Almost before it began, NIH's 17th annual Dr. Martin Luther King, Jr. commemorative program seemed destined to be emotional. Just before it ended, "Remember the Man . . . Remember the Dream" would leave its capacity crowd singing and cheering in the aisles.

"I know you will feel entirely different when you leave here than you felt when you arrived," predicted NIH Division of Equal Opportunity director Diane Armstrong, who marked her first King celebration as an NIH employee. "You will be spiritually uplifted."

If the enthusiastic response of the audience was an accurate indication, Armstrong's prophecy proved true.

In a keynote address interrupted often by rousing applause and laughter, Dr. Benjamin Hooks, executive director of the National Association for the Advancement of Colored People (NAACP), defined the current state of blacks in America and described the life and legacy of King.

"I wish you all could have known him," said Hooks, who was introduced by NIH acting director Dr. William Raub as a lawyer, minister, businessman and World War II veteran. "I tremble when I think of his kindness and brilliance. He was a great man—a humble, gentle, man of God . . . a living legend in his own time."

Hooks, who walked and worked with King, gave an eyewitness account of the Apr. 3, 1968, night on which King delivered his final speech to more than 2,000 listeners at a Memphis meeting hall.

"It was a dark, stormy night," recalled Hooks, telling the story with an emotion and intensity that quieted the 500-seat Masur Auditorium. "It was ominous. We could hear the rain hitting the tin roof overhead. We could see the zig-zag patterns of lightning streak through the stained glass windows. We could hear the thunder resound like a thousand hungry lions. And we were all wrapped up in the eloquence of Martin Luther King."

According to Hooks, one of the last things King said 22 years ago was that 'there are dark and difficult days ahead.'

"I wish there was some way I could tell him: You were surely right . . . we have had . . ."

Like many first-time authors, Montrella has learned how cold and cruel the publishing world can be. In the 2 years since she wrote the text as an adjunct to graduate nursing studies, she has gone from exhilaration to depression as various would-be publishers have taken interest in her work and then subsequently abandoned it. At the moment, Montrella is considering publishing the book herself.

In some respects, the book began when Montrella was a teenager growing up in Oreland, Pa., a small town about an hour north of Philadelphia.

"I had been a patient on and off for 5 years when I was a teenager," she related, "and I had terrible nursing care."

The awful care she received as an orthopedic patient undergoing body casts and rehabilitation prompted her, at age 18, to seek a career in nursing.

"I knew how much of a difference it made if someone nice and who was good at their job took care of you," she said.

Lorraine Lamar watches as her son Austin, an AIDS patient, gives President Bush a kiss during his recent visit to NIH. The president exchanged gifts and holiday greetings with both adult and pediatric AIDS patients here.

(AP/Wide World Photos)
some difficult times," Hooks said seriously. Then he continued, teasingly, "I can tell we are in difficult times right now by the amount you all have given to the NAACP."

Two groups of extremists are especially disturbing to Hooks—those who think that racism is dead and those who think that things now are as bad as they ever were.

"All of you who complain now ought to have been there when it was really rough," he declared, rewording a few familiar lines from British author Charles Dickens' A Tale of Two Cities. "These are the best of times; these are the worst of times."

Hooks, encouraging listeners to take note of how far blacks have progressed, mentioned "These are the best of times; these are the worst of times."

According to him, 61 percent of babies born to blacks in this country are born to single parent families and 20,000 black men between ages 18 and 34 were killed last year, most by other black men.

"It is not acceptable for us to practice genocidal behaviors if we want to be heard or seen, you've got to arm yourself with intelligence and prepare yourself to live in this world. We've got to arm ourselves with intelligence and knowledge. There is a power of God in us that can overcome if we give it a chance."

According to Hooks, Martin Luther King, who would have been 61 on Jan. 15, was arrested 39 times. The civil rights leader known for nonviolent protests was, on occasion, attacked in public while speaking, but was never known to raise a hand in defense of himself.

"I wish you all could have known him," Hooks repeated. "There are a few things I think he'd tell us today if he were here."

"The first is there is entirely too much envy and jealousy among us. There is room enough for everyone. Secondly, we cannot afford to become lazy and discontent."

Hooks mentioned that blacks must be about the business of building coalitions and reminded listeners of their responsibility to one another.

"Nothing that black folks want in this world can they get by themselves," he said. "Stop hating others. God has made some good people of every race. He's made some devils of every race, too."

"Remember that freedom is not free. The service we render is the rent we pay on the space we occupy on God's earth."

"And finally, I would be remiss if I didn't say something about the greatest institution God created—the black church," he continued, smiling. "I know where some of you meet God these days—on the golf course or the tennis court or bedside Baptists."

Hooks concluded, "I was gifted to know and privileged to walk with Martin Luther King and I can remember what he said on that stormy Memphis night. He said, 'I may not get there with you, but you're going to get there. Mine eyes have seen the glory.' "

The program also included several musical selections by the 12-member D.C. Youth Chorale Alumni Chorus. Following Hooks' address, the chorus was joined by the audience in singing "That's What Friends Are For."
Initiative To Reduce Frailty in Seniors Announced by NIA, NCNR

By Karen McCroyn Pociński

At a recent congressional briefing, Dr. T. Franklin Williams, director of the National Institute on Aging, and Dr. Ada Sue Hinshaw, director of the National Center for Nursing Research, announced a joint initiative to reduce frailty in older persons. The goals of this cooperative research effort are to improve the quality of life for older people and to reduce the need for long-term care in this country.

