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BOLD STEPS IN CRITICAL TIMES

Mid-Year ACD Meeting Considers Wide Range of Topics

BY CARLA GARNETT

At its 128th meeting, the advisory committee to the director (ACD) learned how NIH Director Dr. Monica Bertagnolli plans bold initiatives to answer critical needs and how NIH intends to address recommendations from several working groups.

Held hybrid style over 1½ days June 13-14, the meeting addressed topics literally from A (artificial intelligence) to Z (zettabytes).

Connecting to the Frontlines

On day one, Bertagnolli told the group about the new Communities Advancing Research Equity (CARE for Health®) network she established as a pilot program just a week before the meeting.

NIH Director Dr. Monica Bertagnolli conducts the recent ACD meeting.

PHOTO: CHIA-CHI CHARLIE CHANG

"The impetus for this is we feel we really need to do something about the diseases of despair," she said. "We need to be in the communities where this is happening. We need to take ownership of this problem, and the best way we thought we could do this is to focus on the primary care community as a research community, because that's who's on the frontlines seeing these problems."

The health of the U.S. population is declining, particularly in areas that are underserved and underrepresented in clinical research, said Dr. Tara Schwetz, NIH deputy director for program coordination, planning and strategic initiatives, which funds CARE for Health.

"We designed a program to expand research opportunities to where people actually seek care by integrating clinical research further into primary care settings," she explained.

CARE for Health aims to speed research advances into everyday clinical care and improve health outcomes for all Americans.

SEE **ACD**, PAGE 6

ZERO IN AT ZIP CODE LEVEL

Find 'Actionable Targets' in Diabetes Disparities Research, Egede Advises

BY AMBER SNYDER

Dr. Leonard Egede

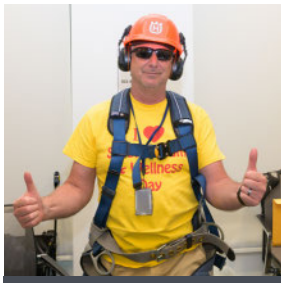
Nationally recognized health disparities researcher Dr. Leonard Egede recently visited NIH to deliver the 2024 Robert S. Gordon Jr. Lecture in Epidemiology. Egede develops and tests innovative interventions to reduce and/or eliminate health disparities for chronic health conditions.

His talk—part of the Wednesday

SEE **EGEDE**, PAGE 4

Wellness Day Fosters Healthy Work Environment

BY KRISTINE DURU



A safety thumbs up

PHOTO: MARLEEN VAN DEN NESTE

More than 250 attendees, volunteers and event organizers flocked to the Bldg. 31 Conference Center to celebrate NIH's Safety, Health and Wellness Day on June 18.

The Office of Research Services (ORS) and the National Center for Complementary and Integrative Health (NCCIH) co-sponsored the event. Activities included movement classes, paint-by-numbers, biometric screenings, "around the world" food tastings and more. ORS also collaborated with a handful

SEE **WELLNESS**, PAGE 8

Summer fun at Camp Fantastic. See p. 12.

ALSO THIS ISSUE

Next Data Science Strategy Seminar Set, Aug. 9

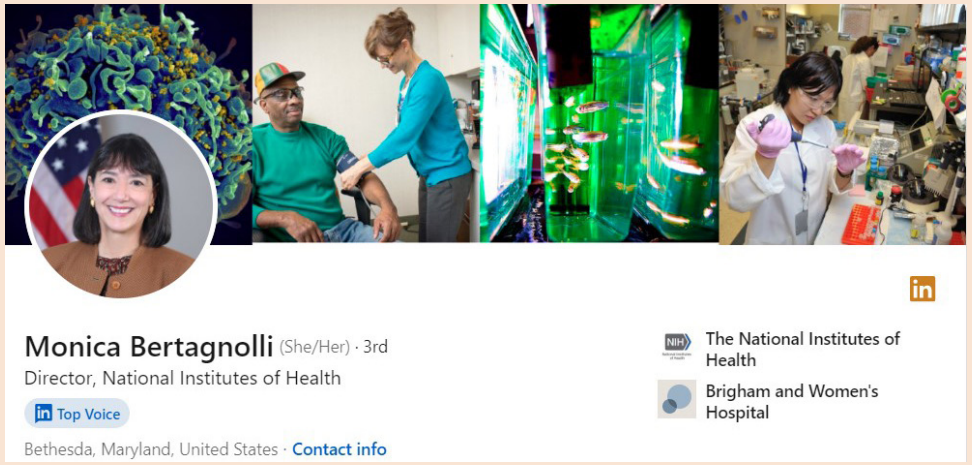
NIH's Office of Data Science Strategy hosts a seminar series to highlight exemplars of data sharing and reuse on the second Friday of each month at noon ET. The series highlights researchers who have taken existing data and found clever ways to reuse the data or generate new findings. A different NIH institute or center will also share its data science activities each month.

USC's Dr. Robert Schuler (above) and Dr. Jifan Feng (below)

The next seminar, "Data Sharing and Reuse Seminar Series: FaceBase: Empowering Dental, Oral and Craniofacial Research Through Data Sharing and Reuse," will be held on Aug. 9. Scheduled speakers are Dr. Robert Schuler, senior computer scientist and lead scientist, University of Southern California (USC) Information Sciences Institute; and Dr. Jifan Feng, research associate, Center for Craniofacial Molecular Biology, Herman Ostrow School of Dentistry, USC.

To register, visit http://bit.ly/3xZ1p3W.

Seminars are open to the public and registration is required for each. Individuals who need interpreting services and/or other reasonable accommodation should call Janiya Peters at (301) 670-4990. Make requests at least three days in advance of the event.



