Hearings to Begin On $989 Million Budget For '64

Hearings on the NIH $989.6 million overall budget request for Fiscal Year 1964 are expected to start before the House Appropriations Subcommittee early next month.

The NIH total is included in the Public Health Service request for $1.7 billion, which is part of the Administration's request for $5.5 billion for the Department of Health, Education, and Welfare.

Top Staff to Testify

Dr. James A. Shannon, Director of NIH, Institute Directors, and staff associates will present testimony during the hearings in support of the Administration's request for NIH.

The overall NIH budget for the coming fiscal year includes $930.5 million in operating funds; $91 million for direct construction at NIH; and $50 million for Health research facilities construction grants.

Funds requested in operating appropriations for Fiscal Year 1964 represent an increase of $49.7 million over the amount appropriated (See BUDGET, Page 5)

DeWitt Stetten To Give NIH Lecture Tomorrow On History of Gout

Dr. DeWitt Stetten, Jr., Dean of the new Rutgers University Medical School and former Director of Intramural Research at the National Institute of Arthritis and Metabolic Diseases, will deliver the 22nd National Institutes of Health Lecture tomorrow (February 27) at 8:15 p.m., in the Clinical Center auditorium.

Dr. Stetten's topic will be "The History and Natural History of Gout." He will discuss this ancient and baffling disease and its treatment, and will offer some tentative answers, based on recent research by himself and others, to some of the persistent puzzles that have harassed students of the disease through the ages.

Leader in Research

A leader in biomedical research, Dr. Stetten during his long tenure at NIAMD contributed to the growth of the NIH. A pioneer in the application of isotope to medical research, he has also been for... (See NIH LECTURE, Page 7)

Miniature 3-Ring Circus Brings Cheer To Clinical Center Children Patients

The smell of sawdust and animals is the only thing missing from the circus-in-miniature, on display recently in the Clinical Center.

Chester Cooper of Bethesda, whose hobby is modeling animals in clay, created the Big Top exhibit and presented it to the Clinical Center for the entertainment of the children patients.

Complete with side shows, spectators and all the colorful trap­pings of circus and fair grounds, the 6 by 10-ft. exhibit was displayed on tables in the 14th floor lobby of the CC.

To say that the younger—and many of the older—patients found it fascinating is an understatement.

Within the 3-ring Big Top, lions and tigers, trained bears, and bare-back riders perform, as trapeze artists swing overhead.

Outside the tent are parade (See CIRCUS, Page 2)

Circus elephants dine at leisure after performing under the Big Top.

President Proposes Long-Range Attack On Mental Illness Through Development Of Comprehensive Community Programs

A broad, long-range plan of attack on mental illness through the development of comprehensive community mental health programs was proposed by President Kennedy in a special message to Congress on February 5.

"New knowledge and new drugs," the President said, "make it possible for most of the mentally ill to be successfully and quickly treated in their own communities and returned to a useful place in society."

He urged the prompt launching of a broad new mental health program which would make it possible, within a decade or two, to reduce the number of patients now under custodial care by 50 percent or more.

Many Can Be Helped

Many more of the mentally ill, he said, can be helped to remain in their own homes without hardship to them or their families; those who are hospitalized can be helped to return to their own communities; and all but a small proportion can be restored to useful life.

The President's proposed plan of action against mental illness contained six recommendations.

1. A recommendation for authorization of grants to the States for construction of comprehensive community mental health centers, beginning in Fiscal Year 1965, with the Federal Government providing 45 to 75 percent of the project cost.

2. A recommendation for authorization of grants to the States for construction of comprehensive community mental health centers, beginning in Fiscal Year 1965, with the Federal Government providing 45 to 75 percent of the project cost.

Separate Elements Combined

These centers would combine a number of separate elements now found in many communities, although no community has all of them. They include diagnostic and evaluation services, emergency psychiatric units, outpatient services, inpatient services, day and night care, foster home care, rehabilitation, consultative services to other community agencies, and mental health information and education.

The centers would have two primary purposes: first, the prevention of mental disorders in the community; second, the treatment of... (Continued on Page 6)
NEWS from PERSONNEL

COMMISSION SEEKS ANSWERS
Do men who work for the Government really get promoted more often than women? If so, why? The President’s Commission on the Status of Women is looking for answers to these and related questions.

Nearly 400 women Civil Service employees at NIH are presently participating in a Government-wide survey to aid in this study. They are completing a four-page questionnaire on their qualifications and work history.

Answers to the questions will be tabulated and analyzed by the Civil Service Commission for the President’s Commission.

TRAVEL EXPENSES
The Civil Service Commission recently authorized NIH and other Government agencies to pay travel and household moving expenses to first duty posts for top-level research scientists in the biological sciences.

