HUMAN RELATIONS STUDY NEARS END

The second year of the research contract with the University of Michigan for the human relations study of NIH is about over. The first year was spent in clarifying the objectives of the study, developing and administering the NIH-wide questionnaire survey, and preparing the two-volume report on the findings.

During the past year, the Survey Research Center has worked with NIH in setting up a program for utilizing survey data to appraise the administrative and human problems of NIH. In order to conclude this "feedback" phase of the study, Dr. Sebrell is addressing a letter to all Institute directors, laboratory, and branch chiefs, in which he asks for an assessment of progress in identifying and diagnosing the problems revealed in the survey. Recommendations for ways of handling the problems are also being requested.

A series of discussions of the findings has been and is still going. (See NIH Study, Page 3)

DR. MICHAEL SHIMKIN IS NEW NCI BRANCH CHIEF

Dr. Michael B. Shimkin, formerly chief of the Laboratory of Oncology at San Francisco, has been appointed chief of the Biometry and Epidemiology Branch of NCI.

The Laboratory of Oncology, headed by Dr. Shimkin since its establishment in 1947, was discontinued June 30. It has been operated by the National Cancer Institute and the University of California School of Medicine as a cooperative project for cancer research.

Dr. Shimkin is widely recognized for his original clinical and laboratory research in cancer. He received his M.D. degree from the University of California in 1937. He was a resident in internal medicine at John Sealy Hospital in Galveston, Tex., and a cancer research fellow at Harvard University before

(See Dr. Shimkin, Page 3)
A way of producing heart failure in experimental animals which is similar to the condition found in human beings has been devised by Drs. James O. Davis, David S. Howell, and Robert E. Hyatt of NIH's Laboratory of Kidney and Electrolyte Metabolism. This forward step in heart disease research is expected to open the door to new studies on heart failure that were hitherto impossible.

Heart failure occurs when the blood-pumping ability of the heart is greatly reduced or when demands made on the heart are greater than its reserve power can meet. It may result from many kinds of heart and blood vessel disease, including severe high blood pressure, hardening of the arteries, and rheumatic heart disease.

Heart failure is one of the most perplexing of medical problems and much more needs to be known about it. For more than 25 years, researchers have been trying by various means to create the condition in animals in order to study it in the laboratory. Until now, these attempts have been relatively unsuccessful because the condition produced did not sufficiently resemble that in man.

The method developed by Drs. Davis, Howell, and Hyatt produces heart failure in dogs by constriciting the artery leading from the heart to the lungs. A nylon, beaded string is inserted into the body through a silver tube and encircles the artery. The string can be tightened after the tube is put in place, and by successive tightenings at intervals of from 3 to 7 days, heart failure is created.

The findings of the investigators show that the condition produced by this method is very much like that which occurs in human beings. After progressive tightening, signs of heart failure developed, such as congestion in the veins throughout the body, water-logging of the tissue (edema), enlargement of the liver, fast heart beat, and enlargement of the heart. By the time edema had developed, various pressures in the heart had undergone changes, the resistance in the smaller blood vessels had increased, and the output of the heart had dropped about 40 percent. Another indication that the condition produced is similar to that in humans is seen in the ability of the dogs to respond when given digitalis, the drug most often given to human patients with heart failure.

The group is presently working on studies of the relation of the adrenal gland to the production of edema and ascites.

Dr. Nathan W. Shock of NHI was among the recipients of honorary doctorate degrees conferred by Purdue University at its recent commencement exercises. Six Purdue graduates, who have gone on to achievements in their careers, were selected for the honors.

Since 1941, Dr. Shock has been chief of NIH's Section on Gerontology, located in the Baltimore City Hospitals where he has engaged in a research program on the physiological, biochemical, and psychological aspects of aging. A native of Lafayette, Ind., Dr. Shock obtained his bachelor's and master's degrees from Purdue, and received his doctorate from the University of Chicago.

The Office of the Chief, Scientific Reports Branch, has moved from Room 21, Building 1, to Rooms 114 - 118, Building 1.

The Personnel Branch has moved from Room 15231, Building 10, to Room 21, Building 1. Mr. Wiencek and Mr. Salmon, personnel assistants for the Clinical Center organization, will remain in Building 10, in Room 1A-09.

