

nih record



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Health Advisor Mackay Tackles Tobacco Industry, Global Cancer Control

By Erin Fults

Identified as one of the “three most dangerous people in the world” by the tobacco industry, Dr. Judith Mackay spoke at NIH July 27 as part of NCI’s 12th annual Advances in Cancer Prevention Lecture Series. A senior advisor to the World Lung Foundation and the Bloomberg Initiative to Reduce Tobacco Use, she spoke on “Cancer Control: A Look at the Future.”



Mackay (pronounced “mc-EYE”) described cancer as a “global epidemic,” emphasizing that the future global cancer burden will only increase, for all cancer types and across all regions. The World Health Organization predicts a substantial increase in cancer and cancer-related deaths worldwide by 2030.

As an anti-tobacco advocate, Mackay pointed out the perils of the tobacco epidemic and drew parallels to over-

SEE MACKAY, PAGE 4

Dr. Judith Mackay discusses the future of cancer control.



Actress Debra Winger at NIH on Aug. 5

Fighting Stigma with Theater Addiction Performance Project Brings Ailment to Life

By Susan Johnson

Despite profound societal changes over the past century, the Addiction Performance Project demonstrates that society’s experience of addiction has stayed much the same. In its Aug. 5 appearance at NIH, this NIDA-supported continuing education project combined theater and discussion to educate health care pro-

SEE ADDICTION, PAGE 6

DePinho Gives Aging, Cancer Talk on Sept. 14 in Masur

Dr. Ronald A. DePinho, a distinguished scientist whose work includes major discoveries of fundamental importance to cancer medicine, aging and degenerative disorders, will deliver the 24th annual Florence Mahoney Lecture on Aging on Wednesday, Sept. 14 at 3 p.m. in Masur Auditorium, Bldg. 10.

Until recently, DePinho was director of the Belfer Institute for Applied Cancer Science at Dana-Farber Cancer Institute and a professor of medicine and genetics at Harvard Medical School, where he held the American Cancer Society research professorship. On Sept. 1, he became president of MD Anderson Cancer Center at the University of Texas in Houston.

DePinho’s research program is a leader in the field of molecular genetics and in the development of mouse models of human cancer. The program has constructed a model of how telomeres, stem cells and mitochondria interact with key molecules governing genome integrity, “stemness” and metabolism to provide a

SEE MAHONEY LECTURE, PAGE 8



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briefs

2nd Annual Health & Wellness Expo Set

The 2nd annual NIH Health & Wellness Expo is set for Wednesday, Sept. 7 from 10 a.m. to 4 p.m. and Thursday, Sept. 8 from 11:30 a.m. to 4 p.m. in Natcher Conference Center. The expo is free and open to all employees. Events include an expert panel on weight loss, nutrition and physical activity, fitness classes and demonstrations, health screenings and health & wellness-related information from the NIH institutes. The NIH Health and Wellness Council in partnership with the Office of Research Services and the Division of Amenities and Transportation Services hosts the expo. For more information, contact Chris Gaines at (301) 451-3631 or gainesc@mail.nih.gov.

NIH Institute Relay Planned, Sept. 22

The 28th NIH Institute Challenge Relay will be held on Thursday, Sept. 22 at 11:30 a.m. in front of Bldg. 1. Relay teams consist of five runners, each whom runs a 1/2-mile loop around Bldg. 1. All institutes, centers and contractors are invited to enter as many teams as they wish. Each team must have men and women runners, with at least two runners of the same sex. The team with the fastest five will win the Allen Lewis NIH Memorial Trophy.

There is a \$10 entry fee per team. Group leaders should email Randy Schools at schoolsr@mail.nih.gov with team name (be as creative as you can) and list of participants. Volunteers are also needed; call the R&W office at (301) 496-6061 or email Schools if you can help.

ORS Sponsors Safety, Health Photo Contest

Great photography tells a story. Now you have the chance to share your photo with the NIH community. The Division of Occupational Health and Safety, ORS, is holding the "In Focus! Safe Workplaces for All" photo contest. Whether photography is your passion, your hobby or just an occasional pastime, you are invited to participate and capture an image displaying workplace safety and health.

The contest will show your perspective of workplace safety and health in any way you choose. The goal is to help reduce personal injuries and illnesses; educate and underscore the importance of safety; foster innovation to create shared solutions; and promote community involvement by relying on your talent, imagination and creativity to raise awareness of workplace safety and health.

Prizes will be awarded for artistic value and ability to raise awareness. First, second and third place photographs will be framed and prominently displayed throughout NIH. The three winners will receive a framed certificate from NIH leadership. The winning photos will also be featured on the ORS, DOHS web site.

The submission period remains open until Friday, Sept. 30. To learn more about the contest, rules, panel of judges, selection process and to submit your photo, visit www.ors.od.nih.gov/sr/dohs/HealthAndSafety/infocus/Pages/default.aspx.

SharePoint Site Launched for Intern/Fellow Rotation

The NIH administrative training committee recently announced the NIH Administrative Intern/Fellow Rotation SharePoint site. This web tool replaces the hardcopy rotation request form and was designed to make it easier to match institutes/centers and administrative interns/fellows for future and ongoing rotation opportunities. Through this tool, ICs can post rotation opportunities and review intern/fellow résumés and profiles. Interns/fellows can review rotation opportunities and create profiles highlighting interests, skill sets and competencies to be developed during the program.

The site was developed by a workgroup of NIH ATC members and current and former interns. The site <https://ohr.od.nih.gov/rt/SitePages/Home.aspx> went live on Aug. 1. Email questions to intern-spssupport@mail.nih.gov.