Although frailty is widespread among older Americans, it is not inevitable. The NIA/NCNR-supported studies will test a number of promising interventions to prevent frailty and to reduce the late-life disability and dependency it causes.

"The time is right for a health promotion program to reduce the need for long-term care for the growing number of older persons," stated Rep. Edward R. Roybal, chair of the house select committee on aging, at the opening of the briefing.

Problems of strength, mobility, balance and endurance can prevent an older person from performing daily activities most people take for granted such as bathing, dressing and preparing meals. Because of physical limitations, many older people need a cane or walker to provide support or maintain balance. Hundreds of thousands suffer serious injuries—such as hip fractures—due to falls. Among people 75 and older, 32 percent have difficulty climbing a flight of stairs; 40 percent can’t walk two blocks; and 22 percent can’t lift 10 pounds. Almost half of nursing home residents require assistance to get out of a chair or bed because they are so physically frail.

Five million older persons in this country need long-term care, and a large share of their care needs are related to physical frailty. However, new data indicate that frailty can be reduced. For example, one study has shown that exercise can markedly improve the limited walking ability of very frail nursing home residents. Another study showed that a falls prevention program in the home significantly reduced the number of falls in older people.

At the briefing, members of Congress and congressional aides heard Dr. Evan Hadley of NIA’s geriatrics branch discuss the importance of testing better ways to prevent frailty and its consequences. Dr. Janet Heinrich of NCNR’s extramural programs spoke about the need for better ways to assess frailty, to target individuals at risk and to measure the success of prevention programs.

Clinical trials supported by NIA and NCNR are scheduled to begin in April at research centers around the country. These studies will examine ways to prevent falls and fractures and will test exercises to improve strength and mobility in older persons. In addition, NIA/NCNR grantees will look at how nutritional, hormonal and other interventions improve functional capability.

Other research efforts will focus on assessment instruments used by researchers to measure disability, rehabilitation potential and functional improvement in response to therapy. These instruments can help health care providers develop individualized prevention strategies and appropriate supportive services. Such interventions can increase an older person’s independence and reduce long-term care needs.

Researchers have predicted that, by the year 2000, federal expenditures for long-term care will increase tenfold. The NIA/NCNR initiative may lessen the impact of this staggering forecast.

Hinshaw pointed to a growing national awareness of the need to understand health promotion in relation to older people.

"Health problems, especially chronic illness, frequently limit the functional independence of older people," noted Roybal. "The costs associated with chronic illness place a severe burden on patients, their families and on the economy."

According to Williams, "The goal of this joint research effort is to help improve the functioning and independence of frail older people and ease the personal burden of frailty." At the same time, research can enhance the quality of long-term care in this country and reduce the enormous cost of that care.

Smithsonian Offers Chaos Course

The Smithsonian Institution, in collaboration with the Washington Evolutionary Systems Society, is sponsoring an eight-session course on "Chaos," the new mathematical concept that may indicate the underlying order that determines seemingly random, natural behaviors. The 90-minute sessions, held Mondays at 8 p.m., through Mar. 19 (except Feb. 19), follow the Chaos movement from its scientific and philosophical roots to its various applications including "Chaotic Metamorphoses: A Fusion of Poetry, Dance, and Music," a lecture and live dance performance. Dr. Jerry L.R. Chandler, an NINDS biochemical geneticist and pharmacologist, will be the moderator. The course is $85 for Smithsonian members; $120 for nonmembers. For more information, contact Chandler, 496-1846.
Montrella chose a career in cancer nursing because, "I knew that cancer was worse than what I had as a kid." She came to NIH almost 5 years ago to work in the Pediatric Branch, and in 1987 began caring for children—both babies and adolescents—with AIDS.

"People were real nervous about (AIDS protocols) at first," she remembers. "I had qualms at the beginning, but I couldn't imagine not taking care of a sick child. I just decided to be real careful, wear gloves, and not do things fast."

When she met the young girl named Andrea (who has since died and to whom her book is dedicated), Montrella was studying to become a nurse practitioner and was enrolled in graduate school at the University of Maryland in Baltimore. One of her assignments was a paper on social support for children with cancer versus children with AIDS. That paper became a precursor to I Am Still Me.

"I wrote the book on a kid's level in diary form," she recalls. "I took the point of view of a 10-year-old girl who was afraid to let people know about her illness. Each entry in the diary was based on real issues."

Once she adopted a theme, Montrella wrote quickly, finishing the 16-page text in several weeks. Convinced that education is the key to getting people over their paranoia about AIDS, she composed with Andrea's story in the back of her mind.

The diary's last page is a poem that the girl writes about her predicament. Montrella says the verse came when she was driving back from graduate school at the University of Maryland and to a nearby home.

"I stopped in a McDonald's parking lot in Laurel, Md., to get my ideas on paper before I lost them," she remembers. "Thereau had Walden Pond as a setting for his writing and I had McDonald's."

Uncannily, Montrella's graduate studies seemed to dovetail with her book ambitions. In order to get her degree, she needed a thesis paper. She chose children's concepts of health and illness as a theme and polished up her book on Andrea as the vehicle.

"Every semester, something was going on at school that contributed to the book," she says. "I have to say the book took priority over grad school."

Montrella knew that AIDS education in schools would be the potential market for her book since the National Commission on the HIV Epidemic had indicated that it would be the states' responsibility to educate citizens about AIDS. Networking with, among others, the National Education Association, Montrella discovered that there was a need in communities for just the sort of book she was writing.

