UGF Drive Lags; Chairman Asks Greater Effort

A tally of returns at the end of the fourth week of NIH's 1960 UGF campaign showed that contributions had reached 73 percent of the $79,305 goal.

Eighty-two percent of NIH employees had contributed by this time.

"This fourth weekly report of the results of the UGF campaign at NIH indicates that we are faced with a serious threat to the success of our drive," said Dr. Roderick Murray, Director of DBS, who is chairman of the campaign. "Unless we take immediate steps, we may fail to meet our quota. This would be tragic in terms of the many vital services performed by the UGF agencies. We are certain that if every NIH employee is aware of this fact, each one will want to do whatever he can to assure the success of NIH's participation in this worthwhile cause."

Institute and Division keymen will attempt to reach each em-

(See UGF DRIVE, Page 8)

3,362 Reply to Traffic Quiz In 3 Days; 46.3% 'Want In'

Within the first three workdays following distribution of the traffic survey questionnaire to NIH employees, 3,362 replies were received, Plant Safety Branch reports, and the returns were continuing at a still-encouraging rate.

Speaking for Management, which initiated the survey as a first step in its program to alleviate parking and traffic congestion here, Richard H. Henschel, Assistant Executive Officer of NIH, said:

"Early employee response to the traffic survey is indeed gratifying. It is hoped that those who have not returned their questionnaires will do so at their earliest convenience, so that we can make a final tabulation and formulate plans for alleviation of our parking and traffic problems."

As rapidly as replies are received they are being tabulated by Matthew J. Peters of PSB and his assistants.

An analysis of the returns of the first three days revealed that of the 3,362 who had replied, 1,555, or 46.3 percent, are interested in the possibility of direct bus service.

(See TRAFFIC, Page 3)

'I Was a Baby-Sitter for the UGF'

By Betty Mok

There's no telling what you'll get into when you're on a publicity committee. Running odd errands, going to meetings that last through lunch, holding photographer's flash. This time it was a baby. And she wasn't even on the program.

The program was the UGF rally. The baby belonged to Jim and Jane Henson, creators of the Muppets of TV fame.

While the Muppets, Kermit, Sam, and Yorick, lollied in an old-fashioned market basket backstage, Jim set up the puppet theater. Then Jane Henson appeared, toting Lisa Henson, aged five months, who cooed and gurgled in her canvas carrying basket.

So I was assigned to baby-sitting duty, having had a little previous experience in that line. And it was a pleasure. There's a child who's adjusted to life's demands already.

While her father hammered away at the theater and her mother pasted wigs on Kermit and Sam, Lisa played with her rattle.

While distinguished speakers urged 100 percent participation in the UGF campaign, she added her voice in crows and coos.

And while her parents performed with the puppets she dozed in my arms, rousing to the applause.

When the program was over and the Muppets back in their basket, Jane reclaimed Lisa. And reluctantly I relinquished my assignment.

But I'll volunteer for the publicity committee next time—if there's a baby around.
Health Benefits Statistics Released; 4,747 NIH Employees Participate

The total of employee payroll deductions and Government contributions for the Federal Employees Health Benefits Program, which went into effect in July, is estimated at $300 million a year, the Civil Service Commission has announced. Of this total, enrolled employees will pay about 62 percent, or $186 million, and employing agencies will pay the remainder, or $114 million.

The estimate is based on registration figures reported as of August 1 by the carriers of participating health benefits plans. These figures show a total employee enrollment of 1,738,828. The NIH total employee enrollment was 4,747. The breakdown, including NIH enrollment figures reported by Financial Management Branch, is as follows:

<table>
<thead>
<tr>
<th>Plans</th>
<th>Enrollment</th>
<th>% of Enrollment</th>
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<tbody>
<tr>
<td></td>
<td>All</td>
<td>NIH All</td>
</tr>
<tr>
<td>Service Benefit</td>
<td>943,377</td>
<td>3,297 54%</td>
</tr>
<tr>
<td>Indemnity Benefit</td>
<td>465,385</td>
<td>1,163 27%</td>
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<tr>
<td>Employee Organization</td>
<td>229,079</td>
<td>67 13%</td>
</tr>
<tr>
<td>Comprehensive Medical</td>
<td>100,987</td>
<td>220 6%</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>1,738,828</strong></td>
<td><strong>4,747 100%</strong></td>
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Phyllis Snyder Dies

