Employee Health Service Is Model For Government, Private Industry
By Peg O'Brien

The Employee Health Service at NIH takes a positive approach to good health.

Directed by Dr. John M. Lynch, with his staff of 14, EHS puts its emphasis on Preventive Medicine, aiming at two major objectives: the highest possible level of health for each employee, and the lowest possible occurrence of occupational injuries and diseases throughout the reservation.

In its main quarters on the B-2 level of the Clinical Center, EHS is the focal point for all matters relating to the health of employees.

**Occupies 12 Rooms**

A 12-room suite houses treatment rooms, offices, and a staff consisting of two doctors, eight nurses, one laboratory technician, three clerks, and one attendant. Together, this staff makes every effort to provide day-to-day health services to all employees on a personalized basis.

The employee is introduced to EHS even before he reports for duty at NIH. He receives a pre-employment physical examination, at which time he learns of the many health services available to him while employed here.

Well oriented during his first meeting with the personnel of EHS, the employee knows thereafter that he can depend on them to safeguard his health.

**Health Advice Given**

He knows that this will be accomplished through such accepted preventive health measures as immunizations, health advice and guidance, periodic physical examinations (which he may request), and the prompt and effective treatment of occupational injuries and diseases.

EHS ranks high in the nationwide effort to improve the practice of Occupational Medicine. It is recognized as a model for other employee health programs in government and in private industry.

In the area of occupational injuries, EHS remains constantly alert, ready to handle any emergency. With the help of the NIH Fire Department Rescue Squad, acutely ill or injured employees are quickly transported to EHS for emergency treatment. After 5 p.m. and on weekends, such emergencies are handled by the Medical Officer of the Day.

The main health unit in the CC (See HEALTH SERVICE, Page 1)
Small Building Designed to “Explose”

A unique addition to the NIH reservation, now under construction, is a building designed especially to “explode” under pressure.

The new facility, which is part of an L-shaped extension of the Isotope Laboratory (Build 21), will be known as the Hydrogenation Building.

Also included in the construction is a radioactive waste processing room which will be located behind the existing loading platform.

Completion is scheduled for mid-August.

The building will house equipment used in high-pressure catalytic hydrogenation experiments, high-pressure neuro-physiological experiments, Diels-Alder reaction experiments, and other research efforts in which the possibility of explosion exists.

Rear Wall Expendable

The experiments will be conducted in a cell of which three side walls, the ceiling, and floor will be constructed of 16-inch reinforced concrete. The fourth and rear wall of this cell is also one of the exterior walls of the building but is designed to be non-load-bearing.

Formed a “blow-out panel,” it will be constructed of 5-inch cement-asbestos board, a material with no structural strength. In the event of an explosion from accumulated gas, the panel will give way, thus relieving pressure on the building itself.

Designed by PEB

The building was designed by the Plant Engineering Branch, DRS, under the direction of Lawrence F. Gaffney, Chief, Engineering Design Section, with the advice and consultation of Dr. Lewis J. Sargent, Assistant to the Chief, Laboratory of Chemistry, NIAMM; James B. Black, Safety Officer, Plant Safety Branch, OD; and the Squibb Institute for Medical Research, New Brunswick, N.J. It is being constructed by the firm of Whittener and Skillman, Arlington, Va.

To further protect workers in the building, all electronic equipment controlling the high-pressure experiments will be located outside the cell in an instrument room. Here experiments involving pressures exerted upon organic chemicals at the rate of 2,000 or more pounds per square inch may be remote-controlled and observed without endangering the safety or the life of the operator.

Safety Features Incorporated

Other features include an exhaust system to remove highly toxic chemical vapors, and shower baths for decontamination of workers if needed.

Formerly, high-pressure experiments were conducted in Institute laboratories, but were discontinued in 1959 at the direction of Dr. Joseph E. Snedel, NIH Associate Director for Intramural Research, after the Plant Safety Branch had called attention to the hazards involved.

Institutes which will use the facilities of the building and which have contributed to the cost of its construction are NIAMM, NIDR, NCI, and NIH.