Graduate Student Research Conference Set, Oct. 17-18 at Natcher

The 6th National Graduate Student Research Conference will be held Oct. 17 and 18 at Natcher Conference Center, from 8 a.m. to 5:30 p.m. each day. The conference will bring 150 advanced graduate students from across the U.S. to NIH for a scientific meeting that offers future leaders in biomedical research the opportunity to share their own work and learn about advances being made in the NIH Intramural Research Program. The event also provides an opportunity for NIH investigators to recruit conference participants to join research groups as postdoctoral fellows. Conference attendees were selected competitively from an applicant pool of about 450.

The conference agenda combines a keynote and scientific talks presented by NIH postdoctoral fellows with poster sessions. NIH investigators and current postdoctoral fellows can discuss potential collaborations and new research directions and learn about novel techniques and approaches.

For more information visit https://www.training.nih.gov/events/recurring/nih_national_graduate_student_research_festival.

nih record

Savor the Pioneer Award Symposium, Sept. 20-21

On Sept. 20-21, hear some of the most innovative scientists in the country present their work at the seventh annual NIH Director's Pioneer Award Symposium. The meeting will highlight bold, inventive approaches to some of today's most important challenges and questions in biomedical and behavioral research.

Here are five reasons to attend this special event:

Exciting Atmosphere. Part of the NIH Common Fund's High Risk Research program (<http://commonfund.nih.gov/highrisk/index.aspx>), the Pioneer Award supports scientists doing research that is high-risk but potentially transformative. The meeting will kick off with the announcement of the 2011 Pioneer Award recipients.

Scientific Mosaic. The symposium offers a broad range of science in a compact time-frame. Thematically grouped platform presentations by the 2006 "graduating class" of Pioneer Award recipients, who are completing their 5-year grants, will highlight topics from the microbiome to suspended animation. Selected recipients of the NIH Director's New Innovator Award, which goes to highly innovative scientists in early stages of their careers, will also give talks.

Contacts and Conversations. Poster sessions with receptions plus breaks provide ample opportunities for dialogue and networking with the more than 150 award recipients.

It's Nearby. The gathering will be held near campus at the Doubletree Bethesda Hotel & Executive Meeting Center, 8120 Wisconsin Ave.

It's Easy. Attendance is free, open to all and registration is not required. Come for the whole event or drop in just for the sessions that especially interest you. The agenda, with links to research summaries and publications, is available at <http://commonfund.nih.gov/pioneer/Symposium2011>. Platform presentations will also be videotaped and available for later viewing at <http://videocast.nih.gov>.

For reasonable accommodation or more information, call Shan McCollough at (301) 594-3555 or email pioneer@nih.gov.

Former NIH Director Healy Dies at 67

Dr. Bernadine Healy, who became the 13th NIH director in April 1991 and was the first woman to head the agency, died Aug. 6 of a brain tumor at age 67. She had battled brain cancer for 13 years.

Healy served as NIH director for 2 years, during which she launched the \$625 million Women's Health Initiative and established the Shannon Awards, which fostered innovative approaches in research. She also established a policy that all NIH-funded clinical trials on conditions that affect both genders must include both men and women.

"I am deeply saddened by the death of former NIH Director Bernadine P. Healy, and will greatly miss her courageous leadership on behalf of biomedical research," said NIH director Dr. Francis Collins. "Dr. Healy will be long remembered for her visionary efforts that transformed the landscape of women's health research."

Healy came to NIH from the Cleveland Clinic Foundation, where she had been a research director and cardiologist for 6 years. She had also been deputy director of the Office of Science and Technology Policy at the White House and a professor of medicine at Johns Hopkins University.

Healy was president of the American Heart Association in 1988-1989 and was a member of the Institute of Medicine. A native of Queens, N.Y., she had earned her medical degree at Harvard Medical School.

After leaving NIH, she was dean of Ohio State University Medical School (1995-1999) and president and chief executive officer of the American Red Cross (1999-2001). She was also a columnist for *U.S. News & World Report*. In 1994, she ran unsuccessfully for the U.S. Senate from Ohio.

Collins, whom Healy recruited from the University of Michigan to head the nascent Human Genome Project at NIH, said, "I will be forever grateful to Dr. Healy for her vigorous support of the public effort to sequence the human genome and her keen insights into the potential of genomic research for revolutionizing medicine."

In remarks she made for an NIH exhibit on pioneering women doctors, Healy said, "All of us, I believe, in our hearts are humanitarian. And how wonderful to be in a career that in almost any dimension of it—whether you're the doctor at the bedside, or the scientist in the laboratory, or the public health doc tracking down the latest epidemic—that you are doing something that is pure in its fundamental purpose, which is helping another human being."

Healy is survived by her husband, Dr. Floyd D. Loop, and two daughters.



Dr. Bernadine Healy, at NIH in 2005

MACKAY

CONTINUED FROM PAGE 1

all cancer control. “Tobacco has been a sophisticated political issue for a longer time than some of the other cancer risk factors, such as obesity, alcohol and unhealthy diets, where there is also a need to deal with...the sugar and alcohol industries,” she said. “We’ve learned for the last 40 to 50 years that we’re dealing with a very dangerous opposition in the form of the tobacco industry. It has forced us to become political.”

Cigarettes are smuggled on a massive scale and, according to WHO, by the tobacco companies themselves in order to evade restrictions and taxes. This allows companies to flood the markets with cheap cigarettes that reach even more young smokers.

Mackay explained how fighting the tobacco industry has revealed that a medical approach isn’t enough for tobacco and cancer control. The number of smokers worldwide is increasing and tobacco deaths are expected to rise over the next two decades,

from the approximately 5 million deaths now up to 8 million-10 million in 2035.

