

## 'A NEW CHAPTER'

### NIH Holds Groundbreaking Ceremony for New CC Wing

BY ERIC BOCK

NIH marked the start of construction for the Clinical Center's (CC) Surgery, Radiology and Laboratory Medicine wing at a groundbreaking event on May 16.

Scheduled to open in 2029, the wing will house three departments—perioperative medicine, radiology and imaging sciences, and laboratory medicine—and National Cancer Institute (NCI) and National Heart, Lung and Blood Institute (NHLBI) labs and patient service areas.

The event was held at the site of the new structure, near the building's northwest



ORF Director Dan Wheeland speaks at the groundbreaking ceremony.

PHOTO: CHIA-CHI CHARLIE CHANG

corner at Convent Drive and Center Drive. Representatives from NIH, HHS and industry came together to celebrate what Acting NIH Director Dr. Lawrence Tabak called “a new chapter in the history of the CC, our country's ‘House of Hope.’”

While on a day-long visit to NIH, HHS

SEE **GROUNDBREAKING**, PAGE 6

### Biden Nominates Bertagnolli as Next NIH Director

President Biden announced his intent on May 15 to nominate NCI Director Dr. Monica Bertagnolli as director of the National Institutes of Health. A world-renowned surgical oncologist, cancer researcher, educator and physician-leader, Bertagnolli began working as the 16th director—and first woman to serve as director—of the National Cancer Institute in October 2022.

“Dr. Bertagnolli has spent her career pioneering scientific



Dr. Monica Bertagnolli

SEE **BERTAGNOLLI**, PAGE 10



Police Week observed at NIH. See story, p. 12.

### Genomic Science Has Come a Long Way in 70 Years

BY ERIC BOCK

Scientists have made great advances in genomics since the discovery of the DNA double helix 70 years ago, said Dr. Francis Collins during the recent Louise



Dr. Francis Collins

M. Slaughter National DNA Day lecture.

“This is the most exciting time you can imagine in biomedical research and genomics, because of the potential to transform medicine,” said Collins, former NIH and NHGRI director and advisor to President Biden for special projects.

Collins's lecture concluded NHGRI's

SEE **DNA DAY**, PAGE 4



U.S. Congresswoman Judy Chu

### Annual AANHPI Health Research Conference Marks Heritage Month

The NIH Asian American, Native Hawaiian and Pacific Islander Health Scientific Interest Group (AANHPI-HSIG) recently hosted the second annual AANHPI Health Research Conference virtually. More than 300 registrants joined the event to celebrate AANHPI heritage, highlight achievements both in research and of AANHPI scientists,

SEE **HERITAGE**, PAGE 8

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**Annual Safety, Health & Wellness Day Set, June 29**

NIH Safety, Health and Wellness Day will be held on Thursday, June 29, from 10 a.m. to 2 p.m. on the south lawn and patio of Bldg. 10, Bethesda campus. Everyone is welcome. Enjoy the activities and learn about safety, health and wellness opportunities at NIH.

This popular event—held in person for the first time since 2019—will be presented by the Office of Research Services, Office of Research Facilities, occupational safety and health committee, and the Laboratory Sustainability Group, along with 2023 co-sponsor, the National Institute of Mental Health.

The focus this year is to enhance employee awareness of mental health, wellness, chemical safety, roadway and pedestrian safety and preventing/reducing work-related injuries and illnesses.

More than 30 table displays will feature a wide variety of health and wellness topics including safety and health promotion exhibits and games, safety seminars, ergonomic and CPR demonstrations, physical fitness activities, nutrition, total worker health and more.

Mark your calendars and attend this fun and informative event with a coworker. Plan to stay for lunch and purchase menu items prepared by specialty food trucks that will be on site.

For more information, visit <https://go.nih.gov/TdfwgXb> to view the program.

Sign language interpreting and CART services are available upon request. Individuals needing either service should email [roxy.grossnickle@nih.gov](mailto:roxy.grossnickle@nih.gov). Requests should be made at least five days in advance. To access Telecommunications Relay Services, call 711.



The NIH Community Market, sponsored by the NIH Recreation and Welfare Association, has returned.

PHOTO: ERIC BOCK

**Community Market Back For Summer**

The NIH Community Market, sponsored by the NIH Recreation and Welfare Association, has returned to campus on Tuesdays, from 10 a.m. to 2 p.m. on the south lawn of the Clinical Center. See list of onsite vendors at <https://tinyurl.com/34v42sbw>.

While at the market, don't forget to visit the food trucks for lunch between 11 a.m. and 2 p.m. The schedules and menus of trucks can be found at <https://govemployee.com/nih/food-trucks/>.

As a reminder, the food trucks will not operate in poor weather conditions. A weather check will be conducted at 6 p.m. the preceding day. If the forecasted weather shows the chance of precipitation is greater than 70% during the serving time, the trucks will not operate the following day.

Keep up to date with the latest food truck information, such as menu changes and cancellations due to weather conditions, by joining the R&W ListSERV at <https://go.nih.gov/OjSnMoq>.

**Annual Hike Day Set, June 15**

The 15th Annual NIH Take-A-Hike Day will take place on Thursday, June 15, starting from Bldg. 1's patio at 11:30 a.m., rain or shine. Participants will run, walk & roll the 3.25-mile perimeter of the Bethesda campus. Other NIH sites may also take part. For more information and to register, visit <https://go.nih.gov/3c5q45P>. To volunteer to help with the event or to sponsor a break station along the route, email [orswebp@ors.od.nih.gov](mailto:orswebp@ors.od.nih.gov).



