Dr. Maitland Baldwin Dies, Clinical Director, Chief of NINDS Branch

Dr. Maitland Baldwin died of a stroke at the Clinical Center on Monday evening, Feb. 9.

Dr. Baldwin, who was 51 years old, was Clinical Director and chief of the Surgical Neurology Branch, National Institute of Neurological Diseases and Stroke.

He came to NIH in 1953 as NIND's first Director of Neurosurgery, and in that year performed the first craniotomy at the newly opened Clinical Center. He was among the founders of the NIH neurosurgery research program.

Dr. Baldwin also played an active part in creating the CC Surgical Wing.

The portrait of Dr. James A. Shannon, unveiled at ceremonies on Thursday, Feb. 5, in Wilson Hall where the painting will hang, is studied by Dr. Shannon, Mrs. Shannon, the artist Bjorn Egeli (rear), and Dr. Robert Q. Marston and Mrs. Marston.—Photos by Ed Hubbard. (See story on Page 8.)

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Dr. Chalmers Appointed Associate Director for Clinical Care; CC Head

Dr. Thomas C. Chalmers has been appointed NIH Associate Director for Clinical Care and Director of the Clinical Center, effective Feb. 9.

As Assistant Chief Medical Director for Research and Education of the Veterans Administration, Dr. Chalmers coordinated activities in 165 Veterans Administration hospitals and 72 clinics.

Dr. Robert Q. Marston, NIH Director, said selection of Dr. Chalmers culminated a nationwide search following the death of the former Clinical Center Director, Dr. Jack Masur, last March. A committee of scientists, educators, and administrators conducted the search.

Dr. Chalmers was chief of medical services at Lemuel Shattuck Hospital, Boston, from 1955 to 1968. He was on the faculty at Harvard Medical School during much of that period and was professor of Medicine at Tufts University School of Medicine.

He has published more than 100 professional papers, primarily in the field of gastroenterology. He was president of the American Gastroenterological Association in 1969.

He is a member of the American Association for the Study of Liver Disease.

Hepatitis Risk Greater From Commercial Blood Than That Donated by Volunteers

More than one-half the patients in an NIH study who received blood from commercial blood banks during open-heart surgery developed hepatitis.

The disease did not occur in any patient who received blood from voluntary donors.

The study was designed to prove or disprove suspicions that commercial blood (defined as "that obtained from paid donors whose selection was not under the control of the hospital transfusing the blood") used in transfusion results in a high incidence of posttransfusion hepatitis.

The patients in the study were all adults hospitalized at the NIH Clinical Center for corrective heart operations.

Before operation, the patients were divided into two groups, one to receive commercial blood (Group C, 82 patients) and a group to receive blood from volunteers (Group V, 28 patients).

Two commercial sources and two volunteer sources of blood were used. The latter were the Clinical Center's own Blood Bank and the Washington Regional Red Cross Blood Center.

Within 6 months after the operation, 42 patients from Group C (61 percent) had developed hepatitis, none in Group V.

The hepatitis carrier rate for commercial blood donors was 6.3 percent. Although no cases of hepatitis resulted from voluntary blood in the present study, a probable carrier rate for this source was computed at 0.6 percent which equals that reported in Boston hospitals which did not use commercial blood.

According to the investigators, "This study proves that the chance of hepatitis developing is higher for commercial blood donors than for voluntary blood donors."

(See DR. BALDWIN, Page 4)
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The NIH Record reserves the right to make corrections, changes or deletions in submitted copy in conformity with the policies of the paper and the Department of Health, Education, and Welfare.

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Station K3YGG Helps MEDINET Twice Weekly

The NIH Radio Amateur Club station, K3YGG, is providing network control for MEDINET—the Medical Information Network. MEDINET, the new name of the Public Health Service Emergency Radio Network, is made up of HEW employees outside Washington, D.C. who are "hams," amateur radio operators.

The network is designed to provide rapid communication among health officials when normal communication lines are inoperative. MEDINET meets on the air every Monday at 12 noon and every Wednesday at 4:30 p.m. Eastern Standard Time. Station K3YGG operates simultaneously at 20 meters on 14280 KHz and 40 meters on 7200 KHz at these times.

