

F. Letter

April 5, 1978

Margarite T. Hays, M.D.
Medical Research Service
Veterans Administration
Washington, D.C. 20420

Dear Dr. Hays,

I am pleased to respond to your invitation to assess the work of Dr. Larry Squire, who is being considered for an appointment as a Research Career Scientist.

My association with Dr. Squire began about four years ago when I noted his reports on the effects of ECT on memory. I heard him speak at Rockefeller University and at the Winter Conference for Brain Research, and then joined him on a panel on ECT at the Society for Neuroscience. On each of these occasions, I learned much and was impressed with his knowledge of brain function and memory. When asked for recommendations for a panel being organized by NIMH to assess the status of ECT, I recommended Larry and he became a panel member. Later, when asked to recommend a scientific consultant to the Task Force on Convulsive Therapy of the American Psychiatric Association, I again recommended Larry. In both positions I have worked with him, and shared the task of assessing the effects of seizures on brain function.

Dr. Squire was trained at M.I.T. with my former teacher, Prof. Hans Lukas Teuber -- a critical thinker and teacher. I believe Larry learned much there, and came away with a keen interest in the problem of memory, its retention and its loss. I think it is to his individual credit (since such studies were not in Dr. Teuber's repertoire) that he saw the merit in examining memory function and amnesia in the one reversible paradigm in man which is ethical to examine, that of convulsive therapy where amnesia is a regular feature of the treatment. Further, since the amnesia is reversible, Dr. Squire had the advantage of examining its development and its recovery, in the same patient, within a time span of weeks to months -- surely finite enough to be credible.

The techniques for the study of memory function in ECT are the standard psychological paradigms. Since Larry became interested in the long term effects of ECT, he developed novel tests of memory based on TV exposure during different decades. His tests are novel and seemingly sensitive, and have become accepted not only in ECT research, but in

studies of memory in drug assessment and neurosurgical interventions.

While most of his emphasis in the past few years has been in the ECT process, I think his interest is broader, in the memory process itself. To this end, he has undertaken studies of amnesia following surgery, trauma, and in systematic studies in animal experiments. His work has consistently been well designed, carefully done, statistically sound, and with the most reasonable controls. His evaluation of the differences between unilateral and bilateral ECT are among the most compelling new data in this field, and his assessment was an important feature of the recommendation by the APA Task Force that unilateral ECT be considered the primary mode of treatment in depressive illnesses.

I believe his work to be sound. He has shown the necessary skill to deal with clinicians, and he has attracted bright young researchers to his laboratory. My assessment is best expressed by the fact that when the Long Island Research Institute, a research arm of this Department of Psychiatry, was seeking young talent for its staff, I recommended him highly and sought him out. Unfortunately, Long Island did not seem as attractive as Southern California. Nevertheless, my offer remains.

His work at the APA Task Force and the NIMH evaluation show him to have good political skills. His presentations were well documented, and I have every reason to be pleased with my recommendations.

While he is young in years (37), his experience since his doctorate (1968), and his record of publications and presentations support the recommendation for his appointment as an Associate Professor.

I am pleased to recommend him to you.

Sincerely yours,

Max Fink, M.D.
Professor of Psychiatry