Inviting her best friend from high school, artist Christopher Dwyer, to illustrate her book, Montrella had, by the winter of 1988, a full-color mockup of I Am Still Me to pass around to publishers.

The first house to see it couldn't promise either full-color printing or national distribution, so it dropped the project in spite of favorable reviews by the "Reading Is Fundamental" program at the Smithsonian Institution.

"Our lawyer suggested taking it to the big publishers," Montrella said, "which became the most interesting process of my entire life."

The first major publisher to see it rejected it out of hand, claiming the issues, the story and the little girl were not real.

"It was a very humbling experience, but it motivated me more," said Montrella. "Rejection followed rejection and I felt really terrible."

Oddly enough, her first choice as publisher, Harcourt Brace Jovanovich Inc., liked the book at first, but asked for a curriculum guide for teachers to be written as a companion to it.

Consulting with Washington's Center for Population Options, which reviews curriculum guides as a matter of course, Montrella spent her winter break reading examples of such guides in preparation of writing her own.

"A bad case of writer's block prevented me from writing the guide, but then I found myself home with the flu. It was the best thing that ever happened to me because I wrote it then."

Harcourt Brace Jovanovich invited her to its Orlando headquarters to discuss the project once Montrella finished the guide.

"They really liked it and recommended it to their review board," she said.
I think I could write a book about the book."

Having just returned from a 3-month internship in Memphis, where she completed studies to become a nurse practitioner, Montrella was supposed to spend the next 6 months in the Philippines establishing a health care clinic.

"I had been planning for the past 2 years to go, but political unrest in the Philippines canceled it," she said. "This was going to be my year of adventure and travel. But it has worked out for the best that I couldn't go. I feel like the book is my baby, and I want to see it through."

At the moment there is little doubt that Am Still Me will be published. But if all else fails, Montrella says she's learned "two major lessons—patience and perseverance."

If her ability to make the best of adversity is any benefit to her patients, perhaps it's best that Montrella is still Montrella.

### Cystic Fibrosis Lectures Announced at Lipsett

A series of Wednesday afternoon lectures in Lipsett Amphitheater will probe recent developments and new trends in the study of cystic fibrosis (CF), the most common fatal genetic disease of children in the United States. With the recent discovery of the CF gene, interest in the lecture series is expected to run high.

The first two lectures on the molecular genetics of CF will be presented on Jan. 31 and Feb. 7 by Drs. John R. Riordan and Lai-Chee Tsui, two of the lead investigators from the Hospital for Sick Children in Toronto who identified the CF gene.

On Feb. 21, Dr. R. Michael Blaese of NCI will discuss gene therapy and its prospects for CF. The remaining 10 lectures will focus on more specific aspects of CF, which is characterized by chronic lung and digestive disease, and copious, thick mucus that must often be cleared from the lungs.

The lecture series, organized by visiting scientist Dr. Ioav Cabanchik in NIDDK's Laboratory of Cell Biology and Genetics, is sponsored by NIDDK and the Cystic Fibrosis Foundation. It is the fifth time in as many years that NIDDK and the CF Foundation have collaborated to present lectures on CF.

A complete listing of the lectures, which all begin at 3 p.m., follows.

Jan. 31—J.R. Riordan—Molecular properties of the CF gene
Feb. 7—L.C. Tsui—The molecular genetics of CF
Feb. 21—R.M. Blaese—Prospects for human gene therapy
Mar. 7—R.A. Frizzell—Modulation of chloride channels in secretory epithelia
Mar. 21—M.J. Welsh—Chloride channels in CF respiratory epithelium
Mar. 28—R.J. Crystal—Gene expression and modulation in pulmonary epithelium
Apr. 18—D.A. Ausiello—Regulation of ion channels: The role of G-proteins, phospholipids and cytoskeletal components
Apr. 25—P.S. Aronson—Taxonomy of anion transport systems in epithelia
May 9—Q. Al Awqati—Molecular properties of chloride channels
May 23—R.D. Camerini-Otero—Homologous recombination: From bacteria to man
June 6—S.L. Alper—Molecular cell biology of anion exchangers
June 20—R.C. Boucher—The relationship of CFTR to sodium transport in airway epithelia
June 27—A.R. Beaudet—Genetics of cystic fibrosis

### New Pub Trims NIH Wasteline

Wasteline, a new publication produced by the Environmental Protection Branch of the Division of Safety, will be introduced to the NIH community this month. The focus of Wasteline will be to provide a practical perspective on waste reduction and disposal issues for specific work areas and operations at NIH. Distribution of each issue will be tailored to work areas most affected by the specific topic covered in that issue. The first issue will address waste chemical disposal options for the lab, how to minimize chemical waste and the services available to make this job easier.

Waste paper reduction and recycling initiatives are currently prominent both locally and across the country. By targeting the distribution of Wasteline, DS hopes to reinforce the need to minimize the amount of general waste generated at NIH. It is our hope that employees will apply these practices in the workplace as well.

Wasteline is printed on recycled paper provided by NIH's Printing and Reproduction Branch (PRB). For advice about printing other jobs on recycled paper, call George Mendez, 496-6077, of PRB.

Employees are encouraged to suggest ideas for future issues of Wasteline by calling Gyula Kovach, 496-3537.
from all of the patients, not just the few who spoke up at first. It wasn't just a quick photo opportunity where he came in, shook hands then left. He asked appropriate questions and insisted on hearing from everybody. Even when his staff told him it was time to leave, he wanted to stay and listen to their problems.

"The men themselves were greatly moved by the obvious compassion of the president," he added. "The exchange was full of warmth."