The action was taken as a result of a request initiated by Personnel Management Branch. Coverage includes jobs in the 208(g) category as well as those in Grades 16 through 18 under the Classification Act.

As a result of this new authorization, almost all positions covered under the 208(g) category are now eligible for payment of travel expenses to first duty posts.

Any questions on this coverage should be referred to your Personnel Officer.

HIGHER STANDARDS ESTABLISHED
Higher job standards for typists and stenographers were established recently by the Civil Service Commission. These Government-wide standards, effective January 1, 1964, will serve to place more demanding educational and training requirements on persons who are appointed to these positions.

Increased emphasis will also be placed on verbal and clerical skills of applicants by modifying the written test measuring these skills.

These new standards will not affect present employees or those hired prior to January 1964.

The new standards will limit starting positions for typists who are high school graduates to Grade 2 and stenographers to Grade 3. This is a grade lower than provided for in present standards.

Additional Training Needed
Applicants for Grade 3 typist and Grade 4 stenographic positions will need a year of post-high school training such as business school, junior college, college or appropriate experience to qualify.

Another new provision provides for the waiving of typing or shorthand examinations for individuals who present certificates of proficiency from their teachers in typing or stenographic courses. However, they will still be required to pass the written verbal and clerical abilities test offered by the Civil Service Examining Board.

LENGTH OF SERVICE AWARDS
A compilation of names of persons eligible to receive 10, 20, 30, 40 and 50-year length of service awards is now being prepared for the 19th Annual NIH Awards Ceremony, to be held this spring.

Employees who are uncertain of their eligibility for these awards or have been overlooked in past ceremonies, may call Ext. 4581, Employee Relations and Services Section, for verification of service computation date.

U. S. Internal Revenue Service received 100 million returns in 1962, and it anticipates 113 million returns by 1970.

List of Latest Arrivals
Of Visiting Scientists

1/25—Dr. Jean Felix Renson, Belgium, Hydroxylation in Liver Microsomes. Sponsor, Dr. Sidney Udenfriend, NIH, Bldg. 10, Rm. 7B12.

1/26—Dr. Norman Michael Green, England, Mechanism of Avidin-Biotin Combination. Sponsor, Dr. Bernard Witkop, NIAMD, Bldg. 4, Rm. 21B.

1/27—Dr. Luciano Manara, Italy, Tissue Culture and Psychotropic Drugs. Sponsor, Dr. Erminio Costa, NIH, Bldg. 10, Rm. 7N118.

1/27—Mr. Harry Cooper, England, Aneurysm Operations. Sponsor, Dr. John Connally, NIH, Bldg. 10, Rm. 7N118.

2/2—Mr. Cooper used many colors of modeling clay to resemble red bricks. Leopards, tigers, monkeys, and bears prance inside the wagons’ barred cages.

The side shows include hula girls, fat ladies, thin men, acrobats, a rifle range, and a shell game.

Mr. Cooper used many colors of modeling clay to resemble red bricks. Leopards, tigers, monkeys, and bears prance inside the wagons’ barred cages.

CIRCUS

As this issue of the Record went to press, Arnold Sperling, Chief of the Activities Section, reported that the miniature circus, on display here for more than a month, has been temporarily removed to make way for other activities.

The side shows include hula girls, fat ladies, thin men, acrobats, a rifle range, and a shell game.

Mr. Cooper used many colors of modeling clay to resemble red bricks. Leopards, tigers, monkeys, and bears prance inside the wagons’ barred cages.

SURE enough, a request for a reprint recently came in addressed to—you guessed it—Dr. Arma Virumque Cano, NIH, Bethesda, Md., with the salutation, “Dear Dr. Cano.”

Dr. Cole says he may skip the Latin mottoes in future.

CIRCUS

(Continued from Page 1)

All the people and animals were made to scale. The largest people are less than 3 inches tall. The elephants and giraffes are about 6 inches high.

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‘Arma Virumque Cano’ Quote Brings ‘Dear Dr. Cano’ Note

It had to happen sooner or later, Dr. Kenneth S. Cole, Chief of NINDB’s Biophysics Laboratory, chose the opening line of Vergil’s Aeneid to introduce his research paper at the first International Biophysics Congress last year. When the Biophysical Journal published the paper, “The Advance of Electrical Models for Cells and Axons,” the Roman poet’s immortal line was printed beneath: “Arma virumque cano.”

Sure enough, a request for a reprint recently came in addressed to—you guessed it—Dr. Arma Virumque Cano, NIH, Bethesda, Md., with the salutation, “Dear Dr. Cano.”

Dr. Cole says he may skip the Latin mottoes in future.