Cil Sirotkin's Paintings Displayed in Building 31

A one-woman art show—the paintings of Cil Sirotkin—is on display in the lobby of Bldg. 31. Mrs. Sirotkin is the wife of Dr. Phillip Sirotkin, associate director for Program Coordination, National Institute of Mental Health. In recent years Mrs. Sirotkin has won first prize for her paintings in NIH art shows sponsored by the Recreation and Welfare Association.

She has exhibited at the Chicago Art Institute, Boston Arts Festival, Crocker Art Gallery, and the Watkins Gallery. Many of her paintings are in private collections.

Mrs. Sirotkin, a candidate for a Master of Fine Arts degree at Northwestern University, taught at the Chicago Art Institute, and was a senior designer at Marshall Field & Co, the Chicago department store. Later, she joined the firm of C.I. Designs in Boston.

Blood Bank Designates Thursday, March 5, as Donor Recognition Day

Thursday, March 5 is the date set at the Clinical Center for Donor Recognition Day—an event sponsored by the NIH Blood Bank to honor men and women who have distinguished themselves as exceptional blood donors.

Certificates will be given to blood donors who have achieved a special status—donation of a gallon or more of blood during the past decade. This ceremony will be held in the Blood Bank, Bldg. 10A.

NIH employees may take guided tours of the Blood Bank to see the staff at work and become acquainted with the research that is conducted there. They will also learn about the benefits derived from the Blood Bank for themselves and members of their families.

Further details about the ceremony and other activities will be announced shortly.

Dr. Paul J. Schmidt, chief of the Blood Bank, said he is looking forward to Blood Donor Recognition Day again this year: "because it will be an opportunity for me to see again those donors that I may have seen only a few times during the past year."

"The staff and I are also eager to greet prospective donors who may not have visited the Blood Bank previously."

American University, taught at the Chicago Art Institute, and was a senior designer at Marshall Field & Co, the Chicago department store. Later, she joined the firm of C.I. Designs in Boston.

Suggestions Submitted For Insurance Coverage During Open Season

The Employee Relations and Recognition Branch, Office of Personnel Management, has a list of suggestions for employees eligible for insurance coverage during "open season"—March 11 through March 31. (See NIH Record, Feb. 3:)

Leaflet Is Informative

• Read the literature. A leaflet, BRI 41-192, will be distributed to employees in the latter part of this month. Personnel offices will answer questions concerning information contained in the leaflet.

• Evaluate present coverage and possible future life insurance needs with these points in mind: family responsibilities, and health conditions which may preclude other life insurance coverage.

• Consider the regular and optional life insurance coverage to be carried at retirement.

• Evaluate the cost of coverage under the regular life insurance and the optional life insurance.

No Age Restrictions

During the "open season" there are no age or health restrictions for personnel taking either form of insurance. Individuals not in receipt of coverage will be able to purchase coverage. Individuals in receipt of coverage are able to increase or decrease their coverage or change to a different company. There are no restrictions on these actions.

To HELP Is on Way;
Four Locations Listed,
Phone Information Given

Employees may obtain income tax information and assistance in computing returns in the following four locations:

Donald A. Denkhaus, Bldg. 31, Room 2A46, Ext. 62437, Monday and Friday, 8:30 a.m. to 5 p.m., Wednesday and Thursday, 8:30 a.m. to 12:30 p.m.

Jeffrey Friedman, Bldg. 10, Coatroom Main Lobby, Ext. 62426, Monday, 12 noon to 5 p.m., Tuesday through Thursday, 2 to 5 p.m., Friday, 1 to 5 p.m.

Warren E. Gorman, Westwood Building, Room 435, Ext. 67293, Monday and Wednesday, 12 noon to 5 p.m., Tuesday and Friday, 1 to 5 p.m.

A draft copy of the tax return should be completed and brought to the tax assistant. For telephone information call between 4 and 5 p.m.
Speech, Hearing Research Evaluated in Pamphlet

An evaluation of research in the speech and hearing field is analyzed in a report published by the National Institute of Neurological Diseases and Stroke.