Fauci, who has twice demurred from Bush's entreaties to become the next NIH director, spoke with the president about recent research advances against AIDS; also offering updates were NCI director Dr. Samuel Broder and Dr. Philip Pizzo, whose NCI Pediatric Branch cares for youngsters with AIDS.

The president publicly declared that Fauci was one of his modern-day heroes during the campaign that landed him in the White House. Fauci confirmed that Bush continues to tap him for opinions on federal biomedical research.

"On the occasions that we meet he always asks me, 'Do you have enough (budget)?' and I tell him that, relatively speaking, yes, we do get a very generous share. But a greater pool (of funds) is needed for all of biomedical research, not just AIDS. I told him that scientific opportunities outstrip available resources at the moment. It's not that the amount of money is not substantial, but when he asks if we could do more good things for people if we had more money, my answer is, 'Definitely.'"

Bush addressed a packed Masur Auditorium audience after his AIDS briefings.

"Two years ago in this very building, I met a person with AIDS who spoke of his prolonged suffering," said the president. "And I've just come from two more meetings—one with a patients' support group and the other a family support group. And both reminded me of the need for compassion and understanding."

He defined understanding as "educating Americans who don't want to help, don't want to become involved because of a misplaced fear. They're afraid of holding an AIDS patient because they're frightened of getting AIDS. Barbara and I want to say, and we hope we can continue to demonstrate this, they are wrong. They're simply uninformed."

The president said NIH employees embody "all year round" the compassion and understanding that characterize the Christmas season.

"Too often we forget the true message of this time of year—that justice and kindness can indeed foster goodwill toward all. You know that message," he concluded. "You live that message."

Photos courtesy of the White House

While President Bush's recent visit to children with AIDS and their families may have lifted the patients' spirits and encouraged their parents, the occasion may also have delivered an equally important and deeper message to AIDS researchers and caregivers.

"Originally, we had been told that the president would spend only about 10 minutes with us," said Dr. Philip Pizzo, chief of NCI's Pediatric Branch. "The fact that he actually stayed well more than 30 minutes symbolizes both his interest in and his commitment to this illness and the health of these patients."

President Bush met with Pizzo and a group of about nine families, which included children of a variety of ages—from toddler to teen—who have traveled from various locations around the country to be treated at NIH. All of the children are involved in protocols for AIDS.

Prior to meeting with the pediatric unit, Bush spoke with Dr. Samuel Broder, NCI director, and saw a presentation about NIH AIDS research and treatments.

"The president expressed his deep appreciation for the kind of work being done here," said Broder, who joined Bush's list of heroes that now includes three other NIH researchers—associate director for AIDS research Dr. Anthony Fauci, codiscoverer of the AIDS virus Dr. Robert Gallo and NICHD deputy director and surgeon general designate Dr. Antonia Novello. "He and his wife
Compassion Draw Praise

expressed a keen interest in our work here and the president seemed very pleased and upbeat.

"I think the objective of the visit, from the point of view of the president and Dr. (Louis) Sullivan and others who planned it," explained Pizzo, "was for the president to have some direct contact with the children and their families and, also, to gain a clearer understanding of the disease itself."

According to Pizzo, Bush's exchanges with the patients included questions about their experiences with AIDS and the different aspects of the illness.

"He asked some of them if they had experienced any discrimination in their hometowns because of their illness," Pizzo related. "In some cases the answer was yes and, in other cases, no."

Pizzo also gave Bush a brief overview of NIH's current work on treatments for pediatric AIDS.

"We've treated in excess of 130 children from more than 30 states," said Pizzo, summarizing his remarks to Bush. "The numbers are increasing quickly and they are going to increase significantly in the year ahead, but we have seen some improvements after our treatments—especially in the area of encephalopathy (a degenerative brain disease that affects pediatric AIDS patients)—and we have been able to improve the quality of life." —Carla Garnett

The President's Pocketknife

The formal part of the visit with the parents and children was over and the President and Mrs. Bush were shaking hands and saying goodbye. One of the older boys came up to the president and gave him a Christmas present. It was a cape for a "Spy Club."

The young man knew that Bush was once head of the CIA, and thought a spy cape was just the thing for an ex-CIA director. The president was surprised and delighted. He reached in his coat and presented his pocketknife to the boy. Then, like a good grandfather, he leaned down and said, "Now son, don't show this to the other kids, it's the only one I've got." The other young patients had been given boxes of candy, but only the Super Spy received a presidential pocketknife.

Later that evening, the White House called me at home. They said the president had called from Camp David and wanted the name, address and phone number of the young man who gave him the cape so he could get in touch with him. Fortunately I was able to reach Dr. Pizzo and get the information immediately. When I called the White House back, my contact there said, "You know this is very special, so many things are pressing on the president. That visit to NIH really touched him." —Tom Flavin
Hasselmeyer Retires After 29 Years with PHS

Assistant Surgeon General Eileen G. Hasselmeyer retired recently after more than 29 years of active duty with the Public Health Service Commissioned Corps, 26 years of which were spent with the National Institute of Child Health and Human Development.

During her last assignment, she was associate director for scientific review, NICHD, and special assistant to the director, National Center for Nursing Research.

Hasselmeyer, a 1946 graduate of the Bellevue School of Nursing, received a baccalaureate degree in education, a master of science degree in administration and the doctor of philosophy degree in nursing science from New York University.

