Dr. Jay Moskowitz Named NIH Associate Director

Dr. Jay Moskowitz of the National Heart, Lung, and Blood Institute has been named NIH Associate Director for Program Planning and Evaluation, effective Jan. 20.

He has served as associate director for scientific program operation and director, Office of Program Planning and Evaluation in NHLBI since 1981.

In his new position, Dr. Moskowitz will serve as advisor to Dr. James B. Wyngaarden.

He said he hopes to assist the Director in identifying and examining major issues in biomedical research and designing strategies to assess them.

He also foresees working with the "constituencies.

(See DR. MOSKOWITZ, Page 12)

Thunderous Therapy Smashes Kidney Stones

By Jim Fordham

Research on the causes and treatment of kidney stones has so succeeded over the past few years that management of the disease has now entered a new era. This generally quiet but sometimes ear-splitting revolution in medical and surgical care was described recently by three NIADDK grantees at the annual meeting of the American Society of Nephrology, on Dec. 15-18 in New Orleans.

The loud, dramatic and most expensive innovation is the stone-smashing technique known as extracorporeal shockwave lithotripsy (ESWL), or simply "shock wave therapy." This procedure was developed in Germany and promises to replace most surgery for all types of kidney stones.

The $2 million device that provides this thunderous therapy is called the lithotripter, or stone-crusher. The instrument delivers high energy shock waves from an underwater high-voltage spark that disintegrate stones while the patient reclines in a water bath.

The kidney stone, targeted by x-rays, gets between 1,000 to 2,000 blasts, focused by ellipsoidal reflectors. Each blast, lasting less than a microsecond, penetrates the kidney stone and shatters it as the waves bounce back from the surrounding soft tissue of the body and collide with oncoming waves.

Each blast emits a bang similar to that of a loud cap pistol. The tissue around the stone remains essentially undamaged as the pulverized fragments are subsequently passed out in the patient's urine.

The advent and use of the lithotripter was discussed by NIADDK grantee Dr. Birdwell Finlayson of the College of Medicine of the University of Florida, Gainesville, one of the first U.S. scientists to employ the stone-crusher experimentally. (The device was approved by the Food and Drug Administration in 1984)

(See KIDNEY STONES, Page 11)
US-USSR Heart Specialists Hold Medical Conference
By Satellite Using NLM’s Lister Hill Center

NLM’s Lister Hill Center Auditorium was the site on Dec. 16 of a historic “live” 2-hour satellite television medical conference linking American and Soviet cardiologists. MEDICOM ‘85 was an outgrowth of the recent Geneva summit between President Reagan and Soviet General Secretary Gorbachev.

Seven of America’s leading heart specialists—including Dr. Michael DeBakey—were joined by satellite with five Soviet experts at the National Cardiology Research Center in Moscow. The subject of discussion was “Present Status of Prevention and Treatment of Coronary Heart Disease.”

The joint meeting was first proposed during a meeting last year between Dr. Eliot Corday, a cardiologist and senior research scientist at the Cedars-Sinai Medical Center in Los Angeles and Dr. Rafael Oganov, director of the Institute of Preventive Cardiology, Academy of Medical Sciences, Moscow.

TRAINING TIPS

The following courses are sponsored by the Division of Personnel Management, the NIH Training Center.

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NLM Invites NIH Staff To View Info Services

NIH staff are invited to visit the National Library of Medicine on Feb. 6 when the Library will be demonstrating a variety of technology-based information services in the lobby of the Lister Hill Center (Bldg. 38A).

NIH staff will be on hand from 11 a.m. to 4 p.m. to answer questions and demonstrate such services as:

- New “user friendly,” front-end software for use with a microcomputer that will allow individuals to retrieve references directly from NLM’s current MEDLINE file
- DRLINE (Directory of Information Resources Online), BIOETHICSLINE, Health Planning and Administration Database, and other MEDLARS files
- Cancer-related databases (developed by the National Cancer Institute in cooperation with the National Library of Medicine)
- Historical prints and photographs (accessible on videodisc) and examples from the Library’s historical and modern motion picture collections
- The National Learning Demonstration Center (housing various medical education software products and an array of microcomputer and communications equipment on which to run the software).

For further information, call 496-6308.
William T. Carrigan—Writer, Editor, Analyst—Ends Federal Career After 41 Years at NIH

William T. Carrigan, special project officer, Office of Program Planning and Evaluation (OPPE), OD, retired Dec. 31, 1985, after 41 years of Federal service with NIH.

Mr. Carrigan, an expert in science writing, editing, data analysis and information, began his NIH career in August 1944 with the Tuberculosis Control Division under the Bureau of State Services. He joined the National Cancer Institute in 1948 in the first established NIH Information Office.

In 1949, he was named editor of the NIH RECORD. In 1952, he was made the first information officer of the National Institute of Arthritis and Metabolic Diseases when the main NIH Information Office in Bldg. 1 was decentralized.

From 1956 to 1957 he was chief of the publications section directed by the Central Office of Information in the Division of Research Services. A staff of 10 was responsible for providing a "writing on demand" service—including all NIH publicity, information needs, movies and speeches for the public. During this time, Mr. Carrigan started the NIH Calendar of Events, the NIH Scientific Directory and Annual Bibliography, and NIH Progress Reports.

He then moved from the publications section in 1957 back to Bldg. 1 to the NIH Office of Information, later renamed the Office of Communications. He wrote speeches and articles for NIH Directors Dr. Rolla E. Dyer, Dr. William H. Sebrell, and Dr. James A. Shannon.