Phyllis Snyder, Information Specialist, DRG, and staff correspondent of the NIH Record, died early Friday morning in Sibley Hospital shortly before she was scheduled to undergo surgery. "Phyl" came to NIH in June of 1956 as a member of the then Publications & Reports Section, SRB-DRS, and in November 1958 transferred to the Information Office of DRG, where she served as assistant to the Information Officer and Editor of the bi-weekly DRG Digest, which she founded.

The Record extends sympathy on behalf of her many friends at NIH to her mother and stepfather, Mr. and Mrs. Paul Gregori, of 1723 Irving St., N. W.

The Safety Branch also reports that a considerable number of the returned questionnaires carried constructive suggestions relating to parking and traffic congestion problems. These are being considered with a view to possible recommendation for action, PSB said.

PERSONNEL TO PERSON

ONE of the basic NIH personnel management responsibilities is to ensure that all jobs are accurately described and properly graded and titled.

This responsibility is jointly shared by NIH supervisors and the staff of the Personnel Management Branch. The supervisor assigns the work and makes certain that job descriptions are kept up-to-date. The FMB staff assigns titles and grades to positions consistent with standards and guides published by the CSC and the Department.

The primary aim of this joint effort is to assure that all employees receive equitable pay treatment for work performed.

Procedure Outlined

If you believe the grade or title of your position to be incorrect, you should discuss it with your supervisor. If you cannot reach an agreement with him, you have the privilege of consulting your Personnel Representative.

If you feel you have reached an agreement with the Personnel Representative, you may request a review by the Classification Officer, NIH. Finally, if you are still not satisfied with the NIH decision, you have the right to appeal within the Department (HEW). This right pertains to GS as well as Wage Board positions.

Alternative Available

If you occupy a GS position you may appeal to the CSC, either directly or through Departmental channels. However, the Commission prefers that every effort be made to adjudicate appeals within the Department before they are submitted to the Commission.

Although the Department exerts its best efforts to classify an appeal, decisions as to whether a position is properly classified GS or Wage Board may be appealed to the CSC.

Time Limit Cited

A classification appeal may be submitted at any time. However, if a down-grading or loss of compensation is involved, the appeal must be submitted within certain time limitations in order that a favorable decision may be applied retroactively.

Remember, if you have any questions regarding the classification of your position, or the procedures, you should first consult with your supervisor. The Personnel Representative serving your organization will, upon request, assist in the preparation and submission of appeals.

All Institutes and Divisions have been invited to submit nominations for the 15th Annual Arthur S. Flemming Awards and for the 7th Annual National Civil Service League Awards Program. Many NIH and DHEW employees have been successful candidates since the establishment of these awards, and it is hoped that one or more of our outstanding employees will be selected this year.

Detailed information regarding the procedures to be followed for the selection and submission of nominations may be obtained from the Employee Relations and Services Section, Bldg. 31, Rm. 21, Ext. 4851. Nominations must be submitted before November 1.
Population Growth in Next Decade Presents Public Health Challenge

Excerpts from Chesley Memorial Lecture delivered by Dr. David E. Price, Deputy Director, National Institutes of Health, before the Minnesota Public Health Association meeting in St. Paul, Minn.

In speaking about “Public Health in 1970,” I wish to share a few thoughts about some of the major forces operating in our society to shape the status and practice of public health a decade from now. My crystal ball does not have resolving power of the year 1970, but perhaps the kinds of problems public health must surmount in the years immediately ahead. An analysis of these may suggest priorities that should guide our public health efforts.