Following a 10-year association with the NYU pediatric metabolic and nutritional research service, she joined the PHS Division of Nursing Resources in 1956 and was principal investigator for the Behavior Patterns of Premature Infants Project—the division’s first clinical research study of the relationship of nursing resources in 1956 and was principal investigator for the Behavior Patterns of Premature Infants Project—the division’s first clinical research study of the relationship between nursing care and patient welfare.

Challenging the nursing practice of minimal handling for prematurely born infants and using methodologies developed in the clinical research study, Hasselmeyer demonstrated in 1962 that increased sensory and kinesthetic input was beneficial to these babies as shown by weight gain, decreased crying and longer periods of continuous sleep.

When NICHD was established in 1963, she was appointed special assistant to the director (for prematurity) and served in various administrative, review and program positions, including the positions of director, Perinatal Biology and Infant Mortality Program, and chief, Pregnancy and Perinatology Branch. On detail from NICHD in 1968-69, she was appointed the Annie W. Goodrich professor of nursing at Yale University where she studied the cardiorespiratory responses of premature infants to gavage feeding.

Hasselmeyer was responsible for developing the sudden infant death syndrome research initiative in the Department of Health, Education, and Welfare for which she received the PHS Commendation Medal. Between 1977 and 1984, she was project officer for the NICHD cooperative epidemiologic study of sudden infant death syndrome (SIDS) risk factors. The study population included more than 800 babies who died suddenly and unexpectedly and more than 1,600 living babies. From this study, she developed a descriptive profile of SIDS risk factors.

When Hasselmeyer was appointed associate director for scientific review in 1979, she was given responsibility for establishing an NICHD review system for both grants and contracts that was independent from the institute’s program administration functions, in accordance with NIH policy. In 1981 she achieved the rank of rear admiral.

Hasselmeyer was awarded a National League for Nursing Commonwealth fellowship and an NIH special research fellowship, and has also been the recipient of research grants from the American Nurses Foundation, Sigma Theta Tau and the Connecticut state health department. In 1980 she received the NYU Health Professions Creative Leadership Award. In May 1989, Hasselmeyer received the PHS Meritorious Service Medal in recognition of her many achievements during a distinguished career, including her contributions to the establishment of the National Center for Nursing Research at NIH.

In recognition of her contributions to the advancement of research on the sudden infant death syndrome, the Sudden Infant Death Syndrome Alliance has established the Eileen G. Hasselmeyer Award to recognize individuals who have significantly advanced the knowledge and understanding of SIDS. The alliance is a federation of volunteer agencies that promotes and supports research on SIDS. The award includes a $5,000 prize and a medallion. The first award will be made this month.

In retirement, Hasselmeyer has volunteered to serve as executive director for the Uniformed Services University for the Health Sciences College of Nursing task force, which is carrying out a study to determine the feasibility of establishing a college of nursing offering both undergraduate and graduate programs at USUHS. She will continue to be involved in activities related to nursing and to the support of SIDS research, but she also plans to “take time to smell the roses” and enjoy her grandniece and grandnephew.

New Cut Sheet Duplex Printer

The NIH Computer Center, a component of the Division of Computer Research and Technology, offers single-sided and double-sided (duplex) printing on cut sheet paper using the new 3827 laser printer. Computer Center users have exercised this new printer’s capabilities for everything from single-page memos to reports of several thousand pages.

Double-sided output produced on the 3827 printer is both aesthetically pleasing and a “space saver.” For example, people in the grants community have noted that double-sided printing of summary sheets results in attractive reports that take up half the space of older listings. Even more compact archival listings can be produced with double-sided output in smaller 15-characters-per-inch character sets. The excellent print quality of the 3827 printer is a boon when printing graphic output, such as charts created via TELL-A-GRAPH or SAS/GRAPH.

Output produced on the 3827 laser printer is suitable for all types of manuscripts, reports and manuals. Printing can be requested in portrait (“tall”) or landscape (“wide”) format on 8½-by-11-inch paper, or in portrait format on 8½-by-11-inch three-hole-punched paper. It is worth noting that double-sided printing on the three-hole-punched paper is perfect for storage or distribution in three-ring binders. Printing on the 3827 costs the same as any other output printing services of the Computer Center.

To request 3827 printing via WYLBUR, simply specify a cut sheet form name in a LIST command; the cut sheet form names are 900P for portrait format, 900L for landscape format, and 999P for three-hole-punched portrait format. Add the option DUPLEX to the LIST command to request double-sided printing of the output. For more information about using the 3827 cut sheet printer, see the Computer Center Users Guide or call the PAL Unit consultants at 496-5525 between 8:30 a.m. and 1 p.m. Monday through Friday. For a consulting appointment regarding a specific computing task, such as how to upload a WordPerfect file to the mainframe for printing on the 3827 cut-sheet printer, contact the Computer Center Training Unit, 496-2339.

Atlantic City Trip, Mar. 16

Circle Mar. 16 on your calendar, because that’s the day you’ll be able to try your luck. R&W and Adventures Unlimited have put together a trip to the Castle Casino in Atlantic City. Cost for the trip is $25, but you get $17.50 of that back in coin! Bus will leave NIH Bldg. 31C parking lot at 7 a.m. and return to NIH at approximately 9 p.m. Call 496-4600 for more information.
Manuel Miranda Is Named NIA Assistant Director

Dr. Manuel R. Miranda has been named assistant director for interdisciplinary research at the National Institute on Aging. He will coordinate the institute's research efforts with other institutions and organizations, add to the emphasis on minority aging and training issues, assist in the coordination of the NIA's planning and legislative processes and advance international research opportunities.

