Over 750 Attend The Conference On Health Goals

The White House Conference on Health, held Nov. 3 and 4 at the Shoreham Hotel, brought together "the best minds and the boldest ideas to deal with the pressing health needs of the Nation."

Over 750 distinguished members of the health professions participated in this forum to discuss President Johnson's health goals for the Nation and the means of implementing them.

The President's announced goals for the conference included a search for:

1—New ways to increase life expectancy;
2—Achievement of a healthier environment;
3—Improvement of our understanding and care of the mentally ill, and
4—Elimination of diseases such as tuberculosis, measles and whooping cough.

The President's new health team—HEW Secretary John W. Gardner; Dr. Philip R. Lee, Assistant Secretary-designate for Health and Scientific Affairs; and Surgeon General William H. Stewart—addressed the opening session of the conference. Dr. James A. Shannon, Director of NIH, also attended the conference. (See CONFERENCE, Page 8)

John Carter Named to NCI Advisory Council

John Mack Carter, Editor of the Ladies' Home Journal, has been appointed to the National Advisory Cancer Council for a 3-year term ending September 30, 1968. Last year Mr. Carter was a member of the President's Commission on Heart Disease, Cancer and Stroke.

NIH Within Sight Of CFC Quota; Drive Extended

With only 90.9 percent of the NIH goal reported at the end of the fifth week of the Combined Federal Campaign, Dr. Donald Harting, NIH Campaign Chairman, announced that the campaign here would be extended another week—to Nov. 10.

The total of contributions reported at the end of the drive's fifth week was $140,659. The NIH quota is $154,700, leaving NIH $14,041 short of its goal.

NIH employee participation at conclusion of the fifth week was only 87.7 percent, it was pointed out.

Unpledged Urged to Give

Dr. Harting expressed the hope that during the final week, those NIH employees who have not yet given would pledge the remaining $14,041 necessary to reach the NIH goal and to help put PHS over the top.

At the end of the fifth reporting period, five other NIH units had joined NICHD, NIGMS, and DRG in exceeding their quotas.

The five units were DRS with 100.6 percent; DBS with 100 percent; NIMH, 102.9 percent; NIDR, 100 percent; and OAM, 111.8 percent. (See DRIVE EXTENDED, Page 8)

Laser, Artificial Heart Research Trends Reported by Drs. Ketcham, Kantrowitz

By Herbert B. Nichols

Bread views of present accomplishments and future trends in two specialized areas of "medical physics" were presented by two distinguished surgeons at a recent seminar for science writers in New York City.

The surgeons were Dr. Adrian Kantrowitz, Director of Surgical Services of the Maimonides Hospital in Brooklyn and Professor of Surgery at the Downstate Medical Center, State University of New York, and Dr. Alfred Ketcham, Chief of the Surgery Branch of the National Cancer Institute.

By Dr. Kantrowitz, who is a Heart Institute grantee, chaired the all-day sessions and devoted an hour to the discussion of artificial hearts.

Dr. Ketcham spoke on the laser (Light Amplification by Stimulated Emission of Radiations), a research tool that has opened up a whole new region of the electromagnetic spectrum to practical applications in many fields, medicine included.

Beam Vaporizers

These light beams, he said, are able to vaporize any known substance and to bore through metal almost instantaneously. It is the high intensity of relatively low-powered light beams that makes the laser of particular value to medicine, augmenting the surgeon's scalpel where special problems are involved.

Basic comparisons with solar energy, he said, show solar surface temperature to be around 10,000 degrees Fahrenheit while the laser beam can reach 18,000 F. Solar power is figured at 5,000 watts and that of the laser at 250 million watts.

Best of all, the use of light for (See RESEARCH TRENDS, Page 4)

NIHM-Group Health Ass'n Study Finds 1 in 7 Adults Has Psychiatric Ailment

One in seven adults seen by a physician has a psychiatric ailment, according to a new study conducted jointly by the National Institute of Mental Health and the Group Health Association.

The study outlines the type of psychiatric problem the doctors found most frequently in a sample of more than 6,000 patients. The Group Health Association provides prepaid group medical service in the Washington, D.C. area.

Ben Z. Locke, NIMH statistician, reported these findings to the American Public Health Association annual meeting in Chicago:

1) Psychiatric problems were more common in women patients than in men. In the over-64 age group, the rates for women were 50 percent higher than for men. But the men on the whole were more seriously disabled than the women.

2) Widowed, divorced, or separated women had higher rates than single or married women. Among the men, married or not, the rates were similar.

3) Older people suffered many more psychiatric complaints than younger adults. Rates for those over 64 rose three to four times those for people in their 20s.

4) Men who turned out to have (See HEALTH STUDY, Page 4)
Published bi-weekly at Bethesda, Md., by the Public Information Section, Office of Research Information, for the information of employees of the National Institutes of Health, principal research center of the Public Health Service, U.S. Department of Health, Education, and Welfare, and circulated by request to all news media and interested members of the medical- and science-related fields. The NIH Record content is reprintable without permission and its pictures are available on request.

NIH Record Office
Bldg. 31, Rm. 4B13. Phone: 49-62125

E. Kenneth Stabler
George J. Mannina

Georgiana Brimijoin, NCI; Tony Anastasi, NIH; Mildred Brosky, NIAID; Mary Anne Gates, NIAMD; Bob Callahan, NIDR; Ed Long, NIMH; Frances Deanman, NINDS; Bowen Hosford, CC; Faye Peterson, DBS; Linda Jacobson, NICIMS; Beverly Warran, DRFR; Dick Turlington, DRG; Bill Kleven, DBS; Frances Mills, OAM; Dan Rogers, NICHD.