Take a Hike Day 2022

PHOTO: CHIA-CHI CHARLIE CHANG



**New Truck Checkpoint Erected**

A new truck inspection station has been erected on Center Drive outside of the Safra Family Lodge. Trucks arriving for construction of the new Surgery, Radiology and Laboratory Medicine wing of the Clinical Center will be checked in there. For details about the new wing, see story on p. 1. For updates on NIH traffic patterns, visit <https://go.nih.gov/QBQlqFg>.

PHOTO: MICHELE LYONS

UNITE UPDATE

Turning Listening into Action

From its inception, UNITE has emphasized the importance of listening to each other—informally and formally—and internally and externally.

The results of these efforts to listen and understand are evident in recently posted reports and initiatives.

The *UNITE External Listening Sessions Summary Report* covers comments from the extramural community regarding diversity, equity, inclusion (DEI) and any structural racism that may exist within the biomedical and behavioral research ecosystem. The report summarized sessions that engaged 1,295 participants.

An analysis of the comments resulted in five cross-cutting themes: systemic inequities across the biomedical research ecosystem, challenges in career pathways and workforce, practices and policies as barriers to equity, challenges in health disparities research and challenges in addressing health care equity and health outcomes.

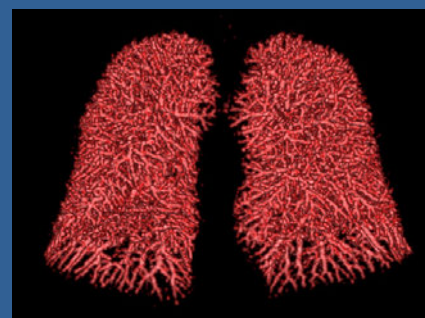
Initiatives that address these themes and more include the Research With Activities Related to Diversity (ReWARD), which provides R01 grants to institutions to support scientists who significantly contribute to diversity, equity, inclusion and accessibility (DEIA) and who are not currently supported by NIH research project grant funding. In addition, the Instrumentation Grant Program for Resource-Limited Institutions aims to enhance research capacity and educational opportunities at resource-limited institutions by providing funds to purchase modern, scientific instrumentation.

Strengthening Research Opportunities for NIH Grants (STRONG) will provide grants to institutions with limited resources to help them assess their research capacity-building needs and develop action plans to meet those needs. And in collaboration with the Office of the NIH Chief Officer for Scientific Workforce Diversity, UNITE launched a prize competition to recognize effective strategies for enhancing DEIA in research environments: the

NIH Institutional Excellence in DEIA in Biomedical and Behavioral Research Prize Competition.

For details on the new report and other key initiatives, see the April and May Co-Chairs' Corner on the UNITE webpage: <https://go.nih.gov/TRNfRVm>.

About UNITE: UNITE acts as a think tank to promote equity, generate ideas, catalyze new actions and address structural racism that may exist within NIH and throughout the biomedical and behavioral workforce. **R**



ON THE COVER: *Computed tomography 3D rendering of the lungs of a person who is recovering from Covid-19. There are no visually apparent abnormalities in the blood vessels. Using special tools, however, researchers at NHLBI are making progress in analyzing the vascular structure of the lungs in a way that reveals hidden impairments in the gas exchange capacity of post-Covid lungs. The findings could help doctors evaluate how blood vessels change in long Covid (<https://www.nhlbi.nih.gov/covid/long-covid>) and might lead to new ways to diagnose and treat the condition.*

IMAGE: HAN WEN, IMAGING PHYSICS LABORATORY/NHLBI

Indonesia Minister of Health Visits

Acting NIH Director Dr. Lawrence Tabak welcomed Minister of Health of the Republic of Indonesia Budi Gunadi Sadikin to NIH on May 23. The two met in Wilson Hall and agreed to formalize discussions for further cooperation between the Indonesian Ministry of Health (MOH) and NIH through a Letter of Intent.

Also taking part in the discussion were the MOH director general of pharmaceutical and medical devices, the MOH director for global health and health technology, representatives from the Embassy of Indonesia along with NIH leaders from the Fogarty International Center, National Institute of Allergy and Infectious Diseases and Advanced Research Projects Agency for Health (ARPA-H).



Acting NIH Director Dr. Lawrence Tabak (l) talks with Minister of Health of the Republic of Indonesia Budi Gunadi Sadikin.

PHOTO: JUDITH COAN-STEVENS



NIAID Clinical Director Dr. Cliff Lane (l) was one of several NIH'ers to meet with Sadikin and other guests from Indonesia's Ministry of Health. At right, the group assembled in Wilson Hall for science and health discussions.

PHOTOS: EMBASSY OF THE REPUBLIC OF INDONESIA



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## DNA Day

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National DNA Day 20th anniversary symposium, which was held in Lipsett Amphitheater on Apr. 25. The event commemorated two milestones: the 20th anniversary of the Human Genome Project's completion and the 70th anniversary of the discovery of the DNA double helix.

The day featured panel discussions about the evolution and future of genomics research, greater impacts of genomics on society and the wide array of careers in genetics and genomics as well as a friendly competition to determine who is the Greatest of All Time (GOAT) NHGRI director.

On Apr. 25, 1953, Dr. James Watson and Dr. Francis Crick published an article in *Nature* revealing their discovery of DNA's physical structure. The DNA molecule resembled a ladder twisted in a helix-like shape. Their ability to put together the structure depended on experimental data produced by Dr. Rosalind Franklin, an X-ray crystallographer.