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Dr. Heller, NCI, Honored

At Testimonial Dinner

Dr. John R. Heller, Director of NCI, was honored at a reception and dinner at the Naval Medical Center on Wednesday evening, June 22.

Dr. Heller has been Director of the Institute for the past twelve years, and on July 1 assumed new duties as President and Chief Executive Officer of the Memorial Sloan-Kettering Cancer Center in New York City.

Over two hundred persons were present at the dinner which was held to pay tribute to Dr. Heller as a distinguished public servant. Among those present were DHEW Secretary and Mrs. Arthur S. Flemming; Surgeon General and Mrs. Leroy E. Burney; the Honorable John E. Poyntz, U.S. Representative from Rhode Island; Dr. Joseph E. Snedel, NIH Associate Director for Intramural Research, and Mrs. Snedel; Dr. and Mrs. C. J. Van Slyke; Dr. Heller’s successor, Dr. Kenneth M. Endicott, and Mrs. Endicott; and members of the National Advisory Cancer Council.
**Science Section**

**Criteria Devised For Detection Of Eye Tumor**

Isotope tracer methods for detecting malignant ocular tumors have been implemented by the National Institute of Neurological Diseases and Blindness investigators who have devised criteria for sequentially applying these methods to tumors in the posterior half of the eye.

Tracer methods that are used to locate tumor sites in the front of the eye have previously been ineffective in locating posterior malignancies, although radiophosphorus is known to accumulate in these tumors.

**Method Reported**

The improved method for localizing tumors in the posterior choroid has been reported by Dr. J. O'Rourke, formerly of the NINDB Ophthalmology Branch, now at Georgetown University, and Eleanor Collins, NINDB, in the A.M.A. Archives of Ophthalmology.

Eight patients, each with evidence of a tumor beneath the retina in the posterior half of the eye, were studied. Radiophosphate was administered intravenously to the patients 24 hours before uptake measurements were made. Beta-emissions were counted for one minute in each of four posterior and anterior quadrants of the eye. After the tumors were excised, pathologic sections were examined to determine the cell type and volume of each tumor.

Results showed that the routine anterior counting procedure localized the posterior malignancy correctly in only one of eight cases, and the average radioactivity of the tumor was only 25.3 percent above the mean of individual quadrant counts.

**Tumor Located Correctly**

In six cases where the new criteria were used for posterior countings, the tumor was located correctly in all instances. The average increase in tumor radioactivity was 74 percent above the mean.

The investigators also found that tumors larger than 300 cu. mm. and those with epithelial cells (which are associated with high malignancy) retained greater amounts of radioactivity. However, factors such as density of overlying tissue made it difficult to...
Obesity Unrelated To Joint Disease
Evidence Shows

Scientists at the National Institute of Arthritis and Metabolic Diseases have found that excess body weight bears little if any relationship to the cause of osteoarthritis in mice. The research, which was reported to the annual meeting of the American Rheumatism Association, has shown that obesity aggravates osteoarthritis but, as a rule, less damaging. The disease seems to result from a combination of aging, damage and normal wear and tear and afflicts older persons most frequently.

Belief Long Held

Although it has long been supposed that obesity aggravates osteoarthritis in man—presumably by burdening the joints with additional weight—there is little evidence of this, and so the present study was done to determine more clearly the relationship between obesity and osteoarthritis.

The NIAMD scientists performed several groups of experiments. In the first one, mice which did not normally become obese were fattened on a diet containing 60 percent vegetable shortening. The mice became 75 percent fat compared to mice fed a normal diet, but pathological studies of their hind limbs done after 18 months showed that, for the most part, even this severe a degree of obesity did not harm the joints.

Rats Also Used

The same fattening procedure was also used on rats, which are generally less susceptible to joint disease. In these experiments the obese animals did show slightly more arthritis than normally fed litter mates, but their joint disease was very mild.

The most conclusive studies were done with mice belonging to the STR/1N strain. The strain is naturally fat, and, in addition, has a high incidence of osteoarthritis. All STR/1N mice develop osteoarthritis by about one year of age. To determine whether the animals' weight was directly related to their joint disease, the scientists restricted their weight gain by feeding them a low calorie diet. It was found that the weight restriction had no effect on either the occurrence of osteoarthritis or its severity.