The findings of the booklet, entitled Human Communication and Its Disorders—An Overview—are based on a 3-year study by a subcommittee of the NINDS National Advisory Council, headed by Dr. Raymond Carhart, professor and director of the Auditory Research Laboratory, Northwestern University.

Such disorders afflict one in every 10 Americans, and more than 100 speech and hearing specialists throughout the country were consulted.

As mentioned in the report, about 9 million Americans are handicapped with either bilateral or unilateral hearing impairments. Another 2 million have significant central communication disorders, and 10 million have speech disorders.

NINDS supports about one-third of the nation's research on human communication and its disorders, with an additional third supported by other components of HEW. Almost a quarter of NINDS training grant funds is spent for research in these fields.

The committee has found that too few investigators are concentrating on the scientific study of hearing and its disorders, and that the number of future scientists now preparing for such work is very small.

Single copies of the pamphlet are available from the NINDS Information Office, Bethesda, Md. 20014.
The Administration's fiscal 1971 budget request for NIH proposes over $1.5 billion appropriation for NIH—an increase of $50 million more than the fiscal 1970 budget request.

Expanding programs to increase health manpower and a net increase of $50 million support for traditional research institutes are features of the new budget request.

There is a decrease of $10.5 million in general research support grants. These funds are used by grantee institutions to finance improvements in the research environment and specific projects judged by the grantee to be consistent with its long-range research objectives.

**Reduction Explained**

The reduction was made on the basis that overall medical research efforts would be best served by programming the limited funds available to well-defined research programs rather than on a more generalized basis.

The major areas of increase for research are: special virus-cancers, arteriosclerosis and lung disorders, prevention of dental caries, and family planning and child health.

Through $148 million in institutional support grants, NIH will assist institutions responsible for training health manpower to increase enrollments.

These grants can be utilized for a variety of needs: library holdings, faculty salaries, and educational aids and equipment, as well as some $76 million in student traineeships and scholarships.

Of an overall increase of $91.9 million for institutional support, $5 million will be used for the second year of the physician augmentation program (designed to add 1,000 new first-year places to medical schools above the expansion planned by these schools).

The remaining funds will be used to improve the curricula, increase output of family practitioners, and conduct research into ways of shortening the training period without impairing quality.

**Budget Request for NIH**

$1,509,595

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**Codes and Definitions**

Pamphlet Issued by DRG

A Division of Research Grants pamphlet, Program and Organizational Codes and Definitions Used in Extramural Programs, has recently been issued. It was prepared by the Data Processing Section, Statistics and Analysis Branch.

This document supersedes a pamphlet issued last January entitled Document Codes in Use for NIH and Related Extramural Programs.

**Dr. Baldwin**

(Continued from Page 1)

Dr. Baldwin received his training in neurosurgery at McGill University under Dr. Wilder Penfield, internationally known neurosurgeon.

When told of Dr. Baldwin's death, Dr. Penfield issued the following statement: "I am greatly shocked at the news of the death of my former pupil, associate, and friend Maitland Baldwin.

Lauds Dr. Baldwin

He was a man of brilliant mind and great skill, and it will be a great loss to the profession and to the many patients who needed him.

"Few men have been able to combine scientific insight with professional skill and great humanity as Maitland Baldwin did."

He was also an alumnus of Harvard College and Queens University.

From 1952 to 1953 Dr. Baldwin served as assistant professor of Neurological Surgery at the University of Colorado Medical School.

Since 1953, he has been an attending neurosurgeon at Georgetown University Hospital, and, until 1969, also served as professor in the Department of Surgery at Georgetown University School of Medicine.

During World War II, he served with the U.S. Naval Amphibious Forces in the Pacific.

Dr. Baldwin was a Diplomate of the American Board of Neurological Surgery, a Fellow of the American College of Surgeons, a Fellow of the New York Academy of Sciences, an Affiliate of The Royal Society of Medicine, and a member of the Society of Neurological Surgeons.

**Other Organizations Listed**

He was also a member of a number of professional organizations and committees, including the Harvey Cushing Society, Neurosurgical Society of America, American Academy of Neurology, American Association of Medical Colleges, and the Washington Neurosurgical Society.

He had published many articles on his research studies in medical journals.

Dr. Baldwin is survived by his wife, Shirley, and children Joan, 15, Frances, 8, and Raymond, 6.