DRG Schedules Regional Meetings for Grantees

The Division of Research Grants has scheduled a series of three regional meetings for the week of February 25-March 1 to brief presidents and deans of grantee institutions—other than medical colleges—on new grant administration regulations and to simplify and increase the amount of information presented in the new Research Grants Manual.

The day-long meetings were to be held February 25 in New York City, February 27 in Chicago, and March 1 in San Francisco.

Representatives of all major extramural programs of NIH and the Bureau of State Services attending each of the meetings.

Dr. Ernest M. Allen, PHS Grants Policy Officer, is representing the Office of the Surgeon General.

The meetings follow a similar series which took place last month between PHS officials and representatives of medical schools.
Ticket Sales Open Today for Hamsters' 'Pajama Game' at CC March 14 to 17

It's ticket-sale-time again at NIH—this time for the Hamsters' March production of "Pajama Game," sponsored by the NIH Recreation and Welfare Association.

Shows are scheduled for 8:30 p.m., Thursday to Saturday, March 14, 15, and 16; and Sunday, March 17, at 2:30 p.m., in the Clinical Center auditorium.

Erv Liljegren, ticket co-ordinator, said that beginning today, tickets will be on sale at $1.50 each at the entrances to the cafeterias in Buildings 1, 10, and 31, from 11 a.m. to 1 p.m. Tickets will also be available during the day in the R&W Office, Rm. 1A18, Bldg. 1, and from 10 a.m. to 2 p.m. at the R&W Film Desk in the Clinical Center, Rm. B1C27.

Sperling Praises Cast

Tickets are also scheduled to go on sale in other buildings on the reservation.

Show Director Arnold Sperling said the cast contains a good balance of performers selected both from NIH and nearby communities. The four leads—two male and two female—are from off the reservation.

John Kinnaman, playing "Sid," the plant superintendent, lives in Adelphi, Md., and comes to the cast via the University of Maryland and numerous appearances in the University Theater there. He is presently an Assistant Director at Washington's NBC affiliate, WRC-TV.

A housewife and mother of three children, Rebecca Barmack will take the part of "Babe." Her husband, Marty, plays the role of the tough factory owner, and one of her daughters will serve as an usher.

Also a housewife and the mother of four, Anita Ash will take the part of "Gladys." Many will remember Anita from her impressive performance as the "Daisy Mae" of last year's production of "Li'l Abner." A resident of Bethesda, she is a member of the Ramnockburn Players and the Montgomery County Players.

Gould Plays 'Heinie'

Murray Gould will enact the role of the plant's daffy time-study man, "Heinie." He brings to the part a wealth of experience gained through association with many dramatic groups. At one time he toured the Keith circuit with his own orchestra.

Show co-producers, Harold and Yvonne Miles, advise NIH employees to obtain their tickets early. They expect sell-outs for all four performances, as with last year's "Li'l Abner."

Rehearsing for the "Steam Heat" dance number in the Hamsters' March production of "Pajama Game," are (left to right) Jerry Osborne, NCI; Sally Ramsburg, OD; and Bob Kavanaugh, ORI.—Photo by Jerry Hecht.

Dr. Young Wins Darling Prize for Malaria Research

For his outstanding contributions to research in malaria, Dr. Martin D. Young, Associate Director of the National Institute of Allergy and Infectious Diseases, has been named recipient of the Darling Foundation Medal and Prize. The medal and prize is presented annually by the World Health Organization.

The bronze medal and prize of 1,000 Swiss francs will be presented to Dr. Young during the plenary session of the 16th Annual Assembly of the World Health Organization in Geneva in May. He is the eighth malarialogist honored by the Darling Foundation, which awards the prize intermittently in acknowledgment of meritorious work in the field of research in malaria.

Before coming to Bethesda in the spring of 1961, Dr. Young was head of the Columbia (S.C.) field station of the Malaria Research and Control Program of Extrastate Chemotherapy. There he did most of the work for which he has now received one of the highest honors awarded to malarialogists.

Research Is Extensive

His research has been concerned with practically all phases of malaria, with particular emphasis on use of malaria parasites in the treatment of neurosyphilis, host-parasite relationships, biology and cytology of the parasites, chemotherapy, and the relative vectorial abilities of mosquitoes.

Most recently he has documented cases of resistance of certain strains of malaria parasites to two antimalarial drugs, chloroquine and amodiaquine, which have been among the most effective drugs to suppress and cure malaria.

One other NIH scientist has won the Darling Prize. It was awarded in 1984 to Dr. G. Robert Cooney, Chief of the Laboratory of Parasite Chemotherapy, NIAID. Another so honored was Dr. George Macdonald, Director of the Ross Institute of Tropical Medicine, London, recently an NIAID Scientific Counselor.