A wide range of allies must be recruited in this fight, according to Mackay, including the World Bank, governments and environmental, women’s and other NGO (non-governmental organizations) groups. “The principal concern of governments is their misconception that without tobacco, their economies will suffer. This isn’t true. Tobacco is an overall debit to the economy, but governments just see the taxes coming in. Having partners who can look at the tax structure, for example, is very vital,” Mackay said.

Fighting the tobacco industry has also revealed that some prevention strategies do not have a substantial impact on public health. In one vivid example, Mackay said two of the most widely used prevention strategies—health education in schools and banning the sale of tobacco to minors—are the two with the strongest support from the tobacco industry: because they are the least effective.

“Thirty years from now, people won’t look back wondering why we were so tough on tobacco; they’ll look back and wonder why it took so long,” Mackay said.

Like the difficulties posed by the far-reaching tobacco industry, overall cancer control has its own obstacles. A key difference can be seen in low- and middle-income countries, which are a primary focus for Mackay. These countries bear a greater burden in cancer and cancer deaths, but preoccupation with other diseases that may



Mackay said the tobacco industry favors health education in schools and bans on sales of tobacco to minors precisely because those two approaches are ineffective.

PHOTOS: BILL BRANSON

cause far fewer deaths can take the focus away from cancer control.

Still, some progress has been made. Mackay pointed to the increase in hepatitis B immunization worldwide as well as the presence of cancer organizations in most countries. She also remarked on the United Nations’ upcoming summit on non-communicable diseases, which are responsible for 60 percent of deaths worldwide. Mackay said the outcome of the summit will be critical, as it will have implications for funding, reporting, targets and more in the realm of non-communicable diseases, which include cancer.

Mackay emphasized the crucial role of government and the need for international laws in advancing public health. With opponents such as the tobacco industry, international efforts and even relationships with customs agencies are critical. Cigarettes are smuggled on a massive scale and, according to WHO, by the tobacco companies themselves in order to evade restrictions and taxes. This allows companies to flood the markets with cheap cigarettes that reach even more young smokers.

Mackay took time to highlight the impact of the United States and NIH on producing sound science and research that is used across the world. “Research done in the United States has a global reach,” Mackay said. “Most countries just don’t have the resources to do anything like what you’re doing here.”

But while there is much work to be done by governments, enacting taxation policies and legislation, Mackay underscored the need to draw on the power of the media, social media, effective advocacy targeting and even workplace policies such as establishing tobacco-free premises.

“The responsibility for the future cancer epidemic is across the whole world. There are tremendous inequalities and challenges that lie ahead for treatment, but any major reduction in cancer deaths will come from prevention, not cure,” Mackay said. “The fight for cancer control will continue.”

**Note the Changes This Year
2011 Flu Vaccination Schedule Set**

The annual influenza vaccine clinic sponsored by the Office of Research Services and the Clinical Center will kick off on Monday, Sept. 19 with some changes from years past.

All NIH staff and contractors with a valid NIH identification badge will be provided the seasonal flu vaccine free of charge on the seventh floor of the CRC atrium area or at an off-site location.

Vaccinations will be given based on the first letter of employees' last names. Dress in clothing that will let you quickly expose your upper arm; changing areas will not be available. There will be no vaccine clinics specifically for health care workers.

In 2008, the Clinical Center mandated that all staff who have patient contact—nurses and doctors but also clerks, housekeepers and others—must be vaccinated against influenza or complete a declination form. Immunization of health care workers has been proven to save patient lives, especially in immune-compromised patients.

In previous years, health care workers could decline the vaccine based on preference. Beginning this fall, these staff members must be vaccinated unless they present documentation of a medical contraindication from a non-NIH physician.

An allergy to raw egg, previous allergic reaction to the flu vaccine or its components or a history of the neurological disorder Guillain-Barre syndrome excuse health care workers from immunization. Staff must provide a written statement of religious exemption if applicable. Patient care staff may be vaccinated off-site, but must produce documentation from the site of immunization to satisfy the mandate.

“The decision to get the flu vaccine has many downstream impacts. It not only protects you from flu, it protects your patients, your families and your coworkers,” said Dr. Tara Palmore, CC deputy hospital epidemiologist. “If you think of it as an opportunity to save someone’s life or prevent them from a very serious illness, then it’s really hard to think of anything other than a serious risk that would outweigh that.”

Palmore wants to set the record straight on the influenza vaccine. People cannot get flu from the vaccine that NIH administers because the shot is an inactivated virus, she said. FluMist, a nasal spray immunizer, does contain a live virus, which is why NIH does not purchase it. Health care workers should

not get FluMist off-site because they cannot have patient contact for 7 days due to risk of transmission.

Immunity of the influenza vaccine lasts 6 to 8 months, so it is important to get vaccinated every year, said Palmore. She also encourages frequent hand-washing and staying home from work if you do fall ill, especially with a cough.

Health care workers should be vaccinated before Oct. 15. Qualifying employees and contractors will be notified by email that they fall under the mandate. If you believe you qualify as patient care staff but do not receive an email, check with your supervisor or contact the CC Hospital Epidemiology Service. For more information, visit <http://foiltheflu.nih.gov>.

2011 Flu Shot Schedule

Flu immunizations will be provided to NIH employees and contractors. NIH photo ID required.