Memorial contributions may be made to the Friends of Queens alumni office, Queens University, Kingston, Ontario, Canada.

**Dr. Harold Morris Cited By Univ. of Minnesota**

Dr. Harold P. Morris, formerly in the National Cancer Institute's Laboratory of Biochemistry, has received the University of Minnesota's Outstanding Achievement Award.

The award—one of the highest honors the university bestows on distinguished former students—was presented last month to Dr. Morris.

Dr. Morris, who retired from NCI in April 1968, is currently a research professor of biochemistry at the Howard University College of Medicine.

Dr. Baldwin's research was both basic and clinical. He was interested in electron transport and its relationship to the nervous system. He was also interested in electron transport, and is the author of a text on basic biochemistry for medical students, also published scientific papers on electron transport.
HEPATITIS
(Continued from Page 1)
among patients given blood obtained from our commercial sources than among patients given blood supplied by local volunteer donors.

"We could not identify any factor other than the source of blood which contributed to this difference."

This difference in carrier rates probably reflects differences in donor populations. The researchers say that one possible explanation for the difference might be geographic.

The commercial banks which supplied the blood were located in two cities away from Bethesda, Md. where NIH is located.

Incidence Rate Identical

However, the reported incidence of infectious and serum hepatitis during the study period was not different in these two cities and in metropolitan Washington, D. C.

Donors to the commercial blood banks did meet donor requirements for blood banks shipping their products interstate. Despite this, a high proportion of hepatitis carriers was included in the donors who gave blood at the commercial banks.

Furthermore, most carrier donors cannot be excluded by presently available screening procedures.

"Although many large efforts have been made to identify blood which has a high risk of transmitting hepatitis," the investigators note, "there is still no proved method for identifying most hepatitis carriers."

Although a possible indicator, the "Australia antigen," is associated with hepatitis, the only sure methods for decreasing post-transfusion hepatitis, say the NIH team, are the use of blood from sources of low-risk and a reduction in the number of transfusions administered.

Use of Donor Blood Increased

Since October 1968, the use of blood obtained from volunteer donors has been increased for heart surgery at NIH.

In addition, the investigators are comparing the effects of volunteer blood transfusion with commercial blood from the same source city.

Both donors and patients in that study are being tested for Australia antigen and antibody.

Dr. John H. Walsh, National Communicable Disease Center, Atlanta; Drs. Robert H. Purcell and Robert M. Chanock, National Institute of Allergy and Infectious Diseases; Dr. Andrew G. Morrow, National Heart and Lung Institute; and Dr. Paul J. Schmidt, Clinical Center, reported their findings in the January 12 issue of the Journal of the American Medical Association.

Electric Frying Pan Is Essential Part of New Decon Cart Developed by Ed Rich

Mr. Rich pours crystalline paraformaldehyde into the frying pan sitting atop the cart. This is the first step in the decontamination process.

A new use for an electric fry pan has been found by Ed Rich of the Division of Research Services. He has modified a portable cart built to decontaminate equipment and laboratories at NIH.

Dental Science Handbook Describes Methods to Treat Oral Problems

The National Institute of Dental Research has announced publication of a new Dental Science Handbook, the result of a joint effort of the American Dental Association and the Institute.

The book, intended primarily for non-dentists, brings together concise information about developmental, biological, and physical aspects of the mouth.

It also describes various ways to prevent oral diseases, treat oral problems, and meet dental care needs.

Increasingly, physicians, engineers, biochemists, pharmacologists, public health workers, educators, socioeconomists, and others are involved with research, educational, or administrative aspects of dental problems and programs.

Because of its style and illustrations the book is understandable to those somewhat unfamiliar with a dental vocabulary.

A glossary explains technical terms, and an index locates specific facts. Also useful for reference are the many charts, tables, and drawings.

The handbook may be purchased for $2.75 from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402.

Series Describes Nursing Aid to Schools, Students

A new series of six pamphlets describing eligibility requirements for Federal aid to nursing schools and nursing students has been issued by the Division of Nursing, HEMT.