The next visit of the Red Cross Bloodmobile will be Thursday, July 8, between 9:30 a.m. and 3:00 p.m., in Wilson Hall. NIH employees are asked to contribute to the NIH Blood Donor Program by making an appointment through the Employee Relations Section, Room 21, Building 1, ext. 2454.

A schedule of laboratory refresher training courses, that will be offered during the current fiscal year by the Communicable Disease Center in Chamblee, Ga., has been posted on the bulletin board near the elevators in the basement of Building 1.
CIVIC FEDERATION ELECTS DR. MORRIS

Dr. Harold P. Morris of NCI's Laboratory of Biochemistry was elected president of the Montgomery County Civic Federation June 14. The Federation represents the interests of some 68 of the County's citizens' associations.

Long active in County civic work, Dr. Morris has been a delegate to the Federation since 1941, and served as second vice-president last year. In 1950, the 25th anniversary of the Federation, he was awarded the Evening Star Trophy as the delegate who that year had the most outstanding achievement. Dr. Morris was formerly president of the Woodside Park Citizens' Association of Silver Spring. He has been at NIH since 1938.

GAS CYLINDER LECTURE

All NIH laboratory personnel are invited to attend a lecture on the safe handling of compressed gas cylinders at 1:30 p.m., July 15, in the Clinical Center Auditorium. Mr. Allen Mossman of the Matheson Company, Inc., will discuss such topics as the use and misuse of adapters, the compatibility of various gases, need for pressure releases, and uses of pressure regulators, flow gauges and needle valves.

DR. SHIMKIN Cont'd

joining the research staff of NCI in 1939.

During 1943 and 1944 he was consultant to the Office of Scientific Research and Development's medical research mission to Russia.

Later, during World War II, he served with the United Nations Relief and Rehabilitation Administration.

Dr. Shimkin is a medical director in the PHS commissioned corps. From 1947 to 1954 he was clinical professor of experimental oncolgy in the University of California School of Medicine, San Francisco.

NIH STUDY Cont'd

on within the various Institutes. About 50 group meetings involving over 150 people have been held to examine the relevant survey data and discuss the problems involved. The pattern of the meetings has differed from Institute to Institute depending on the needs of the group. Dr. Sebrell's request for a progress report initiates the final phase of the program of self-appraisal.

NIH Spotlight

Lynda Lee Cahoon

One of NIH's busiest employees is attractive Lynda Lee Cahoon, program analyst in the newly established Program Analysis Section of DRG. An NIH employee since 1950, she is presently assigned to the herculean task of assembling and indexing, preparatory to later analysis, more than 15,000 accumulated publications which have resulted from the research grants program since its initiation.

Lynda has an additional full-time responsibility as the mother of three daughters and a son, ranging in age from 18 to 9. Her oldest daughter, Lynda Margaret, is a sophomore at the University of Maryland, while Susan, 14, and Patricia, 12, are students at Leland Junior High School. Michael, 9, attends Lynbrook Elementary School.

Lynda has somehow managed to find time to attend night school at George Washington University since 1946. She received her A.B. in psychology last month, and climaxd this achievement by being elected to membership in Phi Beta Kappa. Her honors also include election to Psi Chi, the national psychology honorary fraternity.

Born in Leigh, England, Lynda came to this country with her parents at the age of ten. Following graduation from the Roslyn, Wash., High School, she attended Business College in Seattle.

After moving to Washington, D.C., Lynda had a secretarial job with the Department of Justice's Tax Division. For several years before coming to NIH, she served as an administrative assistant in the

R & W NOTES

The Coca Cola company has complained recently about the excessive shortage in empty bottles at NIH. As you know, the coke machines in the various buildings are part of the concessions from which your R & W Association receives a percentage profit on sales. Excessive losses will cut these profits. Please help remedy this situation by returning all empties to the bottle racks provided at the machines.

July 14 is the date of the annual R & W picnic to be held in Top Cottage at 5:00 p.m. Hot dogs, baked beans, and soft drinks will headline the menu. Employees, their families, and friends are invited to come. There will be games, dancing, and lots of fun. Tickets for nonmembers and friends will be 50 cents per person. R & W members and their families may purchase their tickets at half price. Buy your tickets today from your division or building representative.

