ARTHRITIS PROGRESS CITED IN TALKS HERE

Seven NIH scientists presented recent findings in arthritis research at the second Pan American Congress on Rheumatic Diseases, held last month at NIH and in Washington.

Six hundred rheumatic disease specialists from North and South America attended the congress, which was held in conjunction with the annual meeting of the American Rheumatism Association.

Long-term trials of dexamethasone, the new antirheumatic steroid, were reported by several groups of investigators. An NIAMD study of the drug in 27 arthritic patients was reported by Drs. Roger Black, William Reefe, John David, Kurt Bloch, and Joseph Bunim. The drug, they reported, was administered for periods up to 16 months and produced a satisfactory response in 21 of the 27 patients, although it was not free from certain undesirable side effects.

DR. DYER HONORED BY TULANE FOR PHS WORK

A Doctor of Laws degree was conferred on Dr. Rolla E. Dyer, former NIH Director, by Tulane University, New Orleans, La., last month.

Dr. Dyer was cited by the University for "his guidance during the formative phase of the Public Health Service extramural grants program" and for his "important personal contributions...leading to the development of effective methods for the prevention of such formerly dreaded diseases as typhus, Rocky Mountain spotted fever, and Q fever."

Dr. Dyer spent 29 years at NIH, and was Director from 1942 until 1950. After his retirement from PHS in 1950 he became Director of Research at the Robert Winship Clinic of Emory University, Atlanta, Ga.

GROUND TO BE BROKEN FOR SURGICAL WING

A contract for the construction of a four-story surgical wing to the Clinical Center was awarded June 25 to the Dean Construction Company, Inc., of New York. Construction, to start in a few weeks, is expected to be completed early in 1961.

Plans for the $1,965,000 building were drawn by the architectural firm of York and Sawyer, New York City, and Krey and Hunt, mechanical engineers. Bolt, Beranek and Newman Co., experts in acoustics and instrumentation, were consultants.

Working with the professional firms at all stages of planning was the NIH Surgical Facilities Committee under the chairmanship of Dr. Joseph E. Smadel.

The Research Facilities Planning Branch, DRS, acted as liaison between the NIH surgical staff members and the architectural and consulting firms.

All planning and construction contracts are being handled through the Public Building Services of General Services Administration.
This summer, after many months of planning, ground will be broken for a new surgical wing to the Clinical Center.

The original operating suites, considered adequate for the anticipated space requirements of 10 years ago when the building was designed, are now too small, largely due to the rapid advances in surgical techniques and instrumentation.

For example, in cardiac surgery the rooms must now accommodate surgical teams of 12 to 15 people, new types of anesthesia equipment, and the vital but bulky heart-lung machine. Frequently, too, visiting surgeons are invited to observe new techniques. The multiplicity of recording and electronic instruments which chart many of the patient's functions must frequently be placed in the adjoining corridor. And there is no space for the motion picture or TV photographers, often needed in modern surgical research and reporting.

The new operating rooms, according to Dr. Jack Masur, CC Director, will be among the first designed specifically to accommodate the newest instruments without sacrificing the safety, effectiveness, and efficiency that surgeons require. Flexibility of floor plan will also provide space for the use of newer and more complex instruments.

The building itself, a circular free-standing structure of reinforced concrete, will be attached by an enclosed corridor to the southwest side of the Clinical Center. It will have four floors and a basement. The second and fourth floors will be devoted to surgery, the third will accommodate an observation room and laboratories, and the first will be used for the Blood Bank's activities in support of surgery. Mechanical equipment will be housed in the basement area.

The circular form was decided upon after extensive studies by the Surgical Facilities Committee of NIH. Working closely with the architects and consulting engineers, the Committee and the Research Facilities Planning Branch of DRS introduced many innovations developed by NIH staff members.

The hub of the circle will form large and highly adaptable recording rooms on the surgical floors. Here, one of the hazards and annoyances of old-style operating rooms will be eliminated by conducting the connecting wires from the instruments through ducts under the floor to outlets in the anesthesia and operating rooms. From these outlets flexible connections will take the wires to a console on the operating table.