Let us look first at population. You are all familiar with the fact that it is increasing rapidly, that its geographic distribution is shifting, and that its age composition is also changing. Based on reasonable assumptions, we may expect that in 1970 our total population will be about 33,000,000 larger than it is today. This increase will fill 22 cities the size of the Minneapolis-St. Paul metropolitan area as it is today. There will need to be a growth of all kinds of health services throughout the country, in order to maintain the present per capita volume of services to say nothing of any improvement in quality of services that are now available.

Age Composition Changing

Projected changes in the age composition of the population suggest that certain kinds of health services may be particularly in demand. For example, the proportion of the population under 20 years of age will have risen about 10 percent, and represent about 40 percent of the total population. The need, therefore, for services designed especially for youth will grow. There will certainly be a particular demand to do more in meeting the mental health needs of the adolescent years. Under the age of 10, we may expect that there will be 7,000,000 more children than there are today. What this means in terms of effective school health services and pre-school programs, you may imagine. But it is to the needs of our older citizens that most attention is turned. Their requirements are particularly important for they are more vulnerable to illness, require more prolonged care, and more complex services, than individuals in other age groups. Their numbers are increasing so that while we have some fifteen and one-half millions over the age of 65 today, we may expect nineteen and one-half millions by 1970—an increase of almost four million. If this increase were gathered together in one place, it would outnumber the present population of Minnesota.

These individuals require many more community services, because their economic status makes it impossible to provide personally for many of their needs, and because a great many of their needs can effectively be met only by marshaling the resources of the community in some special way. I think in this regard of rehabilitation during and after illness, I think of homemaker services, of community nursing, of prepared hot meals delivered to the place of residence, and other services designed to tide them over periods of distress. I think, too, of hospital based home care, and of high quality nursing home services.

And now I have come to the third important stimulus to change in public health. I have chosen to call the “state of the art,” deliber­ately using the word “art” rather than “science,” although I do not exclude scientific progress as one of the most important determinants of the state of the art. What I am talking about is more than science, however, because it involves such things as the basic organization by which health services are provided, and the generally accepted idea of what problems are the legitimate concerns of public health. We will continue, I am sure, to witness progressive changes here as the years go by.

Research Effort Expands

The greatly expanded health research effort in the last decade has brought many innovations in health practices. There is not time tonight to recount the details of new knowledge about virus diseases and their control, new surgical techniques, which make possible lifesaving reconstructive surgery on the heart and great blood vessels, surgical procedures on the central nervous system which quietly make the patient of Parkinson’s disease and pain killing drugs of remarkable potency. Effective methods to protect against the serious sequela of rheumatic fever have become commonplace. Newly synthesized chemicals have improved the condition of some cancer victims. There are improved methods for the early diagnosis of serious diseases such as cancer of the cervix, glaucoma, and galactosemia, which are amenable to treatment if discovered early.

Research has also begun to accumulate information about the composition of the environment and some of its components which may have an important effect on human health. I refer to such things as the relationship between air pollutants and development of emphy­ sema, cancer of the lung, and chronic irritation of the respiratory tract and eyes. Studies of radiation in the environment have proceeded to the point where practical guides for the public health control of this hazard have been established.

One could prolong such a listing, but my purpose is served by these few examples which illustrate how extensively modern science is contributing to advance the state of the art.

But the art is being advanced by progress in other fields. Political organization is being modified to give the modern community the ability to plan and carry out complex programs. For example, earlier this month a committee representing the principal localities in the Hampton Roads area of Virginia began working toward a possible small government for the entire port area. Among the proposals to be considered is a borough government under which each locality would contribute to the maintenance of a common government for handling mutual problems.

Just as small communities are finding it impossible to provide independently for all of their own needs, so are individuals being thwarted in attempting to provide for their own effort and resources the full range of needed preventive services and medical care procedures. There is more and more need to supplement what one may provide personally with services which can only be provided by community effort, in order to assure a quality of health service acceptable in our modern society. Community experi­

(See PUBLIC HEALTH, Page 4)
Change in Host Cell Inhibits Growth Of Poliovirus in CNS of Monkey

During Division of Biologic Standards studies in which rhesus monkeys were inoculated intracerebrally and intraspinaly with attenuated poliovirus—an established neurovirulence testing procedure—an unexpectedly low rate of virus isolation from the central nervous system (CNS) of the infected monkeys was observed. Moreover, when infected CNS tissue was plaque-assay on monkey kidney cell cultures, more virus plaques appeared at higher dilutions of CNS tissue than at lower dilutions, strongly indicating virus inhibition.