The NIH Record reserves the right to make corrections, changes or deletions in submittedCopy in conformity with the policy of the paper.

PERSONNEL

Retirement Bonus Extended

Increased retirement benefits are now available to employees who retire on or before Dec. 30, 1965. This extension of time from Nov. 30 to Dec. 30 was made possible by recent legislation which President Johnson signed Nov. 1.

Early Retirees Gain

Employees who retire by Dec. 30 of this year will receive slightly more than an eight percent increase in retirement benefits. Those who retire after that date will be eligible for only one percent increase.

STANDARDS OF CONDUCT

Executive Order 11222, May 8, 1965, establishes standards governing the conduct of regular and special Government employees. It treats of such matters as the acceptance of gifts, entertainment and favors, outside employment, teaching and writing, and the use of Government information for private gain. It also requires that certain officials and employees file statements of employment and financial interests.

CSC Sets Guidelines

The Civil Service Commission has recently issued Government-wide regulations, and NIH is participating with, the DHEW in developing regulations consistent with the CSC guidelines.

When approved, these regulations will be made available to all NIH staff members and employees and will be published in the NIH Record.

NEWS from PERSONNEL

Single Salary Check Covers Retroactive Pay Increases

The salary checks received today (Nov. 16) by NIH employees entitled to the recent Federal pay increase include (a) the new 80-hour rate plus (b) the amount due retroactively for the preceding pay period. These two amounts are included in one check.

In addition, the single check will be accompanied by two pay-change slips—one to show the new 80-hour rate and new deductions based on that rate, and the other to show the retroactive amount with deductions.

This was explained in detail in a notice sent to all employees in Classification Act positions by the Financial Management Branch.

“Special-rate” employees will receive a separate notice because their increases are being handled in a different manner.

CC Reports Oct. Totals, New Gallon Club Donors

The Clinical Center Blood Bank reports that 222 units of blood were received from NIH donors in October. During the same period CC patients received 1,738 units. Beginning this month NIH staff members also joined the “gallon-donor club.” They are David Aronson, DBS; Charles H. Edmunds, DBS; Ralph E. Williams, OD; and Calver W. Young, NCI.

In addition, Martin W. Gallagher, S.J., a teacher at Georgetown Preparatory School, Inc., and a regular donor at the Blood Bank, also passed the gallon mark.

Two New Interns Join NIH Library Program

The Medical Library Internship Program, sponsored by the NIH Library, recently began its second year. The program, one of three of its kind in the Nation, offers the NIH Library an excellent recruiting medium for superior library school graduates from all parts of the country.

Two new interns, Doris H. Owen and Richard Eimas, will participate in the 1965/66 program. Mrs. Owen is a graduate of Maryland University and received her M.S. degree in Library Science from the Catholic University of America Graduate School in 1964.

Mr. Eimas earned his B.A. degree at the University of Colorado and his M.A. degree from the University of Denver Graduate School of Librarianship in 1965.

They Aid Research

As well-prepared librarians, the interns make significant contributions to the library’s research support effort. The first 40 weeks of the internship program includes rotating work assignments in each unit of the library, participation in all branch staff meetings, visits to other libraries, and evening course work in related subjects.

At the end of this period each intern is assigned to a specific unit in the library to complete the year’s program.

A graduate of last year’s training program, Kathleen Spangler, is now serving on the NIH Library staff as a full-time reference librarian.

R&W Film ‘Public Enemy’ Stars Harlow, Cagney

“Public Enemy,” the second in the classic sound film series sponsored by the Recreation and Welfare Association of NIH, will be presented next Saturday, Nov. 20, in the Clinical Center auditorium at 8 p.m.

The film stars James Cagney and Jean Harlow. R&W members, their families and friends are invited to attend. This film, however, is not recommended for small children. Additional information is available from R&W Film Committee Chairman Bill Gray, Ext. 64795.
Dr. Pearson Appointed To Child Health Post

Dr. Donald Harting, Director of the National Institute of Child Health and Human Development, recently announced the appointment of Dr. Paul H. Pearson as Assistant Program Director for Mental Retardation.

Dr. Pearson will be charged with planning, developing, and implementing extramural activities related to the Institute’s Mental Retardation Program. He will be the focal point for direction of extramural research, research training, and construction concerned with mental retardation activities.

Prior to joining NICHD he was with the PHS Division of Chronic Diseases as Chief of the Mental Retardation Branch (1960-65). He is currently a Clinical Associate Professor of Pediatrics at George-town University School of Medicine.

Teacher at USC

Before coming to Washington, Dr. Pearson was an Assistant Clinical Professor and Pediatrician at University of Southern California (1961-63), and in private practice (1953-62) as a pediatrician specializing in epilepsy and neurologic problems in children.

Certified by the American Board of Pediatrics, Dr. Pearson is a member of the American Academy of Pediatrics, American League Against Epilepsy, American Association on Mental Deficiency, Alpha Omega Alpha Honor Society, and the Southwestern Pediatric Society. He is the author of a number of publications concerning the treatment of epilepsy, and the medical management of mental retardation.