In 1961, he joined OPPE, where he was made chief of the Special Projects Branch. At this time, he created the NIH Data Book (formerly Basic Data Relating to NIH), which he continued to write, edit and publish for the next 20 years. The NIH Data Book was first started when Dr. Shannon asked Mr. Carrigan to have the NIH budget printed on a wallet-sized card. Mr. Carrigan was made special projects officer, OPPE, in 1979.

He also wrote and edited speeches for former NIH Directors Drs. Robert Q. Marston and Robert S. Stone. He edited speeches and articles and designed charts and slides for Drs. Donald S. Fredrickson, Acting Director Thomas E. Malone, and for current NIH Director, Dr. James B. Wyngaarden.

Mr. Carrigan assisted the executive secretary of several important interagency committees headed by the NIH Director, including those on recombinant DNA, radiation research, particularly pertaining to the Three-Mile Island nuclear power plant accident, and HEW re-source allocation. He was responsible for documenting the data and work generated by these committees.

Recently, he was coeditor of NIH: An Account of Research in Its Laboratories and Clinics, with Dr. DeWitt Stetten, Deputy Director for Science Emeritus and former Director, National Institute of General Medical Sciences. The 550-page book published in 1984 by Academic Press, contains contributions from 47 present and former scientists.

Dr. Stetten wrote an introduction to each chapter "which helps bridge the gap between layman and scientist," Mr. Carrigan said. "The book is unique; it is the first history of the NIH intramural program."

Mr. Carrigan also originated the OPPE Databank, a computerized file for analysis of BID funding which contains appropriations and obligations from 1950 to present. Seventy tables contain current year-end data accessible to all BIDs with terminals feeding into DCRT computers. "It provides constant-dollar and percentage tables and shows where the research money is going. This could end up being the nucleus of a fully automated system for NIH. It is functioning and readily available," Mr. Carrigan said. Dr. William E. Rhode, OPPE, is now in charge of the operation.

In the last year, Mr. Carrigan has been working on bibliometrics reports, which are an accounting of all citations of NIH publications found in journals, books, etc. These citations have been compiled into statistical tables and are being published for each BID by the OPPE Program Evaluation Branch.

In his immediate plans for his retirement, Mr. Carrigan will be spending a month in Florida visiting one of his two daughters, and then will begin working part-time for the Howard Hughes Medical Institute. In his time off, he hopes to visit France occasionally to practice his French. He will also pursue his hobbies—playing the recorder, and bridge.

"I'm proud of having spent my career at NIH," he said. "It's been a constant learning experience. For me, the contacts with scientists have been the most rewarding part."

Judo Applications Being Accepted

The NIH Judo Club is accepting applications for the winter beginner's class. This series of 10 classes in basic judo will be held on Tuesdays from 6 to 7:30 p.m. beginning Feb. 11. Classes will be held in the old gymnasium Stone Ridge School at the corner of Cedar Lane and Wisconsin Ave.

Dr. Thomas E. Malone, NIH Deputy Director, will serve as chief instructor, or sensi, for the classes. Dr. Malone, who holds the second degree black belt (nidan), has had extensive experience as a judo instructor.

The fee will be $35. Application forms can be obtained from Dr. Malone, Bldg. 1, Rm. 132, 496-2121, or from the R&W Activities Office, Bldg. 31A, Rm. 51W30, or any R&W Gift Shop.

For further information call Stephanie Harrison, 496-5311.

Biological Clock Studies Seek Male, Female Volunteers

Men and women are needed to participate as normal controls in studies of the biological clock and depression at the National Institutes of Health.

Males between the ages of 29 and 35 and females between the ages of 50 and 65 are needed. Volunteers must be free of medical illnesses and currently taking no medications, have no history of psychiatric treatment and no family history of psychiatric illness or alcoholism.

Required hospital stay is 4 days and subjects will be paid approximately $500 for their participation. For further information, call Sue Martin or Liz Ashburn at (301) 496-6982 Monday through Friday from 9 a.m. to 5 p.m.
Dr. Willy Burgdorfer, international authority on rickettsial diseases, retired Jan. 3 from NIAID's Rocky Mountain Laboratories (RML) in Hamilton, Mont. Dr. Burgdorfer has been granted the title of scientist emeritus and will continue his research at the laboratories.

For many years, Dr. Burgdorfer headed RML's Rickettsial Diseases Section and upon reorganization of RML in 1979 became head of the Arthropod-Borne Diseases Section in the Epidemiology Branch. He was acting chief of that branch from 1982–1985 when it became part of RML's Laboratory of Pathobiology.

Born and educated in Basel, Switzerland, Dr. Burgdorfer earned his Ph.D. degree in zoology and bacteriology at the University of Basel. Interested in tropical medicine, he received additional training in tropical parasitology and medical entomology at the Swiss Tropical Institute in Basel. He joined RML in 1951 and has worked there since, except for 1 year (1964) at the London School of Tropical Medicine and Hygiene on a John Simon Guggenheim fellowship.

During his career at RML, Dr. Burgdorfer gained worldwide recognition for his research concerning the interactions between arthropod-borne animal and human disease agents and their transmitting vectors (organisms), particularly ticks. His research contributions, published in more than 170 scientific papers and books, cover a wide range of investigations, including those on relapsing fever, tularemia, Colorado tick fever, California encephalitis, Rocky Mountain spotted fever and other rickettsial and viral diseases.

In 1974, Dr. Burgdorfer was awarded the DHEW Superior Service Award for his outstanding research on the epidemiology and control of rickettsial diseases, particularly Rocky Mountain spotted fever. His studies provided much of the fundamental knowledge about the biological relationships between rickettsiae and their tick vectors, and the means by which these organisms are maintained and distributed in nature.