ON CAMPUS (Bldg. 10, CRC, 7th Fl. Atrium, East Side)

First Letter, Last Name	Date	A.M.	P.M.
NOPQRS	Monday 9/19	8-11	1-3:30
IJKLM	Tuesday 9/20	8-11	1-3:30
EFGH	Wednesday 9/21	6-11	1-7
TUVWXYZ	Thursday 9/22	8-11	1-3:30
ABCD	Friday 9/23	8-11	1-3:30
TUVWXYZ	Monday 9/26	8-11	1-3:30
ABCD	Tuesday 9/27	8-11	1-3:30
IJKLM	Wednesday 9/28	8-11	1-3:30
EFGH	Thursday 9/29	8-11	1-3:30
NOPQRS	Friday 9/30	6-11	1-7
<i>HOLIDAY</i>	<i>Monday 10/10</i>	<i>CLOSED</i>	<i>CLOSED</i>
ABCD	Tuesday 10/11	8-11	1-3:30
EFGH & IJKLM	Wednesday 10/12	8-11	1-3:30
NOPQRS	Thursday 10/13	6-11	1-7
TUVWXYZ	Friday 10/14	8-11	1-3:30

WEEKEND HOURS: Saturdays 9/24 & 10/1, Open to All Employees 6-9 a.m. & 6-9 p.m.

OFF-CAMPUS SITES

Location	Date	A.M.	P.M.
RKL I 6705 Rockledge Dr. Rm. 5054	10/3 & 10/4	8:30-11	1-3
EPN 6130 Exec. Blvd. Rm. 103	10/5 & 10/6	8:30-11	1-3
NSC 6001 Exec. Blvd. Conf. Rm. B 1st Fl.	10/7	8:30-11	1-3
Twinbrook III 12725 TB Pkwy. Rm. 2E06	10/17	8:30-11	1-3
Poolsville	10/18	8:30-10:30 Bldg. 103	11 a.m.-12:30 p.m. Bldg. 110



ADDICTION

CONTINUED FROM PAGE 1

Above, l:

Actors (from l) Bob Braswell, Arliss Howard, Debra Winger and Sara Waisanen perform at NIDA's Addiction Performance Project, held Aug 5 on campus.

Above, r:

Expert panelist Dr. Paul Christo, pain medicine specialist at Johns Hopkins Medical School, gives his reaction to the actors' readings. Listening is Dr. Nora Volkow, NIDA director.

Below:

Winger, Volkow and David Mineta, deputy director of demand reduction, White House Office of National Drug Control Policy, converse prior to NIDA's Addiction Performance Project.

PHOTOS: ERNIE BRANSON

viders about addiction. The goals of the APP are to remove the stigma of drug abuse, promote dialogue between patients and caregivers and engender compassion for patients with the disease.

Act III of acclaimed playwright Eugene O'Neill's *Long Day's Journey into Night* is the cornerstone of each appearance of the project, which has traveled around the country to professional meetings and medical schools.

A group of four acclaimed actors (including the Academy Award-nominated Debra Winger) read characters based closely on O'Neill's own family, whose devastating experiences with morphine and alcohol addictions are brought to life in the play.

In Act III, set in 1911, addiction finally cracks open rifts in the Tyrone family. Infused with despair and shame, the dialogue is a volatile mix of accusations alternating with professions of love and denial mixing with uncomfortable truths.

Winger read the part of Mrs. Mary Tyrone, who became addicted to the morphine she was prescribed after giving birth to Edmund—just as O'Neill's mother was addicted after his birth.

"It kills the pain," Mary says about her "medication for rheumatism...You go back until at last

you are beyond its reach. Only the past when you were happy is real."

At the end of the tumultuous act, Mary goes upstairs alone to take the drug. She hopes that she will accidentally kill herself with an overdose, explaining, "I wouldn't do that on purpose; there would be no forgiveness."

Other actors included Winger's real-life husband Arliss Howard as Mary's husband James, Bob Braswell as Edmund and Sara Waisanen as servant Cathleen.

The performance elicited strong emotions. Panelist and NIDA director Dr. Nora Volkow told the audience from her personal experience that the play's heartbreaking depiction of family life with addiction "is not an exaggeration."

Stigma is a strong current throughout *Long Day's Journey into Night*, particularly in narcotic addiction. O'Neill may have been under the weight of the same stigma when he completed "this play of old sorrow, written in tears and blood," sealed it in wax and forbade its publication until 25 years after his death.

Volkow emphasized that the health care providers in the audience were "in a unique position to change" this stigma, which continues today. "Addiction is not something we choose," she said.

For panelist Dr. Paul Christo, pain medicine specialist at Johns Hopkins Hospital, the reading evoked thoughts of a physician friend who struggled with addiction. Christo's presence in his friend's life through treatment and relapse made a huge difference, Christo said. He emphasized that "we can't drop our patients with addictions."

Discussing the reading, the medical professionals and others in the audience commented on its relevance to contemporary medical practice, including its depictions of the social acceptability of alcohol abuse and society's stereotypes





On hand at the APP performance were (from l) Winger, Volkow, Mineta and Dr. Kenneth Warren, acting director, NIAAA.

about people with addictions.

“The challenge is that many doctors feel very uncomfortable with the possibility of addiction,” said Volkow. “They’ll say, “This woman looks respectable. I don’t want to ask her about it.”

Christo agreed, adding, “Addiction has no boundaries. I’ve learned that I can’t guess who will develop an addiction.”

In his practice, Christo proactively monitors the patients who are taking narcotics, observing whether they meet goals and even counting their pills. “The struggle is confronting them when you think they’ve lost control,” he said, emphasizing that this confrontation is a positive thing, an opportunity for the patient to get treatment.

NIDAMED, NIDA’s medical professional resource program, provided a range of products at the event. Attendees picked up patient materials, including waiting room posters on drug use disclosure and drug-specific handouts. Professional resources included simple screening tools and guides on working with addicted patients.

“NIDA believes that we can change addiction in the U.S.,” Volkow said. Currently, some 22 million Americans require treatment for a substance abuse problem, but fewer than 15 percent receive treatment. “Of course we can do better. What is required is the will to do so and the participation of the health care system.”