Fifth Primate Research Center Is Dedicated

The Yerkes Regional Primate Research Center at Emory University, Atlanta, Ga., was formally dedicated at ceremonies held Oct. 27. The $1.9 million center is the fifth of seven such centers to be completed under the Regional Primate Research Centers Program of the Division of Research Facilities and Resources (see NIH Record, Aug. 10, 1965).

Representing the Public Health Service at the dedication ceremonies were Dr. Ernest M. Allen, Grants Policy Officer, Office of the Surgeon General; and Dr. Willard H. Eye-sen, Chief, DRFR, Special Assistant for National Primate Research Center Programs, Animal Resources Branch, DRFR.

Dr. Pearson

Dr. Pearson, With S.S. Hope in Guinea, Helps Combat Parasitic Diseases There

A dermatologist of the Hope’s staff questions a Guinean woman at the Donka Hospital in Conakry to learn her medical history. She is assisted by other members of the Hope’s staff and native interpreters, at left.—Photos by Dr. Yankee from color slides.

By Georgiana Brimijoin

Pausing recently during a busy morning in his laboratory, Dr. Ronald A. Yankee, of the National Cancer Institute’s Medicine Branch, took time out to report on his past summer in the small Republic of Guinea on the African West Coast.

Dr. Yankee, whose specialty is internal medicine, flew to Africa in June to serve without pay for two months on the staff of the hospital ship, S.S. Hope, as it lay at anchor in the harbor of Conakry, the Guinean capital.

Besides a team of 30 rotating specialists, the ship, which is sponsored by Project Hope, maintains a permanent medical staff of more than 70 members and is equipped with X-ray and laboratory facilities comparable in quality to those found in modern medical centers in the U.S.

Parasitic Diseases Prevalent

On hospital rounds with Guinean doctors last summer most of his patients were found to be suffering from parasitic infestation.

Schistosomiasis, filariasis, amoebiasis, elephantiasis, hookworm, and malaria actively infect a large segment of the Guinean population and pose a constant threat to the nation’s health.

Due largely to parasitic diseases and their complications, the life expectancy in Guinea today is only 20 years.

Anemia is universal. Measured against the U.S. average, the “normal” Guinean registers a hemoglobin content of 70 percent and suffers inevitably from chronic fatigue and reduced resistance to disease.

Refuting the popular impression in the U.S. that stomach ulcer is a by-product of a complex civilization and the prerogative of highly-paid executives, Dr. Yankee found duodenal ulcer a major cause of illness in the African bush.

The physiological stresses of anemia, malnutrition and fever are evidently as traumatic to the human gastrointestinal tract as are psychological and emotional tensions.

Among the patients Dr. Yankee saw this summer were two cases of Burkitt’s lymphoma. Guinea is located within the so-called "lymphoma belt" which runs for 3,000 miles across Africa and appears to have a high incidence of this disease.

A malignant disorder of the lymphatic system causing tumors in the jaws, kidneys and ovaries, it is seen most frequently in children and young adults.

Dr. Yankee regards the study of Burkitt’s lymphoma as particularly important.

New Program of Training Grants Announced by NCI

A new program of Clinical Cancer Training Grants to improve and expand training in prevention, diagnosis, treatment and rehabilitation has been announced by the National Cancer Institute.

The grants, to be awarded on the basis of need, will replace the “formula” undergraduate training grants made annually to medical, dental and osteopathic schools since 1947.

The types of institutions eligible to apply are: schools of medicine and their principal affiliated teaching hospitals, schools of dentistry and public health, and specialized cancer institutions capable of giving intensive training in cancer management.

Statement Issued

Prospective applicants have been supplied an information statement explaining in detail how the program will be administered.

The new program extends eligibility to the 12 accredited schools of public health and the approximately 100 teaching hospitals affiliated with medical schools.

It broadens the focus of training support to include graduate students, clinical fellows, house officers and practitioners.

One-year grants will be succeeded by multiple-year commitments, with no pre-established limitation on the size of an individual grant. The amount of each grant will be determined by an evaluation of the proposal and the funds available for the total program.

Applications will be reviewed initially by two committees, one of which will handle dental school applicants exclusively. Final recommendations for grant awards will be made to the Surgeon General by the National Advisory Cancer Council.

Applications Received

Applications received by Dec. 1, 1965 will be considered by the Advisory Council in March 1966. Thereafter, applications will be considered by the council at its regular meetings which are held three times a year.

Application forms are available from the Career Development Review Branch, Division of Research Grants, National Institutes of Health, Bethesda, Md. 20014.

“In this largest organization of its kind . . . the emphasis is no longer on the faceless mass, but the emphasis is on individual excellence.”—President Johnson.
therapeutic purposes, employing the visible portion of the spectrum, does not approach the danger inherent in ionizing radiation.

He discussed a number of new lasers currently under study—gaseous and semi-conductor types—and revealed that NCI is particularly interested in the development of an "artificial artery laser," which he said was currently "undergoing tests at Redstone Arsenal."

It is this instrument that will be principally involved in an extensive clinical cancer research program being set up by the National Institutes of Health in December. Extensive animal experimentation will precede its use on human patients.

Dr. Ketcham mentioned use of the laser for treating patients with eye problems such as detached retina. He cited the extreme accuracy with which a beam can be focused to a spot about a hundred-thousandth of an inch in diameter, as enabling scientists to destroy portions of living cells.

