Historical Case 1—Allocating Insulin

About 1 of every 16 people in the United States has diabetes, a disease of excessive sugar in a person's blood. There are two forms: type 1 and type 2. In the early 20th century, scientists knew that type 1 diabetes was caused by problems with the pancreas, yet it remained a fatal illness, and many people with the disease did not live very long. In 1921, though, Canadian biologist Fredrick Banting and University of Toronto medical student Charles Best isolated a chemical from the pancreases of healthy animals. When they injected it into animals with type 1 diabetes, the animals' blood sugar decreased to normal levels. Banting and Best named this chemical **insulin**. The discovery of insulin made it possible for people with type 1 diabetes to live with their condition. In 1923, Banting was co-awarded the Nobel Prize in Physiology or Medicine.

When people heard the news about insulin—including physicians and patients from throughout the United States and Canada—they wrote, called, and stopped by to ask for some. Only a very small amount was available during the first year after the discovery, though, because mass production of insulin was not yet possible. At first, Banting, who was practicing medicine in Toronto, was not sure what to do.

**Stop reading here and write your answer to the question below before turning to the next page.**

In your opinion, what would have been the fairest way for Banting to distribute the insulin?
Banting decided that he would use a third of the insulin to treat patients in his own private practice. Another third he would use in a separate local clinic that he oversaw. The rest he gave to the Toronto General Hospital and Hospital for Sick Children.

Write your answer to the questions below.

Do you agree with how Banting distributed the insulin? Why or why not?