Her photo—known as “Photograph 51”—helped scientists learn more about DNA's three-dimensional structure. She passed away before Watson and Crick were awarded the Nobel Prize for their discovery.

“Whenever we talk about DNA, I think about Rosalind,” Collins said, who now works as a senior investigator in NHGRI's Center for Precision Health Research and heads its molecular genetics section.

In the decades after their discovery,

scientists began to track down the genetic causes of diseases. Without today's computational power and access to a reference human genome sequence, they had a really hard time.

In the 1980s, for instance, it took Collins and a team of scientists seven years to discover the genetic mutation that causes cystic fibrosis. Finding the gene was like “looking for a needle

in a haystack.” Today, by comparison, a graduate student with the right technology and family DNA samples could complete the task in a week.

Researchers could not take the same arduous approach for the thousands of other diseases that are even more rare than cystic fibrosis. “We had to have a better plan,” Collins noted.

In 1988, a National Academy of Sciences special committee released a report that provided a blueprint for mapping and sequencing the human genome. The document recommended short- and long-range goals for an effort that became known as the Human Genome Project (HGP). Over the course of the project, more than 2,400 scientists from six countries participated in the effort.

Before attempting to sequence the human



Former NHGRI Director Dr. Francis Collins (r) and current NHGRI Director Dr. Eric Green (c) square off in a battle to determine the Greatest of All Time. NHGRI social media specialist Jenny Montooth (l) refereed the competition.

PHOTOS: ERNESTO DEL AGUILA

genome, the committee suggested that scientists sequence other genomes of model organisms that aren't as big, such as bacteria, yeast and roundworm. Building up capability and inventing better technology piqued the interest of many investigators.

Three years after the project officially began, Collins joined NIH to manage the HGP. “It has been a wild ride,” he said. “During the first few years we worked on those model organisms, we also worked on building maps—both physical maps and genetic maps—of the human genome.”

By 1996, the project was beginning to sequence human DNA. Those involved had to decide what to do with it. They agreed to the “Bermuda Principles,” which required that data be publicly available within 24 hours of having been error-checked.



At left, NCATS Director Dr. Joni Rutter (c) holds up a copy of *Science* magazine from Feb. 15, 2001 during a panel discussion about genomics research across NIH. Green (from l) moderated the panel that featured NHLBI Director Dr. Gary Gibbons, Rutter, NICHD Director Dr. Diana Bianchi and *All of Us* Research Program CEO Dr. Joshua Denny. At right, NHGRI-ASHG Genetics and Education Fellow Dr. Nancy Sey shares her experience celebrating DNA Day in Ghana.



NHGRI Acting Deputy Director Dr. Vence Bonham (l) leads a discussion with Dr. Sandra Soo-Jin Lee of Columbia University (c) and Dr. Genevieve Wojcik of the Johns Hopkins Bloomberg School of Public Health about the benefits and challenges of using population descriptors in genomics and biomedical research.

“If you’re going to do a large, complicated community-beneficial project, then the community needs to benefit by having rapid access to the data,” Collins noted. “This has now become the norm for genomic science.”

In the years since, other large-scale genomic projects have followed the example HGP set: bring scientists together, let them work on difficult problems and make data publicly available as quickly as possible.

In June 2000, a first draft of the human genome was announced at the White House. On Apr. 25, 2003, all of the goals of the HGP were successfully completed. An amazing group of scientists worked hard to accomplish the feat, Collins said. They rolled up their sleeves and devised many creative solutions over the years.

“I will always be grateful to the scientists and for the opportunity to have served as the director of the International Human Genome Sequencing Consortium,” he noted.

The HGP also invested in efforts to anticipate and prepare for ethical issues that might arise from the knowledge of our own DNA instruction book. An early concern was genetic discrimination: Once genetic information became more accessible, employers and health insurance companies could use that data against people.

After 12 years working with Congress, the Genetic Information Nondiscrimination Act became law in 2008. It protects individuals

from employment and health insurance discrimination based on their DNA. U.S. Congresswoman Slaughter, for whom the lecture is named, was the leading advocate for the legislative protections.

“This was a really big deal,” Collins said. “This is not to say that we’ve fully addressed all of the issues with genetic discrimination—because they are still out there and there are even

threats to this particular law by employers.”

Another critical issue addressed by the ELSI (ethical, legal and social issues) program of the HGP, and continuing to be a high priority for NHGRI, is the relationship between race and genomics. Based on a recent National Academies of Sciences,

Engineering and Medicine report, researchers must rethink and justify how they use race, ethnicity and ancestry as population descriptors in genomics and biomedical research. They need to state the rationale behind what classification systems or group labels they use in their research.

New lab tools, computational methods and strategic approaches have allowed scientists to build upon the work of the

HGP. Last year, for example, the Telomere to Telomere (T2T) consortium published the first complete, gapless sequence of a human genome.

Genomic technology has had many other profound consequences. For example, scientists can now ask individual cells what genes are expressed and which parts of chromatin are open for business.


“If you want to understand life, you need to understand cells,” Collins said. “Until recently, we haven’t been able to ask one cell, ‘Hey, what are you doing?’ We can now do that.”

The consequences for disease gene discovery have been profound. In 1990, there were only 68 rare diseases with a known

molecular basis, Collins said. Researchers now know the molecular basis of 6,800 rare diseases. Unfortunately, however, only about 500 such disorders have an FDA-approved treatment. There is a huge gap between diagnostic and therapeutic ability. Technologies such as gene editing are beginning to offer hope to these patients. However, much work lies ahead.