Value of Gold Salts Shown In Treatment of Arthritis

The same fattening procedure was used to determine the development of degenerative joint disease in the rats, the results of the other experiments make it unlikely that the effect was simply the mechanical consequence of excessive weight. Even when the rats were grown under normal conditions, certain metabolic alterations are involved, although no single metabolic abnormality has yet been found.

The NIAMD scientists concluded that the cause of osteoarthritis is a much more subtle and complex biological problem than simple mechanical stress.

The study showed undoubtedly that the clinical condition of the gold-treated group improved over a period of a year after completing the course of treatment. The improvement in the gold group was more than twice as much as that seen in the control group after the first three months and was measured in a variety of ways. These included:

1. Functional capacity—More patients became and remained able to carry on normal work and physical recreation.
2. Joint involvement—Fewer joints became newly affected or remained affected and quiescent, while more joints became quiescent and remained that way.
3. Blood tests—Hemoglobin and red cell sedimentation rates improved by the sixth month in the gold group and the sheep cell agglutination test for rheumatoid arthritis became less positive.
4. Number of analgesics taken daily—At the start both groups were taking an equal number of aspirin tablets or equivalent per day. A marked reduction was seen in the gold group at the sixth month from the start of the treatment and continued to the 18th month.

X-rays Taken

X-rays of both groups were also taken at intervals during the study but these did not reflect the clinical improvement noticed in the gold-treated group. However, the skin reactions with gold therapy has always been the production of side effects and these occurred to a significant degree in this study also. Toxic effects, largely dermatitis, were more severe in the gold-treated group than in the control group. Complications were noted in about 25 per cent of the gold group and 12 per cent of the control group. However, although the skin reactions were troublesome in a significant number of the cases, various new drugs such as British sulfasalazine (a gold-binding compound) and the steroids can reduce the severity of such side effects and lessen the dangers of this form of therapy, Dr. Bywaters reported.

"A later assessment will be made after a further one year's follow-up, but to date the advantages clearly lie with the gold-treated group," he concluded.
Allergy Reaction Time Influences Choice Of Treatment Used

Many important aspects of allergic phenomena hinge upon the type of reaction developing in human beings following contact with allergens. Therapy for allergic diseases may be considerably influenced by the nature of the reaction present in patients.

Laboratory experiments directed toward unraveling the relation between delayed and immediate types of hypersensitivity are in progress at the Rocky Mountain Laboratory, field station of the National Institute of Allergy and Infectious Diseases, in Hamilton, Montana. Only recently has it been possible to demonstrate a relation between immediate and delayed types of sensitivity in experimental animals.

It has been suggested that delayed hypersensitivity is a step in the formation of circulating antibody. This raises the question of whether or not delayed sensitivity has a more primitive type of specificity than do Arthus reactions and circulating antibody.

This is among the concepts being explored by Drs. S. B. Salvin and R. F. Smith at the Rocky Mountain Laboratory. Their first paper in a series on specificity of allergic reactions appears in the Journal of Experimental Medicine.

Contradictions Recognized

The investigators recognize that two contradictions may seem to invalidate the hypothesis that delayed hypersensitivity is a stage in the production of circulating antibody. First is the difficulty of producing circulating antibodies to denatured proteins, such as gelatin, although delayed hypersensitivity develops; the second, the inability to detect delayed hypersensitivity to purified polysaccharides, although circulating antibody may occur.

Both of these facts may be explained on the basis that recognition of antibody by antigen in delayed hypersensitivity is directed toward a broad area of the antigen molecule, and in Arthus reactions and circulating antibody toward a more narrow, finite area.

By employing various types of avian albumins and different conjugated proteins prepared from them, it was possible to show that the delayed reaction is produced in guinea pigs in response to a broad general area of the antigen molecule. Activities of circulating antibody, however, are directed by small, specific antigen groupings.

