NIH SPEAKERS AT N. Y. CONFERENCE

An International Conference on Nutritional Factors and Liver Diseases was held under the auspices of the New York Academy of Sciences in New York City on February 13 and 14.

Dr. Klaus Schwarz, Chief of the Liver Disease Unit, NIAMD, organized the conference and presided as chairman. Many leading investigators from the United States, Canada, Chile, Puerto Rico, Union of South Africa, East Africa, and Jamaica attended the conference, and 33 of them presented papers on advanced research in the field.

Among the NIH speakers were Dr. Klaus Schwarz, Dr. Floyd S. Daft, and Dr. George Fite.

Dr. Schwarz discussed "Factors Involved in the Protection Against Liver Necrosis." He stated that dietary necrotic liver degeneration is a complicated deficiency disease and at least three different dietary factors are involved. The ration must be low in cystine, free from vitamin E, and deficient in factor 3—each of these three principles can afford protection.

Dr. Floyd S. Daft discussed the differentiation between liver necrosis and liver cirrhosis and dietary factors affecting their development. He stated that it is now generally accepted that experimental necrosis and hemorrhage of the liver produced by dietary means is a disease entity quite separate from experimental dietary cirrhosis.

Dr. George S. Fite presented a paper on the "Pathology of Dietary Necrotic Liver Disease." He said that dietary liver necrosis is the terminal stage of a degenerative process within the liver cell, and that histologic changes appear only a short time before actual necrosis occurs.

New Switchboard at NIH

As a means of giving all NIH employees an opportunity to see the Clinical Center facilities before patients are admitted, regular tours, commencing February 16, have been inaugurated.

Tours are booked on a reservation basis. Employees are asked to contact their Administrative Officers, who will make reservations for them. Before each tour, visitors assemble in the Main Lobby of the Clinical Center at the specified time to verify their reservations and meet their guide.

Regular tours on working days begin promptly at 9, 10, and 11 a.m., and 1:30, 2:30, and 3:30 p.m. On Saturdays and Sundays, tours begin at 2, 3, and 4 p.m. There are no regular tours on holidays.

Tours reservations are limited to twelve persons per trip. Employees may be accompanied by members of their immediate family, including children of high school age. NIH reserves the right on week-end tours to limit the number of reservations available for members of immediate families.

About forty volunteer employees underwent intensive training as guides to conduct these tours. The standard tour is arranged to cover twenty stops at various points of interest within the Clinical Center, and takes an hour and a half to complete.

Because construction is still under way in most areas of the Clinical Center, the contractor has complete jurisdiction over access to these areas. Arrangements for these tours, therefore, have been made with the contractor, with the understanding that the groups will visit only the areas covered by the tour guide. Special follow-up tours to see specific points not included in the

(See Tour, Page 3)
At the present time, the Section on Epidemiology and Biometry, NIDR, is carrying on several projects in epidemiological research. Cooperating in these studies are Drs. Albert Russell, Richard Hayes, Eugene Zimmerman, and Mrs. Evelynne Friend.

One investigation, being conducted in nearby Prince Georges and Montgomery Counties, concerns the study of oral health in school children as they become progressively less susceptible to dental caries through fluoridation of the community water supply. The purpose of the study is not to test the fluoride-dental caries relationship, per se, but rather to uncover other phenomena important to knowledge of the epidemiology of periodontal disease, dental caries, and dental growth and development—for example, differences in the character and prevalence of gingival disease with age, sex, race, and socio-economic status.

Initial examinations began in January. Study groups include 4,400 elementary and junior high school children selected to provide maximum residential stability and a marked range in socio-economic status.

Another project that the Section is working on is the development of a yardstick for the objective measurement and comparison of periodontal disease. Such a measure, called the "periodontal index," has been devised and in its present form expresses the periodontal status of a tooth or person as a simple numerical score. Field experience has indicated that the index is reasonably objective, that no additional examination schedule is required, and that tabulation of results in a practical situation will be simple. Details of the index will be published within the next year.

The Section is also trying to determine whether climate can modify a person's drinking habits, in order to learn whether seasonal allowances need to be made in the fluoride level of a water supply. In a preliminary study, climatological data and fluorosis scores were obtained on fifty-six cities in eleven states. Inspection of these data suggests that both temperature and humidity may be factors in influencing the degree of dental fluorosis in areas where the natural content of fluorides in water is high, but nevertheless may have little effect at fluoride levels recommended for community water supplies.
1. Because of the 24-hour-a-day operation of the Clinical Center, is it possible that a good many NIH employees may find their present working hours changed? The only people affected by a round-the-clock operation of the Clinical Center are those concerned directly with patient care and some maintenance personnel. The majority of employees now at NIH will find no change in their working hours.