A simple rapid test (hemolymph test) devised by Dr. Burgdorfer, has been applied extensively to determine whether persons bitten by ticks should be treated prophylactically for spotted fever. In addition, he also detected the cause of Lyme disease, a form of inflammatory arthritis. In recognition of his discovery, the causative agent was named Borrelia burgdorferi. For this discovery, Dr. Burgdorfer was awarded the Schaudinn-Hoffman Plaque by the German Society of Dermatologists.

From 1967 through 1972, he served as associate member on the Rickettsial Commission of the Armed Forces Epidemiological Board. Since 1979, he has directed the WHO-sponsored Reference Center for Rickettsiae and Rickettsial Diseases at RML.

Most recently, Dr. Burgdorfer was honored at the Second International Symposium on Lyme Disease and Related Disorders in Vienna, Austria. Scientists from North America and Europe met to share their findings on Lyme disease and to discuss joint research efforts leading to its prevention. There, friends and colleagues presented him with a book of testimonial letters to honor his long and distinguished career.

At a recent retirement party at RML, Dr. Burgdorfer’s friends and colleagues honored him for his 34 years at the laboratories and presented him with a number of gifts—among them a ball cap with gold braid bearing his new title, scientist emeritus. The governor of Montana, Ted Schwinden, sent a certificate of merit in recognition of his service, and Hamilton Mayor Jim Whitlock presented a congratulatory letter from the city honoring him for his unselfish community service.

When anyone asks Dr. Burgdorfer why he stayed so long at RML, he replies, "Can you think of a better place?"
Dr. Jonas Ellenberg Named NINCDS Branch Chief

Dr. Jonas H. Ellenberg has been appointed chief of the Biometry and Field Studies Branch in the Intramural Research Program of the National Institute of Neurological and Communicative Disorders and Stroke. Under his direction the branch staff will collaborate with intramural and extramural scientists in planning and analyzing laboratory and clinical studies in the neurological and communicative sciences.

Dr. Ellenberg will also develop a program to apply innovative statistical methods to neurological and communicative research problems. A mathematical statistician, Dr. Ellenberg's research interests include designing and analyzing large prospective observational studies and developing theoretical approaches to analyzing data. He has been especially interested in the etiology of cerebral palsy and convulsive disorders in children. His writings include 50 scientific articles and a book on febrile seizures.

Harold Edelhoch: 1922–1986

Dr. Harold Edelhoch, chief of the Protein Structure Section of the Clinical Endocrinology Branch, National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, died of cancer Jan. 15 at Sibley Memorial Hospital. He was 63.

Born in New York City, he earned a B.A. degree in chemistry from New York University in 1943, a M.A. degree in 1946 and Ph.D. in 1947, in physical chemistry from Princeton University. During World War II he served in the Army as a scientist assigned to the Manhattan Project, which developed the atomic bomb. He did postgraduate work at Harvard Medical School in Boston, Mass., and the Institute for Enzyme Research at the University of Wisconsin in Madison.

He came to NIADDK's Clinical Endocrinology Branch in 1957 from the School of Medicine, University of Kansas, where he was assistant professor of oncology and biochemistry for 5 years.

During his years at NIADDK, his research focused on the physical chemistry of thyroglobulin, which is the iodine-containing protein of the thyroid gland, and the study of polypeptide hormones. He was widely known for the methodology to analyze the content of tryptophan in proteins and the use of fluorescence methods to study transformation in protein structures.

His most recent contribution involved an understanding of the mechanisms by which clathrin, a protein that polymerizes to form large “basket-like” structures resembling a soccer ball, could bind to cellular membranes in the process of endocytosis (the uptake by a cell of material from the outside).

He received the Van Meter Prize of the American Thyroid Association in 1962 for the development of a procedure to determine simultaneously the concentrations of iodoamino acid residues (among which is the thyroid hormone, thyroxine) in thyroglobulin. Other honors include membership in Sigma Xi, Phi Lambda Upsilon and Phi Beta Kappa.

He was a member of the American Chemical Society, American Society of Biological Chemists and many other organizations. He coauthored more than 170 scientific articles and three review articles for books. He coauthored two books and made 14 contributions to books in the field of endocrinology and biochemistry.

He is survived by his wife, Ann Haendel Edelhoch, and two daughters, Marilyn Judy and Leslie J., by a previous marriage.
NIA Participates in Howard's Gerontology Meeting

Staff of the Gerontological Training Institute at Howard University recently held a program to prepare students, educators, and physicians to meet the needs of the growing minority elderly population.

The conference was planned in preparation for what Vivian Betton, NIA Equal Employment Opportunity officer, calls "the coming demographic explosion." Her statement refers to Census Bureau projections indicating that within the next 30 years the number of minority elderly in the United States are expected to increase by almost 50 percent, making this group the most rapidly growing segment of the older population.

Several NIA staff members participated in this first Regional Scientific Gerontological Education Symposium sponsored by Howard.

The symposium, coordinated with the NIA EEO office, included a full day of workshops on topics ranging from curriculum development to legal issues in gerontology to the needs of minority older people.

Over 100 participants representing community agencies, faculty and students of medicine, dentistry, pharmacology and the allied health professions benefited from this unique multidisciplinary program.

Dr. George Roth, chief of the Laboratory of Cellular and Molecular Biology at NIA's Gerontology Research Center in Baltimore, and NIA staff fellow Jacquelyn Henry presented results of their research on dopamine.

Dopamine is a central nervous system chemical needed for transmitting nerve impulses which control certain intellectual functions and motor (muscle) performance. Basic research on this and other neurotransmitters is important to understanding the disabling neurological disorders which increase with age and account for over half of all persons in nursing homes.

