Stewart Chosen NHI Director as Knutti Retires

Dr. William H. Stewart was named Director of the National Heart Institute effective August 1, replacing Dr. Ralph E. Knutti who is retiring, Surgeon General Lu-

ther L. Terry of the Public Health Service announced recently.

Dr. Stewart will be responsible for directing the world-wide activities of the NHI, which was created by act of Congress in 1948 to conduct and support medical research and training to help conquer heart disease, the Nation's leading cause of death. As the former Assistant Director of the Institute, he is familiar with NHI programs.

Experience Cited

Prior to his present appointment, Dr. Stewart was Assistant to the Special Assistant to the Secretary (Health and Medical Affairs) of the Department of Health, Education, and Welfare.

In commenting on the appointment, Dr. Terry said:

"Dr. Stewart's achievements make him amply qualified to con-

(See NHI DIRECTOR, Page 6)

Member of Cholera Lab Receives British Honor

Dorothy Terrance, Nursing Supervisor of the Pakistan (SEATO) Cholera Research Laboratory in Dacca, has been included on the Queen's Birthday Honors List to become a Member of the Order of the British Empire (MBE).

The Laboratory is part of the SEATO Cholera Research Program, which is administered by NIH. Miss Terrance, a native of Scotland, has been working at the Laboratory since July 1963.

Dr. Dean Mason of NHI Wins ATS Essay Award

Dr. Dean T. Mason of the National Heart Institute's Cardiology Branch was presented with the Prize Essay Award at the annual meeting of the American Therapeutic Society in New York City. Dr. Mason received $500 as first prize winner for his work on "Cardiac and Extrinsic Effects of Digitalis in Normal Man."

Celebrezze Named To Federal Court; Gardner to HEW

President Johnson announced the nomination on July 27 of Anthony J. Celebrezze, Secretary of the Department of Health, Education, and Welfare, to the U.S. Court of Appeals for the Sixth District, with headquarters in Cincinnati. At the same time he announced the nomination of John W. Gardner, President of the Carnegie Corporation of New York, to succeed Mr. Celebrezze as Secretary of DHEW.

Both appointments are subject to confirmation by the Senate. Secretary Celebrezze has headed the department since July 31, 1962. At the time of his appointment to the Cabinet post by President Kennedy he was serving a fifth term as Mayor of the City of Cleveland.

Born in Anzi, Italy, in 1910, Secretary Celebrezze is a graduate of the Institute for the Blind in Rome and is a 1937 graduate of the College of Law at the University of Pennsylvania.

MUSCLE-TESTING DEVICE

'QMT' Speeds Drug Evaluation For Neuromuscular Diseases

By George J. Mannina

A new muscle-testing device, currently being used in clinical trials at the NIH Clinical Center, promises to become a valuable research tool in the search for methods of treating neuromuscular diseases.

The machine, called the Quantitative Muscle-Tester or "QMT," was developed to become the basis of evaluation in a planned drug treatment program for the muscle-wasting diseases.

Clinical evaluation and specialized chemical studies are also being used in conjunction with the machine to determine whether there is improvement or worsening of weakness in patients afflicted with any neuromuscular disease.

Evaluation Time Reduced

Those who have used the QMT report that it has significantly reduced the interval required to evaluate the efficacy of drugs used in the treatment of these patients.

The QMT objectively tests the state of muscle weakness in representative parts of the body from hands to feet. Twenty-four different push-and-pull tests presently are performed with it. Others are being developed.

The device resembles a low, rectan-
tangular, metal bed-on-wheels. There is an H-frame superstructure which consists of a group of adjustable bars used to position the load-cell transducer at any point above the bed.

The transducer "strain gauge" is an adjustable box-like device which measures either the pushing or pulling force the patient exerts against it.

The gauge, in turn, registers the strength of effort on a recorder by sending an electrical impulse through an amplifier to a recorder.

Patients Well-Secured

The patients are positioned and stabilized during the testing by means of various shoulder bars, waist belts, a foot board and braces and straps.

To induce patients to pull or push with the same motivation, a tape-recorded voice delivers brief instructions.

For Neuromuscular Diseases

"Dr. Stewart's achievements make him amply qualified to con-

(See MUSCLE TESTER, Page 4)

In this explanatory picture of the Quantitative Muscle-Tester, Ronnie E. Townsend and Lamont B. Smith (l to r), the two physical therapists who operate the device, make final adjustments in preparation for a test of the strength of the ankle dorsi flexors and plantar flexors. Ruth G. Love, a CC secretary, portrays the patient.—Photo by Jerry Hecht.
Lehigh Student Finds Dental Research
At NIH ‘a Very Rewarding Experience’

By Bob Callahan

“A very rewarding experience— I didn’t realize the scope of dental research, especially the amount of chemistry involved.” In these words, John Boghosian, a junior at Lehigh University, summarized his 10 summer weeks at the National Institute of Dental Research, ending next week.