NIH Director's LinkedIn Account Recognized as a 'Top Voice'

Since its launch in April, NIH Director Dr. Monica Bertagnolli's LinkedIn account has accumulated more than 11,000 followers. LinkedIn has named her a "Top Voice," making Bertagnolli the only HHS leader with this distinction.

LinkedIn vets its accounts to ensure they meet high trust standards, are consistently active and share valuable expertise through content.

The account was launched and is managed by NIH's Office of Communications and Public Liaison in the Office of the Director.

'INSPIRATION & ASPIRATION'

Register Now for NIMH's Anniversary Symposium

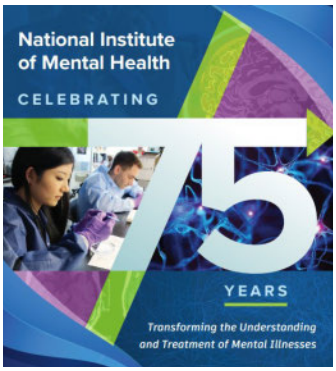
The National Institute of Mental Health (NIMH) will host a symposium, "Inspiration & Aspiration: Future Perspectives in Mental Health Research," on Friday, Sept. 20 from 9:30 a.m. to 5 p.m. ET at the National Archives Building in Washington, D.C., and virtually.

This event is the final symposium of NIMH's 75th anniversary celebration, wrapping up a year filled with special events and release of videos, podcasts and feature stories showcasing the institute's groundbreaking research and its impact on mental health.

This symposium features dynamic presentations by rising stars and trailblazers in the scientific community, and offers a unique opportunity to explore diverse perspectives and creative approaches to mental health challenges. Join for a day of discussions about cutting-edge advances shaping the future of mental health research.

Register at https://go.nih.gov/nYFpRdK. Registration is required for both in-person and virtual participation. The event will also be recorded and archived on the NIMH website.

For more information on NIMH's anniversary celebration, visit nimh.nih.gov/75years.



39th Institute Relay Now Recruiting Teams

Go for Gold

Get ready, get set, go! NIH's 39th Institute Relay Race is scheduled for Thursday, Sept. 12, from 11 a.m. to 1 p.m. outside of Bldg. 1. Teams of five race around the building's perimeter. There is no limit on how many teams institutes, centers, divisions and contractors enter, as long as each team has a variety of genders represented.

For $25 per team until Sept. 1, groups can register to run in either the first or second heat.

Volunteers and runners can receive a free relay T-shirt and a free scoop of ice cream.

For more information on the event, contact Recreation and Wellness Association Co-Director David Browne at browned2@mail.nih.gov.

And they're off! Institute Relay starters kick off in 2015.

PHOTO: DANIEL SOÑÉ

One of two OSTP fireside chats included (from l) Dr. Danielle Carnival, deputy assistant to President Biden for the Cancer Moonshot; FDA Commissioner Dr. Robert Califf; NIH Director Dr. Monica Bertagnolli; and Chaundra Bishop, clinical trials advocate and 8-year cancer survivor.

Bertagnolli Joins in White House Clinical Trials Forum

NIH Director Dr. Monica Bertagnolli joined FDA Commissioner Dr. Robert Califf at a White House Clinical Trials Forum hosted by the Office of Science and Technology Policy (OSTP) on June 26.

The event highlighted progress and sought to galvanize action to equitably accelerate biomedical innovation, with a focus on increasing clinical trial access and reducing barriers to participation.

At the White House, Bertagnolli, alongside Califf, discusses CARE for Health®.

Bertagnolli discussed her new initiative, Communities Advancing Research Equity for Health (CARE for Health®), which aims to improve health outcomes by integrating research in primary care settings.

Califf announced draft guidance to improve enrollment of participants from underrepresented groups in clinical trials.

The forum convened leaders from government, advocates, physicians, researchers and the private sector to discuss the challenges and opportunities to expand clinical trial availability nationwide and increase diversity among participants.

Two fireside chats rounded out the day's activities.

OSTP Director Dr. Arati Prabhakar, President Biden's chief science advisor, delivered a call to action for clinical trials to reach more communities to improve health outcomes.

"The inequities within our society are simply unacceptable, so we're at a moment where we have to stare this in the face," she said. "It takes everyone if we are really going to change these outcomes, and the work on clinical trials is a fundamental piece of this."

ON THE COVER: *A colorized scanning electron microscope image of group A streptococcus (orange) during phagocytic interaction with a human neutrophil (teal). Group A streptococcal bacterial infections can range from a mild skin infection or a sore throat to severe, life-threatening conditions. NIH has several candidate vaccines in various phases of development.*

IMAGE: NIAID

The NIH Record

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NIH National Institutes of Health
Turning Discovery Into Health

CCDI Announces Next Webinar

Tune in for the Childhood Cancer Data Initiative's (CCDI) webinar, CCDI Federated Data: Enhancing Data Discoverability, on Tuesday, Aug. 13 from 1 to 2 p.m. ET.

Hear about a new advance for querying genomic, clinical, imaging and biospecimen data. The virtual event is free and open to the public, though registration is required to get the event link.

Register at https://events.cancer.gov/ccdi/webinar/registration. Individuals with a disability who need reasonable accommodation to participate in this event, email CCDIevents@mail.nih.gov as soon as possible.

Learn more about CCDI events and access past webinars by visiting https://go.nih.gov/m11UsFS.

Dr. David Murray (l), director of the NIH Office of Disease Prevention, presents a WALS plaque to Egede.

PHOTO: DIANA GOMEZ

Egede

CONTINUED FROM PAGE 1

Afternoon Lecture Series (WALS)—focused on his diabetes research.

Diabetes is "a good marker for the work we do because of its prevalence," Egede explained.

