Healy Launches NIH Bionutrition Initiative

By Carla Garnett

Garlic reduces cancer risk, red wine prevents heart disease, and bananas facilitate graceful aging. True or false? And, if true, to what extent? Unfortunately, probably nobody knows the complete answers for sure. But that is about to change.

Noting that these days “everyone seems to be searching for a panacea on a plate,” NIH director Dr. Bernadine Healy recently launched the agency’s bionutrition initiative, a multifaceted, multi-institute application of basic science and new technologies to nutrition research questions that have proliferated in the last decade.

“What is really different about this initiative,” Healy said, addressing the Ad Hoc Bionutrition Group at its May 12 meeting here, “is that we are looking at nutrition in an overarching way.”

The word bionutrition, she explained, was recently coined “to add new flavor to an old science.”

Gathering more than a dozen of the country’s top nutrition researchers and more than 100 other conferees from nutrition-related fields in medicine and academia, the group’s first meeting highlighted the need for a concerted exploration of bionutrition.

Dr. Darla Danford, director of NIH’s Division of Nutrition Research Coordination and chair of the ad hoc group, said NIH spent $311 million in fiscal year 1991, or 4 percent of its budget that year, on research of the human diet and its impact on health and disease. This initiative shows NIH’s reinforced commitment to the study of nutrition, she added.

“This is our effort to take the newest sci-
(See BIONUTRITION, Page 2)

NIH Salutes Support Staff

By Carla Garnett

It was a day to lift your “right hand,” and acknowledge that you couldn’t get along without it. Who better to applaud secretaries, administrative assistants, clerks, typists and all other office backbones than a few former right hands, who did just that during NIH’s recent program, “Above and Beyond Tradition: Support Staff of the ‘90’s.”

Sponsored by NIH’s Office of Equal Opportunity and the advisory committee for women, the program was “designed to highlight the dedication, perseverance and many accomplishments that support staff have made to the mission of NIH,” said Lucretia Coffer, manager of NIH’s Federal Women’s Program and program presiding officer.

A former secretary, Coffer related an adage that drew nods and laughter from the audience: “Managers and supervisors can take a day off, and the work and office will continue to run smoothly,” she said. “Conversely, when a secretary or support staffer is away from his or her office, some of the functions come to a complete stop. Support staff, you are indeed greatly missed when you are away.”

Coffer then opened the podium to managers in the audience; several took the opportunity to recognize their support personnel publicly.

“I have walked in your shoes,” said Diane Armstrong, OEO director, who said she also
(See SUPPORT STAFF, Page 6)

Panel Plans Future of NIDR Intramural Research

By Jody Dove

T he blue ribbon panel on envisioning the future of NIDR’s intramural research program has issued its report of recommendations on shaping the future of the program.

The report makes numerous recommendations about how the program can build on existing strengths to meet future oral health needs. The panel stressed that the intramural research program should increase its clinical focus, take the lead in establishing a bone research clinic at NIH, strengthen training of young researchers, and expand collaborative activities with academia and industry. The report has been submitted to the National Advisory Dental Research Council (NADRC) and will be discussed at its June 15 meeting.
enches—molecular genetics and molecular biology—and apply them to nutrition problems [and] answer some of the same old questions we’ve been unable to answer because we didn’t have the technology,” explained Danford.

“We’ll even be able to answer some new questions, as our knowledge increases...We will have the technology,” explained Danford.

Described in detail in NIH’s recently released Strategic Plan, the bionutrition initiative has four main goals: to strengthen the science base of what is known about human nutrition; to learn more about prevention, intervention and cure of nutrition-related aspects of such disorders as cancer, heart disease, diabetes and AIDS; to use the newly fortified science base to determine dietary guidelines for optimal health; and to establish an NIH Bionutrition Advisory Council, which will be the focal point for training, research, and institutional collaborations under NIH’s bionutrition initiative.

In opening remarks, Healy chronicled one of NIH’s first clinical studies taying a nutrient-poor diet to disease. Dr. Joseph Goldberger, she said, was the first to recognize and prove pellagra was a nutritional disease, leading to the discovery of niacin as an essential nutrient that prevented the fatal disorder.