2. Will the cafeterias in Buildings 1 and T-6 continue to operate after the Clinical Center is open, or will all employees be expected to eat at the Clinical Center cafeteria? The cafeteria on the third floor of Building 1 will cease operation about June 13. Tentative plans call for moving lunch service to the ground floor in the south wing of Building 1, improving lunch service in T-6, and making some type of food service available at a central point in Building 13.

The Clinical Center cafeteria will serve approximately 600 people at a time. All food served on the NIH reservation will be prepared in the kitchen adjoining the cafeteria. There will also be a snack bar in the Clinical Center to accommodate 60 people. It will remain open later than the cafeteria for the convenience of night-duty employees.

3. What plans have been made for parking facilities for employees, follow-up patients, and visitors? Adequate parking areas are being provided in front of the Clinical Center and on the east and west ends of the building.

4. Who will live in the apartment building opposite the Clinical Center? The 80-unit apartment building will house certain nurses, resident physicians, and other key members of the Clinical Center staff needed for patient emergencies. Occupants will pay the prevailing area rates for similar accommodations.

Note: If you have any questions, send them to the NIH Record.

TOUR Cont’d

regular tour will be arranged upon request at a later date, insofar as these visits do not interfere with construction or operations within the Clinical Center. Because of construction difficulties, the contractor from time to time may require some re-routing.

**CLINICAL CENTER QUIZ**

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**NIH Spotlight**

JULIA ROWADY

If you belong to the RandW Association or the Hamsters, you've surely heard of Julia Rowady, NIMH, one of the most enthusiastic supporters of both these NIH organizations.

This year, after serving for two years as R and W Membership Chairman, Julia was elected to the Board of Directors. As a Hamster, she has participated in all the shows produced by the NIH drama group in the past three years.

Julia is one of those versatile people who can undertake almost any job and do it well. In the first Hamster production, she was narrator. The second found her playing several roles, and, in the third show, she served as prompter and handled ticket sales.

Julia's job in the Office of the Director, NIMH, makes it necessary for her to know about all the programs of the Mental Health Institute. She is the planner and coordinator of a variety of administrative functions. She develops and writes the administrative procedures for the Institute. As forms clearance officer, she participates in the preparation of forms and instructions necessary for the execution of the Institute's programs; is responsible for the organization and functional charts of NIMH; and serves as a special assistant to the Institute Director and his staff on matters pertaining to the Mental Health Council and the Institute's other committees of consultants.

Julia's interest in business administration dates back to her college days at the University of Kentucky, where she majored in this field. Her first job was with the Kentucky State Department of Revenue. Julia left her native Kentucky to come to Washington to work for the Social Security Administration. In 1947, she transferred to NIMH and has been here ever since.

Julia's interests are extremely varied. She likes to travel and has seen a large part of the United States, Canada, France, England, Switzerland, and Italy. Reading, sewing, and dancing also rate high as pastimes with Julia.

Among her assorted talents, she can list rather unusual linguistic skill. She speaks Arabic like a native. Her parents were from Lebanon and recognized the cultural advantages in speaking to their children bilingually. Julia says that some day she would like to learn to read and write Arabic—a desire far more ambitious than the average person realizes.

**LOST AND FOUND**

The following articles have been found on the NIH reservation.

- Earring
- House key
- Scarf
- Car keys
- Tie clasps

If any of these belong to you, come to Rm. 16, Bldg. 1. Any items not claimed by March 23 will be returned to the finder.

**CHARLES TODD RETIRES FROM NIH ON FEB. 28**

Mr. Charles H. Todd of the Metal Shop, Buildings Management Branch, will retire on February 28, after 35 years of Government service.

Mr. Todd has been affiliated with NIH since 1920, the year he started as a lab attendant in the Hygienic Laboratory. Previously, he worked for the War Department and served in the Army from 1917 to 1919.

In commenting on Mr. Todd's retirement, Clarence W. May, Chief of the Buildings Management Branch, said, "Charles Todd is one of our most efficient and best-liked workers. I'm sure I speak for his many NIH friends when I wish him good luck and happiness."