**Laser Controls Heredity?**

"Perhaps some day it will be used to control heredity," he suggested. A number of slides and several motion picture film sequences illustrated how effectively the laser can disintegrate, in nanoseconds, melanomas implanted in rats.

"Such tumors can be effectively controlled," he said, "if localized and not metastasized." In such instances, there is no adverse effect on length of life, no genetic effects, and the implanted melanoma is completely destroyed.

Photos taken several weeks later show no signs of skin damage. In fact, body hair appeared to grow back much thicker and better appearing than it was at first.

Equally good results were obtained from a hepatoma implant in a laboratory primate. Forty repeated laser blasts were used to destroy growing tumors. One tumor was missed and two weeks later the experimenters blasted again. Since then there has been no evidence of returning malignancy.

**No Carcinogenic Effect.**

"Apparently," Dr. Ketcham concluded, "there are no carcinogenic effects from this type of radiation and it is with suppressed enthusiasm that we at the Institute are working in this field. For a long time it was assumed that use of the laser will be limited only by progress in engineering and medicine."

Grant Riggle of the Biomedical Engineering and Instrumentation Branch, DRS, cooperated with Dr. Ketcham and Dr. Robert Hoye, NCI senior surgeon, in providing the Cancer Institute with the necessary engineering background.

Dr. Ketcham stressed the fact that he was reporting research "progress" in medical experiments with the laser, that nothing so far could possibly be interpreted as "curing cancer."

"From the results of our 'feasibility studies,'" he said, "all we can say at this time is that we hope the laser will play a significant role in the future treatment and control of cancer."**Artificial Heart Possibilities**

Heart surgery was described by Dr. Kantrowitz as another of the more exciting fields of medicine, "accomplishing miracles on a routine basis, now that the advent of open-heart surgery is more than a decade behind us."

He reminded his audience that every year more people die of heart disease than anything else, that 30,000 children are born every year with congenital heart disease "many of whom can be successfully treated," and that among patients with acquired heart disease, there are some 75,000 cases of mitral valve, aortic valve, aneurysm damage or other heart disease problems that can be treated by surgical techniques.

"The vast bulk of 10,000 victims of Stokes-Adams disease likewise receive surgical treatment," he said, and indicated that many thousands die each year whose lives could be extended if only there were some kind of implantable pump that could be substituted for the human heart.

"This shouldn't be too hard to achieve once engineering and medical gentry get together and go to work on the problems involved," he added.

"Even now," he said, "there is no reason to deny an artificial valve to a heart patient, or to fail to sew up a hole in the heart, or put a patch on the aorta. However, if the heart muscle is involved, then apparently there is little we can do. This is the way the heart wears out!"

Dr. Kantrowitz then summarized current suggestions on treatment, commenting, "First there is the selection of the blood cells that would treat the heart as if it were a diseased appendix; take it out and put in a substitute."

**Blood Changes Noted**

Unfortunately, he said, there are subtle changes that take place in the blood causing fibrous tissue to develop and clog the system, or too many blood cells are destroyed. He described experimental work done at Maimonides Hospital by Dr. T. Akutzu and himself, in which a dog was kept alive for 27 hours after its heart had been replaced by one built in the laboratory.

"At Cleveland Clinic," he said, "a calf was kept alive 34 hours after its heart was replaced by a mechanical pump. In both instances the pumps worked well, but there were too many clots and too much damage to the blood."

An alternative approach suggested by Dr. Kantrowitz to problems of the failing heart is not so drastic.

"If nothing else, there is a certain sentimental value for a patient to keep his own heart," the seminar chairman said, "so why not leave it in and just add another—an assistant or booster heart?"

At Maimonides we have developed, with the AVCO Company a silastic unit that can be attached to the ascending and descending aorta. It is timed by means of an electronic circuit to go into action at the precise moment the natural heart is in systole, thus taking about half the load off the left ventricle.

"The silastic material, we find, is highly acceptable to the body and will not cause clot to form," Dr. Kantrowitz continued. "We have had such an 'assistant heart' in the body of a dog for 19 months without any bad effects. It seems the human body, too, will accept such material for long periods of time."

**Artificial Grafts O.K.**

"There are a great many people walking around right now with artificial grafts on vital parts of their circulatory system. So we can certainly say that here we have a mechanical heart in experimental animals already at work. The artificial heart remains in place, receives all the signals of the natural heart and follows its instructions."

"Quoting Dr. Stanley Sarnoff at NHL," he added, "'a principal objective is to maintain low left ventricle pressure during systole,' and in that respect, I submit, we already have a potentially workable auxiliary heart."

The third approach listed by Dr. Kantrowitz, entertained the possibility of transplanting a heart from one individual to another.

**Demand Causes Problems**

"Here there are enormous problems," he said, pointing out that the potential demand is for some 2,000 spare hearts per day and that nature supplies only one heart per individual per lifetime. "Not many people can be persuaded to give up their one and only!"

There is also the problem of obtaining the heart shortly after death of its original owner. Fifteen minutes is about the limit of time available for delivery, he said. Then there is the "rejection phenomena."

Sponsored by the American Institute of Physics and the National Association of Science Writers with support from the National Science Foundation, the seminar was held at the United Engineering Center in New York.
Dr. Harold M. Hildreth, NIMH Psychologist, Dies Nov. 2 of Heart Attack

Dr. Harold M. Hildreth, 59, consulting psychologist of the National Institute of Mental Health, who was a leader in launching clinical psychology as a profession more than a decade ago, died suddenly in Los Angeles Tuesday, Nov. 2, of a heart attack.

