NIH Team to Study Peer Review System, Hold Open Hearings

The NIH Grants Peer Review Study Team is holding public hearings on the peer review system this month at NIH as well as at Chicago and San Francisco.

The open hearings will be held on Feb. 12 in Chicago; on Feb. 19 in San Francisco, and on Thursday, Feb. 26, from 9 a.m. to 5 p.m. in Bldg. 1, Wilson Hall.

The hearings in Wilson Hall will be videotaped and presented locally later.

Kirschstein Chairs Team

The study team, whose establishment was announced in the Federal Register of Sept. 4, 1975, is chaired by Dr. Ruth L. Kirschstein, Director of the National Institute of General Medical Sciences.

Written comments and suggestions concerning the peer review system have been solicited from the scientific community, health agencies and professionals, and the public.

These comments, along with requests to attend or present statements at the hearings, have been sent to Dr. Mathilde Solowey, executive secretary of the NIH team.

Topics on which information is being sought are: the adequacy

60 Intramural, Clinical Leaders Confer on Goals

Some 60 leading NIH staff members convened for 3 days, Jan. 21-23, at Easton, Md., with Dr. Donald S. Fredrickson, NIH Director, and Dr. DeWitt Stetten, NIH Deputy Director for Science, to review clinical research programs and plan future intramural goals.

The participants included scientific and clinical directors from the NIH Bureaus and Institutes as well as Clinical Center staff.

During the meeting, the conferences discussed organizational structure, such as Medical Board governing bodies; available resources, and postgraduate level medical training programs as they relate to NIH's research activities.

They also considered new directions in patient care, such as development of intensive care units; expansion of pulmonary and respiratory care capabilities, and exploration of new methods for rehabilitation.

and effectiveness of the present system, including the scientific review, Council review, and the priority rating system; the impact of the Privacy Act of 1974, the Freedom of Information Act, and the Federal Advisory Committee Act; and recommendations as to how the present system can be improved.

Researchers Stress Role of Polyamines In Cystic Fibrosis at Meeting on Campus

National and international scientists from medical schools and institutions and investigators from several NIH Institutes participated in a meeting on how polyamines in secretory processes figure in cystic fibrosis.

NIH to Hold Open House For Public on May 1, 2

NIH will hold a public Open House on Saturday, May 1, and Sunday, May 2, as part of HEW's participation in the Bicentennial.

The Open House will be another opportunity to let the public, NIH's friends and neighbors, and its employees and their families see NIH for themselves.

Commenting on the enthusiasm and effort displayed by NIH'ers at last year's Open House, Dr. Donald S. Fredrickson, NIH Director, said:

"I am looking forward to a repeat of this splendid individual effort and to an even greater participation by our NIH organizations and personnel in order that we may have a more informative program and equally adequate reception for an even greater number of visitors."

Each B/I/D Director has been asked to designate a public Open House project officer, with Huly Bray, ODII, designated as coordinator for this project.

Mucus Clogs Ducts

Thick mucus clogs the pancreatic ducts, interfering with the flow of digestive enzymes and also partially blocks the bronchial tubes causing progressive lung disease.

Sweat electrolyte levels are abnormally high, and blood polyamine levels, specifically spermine and spermidine, are altered. The molecular defect that causes these aberrations is unknown.

Dr. David Lundgren and Lawrence Cohen of NIAMDD and Dr. Owen Rennert, University of Florida, reported on their finding of abnormal concentrations of polyamines in blood from cystic fibrosis patients and asymptomatic carriers which lead to a

(See CYSTIC FIBROSIS, Page 4)
32 Historic Microscopes From Billings Collection Added to NLM Exhibit

In 1874, Lt. Col. George A. Otis, curator of the Army Medical Museum, acquired several historic microscopes. However, it was Dr. John Shaw Billings, curator of the Museum from 1883 to 1893 and Director of the Library of the Surgeon General’s Office from 1870 to 1895, who provided the impetus for expanding the collection.