The future of genome research is profoundly promising, but these advances won’t happen without “the people to make it happen,” Collins concluded. “This future requires a vibrant and diverse genomics workforce.”

The annual Slaughter lecture honors the life and legacy of the late New York legislator, who was a strong advocate for genomics research. She was also responsible for passing the 2003 resolution in the U.S. House of Representatives that created National DNA Day. NHGRI established the lecture in her name in 2018.

A recording of the symposium is available at <https://go.nih.gov/IYkk2XV>. 



An attendee wears ACGT DNA base pairs genes socks. ACGT is an acronym for the four types of bases found in a DNA molecule: adenine, cytosine, guanine and thymine.



### FEVS Open Through June 30

This year’s Federal Employee Viewpoint Survey (FEVS) continues through Friday, June 30.

The government-wide survey, managed by the Office of Personnel Management (OPM), gives eligible federal employees an opportunity annually to provide confidential feedback about their work satisfaction; the organization and its leaders; diversity, equity, inclusion and accessibility; and work/life balance.

FEVS is available to full- and part-time permanent, non-seasonal employees, on board on or before Nov. 30, 2022. Contractors are not eligible.

Eligible employees should check their email inbox for this header:

**From:** Federal Employee Viewpoint Survey-HE  
**Subject:** 2023 OPM Federal Employee Viewpoint Survey

For details, visit <https://hr.nih.gov/workforce/fevs> or email [NIHFEVS@nih.gov](mailto:NIHFEVS@nih.gov).



At left, a rendering of the new wing. At right, NIAID Acting Director Dr. Hugh Auchincloss (l) chats with NCI Director Dr. Monica Bertagnolli after the ceremony.

## Groundbreaking

CONTINUED FROM PAGE 1

Deputy Secretary Andrea Palm attended the ceremony. She toured labs and received briefings from leadership (see sidebar, p. 7).

For nearly 70 years, patients and scientists have worked together to advance NIH's mission, Tabak noted. This partnership has resulted in a long list of scientific discoveries, including the first cure of a solid tumor with chemotherapy, gene therapy, use of AZT to treat AIDS and cancer immunotherapy.

"Research at the CC addresses the public health challenges facing the United States and the world," said Tabak. "Modernizing our facilities will ensure that we can continue to provide high-quality patient care alongside cutting-edge biomedical research."

Breaking ground on the new wing has been a long time coming, said NIH Deputy Director for Management Dr. Alfred Johnson. Thanks to the support of NIH and

HHS leadership "we're ready to hand off the baton from the planning and design phase to the construction phase."

The planning phase started in 2011 when former CC Director Dr. John Gallin spoke to the facilities working group about the hospital's deteriorating infrastructure. Soon after, Dan Wheeland, director of the Office of Research Facilities, and his team began working with architecture firms to draw up plans for a hospital addition.

The design team faced several constraints, recalled Wheeland. The departments of perioperative medicine and radiology and imaging sciences both need their own separate floors. However, there wasn't enough land to do that.

After many meetings, PowerPoint presentations and 30 designs, "we developed a concept that involves an addition and then a renovation," Wheeland noted. The selected design allows the hospital to continue its

operations as efficiently as possible and limits disruptions around campus roads and infrastructure.

NCI labs, workspaces and offices currently located in the Clinical Research Center's west laboratory wing will relocate to the upper floors of the new wing once it's built, he said. The existing wing will be renovated so there is continuous space for the two departments. The new floors will run from the existing wing into the new addition. NHLBI's Catheterization Laboratory will occupy a lower level.

Many of the treatments studied in the CC have never been tried before, said Dr. Nina Schor, NIH deputy director for intramural research. "When you do that kind of research, you cannot always anticipate the outcomes and the effects of those treatments."

Locating the three departments in the same wing allows researchers to combine



Breaking ground are (from l) NIH Deputy Director for Management Dr. Alfred Johnson, NIH Deputy Director for Intramural Research Dr. Nina Schor, ORF Director Dan Wheeland, Clinical Center CEO Dr. James Gilman, HHS Deputy Secretary Andrea Palm, NIH Acting Director Dr. Lawrence Tabak, NIH Acting Principal Deputy Director Dr. Tara Schwetz; NIH Acting Associate Deputy Director Dr. Courtney Aklin and NCI Chief of Surgery Dr. Steven Rosenberg.

PHOTOS: CHIA-CHI CHARLIE CHANG

their expertise to study those effects. The arrangement allows a multidisciplinary team to treat patients over many years.

The new addition will let the hospital carry out its mission, said CC CEO Dr. James Gilman. Right now, ORF staff “go above and beyond the call of duty” to keep a poorly designed part of the hospital running past its useful life. He acknowledged ORF’s Donna Phillips and George Edwards for their “extraordinary efforts” to keep an ailing infrastructure operational and fix what breaks down quickly.

The department of laboratory medicine, for instance, regularly deals with flooding. Staff protect their equipment and continue to perform their duties even in poor conditions.

“While we’re proud of their perseverance and resilience, we do look forward to the time when the lab staff’s entire focus can be on the crucial tests that patients and their physicians order,” Gilman said.

Dr. Karen Frank, chief of the department of laboratory medicine, Dr. Elizabeth Jones, chief of the department of radiology and imaging sciences, and Dr. Andrew Mannes, chief of the department of perioperative medicine, helped raise support for the new addition. Gilman said they became “expert at describing the perils and pitfalls associated with current facilities objectively and without hyperbole while still supporting NIH science and providing safe care to the patients.”