The condition affects about 15% of the U.S. population on average, but the burden of disease is unequal when broken down by racial group. Black Americans have the highest occurrence at 17%, followed by Asian Americans at 16% and Hispanic Americans at 15%. White Americans have the lowest incidence of diabetes—13%.

What causes the disparity in disease burden? Egede believes social determinants of health (SDOH) play a role, and is researching ways to measure its effects. SDOH are the conditions in the environments where people are born, live, learn, work, play, worship and age that affect a wide range of health, functioning and quality-of-life outcomes and risks.

Factors such as food insecurity, for example, can impact diabetes control through psychosocial factors such as stress, guilt, denial and other negative emotions—a phenomenon known as "diabetes distress." Via this pathway, Egede found, food insecurity has a direct impact on glycemic control.

A significant marker Egede identified in evaluating SDOH is redlining, a discriminatory practice dating from the mid-1900s in which financial services were withheld from neighborhoods that have significant numbers of racial and ethnic minorities. Most marginalized populations in the U.S. still live in redlined areas today and feel its legacy.

Egede decided to use redlining as a surrogate measurement for structural racism in order to investigate the direct and indirect relationships between redlining and diabetes prevalence.

However, "we weren't satisfied with [just] finding results," he said. "We wanted to find...actionable targets."

First, he and his collaborators reviewed the literature to see what had already been done. Once they had narrowed down their results, they saw that studies did show a measurable link between structural racism and poor diabetes outcomes. Individuals in these environments tended to have poorer clinical outcomes, such as higher HbA1C and blood pressure, worse self-care behaviors (diet and exercise), lower standards of care, higher mortality and more years of life lost.

Then, Egede conducted his own study to understand the impact of historical redlining and structural racism on diabetes prevalence.

Using a sample that was representative of all U.S. adults, he found that individuals in redlined neighborhoods were more likely to experience discrimination and/or be incarcerated, both of which can lead to poor health and disability.

He is currently studying the impact of structural racism on hospital closures in urban communities. There is an "absence of health care in inner city environments" that was worsened by the pandemic, he explained. He hopes to use his research to engage stakeholders to prevent future health care facility shutdowns, and help lower adverse impacts felt by communities that have experienced nearby clinic closures.

Egede wants his research to inform targeted interventions that address the direct and indirect pathways between structural racism and diabetes outcomes. Find the actionable targets, he advised, so "we can see what needs to be done at a zip code level."

To view the archived lecture, visit https://videocast.nih.gov/watch=53833.

RML To Host Indigenous People's Research Gathering, Aug. 8

Two Native American scientists will be among the featured speakers at the second Rivers of Knowledge research gathering on Thursday, Aug. 8 at NIAID's Rocky Mountain Laboratories (RML) in Hamilton, Mont. RML's STEAM Collaborations with Indigenous Peoples committee, which reaches out to Native Peoples and educators to foster research and educational opportunities in sciences and related fields, is coordinating the event.

The gathering will be hybrid and talks focus on zoonotic research, career development, training opportunities and hands-on educational projects.

Invited speakers are Dr. Crystal Lee, Diné (Navajo), of the University of New Mexico, who will present "From REZ to Research." Dr. Moses Leavens, Chippewa Cree, of the McLaughlin Research Institute, will talk about "Resources and Strategies for Native Success in STEM." Dr. Crystal Richards of NIGMS will discuss tribal college funding opportunities.

RML presenters include Dr. Cathryn Haigh, who will discuss chronic wasting disease research; Dr. Neeltje van Doremalen, who will share lessons from preclinical Covid-19 vaccine research; and Dr. Adam Nock, who will talk about ticks and Rocky Mountain spotted fever. Register online at https://go.nih.gov/ZhEXV8T. For more information, email RMLSCIP@mail.nih.gov. Last year's inaugural event drew more than 60 people, including members from four tribal nations and five colleges and universities.

30 Years of Lupus Research Lauded

BY JENNIFER MORGAN GRAY AND MASON SCOTT

Researchers, patients, advocates and NIH staff gathered recently to celebrate the 30th anniversary of lupus clinical research within the lupus natural history protocol at NIH, marking key accomplishments while looking toward the future.

As Dr. Sarfaraz Hasni, chief of the lupus clinical trials unit at the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS), indicated, the event's colorful purple poster adorned with butterflies in different shapes and sizes aptly characterizes NIH's work on the condition.

"Each and every patient is individually different," he explained of the poster's inspiration, like "butterflies that are all different shapes and sizes."

Hasni also recognized the "unwavering NIH support to researching conditions like lupus," a sustained effort that involves multiple institutes at the agency.

The May 31 event, held in Lipsett Amphitheater, was an opportunity to recognize the advances in lupus research since the inception of the D.C. Lupus Consortium.

"The D.C. Lupus Consortium is a very important catalyst for lupus research," said NIAMS Director Dr. Lindsey Criswell, "and we thank you for your important role in expanding our lupus research efforts."

The event included short presentations from a variety of NIH and NIH-supported researchers and other experts active in the field, testimonials from patients who have participated in NIH lupus clinical trials and reflections from patient advocacy groups.

Major themes included how lupus presents differently in different patients, the promise of personalized treatment and the need to ensure that patients are involved in the design and execution of any research.

The NIAMS lupus clinical trials unit includes (from l) Isabel Ochoa, Michael Davis, Lubna Hooda, Emily Jones, Yenealem Temesgen-Oyelakin, Jun Chu, Zerai Manna, Dr. Sarfaraz Hasni and Elaine Poncio.