Three brochures deal with financial aid for schools of nursing, and for agencies and institutions concerned with nursing education: Special Project Grants for Improvement in Nurse Training; Construction Grants for Schools of Nursing, and Institutional Grants for Schools of Nursing.

Other Pamphlets Noted

Two other pamphlets tell about aid to help qualified students attend nursing schools, and aid to help registered nurses pursue graduate nursing education. They are: Nursing Scholarships and Nursing Student Loans: Information for Schools, and Professional Nurse Traineeships.

A summary booklet, Nurse Training, Title II, outlines the five forms of financial aid to nursing education.

Requests for individual pamphlets or the six-pamphlet series should be addressed to the Division of Nursing, National Institutes of Health, 9000 Rockville Pike, Bethesda, Md. 20014.

A glossary explains technical terms, and an index locates specific facts. Also useful for reference are the many charts, tables, and drawings.

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Dr. Marvin Harris Dies, Executive Secretary of DRG Study Section

Dr. Marvin M. Harris, Division of Research Grants, died suddenly on Feb. 7. He had been executive secretary of the Bacteriology and Mycology Study Section. Dr. Harris received his Ph.D. degree from Johns Hopkins University in 1929. He remained there for 7 years as a bacteriology instructor.

His scientific interests included infectious and mycobacterial diseases, and airborne infections.

Hospitality Committee Loans Household Items

The NIH Hospitality Committee, a volunteer organization to assist the families of foreign scientists who have come to work at NIH, has announced that many items are available on loan. The items include dishes, linens and toys.

Information on how to obtain used furniture will also be given.

The committee has asked NIH employees to donate such essentials as cooking utensils, baby furniture, lamps and other household necessities.

Advances in Artificial Kidney Techniques, Materials Reported at NIAMD Meeting

Developments on a new generation of compact artificial kidneys were reported at a recent meeting sponsored by the National Institute of Arthritis and Metabolic Diseases' Artificial Kidney Program.

This third annual meeting of some 150 of the program's contractors, staff, and consultants reviewed costs, efficacy, and progress of development projects and made future plans. The so-called "hollow fiber dialyzers," new and easy-to-use porous "envelope dialyzers," and a new, clinically successful method of automated peritoneal dialysis which features permanently implanted access devices in the abdominal cavity were discussed at the 3-day meeting.

The conference also learned of a newly developed, inexpensive method of manufacturing presently expensive dialyzers by means of pressure molding, in much the same manner as phonograph records.

Another highlight concerned the first successful use of kidney dialysis of disease patients with membranes made of an effective and inexpensive material other than cellophane.

In both plenary sessions and workshops, the participants discussed the four main areas of research in the program: membranes and mass transfer; hardware and instrumentation; blood cannulas and biologically compatible materials; and toxic factors in uremia, dietary management of chronic end-stage renal disease, and clinical studies in the field.

As in previous years, proceedings on the exchange of pertinent scientific and technical information will be published and distributed to workers in relevant fields.

Dr. Mider Is Appointed NLM Deputy Director

Dr. G. Burroughs Mider has been named Deputy Director, National Library of Medicine. Previously, he had served as Acting Deputy Director.

Prior to that appointment he was Special Assistant to the NLM Director for Medical Program Development and Evaluation.

Before going to his NLM assignment, Dr. Mider was NIH Director of Laboratories and Clinics. Dr. Mider came to NIH in 1939 as a research fellow at the National Cancer Institute.

The year 1941-42—the year he returned to NIH—Dr. Mider taught at several universities, including Cornell Medical College and the University of Virginia School of Medicine.

Pamphlet Summarizes Findings on Important Neurological Disorders

Research findings on a number of major neurological disorders are summarized in a new pamphlet, "NINDS Research Profiles, 1969," published by the National Institute of Neurological Diseases and Stroke.

One of the most exciting developments during the past year is the effective use of L-DOPA in the treatment of Parkinson's disease. Success with this drug, an amino acid normally present in the human body, has opened the door to a great new area of study.

Progress Reported

The pamphlet also reports further progress in learning more about several mysterious sclerosing disorders. Such clues may eventually lead to a solution to multiple sclerosis and other related disorders.

Reports of advances in epilepsy, cerebral palsy, muscular dystrophy, and the further development of a comprehensive national stroke program is also included.