The operating room suites in the hospital are too small to take advantage of the newest surgical technologies, he noted. “Imaging capabilities—magnetic resonance imaging and computerized tomography—are vital to the successful completion of complex surgical procedures here at NIH.” However, they need lots of space. The new wing will provide that.

Ever since he finished his training 48 years ago, NCI Chief of Surgery Dr. Steven Rosenberg has wanted to apply the best of modern science to patients in need. He’s been able to do that at the CC.

“The Clinical Center is a hospital dedicated to providing the best of today’s medicines and committed to creating the medicine of tomorrow,” he concluded. “Today, we celebrate the origins of this important new addition and the impactful achievements that will occur within its walls.”



HHS Deputy Secretary Andrea Palm (third from r) meets with NIH leadership in the CC’s Medical Board Room to discuss FEVS and HR.

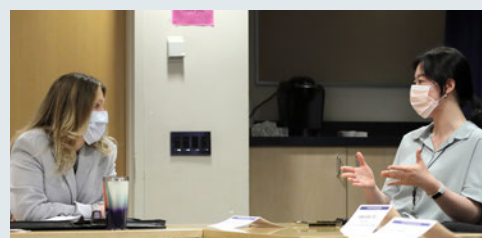
## HHS Deputy Secretary Visits

HHS Deputy Secretary Andrea Palm attended the groundbreaking ceremony for the Clinical Center’s Surgery, Radiology and Laboratory Medicine wing.

“I’m super grateful to be here today and for being part of the HHS family,” she said. “We all work together to push forward our mission.”

The new addition illustrates the importance of funding information technology and facilities infrastructure for the public. When it opens, the new wing will be critical for the nation’s health and wellbeing, she said.

While here, Palm met with NIH finalists for the 2023 Samuel J. Heyman Service to America medals and leadership from several institutes and centers. She also toured National Institute of Mental Health labs.



Above, Palm chats with 2023 Sammie finalist Dr. Arang Rhie. Below, CC CEO Dr. James Gilman gives a brief overview at the hospital’s model to show the SRLM wing site.



Rendering of new surgical wing

## Heritage

CONTINUED FROM PAGE 1

and discuss health research needs in the community.

The two-day conference involved NIH-wide and HHS-wide planning and was sponsored by the National Cancer Institute (NCI). The event brought together some of the world's leading scientific and regulatory experts in AA and NHPI research from government, academia and the community. For program details, visit <https://go.nih.gov/KIZcUP6>.

NCI's Dr. Dan Xi, AANHPI-HSIG chair, opened the conference by acknowledging May as Heritage Month, outlining the event's purpose and highlighting HSI contributions (published in *Cell & Bioscience*, July 2022) to establishment of the first-ever National Strategy to Advance Equity, Justice and Opportunity for Asian American, Native Hawaiian and Pacific Islander Communities by the White House, which is the only NIH-led project.

Establishment by AANHPI-HSIG of an NIH honorary talk, "U.S. Representative Judy Chu AANHPI Mental Health Lecture," was announced to acknowledge the first congressional resolution recognizing May 10 as AA and NHPI Mental Health Day. Chu, who represents California's 28th district, introduced the resolution in 2021. She spoke during the conference via pre-recorded message.

Several speakers gave opening remarks, including Dr. Lawrence Tabak, acting NIH director; Dr. Eliseo Pérez-Stable, director of the National Institute of Minority Health and Health Disparities; Dr. Michael Chiang, director of the National Eye Institute; Dr. Noni Byrnes, director of the Center for Scientific Review; and Dr. Walter Koroshetz, director of the National Institute of Neurological Disorders and Stroke (NINDS).

Keynote addresses were presented by Dr. Rena D'Souza, director of the National Institute of Dental and Craniofacial Research, and Dr. Chau Trinh-Shevrin, a professor at New York University. They gave perspectives on health disparities and bias/racism. The morning session recording is

archived at <https://go.nih.gov/23u7z1c>.

To celebrate the 80th anniversary of the Magnuson Act, which repealed the Chinese Exclusion Act, Xi collaborated with the Office of NIH History and Stetten Museum to highlight AANHPI scientists and staff who worked at NIH during the 1940s to 1960s. Dr. Emma Teng of MIT gave an overview of the history and the effect of the exclusion act and its repeal.

Research talks included one on cancer and one on Alzheimer's disease and four scientific sessions.

Dr. Jin Qin of CDC's Division of Cancer Prevention and Control described the unique distribution of cancers and disproportionately lower rates of cancer screening among Asian American and Pacific Islander populations and highlighted the importance of disaggregated data. Qin also discussed how to establish a sustainable infrastructure to promote cervical cancer screening and manage-

ment in the U.S. Affiliated Pacific Islands.

A cancer genetic ancestry session included presentations by four experts in the field—Drs. Jian Carrot-Zhang of Memorial Sloan Kettering Cancer Center, Alexander Gusev of Harvard Medical School, Jun Yang of St. Jude Children's Research Hospital and Elad Ziv of the University of California, San Francisco (UCSF).

Genetic ancestry can influence cancer risk and response to cancer therapies (such as immunotherapy and chemotherapy). The speakers collectively called for more investigations on the interactions of environment and social determinant factors with genetic ancestry. The need for international collaborations and study of larger cohorts across different subgroups of ethnic populations and across the country were discussed.

A session on pancreatic cancer featured four speakers—Dr. Channing Der of the University of North Carolina at Chapel Hill, Dr. Senthil Muthuswamy and Dr. Christine Alewine of NCI, and Dr. Wendy Setiawan of the University of Southern California. They

covered diverse topics including new targeted therapies against the Ras oncogenic signaling pathway, the use of patient-derived tumor organoids for personalized medicine, the latest progress in antibody drug conjugates in pancreatic cancer clinical trials and new insights on risk and cancer health disparity for pancreatic cancer among different ethnic groups.