He enlisted the aid of John Mayall, Jr., of London, a member of the Royal Microscopical Society and well-known collector of microscopes, to procure representative instruments.

By 1888 Mr. Mayall had personally selected 141 instruments for the collection. Meanwhile, Dr. Billings searched for other instruments and stimulated other collectors to contribute to the growing collection.

Of the 700 microscopes which comprise the Billings Collection, 32 are now on display at the National Library of Medicine. Representative instruments illustrate the evolution of microscopy from the 17th to the 20th centuries, beginning with a replica of Van Leeuwenhoek’s 1673 simple, single lens instrument.

The Medical Museum of the Armed Forces Institute of Pathology prepared this exhibit to accompany the NLM bicentennial presentation, 200 Years of American Medicine.

The microscopes are displayed in a special area which is open to the public Monday through Friday, 8:30 a.m. to 5 p.m.

Among the instruments exhibited at NLM on loan from the Billings Microscope Collection are four compound monocular microscopes. L to r: 1730 microscope from Edmund Culpeper, London; Culpeper-type, Nuremberg, Germany, 1750; Dolland, London, about 1825; folding microscope from J. Zontmayer, Philadelphia, about 1880.
Dr. Zifferblatt Is Named To Special NHLI Post

Dr. Steven M. Zifferblatt has been appointed as a special assistant to Dr. Robert I. Levy, Director of the National Heart and Lung Institute.

Dr. Zifferblatt will review the data of all NHLI-supported clinical trials and study compliance with prescribed clinical regimens; for example, changes in diet, cessation of smoking, and adherence to drug regimens over extended periods of time.

He will then develop a series of monographs, analyzing these behavioral activities and recommending ways to achieve long-term adherence in current and future clinical trials.

Dr. Zifferblatt will also participate in existing clinical programs that relate directly to patients.

Dr. Zifferblatt comes to the NHLI from Stanford University where he was assistant professor of education and research associate in psychiatry. He was also a member of the Subcommittee for Recruitment and Adherence, a research and consultation group for promoting medication adherence in the Coronary Primary Prevention Trial.

Previously, he was in charge of a treatment program at the Peninsula Children's Center, Palo Alto, dealing with behavior modification treatment programs for psychotic and autistic children and their families.

He was also co-founder of "Learning House," a group home for problem children; and consultant to the American Institutes of Research, "Project Outreach," and the National Institute of Education.

Dr. Zifferblatt was recently honored by the Palo Alto Junior Chamber of Commerce as its "Young Man of the Year."

F EW Will Meet on Feb. 26; Sex Discrimination Is Topic

Sex Discrimination will be the topic of the next meeting of the Suburban Maryland Chapter of Federally Employed Women, Inc.

Ellis Kaufman, a lawyer, will describe the step-by-step process of filing a sex discrimination case, and Voyce Whitley, Equal Employment Officer of the Food and Drug Administration, will discuss actual cases.

The dinner meeting will be held at the Bethesda Naval Officers' Club on Thursday, Feb. 26, at 7 p.m. The program will begin at 8 p.m.

For reservations, contact Barbara Lasky, Room 12-C-09, Parklawn Bldg., 443-3735, by Feb. 19. The cost is $6.50.

Scientist George Yee, an EEO Champion, Changes Career to Help Foster Concepts

Tacked on the wall of George S. Yee's office is a colorful display of four programs celebrating ethnic weeks at NIH. They are American Indian Week, La Semana de los Latinos, The Black Contribution, and Asian-American Cultural Week.

Mr. Yee is the man behind the committee that brought each program to a successful fruition—he heads the NIH Minority Cultural Committee. But that's only one of his titles—officially, he is program manager for the Division of EEO.

Mr. Yee is also a scientist—a microbiologist. He came to NIH in 1962 as operations officer of the National Institute of Allergy and Infectious Diseases Virus Reagents Program. He has a B.S. from Northeastern University, an M.S. from the U. of Massachusetts, and he did graduate work at the Harvard School of Public Health.