NIA Director Dr. T. Franklin Williams, the keynote speaker, described the challenges confronting aging research and clinical medicine, particularly the lack of knowledge about, or interest in, the special problems that accompany aging.

Dr. Williams stressed that there is a desperate need for more faculty leaders in all schools to train health professionals to meet the challenges of an aging population and to ensure that the needs of older people are considered in planning for health care services and long-term care.

He also stressed the importance for physicians and other health professionals to take into account the elderly's loss of functional capacities and changes in social status as well as identifiable medical problems.

These measures of well-being often complicate treatment and influence compliance by the older patient. For this reason, Dr. Williams strongly encouraged a team approach to geriatric assessment, utilizing the expertise of physicians, nurses, social workers, and others whose special contributions enhance the evaluation and treatment of the older patient.

Dr. Richard Sprott, NIA associate director for biomedical research and clinical medicine, outlined the Institute's priorities in the areas of basic and clinical research.

According to Dr. Sprott, funding priorities are largely determined by the financial impact of a disease or condition, as determined by the cost of treatment, loss of productivity due to disability, emotional burden upon the family and related morbidity.

He cited the need to reorient the medical establishment to "rehabilitate rather than cure."

He described the very competitive NIH peer review process on grant applications, stressing the importance of consultation with NIA staff prior to submission of grant applications.

"When the average priority score is 250, and the Institute can only fund scores of 185 or better, it is imperative to take advantage of any opportunity to improve the chances of a successful application," said Dr. Sprott.

Future programs are planned for 1986 at colleges with predominant minority enrollment to increase awareness of the need for aging research.

Dr. Merrill Read Retires; NICHD Nutritional Expert

After almost 26 years of service in the public sector, Dr. Merrill S. Read, an expert on nutrition in maternal and child health, is retiring from the Federal Government to become chairman and professor of the department of food, nutrition, and institution administration in the College of Human Ecology at the University of Maryland in College Park.

Dr. Read

During his 19-year tenure at NIH, Dr. Read has served in various nutrition research components involving the administration of extramural grants and contracts.

For the past 5 years he has been chief of the Endocrinology, Nutrition and Growth Branch in NICHD's Center for Research for Mothers and Child (CRMC).

Dr. Read came to NICHD in 1966—only a few years after the Institute was created—to implement programs in nutrition and development with special emphasis on learning and behavior.

He became chief of the Growth and Development Branch the following year. This branch grew rapidly along with NICHD and later was subdivided, with Dr. Read serving as chief of the biomedically oriented larger component, the Clinical Nutrition and Early Development Branch. From 1980-1981, he also served as acting director of CRMC.

Before coming to NIH, Dr. Read was vice president for research and education for the National Dairy Council in Chicago.

The author of numerous journal articles and other publications, Dr. Read earned his Ph.D. from Ohio State University in Columbus in 1956. He received the NIH Director's Award in 1976 for "exceptional leadership and accomplishment in the development of extramural programs for support of nutrition research."
Dr. Rolf Boch, Visiting Fellow in Nat’l. Eye Institute, Combines Art and Vision Research in Drawings

Combining art and vision research seems quite natural to Dr. Rolf Boch, a visiting fellow from Germany working in the Laboratory of Sensorimotor Research at NEI.

Dr. Boch combines the world of art and science simultaneously through his drawings, etchings, and photographs and his scientific research on the visual system of primates.

In his last exhibition held in Freiburg, Germany, June 1983, before coming to NIH, Dr. Boch displayed portraits of scientists who in the past researched different parts of the visual system in animals and humans. Among his chalk drawings are well-known names such as Leonardo da Vinci, Young, Hering, Kuhne, Mach, Helmholtz, Fechner, Ferrier, Kries and Holst.

Dr. Boch considers these scientists to be founders of the present science-in-vision research and that these portraits can be taken as an introduction into the complex variety of vision research.

These portraits parallel Dr. Boch’s primary profession in which he has researched higher brain functions such as the shift of visual attention as one important process which precedes visually guided goal-directed behavior.

It is not a coincidence that art and vision research converge in Dr. Boch. Because of his interest in higher visual brain functions, he also investigates the conditions, which, among others, are necessary for the visual arts.

His art works are mostly chalk, charcoal, and pencil drawings of still lives and landscapes. The landscape of the Tuscany region in Italy (around Florence) was his main theme during the last 3 years on which he held many exhibitions of photographs and drawings.

In fact, for 1986, a calendar of the Tuscany landscape with photographs by Dr. Boch, was published for sale in Germany, Switzerland, Austria and France.

Born in Freiburg, West Germany, Dr. Boch received his Ph.D. in biology from the Albert-Ludwigs-University in Freiburg in 1983 and before coming to NIH, conducted scientific research at the department of neurophysiology at the Albert-Ludwigs-University.—Anne Barber

Dr. Boch stands with some of his art work in the background.

2nd Annual Symposium Honors Dr. Wallace Rowe

The second annual Wallace P. Rowe Symposium on Animal Virology will be held Feb. 3 and 4 in the Lister Hill Auditorium on the NIH campus. The topic of this year’s symposium is “Viral Pathogenesis.”

Sponsored by the National Institute of Allergy and Infectious Diseases, the symposium honors the late Dr. Rowe, who was an internationally recognized authority on animal virology. Dr. Rowe was chief of the Laboratory of Viral Diseases at NIAID from 1968 until his death in 1983.

A feature of the symposium is the annual presentation of the Wallace P. Rowe Award for Excellence in Virologic Research to an outstanding young virologist.