John’s experience vividly demonstrated to him the close rapport between histologists, physiologists, microbiologists, biochemists and other basic scientists working with dental specialists in the intensive search for causes of dental diseases.

One of 10 Selected

John is one of 10 students selected as the first participants in a new program sponsored jointly by the National Dental Association Council on Dental Research and the American Association of Dental Schools. The purpose is to interest students in dental research.

A native of Drexel Hill, Pa., John was amazed at the facilities and the variety of equipment available in the Institute’s modern laboratories.

Under the supervision of Dr. Micah Krichevsky in the Laboratory of Microbiology, he worked on isolation of the yellow pigments of a cellular slime mold by chemical extraction and thin-layer chromatography.

He considers the experience excellent training for his goal—a Ph. D. in organic chemistry—and hopes to return next year “to pursue the challenging problems in oral biology.”

Applicants Chosen on Merit

The students were chosen from applicants from colleges and universities throughout the country. Selection was made by an advisory committee of the ADA on the basis of scholastic ability, interest in a scientific career, scientific aptitude and demonstrated initiative and leadership. The students were assigned to eight institutions with laboratories conducting the kinds of research in which they are interested.

The program, financed by a three-year grant from the Dental Institute, will be expanded to 25 students next year.

Dr. Schwartz Appointed

Dr. Edward Schwartz, Assistant Chief of the Grants Management Branch, Division of Research Grants, was recently installed as Chairman of the Practice Review Committee in the District of Columbia, County Chapter, Maryland Association of Certified Public Accountants. This Committee has the important role of coordinating efforts with responsible community officials and members of the profession to insure adherence to accepted auditing standards.
DeWitt, Goodman Named by Hansen
To DRS Posts

Chris A. Hansen, Chief of the Division of Research Services, recently announced the appointments of Dr. William B. DeWitt as Associate Chief for Laboratory Resources and Dr. Lester Goodman as Chief of the Biomedical Engineering and Instrumentation Branch.

Dr. DeWitt will serve as Scientific Director of the Division and will be responsible for non-engineering professional and technical services for the intramural programs of NIH. These services are provided by three branches: Library, Laboratory Aids, and Medical Arts and Photography.

Dr. Goodman will be responsible for non-engineering professional and technical services for the extramural programs of NIH. These services are provided by the Office of Research Facilities and Resources. Support is also provided from affecting the performance of a group of eminent biologists, the Rockefeller Foundation, and the National Institute of Allergy and Infectious Diseases.

Employed here since 1949, Dr. DeWitt was previously with the Laboratory of Parasitic Diseases, National Institute of Allergy and Infectious Diseases. He received his USPHS Commission in 1951.

As a parasitologist, Dr. DeWitt has spent most of his career in research on schistosomiasis and on the effects of nutrition on parasitic diseases. His most recent work includes extensive field studies on schistosomiasis in Egypt and Puerto Rico.

Backgrounds Cited

He has published a number of articles and is editor of the bi-monthly Tropical Medicine and Hygiene News, published by the American Society of Tropical Medicine and Hygiene.

A native of Birmingham, Ala., Dr. DeWitt attended Howard College there and received his B.A. degree in 1948. He received his M.A. and Ph.D. degrees from the George Washington University in 1952 and 1956 respectively.

Dr. Goodman will be responsible for providing engineering and technological consultation to the intramural research program at NIH, as well as for directing the instrument development, design, and fabrication program of the branch.

He was formerly Associate Professor of Engineering and Assistant Director of the Systems Research Center at the Case Institute of Technology, where his work emphasized control systems, computer modeling of the respiratory system, and long-life batteries that need replacement only every few years.

100 GREAT APES, 200 MONKEYS

Yerkes Primate Collection, Rated One Of World's Best, Moves to Emory U.

The world's most valuable collection of non-human primates was moved recently to the new $1,875,963 quarters of the Yerkes Regional Primate Research Center at Emory University in suburban Atlanta, Ga.

The animals were transported from Orange Park, Fla., to Emory, a distance of 340 miles, in a specially equipped van. Four trips were necessary to complete the transfer of the collection consisting of more than 100 great apes (gorillas, chimpanzees and orangutans) and nearly 200 monkeys.

Animals which showed signs of getting over-excited were given tranquilizers to calm their nerves. In the group was a 45-year-old chimpanzee, Wendy, who was brought to Orange Park from New Haven by the late Dr. Robert M. Yerkes, the collection's founder, in 1956.

Collection Begun in 1924

The collection was begun in 1924 by Dr. Yerkes of Yale University, who moved four chimpanzees into a remodeled barn on a street in New Haven, Conn., hoping to demonstrate that it was feasible to rear chimpanzees in captivity and use them in scientific research.