When conjugated proteins, such as ptyalin, hen albumin, are used as antigens for guinea pigs, the animals develop delayed reaction to the protein portion, and antibodies and immediate reaction to the haptenic portion of the complex.

NIH STUDIES CONGENITAL DEFECTS

Rise in Atrial Pressure Pathogenically Related To Myocardial Edema

Studies at the National Heart Institute on the mechanism of myocardial edema—the accumulation of water and electrolytes in the heart muscle—have often accompanied heart failure or chronic ascites (accumulation of fluid in the peritoneal cavity). After periods ranging from 6 to 189 days, the animals were anesthetized, sacrificed, and samples of heart tissue immediately taken for determination of water, fat, and electrolyte content.

The experimental data were then analyzed to evaluate the importance of the following factors in myocardial edema: the duration of the illness; signs and symptoms referable to the central nervous system; and the age of onset is usually in the fifties to seventies. The duration of the illness, from these cases as well as others cited in the literature, shows a disorder to be of relatively slow progression. The disorder appears to be more frequent in the male.

Similarities Noted

Within the past five years, the investigators have seen four clinically similar patients with orthostatic hypotension and signs and symptoms referable to the central nervous system. In the present study, pathological findings of one case are described in detail and do not appear to agree closely with pathological findings of hypoxia in the adult primate. A somewhat similar pathology has, however, been reported in hypoxic states in neonatal mice.

The authors conclude, therefore, that it is not possible, with evidence now available, to state whether the changes found in the central nervous system of this case precede the hypotension or are secondary to repeated episodes of hypoxia, but the difference in sites of pathology suggests the former.

Neurological Syndrome Associated With Orthostatic Hypotension

Certain lesions of the nervous system, in association with an extreme drop in blood pressure when standing erect, have been observed at National Institute of Neurological Diseases and Blindness in two patients having no systemic disease.

Supported by other reports of similar cases, the study suggests that a primary "degenerative" nervous system disorder appears to be a recognizable clinical syndrome as a cause of at least some types of orthostatic hypotension.

The investigators, Dr. G. Milton Shay, Medical Neurology Branch, and Dr. Glenn A. Drager, formerly with NINDS, found the most common initial symptoms of this condition to be impotence, incontinence, and loss of sweating; "dizziness" and blurred vision occurred on rising to a standing position, followed later by fatigue and the sense of muscular weakness.

The signs and symptoms observed in these patients were compatible with a recognized clinical syndrome and a Parkinson-like syndrome. The report appears in the J.A.M.A. Archives of Neurology.

Any of the above signs and symptoms may be the presenting ones, according to the authors, and reactions to the protein portion, and antibodies and immediate reaction to the haptenic portion of the complex. The hypotension may be a relatively late finding. Orthostatic hypotension may be present in some degree from the beginning of the illness, but usually is not detected until the patient has experienced extreme "dizziness" or syncopal attacks.

The age of onset is usually in the fifties to seventies. The duration of the illness, from these cases as well as others cited in the literature, shows a disorder to be of relatively slow progression. The disorder appears to be more frequent in the male.

Polyoma Virus Antibody Found Not Related To Mouse Leukemia

National Cancer Institute biologist, Dr. Lloyd W. Law, has collaborated with Drs. Wallace P. Rowe and Janet W. Hartley, of National Institute of Allergy and Infectious Diseases, in a study of the relation of polyoma virus infection to lymphocytic neoplasms in mice.

Leukemic and non-leukemic mice of four high leukemic strains were tested at intervals for antibody to polyoma virus. No correlation was found between the presence of detectable antibody and the appearance of leukemia at various times throughout life. No evidence was observed that mice with circulating antibody against polyoma had an increased risk of developing leukemia.

The relationship between antibody status and recovery of virus from organs of leukemic mice was found to be similar to that previously observed by Dr. Rowe and others in non-leukemic mice of infected colonies.

The results suggest that any association of polyoma virus and experimental transmission of leukemia is fortuitous.

### Inducible Enzyme Theory Supported

Further evidence to support the contention of penicillinase — an inducible enzyme of *Staphylococcus aureus* — was cited at the meeting of the Federation of American Societies for Experimental Biology, in a paper read by Dr. Harry Steinman of National Institute of Allergy and Infectious Diseases’ Laboratory of Clinical Investigation.