PHOTO: MARLEEN VAN DEN NESTE

Women get lupus about nine times more often than men and it is also more common among African Americans and people of American Indian and Asian descent. Approximately 39% of those diagnosed with lupus are African American, whereas approximately 36% are White. Ensuring that all people are adequately represented in clinical trials is key to developing treatments that work for everybody.

"The more we learn about lupus patients anywhere, the more we learn about lupus patients everywhere," said Dr. Laura Lewandowski, assistant clinical investigator and head of NIAMS's lupus genomics and health disparities unit, in her discussion about understanding the genetics of lupus in global populations.

The event also included three moving testimonials from people enrolled in the NIH Natural History and Pathogenesis of Systemic Lupus Erythematosus study, one of whom began in the protocol 40 years ago when she was just 16 and newly diagnosed with lupus. NIH's research had a profound effect on her quality of life.

"If participating in an NIH study can save a life...it's worth it, because that one life may be your own," she said.

Another described how she was recruited as a Hispanic female at a time when NIH was trying to improve diversity and representation in the lupus clinical trial. She remarked on the whole-person approach taken by the NIH, saying "when you hear the word study, you think that you are going to be a lab rat, and that has not been my experience." She continued by saying that the NIH team showed "that they cared more about me as a person than the study."

Another patient, who is also a patient advocate, echoed the importance of participation, noting she was able to "learn, inform and educate" through her experience.

May was Lupus Awareness Month, which the Montgomery County Council marked with a proclamation recognizing NIH's sustained and groundbreaking work on the disorder with a presentation by Councilman Will Jawando.

Montgomery County Council members gather with lupus patients, advocates and members of NIAMS's lupus clinical trials unit. On the top row are (from l) council members Sidney Katz, Gabe Albornoz, Natali Fani-Gonzalez, Marilyn Balcombe, Kate Stewart, Andrew Friedson, Laurie-Anne Sayles, Kristin Mink and Dawn Luedtke; (bottom row, from l) Petra Tchouante, Sahana Datta, Natalie Meyers, Manna, Councilman Will Jawando, Poncio, Ochoa and Hasni.

PHOTO: BENJAMIN SKY BRANDT/MONTGOMERY COUNTY COUNCIL

Jawando spoke about his wife's diagnosis with lupus and how women are much more likely to be diagnosed than men.

Describing disparities in lupus diagnoses, Jawando noted that "Black and Latinx women are more likely to have lupus at a younger age and are more likely to have severe symptoms."

Addressing such disparities is an important reason that NIH strives to ensure diversity and representation in all of its clinical trials, the event illustrated.

Learn more and support NIH's lupus research efforts by visiting: https://go.nih.gov/VKADg2q.

Watch the D.C. Lupus Consortium videocast at https://videocast.nih.gov/watch=54866. See the Montgomery County Proclamation at https://bit.ly/3SkOKz4.

Participants at the D.C. Lupus Consortium make the butterfly sign, denoting lupus.

PHOTO: MARLEEN VAN DEN NESTE

At the recent ACD meeting are (from l) Dr. Tara Schwetz, NIH deputy director for program coordination, planning and strategic initiatives; John Burklow, NIH chief of staff; Dr. Lawrence Tabak, NIH principal deputy director; Bertagnolli; Dr. Diana Bianchi, NICHD director; Dr. Brian Mustanski of Feinberg School of Medicine at Northwestern University; and Dr. Giselle Corbie of the University of North Carolina School of Medicine.

PHOTOS: CHIA-CHI CHARLIE CHANG

ACD

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New ACD Components

The group also heard proposals to create new working groups for the Center for Information Technology (CIT) and for artificial intelligence (AI).

Tabak shares a light moment with ACD member Dr. Kafui Dzirasa of Duke University School of Medicine.

"Computing is part of everything we do now," said CIT Director Dr. Sean Mooney. "The growth of computing to support the kinds of projects that we want to do in the future needs your advice."

Referring to work by NIH's BRAIN Initiative®, which predicts using a zettabyte of data, Mooney said that amount of computing capacity would be staggering to consider handling and NIH via CIT should make plans now.

ACD members approved creation of both new working groups.

In her director's report earlier in the day, Bertagnolli discussed how NIH has followed up on recommendations from other ACD working groups—specifically those involving postdoctoral training, disability and novel alternative methods (NAMs).

Language Matters

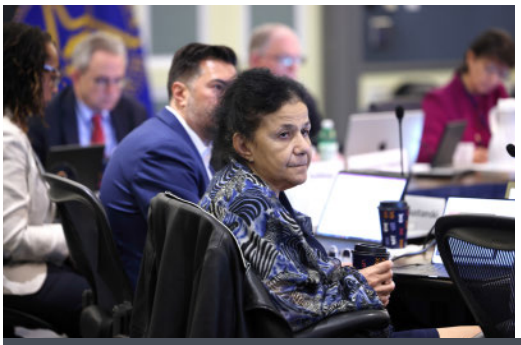
In addition to boosting salary levels of early-career scientists in training posts and increasing their childcare support stipends, NIH also "tightened the definition of postdoctoral scholars to make clear that it's a term-limited position of mentored research and professional development to prepare for an independent career," Bertagnolli said.

NIH may be changing the way its mission is worded again. One recommendation under consideration since December 2022 is to remove "reducing disability" from the NIH mission statement because the language could be perceived as perpetuating ableist beliefs that people with disabilities are flawed and need to be fixed.

Since announcing the proposed change and asking for public opinion in August 2023, NIH has received 480 comments, including many strong opposing views. About 40% of respondents feel disability should be added back to the mission statement, either as it was or using different wording such as "optimized function" or "maximize abilities."