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R & W NOTES

The new series of dance classes inaugurated by the R & W Association on February 4 are very well attended. Over 120 prospective students crowded into Wilson Hall for the first class. Since then, the group has divided into Monday and Wednesday night classes, meeting in Wilson Hall at 8 p.m.

Prior to Christmas 1951, the R & W Association purchased music books for the carolers at the annual NIH Christmas program. Later the books were stored away, but last Christmas no one could find them. If any of you have an idea where the music books are, please call Miss Ora Marshino on Extension 2744.

HAMSTERS BEGIN WORK ON 1953 PRODUCTION

Word has reached us that the Hamsters, NIH’s own drama group, are beginning to work on their 1953 production. Script writers are busy but willing to lend an attentive ear if you have any ideas for skits. Call Erv Liljegren, Ext. 2767, if any thoughts on the subject strike you. The Hamster show is expected to be presented in June.

The Hamsters are also contemplating new lines of endeavor this year. There is a good possibility that they will present a one-act play on television. Erv Liljegren would like to talk with you if you are interested in either the acting or the writing end of this presentation.

HARVEY WOLFORD, P&S, DIES ON FEBRUARY 9

The NIH Record regrets to announce the sudden death of Mr. Harvey Wolford of a coronary thrombosis on February 9.

Mr. Wolford had been with the Government for nearly 31 years. He came to NIH and the Purchase and Supply Branch in 1947. As a purchase analyst, Mr. Wolford compiled all statistics and reports on the activities of the Branch.

Mr. Wolford is survived by his wife, Almeda, and three children, Myra, Neal, and Dale.

The NIH Position Classification Program

Fair treatment for all its employees is a major management aim of NIH. Thus, fair treatment in the important matter of salaries is the purpose, too, of the position classification program. Perhaps no section of NIH affects us more personally than the Classification Section of the Personnel Branch, which classifies our positions and then determines the salaries we are to be paid.

The classification work of NIH normally is the responsibility of the Classification Section, headed by Mr. Eckart Wipf, and the Personnel Generalists, who are in effect personnel officers of the particular Institute or Branch to which they are assigned.

The position classification plan of the Federal government may be briefly as follows: (1) the Congress has established the policy that employees shall receive equal pay for work of substantially equal difficulty and responsibility; (2) the Civil Service Commission issues standards for classifying positions; (3) supervisors determine what positions they need to establish to carry out their programs; (4) then, using the position descriptions and applying the standards issued by the Civil Service Commission, the Personnel Branch determines the proper schedules, series, and grades, such as GS-301-7.

Because the authority delegated to NIH to classify positions is limited, some must be classified at the PHS and FSA level. Position classification has many uses other than setting salaries. For instance, the series assigned to a position determines the civil service register to be used and the necessary qualifications requirements. If reductions in force become necessary, the grade and series are important in determining which employees are to be retained.

Last July the Personnel Generalists, under Mr. Wipf’s direction, began an annual classification review of all civilian positions. Under this program, the supervisor certifies whether or not each position is necessary, and whether the necessary ones are accurately described. If the position description is inappropriate, a new one must be prepared and classified. By this annual review, the Personnel Branch plans to correct inequities and to keep classification operations current.

This is quite a sizeable task when it is realized that there are now about 2,200 people at NIH. The growth of NIH and this inventory and responsibility; (2) the Civil Service Commission issues standards for classifying positions; (3) supervisors determine what positions they need to establish to carry out their programs; (4) then, using the position descriptions and applying the standards issued by the Civil Service Commission, the Personnel Branch determines the proper schedules, series, and grades, such as GS-301-7.

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This is quite a sizeable task when it is realized that there are now about 2,200 people at NIH. The growth of NIH and this inventory program required the writing of over 800 new position descriptions in 1952. An additional 2,000 position classification actions were taken.

A copy of their job description is available to all classified employees of NIH through their supervisors. Classification standards are also available in the Personnel Branch to anyone who wishes to see them.

Under the provisions of the Classification Act, an employee may appeal the classification of his position. The Civil Service Commission urges that employees file any appeals within their own agency, although they may appeal directly to the Commission itself.

Safety Tips

Be sure to use a rubber container to transport nitric acid from the stockroom to your laboratory.

If you work with radioisotopes, check your hands and clothing with a Geiger counter before leaving your laboratory.