**Summer Seminar Series Planned, Noon Lectures in Masur**

Students and teachers conducting research at NIH this summer will once again have the opportunity to hear leading NIH researchers share the results of their work. The Summer Seminar Series, developed by the Office of Education, provides an overview of biomedical research to complement the focused work of the students and teachers in their host laboratory. All lectures begin at noon in Masur Auditorium, Bldg. 10.

**June 15** “In Vivo Gene Therapy: The Gene as the Drug,” by Dr. Ronald Crystal, former chief of NHLBI’s Pulmonary Branch and now professor of medicine, Cornell University Medical College.

**June 22** “The Genetic Basis of Embryonic Development in Vertebrates,” by Dr. Kathleen Mahon, head, unit on developmental gene regulation, Laboratory of Mammalian Genes and Development, NICHD.

**June 29** “New Psychiatric Disorders of Childhood: From SAD to Sydenham’s,” by Dr. Susan Swedo, Child Psychiatry Branch and acting deputy scientific director, NIMH.

**July 6** “AIDS: An Update,” by NIAID director Dr. Anthony Fauci.

**July 13** “The Human Genome Project,” by NCHGR director Dr. Francis Collins.

**July 20** “Diseases of Hemoglobin: Paradigm for Molecular Genetic Approaches to Therapy,” by Dr. Griffin Rodgers, chief, molecular hematology unit, Laboratory of Chemical Biology, NIDDK.

“Very simply,” Healy said, “he put science to work to solve a public health problem and showed the importance of nutrients to health.”

In recent times, however, she noted, the public appears to be adrift, frantically searching for a “perfect” food—from oat bran to red wine to tofu to bottled water—that will prevent or cure disease.

“I think it’s time we weaned the public off of food fads,” Healy said, “and gave them more solid—based in hard science—nutritional information to prevent disease and promote good health.” Two-thirds of all deaths, she continued, are related to lifestyle choices, including “what we put in our mouths...For years, nutrition research has been isolated from mainstream science—overlooked, underfed and malnourished. The field of nutrition needs an infusion of modern science. It needs to be seen as an attractive field, a higher priority at NIH.”

Dr. Scott Grundy, director of the Center for Human Nutrition at the University of Texas Southwestern Medical Center and a member of the ad hoc group, applauded NIH’s decision to rank nutrition research more highly.

“The term bionutrition signifies that nutrition cannot be separated from the study of biology and the way the body works,” he said. “Thank you, Dr. Healy, for bringing nutrition into the mainstream of the NIH mission.”

The Children’s Inn at NIH has received a gift of $50,000 from the Yamanouchi USA Foundation established by Yamanouchi Pharmaceutical Co., Ltd., of Japan. Merck & Co. Inc. will match this contribution through a gift from the Merck Company Foundation; these gifts commemorate the two companies’ longstanding business relationship. Merck made a gift of $3.7 million in 1989 to the inn’s operating expenses. Since 1990, the inn has served more than 1,400 families who have come from all 50 states and 24 foreign countries.

Friend To Lecture, June 16

A talk on “Clinical Importance of Cancer Risks from Germline Tumor Suppressor Gene Mutations,” will be given by Dr. Stephen Friend of Harvard on June 16 at 8:30 a.m. in Lipsitt Amphitheater, Bldg. 10.
Menopause Workshop Spurs Debate, Creates Research Agenda
By Caroline McNeil and Marianne Glass Duffy

When people think about menopause, hot flashes spring to mind. But what else is happening? Around the age of menopause, weight may be on the rise and atherosclerosis could be worsening. Are these part of menopause, too, or signs of other midlife changes?

Scientists don’t know, but finding the answer is a top priority, according to experts gathered at the NIH Workshop on Menopause, held here recently.

Disentangling changes due to menopause from changes due to other aging processes emerged as a major theme. By separating the processes, researchers hope to learn how midlife changes on many levels—biological, psychosocial, cultural—interact with the effects of menopause.

Researchers noted the almost complete lack of data about menopause in specific racial, ethnic, age, and socioeconomic groups.

Participants also called repeatedly for more research on managing the health problems sometimes associated with menopause. Unanswered questions about hormone therapy (HT) and other nondrug approaches dominated many sessions.

**Biology of Menopause**

What happens biologically to bring about menopause? Some events—loss of ovarian follicles and dramatic decrease in estrogens and other hormones—are well known.