Six years later, with the endorsement of a group of eminent biologists, the Rockefeller Foundation, and the National Institute of Allergy and Infectious Diseases, the project, appropriated additional funds to purchase a tract of land in Orange Park, Fla. Yale then established the primate facility with Dr. Yerkes as its head.

Dr. Yerkes chose Orange Park as the site for the center because its warm climate was deemed favorable for non-human primates.

Value Is High

Although the market value of the animals is about a quarter of a million dollars, their scientific value is beyond price. More than 70 chimpanzees in the group have research records involving years of investigations. It would take at least a generation to duplicate them.

The colony of 25 orangutans is believed the largest in captivity. orangutans which once cost about $2,500 each are now rare and difficult to secure at any price. The colony of 10 gorillas is one of the nation's largest in any institution.

In addition to the 300 non-human primates brought from Orange Park, there are about 100 monkeys which had been housed on the Emory campus. These monkeys are subjects of an Air Force study on the effects of radiation.

The Yerkes Center is one of seven regional primate research centers in the nation supported by the Public Health Service. In addition, four others are in operation.

They are Tulane University's Delta Regional Primate Research Center at Covington, La.; the Oregon Regional Primate Research Center at Beaverton, Oreg.; the Regional Primate Research Center at the University of Washington, Seattle; and the Wisconsin Regional Primate Research Center, Madison, Wis.

Others Under Construction

Two other centers—the University of California's National Center for Primate Biology at Davis, Calif., and Harvard's New England Regional Primate Research Centers—are under construction.

Studies concerning cardiovascular diseases, muscular dystrophy, and other disorders will be conducted at the Yerkes Center.

The grants for operating the center are administered by the Animal Resources Branch of the NIH Division of Research Facilities and Resources. Support is also provided through grants for individual research projects.

The center's annual budget will be nearly $1 million a year, and a staff of 100 including 27 scientists will help conduct the activities. The center will be available for research to scientists throughout the world through visiting programs.

Dr. Geoffrey H. Bourne, Director of the Yerkes Center, is a native Australian and a specialist in his- tochemistry, endocrinology, and nutrition. Before coming to Emory in 1957 as Chairman of the Department of Anatomy, Dr. Bourne was, in 1951.

2 Foreign Makes Affected

The Institute's statement was prompted by a recent paper published in the British Medical Journal which reported on the publicity in the United States. Most of the publicity failed to indicate that the article's findings of radiofrequency interference applied only to two pacemakers of foreign manufacture—one external and one implantable—and not to implantable pacemakers manufactured in the United States.

Electronic pacemakers generate electrical signals that cause the heart to beat at a normal rate in patients whose normal pacemaker function has been disrupted by heart disease or operative injury.

Those currently in clinical use in the United States are completely implantable and are powered by long-life batteries that need replacement only every few years.

These devices have saved thousands of lives and have enabled other thousands of heartblock victims to resume active lives, the Institute said.

U.S. Pacemakers' Declared Safe by NHI Spokesman

The more than 10,000 American heart patients who have been fitted with implantable electronic pacemakers need not fear that the pacemaker will be affected by proximity to diathermy machines, neon signs, household appliances, radios, TV sets, or other electrical or electronic apparatuses that generate radio frequency emissions, according to the National Heart Institute.

The Institute said that implantable electronic pacemakers manufactured and commercially available in the United States have been repeatedly tested and found completely free of susceptibility to outside radiofrequency interference.

"These tests have shown that, once the pacemaker is implanted within the patient's body, its electronic design and the natural shielding afforded by body tissues prevent any external radiofrequency sources from affecting its performance," said Dr. Peter Mansfield of the Institute's Laboratory of Cardiovascular Physiology.

100 GREAT APES, 200 MONKEYS

Yerkes Primate Collection, Rated One Of World's Best, Moves to Emory U.
Dr. Himmelsbach, Assoc. Director
Of CC, to Retire

Dr. Clifton K. Himmelsbach, Associate Director of the National Institutes of Health Clinical Center, will retire from the Public Health Service on August 31 after 34 years. Dr. Himmelsbach will become Associate Dean for Research at Georgetown University's School of Medicine and Dentistry on September 1.

In 1964, Dr. Himmelsbach was awarded the PHS medal and certificate for meritorious service "for his high level of competence in Administrative Medicine."

Two major examples of his recent achievements are his leadership in the development of the new physiologic method of device heretofore utilized in clinical impressions. These impressions might vary depending on the patient's attitude or perhaps the mood of the examiner."

Thus it is helpful, he said, in showing up discrepancies that develop in some cases where the patient's overwhelming desire to get well affects his reliability in the course of normal clinical testing. By using the QMT, in conjunction with normal clinical testing, the researchers have developed a workable program evaluating drug treatment in neuromuscular diseases which, untreated, follow a steadily progressive course. In addition, by concentrating on a 3-month period, they are able to draw conclusions about drugs sooner than otherwise.