Miranda formerly served as staff director for the U.S. House of Representatives select committee on aging, where for the past 2 years he coordinated legislative activities for 65 congressional members and 45 staff persons. He has been a faculty member of the University of California, Los Angeles, in the school of social welfare since 1978, and was on leave from that position to head the congressional committee.

From early 1984 through July of 1985, Miranda was a visiting scientist at NIMH, where he conducted an analysis of NIMH-funded research on Hispanic mental health.

He has also held teaching positions at the University of Minnesota; California State University, San Jose, and the University of Washington.

Miranda received his Ph.D. in psychology from the University of Washington, and his M.A. in psychology and B.A. in chemistry from California State University.

Said Miranda: "This position provides a real opportunity, following 2 years on the Hill, to pursue policy initiatives and develop resources that will improve the quality of life for special populations . . . with particular focus on older people."

Administrative Officer Patricia Greenfield Retires

Patricia L. Greenfield, administrative officer for the Division of Contracts and Grants, OD, retired recently after more than 35 years of service.

She joined NIH in January 1959, following a tenure of more than 4 years with the Department of the Army at Ft. Detrick in Frederick, Md. Through 1971, Greenfield worked in several positions in NIDDK. In 1971, she joined NIAID and served as committee management officer until 1973, when she became an administrative officer with NIMH. In 1979, Greenfield became administrative officer for the Division of Contracts and Grants.

During the past 10 years, she handled the numerous operational needs of one of the Office of Administration's most complex divisions. During her tenure, division responsibilities grew dramatically in scope and complexity, including significant increases in staff, the advent of the Federal Acquisition Regulations, the Competition in Contracting Act, and the addition of new NIH programs.

Greenfield was born in Brunswick, Md., and has strong ties to the area. Recently, she built a new home in Brunswick near family, friends and other "real estate holdings." In fact, a major pastime of this "Baroness of Brunswick" has been to renovate old houses. She also will spend time spoiling her grandchildren.

Recently, many of her fellow NIH'ers, family, and friends gathered to wish her the best in retirement. Greenfield gave the group a little insight into her plans by announcing she was "going to avoid I-270" but at the same time she was going to "travel throughout the United States and abroad"; she has a membership in a nationwide recreational vehicle resort community. She shared her cold weather plans by saying, "I'm going to be a snowbird and go south for the winter." On a serious note, she stated that "NIH and DCG have been like a family to me. I really care about the people I'm leaving."

In 1986, she received the NIH Merit Award. Her supervisor, Carl A. Fretts, director of the Division of Contracts and Grants, said, "Regardless of the urgency or complexity of the job, I knew I could always count on Pat to come through for us."
Nathan W. Shock Dies; Led Research on Aging

Dr. Nathan W. Shock, 82, the dean of American gerontologists and retired scientific director of the National Institute on Aging, died of cancer Nov. 12 at a hospital in Baltimore.

In 1941, Shock came to Baltimore and joined the first research program on aging in NIH. From 1941 to 1964, he directed a unit of the NIH physiology division. He then worked with the National Institute of Child Health and Human Development, directed the pioneering Gerontology Research Center and spent a year as scientific director at NIA before retiring in 1976.

The gerontology research program evolved from one run by Shock and a technical associate to an NIA intramural program with 200 scientists and researchers. Over the years, he also helped direct the postdoctoral training of more than 200 gerontology and geriatrics researchers.

Since 1976, he had held the title of scientist emeritus at NIA’s Gerontology Research Center in Baltimore. He remained active in scientific research until his death.

From 1959 to 1970, he also had served on the National Academy of Sciences’ atomic bomb casualty advisory board.

President of the Gerontological Society of America from 1960 to 1961, he also had been its publications committee chairman and editor-in-chief of the Journal of Gerontology. From 1969 to 1972, he was president of the International Association of Gerontology. He also had served as a division president of the American Psychological Association.

He was a recipient of high awards from the Gerontological Society, the American Geriatrics Society, the American Heart Association and the old Department of Health, Education and Welfare. In June, NIA renamed its intramural Gerontology Research Center in his honor.

Shock was editor of the Classified Bibliography of Gerontology and Geriatrics published by Stanford University Press in 1951, 1957 and 1963. He was the author or coauthor of more than 350 technical papers dealing with the chemistry, biology and psychology of aging.

Among the areas he and his colleagues explored was the physiology of aging in the heart, kidneys, lungs, nerve and brain. They clocked the different rates that different parts of the body age and documented the fact that people age at vastly different rates.

Over the years, Shock used science, common sense and not a little humor to educate scientists and the public on aging. While he told reporters that man’s longevity would continue to increase, he cautioned that he saw nothing dramatic on the horizon.

For example, men’s life expectancy between 1900 and 1975 increased from 47.9 years to 69.5. Yet the work of Shock and others pointed out that this seemingly dramatic increase was mainly due to the drop-off in childhood deaths. His studies pointed out that a man who reached 65 years in 1900 could expect to live 11.5 more years; one who reached that age in 1975 could expect to live an estimated 14 more years.

He was an effective advocate for spending and research in his branch of health science. While it is pointed out that gerontology may not have the drama or immediacy of other health questions, it is a field that will affect a huge percentage of the population.

Shock, who lived in Towson, was a native of Lafayette, Ind. He received a bachelor’s degree in chemical engineering from Purdue University in 1926 and a master’s degree in organic chemistry from there the following year. He received a doctorate in physiological psychology at the University of Chicago in 1930. He was affiliated with the University of California at Berkeley before moving to Baltimore.