Presentations highlighted advances in understanding of pancreatic cancer from molecular details to population-level risks that will enable better and more equitable treatment in the future.

Day 2 started with Dr. Lisa McGuire, lead epidemiologist on CDC's Alzheimer's disease team, who provided an overview of the prevalence of Alzheimer's Disease and its associated risk factors in the United States. McGuire closed with a call to action: dementia is a public health issue and there are effective interventions to protect brain health.

A session on cellular mechanisms of neurodegenerative diseases included four scientists.

Dr. Sara Banderes-Ciga of NINDS, Dr. Li-Huei Tsai of MIT, Dr. Li Gan of Cornell Medicine and Dr. Priyanka Narayan of the National Institute of Diabetes and Digestive and Kidney Diseases presented recent work on specific risk factors for Alzheimer's disease and related

dementias. Discussions provided not only a global view on the genetic architecture of Alzheimer's and related etiology, but also detailed mechanisms on how certain risk factors influence human physiology specifically to cause neurodegeneration and dementia.

The risk factor and epidemiology session presented research on environmental, occupational and social factors and their impact on health outcomes in different AANHPI



Dr. Dan Xi



Dr. Senthil Muthuswamy



Dr. Priyanka Narayan





Dr. Jongeun Rhee

ethnic groups, such as Chinese, Korean and Vietnamese communities. The session emphasized the need for epidemiologic studies to address disparities in cancer outcomes and risk factors within AANHPI communities.

Dr. Thu Quach of Asian Health Services presented occupational exposures and related health outcomes among Vietnamese nail salon workers and her community-based intervention studies to improve their health. Dr. Iona Cheng of UCSF shared the effect of air pollution and neighborhood characteristics, e.g., racial and ethnic segregation, on cancer disparities in Japanese and Native Hawaiian individuals. Dr. Brittany Morey of UC-Irvine presented how stress and sleep disturbance affect self-reported health in Chinese and Korean immigrants.

Finally NCI's Dr. Jongeun Rhee introduced how per- and polyfluoroalkyl substances, forever chemicals, are widespread in the blood of AANHPI individuals and affect kidney cancer risk among Japanese and Native Hawaiian individuals.

A community research and outreach session led by Drs. Adelaida Rosario of HHS's Office of the Assistant Secretary of Health and Maria Paz Carlos of HRSA highlighted the importance of stimulating more research in the U.S. Pacific territories, recognizing that work outside of the U.S. mainland comes with particular needs and challenges and requires the highest level of cultural competency in every regard.

Va'a Tofaeono of the American Samoa Community Cancer Coalition presented on the NIMHD-funded INSPIRE program, noting that outcomes can be significant when capacity resources are supplied and interwoven with the indigenous cultural infrastructure.

Dr. Doan Singh of the Food and Drug Administration highlighted the commitment, efforts, and impacts of the U.S. Public Health Service Corps Asian Pacific American Officers Committee (APAOC) group on advancing health equity in the AANHPI community.

The conference continued to provide recommendations for the National Strategy and HHS Goal 5:

- Dismantle stereotypes and racism
- Pursue data disaggregation and data equity in health disparity research from disease incidence, therapeutic response to survivorship
- Understand biological mechanisms of genetic ancestry and its interaction with environmental, occupational and social determinant factors

- Continue community engagement and community-led research
- Continue culturally competent workforce development
- Increase leadership opportunities and international collaboration.

Recordings from the conference will be available at HSI: [go.nih.gov/GoIBA07](https://go.nih.gov/GoIBA07).

Dan Xi, Yihong Ye, Maria Paz Carlos, Jane Henley, Ji Luo, Jongeun Rhee, Adelaida Rosario, Doan Singh, Jacqueline Vo contributed to this article. **R**

## NIH HISTORY, A 'MARBLED CAKE' First Harden Lecture Launches Annual Event, Seminar Series

The Office of NIH History and Stetten Museum (ONHM) launched a new talk, the Victoria A. Harden Lecture in NIH History, that will be delivered annually. Held May 4 in Wilson Hall, the lecture was the first event of ONHM's newly introduced seminar series, History and Context.

The inaugural lecture, "Telling NIH History, Story by Story," was delivered by the talk's eponym, ONHM founding director Harden, who began working at NIH in 1984 at the National Institute of Allergy and Infectious Diseases. By 1986, she had been chosen as ONHM's first director during the celebration of NIH's centennial.

"There will never be such a thing as one single exhaustive history of NIH," she emphasized.

"Should anyone try to squeeze all the government policy, all the laboratory and clinical research, all the training of young scientists and all the staff contributions into one narrative, it would be so large and so



At the first lecture named in her honor is Dr. Victoria Harden joined by Dr. Nina Schor (c), NIH deputy director for intramural research, and Dr. Kim Pelis, director of the Office of NIH History and Stetten Museum.

PHOTO: RICHARD WYATT

detailed that it would be unreadable. The story of NIH is like a marbled cake: One can cut through it in many different ways to tell, in detail, specific parts of the story while not losing sight of the larger context—the cake as a whole."

Each writer's unique perspective, with its individual biases and emphases, adds to the richness of NIH history, Harden pointed out.

"Just choosing which facts to include in a history means leaving out others," she said. "So the notion of some all-encompassing, definitive true history is unrealistic. Historians of the future will begin with all the different accounts and other evidence that we leave behind. This fact is of key importance so that NIH history continues to be written."