Serves in Chemical Corps

He also served as a captain in the U.S. Army Chemical Corps on duty in the Biological Laboratories at Fort Detrick, Md.

In 1969, at NIAID, he became Leprosy and Tuberculosis Program officer in the Geographic Medicine Branch.

"Did you do any travelling?" he was asked, and he rattled off "Japan, Taiwan, Korea, Philippines."

In 1970, he was asked to head NIAID's EEO Advisory Committee—the first in the Institute.

"This was my first eye-opening experience to EEO and what it meant at NIH."

Theoretically, at that moment, NIH lost a scientist, but gained a Civil Rights champion. Mr. Yee is a second generation American—his parents were born on the West Coast—he and his sisters were adopted when they were very young by a white American family who lived in Boston.

His foster father was a pharmacist, and his foster mother was a professional dancing teacher.

"And I'm a damnyankee," Mr. Yee solemnly explained.

Kipling was not entirely wrong East is East and West is West—but neither was he entirely right. In this case, the twain almost met—with just a gap here and there.

But it was that gap that bothered Mr. Yee. He found it difficult to close, especially when he was working as a chemist in a pharmaceutical firm in the midwest.

Mr. Yee also talked about his scientific career at NIH in the early days of EEO.

"Being Asian-American, I felt that we were being discriminated against." That was one strike; he mentioned another. "I also felt that because I did not have my Ph.D. degree, my future in a scientific program at NIH was limited."

Those were reasons enough for him to become totally involved with EEO and assisting in the unseating of the status quo for all minority groups at NIH.

"Discriminations and biases still go on. When you're discriminated against, you're discriminated against—for no matter what reason."

James F. Travis, electrician lead foreman in the Plant Engineering Branch, DES, retired in January after more than 35 years of Federal service. A veteran who participated in the battle of Pearl Harbor, he joined DES in 1961 after retiring from the U.S. Navy as Chief Petty Officer. Known to colleagues for constantly wearing his khaki uniform, he plans to fish, enjoy his boat, visit Florida, then return to Maryland.

(See MR. YEE, Page 8)
CYSTIC FIBROSIS
(Continued from Page 1)

high spermidine/spermine ratio.
It is the first biochemical abnor-
mality to be detected in carriers of
the abnormal gene in cystic fib-
rosis, and it may provide a clue
to the cause of the disease. Poly-
mality to be detected in carriers
of ornithine decarboxylase, the
mammalian carriers.
The fact that induction of CDC in a number of systems is preceded by the activation of a cAMP-dependent protein kinase.
Dr. Nicholas Seller, Max-Planck
Institute, Hamburg, Germany, de-
scribes his work in mammalian
systems.
Dr. Seller also presented his re-
search which examined the pos-
sible functional role of polyamines.
His data supported the interac-
tion of spermidine and spermine
on the membrane-located enzymes, cholinesterase and Ca-ATPase.
On the subject of exocrine se-
cretory processes, Nobel laureate
Dr. George E. Palade, Yale Uni-
versity Medical School, discussed
the secretory activity of pancre-
atic cells.
Techniques Described
Through the use of autoradi-
ographic techniques, he has followed
the secretory proteins from produc-
tion through segregation, intra-
cellular transport to the Golgi
complex, concentration, and stor-
age in granules, to final discharge
from the cell.
Two investigators, Dr. James
Jamieson, Yale University School
of Medicine, and Dr. John Man-
gos, University of Florida, de-
scribed their work on secretory ac-
tivity using tissue culture.
Until recently, CF research has suffered from the lack of a good in vitro system, but the de-
velopment of a tissue culture method has given scientists a tool with which to probe the nature of
cell surface membrane receptors
which might be abnormal in cystic
fibrosis.
Dr. Jamieson worked with sepa-
rated pancreatic exocrine cells to
study their structure and function.
He examined cell surface proper-
ties by using sugar-specific lectins
tagged with both ferritin and 125I, enabling morphologic and bio-
chemical identification of binding sites.
It appears that during differ-
entiation, alterations occur in the
cell surface carbohydrate patterns
which may reflect functional dif-
ferentiation, such as specific hor-
mones responsiveness.
Dr. Mangos described his method
for isolating intact secretory cells
from the parotid gland, a technique
with which he can characterize
cholinergic and adrenergic recep-
tors of the parotid cells. The
cell surface membrane receptors
which might be abnormal in cystic
fibrosis.
Other NIH scientists who ex-
plained their research were Drs.
Herbert and Celis Tabor and Dr.
Takima Oka, all of NIAMDD.
Drs. Tabor described the metab-
olism of polyamines in bacterial
systems. Dr. Oka discussed his
studies which indicated that sperm-
dine may be an important regu-
ulatory substance in lactogenesis in
the developing mammary gland.