In this demonstration of the QMT's flexibility, "patient" Ashwood D. Holder, a physical therapy aide in the CC Rehabilitation Department, tests strength of right shoulder muscles. —Photo by Lee Bragg.

MUSCLE TESTER
(Continued from Page 1)

structions and repeatedly urges them to push or pull "harder, harder, harder." Evolution of the device from a researcher's idea to a completely functional and perfectly engineered piece of equipment is corroborating all research requirements demonstrates the growing interplay between the scientist and the engineer in bringing these diverse fields together to the advantage of medical research.

Planning for the QMT began in 1963 under the direction of Dr. W. King Engel, Chief of the Medical Standards Testing and Instrumentation Branch, Division of Research Services, complete the study team.

Dr. Hogenhuis, Associate Neuroligist, has been the Co-Director of the Medical Neurology Branch; Dr. Engel, and Dr. David M. Fried, Chief of the Clinical Center's Rehabilitation Department, working together with Winston G. Harlow of the Biomedical Engineering and Instrumentation Branch, Division of Research Services, constructed the QMT machine.

Dr. Lee Gure and Boyce Sterling of the Biomedical Engineering and Instrumentation Branch, Division of Research Services, constructed the QMG. Ronnie Townsend and Lament B. Smith, Physical Therapists in the Clinical Center Rehabilitation Department, aided in working out the patient's position and procedure and are presently carrying on patient-testing with the machine.

The current study, which began last January, involves 15 outpatients, 15 patients with amyotrophic lateral sclerosis (ALS) and smaller groups of patients who suffer from other neuromuscular diseases. The ALS patients, some of whom travel to the CC at their own expense from as far as Portland, Oreg., are divided into three groups. Each patient receives a different drug over a 3-month period. Each is tested every six weeks with the QMT and by regular clinical procedures.

Data from these tests are then evaluated at the end of each 3-month period, after which the patients are started on another drug. "The QMT," Dr. Gold pointed out, "is useful in producing objective measurements to compare with those obtained from the physicians' clinical impressions. These impressions might vary depending on the patient's attitude or perhaps the mood of the examiner."

Thus it is helpful, he said, in showing up discrepancies that develop in some cases where the patient's overwhelming desire to get well affects his reliability in the course of normal clinical testing. By using the QMT, in conjunction with normal clinical testing, the researchers have developed a workable program evaluating drug treatment in neuromuscular diseases which, untreated, follow a steadily progressive course.

In addition, by concentrating on a 3-month period, they are able to draw conclusions about drugs sooner than otherwise.
Survey Reveals Pima Indians of Arizona Have Highest Rate of Diabetes in U.S.

A diabetes survey among the Pima Indians of Arizona has revealed that this population has the highest prevalence of diabetes ever reported, the U.S. Public Health Service announced recently. A research team headed by Dr. Thomas A. Burch of the National Institute of Arthritis and Metabolic Diseases made the findings which indicated that the prevalence of diabetes among the Pimas is 15 times the rate of the United States population as a whole.

"Determined why this population group has such a high frequency of diabetes may help scientists to pin down the factor or factors causing diabetes," Dr. Burch said.

The study was undertaken to determine the frequency of the disease and of some of the complications of diabetes, a chronic disorder which is the seventh ranking killer disease in the United States.

"When completed," Dr. Burch said, "the survey may represent a major contribution by the Pima Indians to the health of their tribe, to the medical profession, and to the world."

The diabetes study came as a by-product of one of the largest population surveys of rheumatoid arthritis ever attempted in the U.S.

2 Groups Selected

Since the arthritis program was designed to test whether populations living under different geographic and climatic conditions differ in frequency of rheumatoid arthritis, two groups were selected—the Blackfeet of Montana who inhabit one of the coldest areas of the country, and the Pimas of Arizona who live in one of the warmest areas of the country.

During blood tests of the Pimas in 1963 it was found that 30 percent of the Indians in the age group 30 years and over had abnormally high levels of sugar in their blood following a meal.

Last February the NIAMD field unit returned to the Gila River Indian Reservation at Sacaton, the home of the Pimas about 30 miles south of Phoenix, in an effort to make a more thorough study of this unique prevalence of diabetes.

Dr. Burch was accompanied by Dr. Peter Bennett of NIAID. In addition, Drs. Max Miller and Arthur G. Steinberg of Western Reserve University collaborated in this study.

In the current study, one-half of the estimated Indian population aged 10 years and over living on the reservation was examined. This included a random sample of 345 of the original group studied in 1963 who now were undergoing examinations by more sophisticated methods to diagnose diabetes, and to determine the extent and frequency of its many complications.

In addition, about 800 volunteers underwent blood sugar examinations.