"We plan to get more input before

The 128th meeting of the ACD was convened hybrid style. Attending on site were (standing, from l) Dr. Atul Butte of the University of California-San Francisco; Corbie; Tabak; Bertagnolli; Mustanski; Dzirasa; (seated, from l) Dr. Alexa Kimball of Harvard; Dr. Corey Moore of Langston University; Dr. Wafaa El-Sadr of Columbia University Mailman School of Public Health; and Dr. Lucila Ohno-Machado of Yale School of Medicine.



ACD members listen as reports are presented. At left is El-Sadr (foreground); at right are Butte (l) and Ohno-Machado.

finalizing the mission statement," Bertagnolli said. NIH last amended its mission statement in 2013 when "the burdens of" was removed.

Terminology changed for NAMs, which an ACD working group report on the topic defines as "in silico, in chemico and in vitro methods that can refine and replace the use of animals and emphasize those with the greatest potential for human relevance."

Formerly described as "novel alternative," NAMs are now called "new approach" methods.

Catching Up on Ongoing Concerns

By the end of day two, the ACD had heard updates from its working group on diversity, and on the NIH HEAL Initiative® and Long Covid research endeavors. Briefings had been given on other ongoing issues as well, including the NIH BRAIN Initiative, INvestigation of Co-occurring Conditions across the Lifespan to Understand Down SyndromE (INCLUDE) and women's health research overall.

Kimball (l) and Schwetz catch up during a meeting break.

Moore speaks on behalf of people with disabilities.

"I hope we've given you a view that we intend to be bold and do some things that people need," concluded Bertagnolli. "Because people need us to step up and take leadership in some really critical areas that I don't think any organization but NIH can take the lead. We so appreciate your support. Your input is absolutely critical. We couldn't do anything that we do—especially not any new bold initiatives—without the reality check we get from our ACD."

ACD meetings are public and the proceedings are archived online: day one, https://videocast.nih.gov/watch=54652, and day two, https://videocast.nih.gov/watch=54654. Access meeting agenda, reports and other documents at https://acd.od.nih.gov/meetings.html.

Tribble Spencer Named OD Executive Officer

Kelly Tribble Spencer is the new associate director for management and executive officer (EO) in NIH's Office of the Director (OD).

Tribble Spencer joins OD from the Advanced Research Projects Agency for Health (ARPA-H), where she served as the director of the Strategic Resources Office. In this role, she pioneered key administrative functions as the agency's first federal detailee and senior executive service member. Her tenure at ARPA-H laid crucial groundwork for organizational development.

OD Exceutive Officer Kelly Tribble Spencer

Beginning her federal career at the Social Security Administration (SSA) in 2009, Tribble Spencer held significant roles, culminating as director of training and human resources in the Office of Hearings Operations. Her leadership spanned workforce programs for more than 8,000 employees, emphasizing operational excellence and employee development.

During her SSA tenure, Tribble Spencer also served as deputy associate commissioner for the Office of Budget, Facilities and Security, overseeing pandemic planning and nationwide return-to-office efforts for disability hearings across 160 offices, impacting nearly 200,000 Americans. Her diverse roles included positions in the Office of Retirement and Disability Policy, the Office of Legislation and Congressional Affairs, the Office of the Commissioner, and as a senior advisor.

Tribble Spencer's career path also includes a pivotal role as a social security policy analyst for the Senate finance committee in 2014.

Before her federal service, she held leadership roles in non-profit organizations and academia, alongside practicing law in private practice.

A native of Baltimore, Tribble Spencer holds degrees in mass communication (B.A.), applied sociology (M.S.), and law (J.D.).

Send Your Input to the Common Fund

The NIH Common Fund wants to hear from you. The Common Fund is gathering input on scientific challenges or opportunities that may feed into its future activities.

Your ideas—on high-priority challenges for NIH that promote discovery across biomedical science—may inform Common Fund scientific workshops, initiatives and other programs.

Deadline to submit responses is Aug. 10, by 11:59 p.m. ET. For more information, including how to submit feedback, see: https://go.nih.gov/2COgEOG.

Wellness

CONTINUED FROM PAGE 1

of other NIH offices to provide exhibit tables representing several ICs and components.

The event is held in June to commemorate National Safety Month. It calls attention to the importance of—and awards NIH'ers dedicated to—workplace safety. "Fostering safety, belonging and well-being" was this year's theme.

"This event is largely to help promote all the different elements of occupational safety—radiation safety, biological and chemical safety, the safety of campus," said event organizer Roxy Grossnickle, chief, Community Health Branch, Division Occupational Health Services (DOHS). "We try with this event to really emphasize that

Enthusiasts from NIH's Employee Assistance Program show off their promo.

24-hour aspect of safety, that your mindset at home and your mindset at work drives your overall safety and well-being."

The day also featured educational mini sessions providing tips on wellness, food safety and more.

Speakers at the event's opening ceremony highlighted the multidimensionality of safety in the workplace.

NIH Director Dr. Monica Bertagnolli's opening remarks focused on the theme's aspect of belonging. She stressed that all community members should feel valued and safe. At NIH, there is no place for discrimination or harassment of any kind. NIH'ers must call out discrimination as they see it and be open to learning and growing.

Above, at the event are (from l) Leslie Pont, NIH Wellness Program manager; Tammie Edwards, director, Division of Amenities and Transportation Services; Dr. David Shurtleff, NCCIH deputy director; ORS Director Colleen McGowan; Dr. Jessica McCormick-Ell, DOHS Director and Roxy Grossnickle, DOHS Community Health Branch chief. Below, McCormick-Ell (l), NIH Director Dr. Monica Bertagnolli (c), and Edwards focus on safety, health and wellness.

"We all have so incredibly much to offer the world, and frankly we should not have to worry about fitting in or belonging," Bertagnolli said. "You belong here, not as you think people want you to be; you belong here as who you are. That is what makes a place magic."