His wife of 60 years, Margaret Truman Shock, died in April. His survivors include two sons, Joseph Baird Shock of Timonium and John Howard Shock of Alexandria; a sister, Beatrice S. Hargett of Hesperia, Calif.; seven grandchildren and two great-grandchildren — courtesy Washington Post

Save on R&W Membership

You can save on a 1990 R&W membership now through the end of January during the R&W membership drive. During this time memberships are discounted to $4 (beginning Feb. 1, they will be $5). In addition, all who join during the drive will receive a free gift and an R&W Membership Guide, and will be eligible to win a $200 gift certificate from Ober Travel. The drawing will be held Feb. 14.

ANALYZE Imaging Software at NIH

NIH collaborators are currently being sought to use ANALYZE, a powerful software package for the analysis of medical images. Mayo Clinic’s biodynamics research unit, developer of ANALYZE, working through DCRT’s Computer Systems Laboratory, is hoping NIH researchers will aid in the development of new applications. This UNIX-based software package takes sequences of CT, MRI, PET or other scanner images and combines them into a 3D image, which is then manipulated and measured. The easy-to-use, menu-driven software allows images to be rotated and enlarged and cross sections at arbitrary angles produced. Elements such as skin or bone can be enhanced or removed with ANALYZE, thereby revealing structures such as organs by selecting for or against defined image intensity levels. Many more manipulations and measurements are performed using the numerous tools in ANALYZE, which also performs analysis of 2-dimensional images. A "movie mode" allows users to flip through multiple images, like frames in a movie, producing an animated effect.

Researchers who would like a demonstration of ANALYZE should call Jim Sullivan, 496-5362. Further information on ANALYZE can be found in an article published in the June 1989 issue of Research Resources Reporter.

Talk on Human Rights in China

A lecture on “Human Rights in China: Perspectives and History,” will be held Feb. 15 from 12:30 to 1:30 p.m. in Masur Auditorium, Bldg. 10. Speaking will be Shengping Feng, executive director of the China solidarity committee, and Estrellita Jones, a student of Asian affairs for Amnesty International. The lecture is sponsored by the medical scientists committee; for more information call Genevieve Schifman, 496-1156.

NHLBI’s ‘Stanley’ Honored

NHLBI’s 1989/90 public service announcement, “Stanley” (stroke victim), has been awarded a “certificate for outstanding creativity” by the judging panel for the Mobius Broadcasting Awards, which are presented to outstanding PSAs and commercials from around the world. This year, winners were selected from 30 countries. Only 10 percent of the entries were awarded certificates of outstanding creativity. The Mobius awards are sponsored by the United States Festivals Association in cooperation with Creativity magazine.
**TRAINING TIPS**

The NIH Training Center of the Division of Personnel Management offers the following:

**Courses and Programs**

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**Office Operations Training 496-6211**

| Introduction to Working at NIH for New Support Staff | 2/5 |
| Delegated Acquisition                           | 3/12 |
| Telephone Techniques                             | 3/12 |
| Voice and Diction Improvement                     | 3/19 |

**Training and Development Services 496-6211**

Personal Computer training is available through User Resources Center (URC) self-study courses. There is no cost to NIH employees for these hands-on sessions.

The URC hours are:

- **Monday:** 8:30 a.m. — 7 p.m.
- **Tuesday, Wednesday, Thursday:** 8:30 a.m. — 7 p.m.
- **Friday:** 8:30 a.m. — 4:30 p.m.
- **Saturday:** 9 a.m. — 1 p.m.

**Training Center, DCRT, and other training information is available on WYLBUR. Logon to WYLBUR and type ENTER TRAINING**

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**Topping ‘Recollections’ on Sale**

Recollections, a new book written by former NIH associate director Dr. Norman Topping with Gordon Cohn, is now available from the University of Southern California Press.

Topping, who is perhaps best known for his rickettsial diseases research that included preparing an antiserum against Rocky Mountain spotted fever and leading the NIH effort during World War II to develop a vaccine against epidemic typhus, served as associate director of NIH from 1948 to 1952.

Copies of Recollections may be obtained for $18 each by writing to Topping Recollections, 1420 San Pablo Street, Rm. A302, Los Angeles, CA 90033-1042.

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**White House, Cathedral Tours**

We Washingtonians tend to take for granted all that our city has to offer. If you’re guilty of it, maybe R&W can help. We’ve arranged for tours of two attractions, both free of charge.

On Saturday, Feb. 3, 50 NIH’ers can tour the White House. The group will meet at the Visitors Entrance on East Executive Ave. at 8 a.m. (Tour takes approximately 30 minutes.)

And on Saturday, Mar. 17, we’ll tour the sixth largest cathedral in the world, the Washington Cathedral. This tour will begin at 10 a.m. at the Northwest Cloister entrance of the Cathedral (off North Rd.) and will last approximately 30 minutes.

Reservations for both tours will be taken on a first-come, first-served basis at the R&W Activities Desk, Bldg. 31, 496-6400.

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**Parade Marshals Needed**

Plans are well under way for the annual Bethesda-Chevy Chase Parade on Sunday, May 6. The parade begins at NIH. Parking lot 16, near the Library of Medicine, will be used as the staging area.

Parade organizers are looking for a group of 10 to 20 volunteers to work at the staging area on the day of the parade. Volunteers should have a take-charge personality and a good sense of humor. Responsibilities include checking in parade units, giving last minute instructions, lining up the units in parade order and starting the parade. It is a hectic, chaotic, but fun job!