The day-long birthday commemoration of Martin Luther King, Jr., held on
Jan. 15 in the Parklawn Bldg., was observed by HEW employees and their
families. Dr. Donald S. Fredrickson, NIH Director, introduced the principal
speaker—Fannie Lou Hamer—civil rights leader. During the morning session,
PHS administrators were among those taking part in a panel discussion on
Dr. King and his ideals.

NIH Visiting Scientists
Program Participants
1/5—Dr. Pi-yeong Chi, China,
Environmental Biometry Branch.
Sponsor: Dr. Michael D. Hogan,
NIAMS, Research Triangle Park,
N.C.
1/6—Dr. Jacques Michel Pommier,
France, Clinical Endocrinology
Branch. Sponsor: Dr. Jacob
Robbins, NIAMS, Bldg. 10, Rm.
8N315.
1/12—Dr. Mann-Jy Chen,
Taiwan, Virus and Disease Modifica-
tion Section. Sponsor: Dr. Takis
Papas, NICI, Bldg. 36, Rm. 2C02.
VISITOR FROM GREAT BRITAIN
1/21—Dr. Stephen Gilbert Hillier,
Great Britain, Reproduction Research Branch. Sponsor: Dr. Griff
T. Ross, NICHD, Bldg. 10, Rm.
12N204.
1/26—Dr. Cristobal L. Miranda,
Philippines, Pharmacology Branch.
Sponsor: Dr. James R. Fouts,
NIAMS, Research Triangle Park,
N.C.
1/26—Dr. Nydia M. Morales,
Costa Rica, Pharmacology Branch.
Sponsor: Dr. H. B. Matthews,
NIAMS, Research Triangle Park,
N.C.
1/26—Dr. Kim-Ching Sandy
Pang, Canada, Laboratory of
Chemical Pharmacology. Sponsor:
Dr. James R. Gillette, NHIH, Bldg.
10, Rm. 8N117.
1/28—Dr. Motohiro Kato,
Japan, Laboratory of Experimental
Neurology. Sponsor: Dr. William
Caviness, NINCDS, Bldg. 36, Rm.
4A27.

Prevention of Deep Vein
And Lung Clots Is Topic
Of Workshop Publication

The proceedings of a workshop,
titled "Prophylactic Therapy of
Deep Vein Thrombosis and Pul-
monary Embolism" (DHEW Publi-
cation No. (NIH) 76-866), were
recently published by the Division
of Blood Diseases and Resources
of the National Heart and Lung
Institute.

The volume contains discussions
of the scope of the problem, cur-
rent status of diagnosis, thera-
petic measures, and prevention,
as well as committee reports on
pathologic criteria for fatal acute
pulmonary embolism, methods for
obtaining more accurate clinical
data, and guidelines for a uniform
approach to diagnosis.

About 50,000 patients die each
year from deep vein thrombosis
and pulmonary embolism—fre-
frequently encountered complica-
tions of medical disorders, surgical
procedures, and trauma.