NCCIH Deputy Director Dr. David Shurtleff emphasized the concept of holistic wellness.

"Instead of just treating or preventing specific disease, whole-person health focuses on restoring health, promoting resilience and well-being across the lifespan, which is really what today is all about," he said.

Several factors—NCCIH's whole-person health approach, ORS's partnership with NCCIH, 8 Changes for Racial Equity (8CRE) and the Office of Equity, Diversity and Inclusion (EDI) and Juneteenth being the following day— inspired Safety, Health and Wellness Day's focus on belonging and inclusion, said Leslie Pont, NIH Wellness Program manager and event organizer.

"It's becoming more apparent in the wellness space that if you feel a sense of belonging, you feel mentally safe," Grossnickle added. "So when you look at the whole continuum of wellness and safety—it all ties together."

Safety, Health and Wellness Day also showcases just how vital overall wellness and emotional safety are.

"We were so glad Dr. Bertagnolli dropped by," said DOHS Director Dr. Jessica McCormick-Ell. "Seeing the director attend Health and Wellness Day reinforces the message that staff safety and well-being are high priorities at NIH."

At left, staff from NIH's Central Utility Plant (l) share information. At right, exhibitors, attendees, safety award winners and ORS staff come together after the fair.

PHOTOS: MARLEEN VAN DEN NESTE

Above, NIH Fitness Center staff promote exercise and stress relief. Below, a fitness class during the fair

Event attendee Lily Bisson, management analyst at the Center for Information Technology, said the special day was a great way to spread awareness about underused wellness resources available to NIH employees.

Bisson also echoed Bertagnolli's sentiment regarding unacceptable behavior, that having a constant dialogue, calling it out, giving it a name when we see it happening and holding everyone accountable all help prevent harassment and bullying in the workplace.

"I think that's really important for psychological wellness here at NIH, just fostering the community of collaboration and successful science that we all want as part of the mission," Bisson concluded.

NIH'ers can watch the day's mini sessions at https://videocast.nih.gov/watch=54912.

Staff promoting radiation safety lured people to their table with a spinning-wheel game.

Avenevoli Becomes Acting NIMH Director

Dr. Shelli Avenevoli became acting director of the National Institute of Mental Health (NIMH), effective June 17.

Becoming acting director is the next chapter in her long and accomplished career at NIMH, where she has been a leader and a researcher for over two decades. It is also a hallmark in NIMH's history as the institute wraps up its 75th anniversary with the appointment of its first female director.

Dr. Shelli Avenevoli

"I'm honored to lead NIMH at such a pivotal time," said Avenevoli. "For 75 years, the institute has revolutionized mental health research, transforming our understanding and treatment of mental illnesses. We've charted numerous paths forward and I'm excited to maintain that momentum."

The appointment follows the departure of Dr. Joshua Gordon, who had been NIMH director since 2016. Avenevoli will serve in the acting role while NIH conducts a national search for a permanent director. Her tenure at NIMH began in 2001 when she joined the Intramural Research Program as a staff scientist.

Over the years, she was a co-investigator on several studies, including the National Comorbidity Survey–Adolescent Study, which offered critical insights on the prevalence and course of mental disorders in youth.

She moved to NIMH's Extramural Research Program in 2005, ultimately becoming chief of the Developmental Trajectories of Mental Disorders Branch. While in that role, she led the reorienting of NIMH's pediatric translational research portfolio towards an emphasis on brain and behavioral development, trajectories of mental illnesses, and early biological or behavioral markers of risk and intervention. She developed several research programs focused on common disorders in children and adolescents, including depression, anxiety, bipolar disorder and chronic irritability.

Avenevoli became NIMH deputy director in 2017, providing scientific and administrative leadership for a range of institute activities and helping define research priorities, administrative policies and strategic initiatives.

As deputy director, she helped oversee internal operations and external collaborations. This included making major improvements to NIMH structure and processes and advancing efforts for diversity, equity, inclusion, accessibility and anti-racism.

Avenevoli also expanded the scope of the NIMH grant portfolio and oversaw creation of new research programs on youth development, mental health and suicide prevention. She was instrumental in the development of cross-cutting NIMH teams to enhance progress on strategic priorities and in shaping NIMH's role in White House initiatives focused on transforming the system of care for youth mental health and improving strategies for suicide prevention.

These efforts accompany her many contributions to urgent public health issues, including youth mental health, suicide prevention, women's mental health, Covid-19 and more. She has worked on several large-scale NIH projects, including the Environmental Influences on Child Health Outcomes (ECHO) Study, *All of Us* Research Program and NIH UNITE Initiative, and served on numerous cross-NIH task forces, workgroups and committees.

"Stepping into this role gives me the opportunity to carry forward the groundbreaking work of the institute's committed team of researchers and staff," said Avenevoli. "I look forward to helping chart the future of NIMH while continuing to foster and empower the work we're already doing to advance research on mental health and mental disorders."

Daily Multivitamins Not Associated with Lower Risk of Death

A large analysis of data from nearly 400,000 healthy U.S. adults followed for more than 20 years has found no association between regular multivitamin use and lower risk of death. The study, led by NCI researchers, was published June 26 in *JAMA Network Open.*

Study finds no association between routine multivitamin use and lower risk of death.

PHOTO: SERGII SOBOLEVSKYI/SHUTTERSTOCK

Many adults in the United States take multivitamins with the hope of improving their health. However, the benefits and harms of regular multivitamin use remain unclear. Previous studies of multivitamin use and mortality have yielded mixed results and been limited by short follow-up times.