Dr. Hildreth was attending the fall training meeting of the Los Angeles Suicide Prevention Center as NIMH consultant to the program he had helped initiate several years ago.

He was the NIMH expert on methods and techniques of suicide prevention, and also a pioneer in mental health training and education of police and clergy.

Last year he received the distinguished Service Award presented annually by the American Psychological Association to a psychologist in public service.

He was a native of Franklin, Neb., born in 1906. Dr. Hildreth's career as a psychologist in public service began in World War II when he went with work in State mental hospitals before clinical psychology was established as a doctoral profession.

Joins VA in 1946

In 1946 he joined the Veterans Administration as Branch Chief Clinical Psychologist in San Francisco. Two years later he was appointed Chief, Clinical Psychology Division of the VA Central Office.

In this post he developed extensive training programs for psychologists, raising the standards for preparation of clinical psychologists.

In 1956, when Dr. Hildreth joined the Community Services Branch of the NIMH, he became one of a team of four staff members who developed a hospital and State mental health consultation service, a unit which helped to initiate the Institute's mental health project grants program.

One of the early projects was the NIMH-supported Los Angeles Suicide Prevention Center, for which Dr. Hildreth served as consultant until his death. He also participated in the planning of the Suicide Prevention Study Center to be established at the National Institute of Mental Health.

As a leading authority on the mental health counseling of police, Dr. Hildreth was responsible for the development of a series of award-winning training films for police.

CC Blood Bank Visitors to See System For Matching Types of 3,000 Donors

Visitors to the NIH Clinical Center's Blood Bank on Blood Donor Day next Friday (Nov. 19) will see a demonstration of the novel system that quickly searches the records of 3,000 NIH donors and pinpoints one or more with blood that precisely matches that of a patient.

Employees who have been regular blood donors can have their records photographed for their own use at this time.

The visitors will also see a continuous-flow blood separator that was designed to channel blood from a donor, extract certain components for transfusion, and return the remainder to the donor, all in one process.

Masur Presents Awards

Visitors will also have an opportunity to tour the Blood Bank from 10:30 a.m. to 3:30 p.m. High point of the annual observation will be the presentation at 11 a.m. by Dr. Jack Masur, CC Director, of certificates to 17 NIH employees who have donated blood regularly over a ten-year period.

Closed circuit television sets will be positioned within the Blood Bank to show various aspects of transfusion techniques.

NHI Scientists Report New Tissue Adhesive Bonds Quickly, Firmly

A mixture of gelatin and resorcinol, when treated with formaldehyde solution forms an adhesive that bonds quickly and firmly to a variety of tissues, even in the presence of moisture, Drs. Nina S. Braunwald and Constantine J. Tatooles, of the National Heart Institute, reported recently.

At the 115th Clinical Congress of the American College of Surgeons, the scientists summarized the results of experiments indicating that the new adhesive is superior in several respects to others currently available.

The results also suggested that the adhesive might find limited application in clinical surgery, either with sutures instead of sutures, for cementing out tissue surfaces back together or for controlling bleeding.

Studies Described

In the animal studies they described, Drs. Braunwald and Tatooles evaluated the effectiveness of the adhesive in controlling bleeding after the surgical removal of wedges of tissue from the liver or kidney.

First, a few drops of formaldehyde solution were applied to the cut tissue surfaces, then the gelatin-resorcinol mixture, after which the wound surfaces were pressed together by hand and held for the 2-3 minutes required for the adhesive to set.

In all instances, the cement held the surfaces firmly together and effectively controlled bleeding.

The adhesive was developed in collaboration with scientists of the Polymer Research Division, Battelle Memorial Institute, Columbus, Ohio.

The new adhesive bonds more quickly and firmly to tissues and appears less toxic than any other tissue adhesive currently available. However, it still has its limitations. Both formaldehyde and resorcinol are tissue irritants.

Film to Show Quackery Harmful to Arthritis

"The Misery Merchant" will be the November film presentation of the Employee Health Service.

The 30-minute, black and white movie, which portrays the type of quackery used to attract people with arthritis, stars Dennis O'Keefe.

Showings are scheduled in the Clinical Center auditorium tomorrow (Wed.), Nov. 17, at 11:30 a.m. and 1 p.m.; North Bethesda Office Center No. 2, Conference Rm. 115, Nov. 18, at 1 and 2:30 p.m.; and in the Westwood Building, Conference Rm. A, Nov. 19, at 1:30 and 2:30 p.m.
Margaret Stewart, CC, Retires After Varied Career Beginning in ’18

Mrs. Margaret (“Peg”) Rounds Stewart, who will retire Nov. 26, first entered government service 47 years ago, when $90 a month was considered generous pay for stenographers. During the intervening years she developed two enduring loves—fine cars and horses.

Mrs. Stewart is Supervisory Clerk in the Accounting Unit of the Clinical Center’s Nutrition Department. She started her government career as a stenographer with the Army’s Signal Corps in February 1918. The Signal Corps then ran the Air Service (now the U.S. Air Force), and within a few months Mrs. Stewart was Chief Clerk of the Aviation General Supply Depot in Washington.

She resigned after World War I and entered government service again briefly during World War II. During this time she also owned and operated a school of horsemanship and a riding and boarding stable in nearby Chevy Chase. She bred and raised colts and was, literally, a horse-trader.