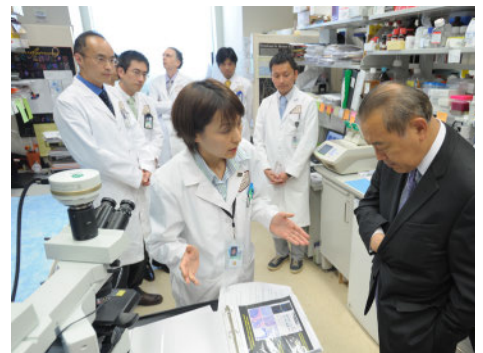
Japanese Ambassador Tours NCI Branch

Japanese Ambassador Ichiro Fujisaki (above, r) recently toured the NCI Urologic Oncology Branch. He was briefed on the work of Japanese scientists conducting research in the UOB.

In the top photo, Dr. Masaya Baba discusses his work on a novel kidney cancer gene mouse model and the potential use of this model in the development of novel approaches to therapy for patients affected with kidney cancer.



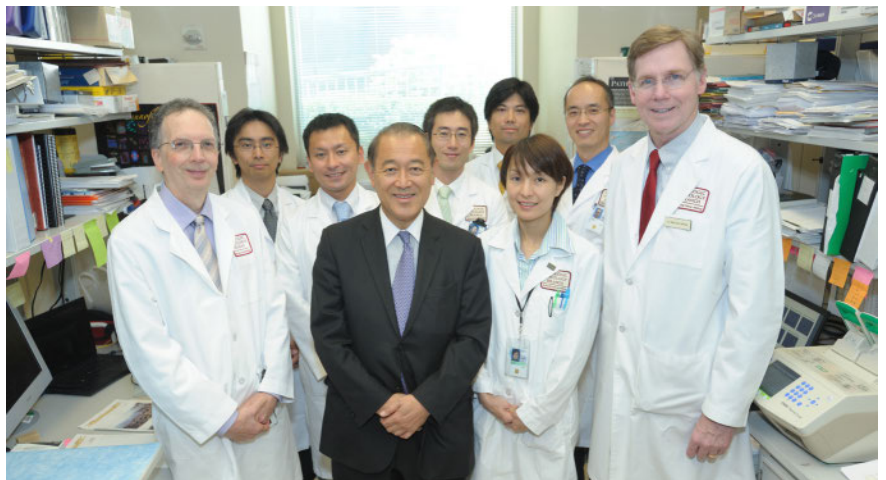
Right, top: With UOB chief Dr. W. Marston Linehan (r), Fujisaki views microscopic slides of kidney cancer caused by a gene whose pathway is being unraveled by UOB scientists from Japan.



Right, bottom: Dr. Yukiko Hasumi reviews her work on the FLCN kidney cancer gene pathway with Fujisaki.

Below, meeting with Fujisaki are (from l) Dr. Len Neckers, Dr. Soichiro Yoshida, Dr. Hisashi Hasumi, Dr. Naoto Miyajima, Dr. Shinji Tsutsumi, Hasumi, Baba and Linehan.

PHOTOS: ERNIE BRANSON



MAHONEY LECTURE

CONTINUED FROM PAGE 1



At his Sept. 14 lecture, Dr. Ronald DePinho will present “Genotoxic Stress Meets Mitochondria: Integrating Aging Mechanisms.”

framework for how diverse factors contribute to aging and age-related disorders.

His work is of interest to the cancer and aging research communities. More recently, his studies caught the eye of the popular press; on Jan. 6, DePinho appeared on *The Colbert Report* to explain his research about reversing the aging process in mice. With an exchange that featured irreverent remarks by host Stephen Colbert, DePinho’s good humor and clear explanations introduced viewers of the comedy show to chromosomes, shortened telomeres and engineered mice.

At his Sept. 14 lecture, DePinho will present “Genotoxic Stress Meets Mitochondria: Integrating Aging Mechanisms.” The talk is part of the NIH Director’s Wednesday Afternoon Lecture Series and is sponsored by NIA and the NIH Office of the Director.

DePinho received his undergraduate degree at Fordham University, where he majored in biology. He went on to earn his M.D. degree, with distinction in microbiology and immunology, from Albert Einstein College of Medicine. He completed his research training at Columbia Presbyterian Hospital.

His independent scientific career began at Albert Einstein where he was the Feinberg senior scholar in cancer research. There, he launched the first shared mouse genome engineering facility, enabling the community to model and study the genetic basis of cancer.

DePinho, a former member of the board of directors of the American Association for Cancer Research, was chair of the advisory boards for the NCI Mouse Models of Human Cancer Consortium and more recently of the advisory committee of the Cancer Genome Atlas Project.

Notable honors and awards presented to him include the Albert Szent-Gyorgyi Prize for Progress in Cancer Research (2009), Harvey Lecture (2007), Helsinki Medal (2007), Albert Einstein College of Medicine Distinguished Alumnus Award (2004) and American Cancer Society Edith A. Pistorino Research Professorship (2004). In 2010, DePinho was elected to the American Academy of Arts and Sciences and in 2004 to the Institute of Medicine of the National Academy of Sciences. A prolific author, he has published more than 250 peer-reviewed journal articles as well as books, chapters and reviews.

DePinho is a founder of several biotechnology companies focused on cancer therapy and diag-

nostics including Aveo Pharmaceuticals, Eden Therapeutics, Metamark Genetics and Karyopharm Therapeutics. He has also played an advisory role for oncology portfolios of several large pharmaceutical companies.

There will be an opportunity to meet the speaker at a reception following his lecture. 🗨️



Above, Tyler Killian displays the DNA model he constructed from Twizzlers and gum drops, while his father Keith Killian studies the double helix. Kaan Kayaalp is at right.