In a study undertaken to determine the nature of this phenomenon, investigators Richard Low and Dr. Samuel Baron, DBS, found that the inhibition was not directed against the virus but affected viral multiplication by altering the host cell. The study was reported in a recent issue of Science.

When suspensions of lumbar or cervical cord tissue were assayed for poliovirus content, virus was recovered from only 30 percent of the infected monkeys, whereas in previous studies, recovery of virus from CNS tissues of infected monkeys was readily obtained.

New Committee Studies Polio Control Problems; Urges Salk Vaccine Use

Extended study of the technical and administrative problems associated with the control of poliomyelitis in the United States will be undertaken during the next 60-90 days by committees of scientists, physicians, and public health administrators, the Public Health Service has announced.

While the Surgeon General has indicated that an orally administered live polio virus vaccine would be suitable for use in the United States, it is doubtful that an oral vaccine will become available during the polio season of 1961, according to the announcement.

It was pointed out that an intensive effort in the meantime should be made to promote wider use of the Salk vaccine which has brought about dramatic reductions in the incidence of poliomyelitis during the past five years.

These conclusions were reached during a two-day meeting of the Agenda Committee of the Committee on Poliomyelitis Control at the Service’s Communicable Disease Center in Atlanta.

The findings of the Agenda Committee will be presented to the full committee which was recently set up by Surgeon General Leroy E. Burney. No date has been set for the initial meeting of this committee which is made up of representatives of the medical and public health professions and of the general public.

In summarizing the present status of poliomyelitis control in the United States, Dr. E. Russell Alexander, Chief of the Surveillance Section of the Communicable Disease Center’s Epidemiology Branch, said that an analysis of the vaccination status had been made of two-thirds of the paralytic cases reported so far this year. The study shows that over 56 percent had had no vaccine and 77 percent had not been vaccinated with three or more shots.

The number of cases of paralytic polio reported for the first nine months of this year totalled 1,553, compared with 4,050 for the same period of 1959. Major outbreaks have occurred this year in Provi­dence, R.I., and Puerto Rico.

Vietnamese Survey by ICNND Team Reveals Serious Diet Deficiencies

An Interdepartmental Committee on Nutrition for National Defense survey of the Republic of Vietnam, where malnutrition has economic and political as well as health implications, has revealed suboptimal intakes of some vitamins and evidence of associated diseases.

Results of the 12th ICNND nutritional survey of civilian and military populations throughout the free world were reported at the Fifth International Congress on Nutrition held in Washington, D. C., recently.

The ICNND, operating administratively through the National Institute of Arthritis and Metabolic Disease, conducts surveys to help participating countries assess the nutritional status of their peoples and aids in the establishment of local nutrition services.

Survey team members, from both the U. S. and Vietnam, included clinicians, biochemists, nutritionists, food technologists, statisticians and dental researchers. They examined approximately 7,400 Viet­namese selected from three major population groups (general civilian, school-age children, and military) in seven general areas throughout the country. Local methods of agriculture and food processing were also studied.

Goiter and Anemia Found

Two general areas of goiter were found among civilians, where the incidence in some communities reached as high as 64 percent in pregnant and lactating women, and as high as 27 percent in the population as a whole. Anemia was common in most areas, and classic beriberi was observed in three hospitals. Comparatively few specific lesions due to nutritional deficiencies were found among the military. Vitamin B1 and B2 intakes were low in most areas, and the incidence of angular lesions in the corners of the mouth was correspondingly significant. Vitamin A intakes varied widely, with some communities in the deficient range, while iron intakes were usually satisfactory due to the standard practice of cooking in iron vessels. Although Vietnam has few milk products, calcium intakes were satisfactory. This was due, in part, to eating small shrimp and shrimp whels, in the use of "nuoc man," a sauce made from fermented fish which is high in calcium, and to the chewing of betel nut (which, in practice, is mixed with... (See ICNND, Page 5)
Low Caries Level Seen In Adventist Children

Previously reported epidemiologic studies of dental disease in Seventh Day Adventist children have indicated a significantly lower evidence of dental caries than noted in other population groups. National Institutes of Dental Research investigators have recently completed studies which assess the caries experience of Adventist and non-Adventist children under more comparable environmental conditions.