Harden retired in 2006, but has continued to serve as a special volunteer, recording oral histories with veteran NIH officials and advocating for preservation of important artifacts and narratives.

"Historians always have the last word," she concluded. "To make sure historians in the future know about NIH contributions to human health, [ONHM] needs your



Harden and Dr. Richard Wyatt, deputy director of the Office of Intramural Research

PHOTO: GABRIELLE BARR

help. I implore you to think about donating photographs, artifacts and instruments, about sitting for an oral history, about writing your own memoirs."

The full lecture is archived online at <https://videocast.nih.gov/watch=49384>.—Carla Garnett

**Bertagnolli**

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discovery and pushing the boundaries of what is possible to improve cancer prevention and treatment for patients, and ensuring that patients in every community have access to quality care,” Biden said in a statement. “As [NCI director], Dr. Bertagnolli has advanced my Cancer Moonshot to end cancer as we know it. She has brought together partners and resources from different sectors to launch groundbreaking efforts in cancer prevention and early detection, a national navigation program for childhood cancers, and additional programs to bring clinical trials to more Americans. [She] is a world-class physician-scientist whose vision and leadership will ensure NIH continues to be an engine of innovation to improve the health of the American people.”

Before coming to NCI, Bertagnolli had served as the Richard E. Wilson professor of surgery in the field of surgical oncology at Harvard Medical School, a surgeon at Brigham and Women’s Hospital and a member of the Gastrointestinal Cancer Treatment and Sarcoma Centers at Dana-Farber Cancer Institute. She is a member of the National Academy of Medicine, a past president and chair of the board of directors of the American Society of Clinical Oncology, and has served on the board of directors of the American Cancer Society and the Prevent Cancer Foundation.

Bertagnolli grew up on a ranch in southwestern Wyoming, the daughter of first-generation Italian and French Basque immigrants. She graduated from Princeton University with a bachelor of science in engineering degree and attended medical school at the University of Utah. She trained in surgery at Brigham and Women’s Hospital and was a research fellow in tumor immunology at the Dana-Farber Cancer Institute.

Read more about Bertagnolli in the May 12, 2023 issue of the *Record*.

Appointment to the position of NIH director requires confirmation by the U.S. Senate. No timeline had been set for the confirmation process. **R**

**NIDCD Director Tucci Receives AOS’s Award of Merit**

NIDCD Director Dr. Debara Tucci received the 2023 Award of Merit from the American Otological Society (AOS). The award is considered the highest honor in the fields of otology and neurotology.

Founded in 1868, AOS is the second oldest medical society in the U.S. Its Award of Merit is given to one expert leader in the field each year at the AOS president’s reception.

Tucci was recognized for her “outstanding leadership and dedication to patient care, teaching and research in otology and neurotology.” Throughout her career, she has successfully combined clinical and surgical practice in otology, neurotology and skull base surgery with basic, translational and clinical research. She has served in national leadership roles for most of the professional societies related to her specialty and subspecialty and is co-chair of the Lancet Commission on Global Hearing Loss. She has been NIDCD’s director since 2019.



Dr. Debara Tucci

**NCI’s Srivastava Named Brufsky Awardee for Pancreatic Cancer Research**

Dr. Sudhir Srivastava, chief of the cancer biomarkers research group in the Division of Cancer Prevention, National Cancer Institute, has been named 2023 recipient of the Ruth C. Brufsky Award for Excellence in Clinical Research in Pancreatic Cancer. The award, announced by the Collaborative Alliance for Pancreatic Education and Research, will be presented at PancreasFest, an annual meeting of pancreas physicians and translational researchers who convene during the last week of July to find new ways of working together to improve patient care.

The Brufsky family endows a fund to support clinical research in pancreatic cancer and to underwrite a yearly lecture from a nationally prominent pancreatic cancer expert.

Srivastava will receive the award on July 28 in Pittsburgh.



Dr. Sudhir Srivastava

**NIDA Takes Home Award for *Sex, Meth and HIV* Video**

On Apr. 19, National Institute on Drug Abuse (NIDA) representative Josie Anderson, on behalf of the institute, accepted a National Association of Government Communicators (NAGC) Gold Screen Award from NAGC President Tabitha Clark at the Blue Pencil and Gold Screen Awards in Portland, Ore.

The Blue Pencil & Gold Screen Awards are an annual international awards program that recognizes superior government communication products and those who produce them.

NIDA’s Office of Science Policy and Communication received the Award of Excellence in News Video for the 2022 release of *Sex, Meth and HIV*.

The winning video examined NIDA-supported research on the high incidence of HIV transmission among gay and bisexual men who regularly use methamphetamine through personal stories, statistics and expert commentary.

The video is one of five installments of *At the Intersection: Stories of Research, Compassion, and HIV Services for People Who Use Drugs*, an HHS-NIDA web video series that offers a person-centered, science-based approach to understanding connections between HIV and substance use.—**Judith Lavelle**



NIDA’s Josie Anderson (l) accepts a National Association of Government Communicators Gold Screen Award from NAGC President Tabitha Clark.

PHOTO: KITTA-BODMER-PHOTOGRAPHY

## Vigorous Exercise Not Tied to Increased Risk of Adverse Events in Rare Heart Condition

Vigorous exercise does not appear to increase the risk of death or life-threatening arrhythmia for people with hypertrophic cardiomyopathy (HCM), according to a study supported by NIH.