Volunteers will need to attend one planning meeting and be available on the day of the parade from 9 a.m. to 5 p.m. If you (or your group) is interested, please contact Randy Schools, 496-6061.

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**Nick Carter Dies, Former NIEHS Scientific Director**

Dr. Charles E. (Nick) Carter, who served as scientific director of NIEHS from 1979 to 1985, died Oct. 31 at his home in Water­ville, Vt. During his long career in science, Carter did extensive research in biochemistry, pharmacology and in areas of nucleic acids and chemotherapy.

As scientific director Carter was senior science administrator for intramural research at NIEHS. He held this important post during a period of rapid institute growth, and was responsible for consolidating and streamlining laboratory organization.

Before joining NIEHS, Carter had government service with the National Cancer Institute, the Atomic Energy Commission and the Department of Energy, as well as Oak Ridge National Laboratory. He also served academic appointments at Yale University.

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NIH Searches for Director of New Office of Education

For several years, NIH’s intramural program, in common with many other research institutions, has seen a decline in the number of young Americans preparing for careers in biomedical research. The reasons for this decline are complex, but they are evident at a time in the history of biomedical research when the scientific needs and opportunities have never been greater. There has been an especially significant decrease in the numbers of physicians who plan to embark on research careers, but there is a decline in the numbers of Ph.D.’s as well.

NIH is creating a new Office of Education as one part of a strategy to reverse these trends. The office will provide a focal point for NIH recruitment efforts—maximizing effectiveness in attracting outstanding biomedical research trainees across institute lines. The office will organize broad, intensive and innovative recruiting efforts; it will help candidates identify all possible opportunities at NIH and guide them through the process of selection. There will be a high level of personal contact with applicants as the office assists them in navigating the complexity of the campus and the intramural training opportunities. The office will interact with young people at all levels—from high school through graduate and professional schools. It will coordinate its efforts with the individual BID programs to assure that potential candidates are aware of the many opportunities at NIH.

The office will conduct surveys and analyses vital to effective targeting of recruitment activities and will explore various ways to improve postgraduate training and education opportunities. Trainees will be assisted in identifying future job opportunities.

A search is now under way for the director of this office. Candidates must hold a doctoral degree and be very familiar with the intramural programs—laboratory as well as clinical. An interest in recruitment and education is essential. However, no prior experience in these areas is required. The office will be a part of the Office of the Deputy Director for Intramural Research. It will coordinate its activities with the NIH education committee, and with specialized BID recruitment and training programs.

Further information about this new position may be obtained from Susanne Stoiber (496-9428), who is aiding Dr. J. Edward Rall, NIH deputy director for intramural research, in organizing the office. A copy of the vacancy announcement may be obtained from Paul Thibault of OD personnel (496-6521). Applications should be submitted by Feb. 5.

Stipends Available Through FAES

FAES is administering special funds known as Wellcome Stipends to augment the stipends of postdoctoral level guest workers at NIH. Depending on the total funds that are available and the number of eligible applicants, a maximum of $3,600/year ($300/month) may be granted to each approved individual as an income supplement to a maximum total family income of $15,000/year plus $1,000 for each dependent including spouse.

The selection committee will consider the scientific merit of the research to be conducted as well as need and professional qualifications of the applicant.

Awards will be made twice a year, Mar. 31 and Sept. 30, for the 12-month periods beginning Apr. 1 and Oct. 1, respectively. Applications for 1990 must be received in the FAES office on or before Feb. 23 for the March awards or on or before Aug. 24 for the September awards. Applications are being accepted now for the awards to be made on Mar. 31.

Additional application forms are available from the FAES Business Office, Bldg. 10, Rm. B1C18 or by calling 496-7976.

NIH Day Care Surveys Due

The NIH day care surveys were distributed to employees in early January. Due to several reports of sporadic delivery, employees who did not receive a survey should call the Division of Space Management, 496-3172. All employees are encouraged to complete the survey. If you do not currently have child care or elder care needs, simply respond to the first two questions on the survey. All surveys are to be received by space management before Jan. 30.

Data analysis should be complete in March. At that time open forums will be scheduled and publicized for various locations to review those findings with interested employees.

The concern for day care at NIH extends beyond the campus boundaries. Thanks to the efforts of a Westwood day care committee, responses to the Westwood edition of the NIH day care survey are being collected. Some of the preliminary comments address the basic issues of high quality and affordable child care, elder care, as well as facilities for children with special needs.

The overwhelming position of those who wrote comments has been in favor of a day care facility at Westwood. An example of those endorsements is as follows:

"Day care should be a necessity for the NIH staff. Most important it should be quality care at an affordable rate or subsidized on a sliding scale and should include facilities for infants and toddlers."

Attracting and retaining quality employees is a government-wide problem. The issue was voiced by both supervisors and employees as evidenced below:

"Affordable, quality day care on the job-site will help retain quality employees at the NIH."

"As a supervisor, I believe the only way to assure that we can attract good employees is to provide day care."

"I am planning a family in the next year. Whether I can find adequate day care will make the difference about whether I stay at NIH or not."

Finally, child care’s true value was adeptly stated in the following response:

"If day care was provided at all of the NIH sites, I feel that time and attendance would improve immensely. Peace of mind is worth a pot of gold and these parents will have peace of mind knowing their little ones are secure close by."

The response from NIH employees at Westwood has been better than expected. It is hoped that similar results will be realized when the remainder of NIH employees complete the survey. —Donald L. Bordine