Two wedge-shaped operating rooms on each of the surgical floors will be separated from the recording rooms by glass walls. On the cardiac floor, each operating room will be equipped with a special surgical lighting arrangement which is being designed, are now too small, largely due to the rapid advances in surgical techniques and instrumentation.

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Robbins, J., and Rall, J. E. Quantitative aspects of thyroid hormone turnover.
Yamalinsky, M.; Kolcser, H. M.; and Kurahashi, K. Galactose induced bacteraemia, an anomaly of certain mutants of E. coli.
Blach, K. J. Recent modifications in serological tests for rheumatoid arthritis.
Senoh, S., and Witkop, B. Formation and rearrangements of aminoacids from a new metabolite of dopamine and some of its derivatives.
Brecher, G., and Peden, J. C., Jr. Circulation and fate of naturally (alkaline phosphatase) and fluorescent (atobrine) labeled granulocytes.
May, E. L., and Ager, J. H. Structures related to morphine. XI. Analogs and a diastereoisomer of 3' hydroxy-2,5,9 trimethyl-6,7 benzomorph.
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Arnold, F. A., Jr. Historical review of the contributions of the ADA to biologic research in dentistry.
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Kramer, M. What can be learned from routinely collected mental hospital data.
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Mudd, S. H. The mechanism of the enzymatic cleavage of S-adenosyl-methionine to α-amino r-butyrolactone.
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Hollister, W. G. Love makes all the difference.

NINDS
Fuortes, M. G. F. Integrative mechanisms in the nervous system.

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NORMAL VOLUNTEERS BEGIN SUMMER SERVICE

"You are here," explains Jim Conrad, of Tangent, Ore., to newly arrived Marjorie Brubacher, of Vineland, Ontario, as the summer service unit of normal volunteers becomes oriented to Clinical Center life. This year’s total of 43 is the largest number of normal volunteers yet to serve at NIH. The young people, most of them college students on summer vacation, represent a wide variety of religious faiths, although the summer unit is sponsored by the Mennonite Central Committee.

SURGICAL WING Contd.
developed by the Research Facilities Planning Branch here. It is proposed that lights be mounted around the periphery of a doughnut-shaped ring seven feet in diameter. The center of the ring will be glass-filled, and through this, on the observation floor, motion picture and TV cameras may be focused down on the surgical site. Encircling the lamp platform there will be a viewing area 24 inches wide, where up to 18 people may observe the operations.

On the neurosurgery floor, the recording room was designed to fit this service’s specialized needs. Divided in two levels, the lower deck will contain, in addition to instruments for systemic recordings, a photography room where cameras will be focused on a mirror over the patient’s head. On the upper deck, instruments will record directly from the patient’s nervous system.

Wedge-shaped utility rooms on the neurosurgery floor have been planned by the neurosurgical staff to divide the flow of traffic and the arrangement of sterilizing and sorting tasks into separate areas to prevent contamination of the sterile equipment and atmosphere.

The corridor on the periphery of the circle will provide access to all the rooms, but will segregate those individuals who need not maintain a sterile condition to carry out their duties.

As Dr. Masur has pointed out, "The recrudescence of the problems of infections reminds us sharply that our much vaunted 'conquest' is not yet complete..... we ought to be learning a good deal more about setting up stricter specifications for the quality of air entering surgical suites." The new plans call for ceiling outlets over the operating tables through which a blanket of sterilized air will be blown at low velocity to flood the table and prevent room air from coming in contact with the patient.

The Blood Bank on the ground floor will combine collection and processing procedures, and will be in the most advantageous position to furnish fresh blood to surgery for transfusions and the heart-lung machine. A unique addition will be a large refrigeration room with a temperature of -60 degrees C. for the long-term storage of rare bloods which previously could be kept for only three weeks.

Expected to be completed within 510 days of the ground breaking, the building will serve as a guide for surgical research facilities in the nation and in other countries.
NIAMD ENDOCRINOLOGISTS REPORT ON RUSSIAN TRIP

Recently back from a three-week tour of Russian research institutes, Drs. DeWitt Stetten, Associate Director of Research, and Joseph E. Rall, Chief, Clinical Endocrinology Branch, both of NIAMD, discussed their observations and experiences at a program in Wilson Hall on June 19. Their talks were illustrated with color slides and an 8 mm film taken during the trip.