In this study Dr. Steinman used an organic mercury derivative to inactivate the bacterium without affecting its penicillinase activity, thus permitting exact analysis of the enzyme. Enzyme activities were determined by testing samples removed from a reaction mixture at periodic intervals. Curves plotted from these data were similar to those obtained by continuous observation of the same reaction system.

The greater accuracy obtained by this method also permits more precise evaluation of the experimental curves. Thus the formation of new enzyme was apparent in a synthetic medium within 15 minutes after exposure of the organism to penicillin and the rate of increase was linear with time.

This method also permitted studies of the inducing concentration of penicillin, without interference by the high levels of penicillin required in the subsequent assay procedure. In this way it was established that very high concentrations of penicillin were required for this reaction by the particular strain of *S. aureus* examined.

### Evidence Obtained

More direct evidence for the induced formation was obtained from studies on cell-free preparations wherein concentrated suspensions of *S. aureus* were broken up by bombardment with fine glass beads when found to possess good penicillinase activity.

By means of adsorption and elution of the cell-free enzyme preparation, and fractional precipitation with ammonium sulfate, followed by isoelectric precipitation—a method not hitherto applied to staphylococcal penicillinase—concentration and partial purification of bacterial penicillinases from organisms not exposed to penicillin was achieved. The increased activity obtained in cell-free extracts from penicillin treated cultures persisted through the purification procedure, indicating that new, induced protein had been actually formed.

However, the preparations were still relatively impure since the specific activities were not identical with each other.

A comparison of the physico-chemical properties of partially purified penicillinase from *S. aureus* with purified penicillin from *B. cereus* indicates that the two enzyme proteins are not identical.

### Environmental Cancer

In the eighteenth century a London physician named Percival Pott advanced good evidence that cancer of the scrotum in chimney sweeps was related to occupational exposure to soot. This opened a whole new field of research to seek environmental conditions that may be responsible for cancer.

Although we do not know what actually causes cancer, we know that it can be induced by exposure to certain environmental conditions which have been identified. These range from such a simple thing as too much sunlight, which can cause skin cancer, to air pollution, accidental exposure to excessive radiation from sources like X-ray machines or atomic reactors, and perhaps the cigarette habit. Modern research on environmental cancer therefore concerns itself with both the nature of cancer hazards encountered in our daily lives and in which exposure to them can be reduced or prevented under public health measures.

In Hagerstown, Maryland, the National Cancer Institute is conducting a long-range research project to study background radiation. Good health records on a stable population going back some 75 years make it possible to study the localities where cancer patients have lived and even the houses and the very rooms they have occupied for long periods in the past. In the Colorado plateau region, where a lot of uranium ore mining is going on, a long-range health study is being made among miners to determine what effect accidental exposure to radiation may have on their susceptibility to cancer.

Food additives and contaminants, about which we have been hearing a good deal lately, are also a part of the environmental cancer situation. One thing to bear in mind is that evidence of the cancer-causing properties of certain agents observed in animal experiment does not necessarily apply to human beings. Scientists, legislators and public health administrators are becoming more and more cautious, however, about the human use of substances that have been demonstrated to be carcinogenic in animals.

Smoking, which the Public Health Service believes to be the principal factor in the increased incidence of lung cancer, is also an environmental cancer hazard. Statistical studies made in different parts of the world over a long period have shown that the heavy cigarette smoker (two packs a day) has one chance in ten of developing almost invariably fatal lung cancer compared to one chance in 300 for the non-smoker. The chances of lighter smokers and reformed smokers fall between these extremes.

Cancer is an formidable scientific and medical problem, but in coping with it we follow the same procedure as with any disease: if we can't prevent it we try to cure it; if we can't cure it we try to arrest it; if we can't arrest it we try to palliate it. One out of three cancer patients is being saved today compared to one out of four 20 years ago. With present knowledge of cancer it should be possible to save one out of two. This opportunity lies partly in the area of prevention.

