



UNIVERSITY OF MINNESOTA
TWIN CITIES

January 31, 1973

Department of Medicine
Medical School
Mayo Memorial Building
Minneapolis, Minnesota 55455

Charles Berry, M.D.
Director of Medical Programs
N.A.S.A.
Washington, D.C.

Dear Chuck:

I thought that I might summarize what I believe I said to you regarding the dilemma related to the proposition that Donald Slayton return to the active astronaut group with the possibility that he might be a member of the American-Russian docking venture.

As already stated, I believe that the decision is primarily an administrative one in which the directors of the program will have to come to grips with the question as to whether Mr. Slayton has such extraordinary skills and experience that they would outweigh the minor risks associated with his arrhythmia. If he were returned to the program, one could expect continuing administrative entanglements, including possibly an involvement of a panel of Russian cardiologists giving an opinion as to the potential hazard.

I do not believe that the condition should prohibit him returning to the program, but it would be a relative contraindication. The arrhythmia itself as documented, has little risk, but the remote chance of the paroxysmal atrial fibrillation being a forerunner of a ventricular arrhythmia does constitute a minor worry, and this would be the calculated risk that one would take in allowing him to return to the program. If he returned to the program, the questions of whether quinidine prophylaxis should be reinstituted or whether a digitalis maintenance dose should be given. Despite reasons that could be brought to bear on these problems to support the giving one or other of these drugs, I would be inclined not to do so. If he did enter the program again, in my opinion, the astronaut kit should contain digitalis in the parenteral form of either Lanoxin or Cedilanid.

Sincerely,

Howard

Howard B. Burchell, M.D.
Professor of Medicine
Head, Cardiology Section

HBB:fmw

P.S. I do hope that Mrs. Berry is getting along satisfactorily and that she is not too self-conscious of the minor facial weakness. From your description, I expect that this will become imperceptible within a few weeks or months.

H
H.B.B.