The pamphlet is free from the NINDS Information Office.

New Research Grant Available From NIDR

A new type of research grant for newly-trained dental investigators is available from the National Institute of Dental Research.

The grants, called "Special Dental Research Awards," will be made for up to 3 years in amounts not exceeding $7,500 per year (for direct costs). The grants will be renewable only in exceptional cases.

To be eligible, scientists must have completed their research training within 4 years from the time their application reaches NIH.

Holders of NIH Fellowships or Research Career Development Awards are eligible if they meet these requirements.

However, if the applicant's project is already supported by NIH or another granting agency, the Special Dental Research Award may not be used to supplement that grant.

Awards' Uses Noted

The awards can be used for an assistant's salary, supplies, equipment, or other items needed for research, but may not be used for the principal investigator's salary, for publication or travel costs or to support thesis research.

To compete for the SDRA, complete the regular grant application Form PHS 398, and write "Special Dental Research Award" on the top of the face page. Forms are available from the Extramural Programs, NIDR, Westwood Building, Bethesda, Md. 20014.

Applications should be submitted to meet the regular deadlines for research grants. Those submitted by June 1 will be reviewed by Dec. 1, and those submitted by Oct. 1 and Feb. 1 will be reviewed by the following April and July.

Analysis of HEW Funds To U.S. Medical Schools Reported in Pamphlet

The second report in a series analyzing HEW funds to medical schools was recently published.

According to the report HEW awarded more than $868 million to the Nation's medical schools in 1968 for support of research, training, construction and other programs aimed at advancing the health of the American people.

All existing medical schools shared in these programs; 13 of the 16 new schools "in development" also received HEW support.

Basic report data were derived from statistics developed for the Committee on Academic Science and Engineering.

Copies of the booklet, "HEW Obligations to Medical Schools, Fiscal Year 1968," may be obtained from NIH, Office of Resources Analysis, ODPE, Ext. 64821.
**Blood Bank Reports Donors Gave 295 Units in January**

The Clinical Center Blood Bank reports that 295 units of blood were received from NIH donors in January, and CC patients received 1,449 units of blood.

Beatrice Pence, DRG, has joined the Gallon Donor Club. Call Ext. 6408 to make an appointment to donate blood.

**DR. CHALMERS**  
(Continued from Page 1)

Disease (of which he was president in 1958), and the American Board of Internal Medicine, and American College of Physicians.

Also, the Eastern Gut Club (since its founding); American Clinical and Climatological Association; American Federation for Clinical Research; American Society for Clinical Investigation, and Association of American Physicians.

**Serves on Many Committees**

Dr. Chalmers has served on many national medical committees. Among these have been the Collaborative Program Review Committee, NCI, and the following NHLI committees: the Special Projects Committee, Special Review Panel of the National Coronary Drug Study, the Policy Board of the Urokinase-Pulmonary Embolism Study, and the Diet-Heart Review Board.

Dr. Chalmers attended Yale College, and received his M.D. degree from Columbia College of Physicians and Surgeons in 1943.

Following internship at Presbyterian Hospital in New York City, he served Fellowships and Residencies at institutions of New York University and Harvard Medical School.

In addition to his tenure at the Lemuel Shattuck Hospital, he has served at Boston City Hospital; Mount Auburn Hospital of Cambridge, Mass.; the Torndike Memorial Laboratory, and the Army Medical Service Graduate School.

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**Study Shows Some 1st Non-Fatal Heart Attacks Unrecognized by Patient, Doctor**

Nearly a fourth of initial non-fatal heart attacks occurring in the National Heart and Lung Institute’s Heart Disease Epidemiology Study population of Framingham, Mass., were unrecognized by both the patient and his private physician. These unrecognized infarctions posed the same threat of subsequent infarction and death as recognized attacks.

These findings were reported in the journal *Geriatrics* for January 1970, by Dr. William B. Kannel and Patricia M. McNamara of the Framingham Study, Dr. Thomas R. Dawber of the Boston University School of Medicine, and Dr. Manning Feinleib of the Field Epidemiological Research Section, NHLI.

The Framingham Study, a long-term prospective study of 5127 residents, has provided information about unrecognized myocardial infarctions in this general population sample of a typical American city.

