Six NMI scientists will represent the new Division of Biologies Standards in the plants of the six pharmaceutical firms licensed to manufacture Salk poliomyelitis vaccine.

Dr. Carl F. T. Mattern has been assigned to Eli Lilly & Company, Indianapolis; Dr. Louis J. Olivier to Parke, Davis & Company, Detroit; Dr. Henry K. Beye to Wyeth Laboratories, Inc., Marietta, Pa.; Dr. Roger M. Cole to Cutter Laboratories, Berkeley; Dr. Joseph Greenberg to Sharp and Dohme, Glen Olden, Pa.; and Dr. Donald W. McKinstry to Pitman-Moore Company, Zionsville, Indiana.

The scientists will serve as technical aides on poliomyelitis vaccine production procedures and records, and will assist in the resolution of any production problems that might arise. The appointees will make frequent visits to the plants to facilitate a more rapid exchange of information between scientists of the pharmaceutical industry and the Division of Biologies Standards.

Announcement was also made recently of the formulation of a new program of developmental research in the Division. These studies will be aimed at discovering new knowledge immediately applicable to the further improvement of vaccine production and testing techniques. The program will be a cooperative effort of university, industrial, and government laboratories, and will be coordinated by the NIH Technical Committee on Poliomyelitis Vaccine.

Included in the program's series of short-term projects are studies directed toward improvement of monkey safety tests, consideration of other strains of polio virus for (See Division, Page 4)

Dr. William H. Sebrell, Jr., NIH Director since 1950, will retire August 1, after 30 years with the Public Health Service. He will be succeeded by Dr. James A. Shannon, presently Associate Director of NIH.

Dr. Sebrell has accepted an appointment as research consultant for the American Cancer Society, and will direct its institutional research grants program.

Commenting on Dr. Sebrell's retirement, Surgeon General Leonard A. Scheele said: "Since last January when Dr. Sebrell first told me of his plan to retire from the Service at the completion of 30 years of active duty as a commissioned officer, I have been regretful that the Public Health Service was to lose his services. His directorship has been invaluable in bridging a complex period of transition, not only in our own expanding research program but in medical research the world over...."

Dr. Shannon, Associate Director of NIH since November 1952, has been responsible for the development of the NIH research program. Prior to 1952, he was Associate Director in charge of research, NIH.

A graduate of the College of the Holy Cross, Worcester, Mass., Dr. Shannon received his medical degree from New York University in 1929, and his Ph.D. in physiology from the same university in 1935. Following completion of his internship at Bellevue Hospital, New York, in 1931, he entered medical teaching at NYU where, in 1942, he became Director of Research Service at Goldwater Memorial Hospital, the third medical division of the University. From 1946 to 1949, he was Director of the Squibb Institute for Medical Research. He came to PHS in 1949. Active in World War II malaria control programs, (See Director, Page 3)
Colorado Tick Fever Studies
At Rocky Mountain Laboratory

No. 144 in a Series

Colorado tick fever, an acute virus infection of man which follows the bite of the Rocky Mountain wood tick, is being studied by investigators at NMI's Rocky Mountain Laboratory in Hamilton, Mont.

Evidence to date indicates that Colorado tick fever is the most common tick-transmitted disease in the western part of the United States. An estimated 500 cases a year occur in Colorado, and other States in the Mountain area of the west also appear to have a high incidence. RML investigators have isolated virus from patients living in northern California, Colorado, Idaho, Montana, Nevada, Oregon, Utah, eastern Washington, and Wyoming. Visitors to these States also become infected.

Research conducted by Dr. Carl M. Eklund, and associates, Glen M. Kohls, Drs. James M. Brennan, William L. Jellison, David B. Lackman, and W. J. Hadlow, indicates that Colorado tick fever may be a serious disease; children under 10 have had a temperature of 105°, and have been seriously ill with symptoms of encephalitis.

There is little natural resistance to the disease, but fortunately, one attack appears to confer permanent immunity. The persons affected are those whose occupational or recreational activities bring them in contact with ticks—for example, tourists, cattlemen, sheepmen, and foresters.

Symptoms of Colorado tick fever are chills, fever, and general aching, with severe pain in the lower back. After two or three days, the patient begins to feel better. Then a few days later there is a recurrence of all the symptoms for a few days more. The white cell count drops markedly, and convalescence may be prolonged.