Her love for horses led her friends to nickname her “Pegasus.” She gave this nickname to her stable which continues business under other ownership.

Is Auto Buff

Between wars she also developed a love for automobiles. She ranks this with her skills on typewriter and adding machine. She nursed a Cadillac until it expired two years ago at the age of 10. She now drives a less expensive but more modern car.

A Christian Scientist, Mrs. Stewart at first had qualms about working at the Clinical Center. But the Christian Science friend who had urged her to apply said, “You know, health is our business.” She rang up the first sales to be

Swedish Council Offers 2 Postdoctoral Fellowships in Health-Related Sciences

The National Institutes of Health has been requested to announce the sponsorship by the Swedish Medical Research Council of two postdoctoral research fellowships in 1966.

These will be awarded to qualified citizens and will provide support for 12 months of research training at a Government-supported training institution in Sweden.

The fellowships are intended to provide research experience and training in basic or clinical sciences related to health. To be eligible, candidates must have been engaged in independent, responsible research in one of the health sciences for at least two of the last four years.

OIR Is Contact

Interested scientists may obtain necessary application forms and further information from the Office of International Research, National Institutes of Health, Bethesda, Md. 20014. Forms must be completed and returned to OIR on or before Feb. 1, 1966.

Final selection will be made at the April 1966 meeting of the Swedish Medical Research Council, and nominees will be notified of the results shortly thereafter.

Applicants must present evidence of aptitude and promise in basic science or clinical research, with an active interest in pursuing a research career in a health science field.

This evidence may be presented in the form of a scientific bibliography, reports of scientific publications, and references from individuals who are familiar with the applicant’s background.

Applicants must also provide evidence of acceptance by a training institution and preceptor. It is the applicant’s responsibility to arrange for his research training with the preceptor under whom he will train.

Choice of Arrangements

Arrangements may be made either through direct correspondence between the applicant and a scientist in Sweden, or through correspondence initiated in the applicant’s behalf by a senior scientist in his country with a Swedish colleague.

It is expected that such correspondence will lead to the development of a plan for research training which will be presented clearly and explicitly in the application.

The affiliation is documented in the Commitment Statement. This statement is a required portion of the application and no application may be reviewed without it.

Dr. Larson, Swerdlow Win ACD Fellowships

Two of NIDR’s principal scientists were awarded fellowships in the American College of Dentists at its annual meeting held recently in Las Vegas. The ACD was es-

Mrs. Hannah Is Honored For 29 Years’ Service

A farewell reception in the executive dining room of Building 31 on October 28 honored Mrs. Phyllis Hannah of the National Institute of Mental Health for her 29 years with the Public Health Service.

Mrs. Hannah had been Personnel Management Specialist for Intramural Programs for NIMH since 1963. Previously, since 1953, she was a Personnel and Placement Assistant for NIH. She had also done personnel work for the CDC and the Bureaus of State Services and Medical Services.

A native of Calgary, Alberta, Canada, Mrs. Hannah received her B.S. from the University of Washington in Seattle.

Dr. Swerdlow

Dr. Larson

Well worthwhile. Working side by side with Guinean doctors and nurses, treating the sick, fighting age-old ills with modern medicine, they felt they knew why the Hope was there—because people care and want to help.
Study Reveals Transfer Of SV40 Genetic Data Between Adenoviruses

A National Institute of Allergy and Infectious Diseases scientist has shown that nonhybridized adenoviruses acquire the SV 40 gene more readily from a hybrid adenovirus donor than from the SV 40 virus itself.

Previous studies showed that a number of adenoviruses, after prolonged passage through monkey kidney tissue cultures contaminated with SV 40 virus, would hybridize with a part of the SV 40 viral genetic material.

Further work revealed that the adenovirus type 2-SV 40 hybrid contained nonhybrid as well as hybrid adenovirus 7 particles.

**Particles Infect Human Tissue**

The nonhybrid adenovirus particles, while capable of infecting human embryonic kidney tissue cultures, were defective (i.e., did not replicate) in monkey kidney tissue cultures in the absence of hybrid adenovirus particles.

Hybrid particles were defective by themselves in both tissue culture systems. But they replicated readily in cultures of human and monkey cells in the presence of nonhybrid particles.

This interaction between hybrid and nonhybrid adenovirus type 7 particles suggested that the SV 40 genetic material was being incorporated into progeny of the nonhybrid particles.

The present study was done to see if the SV 40 gene would be transferred from the adenovirus type 7 hybrid to other, nonhybrid adenovirus types. The results were affirmative.

Adenovirus types 2, 4, 5, and 12 picked up SV 40 genetic material from the adenovirus 7 hybrid within a single passage of the virus mixture in monkey kidney tissue culture.

**Type 2 Transfers to Type 7**

In another experiment, the artificially created adenovirus type 2 hybrid transferred the newly acquired SV 40 gene to nonhybrid adenovirus type 7.

In every instance, mixed infection of monkey kidney cultures with a hybrid and a nonhybrid adenovirus yielded comparable amounts of hybrid virus of both types.

The ready transfer of the SV 40 gene between adenoviruses strongly suggests that this gene is not linked with adenovirus genetic material in hybrid particles.

It appears likely that the SV 40 gene replicates separately and is randomly incorporated into adenovirus coats.