An NIH staff member since 1937, Dr. Young has been a member of the PHS Commissioned Corps since 1944. He holds an Sc.D. from Johns Hopkins and is a graduate of Emory University. He was the first NIH staff member to receive the Rockefeller Public Service Award.

The Darling Prize is named in honor of Dr. Samuel Taylor Darling, U.S. member of the League of Nations Malaria Commission, who was accidentally killed while on duty with the League.
Researcher Reports Viruses Widespread Now in Once-Isolated American Arctic

A recent report prepared by Dr. Karl R. Reinhard, Deputy Chief of the Research Grants Review Branch, Division of Research Grants, reveals a "drastic change" in the pattern of disease in Alaska as a result of the social and economic development of this century and previously. American Arctic populations were subjected to epidemics of highly contagious diseases by the advent of visitors from more southerly regions during the late spring and summer," Dr. Reinhard said. "Smallpox, influenza, measles, and other epidemic diseases were frequently traceable to direct contact with outside populations."

During the past 40 years, however, he pointed out, arctic regions have been opened up to development of resources, new inhabitation, commerce, and military activity.

Populations Intermingle

"In Alaska, most of the small villages are in constant contact with the larger northern centers of population, and the latter exchange people constantly with the heavily populated southerly regions," Dr. Reinhard reported. "Acute diseases are now a year-round experience in most communities in the Western American Arctic."

The work by Dr. Reinhard and associates demonstrated that Coxsackie viruses, ECHO viruses and polioviruses, particularly Type 2, are prevalent in the Western American Arctic.

A study of the degree of immunity to polio among Alaskan natives, based on a 1953-54 survey, indicated a high level of resistance among 717 men in 47 villages of western and northern Alaska. Less than one percent, he said, had no antibodies against any of the three poliovirus types.

Overall, 87 percent had antibodies against Type 1 poliovirus; 92 percent had antibodies against Type 2, and 62 percent against Type 3.

More Research Needed

Considerably more research is needed, Dr. Reinhard said, to determine the relationship between these viruses and human disease. It would be particularly desirable, he said, to learn whether these viruses could be responsible for a serious and fatal disease among infants in native villages.

Diseases with central nervous symptoms or respiratory failure are a common cause of infant deaths, Dr. Reinhard said, noting that these infectious viruses also might explain the wintertime epidemics of stomach upsets among Alaskan villagers.

The endemicity of the enteroviruses in the small native villages may actually be a commentary on the depressed socio-economic state of native Alaskans," he said, "as well as the related problems of inadequate environmental sanitation."

An average semi-isolated Alaskan native village, Dr. Reinhard said, would afford an excellent opportunity to investigate the natural history of enterovirus infections.

Such an investigation, he said, should include questions of reinfec tion of individuals, changes in immunologic shifts, and the persistence of the viruses in the natural environment.

The latter question is of special importance, he indicated, since these viruses have shown themselves to be highly resistant to environmental influences and therefore capable of persisting in frozen soils and water.

The report, which appears in the February 9 issue of the Journal of the American Medical Association, is a summary of some of the work accomplished by Dr. Reinhard and colleagues while he was Chief of the Infectious Diseases Laboratory, Arctic Health Research Center, in Anchorage, from 1954 to 1960.

114 NIH Exhibits Displayed

At Scientific Meetings in '62

A recent tally by the Division of Research Services revealed that during calendar year 1962 NIH exhibits were displayed at 114 scientific meetings.

April and October were the peak months in 1962, with 27 and 25 exhibits shown, respectively.

During the year, 18 major exhibits were produced by the Medical Arts and Photography Branch, and 14 exhibits were renovated and updated.

Former NCI Associate

Receives JCC Award

Dr. James R. Jude, a former Clinical Associate in the National Cancer Institute, has been chosen one of America's ten outstanding young men of 1962 by the United States Junior Chamber of Commerce.

Now a surgeon at Johns Hopkins University Hospital and Assistant Professor of Surgery at Johns Hopkins University, Dr. Jude served as a Clinical Associate in NCI's Surgery Branch from 1956 to 1958.

Dr. Jude was a member of a 3-man team at Johns Hopkins University that developed the external massage method of cardiac resuscitation, a process to restart the heart without surgery by compressing it between the breastbone and the spine.

He is coauthor of a booklet and film on training in resuscitation techniques.

Dr. Ossofsky Appointed To Child Center Post

Dr. Helen Johns Ossofsky, Pediatrician and Consultant Practitioner in Pediatric Cardiology, has been appointed a part-time consultant in pediatrics with the National Institute of Child Health and Human Development.

Since 1959 Dr. Ossofsky has been Assistant Professor of Pediatrics at Georgetown University School of Medicine and a lecturer in Pediatric Cardiology at the Post Graduate School of Cardiovascular Nursing, Catholic University of America. She has also been a Consultant Practitioner in Pediatric Cardiology in Washington, D.C.