But we urgently need to know why this happens, noted Dr. Roger Gosden of University Medical School, Edinburgh, Scotland. "The answers may indicate whether it is possible, at least in principle, to retard the rate of ovarian aging by hormonal manipulations," he said.

Intriguing to many researchers is the possibility that changes in the brain may be involved in the process of menopause. "Increasing evidence suggests that neural and neuroendocrine changes play important causative roles in the decline of regular reproductive cycles leading to the menopause," said Dr. Phyllis Wise of the University of Maryland in Baltimore.

**Psychosocial and Behavioral Factors**

Culture and lifestyle may affect menopause. In Japan, women report hot flashes and other menopausal signs far less frequently than in Western countries, according to Margaret Lock of McGill University in Montreal. How much of this difference is due to genetics and how much to culture or lifestyle? The Japanese diet may include more phytoestrogens (weak estrogenic compounds found in plants) than Western diets, through foods like soy beans, milk, vegetables, and ginger tea.

In some Western cultures, people "are still dealing with many of the 'isms' that constrain women's lives—sexism, ageism," said Dr. Nancy Woods, workshop cochair from the University of Washington. She added that studies of cultures that honor older women have shown that "women making a change to an elevated and respected status have much less difficulty with their menopausal transition."

One societal attitude that needs changing, according to many participants, is the view that menopause is a medical event rather than a normal life transition. They argued that the tendency to medicalize menopause encourages "therapies" that may be unneeded and promotes negative stereotypes of menopause and postmenopausal women. But other participants noted that the menopausal transition, normal though it is, could serve as an opportunity to focus on health—a perfect time to alert women to a wide range of disease prevention strategies for middle age.

**Long-Term Effects**

In any case, participants agreed, there is still much to learn about the clinical consequences of menopause. For example, research on body composition shows that, as women age, the body’s percentage of fat grows, even if weight remains the same. What is the impact of menopause on this shift in body composition? How does it affect women’s health? Can it—or should it—be prevented?

In fact, a large proportion of bone loss in the spine occurs within 6 to 7 years after menopause, reported Dr. Chris Gallagher of Creighton University in Omaha. Many studies have shown that women on HT have a lower rate of bone loss, but researchers still have a limited understanding of the basic mechanisms underlying this condition. Also, the existing data on bone loss in African-American women is contradictory and unclear.

Overall, the workshop recommended that researchers carefully examine the entire milieu of hormones and their bioavailability. Nevertheless, one hormone—estrogen—turned up again and again as the focus of intense interest and numerous unanswered questions.

**A Woman’s Dilemma**

First prescribed by doctors in the 1950’s to alleviate the discomfort of menopause, estrogen is now used not only for symptom control and to enhance well-being, but also to reduce the risk of osteoporosis. So why do many women leave their estrogen prescriptions unfilled?

One of the reasons is information—or lack of it. There are still many unanswered questions about the hormone therapy.

"A woman’s dilemma," said Woods, "is that she must make decisions about hormone therapy under conditions of uncertainty. Women want to know what the risk of using it is compared with the risk of not using it."

With few definite answers, the decision-making process itself has become an important issue. How do women weigh the pros and cons of various approaches to menopause? What other factors—economic, social, and personal— influence their decisions?

The key to more and better information is research—long-term studies on large populations of women who have been on HT for years. These studies must include diverse groups of women, said participants. African-American women, for instance, have not been included in past studies, according to Dr. Toni Miles of the University of Illinois at Chicago, and therefore, little is known about how they are affected by natural menopause.

Some women regard HT in any form as problematic. Participants noted that there are women who object to taking medication for the rest of their lives. Other women, such as those at risk for breast cancer, are often advised not to use HT. But there are other options.

Many women are trying alternative therapies and urgently need more information about them, said Dr. Fredi Kronenberg of Columbia University.

These approaches include, in addition to increased exercise, behavioral techniques such as stress management and use of herbs.

As the workshop drew to a close, it was clear that the future research agenda for menopause would be wide-ranging. Summing up at the final session, Woods said, "Women are facing a great deal of uncertainty and a lack of information about menopause" and are desperately in need of knowledge about molecular mechanisms, body systems, socioeconomic factors.