In addition, the possibility that the SV 40 gene is linked to a segment of adenovirus genetic material which is loosely linked with the rest of the genetic apparatus cannot be ruled out.

These findings were reported in Proceedings of the National Academy of Sciences by Dr. Wallace P. Rowe, Laboratory of Infectious Diseases, NIAID.

**Bothered by ‘Common Cold’? NIAID Needs You for Study**

Volunteers are a continuing need for its study of “common cold” viruses, according to NIAID’s Laboratory of Infectious Diseases.

Nineteen participants answered the last appeal in the NIH Record, but many more are needed in the project to isolate and identify unknown upper respiratory viruses.

NIH personnel, preferably within the first three days of infection, are asked to contribute samplings of their nasal secretions plus two blood samples.

Interested volunteers, who will receive $2 for each blood specimen, may call Mrs. Sara Kelly, Ext. 65811.

**NLM Displays Works of 16th Century Physician**

A display of the works of Conrad Gesner, a sixteenth century Swiss physician, scholar and scientist, may be seen in the lobby of the National Library of Medicine during November and December.

To mark the quatercentennary of Gesner’s death in 1565, the Library of Medicine has assembled works by and about Gesner from his own collection and from those of the Library of Congress and the National Agricultural Library.

Gesner is known for his contributions to botany, zoology, bibliography and philology. Examples of his work in each of these fields make up the exhibit.

**Kent Smith Appointed DRFR Adm. Officer**

Kent Ashton Smith has been appointed Administrative Officer, a new position in the Division of Research Facilities and Resources, effective Nov. 7.

Mr. Smith came to the Division from the Office of the Secretary, Department of Health, Education, and Welfare, where he had served since 1962, most recently as a management analyst in the Office of Management Policy.

In his position Mr. Smith will be responsible for organizing, executing, and coordinating various administrative functions relating to the operation of the Division.

NLM provides a focal point in NIH for the administration and management of large-scale extramural programs supporting health-related research.

Born in Boston, Mass., Mr. Smith received his B.A. degree in mathematics-economics from Hobart College in Geneva, N.Y. In 1962, he earned the M.P.A. degree in Public Administration from Cornell University, Ithaca, N.Y.

**Christmas Card Savings by ‘Davis Plan’ Help Clinical Center Patients, Families**

“‘If you’re about ready to buy Christmas cards for fellow employees—Don’t buy them.’ That was the suggestion from John F. Roatch, Chief of the Clinical Center’s Social Work Department. Mr. Roatch administers the Patients’ Welfare Fund, established 11 years ago to assist CC patients and their families who are under financial and emotional stress.

Mr. Roatch thinks that many employees may want to adopt the Davis Plan now and send the money saved on Christmas cards to the Fund.

**Participation Encouraged**

Dr. Jack Masur, the CC Director, pointed out that NIH-wide acceptance of the Davis Plan, with an average of one dollar from each staff member, would total about $12,000—enough to support the Fund for a full year.

In 1963 Mr. Roatch reported a distant last Christmas,” Mr. Roatch said. “Employees sent $734.23 they would have otherwise spent on buying and mailing cards to their fellow employees—a $500 jump over the previous year.”

The plan was conceived several years ago by James B. Davis, Chief of OAM’s Supply Management Branch. Last year’s collection represented 7 percent of the total amount of the Fund.

The Fund receives about 60 percent of its support from the NIH Recreation and Welfare Association. All other support comes from voluntary contributions.

**Fund Aids Relatives**

The Fund also aids relatives of some CC patients. None is spent for transportation.

A typical recent case was that of a mother who borrowed money to be in Bethesda near her 8-year-old son. The child has a neurological ailment that prevents him from walking or functioning as a healthy youngster would.

The mother, with three other children at home, received in 1963 $111 left of the borrowed money at the end of a week. The Fund paid her room rent and food costs for two more weeks—$73.

**Dr. Andrew Sherrington Appointed to NLM Post**

The appointment of Dr. Andrew M. Sherrington as Special Assistant to the Deputy Director of the National Library of Medicine was announced recently by Dr. Martin M. C ummings, NLM Director.

Dr. Sherrington has been appointed with the status of Visiting Scientist. He will be concerned with scholarly and professional activities in the general area of international biomedical communication, with reference to programs of the NLM.

His interests will include the international availability of information in magnetic tape form, the initiation and strengthening of exchange activities, both of publications and personnel, and possibilities of cooperation with international organizations.

Dr. Sherrington, a British subject, received his medical training at Oxford and London Universities.

**Dr. Sherrington Will Discuss Speech-Training Methods**

For the benefit of parents and teachers of mentally retarded children, Dr. Bernard Rimland of San Diego, Calif., will discuss the striking successes achieved with recently developed techniques in the speech-training of mentally handicapped children at the Neuropsychiatric Institute of the University of California (Los Angeles). He will lecture tomorrow (Nov. 17) at 8 p.m. in the CC auditorium.

The speech-training methods Dr. Rimland will describe are suitable for home use, the announcement said. Admission is free.
Procedures for Review And Approval of Grant Applications Described

Procedures followed by advisory groups in the review and approval of applications for research grants and awards are described in a new publication recently announced by the Public Health Service.

Title of the new brochure, prepared by the Division of Research Grants, is Review and Approval Procedures, Public Health Service Grant and Award Programs, Revised 1966. (PHS publication No. 909).

Current procedures described in the new brochure are of interest to the scientific community in view of the vast number of grant applications received each year by PHS and the extent of Federal support of biomedical research.