Dr. Ossofsky was Supervisory Medical Officer from 1959 to November 1962 at D.C. General Hospital, and from 1957 to 1959 she served as Research Associate in Epidemiology at Johns Hopkins University and Hospital, Baltimore.

Hopkins Graduate

A native of Drexel Hill, Pa., Dr. Ossofsky received a B.A. degree from Mt. Holyoke College in 1943 and an M.D. degree from the Johns Hopkins University School of Medicine in 1954.

In the intervening years, she served as a hospital social worker at the Army hospital in Aberdeen, Md., from 1944 to 1947 and as a physical science aide and organic chemist at the Aberdeen Proving Grounds, Ballistics Research Laboratory, from 1947 to 1950.

A resident of Washington, D.C., Dr. Ossofsky is a Diplomat of the American Board of Pediatrics and a member of the American Heart Association.

Hazel Bowen, a former Grants Clerk in the International Research Programs Section, Research Grants and Fellowships Branch, NIH, receives a sustained superior performance award from Philip Sapir, Branch Chief, as Dr. Joanne Brand of the International Research Programs Section looks on approvingly.

Mrs. Bowen, who resigned last November, received a citation commending her for "her exceptional productivity, organizational ability, high adaptive capacities . . . and her excellent working relationships with scientific consultants and fellow employees."—Photo by Sam Silverman.
Urinary Hydroxyproline Found to Vary With Parathyroid Activity

The parathyroid glands secrete a hormone which exerts profound effects on calcium and phosphorous metabolism. In health, the rate of parathormone secretion is regulated by a feedback mechanism geared to serum calcium levels. In hyperparathyroidism, the glands do not respond to this feedback mechanism, and very high serum calcium levels are maintained at the expense of bone. This disorder can lead to kidney stones, impaired renal function, and increased susceptibility to bone fracture.

National Heart Institute scientists have found that parathormone also causes the breakdown of bone matrix and the release of hydroxyproline, an important constituent of bone collagen. This hydroxyproline is subsequently excreted in the urine.

Reaction Noted

When parathormone was administered to normal subjects and to patients with hyperparathyroidism, there was a sharp increase in their hydroxyproline excretion.

Calcium infusions, which suppress parathormone secretion in normal subjects, resulted in a sharp decrease in their hydroxyproline excretion. These infusions had no effect on hydroxyproline excretion in patients with complete absence of parathyroid function.

These findings indicate that the rate of bone metabolism, and hence parathyroid activity, is reflected by variations in urinary output of hydroxyproline.

The diagnosis of hyperparathyroidism is usually established by infusing calcium into the patient, then measuring his urinary output of phosphorus.

Differences Explained

In normal subjects, the infusions suppress parathormone secretion and result in decreased phosphorus excretion; in hyperparathyroidism, they do not. Since urinary hydroxyproline would also be unaffected by calcium infusions in hyperparathyroidism, it might provide valuable confirmatory information in cases where the diagnostic picture is clouded by renal disease or other factors.

This work was reported at the January meeting of the American Federation for Clinical Research by Drs. Harry Keiser and Albert Sjoerdema of the Experimental Therapeutics Branch, NHI, and Drs. John Gill and Frederic Burtner of the Clinical Endocrinology Branch, NHI.

BUDGET

(Continued from Page 1)

for the same purpose for the current fiscal year.

NIH funds were designated for the following activities:

 Grants & Related Contracts (Millions)
 Research $541.2
 Fellowships 45.8
 Training 172.6
 State control programs 10.9
 Subtotal $770.5

 Direct Operations
 Research 71.1
 Collaborative studies 58.1
 Int'l research 1.1
 Biologics standards 4.8
 Training activities 1.5
 Prof. & tech. assistance 4.0
 Review & approval 15.2
 Program direction 4.2
 Subtotal $160.0

 Direct Construction
 Extension to CC cafeterias 4
 Library relocation, NIH 9
 Warehouse extension, Building 13 8
 Mental Health-Neurology-Cancer cafeteria 4
 Repairs and improvements, NIH 1.9
 Construction of Biologics Standards laboratory annex 4.3
 Subtotal 9.1

 Health research facilities construction grants 50.0

 TOTAL $989.6

 A breakdown of the NIH operating funds in the 1964 budget request, not including construction, follows:

 Appropriations (Millions)
 Gen. Res. & Services $164.7
 DBS 4.8
 NCI 145.1
 NIMH 190.1
 NIDR 19.8
 NHI 133.7
 NIAMD 114.7
 NIH 69.2
 NINDS 88.4

 TOTAL $930.5

 Funds for the newly created National Institute of General Medical Sciences ($118.3 million), as well as funds for the Division of Research Facilities and Resources ($40.9 million), are included in the amount requested for General Research and Services. For the current fiscal year, the latter also included funds for the Division of Biologics Standards which is a separate appropriation item in the Fiscal Year 1964 budget.