One-Third Found Positive

The NIAMD team found that more than one-third of the Indians examined had positive tests for diabetes. This figure varied among age groups, ranging from one out of 20 children with positive tests for diabetes to more than half of those aged 50 and over.

Reports of the diabetes test were entered in each person's medical record which was immediately turned over to the PHS Hospital at Sacaton for follow-up investigation and treatment.

"Finding an isolated community with such an unusually high prevalence of diabetes presents a unique opportunity to explore the possible precipitating factors as well as those involved in the prevention or postponement of development of the serious complications of this disease," Dr. Burch said.

The first report from this study by the NIAMD scientists was given at the recent annual meeting of the American Diabetes Association, where it aroused considerable interest and speculation among diabetes specialists. This study was done in cooperation with the Division of Indian Health, BMS.

Dr. James A. Shannon examines a mint collection of 1953 U.S. coins presented to him by Dr. Stuart M. Sessoms on behalf of the Director's staff as a memento of his 10th anniversary as Director of NIH. Other memorabilia presented to Dr. Shannon were a bound collection of his articles and speeches and one of the first edition copies of the U.S. Pharmacopeia (1820).

APPOINTMENTS

(Continued from Page 1)

retary Celebrezze came to this country at the age of two. He was graduated from Ohio Northern University in 1936 with an LL.B. degree and served in the U.S. Navy during World War II.

He was elected to the Ohio Senate in 1950 and re-elected in 1952. He was first elected Mayor of Cleveland in 1953.

In naming Secretary Celebrezze for a Federal appellate judgeship, President Johnson said, "He will go, with the advice and consent of the Senate, to his new duties with the gratitude of every child who now can learn but who might not have, of every older person who now can find care but who might not have, and of every man and woman who now survives cancer, heart attack and stroke, but who might not have."

President Lauds Gardner

In lauding the qualifications of Secretary Celebrezze's successor, John W. Gardner, the President said, "Once he wrote in his excellent book on excellence these words: 'The society which scorns excellence in plumbing because plumbing is a humble activity and tolerates shoddiness in philosophy because it is an exalted activity will have neither good plumbing nor good philosophy. Neither its pipes nor its theories will hold water.'"

"Any man who can believe that and write it," he said, "is the kind of man who can and ought to become the President's leader of the fastest growing department and the most comprehensive services in this Government."

Mr. Gardner, who was born in Los Angeles in 1912, is an Honor-
NHI DIRECTOR  
(Continued from Page 1)

tinue leadership in an area so vital to the future well being of all of our citizens. President Johnson recently pointed out the need for a nationwide assault on the three leading killers of our time in endorsing the report of the President's Commission on Heart Disease, Cancer and Stroke. Dr. Stewart's accomplishments and his potential give us the continuity of highly effective leadership, exemplified by Dr. Knutti during the past four years, which we need for victory over heart disease.1

Prior Assignments Listed

Dr. Stewart holds the rank of Assistant Surgeon General and has been a Commissioned Officer in the PHS since 1951. His other assignments have included: Head, Epidemiology Unit, Thomasville, (Ga.) Field Station, Communicable Disease Center; Chief, Heart Disease Control Program; Chief, Division of Public Health Methods; and Chief, Division of Community Health Services.

Born in Minneapolis, Minn., in 1921, Dr. Stewart attended the University of Minnesota from 1939-41. He received his M.D. degree from Louisiana State University in 1945. He interned at Philadelphia General Hospital (1945-46) and served in the U.S. Army Medical Corps until 1948. For a short time thereafter he was on the staff of the Veterans Administration Outpatient Clinic in St. Paul, Minn.

From 1948-50 he was resident, Pediatrics, Charity Hospital, New Orleans, La. He maintained private practice in Alexandria, La., from 1950 until joining the PHS in 1951.

Dr. Stewart is a member of the American Heart Association, the American Medical Association, the American Public Health Association, and the American Academy of Pediatrics.

Significant Advances Seen

Dr. Knutti, who has been Director of the NHI since September 1961, has seen some of the most significant and dramatic advances in the cardio-vascular field during his tenure.

"Dr. Knutti's direction of the research programs of the NHI and his guidance in the far-reaching grants programs have contributed much to the fight against the diseases of the heart and blood vessels," Dr. Terry said.

Dr. Knutti was Co-Chairman of the Second National Conference on Cardiovascular Diseases in 1964, when many of the Nation's leading cardiologists met in Washington to review progress of the past 15 years and map plans for the future. He also testified before the President's Commission on Heart Disease, Cancer and Stroke.

The national diet-heart feasibility study was launched during Dr. Knutti's directorship. Still in progress, the study was designed to test whether a national study on the effects of diet on the heart is feasible.

During the past two years, Dr. Knutti has also participated in planning a new Gerontology building in Baltimore. When completed, the new edifice will be the largest research center for the study of aging in the country.