"So what is the good news?" asked workshop cochair Dr. Wulf Utian of Case Western Reserve University. "First and foremost the very nature of the meeting is cause for celebration. Women’s midlife health and issues regarding menopause are at last receiving the national attention they deserve."
example, nuclear magnetic resonance spectroscopy, crystallography, and image processing. Future issues of the NIH Record will present the new components in greater detail.

The Customer Services Branch reflects, says Chief Dale Spangenberg, “a renewed commitment of DCRT: ’We’re going to try to focus more on our customers.’ This brand-new component is charged with providing, in Spangenberg’s words, “better service for the NIH community.” Included in this promise will be a central point of contact—a single phone number to help NIH’ers navigate DCRT’s varied services—and training to address common needs for information.

The Network Systems Branch (NSB) was formed by consolidating the talents of networking specialists formerly scattered throughout three DCRT components. “We’ve all grown with networking, understand NIH’s highly evolved connectivity requirements, and are familiar with the latest networking technologies,” says Harold Ostrow, branch chief. NSB’s consolidated mix of talents will help the branch provide the hardware and software infrastructure to allow NIH’s many different computer systems to share information with each other and with national and international networks.

“The big difference between the Computing Facilities Branch and the old Computer Center Branch,” emphasizes Perry Plexico, acting chief, “is scope of operations. We’ll continue to manage and maintain the traditional computer center resources like the IBM and Convex mainframes, but will also be on the other centrally owned division resources, like the Advanced Laboratory Workstation project and the Intel massively parallel supercomputer.” Plexico foresees new strategic directions for the branch, adding that “our biggest challenge will be to combine the sometimes disparate resources we offer to the community into a cohesive whole.”

Evolving technologies caused the Personal Computer Branch to change its focus—and its name—to distributed systems. “Distributed computing requires a new model,” notes David Songco, chief of the Distributed Systems Branch, which will provide specialized support for user-owned personal computers, workstations, local-area networks, and the associated automation technology. The new Customer Service Branch will provide most of the basic support, Songco explains. “This means that we’re going to help customers with larger and more complex problems; we haven’t been able to do much of that in the past.”

Formerly called the Data Management Branch, the Information Systems Branch, explains Marvin Katz, acting chief, will continue to “advise and serve NIH’ers in developing and maintaining computer-based information systems.” The branch’s traditional bent on programming, he says, will be redirected to “more up-front planning and analysis—determining what it is you’re trying to do before diving in or reacting to new technologies.”

Reducing the time it takes to complete computationally intensive tasks can speed up the progress of biomedical research and give scientists new strategies for processing their data, declares Computational Bioscience and Engineering Laboratory chief Dr. Robert Martino. His new laboratory is ready to help everyday workstation users “access the Intel high performance parallel supercomputer through NIH’s high-speed network—giving scientists the impression that capability is right in their own workstations.” What might have been, for example, a 6-hour image processing task before, may now take a researcher less than 5 minutes using this technology, says Martino. The areas of structural biology, computational chemistry, medical imaging, genetic linkage analysis and genetic database searching are all benefiting from the application of parallel computing methods.

“We’re looking toward a new era in thinking about molecular organization,” is how Dr. Adrian Parsegian, acting chief of the Laboratory of Structural Biology, describes the progress being made at NIH in understanding of molecular behavior. “We are measuring forces between biomolecules,” he says, “so that we will finally have for biological materials what the engineers have when they build a building or what the atomic scientists have—measured forces, numbers for how strongly molecules interact—so that we can think in a quantitative way about how they work.” To help themselves and their NIH colleagues realize this potential, members of the LSB staff conduct independent and collaborative research in structural biology, and are developing software, hardware, and statistical methods for biologists involved in molecular modeling, nucleic-acid and protein structure prediction, and studies of membranes, ion channels, and receptors.

The Office of Information Resources Management was formed to provide an important focus for DCRT’s IRM issues. Schultz, an engineer, section head and former acting chief of the Computer Systems Labora-
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NIDR PANEL MAPS FUTURE OF INSTITUTE'S INTRAMURAL RESEARCH PROGRAM

(Continued from Page 1)

"The IRP is in an excellent position to meet the opportunities and challenges ahead," wrote panel chairman Dr. William D. McHugh, director of the Eastman Dental Center, in a letter to the NADRC. "With its intellectual resources and with dynamic leadership, the program can capture momentous scientific opportunities that are at hand."