Lifelong Area Residents

In studies conducted by Dr. C. J. Donnelly, Epidemiology and Biometry Branch, a total of 290 Adventist children, 1,438 non-Adventist children, all lifetime residents of Prince Georges and Montgomery Counties, were examined for dental caries.

The children were 6 through 14 years of age and all had received fluoride adjusted drinking water since 1952. Sex and age distribution in the two groups, as well as general environmental conditions, were quite comparable.

Further Studies Planned

Results, based on examination for decayed, missing, and filled teeth (DMF score), showed that there was little difference between the 6 to 9 year old children in the two groups. These age categories benefited most from the 7 years of fluoridation. In the 10 through 14 year categories, there was a 40% discrepancy in the mean number of DMF teeth in favor of the Adventist children.

Data gathered from this study suggest further investigation of a possible caries inhibitory factor in the Adventist way of life. Recognizing that fluoridation may have rendered imperceptible such an inhibitory factor particularly in the younger children, it is planned to continue with parallel studies in areas where caries attack is not influenced by the ingestion of water-borne fluoride.

ICNND

(Continued from Page 4)

Protein Part of Lipoproteins Found Synthesized by Liver

Experiments conducted by Drs. Charles Radding and Daniel Steinberg, of the National Heart Institute Laboratory of Cellular Physiology and Metabolism, have demonstrated that rat liver slices, incubated in vitro, synthesize and secrete high-density lipoproteins identical with those found in normal rat serum.

In these experiments the liver slices were incubated in rat serum to which had been added a complete mixture of amino acids labeled with carbon-14. After incubation periods ranging up to four hours, the slices were removed and samples of the media ultracentrifuged to separate the lipoprotein fractions. These were then analyzed by the "fingerprint" technique.

Identification Distinctive

When broken down by the proteolytic enzymes trypsin or chymotrypsin, each protein yields its own characteristic peptide degradation products. These can be spotted on filter paper and separated on the vertical axis by descending paper chromatography, then on the horizontal axis by electrophoresis to form a characteristic peptide pattern. When this pattern is developed by ninhydrin staining, the result is a distinctive "fingerprint" which identifies the protein.

The ninhydrin fingerprints of high-density lipoproteins from the incubation medium were compared with fingerprints of lipoproteins of the same density class from normal rat serum and found to be identical. Autoradiograms (made by placing the media fingerprint strips in contact with X-ray film for 1-2 months, then developing the film) showed the presence of radioactivity in all of the ninhydrin spots of the fingerprint.

Comparisons Significant

These comparisons showed that the lipoproteins synthesized by the liver slices were identical to those of normal serum; and, since labeled amino acids had been incorporated into all of the newly synthesized lipoproteins, that the liver was the source of the protein as well as the lipid portions of those lipoproteins.

Other experiments showed that liver slices from nephrotic rats synthesized both lipoproteins and other serum proteins more rapidly than did those from normal rats. This suggests that overproduction of lipoproteins may be an important factor in the hyperlipemia of nephrosis.

These findings have been accepted for publicaion in the Journal of Clinical Investigation.

Regenerated Rhodopsin Is Seen as Key Factor In Adaptation to Dark

A study which shows how human eyes adjust to the dark after exposure to light, conducted by a National Institute of Neurological Diseases and Blindness ophthalmologist, has proven that dark adaptation is directly related to the regeneration of a photosensitive pigment in the retina known as rhodopsin or "visual purple."

Further conclusions substantiate findings from animal studies indicating a linear relationship between recovery of night vision and regeneration of rhodopsin, regardless of differences in light exposure (brightness) or subsequent time in the dark.