The budget request for the coming fiscal year also includes $34 million for the other newly established Institute—the National Institute of Child Health and Human Development. This amount will be derived by transfer from other appropriations for NIH for the coming fiscal year.

Members of the House Appropriations Subcommittee are John E. Fogarty of Rhode Island, Chairman; Winfield K. Denton of Indiana; John Lesinski of Michigan; Melvin R. Laird of Wisconsin; and Robert R. Michel of Illinois.

Fire Alarm Boxes Placed At Strategic Locations Outside NIH Buildings

For the better protection of NIH personnel and buildings the Plant Safety Branch, OD, has installed 10 new pedestal-type fire alarm boxes at strategic locations on the reservation and is planning additional installations.

The new fire boxes bring to 14 the number now installed outside of NIH buildings. They are painted red and are identifiable by a red light on top that burns day and night.

The boxes are easily actuated by opening the door and pulling down the handle. Although all NIH fire boxes are intended primarily for fire use, Fire Marshal Kenneth W. Gettings points out that it would be permissible to use them in event of a rescue or first aid emergency.

NCI Sponsors Workshop On Complement Studies Here Feb. 28-March 1

Sixty scientists internationally recognized for their research on complement, a group of serum proteins thought to play a role in defense against infection, will attend a 2-day Complement Workshop to be held here February 28 and March 1 under sponsorship of the National Cancer Institute.

Hosts for the meeting and program moderators are Dr. Herbert J. Rupp, Head, and Dr. Tibor Boros, a senior staff member, of the Immunology Section of the Institute's Diagnostic Research Branch.

Opening remarks will be delivered by Dr. Eli Nadel, Chief of the Diagnostic Research Branch, and Dr. Manfred M. Mayer, Professor of Microbiology, Johns Hopkins University.

19 Papers Scheduled

Nineteen of the invited participants, who represent public and private scientific research institutions in the United States and several foreign countries, will deliver papers.

The program of the Complement Workshop, which will be held in Conference Room 4, Building 31, has been divided into six areas relevant to the mechanisms of immune hemolysis, a specific phase of complement.

Presentations and discussions will include topics on isolation of complement components, mode of action of the various components of complement, antibodies to complement components, enhancement and inhibition of complement activity, conglutinin and hemolytic complement activity, and complement component measurement.

Dr. Rapp Comments

Commenting on the significance of complement studies, Dr. Rapp said, "Complement fixation, which is a test based on hemolytic activity, has been used for many years as a diagnostic tool in the routine and experimental laboratory. Recently, a need has arisen for improved diagnostic methods based on complement action; it is hoped that this workshop will contribute to this end."

Although this is the first Complement Workshop to be held at NIH, there have been several others in past years. The last one was held in 1966 at Walter Reed Hospital.

Other projected workshops will emphasize practical problems involving diagnosis, the role of complement in infectious disease and tumor-cell destruction, and immunological phenomena in general.

NIH Fire Marshal Kenneth W. Gettings tests one of the new pedestal fire alarm boxes. This one is located near the intersection of Center and Convoy Drives, at the southwest corner of Building 20, on apartment house.—Photo by Bob Pumphrey.
President Submits Mental Health Plan

(Continued from Page 1)

mental patients within the community. In this way, patients could move from diagnosis through treatment and recovery to rehabilitation without leaving their own localities.

Construction of the centers, which could be an expansion of existing facilities, a new beginning where necessary, or supplementation of facilities, would be expected to follow the pattern set by the Hill-Burton program. Center sponsors could be by State or local government or by voluntary nonprofit organization.

Private physicians would be able to treat their patients in the centers, assisted by an auxiliary professional staff directly and quickly available for outpatient and inpatient care.

2. A recommendation for authorization of short-term project grants for the initial staffing costs of comprehensive mental health centers, with the Federal Government providing up to 75 percent of the cost in the early months, on a gradually declining basis, and terminating such support for a project within slightly over four years.

Aid Would Decrease

These funds would be made available during the period of greatest financial impact, with local sponsors expected to meet an increasing portion of the staffing cost until after the fourth year, when financing would be centered solely within the community, region or State.

Success of local and private financing of center services, the President said, will depend in large part upon development of appropriate arrangement for health insurance. Recent studies have indicated that mental health care—particularly the cost of diagnosis and short-term therapy—is insurable at moderate cost.

