

14 April 1988
1400-1

Mr. Christopher W. Besant
Campbell, Godfrey & Lewtas
Barristers & Solicitors
P.O. Box 36
Suite 3600
Toronto Dominion Centre
Toronto, Ontario M5K 1C5

Dear Mr. Besant:

As I explained to you in our recent conversation the difficulties encountered between Mr. Greenhalgh and the University of Waterloo should be resolved between the two.

The Medical Research Council does not provide research grants to applicants who do not have the assurance of facilities and the ethical conduct of research by an accredited institution. In our case this is a university, hospital or affiliated research institution. Thus, a research grant to Mr. Greenhalgh is out of the question.

However, the possibility of an award to pursue PhD training at a Canadian institution is very real. Mr. Graenhalgh would submit an application for an MRC Studentship (MRC 21 enclosed) at the next competition (December 1, 1988). If judged worthy he could receive support. Dr. Pace-Asciak said the same thing to Mr. Greenhalgh on May 26, 1986. With Dr. Pace-Asciak as supervisor, for example, is the only route the MRC could consider supporting his research training.

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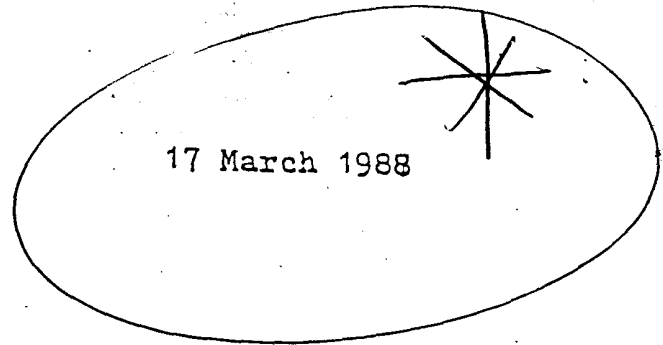
From : Edward A.Greenhalgh
265-7 Regina St.N.,
Waterloo ,Ontario.
N2J 3B9

To

Dr.Lewis Slotin

and the

Medical Research Council of Canada



re : A Granting Proposal

Dear Dr. Slotin,

This is a direct and open letter to
MRC concerning research integrity and funding. Yes, this letter
does bypass your normal channels, but because of unfortunate
circumstances (manufactured or otherwise) these are not available
to me — forcing my actions.

I have been informed by my legal representative, Mr. C.W.Besant of the firm Campbell,Godfrey, and Lewtas that you do not feel that MRC should hold my former supervisor's (Dr.J.C Carlson of the University of Waterloo(U of W)work to judgement -- even though it may be wrong, and other work (of direct concern to science) proving it inadequate not allowed full public review. The matter must be pointed out that MRC has supported work carried out by an individual (J.C.M.Riley) who only held a general BSc. in physics whose PhD. Thesis is refuted by my original MSc. thesis. You do not wish to compare the two — do your medical research funding referees have general BSc.s in physics? This is a legitimate question because you may not honestly have the ability to perceive the work as flawed.

You may not wish to judge his work but through my own efforts I have had my own theories tested. The material upon which I wish to pursue a Ph.D. have been reviewed, without biase, by Dr. Pace-Asciak of Toronto's Sick Kids. You should note (see photocopy of the letter) that he considers it may have clinical applications. I do not know (see date) if his offer is still available since I have suffered a terrible delay. Further, review the letter of Prof. G.P.Vinson of the Journal of Endocrinology (England). The work you do not want to judge has already been reviewed as a paper (but it was actually an abridged version of the thesis that 'U of W' would not accept). Please note that professionals away from U of W consider my thesis to be of interest -- enough so that it may be published if rewritten, which I am actively doing.

You generally fund on the merit of the project and the ability to publish. I have demonstrated merit, but consider the following : as an undergrad at Laurier I produced -- without your help or any other funding — a single author publication (Toxicology (1986) 42, 317 - 330) which has received considerable world

attention, along with being requested by the American and Canadian governments, plus the American manufacturer, of chloradane, Vesicol. In this paper I was able to show results to questions that had only been hypothesized before, never conclusively proven.

I have now produced a body of work that seems to be being suppressed since it challenges some established workers. In short, I agree with people like Helmreich and Elson, and Nicolson in criticizing bulk membrane fluidity, but more importantly I prove (if allowed a public audience) that bulk membrane fluidity does not have a significant role in signal transmission, and, indeed, that the whole concept may be questionable. This point is of critical medical importance since a great deal of cancer research is based on membrane fluidity concepts. If it is bogus, wouldn't honest workers want to be so informed in the struggle to save lives? If not, then shouldn't the taxpayer, who trusts you to safeguard his/her life, hear this? I believe it is important, so much so, that if you are a scientific body committed to funding legitimate medical research, that I am compelled to ask you directly for funding.

I am presenting you with two possibilities:

1. Out and out funding for a *Ph.D.* at the centre of my choice ;
2. A test, a summer research grant to prove my point, and if I succeed, then point 1 to be granted.

First, let us discuss point 2. My contention is that my MSc. thesis casts very serious doubt on the Ph.D. thesis of J.C.M.Riley and that Dr. Carlson's work in the past has been based on erroneous assumptions. You do not wish to sit in judgement? Fine, let me prove my point.