Measuring Method Ingenious

An ingenious method for measuring both dark adaptation threshold (point of minimum vision) and rhodopsin levels in the same eye has been developed by Dr. W. A. H. Rushton, former Visiting Scientist, Ophthalmology Branch, NIND, who reported the results of this work at the meeting of the Association for Research in Ophthalmology. (Dr. Rushton has now returned to a research laboratory, Trinity College, Cambridge University.)

By this method, predetermined fractions of rhodopsin in specified retinal regions can be bleached with lights of varying intensities, and the extent of bleaching and rhodopsin recovery can be measured by retinal densitometry, which determines pigment density.

Colored Filters Used

In typical experiments, different intensities of rhodopsin bleaching, ranging from total to 25 percent, were produced and studied. The subject alternated between the densitometer and an apparatus for measuring dark adaptation, which employed yellow and green filters to indicate the point of transition from cones (day vision) to rods (twilight vision). In all cases, the point of transition and the return of minimum vision occurred when rhodopsin was about 90 percent regenerated.

Dr. Rushton concludes that the dark adaptation threshold is probably dependent on the fraction of "opsin," a chemical component of rhodopsin, which has not at a given time combined with "retinin," a yellow pigment, to form rhodopsin. This theory is supported by electroretinographic studies in animals which indicate that the amount of rhodopsin remaining after bleaching or vitamin A deficiency has a linear relation to the level of the visual threshold.
Action of Hormone Influences Enzyme Molecule Structure

Studies at the National Institute of Arthritis and Metabolic Diseases by Drs. K. Lemone Yielding and Gordon M. Tomkins have shown that certain female sex hormones can alter the molecular structure of a key catalyst in mammalian cell metabolism, by fragmenting it into four smaller, catalytically altered molecules.

This is the first time that a hormone has been found to affect directly the physical structure of an enzyme; previous studies by other investigators have suggested that hormones exert their biochemical influences by participating chemically in metabolic reactions, thereby. 

As indicated by the NIAMD studies, the reversible physical inactivation of a strategically placed cell enzyme determines the direction which the cell's metabolic processes will take—toward energy-yielding chemical breakdown, or toward cell-building protein synthesis.

This finding of molecular alteration is the first concrete illumination of a basic regulatory mechanism which determines protein synthesis, and, indirectly, reflects on associated cell growth or cell proliferation.

The studies reported describe the effect of four steroid hormones on crystalline glutamic dehydrogenase (GDH), an important enzyme which facilitates the energy-yielding chemical degradation of glutamic acid. The absence or inactivation of this enzyme tips the scales toward the diversion of glutamic acid to protein synthesis by the cell.

In in vitro experiments Drs. Yielding and Tomkins found that diethylstilbestrol, estradiol, and progesterone, all belonging to the group of female sex hormones, inhibited the normal GDH reaction.

GDH Dissociation Promoted

Further investigation demonstrated that the hormones promoted dissociation of the large GDH enzyme molecule, which has a molecular weight of 1,000,000, into four subunits of molecular weight of 250,000. Smaller fragments were enzymatically inactive with respect to GDH activity. Inactivation of the enzyme was reversed in the presence of adenosine diphosphate, a normal cell metabolite.

Cortisone, another steroid hormone tested, did not affect the molecular architecture of GDH and consequently did not interfere with chemical degradation of glutamic acid. This selective inhibition by female sex hormones was demonstrated with GDH from beef, chicken, and rat liver, and rat testis, kidney and heart.

A report on these studies by Drs. Yielding and Tomkins is scheduled to appear in the forthcoming issue of the Proceedings of the National Academy of Sciences.

PUBLIC HEALTH

(Continued from Page 2)

Percutaneous treatment during the past decade offers many patterns of successful supplementation of private resources, and good public health practice should result in wider coverage as the art advances.

Public health has a preventive tradition. We believe in attempting to foresee and apply a prophylactic. The decade ahead with all of the changes we may anticipate will surely test our ability to keep ahead of the problems.

I would, therefore, appeal for more interest in research about public health practice.