3. A recommendation to facilitate the preparation of community plans for these new facilities as a necessary preliminary to any construction or staffing assistance, with a compressed appropriation of $4.2 million for planning grants under the National Institute of Mental Health.

This recommendation follows the appropriation of a similar amount for planning by the 87th Congress for Fiscal Year 1963. Funds would be allocated on a formula basis, with no State receiving less than a minimum of $50,000.

Purposes of the planning grant program is to assist each State in formulating plans for mental health programs on a community basis. Assistance through the grants would help assure State-wide coordination of plans and efforts of all community agencies and organizations interested in mental health and those with programs aimed toward prevention of mental illness and promotion of mental health.

Funds would also allow States to assess the need for facilities and services, research and training, legislation and financing, and so forth, and allow for the development of priorities for short- and long-range goals.

4. A recommendation stressing the need for improvement in the quality of care in existing State mental institutions while the comprehensive community mental health center program is developing, with an appropriation of $10 million for special grants for demonstration projects for inpatient and out-service training.

Would Aid State Hospitals

This assistance would help State mental hospitals to strengthen their therapeutic services, to become open institutions serving their communities, and thereby to perform a valuable transitional role.

5. A recommendation for the appropriation of $66 million for the training of personnel.

Manpower shortages now exist in virtually all of the key professional and auxiliary personnel categories—psychiatrists, clinical psychologists, social workers, and psychiatric nurses. The current supply of professional manpower in these fields would have sharply increased—from about 45,000 in 1960 to approximately 85,000 by 1970—to assure success of the Na-

Cratorio Society to Give Concert Here Feb. 28

The third concert in the 4th Annual Concert Series sponsored by the Recreation and Welfare Association of NIH is scheduled for February 28 at 8:30 p.m., in the Clinical Center auditorium.

The Oratorio Society of Montgomery County will present the program which includes Randall Thompson's "Frostiana" and the Cantata for Peace by Darius Milhaud. Works by Pachelbel, Bach, Brahms, and Saint-Suens also will be sung.

The 100-voice chorus was organized in 1961 by Dr. Hugh Hayward, a former NIH biochemist who is now music master at the Landon School for Boys.

Admission is by ticket only. Tickets at one dollar each may be purchased at the R&W Film Desk, Rm. B1237 in the Clinical Center, and at the R&W Office, Bldg. 31, Rm. 1A18. Children under 12 and CC patients will be admitted free but must obtain tickets.

NINDB Lab Determines Structural Picture Of Nerve Endings

The precise structural of autonomic nerve endings on smooth muscle has been revealed for the first time by Dr. Keith C. Richardson of the Laboratory of Neuroanatomical Sciences, NINDB.

This finding, coupled with other developments in this laboratory, now furnishes a precise structural picture of autonomic nerve endings.

The autonomic nervous system is concerned with maintaining a constant internal environment of the body and controls what are generally called involuntary functions.

At nerve endings the autonomic system releases chemical transmitter substances that regulate the muscles and effector organs under autonomic control.

Using the electron microscope, Dr. Richardson studied the nerve endings in the smooth muscle coat of the rat vas deferens—the excretory duct of the testis. This muscle is unusually rich in nerve endings which greatly facilitate the task of finding and examining them with the electron microscope.

Nerve Fibers Divide

He found that as the nerve bundle reaches the muscle the individual fibers divide into fine branches, lose their sheaths and pass into grooves on the surface of the smooth muscle fibers. There they form elongated endings in which there is a close apposition between the nerve and muscle membranes.

The majority of the endings contain mitochondria and many vesicles with a central granule similar to those known to be associated with nerve-transmitter substances in other parts of the autonomic system.

There were also numerous vesicles without granules, similar to the synaptic vesicles of motor end-plates, but at present these are of unknown significance.

This basic knowledge will permit scientists to assess the effects of drugs at specific nerve endings in the autonomic neuromuscular system and to learn how the vital functions controlled by this system are affected.

The results of this study appeared in the Journal of Anatomy.

Hypertension makes the heart pump with increased force and increases the pressure on arteries. If high blood pressure continues for a long time, the overworked circulatory system will not function as well as it should. Most people with high blood pressure can lead normal lives if they follow the advice of their doctors, according to the Washington Heart Association.
Automatic Tube System Proves Popular; Volume Carried Is Doubled in 4 Months

The volume of mail carried by the automatic pneumatic tube system has doubled, from 4,000 to 8,000 pieces a day, since the system was placed in operation in Building 31 four months ago, according to James G. Hawkes, Head, Communications Section, Ref. Unit, NIH, Branch, OAM.

"This increase," Mr. Hawkes said, "indicates that employees have found the tube system to be a speedy and successful means of sending urgent material between Buildings 1, 10, 13, 29, 30, and 31."