Preventive approaches to these
disorders are clearly desirable
since a significant percentage of
these fatalities occur among pa-
ients who—without these compli-
cations—would probably have sur-
vived their illnesses or surgical
procedures.

Increasingly effective preventive
approaches are resulting from
many investigators' contributions

Understanding Increases
- increased understanding of
the mechanism of blood coagula-
tion and the interaction of heparin
with this mechanism;
- a greater insight into platelet
physiology and the therapeutic
potential of platelet-inhibiting
drugs;
- more sensitive diagnostic tools
permitting meaningful clinical
studies;
- techniques for conducting con-
trolled clinical trials utilizing this
basic information.

This publication, stock number
017-204-00487-1, is available from
the Superintendent of Documents,
U.S. GPO, at $3.30 per copy.

Dr. Stephen Carter to Direct
Northern Cal. Cancer Program

Dr. Stephen K. Carter, deputy
director of the Division of Cancer
Treatment, National Cancer Insti-
tute, has been appointed executive
director of the Northern California
Cancer Program in Palo Alto. He
will begin his new duties in June.
Dr. Carter, who joined NCI in
1967, held several posts with the
Institute including that of asso-
ciate director for Cancer Therapy
He has co-authored two books, is
a co-editor of Cancer Treatment
Reviews, and serves on the edi-
torial boards of four journals.
SUNY Research Team Traces Association Between Apnea, Other Factors in SIDS

By Doreen Mead

According to scientists at the State University of New York, Upstate Medical Center, infants who die of sudden infant death syndrome may be prone to frequent and breathing (apnea) during sleep. A research team led by Dr. Alfred Stein Schneider has traced a strong association between apnea and other factors linked to the sudden infant death syndrome.

Recognized SIDS factors include sleep, postnatal age, low birthweight, and nasopharyngitis.

In addition, the scientists found that certain physiological functions may be severely altered during prolonged episodes of sleep apnea.

This suggests that apnea, in combination with other physiological events, may be a precipitating factor in SIDS, or crib death. The SUNY group, supported by the National Institute of Child Health and Human Development, is studying this possibility.

Between 7,500 and 10,000 infants each year become victims of SIDS. Typically, an apparently healthy infant, usually between 2 to 4 months—seen as the peak age for SIDS—is put to bed and is later found dead in its crib.

Five Infants Studied

Although the baby may have had a slight respiratory infection, post mortem examination finds no condition serious enough to account for the death. These investigators first noted the possible association of sleep apnea with SIDS while studying five infants who had been referred to the Center because of recurrent cyanotic (bluish discoloration) and apneic episodes.

In the sleep laboratory, all of the infants were observed to have frequent brief apneic episodes.

On the ward, they had a number of prolonged apneic (15 seconds or longer) and cyanotic episodes, some of them sufficiently long and severe to prompt vigorous intervention.

As Dr. Stein Schneider described it, the babies “merely slept, stopped breathing, and turned blue. They were not struggling.”

Cardiac Rate Observed

Prolonged apnea showed up most often in babies with an upper respiratory infection. Two of the infants subsequently died at home, and medical findings on autopsy were similar to those found in SIDS.

The scientists then began a research program focusing on respiratory and cardiac rate activity during sleep.

This decision was based on the knowledge that dramatic, although transient, changes can occur in nervous regulatory mechanisms of respiratory or heart activity (“autonomic storm”) while an infant is sleeping.

The investigators believed that the sudden onset of sleep apnea could occur in an otherwise normal infant, but not necessarily result in death.

The researchers found that prolonged apneic episodes were associated with marked changes in cardiac rate. Some premature babies in the program experienced sudden prolonged periods of sleep apnea accompanied by cyanosis and severe bradycardia (abnormal slowness of the heart beat) and cardiac arrhythmia (erratic heartbeats), demanding immediate intervention.

It appears that the severity of an episode of sleep apnea may be related to these more profound alterations of physiological function.

