calculated in their study, and then possibly on the basic problems connected with the use of kappa as a measure of reliability or reproducibility.

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REFERENCES
7 Landsis JR, Koch GG. The measurement of observer agreement for categorical data. Biometrics 1973; 33:159-174

Ohio or Florida. It does not matter at all to my patients where the research was done or the procedure invented. In fact, it is wonderful that my patients and I get to profit from the discoveries funded by taxation of the citizens from some other country. Dr. Mehta frets about loss of world competitiveness with other countries producing good science and competing with us. But he should know that science is not a zero-sum game, with their gains being our losses. We all benefit from their advances. And his analogy to loss of American domination of industries such as consumer electronics is off target as well. While it is true that some Americans lost jobs when consumer electronics increasingly started being built overseas, the net result was that Americans could buy electronics at lower prices, giving us more choices and more money to spend on other things, with resultant increases in jobs in other fields.

In short, patients should be thrilled: the higher relative income of practicing clinicians means that increasingly the best and brightest doctors will be caring for them, rather than experimenting with mice. Taxpayers can be happy; taxes can be less than they otherwise would be as other countries fund more research and as we keep labor costs low by hiring top-notch foreign researchers willing to work for less. The only people who can complain are those few who want more of my wealth diverted to them, and I certainly will not be asking my congressmen to do that by raising my taxes.

Jordan S. Weingarten, MD, FCCP  
Austin, Texas

REFERENCE
1 Mehta JL. Funding for biomedical research: What happened to our share of the nation’s wealth? Chest 1998; 113:565-566

To the Editor:

I read Dr. Weingarten’s letter with great interest, and was indeed shocked at his response. I have received numerous letters of support from physicians and scientists and members of the US Congress. There are currently bills in Congress to double the medical research budget over the next few years.

I would only state that the cost of research is much less, and benefits to mankind much more than the billions spent on missiles, bombs, fighter planes, and aircraft carriers for which Dr. Weingarten pays.

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Tuberculin Responsiveness in Hemodialysis Patients

To the Editor:

Decreased cellular immunity and tuberculin reactivity have been previously documented in hemodialysis patients. Recently, Smirnoff and colleagues (January 1998) reported increased rate of anergy and tuberculin nonreactivity in this group of patients. We also evaluated tuberculin response and its relation with demographic features, nutritional parameters, and peripheral blood lymphocytes subsets distribution in cross-sectional-controlled study. In our study, response to intradermal 5 IU PPD (InterVax Biologicals Limited; Toronto, Canada) was assessed and a second tuberculin test was performed to all tuberculin nonreactor patients for booster effect 1 week later. Twenty-nine

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