By the way, now is a good time to join the R & W Association. Division representatives are launching a new membership drive and will be around to see you soon. There's a special discount to new employees who come to NIH after July 1: you may join the Association for only 50 cents!
INSTRUMENT SECTION
HELPS NIH SCIENTISTS

The primary function of the Instrument Section is to provide the scientist with the tools he needs to carry out his research. Many times a piece of apparatus is needed that is not available commercially. The section designs, develops, and builds special equipment to the scientist’s order. If one of these developments engenders widespread demand, the Instrument Section endeavors to place it in the hands of a manufacturer willing to catalogue and produce it.

The following apparatus, previously developed by the section, is now available from commercial suppliers:

1) Tissue grinders—pyrex flask with teflon or stainless steel pestle.
2) French cell press—a dispersion unit for disintegrating chloroplast material, blood cells, unicellular organisms, homogenates of animal tissue, and other biological particles.
3) Kjeldahl digestion apparatus—electrically heated for micro and semi-micro nitrogen determinations.
4) Peristaltic-action pumps—pumps liquids or gases peristaltically through rubber or plastic tubing.
5) Fraction collector, automatic—with or without droplet counter.

Because of the custodial regulations regarding government property, instruments or apparatus built by the Instrument Section must be transferred to the individual responsible for property within the requesting laboratory if the equipment costs more than $10.00 or contains some nonexpendable item such as a motor.

The section transfers the item to the person whose name appears on the Equipment Estimate Request, PHS form 794. In some cases, transfer has been made to persons who have not been authorized as custodians of government property. To facilitate the transfer in the future, the Instrument Section requests that requisitioners put the name of the investigator in the space for "Individual Making Request," with his division, building and room number, and phone extension. They may in addition sign their own name at the bottom of the form.

NUTRITION DEPARTMENT DOES VOLUME BUSINESS

Chef Joe Hawkins prepares soup in the Clinical Center Kitchen.

The casual patron of the Clinical Center cafeteria would be amazed by the size and complexity of the operations that provide the appetizing array of food available there. We have here the only paid cafeteria permitted by law to operate in a Federal hospital. Meals for patients and employees are prepared in the same kitchen by the same cooks. This type of cafeteria enables the Nutrition Department to provide more variety than would otherwise be possible.

Meal planning is a combined effort, headed by Miss Margaret Vance, and the Patient Dietetic Service, under Miss Ann Reimer. A selective menu is provided for all patients, with two choices available on both the normal and the modified diets. Two of the entrees on the cafeteria menu are the same as on the patient’s normal menu. In addition to the normal menu, the department regularly prepares five other selective menus for patients, namely low sodium, low fiber (soft), liquid, children’s general, and children’s soft diets.

Patients are visited daily by a member of the Nutrition Department. When they have selected their meals for the next day, the food aides tally up the orders for each floor kitchen and send them to the Food Production Service. The dietitians and the chef decide on the total amounts of food to order for patients and cafeteria, and prepare a requisition for these items from the storeroom and refrigerators.

You will be interested to know that "family style" service is provided on the two NIMH floors. One of the patients selects the food for his group each day, and the children’s diet is selected by the nurse and dietitian. Picnics and cook-outs are planned frequently for these groups.

Two metabolic kitchens are in operation now, one for NIMH and one for NIH patients. Here, the patient’s food is cooked individually by the staff in this unit, and every bite must be consumed. Amounts are weighed carefully on torsion balance scales. Meats are usually broiled, and vegetables steamed. When a patient is placed on this kind of a diet by his physician, the Nutrition Department usually orders several months’ supply of food in advance. He is frequently fed throughout the diet from one steer and one day’s pack from a cannery, so that the results of the study will not be affected by variations in food.

The department writes specifications for the food needed, and the Supply Management Branch advertises periodically for contracts to purchase all food items. The main kitchen has excellent storage and preparation areas for meat, vegetables, frozen foods, ice, etc.

Miss Edith Jones, Chief of the Nutrition Department, started operations last July with a handful of employees, serving one floor area and a very limited cafeteria clientele. Now her department services seven floor and two metabolic kitchens and the cafeteria on a 12-hour basis. In the cafeteria an average of 1,500 customers are served throughout each weekday.