Participants, initially free of coronary heart disease, received cardiovascular examinations and electrocardiograms every 2 years. Additional information was obtained by monitoring hospital admissions daily, querying each subject’s physician, and spouse, and examining death certificates and medical examiners’ reports to reveal all the myocardial infarctions in the study population during the first 14 years of study.

An unrecognized or silent infarction was considered to have occurred in a subject whose medical history showed that neither he nor his physician had considered the possibility of a heart attack, but whose routine biennial ECG proved that an infarction had occurred during the 2 years since his previous ECG.

Of 334 subjects who experienced initial heart attacks during the 14 years of surveillance, 40 percent failed to reach the hospital. The infarction was documented at least by ECG evidence in 188 (151 men and 37 women) of the 384.

Almost one in four—11 women (30 percent) and 33 men (22 percent)—had unrecognized infarctions. About half of these unrecognized heart attacks were entirely “silent” or painless, making no memorable impression on the mind of the subject at the time.

The remainder produced symptoms so mild or otherwise atypical as to be confused with another ailment such as gallbladder disease, peptic ulcer, or hiatus hernia.

**Age, Sex Not Factor**

The proportion of unrecognized infarctions did not vary with age or sex, nor with the location of the infarct on the heart muscle as indicated by the ECG.

However, unrecognized attacks were distinctly uncommon in subjects who had already experienced an infarction and angina pectoris, and they produced post-infarction angina only half as often as did the recognized infarctions.

Unrecognized infarction had the same serious prognosis with respect to recurrent infarction and death as recognized infarction; within 5 years one in three of each kind recurred, and half the recurrences were fatal.

The scientists stated that a high index of suspicion is essential in detecting the “surprisingly common” unrecognized heart attack. Frequent periodic use of the ECG is presently the only practical way of detecting the truly silent, or painless, infarction.

They urged its routine use especially in persons with traits such as diabetes, ECG abnormalities, and hypertension which are known to increase the risk of heart attack.

**New Book Gives Latest Facts On Nursing Personnel in 1969**

A 145-page compilation of figures and projections, *Nursing Personnel* (Revised 1969), has been issued by the Division of Nursing, BERM.

The publication is available at $1.50 per copy from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402.

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**Dr. Henry Scherp Named Special Assistant for National Caries Program**

Dr. Scherp will serve as coordinator of NIDR’s effort to make tooth decay preventable by 1980.

Dr. Henry W. Scherp, formerly chief of the Laboratory of Microbiology, National Institute of Dental Research, has been appointed special assistant to the Director, NIDR, for National Caries Program.

Dr. Scherp will serve as leader and coordinator of the Institute’s effort to make tooth decay almost completely preventable by 1980.

NIDR’s 10-year program for intensified research and development through intramural, collaborative, and extramural studies includes:

**Fluoride May Be Applied**

• Intensive local application of fluoride to the teeth. This promises additional protection against cavities beyond that effected by the fluoridation of water.

• Laboratory and clinical research with improved adhesives. Tested on animals, these adhesives have been shown to seal off and effectively protect against cavities vulnerable surfaces of the teeth;

**Enzyme Studies Planned**

• Laboratory and clinical testing of antibiotics and antisepsics to determine those suitable for the control of caries-producing bacteria in human oral hygiene;

• Laboratory, clinical, and field studies with enzymes, such as dextranase, to determine whether they can be used effectively to reduce cavities in humans, and

• Research to determine the efficacy of phosphates and trace elements in the diet as adjuncts to caries prevention.

Dental caries, or tooth decay, is man’s most common disease and one of the most neglected.

Every year Americans pay about $3 billion for treatment. This represents about one-fifth the amount that would be required if all caries were treated.

Neglect of caries not only results in loss of teeth but also contributes to other oral problems.
Missing Enzyme Cause Of Metabolic Defect In Tay-Sachs Disease

The metabolic defect in patients with Tay-Sachs disease has been identified by Dr. John S. Brady and Dr. Edwin H. Kolodny, NINDS Laboratory of Neurochemistry, and Dr. Bruno W. Volck of the Isaac Albert Research Institute, Kingsbrook Jewish Medical Center, Brooklyn.