To more deeply explore the relationship between long-term regular multivitamin use and overall mortality and death from cardiovascular disease and cancer, researchers analyzed data from three large, geographically diverse prospective studies involving a total of 390,124 U.S. adults who were followed for more than 20 years. Participants in this analysis were generally healthy, with no history of cancer or other chronic diseases.

Because the study population was so large and included lengthy follow-up and extensive information on demographics and lifestyle factors, the researchers were able to mitigate the effects of possible biases that may have influenced the findings of other studies. For example, people who use multivitamins may have healthier lifestyles in general, and sicker patients may be more likely to increase their use of multivitamins.

Analysis showed that people who took daily multivitamins did not have a lower risk of death from any cause than people who took no multivitamins. There were also no differences in mortality from cancer, heart disease or cerebrovascular diseases.

Most Americans Don't Know Primary Care Physicians Can Prescribe Addiction Treatment

Results from a national survey indicate that many Americans, 61%, are unaware that primary care physicians can prescribe medications for opioid use disorder, and 13% incorrectly believed that they could not.

The survey, funded by NIH, also found that 82% of the people who reported ever misusing prescription or illicit opioids expressed comfort in going to their primary care physicians for medications for opioid use disorder. Among those who had not misused opioids, a majority, 74%, reported they would be comfortable referring their loved ones to primary care for these medications.

Notably, Black American respondents were most likely to incorrectly believe they could not receive medications for opioid use disorder via primary care, pointing to an important disparity in information that may further impede access to treatment.

The findings suggest there is an important opportunity to increase awareness of these treatments and how to access them—using efforts that employ culturally specific strategies to reach different groups. Decades of research have shown the overwhelming benefit of existing medications for opioid use disorder, such as buprenorphine and methadone.

Primary care physicians can prescribe medications for opioid use disorder.

PHOTO: GORODENKOFF/SHUTTERSTOCK

"Primary care is often people's first point of contact in the health care system and can serve as a crucial setting to talk about addiction and receive lifesaving medications," said NIDA Dr. Nora Volkow. "We need to provide education and support so that patients feel empowered to seek help from their primary care physician and their doctors feel prepared to help them."

Studies estimate that fewer than 2,500 physicians specialize in addiction medicine in the U.S. With approximately 209,000 primary care physicians in the U.S., channeling addiction treatment through primary care could have a significant public health impact.

Researchers at Brown University hypothesized that public health factors may impede access to these medications. They formulated survey questions on people's awareness of and comfort around opioid use disorder treatment in primary care.

In collaboration with NIDA, the researchers added these questions to a survey conducted in English and Spanish by the Justice Community Opioid Innovation Network (JCOIN), led by NIDA and supported through the NIH Helping to End Addiction Long-term Initiative, or NIH HEAL Initiative. JCOIN researchers administered the survey in June 2023, targeting a nationally representative sample of adults ages 18 and older.

Published in *JAMA Network Open*, the study was supported by NIDA, with additional funding from NIGMS.

NIH is testing an experimental Covid-19 nasal vaccine in healthy adults.

PHOTO: SERGEY CHIPS/SHUTTERSTOCK

Trial of Nasal Covid-19 Vaccine Opens

A phase 1 trial testing the safety of an experimental nasal vaccine that may provide enhanced breadth of protection against emerging variants of SARS-CoV-2, the virus that causes Covid-19, is now enrolling healthy adults at three sites in the United States.

NIH is sponsoring the first-in-human trial of the investigational vaccine, which was designed and tested in pre-clinical studies by scientists in NIAID's Laboratory of Infectious Diseases.

"The rapid development of safe and effective Covid-19 vaccines was a triumph of science, and their use greatly mitigated the toll of the pandemic," said NIAID Director Dr. Jeanne Marrazzo. "While first-generation Covid-19 vaccines continue to be effective at preventing severe illness, hospitalizations and death, they are less successful at preventing infection and milder forms of disease. With the continual emergence of new virus variants, there is a critical need to develop next-generation Covid-19 vaccines, including nasal vaccines, that could reduce SARS-CoV-2 infections and transmission."

The study aims to enroll 60 adult participants, ages 18 to 64, who previously received at least three prior doses of an FDA-approved or authorized mRNA Covid-19 vaccine.

Trial sites are Baylor College of Medicine, Texas; the Hope Clinic of Emory University, Ga.; and New York University, Long Island, N.Y. Dr. Hana M. El Sahly at the Baylor Vaccine Research Center is leading the study.

'GOOD TIMES EVERY DAY'

NIH Record Editor Retires

Carla Garnett retired in July 2024 after 41 years of federal service, including more than 30 years with the *NIH Record* as a writer, associate editor and, for the past three years, editor and Editorial Operations Branch chief in NIH's Office of Communications and Public Liaison (OCPL).

Carla Garnett worked with the *NIH Record* for more than three decades.

"Carla's contributions to the success of our office are, quite frankly, immeasurable," said Scott Prince, OCPL deputy director for public information. "She is a powerhouse writer, a thorough and thoughtful editor and, simply put, someone you can always count on no matter the assignment.

"But that's only part of the story. There's a reason she is so admired and respected by her staff, peers and leadership alike. And it's much more than her obvious skills and talents. It's her professionalism, kindness and warmth that make her such a pleasure to work with."

Garnett came to NIH as a high school graduate in the National Junior Fellowship Program. She worked intermittently through college breaks and grad school and ended up spending her career doing work she loved. NIH's mission and the work to communicate about it proved to be irresistible.

"When I first met Carla back in 1983 at the Clinical Center communications office, she was a teenager who worked at NIH under the stay-in-school program," recounted former *NIH Record* Editor Rich McManus. "She worked summers and during school breaks. The first thing I noticed was how competent and good-natured she always was, and how everyone in the office gravitated toward such a center of decency and cheer.