The panel was charged with assessing five general areas: vision, science, training of researchers, partnerships with other research organizations, and organization and management.

The panel stated that the IRP must support NIDR's mission by conducting research "of ultimate relevance" to dental, oral, and craniofacial health. Such efforts should include basic research as well as the rapid transfer of advances from laboratory to clinic and to public knowledge. Provision also must be made for the training of oral health research leaders of the future.

The panel recommended that the IRP be encouraged "to capture the broadening opportunities for oral health care in the 21st century." The panel suggested a focus on selected areas of science among five major themes: epidemiology; musculoskeletal/craniofacial disorders; genetics of human oral, dental and craniofacial diseases; neuroscience; and oral medicine.

Drawing on the strength of the IRP's Bone Research Branch, the panel urged the institute to take the lead in establishing a bone research clinic at the Clinical Center. The clinic would conduct research in osteoporosis, temporomandibular joint dysfunction, Paget's disease and other related conditions. The panel envisions the clinic evolving as a joint endeavor with other NIH institutes.

Training of researchers is considered to be of such high priority that the panel emphasized its importance as second only to the excellence of the IRP's scientific endeavors. The report said that "training is particularly important in the mission of the IRP since it provides for the creation, revitalization and renewal of that small pool of scientists capable of performing the research needed for advances in dental, oral and craniofacial health."

The panel recommended effective mentoring of trainees, particularly women and minorities, suggesting that the quality of a scientist's mentoring should be considered in the evaluation process for promotion and tenure.

The panel recommended that the IRP reach out to the oral health science community in a more systematic manner and with greater vigor because "a myriad of opportunities to enhance IRP research would otherwise be lost." The report provides a number of recommendations for developing and nurturing effective partnerships with academia, industry and health voluntary organizations.

The panel made a number of recommendations to strengthen the review function of the board of scientific counselors, to improve communications within the IRP, and to encourage clinical investigations within the IRP.

Recognizing that biotechnology provides valuable tools for conducting epidemiologic analyses, and that epidemiologic analyses help basic scientists focus on areas of relevance and opportunity, the panel said that epidemiology should be considered an integral component of basic science, rather than an independent endeavor. They suggested a realignment of NIDR, placing the Epidemiology and Oral Disease Prevention Program under the direction of the IRP. Copies of the report are available by calling 66705.

Rine Last Genome Speaker

Dr. Jasper Rine is the last featured speaker of the 1992-1993 Human Genome Lecture Series. His talk, "The Dog Genome Initiative: Towards the Genetics of Morphology and Breed Traits," will be held June 17 at 11:30 a.m. in Lipsett Amphitheater, Bldg. 10.

Rine is director of the human genome center at Lawrence Berkeley Laboratories and a professor of genetics at the University of California, Berkeley. He received his B.S. degree in biological sciences from the State University of New York at Albany and a Ph.D. in molecular genetics from the University of Oregon. Prior to his current positions, he was an associate professor of genetics and biochemistry at UC-Berkeley.

In 1986, Rine received the Camille and Henry Dreyfus Teacher Scholar Award and was named the Miller Research Professor at UC-Berkeley in 1993. He is a member of the NIH-DOE human genome joint subcommittee, and is also on the editorial board of Molecular and Cellular Biology. For more information or to schedule an appointment with Rine, contact Dr. Carol Dahl, 20838.
The NIH Life Sciences Education Connection

Sometimes at NIH it's easy to forget that we're part of a bigger picture—e.g., the Public Health Service. The other seven PHS agencies, like NIH, are dependent on a strong education system that produces a scientifically literate citizenry that can make healthy lifestyle choices.

To work toward this end, the assistant secretary for health created the PHS Life Sciences Education and Science Literacy Board 3 years ago to coordinate the science education efforts of the PHS agencies. The NIH principal deputy director, Dr. Jay Moskowitz, serves as chair of the board and the NIH Office of Science Education Policy provides executive and administrative support.

The PHS Board will be carrying out a number of education activities that may interest you. For example, in 1993 the board will:

- Provide support, along with other organizations, to the National Academy of Sciences to conduct a study on the use of animals in the classroom;
- Update a publication on minority and disadvantaged support programs in health, science and research;
- Develop and purchase a PHS life sciences exhibit to travel to local and national science and health conferences.
- For and those of you who can never get enough information about the state of U.S. science education, the board will be updating the State of the Scene: Science Education in the Nation originally produced in 1991.