Speakers on the first day of the symposium include Drs. Mary-Jane Gething, University of Texas; Peter M. Howley, NCI; Robert G. Webster, St. Jude’s Children’s Research Hospital; Gregory Prince, NIAID; James Strauss, California Institute of Technology; Michael Oldstone, Scripps Clinic and Research Foundation; Abner L. Notkins, NIDR; and D. Carleton Gajdusek, NINCDS.

Second day’s speakers include Drs. John Gerin, Georgetown University; Jesse Summers, Fox Chase Cancer Center; Herbert C. Morse, NIAID, Opendra Narayan, Johns Hopkins University; Vincent Racaniello, Colombia University; Bernard Fields, Harvard Medical School; and George Miller, Yale University.

Interested persons may call 496-3207 for information.

Hypothermia Hazardous For Elderly and III

Cold weather can be extremely dangerous, particularly for older people, according to the National Institute on Aging. Accidental hypothermia is an abnormal drop in body temperature which may occur after prolonged exposure to even mildly cold temperatures. It can be fatal if not detected promptly and treated properly.

If you suspect hypothermia, it is vital that the victim be given emergency first aid, preferably in a hospital setting.

“A Winter Hazard for Older People: Accidental Hypothermia,” is a newly revised brochure published by the National Institute on Aging. It details risk factors, symptoms, prevention, and treatment of this potentially fatal condition. It is available, free of charge, by sending a self addressed postcard to: Hypothermia, NIA Information Center, 2209 Distribution Circle, Silver Spring, MD 20910.
CC Nursing Director Announces Resignation

Rena Murtha, associate director for nursing at the Clinical Center for the past 4 years, recently announced her resignation.

"It's time to move—what I set out to do has been accomplished," she said. "I'm weighing a number of options right now. I want to sit on the beach by my house in Rhode Island (near Apponaug on Narragansett Bay) and make the selection—which is a very nice luxury to have."

Ms. Murtha

During her tenure as chief of the hospital's 715-member nursing staff, including more than 500 RNs, Ms. Murtha instituted a "clinical ladder," which allows the Nursing Department to recognize and reward nurses' clinical competence. "More than that, it keeps the nurse at the bedside rewarded and challenged," she said.

Ms. Murtha also set in place a program of participative management in her department. "All levels of staff here have involvement in decisionmaking," she noted.

Confident that she leaves the Nursing Department in good shape, the New York City native said she was pleased that nursing at the CC has a positive, professional national image.

Other achievements during her administration include development of an active, recognized nursing research program here and the "decentralization of the department to the service base level."

"Over the past 4 years, Ms. Murtha has played a principal role in the development of a strong and effective nursing staff," said Dr. John Decker, CC Director. "Her advocacy of excellence will be greatly missed."

Dr. Decker has appointed Janice Feldman acting chief of the nursing department while a search is conducted for Ms. Murtha's successor.

NCI Honors Employees at Awards Ceremony

At the annual NCI awards ceremony held recently, NCI Director Dr. Vincent T. DeVita Jr. presented awards to the following 16 NCI employees.

The Public Health Service Commendation Medal

Dr. Howard B. Dickler, senior investigator, Immunology Branch, Division of Cancer Biology and Diagnosis—for major contributions to understanding the role of cell surface receptors in regulating immune cell activation.

Dr. Charles H. Evans, chief, Tumor Biology Section, Laboratory of Biology, Division of Cancer Etiology—for isolating a lymphokine called leukokeregulin from normal leukocytes. This lymphokine is a new immunologic hormone that can affect transformation both in vitro (in lab) and in vivo (in body).

Dr. Mark A. Israel, chief, Molecular Genetics Section, Pediatric Branch, Division of Cancer Treatment—for the application of molecular biology to pediatric cancers.

The NIH Awards of Merit

Dr. Genrose D. Copley, program director for epidemiology, Extramural Programs Branch, Division of Cancer Etiology—in recognition of her exceptional leadership in the establishment, implementation and management of an extramural program in biochemical epidemiology.

Dr. David L. Joffes, chief, Contracts Review Branch, Division of Extramural Activities—for creative coordination of contract peer review with the project initiation and fiscal management components of NCI's procurement process.


Betty Morton, administrative officer, Office of the Director, Division of Cancer Biology and Diagnosis—for her exemplary effectiveness in accomplishing the administrative and managerial support functions of the Extramural Research Program.

Maxine I. Richardson, equal employment opportunity manager for NCI, Office of the Director—for her contributions to NCI EEO programs, particularly, for fostering programs to employ the handicapped.

The EEO Special Achievement Awards

Hernon Fox, a biologist in the Grants Review Branch, Division of Extramural Activities—for furthering equal employment opportunities within NCI, and for his success in encouraging the employees assigned to him to effectively use their skills.

Patricia Gallahan, program analyst, Office of the Director, Division of Cancer Treatment—for her dedication to the DCT Clerk-Typist Development Program, which recruits and trains minority individuals for clerical positions in DCT.

Dorothy Grant, program operations specialist, Cancer Control Science Program, Cancer Training Branch, Division of Cancer Prevention and Control—for her contributions as a member of the EEO Advisory Group.

Paula Hayes, personnel management specialist, Personnel Management Branch, Office of the Director—for her interest and commitment to carrying out the chartered elements of EEO Advisory Group membership.

Ethlyn Howard, a secretary in the Laboratory of Tumor Cell Biology, Division of Cancer Treatment—for her achievement in advancing EEO goals in a personal way by serving as a compassionate advocate/facilitator for one of NCI's disabled employees.

Roosevelt Ingram, program administrative officer, Laboratory of Pathophysiology, Division of Cancer Biology and Diagnosis—for his help in disseminating information about EEO Advisory Group activities to the NCI community and for furthering equal employment opportunity within NCI.