All cases have occurred in the area where the Rocky Mountain wood tick (Dermacentor andersoni) is the only tick that commonly attacks man. Other tick species have been found infected, but these do not ordinarily feed on man and are not considered to be of any importance in causing human infection. They may, however, be of importance in maintaining virus in animals and so, indirectly, play a part in maintaining the infection in the Rocky Mountain wood tick.

RML investigators have found that the larval and nymphal stages of the wood tick and small rodent hosts are probably of chief importance in maintaining and disseminating the infection in nature. Work regarding the maintenance and distribution of virus is being continued.
MAY BE REVOKED

Employees who filed waivers to group life insurance coverage before January 1, 1955, may now be insured by filing a written notice of revocation prior to September 1. These notices are available in the Personnel Branch, Room 21, Building 1, ext. 2454.

The Group Life Insurance Plan provides for each eligible employee to receive life insurance coverage to the amount of the next thousand dollars above his annual income. Payroll deductions at the rate of 25 cents per thousand dollars are made each biweekly pay period. Commissioned Officers are insured for an amount approximating their base pay, with a proportionate amount deducted from their paychecks each month.


director Cont'd

Dr. Shannon was awarded the Medal of Merit for his work.

Dr. Shannon is married to Alice Waterhouse Shannon, a physician in PHS's Division of Public Health Methods. They have two children, Alice 17, and James 16.

Dr. Sobrell has earned a worldwide reputation, particularly through his studies on the B vitamins. In the 1920's, he was a member of the PHS team that established the dietary origin, prevention, and treatment of pellagra, then one of America's most serious deficiency diseases. In the course of his work, Dr. Sebrell discovered the cause and cure of another deficiency disease, riboflavinosis. He has also received scientific acclaim for important findings in the dietary cause and treatment of liver disease, the effect of pantothenic acid deficiency on the adrenal glands, nutritional effects of sulfa drugs, and the cause and treatment of blood abnormalities.

Prior to assuming the directorship of NIH, Dr. Sebrell was director of the Experimental Biology and Medicine Institute, now NIAMD.

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NIH Spotlight

Dorothy E. Quinn

If the phones in the NIMH Clinical Investigations Director's office seem to keep up a constant jangle, it's with good reason. On the answering end of extension 3461 is brisk, cheerful Dottie Quinn, whose readiness with the right answers to inquiries of all sorts has made her a valued contact in the Branch. As secretary to Dr. Robert A. Cohen, she is daily called on for duties ranging from time and leave work to arranging "on call" rosters for NIMH doctors and setting up intra-Institute consultations.

Since coming to NIH in 1950, Dottie has worked in NIMH. Her first post was as secretary to Dr. Mabel Ross, Director of the Mental Health Study Center in College Park. Two years later, she moved onto the reservation with an assignment as secretary to Dr. John Eberhart, then Chief of the Institute's Research Grants and Fellowships Branch. She came to her present job in November 1953.

For eight years before coming to NIH, Dottie served as secretary and "Girl Friday" for the Post Surgeon and Admitting Officer of the Walter Reed Hospital. She found this a very interesting assignment, but remembers with a groan the seemingly endless streams of prospective patients during the World War II. Her other Government experience includes a two and a half year stint with the Federal Reserve Board.

Born in Takoma Park, Dottie attended Central High School and Strayer Business College. Her first choice of a career was teaching, and she accordingly enrolled in the Kelllogg School of Physical Education in

employee HEALTH NOTES

An indispensable item for a family vacation is the "traveling medicine cabinet," stocked with first-aid equipment and several simple household drugs. The "cabinet" should include sealed sterile gauze, adhesive tape, band aids, sunburn preparations, a mild antiseptic, any type of soap for poison ivy, baking soda for insect or jellyfish stings, and a small scissors or knife. If your physician has given you special medicine, ask him to give you an extra prescription in case you should break or misplace the bottle. A motion-sickness preventive (obtained by prescription) will be a wise addition to the kit if you are travelling with young children or plan any extensive trips.

Should a member of the family become injured or ill, you may have to call a physician who is a stranger to you. The best way to obtain a good physician in a strange town is to call the nearest hospital or the office of the county or city medical society. You might also check with the local health officer or public health nurse. Many towns have physicians' telephone exchanges that will help you get medical attention in a real emergency.

Battle Creek, Mich. After a year, however, she changed her mind, returned to Washington and took a job in the classified ad department of the Washington Star. During her two years there, she attended George Washington University at night, taking a journalism course.

