardize that with a strong stand on smoking, nothing doing. Nothing doing. So we really didn't even work too hard at that because it was just too great an obstacle. It wasn't worth it.

I tried to get the American Hospital Association to take a strong stand and believe it or not, a lot of the hospital administrators nixed it because of the income they got from the vending machines and over-counter sales.

G: Is that right?

EG: Yes. They said, "We can't afford to lose that income. We make a lot of money on cigarette machines." I said, "You've got to be kidding me, fellows." No, sir. Let alone the problem of trying to deal with their smoking personnel. It's one thing to deal with the professional staff

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in a hospital, but that's the minority in the hospital. "Most of our staff are blue-collar workers and food service people and all that. To go in there and tell them we're opposed to smoking--I got too many problems, fellows." [They] really threw us out. That isn't to say there weren't some strong people, but look how many years it's taken for most hospitals to become smoke-free environments. A lot of people have been out in front of them. So my own profession was not really willing to come out strongly.

So here we had this beautiful send-off with the effect of that report, and were unable to marshal the follow-up. It was a meager effort that was constantly being stepped on for years after that.

G: Was the newspaper industry sympathetic to the tobacco industry because of the advertising revenues?

EG: Not so much in the newspapers. I think it came more from magazines, radio and TV and that type of advertising.

G: The FTC [Federal Trade Commission] at this point had planned to implement a set of warnings dealing, I guess, not only with labels but also with television advertisements.

EG: We had a real ally there in the--

G: Federal Trade Commission?

EG: Yes. The Director there at that time was very supportive and he went out on a limb a number of times. Senator [Warren] Magnuson of Washington was chairman of the Commerce Committee that FTC came under, and his chief of staff, who later became an FTC chairman, Michael Perchuk, was a strong supporter and did a heck of a lot for us. So we had a few

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well-placed allies on the Hill. But in many instances in other agencies and committees somebody else held the trump card.

G: Well, the warning-label legislation that was introduced and passed in 1965 has been criticized for being too weak, that it really gave the tobacco industry what they wanted in terms of a uniform warning label as opposed to banning television advertising. How do you feel about that?

EG: Well again, there were compromises that were made almost to the extent of bowing out for fear they couldn't get anything.

G: Do you think the President should have issued a stronger statement in support of stronger legislation?

EG: Yes, I certainly do.

G: Why do you think Johnson was not more aggressive in this?

EG: I guess he had to weigh his check and balance system as to what it would cost him.

G: In terms of other legislation?

EG: Other legislation and support he needed for other kinds of things. That's the only way I could rationalize it, because I know we had a strong advocate in our department. Secretary Wilbur Cohen was a strong advocate. He was a pragmatist and he was an old China hand in the Washington scene, so he was not averse to negotiations and compromise, but he was also--when you knew he was on your side, he would work very hard, very, very hard. And he did. I spent many hours with that man. And I became a pretty good friend of his. I helped him out on some problem areas that were foreign to him. He worked very hard, and I didn't try to break his back in the sense that I knew he had other fish to fry and to deal with. So although I was, I think, a hell of a strong

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advocate for what I thought ought to be done, I recognized that up the line, he would need all the armament and material I could give to him to win his arguments.

G: But he did try to prevail on the President to take a stronger position?

EG: He did try, yes. Yes, he did try.

G: Another reason that's given for the failure to secure a stronger piece of legislation was the lack of unanimity among the executive departments on exactly what was desirable. Can you recall what the divisions were?

EG: Well, of course Agriculture was totally against us. Agriculture was totally against us. Commerce was a split house. Of course we had no trouble with HEW. Other departments, I think if anything they would either be on the fence or they would be probably be opposed, because again they'd look into the major appropriations and legislative committees and recognize that they would just create too much of a hornet's nest to be a strong advocate, so we just couldn't muster the forces. And without the medical profession, our most potentially powerful allies, if you will, were not with us either. So we came out with a very weak hand. When you're trying to get other allies who don't normally work in this program area and they see all the problems around, they just don't want to take the risks. It was just a real tough thing.

You almost had to have the top people, even the President himself, it's got to be that much power to overcome all of those other things, and we didn't have it. The President as he saw it did not see fit to take that position. And I think that's what it would have required.

Now, I'll say this. It appeared to me that President Kennedy was prepared to make that [effort].

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G: A stronger--

EG: Yes. He was personally committed. In fact, the Advisory Committee and our staff were at work on the day he was shot. When word came back into Washington--I can remember it as if it was yesterday, the reaction of my staff. We were all working. This is strange, but with all the turmoil that was going on we had a call from the White House asking our group to continue to work. Now Washington shut down, as you can imagine. We were asked, because this was of special concern to President Kennedy, would we continue to work? And we did.

G: Do you know who made the call?

EG: I don't know. I don't know who made that call, but that happened. So I feel, with other things that I had learned from the White House inquiry about our progress, that President Kennedy would have taken a strong stand.

G: Do you think the cigarette-warning legislation was tied into any other major administration proposal in terms of a quid pro quo or horse trade?

EG: No, I can't--

G: Among the anti-smoking forces in the administration, was there a consensus whether or not a ban on advertising would be more effective than the warning label on the cigarettes or vice versa?

EG: I think stronger a ban on advertising.

G: Really?

EG: Yes. And I think that may have had one effect on some of the compromising on the label. Although the labeling was strongly felt to be something that ought to be done, I don't think the advocates felt that was alone going to be a major help. So there was, I believe, more willing-

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ness to go along with a compromise when they did come because once it was determined that you couldn't get a powerful label, like a skull and crossbones and a really sizable warning--when it was pretty well determined that the warning was going to be less than desired, there would be more effort put on curtailing advertising.

G: Was there some call for the skull and crossbones?

EG: Yes. You bet.

G: That was a serious--

EG: Yes. We learned that you better open with almost a ridiculous kind of thing because you knew you were going to have to come off of that, and the bargaining was intense. Every word was an intense scrap. Every word. And of course those were all delaying tactics to try and wear you down. I remember some of those negotiations went far into the night.

G: The Senate seems to have been more favorable to you than the House was, would that be fair to say?

EG: Yes.

G: Anything else on the lobbying by the tobacco industry to--

EG: Well, except it was intense and constant. They hovered over us like a herd of birds. We never could get away from them. They were always there. They deployed a lot of forces to watch us. They were everywhere and they made it their business to keep track of us. We never could come up with anything that they didn't object to. They never gambled that our ideas wouldn't amount to anything. Their efforts permeated not only federal agencies, but went down into states. When I left the federal government and went to work here in the state of Maryland--Maryland raises tobacco--I bumped right into the same thing right here.

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They had a powerful force in the state legislature and they would even filter down to the counties. In fact, we have some county legislation here that prohibits smoking in public places and so forth. The doggone tobacco industry showed up down here to lobby against it.

They're very well organized, of course extremely well financed and with top-caliber people, fine-caliber people.

G: Any thoughts on the question of whether or not the President should actually sign rather than veto the legislation or veto rather than sign it?

EG: No, I don't recall that.

G: He did of course sign it but there was some--

EG: No, I don't recall any discussion of that.

End of Tape 1 of 1 and Interview I

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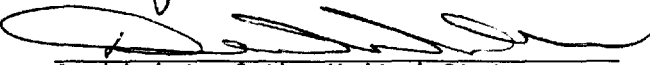
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