As a nation, we are spending vast sums on research in the biological and medical sciences, but I believe altogether too little attention is being paid to the critical investigation of public health services. This is a field for pioneering. We have not yet developed methods to measure some of the things we should study.

We have not defined our public health problems clearly enough and in quantitative terms. Objectives are not always clearly in mind. Sometimes we do not know what the people we serve want. Much of the time we cannot tell them clearly what they can expect. We have not developed methods for measuring the sharpness of our public health tools, their efficiency, the ratio between the effect produced and the amount of effort expended. We have done too little cost accounting both from the standpoint of cost in dollars and from the standpoint of cost in manpower.

And last, but not least, public health programs of many kinds have been in effect for a great many years. We badly need to evaluate their results and re-evaluate them from time to time. Unfortunately, we have had to be preoccupied with so much action in so many program areas that we have not been able to develop the methods for evaluating the results of our work.

This is a serious indictment, but it is also a challenging opportunity, and I believe that evaluation and re-evaluation are an absolute necessity in the face of the changes which will surely come between now and 1970.
ACS Sponsors Campaign to Interest College Students in Advanced Work

The American Cancer Society is sponsoring a new venture designed to stimulate interest among college students in advanced work in the medical, biological, and related physical sciences.

Participating with professors from Harvard, Columbia, and Yale Universities is Dr. Harry Eagle, Chief of the Laboratory of Cell Biology, NIAID, who will deliver a series of lectures on the general topic of metabolism of normal and malignant cells in culture. The speakers chosen by the ACS to launch this experiment have agreed to give four or five lectures each in the coming year at universities of their choice.

Guy W. Moore Named To DGMS Position

The Division of General Medical Sciences has announced the appointment of Guy W. Moore as Deputy Information Officer. Prior to coming to NIH, Mr. Moore was Information Officer, U.S. Army Medical Research and Development Command. He has also served with the State Department, both in Washington and Uruguay.

Born in Retta, Okla., Mr. Moore received a B.A. degree in journalism and an M.A. degree in history from the University of Oklahoma. He is the author of the book, *The Case of Mrs. Surratt: Her Controversial Trial and Execution for Conspiracy in the Lincoln Assassination*, which is the first objective account of the role of Mary Surratt in the assassination of Abraham Lincoln.

comparatively rare in the United States.

From 1955 to 1958 she managed the Bettina Belmont Ward Basenji Kennels in Middleburg, Va., where she devoted herself to these attractive little animals. She owns six basenjis, along with a mastiff and two basset hounds, and her basenji, Champion Revelle Reveille, recently was judged best of winners at the Westchester Kennel Club’s Specialty Show in New York. In addition to breeding and showing her own animals, she shows dogs for other breeders. Among the many types she has shown is the Irish wolfhound, which she adores.

Is Tennis Champion

Damara’s hobbies, however, are not confined exclusively to animals. She is an accomplished swimmer and rider, and in 1958 and 1959 was co-winner of the women’s doubles in tennis at the Army Navy Country Club. She also has a great interest in art. After her graduation from Purdue, she spent a winter in Paris studying painting and sculpture—animal subjects of course!

'Woman of Year' Title Won by Dr. Thurman

Dr. Ernestine Thurman, Executive Secretary of the Tropical Medicine and Parasitology Study Section, DRG, was named "Outstanding Professional Woman of the Year" recently by the D.C. State Federation of Business and Professional Women's Clubs.

Dr. Thurman, who has been with DRG since August 1958, holds the rank of commander in the PHS Commissioned Corps and is the only woman entomologist who is a commissioned officer.

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R&W Concert Nov. 10 Features D.C. Violist Raymond Montoni

The second R&W concert of this season will feature Raymond Montoni, violist, on Thursday, November 10, at 8:30 p.m. Mr. Montoni will be accompanied by Allen Bonde at the piano.

Mr. Montoni will play selections by Beethoven, Schumann, Honegger, Piston, and Bloch.

The concert will be held in the C.C. auditorium. Tickets, costing fifty cents, may be obtained at the R&W film desks.