### EDEMA

(Continued from Page 3)

of heart failure, enlargement of the ventricles, serum aldosterone and protein levels, and elevation of peripheral arterial pressure. The degree of edema produced moderate to marked increases in heart muscle content of water, sodium, and chloride. The observed increases in myocardial fluid and protein levels, and elevation of peripheral arterial pressure have been reported from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive. The data in heart failure, enlargement of the ventricles, serum aldosterone and protein levels, and elevation of peripheral arterial pressure have been reported from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive. The data in this report was obtained from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive. The data in this report was obtained from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive.

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Comparison of data from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive. The data in this report was obtained from dogs dying from heart failure within 6 days with data from another experiment suggesting for 3-6 months to survive.
NIH Administrative Training Program Designed to Prepare for Leadership

By Nick Goldsborough
NIH Administrative Trainee

Now beginning its fourth year of operation, the NIH Administrative Training Program is rated a highly successful undertaking. It is an integral part of a government-wide effort sponsored by the Civil Service Commission, designed to prepare professional administrative candidates for positions of responsibility and leadership in a field that places a premium on these qualities.

Fourteen graduates of this program are presently employed at NIH, while six others are now in training.

The program is administered by an eight-man NIH Administrative Training Committee currently headed by Kenneth H. Brown, Executive Officer of NIH. All candidates for appointment must undergo a rigorous screening process. This includes the usual Federal Service Entrance Examination and an interview with the NIH Administrative Training Committee in which the candidate is measured critically in terms of his potential value in positions requiring tact, maturity of judgment, and responsible leadership.

Course is 12 Months

Upon acceptance the appointee’s 12-month training schedule usually provides for three months in each of two Institutes or Divisions and for three months in each of two Central Services. He works directly under selected supervisory personnel who evaluate his progress step by step in these respective areas. He is also assigned a career officer who confers with him periodically concerning his progress and serves as a friendly advisor on any personal problems that may arise.

As part of his course, the trainee attends monthly seminars conducted by outstanding authorities in the field of government and business administration. He is also encouraged to attend night school on one of the scholarships offered by nearby universities, including George Washington and American Universities.

Grades of the training program are doing well in responsible middle management positions, and because of the increasing necessity for skilled personnel to serve the research programs of each agency, the demand for these personnel is increasing. The program is conducted by outstanding authorities in the field of government and business administration. He is also encouraged to attend night school on one of the scholarships offered by nearby universities, including George Washington and American Universities.

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Baldwin Granted Leave To Attend Seminar; Wins Jump Award

Calvin B. Baldwin, Jr., Administrative Officer, DGMS, has won the Meritorious Award for exemplary achievement in public administration given by the William A. Jump Memorial Foundation. This is the second time that a DHFW employee has so honored.

The award, which acknowledges excellence in the younger group of administrative personnel in Federal Government, took the form of a certificate and citation "in recognition of outstanding public service for major contributions to the effective administration of programs involving several diverse professional-scientific disciplines, and for exemplary personal qualities of leadership."

Mr. Baldwin will go on a nine-month leave of absence from September of this year until June 1961. He will participate in a research and training program on science and public policy at the Graduate School of Public Administration, Harvard University, Cambridge, Mass.

The program, entitled Seminar on Science and Public Policy, is being inaugurated this year at Harvard. Mr. Baldwin will be one of the first 15 students, having been selected on the basis of public service experience, academic record, and recommendations from NIH.

Mr. Baldwin will be eligible for the degree of Master of Public Administration in June 1961. His training is provided under the Government Employees Training Act.

4 Bulgarian-Speaking Technicians Needed

At the invitation of the Bulgarian government, the United States will present an exhibit entitled "Medicine, USA," at the annual International Fair of Plovdiv, in Plovdiv, Bulgaria, September 18 through October 2.

The Office of International Trade Fairs, Department of Commerce, is urgently in need of four Bulgarian-speaking technicians to represent the United States at the fair and to explain the exhibit to fair visitors. If necessary, Russian- or German-speaking technicians will be considered.