These are just a few of the many activities that are outlined in the PHS strategy for improving life sciences education that is currently being finalized. This column will keep NIH'ers posted on the board’s activities and the availability of resource documents.

SUPPORT STAFF COLLECT KUDOS, SAGE ADVICE (Continued from Page 1)

started her career as a member of the support staff. She saluted her secretary, Ethel Carson, who had only that morning been given one of the many unreasonable, but imperative, tasks that managers often bestow on their office workers—and expect accomplished in record time. Armstrong said Carson, like many support staffers do daily, carried out the job with a smile.

"Your professionalism and cooperation make it all possible," Armstrong continued. "Always remember, we realize you are the bottom brick to this building and without you, the top would fall off."

Two more support alumni—30-year government veteran Dolores Burton, former president of Federally Employed Women and current career consultant and public speaker; and former NIDDK director's secretary Sally Nichols, member of Professional Secretaries International and current NCNR grants management officer—discussed career enhancement.

"The professional image is a potent and powerful quality made up of a special mix of confidence, enthusiasm, energy, strength, presence and leadership abilities," Burton said. "And it is very valuable when it comes to developing your career and your interpersonal relationships."

Burton said a successful professional is cognizant of every personal detail, including the attitude he or she expresses about his or her job—"When you put down the government, you put down all of us. If NIH is so bad, then why are you still here? You do a good job when you feel good about the job you are doing."

Nichols discussed transition and having the courage to move. A longtime secretary who left a stellar support staff career to pursue a new, unfamiliar, and therefore frightening one in management, she stressed the importance of harnessing one's inner power.

She drew a clear distinction between thivers, who are happy in their current jobs, and strivers, who are ready to move on.

"Don't let perceived barriers stand in your way," she said. "You have to play to win. You never run into a golden opportunity from a seated position."

The program ended on a celebratory note with local entertainer Deanna Bogart and her top-rated blues band providing the background for informal networking. In a high-energy opening number: "It's High Time...

Sally Nichols

New User Resource Center To Open at Executive Plaza

The new NIH User Resource Center (URC) Learning Lab at the Executive Plaza South Bldg. opened its doors recently for customers to preview the wide array of computer training and support services offered free of charge. Similar to URC services available in Bldg. 31, EPS URC services include:

- Computer-based self-study courses;
- PC and Macintosh workstations featuring applications for individual use, exploration and/or evaluation;
- A variety of peripherals including laser printers, CD-ROM players and page scanners;
- Staff assistance with technical questions and problems relating to the use of hardware and software; and
- A variety of computer publications.

The EPS URC was established by the NIH Training Center, DPM, and DCRT’s Personal Computing Branch to meet the growing demand by NIH employees for a wide variety of up-to-date personal computing services and support.

In order to be responsive to employees' needs, the NIH Training Center surveyed 2,280 Executive Blvd.-area NIH employees to tailor services to the needs of this geographical community.

Although walk-in visitors are always welcome, customers of both URCs are encouraged to call in advance to reserve computer time, to set up training appointments, or to arrange availability of a particular service, software or equipment.

On Monday, Aug. 9, the NIH Training Center will hold an open house to introduce its new training facilities formally.

EPS URC

Current hours: Monday through Thursday 9 a.m.-4:30 p.m.
Location: EPS, 6120 Executive Blvd., Lower Level, Rm. 5 (turn left at the cafe)
Phone: 24722

31 URC

Hours: Monday through Thursday 8:30 a.m.-7 p.m.; Friday 8:30 a.m.-4:30 p.m.; Saturday 9 a.m.-1 p.m.
Location: Bldg. 31, Rm. B2B47
Phone: 65025
For more URC information call 65025.

WRAIR Marks 100th Anniversary

A celebration of the 100th anniversary of the founding of the Walter Reed Army Institute of Research will take place June 24-25 in Bldg. 40, Walter Reed Army Medical Center, Washington, D.C. Events will include an open house with exhibits, time line, poster displays, and seminars on neuropsychiatry, microbiology, and malaria research. Times are 1-4 p.m. on June 24 and 8:30 a.m. to 3:30 p.m. on June 25. For more information call (202) 576-3001.
**NCRR’s Doherty Retires After 17 Years in Government**

By Kathleen Canavan

Misplaced modifiers and writer’s block are woes of the past for NCRR’s James J. Doherty, who recently retired after 17 years of federal service as a writer and public information specialist. An avid walker, he will now be able to spend his time putting foot to pavement rather than pen to pad.