Turning to the variables associated with SIDS, Dr. Stein Schneider’s group systematically studied sleep, postnatal age, low birthweight, and nasopharyngitis to see whether these factors were related to prolonged episodes of apnea.

The investigators examined another group of infants with transient cyanotic or apneic episodes. After a week of clinical observation the babies were found to fall into one of four categories:

- Infants who had prolonged sleep apnea;
- Those who had both prolonged apnea and feeding difficulties;
- Those who had no difficulty during sleep but became apneic or cyanotic during feeding;
- Those who had neither feeding nor sleep problems, but had seizures, breathing “spells” or skin color changes.

A baby at risk for prolonged apneic episodes is monitored by an instrument which sounds an alarm if the child’s breathing stops for longer than 15 seconds.

The same babies were then monitored during a single “standard” nap to see if infants subject to prolonged sleep episodes could be identified.

It developed that those infants experiencing prolonged apneas during sleep and also feeding, and during sleep alone, did suffer more frequent and longer apneic episodes during the standard nap.

Thus, the “nap” method showed which infants were at risk and, in addition, demonstrated the test’s reliability as a possible diagnostic tool.

The nap research also revealed that rapid eye movement (REM) sleep, the sleep characterized by increased variability of respiratory rate, heart rate, and other physiological changes, is associated with more frequent apnea.

In contrast, during non-rapid eye movement (NREM) sleep, heart rate and breathing are slow and regular.

The researchers conclude from these findings that the same basic neurophysiological mechanism may be responsible for both prolonged sleep apneas and for the brief apnea frequently noted during routine sleep studies.

Preliminary studies with month-old infants of varying birthweights indicated that low birthweight infants were more likely to have longer and more frequent apneic episodes.

Previous Research Explained

A previous longitudinal study on a small group of premature babies had established that apnea increased during the first few weeks of life and decreased as the child matured.

In that study, REM sleep again was associated with more frequent apneic episodes.

However, duration was unaffected by sleep stage, thus suggesting that apnea may be best understood as subject to two sets of neurophysiological mechanisms, one responsible for initiating an episode, the other for limiting its duration.

Finally, evidence of a greater daily occurrence of sleep apnea during periods when infants were described as having “colds” was reported, supporting previous observations to this effect.

Dr. Stein Schneider and his associates are continuing their research in evaluating the sleep apnea hypothesis in SIDS.
After CC nurse Esther McConnell (l) described the platelet donation procedure to a group of Navy officers' wives visiting the NIH Plateletpheresis Center recently, four of them agreed to have their platelets typed and, if they match those of a CC patient, become donors. Gail Welcome (r) starts to process one of the visitors. NIH employees who would like information about how to become platelet donors may call Ext. 61130 for an appointment.

**NHLI Issues Proceedings Of Working Conference About Health Behavior**

The Proceedings of the NHLI Working Conference on Health Behavior, DHEW Publication No. (NIH) 76-868, have recently been published.

The conference, sponsored by the National Heart and Lung Institute's Office of Prevention, Control and Education, was held May 12-15, 1975, at Bayse, Va.

**Exchange Information**

The major goal of this conference was to provide the Institute with information and advice from behavioral/social scientists on health behavior problems related to the prevention and control of heart, lung, and blood disorders and, at the same time, to familiarize scientists with these problems and research opportunities.

The Proceedings include the keynote address: Behavioral Medicine as a New Frontier: Opportunities and Dangers, presented by Dr. Neal E. Miller, Rockefeller U.

Single copies of the 300-page

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**Joy of 'Living Sober' Depicted in EHS Film**

A film, entitled "Living Sober: the Class of '76," is being shown by the Employee Health Service on Feb. 17 and 20. In this 28-minute film, recovered alcoholics from all walks of life present their personal testimonials on the positive aspects of sobriety as they meet on a bright, sunny day to celebrate another dry year.