Thomas A. Wood, Jr., administrative supervisor, Cytopathology Section, Laboratory of Pathology, Division of Cancer Biology and Diagnosis—for his strong commitment to EEO and his managerial leadership in implementing EEO objectives.

The 40-Year Length of Service Certificate

George Howard, an animal caretaker in the Division of Cancer Etiology—for the completion of 40 years of government service and for the outstanding care he has skillfully provided to experimental animals.

Women Bioscientists To Meet

A meeting for all career women bioscientists will be held Feb. 6 at 4 p.m. in Bldg. 30, Rm. 117. Topics of discussion will include the enhancement of women's careers and the revitalization of the International Association of Women Bioscientists.

For further information, call Dr. Rose Johnstone, 496-6580.
Murline Craig Retires After 29 Years of Service

Murline Craig, a supervisory personnel assistant in the OD personnel Office with more than 29 years of Federal service, retired Dec. 31.

During her time at NIH, except for the first 6 months of service, Mrs. Craig has spent her 23 years, 3 months in the same organization—the OD Personnel Office.

She joined the Office of the Director/Office of Administrative Management Personnel Office as a clerk-typist and was promoted through the positions of personnel clerk and personnel assistant before assuming the duties of the supervisory personnel assistant in March 1972.

The OD Personnel Office provides all personnel management services to 2,200 employees in the Office of the Director, Office of Administrative Management and the Office of Research Services.

A long list of personnel assistants, personnel management specialists and personnel officers and individual employees have benefited from Mrs. Craig's in-depth knowledge of personnel regulations and practices, genuine interest and concern and desire to be of assistance.

Before coming to NIH, she had worked for the Civil Aeronautics Administration as a clerk-stenographer and secretary from May 1943 through January 1949, when she resigned to raise a family. Except for 7 months in 1956-57, when Mrs. Craig worked at NIH as a dictating machine transcriber, her full-time job from 1949 to 1962 was that of wife and mother.

Her husband Bruce also works at NIH as a planner-estimator (plumbing) in the Division of Engineering Services. The Craigs have two children, Betty and Bruce, and five grandchildren.

Since purchasing a home in Bethany Beach many years ago, Mrs. Craig has been spending more and more time at her home away from home, especially during the summer months when she entertains her grandchildren and friends.

During her retirement she plans to spend more time at her beach home pursuing her favorite pastimes of walking on the beach, playing cards, shopping, and keeping up with her grandchildren.

Audrey Barlock Dies; Was CC Nurse Specialist

Audrey L. Barlock, who retired in 1982 from the NCI Medicine Branch, died of a heart attack in Defuniak Springs, Fla. recently. She was 49.

Mrs. Barlock came to the Clinical Center in 1970 as a staff nurse and in 1975 transferred to the Medicine Branch as a clinical nurse specialist. She was one of a handful of nurses at the CC whose practice extended into delivery of chemotherapy.

Miss Piggy Attends Weigh-In

Miss Piggy (Joyce Pilcher, an administrative officer in NICHD) recently showed up for the official weigh-in for the NICHD-NCI “Battle of the Bulge” Competition. Here the star of stage, screen and books shares the spotlight with Dr. Sumner J. Yaffe (1), director of NICHD’s Center for Research for Mothers and Children, and Dr. Donald C. Iverson, associate director of NCI’s Cancer Control Sciences Program, Division of Cancer Prevention and Control. Prizes will be awarded to the winning team who achieves the greatest percentage of the difference between desirable weight and actual weight of team members. Miss Piggy said she came to encourage the employees to fight the battle of the bulge, but insisted that she had no plans to lose weight. “It would be detrimental to my glorious career, darling,” she snorted.

Expectant Parent Volunteers Sought

Expectant parents are needed for an NICHD study of the psychological aspects of becoming a parent. Wanted are families who are expecting their first child and have had no previous pregnancy, and families who have had a fetal loss (stillbirth) within 2 years of the present pregnancy.

The study involves two visits to NIH. Participants will be paid. For further information, call Dr. Susan Theut, 496-6832.
A team of scientists from the Wistar Institute in Philadelphia, National Cancer Institute in Bethesda, University of Lund in Sweden, and University of Miami (Fla.) has found that some multiple sclerosis (MS) patients may be infected with a new as yet unidentified virus related to the human T-cell lymphotropic virus (HTLV) family, one virus of which is implicated in the causation of AIDS.

The scientists found that white cells obtained from cerebrospinal fluid (CSF) of MS patients show biochemical and genetic characteristics similar to white cells infected with HTLV agents. Of special significance, the CSF cells from MS patients express genetic information related to the HTLV family.

**HTLV Cells, Antibodies Found**

This is the first time that cells from CSF of MS patients showed genetic information related to a specific viral agent. In addition, antibodies related to the HTLV family of retroviruses were found in the blood and CSF of patients with MS.

The scientists evaluated samples of blood and CSF from 52 MS patients, 17 patients with other neurologic diseases, and 104 healthy individuals for antibodies to virus from the HTLV family. Clinical material was obtained in Sweden, which traditionally has been a high-risk area for MS, and in Key West, Fla., which in the last 5 years has experienced an unexpectedly high level of this disease.

The results of this research were published in a recent issue of the scientific journal *Nature.*

**First Specific Virus**

Scientists have suggested previously that viral infection may play a role in MS, but evidence implicating any specific virus as a cause has been lacking. For example, antibodies in MS patients to viruses such as measles have been reported by others. However, these viruses appear to be ubiquitous agents since healthy individuals, patients with other neurologic diseases, and MS patients all have them.