To test the system's effectiveness a member of the Communications Section staff recently sent a messenger to Building 10 to a station in Building 31.

The round trip, including the time it took the recipient to open the carrier and respond to the message took exactly 10 minutes. Had the message been sent by the "special" hand-carried mail system the same trip would have taken a minimum of two hours.

For Phone First

Messages sent by tube are received in the order they are sent. Mr. Hawkes explained, if the sender telephones the recipient so that the carrier can be picked up as soon as it reaches its destination.

Although most employees seem to be using the tube system, Dr. Hawkes believes there are still a few who may be reluctant to use it because of fear that it is too complicated.

He points out that simple, concise directions for sending messages by tube are posted at each station along with a directory of all stations to which messages may be sent.

Mr. Hawkes cautions users to be sure to dial the alphabetical and numerical rings on the carrier, which identify the receiving station. If the dial is not set, the message will automatically be sent to the station dialed by the last user of the carrier.

There is no need to fear that mechanical difficulties may hamper delivery of messages, Mr. Hawkes said. His staff has encountered only two major stoppages and the causes of both were quickly ascertained and corrected.

Address NBOC Mail to NIH

Mail from outside of NIH, intended for NIH personnel and offices located in the North Bethesda Office Center, should be addressed to the National Institutes of Health, North Bethesda Office Center, Bethesda 14, Md.

If NIH is not included in the address, mail may be routed to the Rockville (Md.) Post Office, which does not deliver to the North Bethesda Office Center.
Dr. Gay, DRS, Certified As ACLAM Diplomate

Dr. William I. Gay, Chief of the Animal Hospital Center, Laboratory Aids Branch, Division of Research Services, was recently certified as a Diplomate and admitted to membership in the American College of Laboratory Animal Medicine. He is one of 55 veterinarians now certified as Diplomates in the United States.

Certification as a Diplomate is limited to veterinarians who have completed a comprehensive oral and written examination, have written a dissertation suitable for publication on some phase of laboratory animal medicine, and meet training and experience requirements established by the American College of Laboratory Animal Medicine.

As a Diplomate, Dr. Gay will engage in efforts to increase the effectiveness of experiments on animals used in medical research by assisting in the breeding and procurement of healthy animals, by preventing and treating naturally occurring diseases in research animals, and by training technical personnel who work with animals.

Dr. Gay joined the Laboratory Aids Branch in 1954. In 1955 he was appointed Chief of the Animal Hospital Section and in 1962 was named Assistant Chief of the Laboratory Aids Branch, with primary responsibility for planning and developing facilities at the NIH Animal Center in Poolesville, Md.

Dr. Gay is a member of the Executive Board of the Animal Care Panel, President of the District of Columbia Veterinary Medical Association, and President of the National Capital Branch of the Animal Care Panel.

The session, planned under the direction of Joseph A. Staton, Deputy Chief of the CC Clinical and Professional Education Branch, and Boyd W. Stephenson, Chief of the Commissioned Officers Section, PMB, is designed to answer typical questions that confront an officer about to return to private life.

Typical Questions Listed

These include questions on separation procedures, leave and pay, shipment of household effects, inactive status, physical examinations, and personnel orders.

Dr. Murray C. Brown, Chief of the CC Clinical and Professional Education Branch, will be chairman of the session and Dr. Murray A. Diamond, Chief of the Office of Personnel, PHS, will address the meeting.

Mr. Stephenson will be on hand to answer questions.

Complete inactivation information as well as all necessary forms will be available.

Administrative personnel concerned with inactivation procedures are invited to attend the session.

A question-and-answer period for Commissioned Officers preparing to leave active Public Health Service duty on or about July 1 is scheduled to be held Thursday, March 7, at 3:30 p.m. in the Clinical Center auditorium.

The session will be available on all televisions in the Bethesda area which NIH has leased wholly or in part to ease overcrowding on the reservation. The four buildings pictured here also house NIH off-reservation activities. Space in the William Alanson White Building at St. Elizabeth's Hospital (top left) is occupied by the Clinical Neuropharmacological Research Center, National Institute of Mental Health, by agreement with the hospital's administration. The others are leased. At top, right, is the Robin Building in Silver Spring, Md. It contains units of the National Cancer Institute, the National Institute of Mental Health, the National Institute of Neurological Diseases and Blindness, and the Supply and Financial Management Branches, OD.

Typical Questions Listed

A stroke is caused by a stoppage or reduction in the blood supply to a part of the brain. Nerve cells, deprived of their supply of blood, cannot live. In turn, part of the body controlled by those nerve cells ceases to function. Modern techniques of rehabilitation can reduce invalidism and help most patients toward recovery. For general information, ask your Heart Association.

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