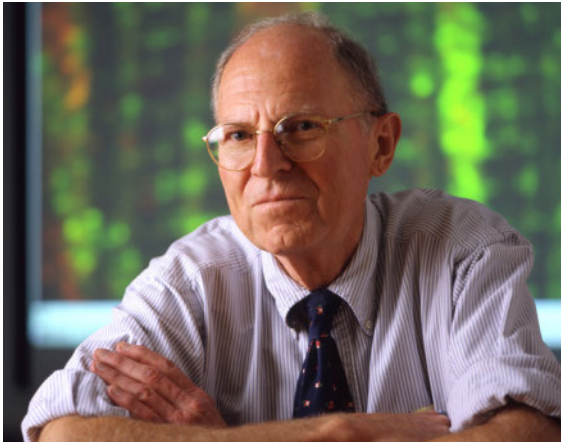
At right, Abbie Cannon performs a filtration step in her preparation of DNA from a strawberry.

‘Adventure in Science’ Needs Teachers

Adventure in Science (AIS), a non-profit science education program for children, is planning its 19th year at NIH and is looking for volunteer teachers. The program, which meets on Saturday mornings October through March in Bldg. 10, is designed to show 8- to 11-year-olds the fun of science using hands-on activities—from building (and launching) model rockets to dissecting frogs. AIS teachers are mostly volunteers from the NIH community, from postdocs to institute directors. Further information about teaching in AIS can be found at <https://www.adventureinscience.org/about-us>.

If you are interested in volunteering, contact Peter Kellman, (301) 496-2513, kellmanp@nhlbi.nih.gov or Ed Max, (301) 827-1806, edward.max@fda.hhs.gov. Enrollment is currently full for children in the program beginning this fall. Registration for the following year’s program will occur next spring and will be announced on the adventureinscience.org web site.

milestones



Dr. Paul Plotz retired after more than 40 years at NIH.

NIAMS's Plotz Retires After Four Decades

After more than 40 years of clinical and basic scientific investigation at NIH, Dr. Paul Plotz, a rheumatologist and chief of the NIAMS Arthritis and Rheumatism Branch, has retired.

"Paul's legacy at NIH will include not only the advances he has made in the understanding and treatment of autoimmunity and inflammatory muscle disease," said NIAMS director Dr. Stephen Katz, "but also the impact he has had on so many people, from the patients he treated to the clinicians and researchers he has mentored."

Many of these people attended "A Vocation in Medicine: Autoimmunity, Autophagy, Muscle Disease and Human Rights," a symposium held recently honoring Plotz. The audience learned about his groundbreaking work in immunology and muscle disease and how it shaped the future directions and scientific approaches of his trainees and collaborators across the country.

Dr. Kanneboyina Nagaraju, associate director of the Center for Genetic Medicine at Children's National Medical Center, captured the feelings of many at the symposium when he spoke of his own debt to Plotz. "I thank Dr. Plotz from the bottom of my heart," he said, "not only for making me a good scientist, but also for guiding me into becoming a fair and reasonable, family-oriented and loving person. It is very hard for me to mimic the mentoring I had from you, but I know what the standards are."

Plotz's research career began at Harvard Medical School, which he attended after receiving an undergraduate degree in physics from Harvard College. After an internship and residency at Beth Israel

Hospital, he moved to the Washington, D.C., area. He has worked ever since at NIH, with the exception of several years in London.

Plotz's early work was largely in the biology of immune complexes. Later, with his fellows Drs. William Seaman and Robert Kimberly, he described the major hepatic and renal toxicities of aspirin and related prostaglandin synthetase-inhibiting drugs. With Dr. Bruce Schar Schmidt, he developed an extracorporeal affinity perfusion system to remove bilirubin and other toxins from the circulation.

Since the early 1980s, Plotz has focused on the study of inflammatory muscle disease, driven by a wish to better understand the autoimmune phenomena associated with rheumatic disease. Myositis served originally as a model for basic immunologic studies, but Plotz and his colleagues have now worked on many aspects of myositis. In recent years they have been trying to cure Pompe syndrome, a muscle disease that closely mimics myositis.

Plotz's retirement has prompted best wishes but not goodbyes. He will continue his work as a scientist emeritus at NIAMS. 🌐



Employees gather outside Bldg. 31A after the region's most noticeable earthquake in memory shook campus Aug. 23.

Rare Earthquake Rattles Bethesda Campus, Aug. 23

It is so not Bethesda to host an earthquake, but shortly before 2 p.m. on Aug. 23, employees experienced a rare temblor that emptied buildings for about an hour as engineers assured that structures were safe to re-enter after the 5.8-magnitude event.

Fortunately, it was a beautiful day and NIH'ers milled and mingled outdoors while inspectors roamed their buildings. Many checked cell phones, which, in some cases, were inoperable; some people took laptops out to picnic tables and continued to work. But almost every conversation was about some aspect of the quake: file cabinets shook, hearts raced during the 30-second event, some wondered if it was the subway, or a terrorist attack.

According to the Office of Research Services, quake-related incidents were minor: a small buckle in Bldg. 31B was an expansion crack and meant the building was acting as designed and is fine; there was a brief power outage in the ACRE, Bldg. 10; a water line broke between Bldgs. 32 and 18 (near NLM); and there were some drywall and flooring cracks, which the Office of Research Facilities was addressing.

Employees were permitted to go home early and the lanes out of campus were temporarily packed with cars. But only a day later, the quake took second place to anticipation of nature's next challenge—the arrival of Hurricane Irene.

