

January 26, 1968

Dr. Paul H. Blachly  
Associate Professor  
University of Oregon Medical School  
3181 S.W. Sam Jackson Park Road  
Portland, Oregon 97201

Dear Paul,

The project at Gracie Square has begun and like all such projects is progressing slowly. We have obtained the concurrence of the staff and appointed both a nurse and physician to the staff. I am recommending the appointment of a psychologist whom I have just met. The EEG equipment was delivered this week and the laboratory will be set up early in February. We have written some computer programs for diagnosis using the Hamilton Rating Scale. I expect to make some systematic observations in unilateral and bilateral treatment in March and April, and should be ready to start MMECT in the early summer.

A few days ago I received a phone call from Dr. Strain who heard of my interest in ECT. He reminded me that he is coparticipant in our APA panel, and while I have done little for that presentation, I look forward to it.

I read your notes on Pyridoxine. I know nothing about this compound and the observations are very interesting and warrant further study.

Enclosed is a preliminary report of our experiences with naloxone, as well as a reprint of our cyclazocine data. Of the two drugs, used in the same population, the naloxone gave us less complications, was better accepted and seemed more promising as a therapeutic agent than cyclazocine. I regret very much that we were unable to continue our study because the manufacturer discontinued production because of expense. I am trying in every reasonable political way to urge continued production of the compound for I think it holds much promise.

Incidentally, your comments on acetylmethadol are most interesting, for I have never heard of this material. A year ago we asked Sterling Winthrop (and were supported in our request by NIMH) to produce a long acting cyclazocine. This has not yet been done.

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My best regards.

Sincerely yours,

Max Fink, M.D.  
Professor of Psychiatry

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