Tay-Sachs disease is the most prevalent of a group of rare diseases in which one enzyme causes the accumulation of lipid material in body tissues. It is an inherited disorder characterized by the accumulation of lipid material in brain and peripheral tissues.

It has now been established that the absence of a specific enzyme, hexosaminidase, produces the symptoms of this disorder.

Researchers Listed

The researchers are Dr. Roscoe O. Brady and Dr. Edwin H. Kolodny, NINDS Laboratory of Neurochemistry, and Dr. Bruno W. Volck of the Isaac Albert Research Institute, Kingsbrook Jewish Medical Center, Brooklyn.

The present findings substantiates the role of bacterial deposits in the development of dental disease.

Conference Proceedings On Membranes Published

Proceedings of a Conference on Natural and Synthetic Membranes have been published by the National Institute of Arthritis and Metabolic Diseases. The 1967 conference, sponsored by the Blood Research Institute, was called to exchange information on the structure and biochemistry of natural membranes, as well as synthetic membranes which would approximate the efficiency of natural membranes.

The Institute has received contract support from NIAMD to evaluate membranes for possible use in artificial kidney machines. NIAMD is distributing the 32-page publication to Conference participants and to members of the American Society of Artificial Internal Organs.

Pamphlet Reveals Plaque Role in Dental Disease

Research Explores Plaque—Combust Zone in Dental Disease, a new pamphlet published by the National Institute of Dental Research, reveals the role of bacterial deposits in the development of dental diseases.

It describes techniques to eliminate these deposits.

Single copies of the pamphlet can be obtained without charge from the Information Office, NIDR, Bethesda, Md. 20014. Quantity copies may be purchased from the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402, for 25 cents each or $1.75 per hundred.

The NINDS study now completes a series of investigations from this and other laboratories throughout the world which have resulted in the demonstration of the metabolic defect in all six of the major sphingolipidoses.

The present findings have been published in Biomedical and Biophysical Research Communications.

NIH Colleagues, Friends Jam Wilson Hall For Unveiling of Dr. Shannon's Portrait

A portrait of Dr. James A. Shannon, NIH Director from 1955 to 1968, was unveiled on Thursday, Feb. 5, at ceremonies in Wilson Hall, Bldg. 1.

Dr. Robert Q. Marston, NIH Director, in introducing Dr. Shannon, referred to him as "distinguished scientist, dedicated physician, and outstanding administrator."

Many Attend

The ceremonies, attended by Mrs. Shannon, the staff of the Office of the Director and their wives, I/D Directors and others from NIH, were opened by Richard L. Seggel, Associate Director for Administration.

Mr. Seggel introduced the artist, Bjorn Egeli, who painted Dr. Shannon's portrait. Dr. Shannon also painted the portrait of Dr. William Henry Sebrell, Jr., NIH Director from 1950 until his retirement in 1955.

Dr. Marston referred to the gathering in Wilson Hall as "a happier occasion than when he (Dr. Shannon) left NIH."

Dr. Marston called Dr. Shannon's 13-year directorship at NIH the longest period of tenure held by a Director, and said "... he not only guided longer, but during the most dynamic period of growth."

Guided NIH Growth

Under Dr. Shannon's leadership, Dr. Marston continued, NIH grew "from an insular research agency to an institute that supports at least half of the biomedical research going on in the world."

At the conclusion of his speech Dr. Marston unveiled Dr. Shannon's portrait.

Dr. John F. Sherman, NIH Deputy Director, then introduced Mrs. Shannon to the audience as "the great woman behind the great man," and presented her with a smaller portrait of Dr. Shannon, also painted by Mr. Egeli. The gift was a surprise to Mrs. Shannon.

At the close of the ceremonies refreshments were served.

Dr. Shannon, at present a special advisor to the President of the National Academy of Sciences, has been named special assistant to the President of Rockefeller University. He will plan health research programs, and will also serve on New York City's Board of Health.

Just before the ceremony, Dr. and Mrs. Shannon sitting with Dr. Marston and Mrs. Marston, greeted friends and former NIH colleagues—now they are ready for the main event—the speeches and the unveiling of the portrait.