Processes Described

The description includes the processes of initial review and recommendations made by study sections and committees for further consideration by the national advisory councils.

Applications reviewed by these groups include those requesting support of research projects, research fellowships and training grants, and construction of research facilities.

These groups, which meet three times a year, provide the expert and objective advice necessary to maintain the highest scientific standards in the prosecution of PHS research support programs in the national interest.

Copies of the new brochure are available on request from the Information Office, Division of Research Grants, NIH, Bethesda, Md. 20014.

HEALTH STUDY

(Continued from Page 1)

emotional problems came to the doctor most frequently with complaints about the heart and other parts of the circulatory system. The emotionally disturbed women complained mainly of ailments of the digestive system.

5) The longer the patient had endured his psychiatric problem, the more serious and deeply ingrained it had become.

The physicians in the study reported that most of the patients were aware of their psychiatric ailments, but only a few had ever gone to a psychiatrist.

The doctors prescribed drugs for 75 percent of such patients, and referred only 17 percent to a psychiatrist. The older the patient, the more likely he was to be given drugs. The physicians explained that many patients were unable to afford psychiatric care,

procedures and training facilities.

The emotionally disturbed women were aware of their psychiatric complaints about the heart and other organ systems. The older the patient, the more likely he was to be given a consultation with a psychiatrist. The physicians explained that many patients were unable to afford psychiatric care.

Applications reviewed by these groups include those requesting support of research projects, research fellowships and training grants, and construction of research facilities.

These groups, which meet three times a year, provide the expert and objective advice necessary to maintain the highest scientific standards in the prosecution of PHS research support programs in the national interest.

Copies of the new brochure are available on request from the Information Office, Division of Research Grants, NIH, Bethesda, Md. 20014.

CONFERENCE

(Continued from Page 1)

These patients—from three foreign countries—all recovered from open-heart operations at the National Institutes of Health Clinical Center. The patients were referred to NIH by hometown physicians and operations were performed as part of research studies now being conducted in the National Heart Institute's Surgery Branch. Left to right are Abdul Yatim, age 9, of Malaysia; George Vergetis, 20, of Greece; Tjoan Oen (seated), 34, of Indonesia; Pantelis Gialitis, 21, of Greece; and Dr. Ronald Elkins of the NIH Surgery Branch. Dr. Elkins, who assisted in the heart operations, holds a model of the human heart and explains how an artificial heart valve is inserted to replace a defective human one. Mrs. Oen had an artificial aortic valve replacement. The others had inborn heart defects corrected.—Photo by Jerry Hecht.

Medicine-History Group Meets Tomorrow Night

The next meeting of the Washington Society for the History of Medicine, "An Evening of Biography," will be held tomorrow (Wed., Nov. 17) at 8 p.m. in Billings auditorium, National Library of Medicine.

Speakers will be Dr. Peter D. Olch, NLM, who will discuss "Footnotes on Halsted of Hopkins"; Dr. William C. Roberts, NIH, "Tomlinson Fort of Milledgeville, Georgia: Physician and Statesman"; and Dr. William L. Fox, Department of History, Montgomery Junior College, "Biography and the Medical Historian."

The society invites anyone in the Washington area interested in the history of medicine to join. Annual membership dues are $2.

DRIVE EXTENDED

(Continued from Page 1)

cent.

Those who had reached their goals of 100 percent participation were DRG, NIAID, NICHD, NIGMS, and OD.

The next issue of the NIH Record will contain final figures for this year's NIH Combined Federal Campaign.

Jane Sundelof Resigns To Give Full Time to Role of Homemaker

The former Jane Sundelof, who became Mrs. Richard E. Jones on May 1 of this year, came to work at NIH in June of 1949 on the advice of a Hood College classmate who was working here.

On Nov. 5 of this year she resigned to assume "full-time and other duties as required," in the role of Mrs. Jones, homemaker.

Four years after joining NIH as a clerk-typist, she then Miss Sundelof was one of hundreds of Federal employees nominated for the 5th CSC Junior Management Intern Program and the only woman in a group of 22 selected for enrollment in the course.

Returns to New Post

She successfully completed the 6-month training program and in July 1964 returned to assume her new duties as a Personnel Generalist.

Mrs. Jones' varied personnel assignments have included helping in the staffing prior to opening of the Clinical Center and the transfer to the Wage Board of hundreds of employees in the Laboratory Aids Branch of the Division of Research Services and the then Buildings Management Branch.

For several years she was the Personnel Representative of DRG and DGMS, and subsequently for OAM-OD. Since May of 1965 she has served as a Personnel Representative of the National Heart Institute and then the Division of Biologies Standards.

Participates in Other Activities

She has also been a participant in many extramural activities, including some years of bowling in the duckpin league and several years as a Group Hospitalization treasurer. She served also as a representative and Membership Chairman of the Recreation and Welfare Association of NIH and was a charter member and chorus dancer in the Hamsters' early productions here.

Rev. Kerney, CC, Leads New Seminar Program

Ten Army, Navy, and NIH chaplains gathered at the Clinical Center recently to inaugurate a monthly seminar program. Visiting chaplains came from the Naval Medical Center and Walter Reed Hospital.

The seminar program is part of an NIH educational program in ministry which is, in part, led by the Rev. LeRoy G. Kerney, Chief of the CC Chaplaincy Service.