Any Mix of Injected or Spray Flu Vaccine Shields Toddlers

Children younger than 3 years old receive the same protective antibody response from the recommended two doses of licensed seasonal influenza vaccines regardless of whether the two doses are injected by needle, inhaled through a nasal spray or provided through one dose of each in any order, according to NIAID-funded research at vaccine and treatment evaluation units.

Doctors usually give young children two matching vaccines and one goal of the study was to determine whether giving two different types of vaccines works just as well. In addition, the researchers found that young children who received at least one dose of the nasal spray vaccine—a live, attenuated influenza virus vaccine—made a wide array of immune T cells. Stimulating broad T-cell responses may be important for protection against many diverse flu strains. The report appeared online in the *Journal of Infectious Diseases*.

New Model of ALS Developed

By isolating cells from patients' spinal tissue within a few days after death, NIH-funded researchers have developed a new model of the paralyzing disease amyotrophic lateral sclerosis (ALS). They found that during the disease, cells called astrocytes become toxic to nerve cells—a result previously found in animal models but not in humans. The new model could be used to investigate many more questions about ALS, also known as Lou Gehrig's disease.

ALS can run in families, but in the majority of cases, it is sporadic, with no known cause. The researchers derived astrocytes from patients who had succumbed to either type of ALS and found that the cells secrete toxic factors that cause nerve cells to degenerate. A similar mechanism has been found in mouse models of ALS.

"The mouse models capture a type of familial ALS that accounts for only 2 percent of all cases. The field has begged for new disease models that can provide a clear window into sporadic ALS," said senior author Dr. Brian Kaspar at the Nationwide Children's Research Institute in Columbus, Ohio.

The research is reported in *Nature Biotechnology* and was funded in part by NINDS. ALS is characterized by the death of motor neurons, which are muscle-controlling nerve cells in the spinal cord. As these neurons die, the body's voluntary muscles weaken and waste away.

Cigarette Smoking Implicated in Half of Bladder Cancers In Women

Current cigarette smokers have a higher risk of bladder cancer than previously reported and the risk in women is now comparable to that in men, according to a study by NCI. The report was published Aug. 16 in the *Journal of the American Medical Association*. This latest research uses data from more than 450,000 participants in the NIH-AARP Diet and Health Study, a questionnaire-based study that was initiated in 1995, with follow-up through the end of 2006.

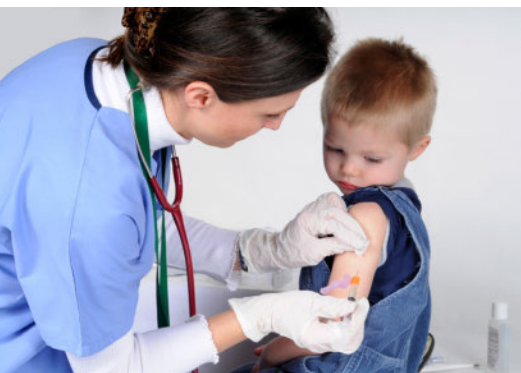
While previous studies showed that only 20 to 30 percent of bladder cancer cases in women were caused by smoking, these new data indicate that smoking is responsible for about half of female bladder cancer cases—similar to the proportion found in men in current and previous studies.

The increase in the proportion of smoking-attributable bladder cancer cases among women may be a result of the increased prevalence of smoking by women, so that men and women are about equally likely to smoke, as observed in the current study and in the U.S. population overall, according to CDC surveillance.

eMERGE Moves Closer to Tailored Treatments Based on Patients' Genome

Researchers in the Electronic Medical Records and Genomics (eMERGE) network will receive \$25 million over the next 4 years to demonstrate that patients' genomic information linked to disease characteristics and symptoms in their electronic medical records can be used to improve their care. The grants are from NHGRI, which supports research by the network's seven institutions and coordinating center.

"Our goal is to connect genomic information to high-quality data in electronic medical records during the clinical care of patients. This will help us identify the genetic contributions to disease," said NHGRI director Dr. Eric Green. "We can then equip health care workers everywhere with the information and tools that they need to apply genomic knowledge to patient care." —compiled by Carla Garnett



Children younger than 3 receive the same protective antibody response from the recommended two doses of licensed seasonal influenza vaccines regardless of whether the doses are injected by needle, inhaled through a nasal spray or provided through one dose of each in any order, according to NIAID-funded research.



Study Recruits Volunteers With or Without Neck Pain

Are you a healthy individual with neck pain for 3 months or less? If you are between ages 18 and 65, you may be able to participate in a neck pain study and receive a comprehensive cervical musculoskeletal examination. Healthy volunteers are also needed. Email NeckPainStudy@gmail.com or call (301) 451-7514 and mention protocol 02-CC-0245.

Study of Effects of Exercise on Cortisol

NICHHD is looking for men ages 18-30 who run more than 28 miles a week or exercise for less than 1 hour a week. Participants will provide urine, saliva and blood samples as outpatients. Participants will take study medication on four afternoons and come for additional testing. Healthy normal weight men are encouraged to call 1-800-411-1222 (TTY 1-866-411-1010) and refer to study 11-CH-0078. Compensation is provided for a completed study.

Women's Health Studies Seek Volunteers

Are you a woman in good health? Healthy women ages 18-65 are needed to participate in NIMH outpatient research studies on the relationships between sex hormones, stress and mood. A significant number of women have feelings of irritability, sadness or anxiety during a reproductive hormone change. If you are a woman who does not experience mood changes, call (301) 496-9576 (TTY 1-866-411-1010). Mention protocols 81-M-0126, 88-M-0131 and 03-M-0138. Compensation is provided.

Have Postpartum Depression?