Doherty was information officer for the Division of Research Services and then NCRR from 1982 to 1992 and completed his federal service as special assistant to the director of NCRR. He performed a wide array of duties, from writing and editing newsletters to handling media relations. Much of his activity was devoted to helping inform the public that research with animals is essential and lab animals are treated humanely.

“He is a jack-of-all-trades,” says wife Joyce Doherty, who retired from NER in April 1992. Doherty’s versatility has also made an impression on those who have worked with him over the years.

“Jim truly is a man for all seasons,” said Dr. Robert Whitney, former director of NCRR and longtime friend of Doherty. “My most remarkable memory of Jim is when he researched and wrote a textbook chapter on the taxonomy of nonhuman primates. He now knows more about the subject than any other lay person I know.

“Jim is a wonderful, wonderful wordsmith, but he’s horrible with garden tools,” Whitney added, referring to the frequent cuts and scrapes Doherty incurred while working on his garden. “We used to have an office pool to bet on which of Jim’s appendages would be bandaged Monday morning.”

While Doherty has always loved writing, it has not been his only calling. After earning his B.A. in philosophy and M.A. in theology, he served as a Roman Catholic priest from 1955 to 1968 (when it was the Heart Institute) and at NIH since 1962, when he joined the Office of the Director as an administrative trainee.

Nance received the NIH Merit Award for continued quality of performance and dedication to excellence in the administrative management of NHLBI programs.

He attended George Washington University, then headed west to earn an M.P.A. from Indiana University.

“Jim’s work is well known throughout NIH,” said Dr. Judith Vaitukaitis, NCRR director.

The federal phase of his writing career began in 1976, when he went to work for NIMH at St. Elizabeth’s Hospital in Washington, D.C.; he moved to FDA in 1978. He joined NIAAA as an information specialist in 1981, and moved to DRS the next year.

Doherty’s excellent performance has been recognized throughout his 17 years of service. Most notably, he received a $1,000 cash award for public affairs work in 1987, and the FDA Commissioner’s Unit Citation for his work on the CBER animal care and use committee in 1988.

“Jim’s work is well known throughout NIH,” said Dr. Judith Vaitukaitis, NCRR director.

“Joe Held (former director of DRS) did a fantastic thing in hiring him. He will be missed.”

Doherty loves reading and Civil War history, but walking along and exploring the C&O Canal is his favorite pastime. He has walked the entire length of the canal, and is now halfway through his second amble. For now, however, he just wants to loaf around with his wife.

“I have enjoyed the work and the people tremendously,” Doherty said, reflecting on his years of government service. “There’s nothing like NIH, and there never will be [another].”

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**Sailing Club To Hold Open House, June 27**

The NIH Sailing Association invites the NIH community to visit Selby Bay Sailing Center in Edgewater, Md., to learn about the association Sunday, June 27 (rain or shine), from 10 a.m. to 4 p.m. The next basic training class starts in August and this is a good chance to preview the members, boats, and facilities.

The association will offer boat rides in its Flying Scots (19-foot sloop-rigged centerboard day sailors), and refreshments. Landlubbers and old salts alike are encouraged to attend. Sailing club membership and basic training applications will be accepted on the spot.

Fliers with a map and directions to the Selby Bay Sailing Center are available at the R&W activities desks and gift shops, as are brochures with more information on the club.
Cable TV Comes to NIH
Police Take Advantage of Training-by-Television

There are many cable networks targeted toward specialized groups, and the Law Enforcement Television Network (LETN) can now be counted among them. LETN operates out of Dallas with all-day, everyday programming. It provides police officers, from command level to the street officer, with the most up-to-date information available in the law enforcement area.

"Since we couldn’t install a satellite dish on top of Bldg. 31 because it would be too expensive," says James Koerber, training officer for NIH’s Police Branch, "we did the next best thing. We order their videotapes."

The programs range from news with special emphasis on law enforcement activity to current issues such as police administration, legal decisions handed down from the courts, OSHA standards in addressing AIDS and infectious diseases, and officer safety.