A teacher of violin and viola at Catholic University, Mr. Montoni is the conductor of the Catholic University orchestra and of the Young People's String Orchestra of Washington. He has received critical acclaim for numerous performances both as a recitalist and with chamber groups.

Mr. Bonde is studying for his Masters and Doctors degrees at Catholic University.

UGF DRIVE

(Continued from Page 1)

ployee who has not yet made his gift to the campaign.

The 15-foot rockets at the east and west entrances to the NIH grounds indicate the percentage of employee giving. The rocket effect is an improvement made this year over the thermometer used formerly.

The rockets were designed by George Marsden, Chief, Medical Arts Section, DRS, who is also a member of the publicity committee for the UGF campaign. They were constructed by the Shops Section, DRS.

Other members of this year's publicity committee are Arlene Betterly, DBS, Chairman; Laurence E. Ring, R&W; Margaret A. Badger, CC; Roy Perry, DRS; and Elizabeth Mok, ORL.

A breakdown of the third week's contribution figures follows:

<table>
<thead>
<tr>
<th>Percent of Participation</th>
<th>Amount Contributed</th>
</tr>
</thead>
<tbody>
<tr>
<td>OD-NIH</td>
<td>$3,625.65</td>
</tr>
<tr>
<td>DRS</td>
<td>3,691.05</td>
</tr>
<tr>
<td>DRG</td>
<td>3,974.90</td>
</tr>
<tr>
<td>DOGS</td>
<td>91</td>
</tr>
<tr>
<td>NDAID</td>
<td>91</td>
</tr>
<tr>
<td>NIAID</td>
<td>91</td>
</tr>
<tr>
<td>NIAAMD</td>
<td>91</td>
</tr>
<tr>
<td>NINDB</td>
<td>91</td>
</tr>
<tr>
<td>NIMH</td>
<td>91</td>
</tr>
<tr>
<td>NIDR</td>
<td>91</td>
</tr>
<tr>
<td>Totals</td>
<td>$47,543.97</td>
</tr>
</tbody>
</table>

Get the UGF Rocket in Orbit—Give the United Way

Fire Prevention Week Observed With Drills, Demonstrations at NIH

NIH employees participated extensively in fire drills and had an opportunity to observe the NIH Fire Department in action during National Fire Prevention Week, October 9-15.

The observance featured fire drills involving every building on the reservation and the Robin and Arts Buildings in Silver Spring. This year for the first time drills were conducted without specific time announcements.

Even the Clinical Center, which because of its functions as a hospital could not participate in a total evacuation, held a drill in one of its patient areas.

The Plant Safety Branch, of which the NIHFD is a part, was particularly encouraged by the cooperation of employees in the drills and commended the building wardens for their "excellent job" in handling their areas.

Although NIH has never experienced a fire resulting in loss of life, PSB stresses the fact that the potential for such a fire is always present. A knowledge of the buildings combined with training in evacuation will insure an extra margin of safety for NIH employees should such an emergency occur, the Safety Branch points out.

Computer Group Holds First Meeting Here

The first general meeting of the recently formed DRG Advisory Committee on Computers in Research was held here September 20-21.

Dr. Lee B. Lusted, Professor of Biology, University of Rochester, is chairman of the nine-man committee, and Dr. Fay Hemphill, Assistant Chief for Training, DRG, is Executive Secretary.

Dr. Shannon addressed the first session of the meeting September 20. He charged the group with the mission of contributing advice and recommendations on the direction of NIH policy concerning the application of electronic computers in biological and biomedical research.

A subcommittee appointed by Dr. Lusted met here October 15 to discuss recommendations on organization of the entire program.

Bloodmobile Scheduled to Be at NIH Nov. 8

A Red Cross Bloodmobile unit will be in Wilson Hall Tuesday, November 8, from 9 a.m. to 12:45 p.m. to receive blood donations from NIH employees.

Anyone over 18 years of age or under 60 is eligible to give blood. Volunteers under 21 must have written permission from a parent or guardian. Further information may be obtained by calling Ext. 4851.