If you suffered from postpartum depression (PPD) following the birth of any of your children, consider participating in this 8-month outpatient research study at the Clinical Center. The NIMH study is designed to examine the role of hormones in the onset of PPD. To participate, you must be between ages 18-50 with regular menstrual cycles and not taking any medications. Call (301) 496-9576 (TTY 1-866-411-1010) and mention protocol 95-M-0097. There is no cost to participate and compensation may be provided.

Women Needed for Study of Cortisol-Blocking Med

NICHHD is looking for women ages 45 to 70 who have had menopause, are overweight, have abnormal glucose and triglyceride (form of "bad" cholesterol) levels and are not on any estrogen-containing hormone therapy. After an initial screening visit for general health assessment, participants will undergo treatment with a cortisol-blocking medication (mifepristone) or a non-active pill (placebo) for 7 days. Each participant will take both study agents with a gap of 6 to 8 weeks between the two. Testing before and after treatment with the study medications will include blood-drawing over 24 hours, urine collection, an intravenous glucose tolerance test and 1- to 2-day overnight inpatient stay. Compensation will be provided. For more information, call 1-800-411-1222 (TTY 1-866-411-1010) and refer to study 11-CH-0208.



Knowledge Management Program participant Linda Coleman (l) thanks her mentor Felicia Shingler at the program's graduation ceremony.

Excellence through Mentoring

Knowledge Management Program Graduates 2010-2011 Class

NCI recently held an awards ceremony honoring participants in its Knowledge Management Program, a year-long mentoring program sponsored by the Office of Workforce Development. This program is in its eleventh year and has more than 140 alumni.

The class of 2010-2011 featured mentors and mentees in grants management, administration, human resources management, intramural research laboratories and the Blacks In Government (BIG) organization. The program allows mentees at all levels to pair with experts to learn leadership techniques, increase problem-solving skills and enhance current strengths.

Mentees read books on a variety of leadership topics, attend monthly brownbag sessions and meet at least once a month for 1-hour mentoring sessions. During the brownbags, mentees discussed such topics as enhancing communication techniques, reducing stress, increasing motivation and building effective teams. Also during the brownbags, mentees gave 3-minute presentations about their office, their role in the office and how their office helps NCI meet its mission.

Mentees completed the program recently with a potluck lunch and mentor-appreciation ceremony. Program plaques were presented to all mentors and mentees. Joy Gibson of CSR and Linda Kupfer of FIC received the Exceptional Mentor Award.

Program coordinator Shannon Connolly said that mentees and mentors have had a very successful year because of their strong determination to advance excellence through mentoring.

Linda Coleman, a mentee, said the program inspired her to set new career goals. One of her goals was to make a career change from committee management specialist to event planner. One highlight of Coleman's experience allowed her to coordinate a supervisor's day for her mentor, Felicia Shingler. Shingler was recently elected as BIG national secretary. She wanted to thank her supervisors for supporting her in this extracurricular activity as well as in her job as the NIH activity codes manager.

In coordinating this event, Coleman employed newly honed communication skills, collaborated with various NIH offices such as the Ethics Office and networked with middle-management leaders.



Commissioned Corps Holds Promotion Ceremony

Family members, friends, coworkers and fellow Public Health Service officers recently celebrated the promotion of 26 NIH employees at the ninth annual NIH PHS Commissioned Corps Promotion Ceremony in Masur Auditorium.

Radm. Helena Mishoe, director of NHLBI's Office of Research Training and Minority Health and NIH representative on the Surgeon General's policy advisory council, presided over the ceremony and provided opening remarks.

Radm. Kerry Nessler, PHS chief nurse officer and director of HRSA's Office of Global Health Affairs, gave remarks on behalf of Surgeon General Regina Benjamin.

Nessler commended the accomplishments of the promoted officers and their contributions to the missions of NIH and PHS. She reminded all officers of their noble mission to protect, promote and advance the health and safety of our nation.

Nessler and NIH liaison Cdr. Tiffany Edmonds then joined the newly promoted officers on stage for the changing of shoulder boards to denote the new positions.

Mishoe closed the ceremony after recognizing recently retired NIH officers, new NIH officers called to active duty during the past year and an NIH Commissioned Corps Officer Student Training and Extern Program participant.



Above, l: Radm. Helena Mishoe (r), NIH representative on the Surgeon General's policy advisory council, welcomes guest speaker Radm. Kerry Nessler, PHS chief nurse officer.

Above, r: Nessler, director of HRSA's Office of Global Health Affairs, gives remarks on behalf of Surgeon General Regina Benjamin.

Right: Capt. Linda Scott is joined on stage by her family for the changing of her shoulder boards.

PHOTOS: ERNIE BRANSON



Promoted officers include: **Medical Officers**—promoted to captain: Soju Chang, NIAID; Edward Doo, NIDDK; Jeffrey Schulden, NIDA; **Nurse Officers**—promoted to captain: Lisa Barnhart, NIAID; Janice Davis, CC; Michele Nehrebecky, NHGRI; Linda Scott, NIAID; promoted to commander: Robyn Bent, NCI; Alice Fike, NIAMS; Angel Garced, CC; Michael Krumlauf, CC; Ann Marie Matlock, CC; Hyejeong Root, NIAID; promoted to lieutenant commander: Robin Godwin, CC; Yolawnda McKinney, CC; Janice Oparah, CC; Gloria Shuler, NCCAM; **Scientist Officers**—promoted to captain: Richard Gussio, NCI; promoted to commander: Candido Alicea, NCI; John Stansberry, OD; promoted to lieutenant commander: Charlene Sydnor, OD; **Environmental Health Officer**—promoted to lieutenant commander: Jeremy Mason, OD; **Therapist Officer**—promoted to captain: Bart Drinkard, CC; **Health Service Officers**—promoted to captain: George Carter, NCI; promoted to commander: Helen Cox, NIDDK; Chauha Pham, CC.