Of the four technicians, one expert is needed in the field of cancer, one in dentistry, and one in general medicine. The best qualified applicant in one or more fields of medicine will be chosen as the fourth technician.

Interested persons may obtain further information by contacting

Dr. E. L. Jackson Dies; Formerly with NIAMD

Dr. Ernest Lee Jackson, 68, a retired NIAMD chemist noted for his extensive contributions to the chemistry of carbohydrates, died Tuesday, June 14, at the Clinical Center following a long illness.

Dr. Jackson began his 30-year scientific career with the PHS Hygienic Laboratory in 1928. His discovery and pioneer development of a technique for the periodic acid oxidation of sugars is considered one of the most valuable tools for structure determination ever devised in sugar chemistry. He also worked on the development of chemo-therapeutic agents for use against tuberculosis, and on the synthesis and structure of antibacterial agents.

During the past few years Dr. Jackson investigated various approaches to the synthesis of an analogue of thyroxine in which the ether bridge is in metaposition to the alanine side chain. A paper prepared by Dr. Jackson in which he described his latest investigation will appear shortly in the Journal of Organic Chemistry.

Dr. Jackson was a Fellow of the American Institute of Chemists. He also belonged to the American Chemical Society, the American Association for the Advancement of Science, the Washington and New York Academies of Sciences, the American Association of University Professors, the Phi Beta Kappa Association of Washington, and the Harvard Club of Washington.

Dr. Jackson is survived by his wife, Mrs. Maude F. Jackson, of 5408 30th St., N.W., and a son, Ernest, Jr., of Chicago.

Credit Union Announces Dividend, Policy Changes

The Board of Directors of the NIH Federal Credit Union has announced the payment of a 4 1/2% per cent annual dividend, to be compounded semi-annually, on all shares on deposit as of June 30. The dividend will be credited early in July and will start earning dividends during that month.

According to O. J. Wood, Credit Union manager, recent changes will also permit faster service on any loan applications and will permit the raising of the maximum account limit.

Loans fully covered by shares and loans that do not exceed $750 usually will be made within 24 hours, he said. Loans for car purchases, loans over $750, and those requiring extended credit and employment checking frequently will take a little longer.

In order to encourage saving, Mr. Wood said, the Board has removed the $100 maximum monthly deposit limit and has increased the maximum account limit to $3000 including accrued dividends.

Survey to Plan Growth Of Library Services

A survey to plan the future growth and development of research library services for NIH will begin this month. It will be conducted by Dr. Ralph R. Shaw, Dean of Rutgers University Graduate School of Library Service.

Dr. Shaw is a former director of the United States Department of Agriculture Libraries (1940-54), Past President of the American Library Association (1956-57), and a consultant to national and international organizations.

Although Dr. Shaw will not formulate the details of the survey until early in July, he has told John J. Clopine, NIH Librarian, that he plans to hold personal interviews with Institute representatives and scientists and seek additional information through questionnaires.

Recommendations concerning the NIH Library's acquisition policy, the scope of its collection of books and periodicals, and the usefulness of its services to scientists and technicians can be expected from the survey, according to Mr. Clopine.

A further objective will be to develop information leading to clarification of the library's working relationship with the National Library of Medicine after the latter is located in its new building, now under construction on the NIH grounds.

CC Physical Therapists Scheduled for Training

The Clinical Center Rehabilitation Department will sponsor a one-week course for physical therapists, July 11-15 at NIH. The course will be conducted by Miss Margaret Knott, Head Physical Therapist at the California Rehabilitation Center.

In addition to CC physical therapist staff, those invited to attend include one representative from each of the university and Service hospitals, as well as other major hospitals in the Metropolitan Washington area.

Miss Knott, widely known in instructor-lecturer in the field of physical therapy, is a leading proponent of one of the newer methods of treatment in this field—the use of proprioceptive neuromuscular techniques for stimulating and strengthening the response of the neuromuscular mechanism.

The course will include demonstrations of essential techniques from 1 to 5 p.m. Evening sessions (6 to 8 p.m.) will be devoted to lectures and non-patient demonstrations.