As part of a five-man team of endocrinologists, Drs. Stetten and Rall visited 12 institutes throughout the U.S.S.R., and gave talks at three of them. They found Russian research in physiology to be dominated by the experiments of Pavlov, the Russian physiologist who died in 1936, even to the extent of using the same type of equipment and utilizing dogs almost exclusively as research animals.

The doctors found Russian research in endocrinology to be quite different from our work; the experiments they observed were not oriented toward biochemistry. A Russian endocrinologist who had been in the U. S. last winter on a similar mission acknowledged that the Americans are ahead in this field, but stated that in accordance with the Russians' seven-year plan they would soon catch up and shortly thereafter pass the U. S.

The Russians, according to Dr. Stetten, also lag behind in instrumentation and equipment for biochemical and physiological research. In fact, major research in the field of biochemistry was carried on in only two of the institutes visited.

Dr. Stetten felt that the high degree of specialization practiced throughout Russia would not be tolerated in this country. A student, at the age of 18, selects a specialized area of his chosen field and remains within it during his professional life. In the same manner, laboratories within an institute are autonomous, with little or no collaboration on research projects between them.

One of the Russian scientists with whom Dr. Stetten talked felt a need for more biochemical research. He is the director of the Sukhumi Medical Biological Station, where a large colony of baboons is being bred and used in a variety of research projects. One such project is a study of the baboons' language. The staff can now identify 20 different sounds that convey specific meanings.

"The Russians seem more interested in ideas than in experiments," Dr. Stetten said. "They are philosophically oriented, while we are pragmatic in our approach. They don't use the elaborate systems of controls that we consider necessary, but they always know just why they are doing the experiment."

Accompanying Drs. Stetten and Rall on the mission were Drs. Dwight J. Ingle and Rachmiel Levine, of the University of Chicago, and Dr. Edwin B. Astwood, New England Medical Center.

EXHIBITS EARN PRIZES AT AMA CONVENTION

Three NIH exhibits won prizes at American Medical Association's convention at Atlantic City, N. J., last month.

A certificate of merit was awarded to an NCI exhibit, "Studies of Cancer Cells in the Circulatory Blood," by Drs. John C. Pruitt, Albert W. Hilberg, and Raymond F. Kaiser, of the Field Investigations and Demonstrations Branch, and Drs. Richard A. Malmgren and John F. Potter, of the Pathologic Anatomy Branch. The exhibit was designed by Medical Arts Section, DRS.

Another certificate of merit was given to an exhibit, "Application of Ultrasonic Locating Techniques to Ophthalmology," prepared by the Veterans Administration Hospital, Bronx, N. Y., and NINDB. Dr. Theodor Wanko's NINDB exhibit, "The Crystalline Lens," also designed in DRS won an honorable mention at the convention.

DR. SOBER HEADS LAB

Dr. Herbert A. Sober has been appointed Chief of the Laboratory of Biochemistry, NCI. He succeeds the late Dr. Jesse P. Greenstein, who died last February.

Dr. Sober joined NCI in 1947, and has been Head of the Laboratory's Physical Chemistry and Chromatography Section since 1956. His cancer research work has been in the characterization of proteins by chromatography.

DR. HELLER ENDS TRIP

Dr. John R. Heller, NCI Director, has returned from a week's trip to Lima, Peru, and Bogota, Colombia. In Lima, he was a speaker at the First Peruvian Cancer Congress, organized by the Peruvian Cancer Society.

Dr. Heller addressed the opening session and presented two papers dealing with cancer control and cancer research in the United States. The congress was held June 24-27.

NFFE OFFICER TO SPEAK

Leland Walker, Secretary-Treasurer of the National Federation of Federal Employees (NFFE) will speak at a meeting of the NIH local of NFFE on July 16 in Wilson Hall at noon. He will discuss the services that the national organization offers members at the local level.