The findings show that healthy individuals and the majority of patients with other neurologic diseases have no detectable reactivity to any HTLV. The present results do not prove that an HTLV is the cause of MS; however, based on the reported results, the participating scientists are attempting to isolate another virus of the HTLV family. If successful, these efforts will lead to further examination of the role of a new HTLV in multiple sclerosis.

"For now," the scientists say, "the data are suggestive but not conclusive." The results seem to indicate the exposure and immune response of some MS patients to a retrovirus crossreacting with but distinct from the three known types of human retrovirus.

HTLV-I is the causative agent of adult T-cell leukemia (ATL) and lymphoma. HTLV-II has been isolated from several adult patients with a less aggressive type of leukemia but has not yet been studied in sufficient detail to link it to any disease. HTLV-III is the cause of acquired immune deficiency syndrome (AIDS).

The scientists found significantly higher levels of antibodies to viruses from the HTLV family in the MS patients, compared to patients suffering from other neurologic diseases, close personal contacts of the MS patients, healthy hospital staff and normal blood donors.

In three of the Swedish cases, the scientists were able to trace the antibody levels for several months or years. In one case, they saw a rise in viral antibody in the patient's CSF that coincided with an acute attack of the disease.

**No AIDS Connection**

There is no implication from the data that antibody against HTLV is diagnostic for MS because only about 60 percent of MS patients had antibody at any given time in the course of the disease. There is also no indication of any connection between MS and AIDS.

Heading this research project were Drs. Hilary Koprowski of the Wistar Institute and Robert C. Gallo of NCI's Laboratory of Tumor Cell Biology. Scientists collaborating with them were Drs. Elaine C. DeFreitas, Wistar; Mary E. Harper, Marjorie Robert-Guroff, Carl W. Saxinger, Mark Feinberg, Flossie Wong-Staal, NCI; Magnhild Sandberg-Wollheim, University of Lund, Sweden, and William A. Sheremata, University of Miami.

**SENIOR AWARDS**

(Continued from Page 1)

Mortimer B. Lipsett
NIADDK
(posthumously)

Thomas E. Malone
OD

George R. Martin
NIDR

Malcolm A. Martin
NIAID

Gardner C. McMillan
NHLBI

Louis H. Miller
NIAID

Mortimer Mishkin
NIMH

Jay Moskowitz
NHLBI

Joseph D. Naughton
DCRT

Edward E. Nicholas, Jr.
OD

Marshall W. Nirenberg
NHLBI

Marie U. Nylen
NIDR

James F. O'Donnell
DKR

Joram P. Parizgorsky
NEI

Joseph E. Rall
OD

William F. Raub
OD

Henry G. Roscoe
NHLBI

Daniel G. Seigel
NEI

Lawrence E. Shulman
NIADDK

Maxine F. Singer
NHLBI

Kent A. Smith
OD

Louis Sokoloff
NLM

Earl R. Stadtman
NIMH

Walter S. Stolz
NIADDK

Robert Wurtz
NEI

Richard J. Wyatt
NIMH

**Children's Grief Topic At OMS-Sponsored Lecture**

Children, who experience the death of a parent or sibling, grieve in ways different from adults. Janice Krupnick, a licensed clinical social worker in private practice, will lecture on the subject Feb. 12 in Bldg. 31, Conf. Rm. 10 from noon to 1 p.m.

This lecture will address factors which influence the course of grief, and ways to intervene with grieving children. Questions regarding bereavement in adults will also be welcome.
KIDNEY STONES

(Continued from Page 1)

and is now being used in about 35 medical centers around the U.S.)

Dr. Finlayson outlined development of the device in Germany by Dornier System GmbH, an aviation company that learned about shock waves while dealing with the window-shattering sonic booms from supersonic aircraft. In 1974, Dornier engineers were approached with the idea of applying their knowledge of shock waves to pulverize kidney stones. They accepted the challenge and later developed ESWL in collaboration with Dr. Christian Chaussy and his colleagues at the department of urology and the Institute for Surgical Research at the University of Munich, West Germany.

“ESWL is an extremely powerful technique,” said Dr. Finlayson. “We can use it to treat stones anywhere in the urinary tract.” He said the procedure can be used to remove stones in nearly all patients. The only contraindications, he indicated, are pregnancy, renal artery aneurysm, presence of a pacemaker, problems with anesthesia, or anatomic obstruction below the stone.

On the quieter side of the revolution, scientists have been developing drugs to prevent recurrence of kidney stones. Dr. Jacob Lemann, a grantee of NIADDK at the Medical College of Wisconsin, described the composition of kidney stones, their relative frequency among patients, and current therapy for prevention of stone disease.

Dr. Lemann recounted advice commonly given to patients at clinics specializing in the treatment of stones. He cited studies showing that the following clinical advice may be effective in helping people who have had a kidney stone to prevent recurrences:

Drink more water; restrict dietary calcium; restrict dietary protein; avoid oxalate-rich foods such as broccoli, grapes, coffee, tea, cocoa, and numerous other foods and beverages.

Dr. Lehmann recommended these measures for most patients who had formed a stone, but minimized the value of other advice sometimes given in stone clinics, such as cutting down on vitamin C or foods containing sugar.

“Vitamin C is widely used, but patients with stones related to the use of large doses of vitamin C are rare,” he said. “Similarly, patients who eat large quantities of sweets or oxalate-rich foods are unusual.” Dr. Lemann said such patients should receive appropriate advice when they are identified, but that these restrictions often are unnecessary for other stone-formers.

Candidates for preventive drug therapies, said Dr. Lemann, are those patients who have experienced a complicated first stone, residual stones, or recurrent stones.