Many of these topics can help NIH police officers perform their duties, says Koerber. "Segments that we deem beneficial are adopted into our structured training program."

It is mandatory that each police officer take training once a month. During these sessions, Koerber selects topics that are relevant to all officers on the beat and supplements the seminars with the latest videos on the subject. Participants take a test at the end of each video. The test results are recorded and sent to LETN.

For every passing grade 70 and above, officers receive 1 credit hour from either Pennsylvania State University or the Southern Police Institute at the University of Louisville. More than 4,300 police departments across the country subscribe to this system. "But not every police department participates in this program," says Leo J. Rossiter, NIH deputy police chief. "As I have said before, NIH’s training far exceeds the mandatory training required by the state of Maryland."

LETN is just one part of NIH’s training program. NIH also holds four in-depth (40-hour), in-service training courses a year. "For these courses, we provide outside instructors from other police jurisdictions such as the Federal Bureau of Investigation, Fairfax and Montgomery County, Metro Transit, Drug Enforcement Administration, and representatives from the U.S. Attorney’s office," Koerber relates. "We also open the classes to accommodate people from other law enforcement agencies."

This in-service training includes administration, search and seizure, defensive tactics, DWI enforcement, officer survival, victim/witness assistance program, culture awareness sensitivity training, and stress management.

Rossiter says, "This course is so well regarded among law enforcement personnel that we have people from all agencies asking to attend our course. In fact, requests from outside agencies have already begun to come in seeking positions for the next session."

"LETN," continues Rossiter, "supplements our in-service training. The benefit of a training program such as ours is that it helps prepare the officer by keeping his or her mind focused on maintaining the professionalism and attitude. This is just one more way that the NIH police can provide better service to the community."—Anne Barber

Recent graduates from the DES Apprenticeship Program are (seated, from l) Keith Thomas, Joe Jackson. In second row are (from l) Terrence Starks, Robert Jackson, Charles Allen. At rear are DES staff (from l) Ron Poole, Dave Herel, Jorge Urrutia and Arturo Giron.

Four With NIH Support Win 1993 GM Cancer Research Prizes

The 1993 General Motors Cancer Research Awards for outstanding contributions to cancer research will be presented to four scientists who enjoy NIH support; the three awards are worth $100,000 each and include a gold medal.

Dr. Gianni Bonadonna, director of medical oncology at the National Tumor Institute in Milan, Italy, and Dr. Bernard Fisher, distinguished service professor at the University of Pittsburgh, will receive the Charles F. Kettering Prize "for spearheading a major shift away from radical mastectomies to more effective and less disfiguring breast cancer treatments." Fisher is an NCI grantee and Bonadonna has a contract with NCI.

Dr. Carlo M. Croce, director of the Jefferson Cancer Institute at the Thomas Jefferson Institute in Philadelphia, will claim the Charles S. Mott Prize "for finding many of the oncogenes behind leukemias and lymphomas, and discovering how they are switched on to cause cancer." He has been supported primarily by NCI but also by NIAID.

The Alfred P. Sloan, Jr., Prize will go to Dr. Hidesaburo Hanafusa, Leon Hux professor at Rockefeller University in New York City, who was cited "for pioneering work with chicken viruses that laid the foundation for the discovery that cancer is caused by damaged genes within our own cells." He, too, is an NCI grantee.

The winners will present awards lectures at NIH on Wednesday, June 23, from 1 to 3 p.m. in Masur Auditorium, Bldg. 10.

DES Apprenticeship Program Graduates Five Tradesmen

Five individuals recently graduated from DES’ Apprenticeship Program, a 4-year combination of on-the-job training and classwork at Montgomery College that results in journeyman trade status and certificates from both DES and the Labor Department.

Nine trades are open for study in the program—refrigeration/air conditioning, electricity, plumbing, sheet metal mechanics, carpentry, boiler plant operation, painting, utility system repair and operation, and elevator mechanic.

The DES Apprenticeship Program began in 1978 and, up to now, has enrolled 68 employees, 54 of whom (79 percent of total) were minorities and women. The program recruits employees from across all NIH yearly. Recruitment and selection typically occur in the spring of each year; a 4-year commitment is required. For more information on the program, call Ron Poole, 23441.