International Programs Developed

Several important international research programs of the NHI have been developed during his tenure as Director. His visits with colleagues to Israel and other countries resulted in reports of cardiovascular progress and stimulated further research.

He has also represented the NIH Director at the meeting of the Government Council at the Pakistan-SEATO Cholera Research Laboratory and currently is Chairman of the Directing Council of that laboratory.

He visited Russia on a U.S. medical exchange mission and was later host to Russian medical scientists on a similar mission here.

Dr. Knutti was born in Palo Alto, Calif., in 1901. He received A.B. and B.S. degrees at West Virginia University and an M.D. degree at Yale University in 1928.

Following a year as Assistant in Pathology at Vanderbilt University, Dr. Knutti served his internship in surgery at Lakeside Hospital in Cleveland, Ohio. In 1930 he began his long career in pathology and research teaching and with slightly fewer side effects.

One patient, a 40-year-old man who had been hospitalized periodically for the past 13 years, had marked hallucinations and seemed unable to speak any language fluently.

Examples Noted

Within seven days after receiving 12½ mg. of fluphenazine decanoate, nine out of 12 chronic schizophrenic patients who had become drug resistant after three to 34 years of hospitalization improved rapidly. The effects continued from 16 to 22 days. A double dose of the drug brought even longer responses lasting 21 to 27 days in some cases.

Earlier studies showed that a related drug, fluphenazine enanthate, was effective if injected twice a month in doses of 25 mg. The present research revealed, however, that antipsychotic effects of a single 12½ mg. injection of fluphenazine decanoate last even longer, and with slightly fewer side effects.

New NIH Supply Catalog Adds Office-Use Items

James B. Davis, Chief of the Supply Management Branch, has announced the recent distribution of a new edition (July 1965) of the NIH Supply Catalog.

Generously illustrated, this publication lists the hundreds of items which can be requisitioned from the SMB Central Storeroom located in Building 13.

Many new items are included in the catalog. In addition, a number of office-use items, formerly available only from the two SMB Self-Service Stores, have been added to the Office Supplies section of the catalog. This means they can now be obtained from the Central Storeroom as well as from the Self-Service Stores.

Ordering offices may obtain copies of the new NIH Supply Catalog by dialing Ext. 65904, and bacteriology at the Rockefeller Institute for Medical Research in New York City.

From 1935 to 1942 he was Assistant Professor in the Pathology Department of the University of Rochester. At that time he was also Director of Laboratories at the Genesee and Park Avenue Hospitals in Rochester.

He became associated with the Pathology Department at the University of Southern California Medical School in 1942 and served as Associate Professor there from 1948 to 1961.

Dr. Knutti's wife, the former Sarah Paige Hooker, is also a physician. She has devoted most of her professional career to hospital administration.

Antipsychotic Effects of Fluphenazine Decanoate Last Up to 22 Days

A new drug for treating persons suffering from psychosis shows effective results from one injection for periods up to 22 days.

The prolonged effects of fluphenazine decanoate, a new form of one of the major tranquilizing drugs, phenothiazine, stem from its ability to act as a "depot" from which phenothiazine is released slowly.

The "slow release" qualities of fluphenazine decanoate were discovered by George M. Simons and colleagues at Rockland State Hospital in Orangeburg, N.Y., while working under a Public Health Service research grant from the National Institute of Mental Health.

Patients Improve Rapidly

After a single injection of 12½ mg. of fluphenazine decanoate, nine out of 12 chronic schizophrenic patients who had become drug resistant after three to 34 years of hospitalization improved rapidly. The effects continued from 16 to 22 days. A double dose of the drug brought even longer responses lasting 21 to 27 days in some cases.

Fluphenazine decanoate was given "in recognition of outstanding teamwork and superior accomplishment benefiting the administrative program of NIAID in the preparation of informational handbooks." The recipients, from left, are: Jean Cochran, Betsy Slay, Connie Bishop, Nancy Peverini and Joy Russ.

Fluphenazine Decanoate

Dr. Knutti's directorship. Still in progress, the study was designed to test whether a national study on the effects of diet on the heart is feasible.

During the past two years, Dr. Knutti has also participated in planning a new Gerontology building in Baltimore. When completed, the new edifice will be the largest research center for the study of aging in the country.

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One patient, a 40-year-old man who had been hospitalized periodically for the past 13 years, had marked hallucinations and seemed unable to speak any language fluently.

Examples Noted

Within seven days after receiving 12½ mg. of fluphenazine decanoate intramuscularly, his behavior improved, he spoke clearly, and was even seen reading a newspaper. The drug's effects lasted 22 days.

Another patient, an extremely shy and withdrawn 36-year-old man, had been hospitalized for four years. His psychotic behavior improved for 22 days after receiving 12½ mg. of fluphenazine decanoate.