Some interesting points about rehabilitative procedures are also included in the movie.

On Tuesday, Feb. 17, the film will be shown in the Westwood Bldg., Conference Room D, at 11:30 a.m. and 12:15 p.m., and on Friday, Feb. 20, in Bldgs. 1, Wilson Hall, at 11:30 a.m. and 12:15 p.m.

Marlyn Poling, Ext. 63164, a nurse counselor on the EHS staff who has been assigned to the Bldg. 31 Health Unit, is available for consultation on alcohol problems.

Proceedings are available, free of charge, from Dr. Stephen M. Weiss, chief, Health Education and Behavioral Research Branch, OPCE, Bldg. 31, Rm. 5A-08.

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**Minorities Seek Training**

As EEO program manager, Mr. Yee is aware that many minority employees at NIH are asking where can I go from here, "and they are not getting the complete answers that they need," said Mr. Yee.

"They are getting the answer that training is a privilege. I don't agree. Training should be a continuous process in an employee's development—formal training or on the job. The success of all training programs depends upon the involvement of everybody, including all levels of management."

There is nothing of the thwarted scientist about Mr. Yee—he too much likes his present assignment—but he does feel that EEO progress "is not as visible as researching the cure for a disease in a scientific project. There you have a check and a balance; in EEO there is no such check or balance."

"Also, my reading has changed—no more science. Now I'm continually reviewing EEO policy and procedures. I'm trying to keep up with the laws and regulations governing EEO and Civil Rights activities."

"No," he admitted, "I don't feel thwarted that much. I would not change any part of my career—at the present time or what has happened in the past."
Students in Adult Education Classes Set Own Pace, Work Hard, Gain Basic Skills

Twice a week for 2 hours during their working time, over 100 NIH employees attend Adult Education Classes. Permanent NIH employees are eligible and may request placement testing for this program at any time through their personnel offices.

The Training and Education Branch, Division of Personnel Management, then places persons in the nine currently scheduled classes which aid in development of specific skills—such as writing, reading, speaking, and arithmetic—and are geared toward attainment of a General Educational Development certificate comparable to a high school diploma.

Other Classes Listed

In addition to those described below, two classes taught by Eileen Kyle and Pat Sadler meet in the Clinical Center. Ilse Fleischman, Miki Gourbeau, and Irene Kimmelblatt also teach classes in Bldg. 31.

The program allows participants to enroll at their own level of academic proficiency and continue their studies on a year-round basis until they have achieved their goals. There is no cost to the employee or to the B/I/D.

Graduates Continue Studies

Mrs. Sadler, who has been teaching three Adult Education Classes at NIH since August 1972, recalls the first year's classes to have been sponsored by a group of NIH employees interested in sailing at NIH and was looking forward to the sailing program through the county.

Recently, during a typical afternoon class, Mrs. Sadler and her students were working on punctuation and the intricacies of restrictive and non-restrictive clauses in simple, compound, and complex sentences. On alternate days they tackle mathematics.

The class, which has equal numbers of men and women, had completed exercises at home in *English 2200*—a programmed text that enables the students to set their own pace.

Take Test When Ready

That afternoon they were providing tricky examples for each other to solve and asking Mrs. Sadler for assistance with some of the tougher problems. Then they took two end-of-chapter tests as they felt prepared to do so.

On this particular day, Robert Grey was anxiously awaiting the result of his college equivalency test he had taken in Upper Marlboro on two previous Saturdays. He has had different teachers during his study at NIH and was looking forward with mixed emotions to leaving the group. The happy result—he passed!

Mrs. Sadler, who holds B.S. and M.Ed. degrees from Texas Southern University and the University of Houston, had previously been a teacher and counselor for several years in her native Texas.

Teachers Enjoy Program Too

She finds part-time teaching and the individualized pace of instruction rewarding. She and her husband, Dr. William A. Sadler, chief of the Population and Reproduction Grants Branch, National Institute of Child Health and Human Development, have three school age children at home.