Outside of working hours, Miss Quinn is an active and enthusiastic member of the Red Cross Volunteer Motor Service, and spends many hours transporting patients from various Washington hospitals to sporting events, theaters, or just plain riding. She is also qualified as an ambulance driver and is subject to call in time of emergency. She has been in the Service since 1941, and was appointed a night vice-chairman of the D. C. Chapter last June.

Dottie describes herself as a "non-acting" member of the Hamsters, preferring the behind-the-scenes tasks of publicity, props, ticket selling, and script writing. A tireless Recreation and Welfare Association worker, she is currently serving her second term as NIMH Division Representative.

HEALTH NOTES

"Non-acting" member of the Hamsters, preferring the behind-the-scenes tasks of publicity, props, ticket selling, and script writing. A tireless Recreation and Welfare Association worker, she is currently serving her second term as NIMH Division Representative.
Early reports indicate that the new photo finishing and developing service will be one of the most popular service activities sponsored by the Association. The first floor Cloak Room in the CC is the pick-up and delivery point; hours of business are 11:30 a.m. to 1:00 p.m. each workday. Speedy service is available for all types of black and white and color film processing.

The NIH Camera Club has discontinued its regularly scheduled monthly meetings until September. The summer project for members is "NIH Gardens," and members are asked to bring as many prints as possible to the September meeting. For further details, call Mrs. Kenney on ext. 3463.

Olive Johnson Accepts Position in Pittsburgh

Miss Olive Johnson, Chief of CC's Medical Record Department, and Acting Chief of the Admissions and Follow-Up Department, will leave NIH July 29 to accept a position with the University of Pittsburgh. She has been appointed Medical Record Librarian-in-Chief of the University Hospitals, and will coordinate the records and reports in the seven hospitals. She has also been named to the staff of the University's School of Public Health, where she will organize the basic records and reports for medical care studies.

Since coming to NIH in 1952, Miss Johnson has organized the record and report systems of the Medical Record Department. She joined PHS in 1945.

Bloodmobile Aug. 16

The Red Cross Bloodmobile will visit NIH Tuesday, August 16. Donor appointments will be scheduled from 9:30 a.m. to 3 p.m. in Wilson Hall.

Division Cont'd

Inclusion in a vaccine, studies on standardization of the susceptibility of tissue cultures, and development of concentration methods for use both in safety testing and in routine production processes.

The success of a surgical operation hinges on many factors. One of the most important is the use of a safe, effective anesthesia.

Providing the anesthesia for Clinical Center patients is the function of the Anesthesiology Department. Headed by Dr. C. L. Hebert, the Department consists of four physician anesthesiologists, one nurse anesthetist, one inhalation therapist, and one secretary.

After major surgery is scheduled, some type of anesthesia must be selected. A member of the Anesthesiology Department consults with the surgeon and patient and studies the patient's condition and clinical record. The anesthesiologist studies closely the factors involved in the operation, i.e., the extent of surgery, estimated time involved, possible use of auxiliary devices (for oxygen, blood transfusion, etc.), then selects the anesthesia to be used.

Regional and general types of anesthesia are administered in the Clinical Center. The regional, or nerve-blocking types in use here include spinal and caudal anesthesia; of the general types, causing loss of consciousness, intravenous pentothal and inhalation agents, such as ether and nitrous oxide, are used. A combination of pentothal and nitrous oxide is administered during most of the CC operations to avoid fire and explosion hazards.

Supportive measures to protect respiration and circulation during an operation are of major importance to the anesthesiologist. He is responsible for lowering a patient's blood pressure for short periods, when necessary, and for lowering body temperature artificially. The patient's condition following surgery is closely checked in the recovery room.

The Anesthesiology Department participates in over 50 operations per month. Most of the operations consist of radical excision surgery for cancer, cardiac surgery, and neurosurgical procedures.

Besides providing anesthesia and supportive therapy for patients undergoing major surgical procedures, the Anesthesiology Department assigns staff members to "standby" duties during diagnostic procedures not requiring anesthesia. Where circulatory and respiratory depressions of an emergency nature are anticipated, as in angiograms and cardiac catheterizations, the presence of an anesthesiologist is required.

Another responsibility of the Department is the utilization of inhalation therapy for all CC patients. Oxygen and other gases, also nebulized liquid medication, such as penicillin, are administered by the inhalation therapist. He carries out the treatment prescribed by the attending physician.