"I was not surprised she decided to work at NIH after college, but I was amazed and gratified that she elected to join me on the staff at the *NIH Record* in 1988. I consider my partnership with her over my tenure at the *Record* as the best thing that ever happened to me professionally and even personally (except for meeting my wife at work!) while I was at NIH.

"She is a great writer, an amazing listener, an incomparable sounding board and such a solid character. Day in and day out for all of those years, she took care of innumerable details, struggled to keep me out of trouble and kept me laughing and smiling nearly every day. I remember thinking many times, I need no more reward than to be in such fine company. We paid ourselves in good times every day, which was priceless to me." R

Clinical Center Mourns Passing of Hospital Board Chair Coots

NIH Clinical Center staff are mourning the passing of Clinical Center Research Hospital Board (CCRHB) Chair Dr. Norvell "Van" Coots. He died suddenly on June 12 at age 65 following a horse-riding accident.

Dr. Norvell "Van" Coots

Coots joined the Clinical Center board in 2021 and served as its chair for the past two years.

Known as an insightful and effective leader, Coots earned his medical degree at the University of Oklahoma Health Science Center and went on to forge a distinguished 36-year career as a U.S. Army officer.

He reached the rank of brigadier general and oversaw key medical care missions for the Army, including serving as commanding general of Regional Health Command Europe and as the command surgeon for the U.S. Army Europe and 7th Army, among other posts.

Following his retirement from military service, Coots led Holy Cross Health in Silver Spring, Md., for seven years before stepping down earlier this year.

Clinical Center CEO Dr. James Gilman described Coots as a dynamic leader who will be missed.

"As CCRHB chair, his board meetings were lively and energetic. He kept board members engaged and interested," Gilman wrote in a memo to staff.

"The NIH Clinical Center lost a true multidimensional friend last week," Gilman added. "But Van would be among the first to remind us that the Clinical Center mission goes on and is larger than any single leader. We honor his legacy by continuing the pursuit of excellence in providing care to the patients, our partners in the clinical research enterprise."

The CCRHB was established in 2016 to oversee efforts to fortify a culture and practice of safety and quality and strengthen leadership for clinical care quality, oversight and compliance at the Clinical Center.

Coots is survived by his wife, Claudia, and two high school-age children.

VOLUNTEERS

Diabetes Study Needs Participants

A study at NIH is recruiting healthy African Americans and African-born individuals to better understand diabetes and heart disease risk in Black populations. If you are African American or African-born Black between ages 18 and 70, you may be eligible to enroll. The study has two visits and compensation is provided. To see if you are eligible, call the Clinical Center Office of Patient Recruitment at 866-444-2214 (TTY users dial 711), ccopr@nih.gov. Ask for study 99-DK-0002. Online: https://go.nih.gov/ozorcOJ.

Study on Hearing Loss Seeks Volunteers

Individuals undergoing cisplatin therapy are at risk for developing significant, permanent hearing loss. Doctors at NIDCD are investigating the effectiveness of atorvastatin (a drug used to lower "bad" cholesterol and fats such as LDL and triglycerides, and increase "good" cholesterol, HDL) at reducing the incidence of hearing loss in patients treated with cisplatin for head and neck cancer. Doctors will compare hearing changes by providing a daily dose of atorvastatin or a placebo to potential volunteers undergoing cisplatin-based chemotherapy to treat head and neck cancer. For more information, call 866-444-2214; ccopr@nih.gov, TTY users dial 711). Online: https://go.usa.gov/xFY69. Refer to study #21-DC-0002.

Study on Sickle Cell and Gene Variation Recruits Volunteers

Dr. Swee Lay Thein, along with a team from NHLBI, is conducting research on the relationship between sickle cell disease and specific variations of certain genes. The study involves analysis of fluid and cells obtained from blood, tissue and other sources. Collected samples will be used to investigate the role of genetic risk factors in sickle cell disease. If you are interested in participating or have any inquiries, contact the Clinical Center Office of Patient Recruitment at 866-444-2214 (TTY users dial 711) or ccopr@nih.gov. Refer to study #04-H-0161. For more information about the study online, go to https://go.nih.gov/6ddLFWJ.

Camp Fantastic 2023 gets "two thumbs up" from all 45 campers who attended.

Kids Enjoy Summer Fun at Camp Fantastic

Each year, Camp Fantastic, founded by Special Love Inc. in 1983, provides a unique summer camp experience for dozens of children who are undergoing treatment for cancer or are in recovery. NIH's Pediatric Oncology Branch coordinates all aspects of care at the camp, with an on-site medical facility staffed by NIH physicians, nurses and volunteers.

From Aug. 4 to 10, campers, volunteers and counselors will make their way to Front Royal, Va., where they'll have the opportunity to enjoy fun activities like musical performances, crafts, swimming and canoeing. These photos from last year's 40th anniversary edition of Camp Fantastic show some of these adventures in action.

Pool time is a highlight of every Camp Fantastic afternoon. **PHOTOS BY MARLEEN VAN DEN NESTE**

At left, Donna Gregory (r), chief of the recreational therapy section in the Clinical Center's rehabilitation medicine department, and fellow counselors (from l) Jones and Holly Senn, share the talent show spotlight with Zay-Zay. At right, competition is fierce in the camp's costume race.

Above, Zan'Leighn "Zay-Zay" Dale of Salisbury, Md., gets a tour of "Farm Day" from counselors Julia Jones and Sarah Rostock. Below, Lucia Smith of Alexandria, Va., makes a fowl friend at Camp Fantastic's Farm Day.

Scout Hughes of Fairfax gets a helping hand at canoeing class.

The Teen Challenge Class celebrates completion of their morning on the high ropes.