On Tuesday and Thursday mornings other classes meet in the same cheerful room in Bldg. 31 with Ardis Breslauer, a graduate of the University of California at Berkeley, who has taught for 2½ years at NIH.

Mrs. Sadler (c) checks on problems encountered with homework. L to r: Bernice Lee, Jonie Jones, William Shaffer, Dorothy Ford, Rosa Douglas, Robert Grey, Gladys Lyles, and William Clark.

Like the other teachers, she is hired by the Montgomery County Schools and recently participated in an in-service training course for the new series of programmed texts used in adult education throughout the county.

Mrs. Breslauer, like her colleagues, finds the students hard-working and enthusiastic—in fact, three more people have just signed up to take the placement test and start the classes.

Skills Used Daily

Since improved communications and computation skills are helpful in daily life as well as on the job, and classes during working hours do not add to commuting schedules nor distract from family obligations, nearly all the students who begin the program continue until they achieve their goals.

According to Milton Tipperman, NIH adult education coordinator, a computer search of personnel records recently showed that about 10 percent of all NIH employees have not completed high school and thus are potential participants in the adult education program.

Employees interested in the program may contact their personnel offices or Mr. Tipperman, Bldg. 31, Room B2-B-39, Ext. 62146.

628 Employees Change Health Plans, Options

During the Federal Employees Health Benefits Program's "Open Season," from Nov. 15 to Dec. 31, 628 employees made changes.

Of this total, 197 employees changed their enrollment plan; 229 changed their option or type of enrollment within the same plan; 187 enrolled, and 15 cancelled enrollments.

New premium rates on health benefit plans became effective Jan. 4, and these new biweekly deductions were reflected in Jan. 27 paychecks.

**Check Deductions**

Employees are requested to verify whether deductions for health benefits enrollments are correct on their Salary and Leave Notification Statement.

If the amount withheld is incorrect, timekeepers should be contacted. B/I/D Personnel office staffs are available to answer questions on the Health Benefits Program.
National Institutes of Health Budget

Congress voted to override President Ford's veto of the bill which funds the Departments of Labor and Health, Education, and Welfare, and the measure is now automatically law.

The starting date of the Federal fiscal year has been changed from July 1 to Oct. 1, and the Fiscal year 1977 budget was submitted by the President to Congress on Jan. 21.

The 3-month period between July 1 and Oct. 1, 1976, will be known as the "transition quarter," and will be funded at the same continuing level as in Fiscal 1976.

The Fiscal 1977 budget was submitted as a consolidated appropriation for all Bureaus, Institutes, and Divisions except for buildings and facilities which remain a separate appropriation.

1976 Summary by Appropriation

(Budget authority in thousands)

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* NIH is still operating on a continuing resolution for training programs.

Fredrickson Taking Part in AAAS Annual Meeting

Dr. Donald S. Fredrickson, NIH Director, and a number of other NIH scientists will be taking a prominent part in the annual meeting of the American Association for the Advancement of Science scheduled Feb. 18-24 in Boston.

The theme of this 142nd annual meeting is Science and Our Expectations: Bicentennial and Beyond.

On Feb. 18, Dr. Fredrickson will discuss The Impact of Biomedical Research on Health Care. On Feb. 19 he will participate in a panel discussion on The Role of Controlled Therapeutic Investigations in the Nation's Health Program.

Another feature of this year's meeting is a Conference on Minority in the Sciences and Biomedical Science to critically evaluate efforts to increase minority participation.

Dr. J. Kiffin Penry (I) and James Cereghino (not shown) of the Neuroscience Disorders Program, NINCDS, received Distinguished Service Awards from Paul Funk (r), executive vice president, Epilepsy Foundation of America. Dr. Penry was cited for "leadership, professional achievements, and personal dedication in helping change the world for people with epilepsy," and Dr. Cereghino for his "scientific and humanitarian concern for [epileptics] and society...."