Thiazides are the most widely used drugs to prevent calcium stone formation. They are clearly effective in reducing urinary calcium excretion, said Dr. Lemann, but they may produce side effects, including diabetes, potassium depletion, and impotence.

Studies by American and Swedish investigators show that a large proportion of patients treated with thiazides remain stone-free, he said.

Dr. Lemann also discussed studies showing that inorganic phosphate supplements are effective in reducing intestinal calcium absorption, increasing excretion of salts, and reducing crystall formation. He cited a study by Dr. Lynwood H. Smith Jr. and his associates at the Mayo Medical School, Rochester, Minn., showing phosphorus supplements to be more than 90 percent effective in preventing new stone formation. Diarrhea is a major side effect of phosphate therapy, however, particularly when treatment is first begun, he indicated.

Dr. Lemann also reviewed studies by U.S. researchers showing that sodium cellulose phosphate (SCP) effectively limits intestinal absorption of dietary calcium in cases of “absorptive hypercalcitria,” a stone-forming disorder frequently associated with increased absorption of calcium from food. Swedish investigators, however, have found the response of patients to SCP no better that the response of control patients who were merely told to increase their fluid intake and practice dietary restrictions, he said. (SCP preventative therapy for stones was approved by the FDA in 1982.)

Dr. Lemann also went into the use of allopurinol, magnesium, and alkali therapies to prevent recurrent stones. He said allopurinol has been effective in uncontrolled trials with patients who excrete excessive amounts of uric acid. Magnesium has been found “possibly effective” in treating calcium stone disease in controlled and uncontrolled studies. Alkali, which cuts down urinary calcium excretion and increases urinary citrate excretion, has been found effective in uncontrolled studies, but controlled trials have not yet been reported, he said.

Dr. Fredric L. Coe, NIADDK grantee at the University of Chicago, also discussed prevention of stones, emphasizing that while the lithotripter is a powerful therapy, this does not make drug therapy in stone disease less important.

He presented data explaining the greater proneness of men to stone disease. Men as a group are four times more likely than women to produce stones. The biochemistry of normal women appears to provide some protection against stone formation.

Some women who form stones have “supersaturated urine,” said Dr. Coe. They excrete high levels of calcium in their urine, which also shows high levels of oxalate, uric acid, and low concentrations of citrate. Female stone-formers also tend to be comparatively large women, he said.

Dr. Coe emphasized the importance of measuring levels of urinary citrate in patients who form kidney stones. Citrate is a substance normally found in urine. Physicians should pay more attention to the problem of low urinary citrate (hypocitraturia), said Dr. Coe.

Hypocitraturia affects about 50 percent of all people requiring medical treatment for active stone disease. It is one of the conditions that can now be treated with potassium citrate, an “inhibitor” of stone formation that prevents crystallization of stone-forming calcium salts. Potassium citrate, approved by the FDA last year, was developed by NIADDK grantee Dr. Charles Y. C. Pak of the University of Texas Health Science Center in Dallas. When patients with recurrent stones composed of calcium oxalate or calcium phosphate are treated with potassium citrate, need for further surgery is virtually eliminated. Since the majority of stones formed by patients are composed of calcium, hundreds of thousands of patients might benefit from potassium citrate therapy.

Dr. Coe stressed that physicians should recognize that measuring citrate levels in urine is just as important as measuring a patient’s urinary calcium, and he called for more testing for hypocitraturia.
NIH Handicapped Employees Committee Elects Julie Haller and Carlton Coleman as 1986 Officers

Two NIH employees have been elected as 1986 officers of the NIH Handicapped Employees committee.

Julie Haller was elected to chair the NIH Handicapped Employees Committee (HEC) for FY 1986. Ms. Haller is a registered dental hygienist in the Patient Care and Clinical Investigation Branch of the Dental Clinic of NIDR.

Prior to being elected chairperson for the HEC, Ms. Haller was Vice-Chairperson of the committee, chaired the Employ the Handicapped planning committee for 2 years, and was featured in an exhibit of disabled employees.

At the same time, Carlton Coleman was elected vice-chairperson of HEC. He is a personnel management specialist and selective placement coordinator in the Clinical Center's Division of Personnel, Office of Management Support Systems.

In his 2 years on the HEC, Mr. Coleman has been chairperson of the training committee, served on the public relations committee, and contributed to the formulation of the NIH handicapped parking policy. Recently, Mr. Coleman was chosen as the NIH delegate for Inspire '85, a handicapped awareness program sponsored by First Lady Nancy Reagan.

Ms. Haller and Mr. Coleman want to familiarize the community of NIH employees with the HEC and invite interested persons to participate in its activities.

The committee, appointed by the NIH Director, is made up of representatives nominated by the director of each of NIH's BIDs. The committee has the following subcommittees: policy, public relations, accessibility, and training.

The HEC's primary function is to serve as a communication channel between disabled employees and NIH management. It works toward advancing equality of opportunity for disabled persons of all races and national origins, advising on such issues as facility accessibility, career development, awareness of capabilities, and reasonable accommodations.

One of the HEC's basic goals, identified by Ms. Haller and Mr. Coleman, is to present a positive image of the potential of disabled employees and work toward removal of barriers to their success.

Three specific projects for the upcoming year are to assist the newly-appointed Handicap Program Manager, Dr. Martha Bryan, with the development of an accessibility guide, implementation of NIH-wide awareness programs, and display of exhibits.

The committee holds monthly meetings on the fourth Thursday of each month at 2 p.m. in Bldg. 31A, Conf. Rm. 2. All NIH employees are invited to attend the meetings.

For further information, contact Dr. Bryan on 496-2906, Ms. Haller on 496-4371, or Mr. Coleman on 496-6895. □