HCM is a rare, inherited disorder that causes the heart muscle to become thick and enlarged and affects 1 in 500 people worldwide. It has been associated with sudden cardiac death in young athletes and other young people. However, the study, published in *JAMA Cardiology*, found that people with the disease who exercise vigorously are no more likely to die or experience severe cardiac events than those who exercised moderately or not at all.

The observational study, the largest and most extensive to explore the relationship between HCM and exercise, was funded by NHLBI and questions restrictions from exercise that are often recommended for anyone who has the disease.

“Based on these data, we’re learning that we don’t need to universally restrict HCM patients from participating in vigorous exercise, something that’s so important to all of us,” said Dr. Rachel Lampert of Yale School of Medicine, one of the principal study authors and a practicing cardiologist who is an expert in arrhythmias in HCM. “Individuals with this condition should talk to a health care provider with expertise in HCM about getting back on the field, back in the pool and back on the court, if that’s what they want to do. Getting an expert evaluation is key to determining degree of risk for all HCM patients, and critical before going back to play.”

## Study Highlights Financial Toll of Health Disparities

A groundbreaking study provides national and state-level estimates of the economic burden of health disparities by race, ethnicity and educational levels.



PHOTO: DC STUDIO/SHUTTERSTOCK

New research shows that the economic burden of health disparities in the United States remains unacceptably high. The study, funded by NIMHD, revealed that in 2018, racial and ethnic health disparities cost the U.S. economy \$451 billion, a 41% increase from the previous estimate of \$320 billion in 2014.

Findings from the study by researchers from NIMHD, Tulane University School of

Public Health and Tropical Medicine, Johns Hopkins Bloomberg School of Public Health, Uniformed Services University, TALV Corp and the National Urban League were published in *JAMA*.

The study is the first to estimate the total economic burden of health



PHOTO: PANUMAS YANUTHAI/SHUTTERSTOCK

disparities for five racial and ethnic minority groups nationally and for all 50 states and the District of Columbia using a health equity approach. The health equity approach set aspirational health goals that all populations can strive for, derived from the Healthy People 2030 goals. It establishes a single standard that can be applied to the nation and each state, and for all racial, ethnic and education groups.

It is also the first study to estimate the economic burden of health disparities by educational levels as a marker of socioeconomic status.

Key findings from the study include:

- Most of the economic burden for racial and ethnic disparities was borne by Black/African American population (69%) due to the level of premature mortality.
- Native Hawaiian/Pacific Islander (\$23,225) and American Indian/Alaska Native (\$12,351) populations had the highest economic burden per person.
- Across all educational levels, most of the burden was attributable to premature deaths (66%), followed by lost labor market productivity (18%) and excess medical care costs (16%).

“The exorbitant cost of health disparities is diminishing U.S. economic potential,” said NIMHD Director Dr. Eliseo Pérez-Stable. “We have a clear call to action to address social and structural factors that negatively impact not only population health, but also economic growth.”

## High Rates of Persistent Chronic Pain Found Among U.S. Adults

A study from NIH shows that new cases of chronic pain occur more often among U.S. adults than new cases of several other common conditions, including diabetes, depression and high blood pressure. Among people who have chronic pain, almost two-thirds still suffer from it a year later.

These findings come from a new analysis of National Health Interview Survey (NHIS) data by investigators from NCCIH, Seattle Children’s Research Institute and University of Washington, Seattle, and are published in *JAMA Network Open*.

“Understanding incidence, beyond overall prevalence, is critical to understanding how chronic pain manifests and evolves over time,” said Dr. Richard Nahin, lead author and lead epidemiologist at NCCIH. “These data on pain progression stress the need for increased use of multimodal, multidisciplinary interventions able to change the course of pain and improve outcomes for people.”

Overall, the study found that the rate of chronic pain and high-impact chronic pain (HICP) among adults is approximately 21% and 8%, respectively.

Chronic pain is pain that is experienced on most days or every day in the past three months; and HICP is pain that limits life or work activities on most days or every day during the past three months. The links between the widespread burden of chronic pain and the country’s opioid epidemic underscore the urgency to understand and address the issue of pain.



Among people who have chronic pain, almost two-thirds still suffer from it a year later.

PHOTO: LUNOPARK/SHUTTERSTOCK



At left, Colleen McGowan (c), director of NIH's Office of Research Services, which includes the Police Department, smiles alongside several law enforcement officers. At right, as usual the mounted patrol is a kid (and adult!) magnet.

PHOTOS: MICHAEL BRUINS



## NIH Police Day Returns

In 1962, President John F. Kennedy signed a proclamation designating May 15 as Police Officers Memorial Day and the week in which that date falls as Police Week. NIH marked the commemoration on May 10 by holding NIH Police

Day on the Bethesda campus. They hosted local, state and other federal agency police departments, including Naval Support Activity Bethesda, Maryland State Police, Montgomery County, Prince George's County and others at an event on the south lawn of the Clinical Center.

There were police dogs, a mounted police officer on a horse named Kona, and lots of good cheer and relief. This year's event was the first NIH Police Day since the pandemic and, fittingly, was held on the eve of the official end of the three-year national Covid-19 emergency.



At left, McGowan (c) greets J. Costanzo (with canine officer) of the Metro Transit Police Department. At right, several police units offer safety information, demonstrations and giveaways.

PHOTOS: MICHAEL BRUINS



Above, a Maryland State trooper; below, two officers from Montgomery County

PHOTOS: MICHAEL BRUINS



Law enforcement officers from around the DMV attended the NIH Police Day event.

PHOTOS: CHIA-CHI CHARLIE CHANG