When he later received 25 mg. of the drug, he improved until he was able to take oral medication. He was allowed several home visits and was eventually discharged. He continues to take oral fluphenazine.

The investigators feel that since fluphenazine decanoate is rapid-acting and gives assured blood levels of medication with "slow release" bi-monthly doses, the drug has both economic and practical value in treating hospitalized and ambulatory psychiatric patients.
NHI Shows Perforated Teflon Patches Close Aortopulmonary Septal Defects

National Heart Institute scientists having multiple perforations 1.5 to 2 mm. in diameter probably most gradual closure of aortopulmonary septal defects. In particular, the high velocity of flow through the perforations during all phases of the cardiac cycle would tend to slow the fibrin deposition and connective-tissue ingrowth required for closure.

Perforations' Closing Timed
They found that multiple perforations closed in about the same time as did single perforations of similar size. Perforations 1.5 to 2.0 mm. in diameter closed completely in 14 to 41 days, whereas perforations over 3.0 mm. in diameter were only partially closed after 2-4 months.

Defect Poses Difficulties
A difficulty posed by this condition is that, in some patients, the shunt triggers widespread blood-vessel constriction in the pulmonary bed. This increase in resistance may raise pulmonary pressure so high that the shunt becomes bidirectional at different phases of the heart's contraction.

If the defect is then corrected surgically, the high pulmonary resistance (which persists for some time afterward) may place an intolerable burden on the right ventricle; and the patient may develop severe right-heart failure during the post-operative period.

Perforated patches, which gradually close the defect, give the right ventricle and pulmonary vessels time to readjust to the new conditions.

3 From NIAID Discuss Research on Leprosy

Three scientists of the National Institute of Allergy and Infectious Diseases participated in a recent conference on problems in leprosy research.

The conference was sponsored by the Leonard Wood Memorial and the Armed Forces Institute of Pathology at Walter Reed Army Medical Center in Washington, D.C.

Dr. Vernon Knight, NIAID's Clinical Director, spoke on clinical investigation of leprosy at NIH.

Dr. Temple Williams of the Institute's Laboratory of Clinical Investigations described results of the use of the experimental drug B-663 in the treatment of leprosy.

Dr. Chester Emmons, Head of the Medical Mycology Section of the Laboratory of Infectious Diseases, was charged with a conference session on problems in the cultivation of leprosy.

EHS to Present Movie About Mental Health
A mental health education film, "Bitter Welcome," will be presented next week by the Employee Health Service.

The movie portrays the experiences of a man recently discharged from a mental hospital who gets a job with a construction crew. It shows his struggle against fellow workers' prejudices.

The 36-minute film will be shown at the Clinical Center auditorium on August 18, at 11:30 a.m. and 1 p.m.; North Bethesda Office Center No. 1, Conference Room 202, August 19, at 1:30 p.m.; North Bethesda Office Center No. 2, Conference Room 113, August 19, at 2:30 p.m.; and at the Westwood Building Conference Room A, August 20, at 1:30 and 2:30 p.m.

Carol Wendell, a CC Physical Therapist, Wins Baltimore Sun Tennis Tournament
Carol Wendell, a Clinical Center physical therapist, recently won the women's singles title in the Baltimore Evening Sun Municipal Tennis Tournament. Miss Wendell, third-ranking woman in both the Greater Washington Area and the Middle Atlantic Lawn Tennis Association, defeated a University of Maryland physical education instructor, 6-2, 6-2.

Miss Wendell lost the first two games of the first set, but after that she began serving effectively, hitting the sidelines with cross-court placements, and bringing her opponent close to the net with drop shots.

Miss Wendell started playing tennis at 13 years of age in Massachusetts and won a number of junior titles. She stopped playing while attending Boston University and during her first years at work.

Members Appointed to Nat'l Advisory Councils
Dr. George W. Beadle, President of the University of Chicago and a Nobel laureate in Physiology and Medicine, has accepted appointment to a 4-year term on the National Advisory General Medical Sciences Council, beginning October 1.

Dr. Robert J. Glaser, Vice President for Medical Affairs, Dean of the School of Medicine and Professor of Medicine at Stanford University, Palo Alto, Calif., has been appointed by the Surgeon General to a 4-year term on the National Advisory Dental Research Council of the Public Health Service.

Dr. Edwin B. Astwood, an authority on endocrinology, has been appointed to serve on the National Advisory Arthritis and Metabolic Diseases Council, His appointment, announced by Dr. Luther L. Terry, Surgeon General of the Public Health Service, will be effective from October 1965 through September 1969.
2 New Senior Members, Drs. Valle and Shumway, Named to NLM Staff

The appointment of two new senior members, Dr. A. R. Valle and Dr. Norman F. Shumway, to the staff of the National Library of Medicine was announced recently by Dr. Martin M. Cummings, NLM Director.

Dr. Valle will be Senior Scientific Editor of the Library with responsibility for the editorial review of the Library's various publications including Index Medicus, the Bibliography of Medical Reviews, special recurring bibliographies such as the Index of Rheumatology, the Cerebralvascular Bibliography, and others.

Dr. Shumway will be Chief of the Medical Subject Headings staff which is responsible for terminology control for the various publications of NLM. This work includes the preparation and publication of the terms necessary for indexing and cataloging the biomedical literature and the preparation of various NLM publications.

Dr. Shumway will be replacing Dr. Peter Olch, who will spend next year at the Institute for the History of Medicine, Johns Hopkins University, Baltimore.

Dr. Valle received his M.D. degree from the University of Buenos Aires Medical School in 1941 and postgraduate training in surgery in England, Germany, Italy and France.

Prior Positions Noted

He has held faculty appointments at the medical schools of Washington University, University of Virginia and University of Buenos Aires. He served for two years as medical officer in charge and surgeon of the first tuberculosis hospital in Alaska. In 1949 Dr. Valle was commissioned as a major in the U.S. Army Medical Corps. For his service in the Far East during the Korean Conflict, he was awarded the Legion of Merit. In 1954, he transferred to the U.S. Public Health Service.

Dr. Shumway received his M.D. degree from the University of Pennsylvania Medical School in 1931 and was in practice in internal medicine in Philadelphia from 1936 until 1941 when he entered the Navy.

Former CC Employee, Harold Richman, Wins White House Fellowship

A former Clinical Center employee, Harold A. Richman, was among the 15 young men with varied educational and career backgrounds who recently became the first White House Fellows. The winners were selected from 2,700 men and 300 women competitors for the newly created Fellowships. They will spend the next year in Government as paid interns, learning first-hand how their Government works.

President Addresses Group

In his remarks to the group in a ceremony at the White House, President Johnson expressed the hope that the Fellows will take away from their year in Washington "a new and deeper conviction that your land, and its leadership today, have but one purpose. That purpose, above all else, is to preserve peace with honor, freedom with justice, progress with equal opportunity for all men."

Mr. Richman was a member of the CC Social Work Department's Heart Service staff from 1961 to 1963. During the past two years he has been attending the University of Chicago. He is presently a candidate for a doctoral degree in social work.

He held hospital appointments in Philadelphia, Cleveland and London, England, and academic appointments at the University of Pennsylvania and Western Reserve University where until recently he was Professor of Medicine.

From 1946 until coming to NLM he also was Chief of Medicine at the Veterans Administration Hospital in Cleveland.

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In recognition of "consistently demonstrated ability to meet demanding time schedules and to dispose of peak loads without impairing high quality of performance," a Sustained Superior Performance Group Award was presented recently to these members of the Pending Unit, Grants and Research Contracts Operations Branch, NCI. Receiving the award from John De Vioiro, Acting Chief of Branch, are, left to right: Mary Ann Harrington, Mary W. Bogle, Karen W. Abraham, Barbara J. Welsh, and Violet E. Roman, Supervisory Grants Assistant. Frances C. Ledwell, not pictured, also shared the award.

Two Grants Associates Report for Program; Total Increased to 30

Two new Grants Associates reported recently for a one-year tour of diversified professional experience. They are Dr. Pat W. Camerino, a former assistant professor at Oregon State University's Science Research Institute, and Dr. Gustave Silber, who was a plant pathologist with the U.S. Department of Agriculture.

The two new members increased to 30 the number of Grants Associates who have participated in the program since it was inaugurated here in September 1962.

Dr. Camerino received the Ph.D. degree at Cornell University in 1961, He was a Public Health Service postdoctoral Fellow at the Dartmouth College Medical School from 1961 to 1963 and a member of the faculty at Oregon State University from 1963 until he reported at NIH.

Dr. Silber, an alumnus of Rutgers University, received the Ph.D. degree from Cornell University in 1957. He had for the past 7 years been a plant pathologist with the USDA Plant Industry Station at Beltsville, Md., where, as part of a research team, he obtained basic information on the nature of plant diseases caused by physiogens and microorganisms.

Dr. Silber's and Dr. Camerino's preceptors are respectively, Dr. Otto A. Bessey, Chief, Research and Training Grants Branch, Division of Occupational Health, BSS, and Dr. Herbert B. Pahl, Chief, Research and Training Grants Branch, DBFR.

Three New Counselors Named to DBS Board

Three new members have been appointed to the 6-man Board of Scientific Counselors of the Division of Biologics Standards.

They are Dr. Gordon C. Brown, Professor, School of Public Health, University of Michigan; Dr. Douglas Surgenor, Dean, School of Medicine, University of New York at Buffalo; and Dr. Roger M. Herriott, Professor and Head of the Department of Biochemistry, Johns Hopkins University School of Medicine and Public Health.

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