

the

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Virologists Attend Int'l. Conference On Measles Here

More than 75 virologists from the United States, Europe, Africa, South America, and the Far East were expected to attend a 3-day International Conference on Measles Immunization, beginning here this morning and continuing through Thursday afternoon.

The conference, which is being held in the Clinical Center auditorium, is sponsored jointly by the National Institute of Allergy and Infectious Diseases, the Division of Biologics Standards, and the University of Colorado Medical School.

Sessions Listed

The meeting is divided into six sessions covering the world-wide epidemiological aspects of the disease. The session topics are the World-Wide Importance of Measles, Measles Virus, Immunization of Man Against Measles (two sessions), Problems of Production and Biologic Control of Measles Vaccine, and the Future of Measles Vaccine.

PHS Surgeon General Luther L. Terry was to deliver the welcome. (See MEASLES, Page 4)

Building 31 Officially Opened At Cornerstone Ceremonies



Boisfeuillet Jones, Special Assistant to the DHEW Secretary for Health and Medical Affairs, addresses assembled guests prior to laying the cornerstone (behind him) of Building 31. Front row, left to right: Dr. James A. Shannon, NIH Director; Dr. Luther L. Terry, PHS Surgeon General; Wilbur J. Cohen, DHEW Assistant Secretary for Legislation; and James V. Lowry, Chief, Bureau of Medical Services.

An assemblage of special guests, including Boisfeuillet Jones, Special Assistant to the DHEW Secretary for Health and Medical Affairs, and PHS Surgeon General Luther L. Terry, joined with NIH staff and other personnel last Tuesday in observance of simple cornerstone ceremonies marking the official opening of the new 11-story NIH office structure, designated as Building 31.

Dr. James A. Shannon, NIH Director, delivered the welcoming address, and Dr. Terry replied on

behalf of the Public Health Service and introduced the special guests who were seated under the portico to the right of the main entrance, which fronts on Center Drive.

Several hundred NIH employees witnessed the ceremonies from the building's entrance driveway.

The new building, Dr. Shannon said, "represents a challenge . . . to utilize to the fullest" the facilities it offers "for the further improvement not only of administration of our grant-supported programs both here and abroad but also for our direct operations in Bethesda as well."

Quotes Plaque

"In recognition of that challenge and its implied responsibility, and as a means of identifying the purposes that will be served here," Dr. Shannon continued, "we shall install a plaque in the lobby. The plaque will carry the following inscription, taken from the Public Health Service Act:

"The Surgeon General shall conduct in the Service, and encourage, cooperate with, and render assistance to other appropriate

(See BUILDING 31, Page 8)

NIH-UGF Drive Lags at End Of 4th Week

Returns at the end of the fourth week of the current NIH-UGF campaign showed that contributions had reached 71 percent of the \$82,750 goal, with 76 percent of NIH employees contributing.

Commenting on these returns, Chris A. Hansen, DRS Chief and NIH Campaign Chairman, expressed concern.

"Following the fine start we had made by the end of the second week of the drive," he said, "this report is disappointing. In fact, it indicates that we are faced with a serious threat to the success of our drive."

Action Urged

Mr. Hansen pointed out that although DGMS and Program Direction have gone over the top with 101 percent and 117 percent of their respective quotas, "several Institutes and Divisions will have to take immediate steps to improve their standing if we are to meet our responsibilities to help support the UGF agencies which provide vitally needed service."

"Because of the nature of our work at NIH," he added, "we can-

(See NIH-UGF DRIVE, Page 7)

Record 7,018 Visitors Attend Annual NIH Instrument Symposium and Exhibit

With a registration total of 7,018, the 11th Annual Research Equipment Exhibit and Instrument Symposium, held here October 9-13, continued its long-established record of increasing attendance.

The exhibits and equipment demonstrations attracted 5,470 visitors. The symposium sessions in the Clinical Center auditorium, featuring nationally known scientists who presented papers of current interest in their specialties, were attended by 1,548 visitors.

Last year the combined exhibit and symposium drew 6,237 guests. Of that number, 5,165 viewed the exhibits and demonstrations, and

1,072 attended the symposium sessions.

Scientific equipment valued at \$1,250,000 was displayed this year by 134 manufacturers in Building 22 and in 22 trailers on the adjoining parking lot.

The exhibits and symposium sessions were attended by representatives of 69 hospitals, 70 universities and colleges, 21 research institutions, 38 Federal agencies, 19 journals, and other publications, and other organizations interested in public health and medical research.

Included were 52 visitors from 24 countries in Europe, Latin America, the Middle and Far East, and Australia.



Mildred the Muppet gets a briefing from Jim Henson, creator of the popular TV show, prior to an appearance at the NIH-UGF rally in the CC auditorium.—Photos by Bob Pumphrey.

the Record

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'PERSONNEL' TO PERSON

CONGRESS recently passed an act which protects Federal Employees from civil suits arising from accidents while driving any motor vehicle on Government business.

The new act provides that the Government, rather than the employee, will be the defendant in such cases.

This means that Federal workers who become involved in such accidents will be spared not only the possibility of sizable cash damage judgments against them, but also the expense of defending suits.

Although approved by Congress on September 21, 1961, the act will not become effective until March 21, 1962.

Medical History Society To Meet November 14

The next meeting of the Washington Society for the History of Medicine will be held Tuesday, November 14, at 8 p.m. in Wilson Hall.

Following a short business meeting two papers will be presented, "The British Medical Association and the Struggle Against the National Health Insurance Act of 1911," by Dr. Jeanne L. Brand of the Research Grants and Fellowships Branch, NIMH; and "Mary Gove Nichols, Prophetess of Health," by Dr. John Blake, Chief of the Medical History Division, National Library of Medicine.

The society was organized in February of this year to stimulate interest in the history of medicine and the biological sciences. Further information may be obtained from George D. Bragaw, Secretary, Ext. 3583.

CC Medical Record Dept. Processes Information Vital to Clinical Research

By Carole Spearin

At a recent national convention of the American Association of Medical Record Librarians this quotation was called to the attention of the delegates: "A hospital without medical records is like a clock without hands—it runs, but it tells nothing."

The Medical Record Department of the Clinical Center, which occupies several rooms on the first floor of this research hospital, is headed by Gloria S. Burich. It consists of four sections totaling 78 employees. Each of these sections plays an important part in the department's closely coordinated activities.

To illustrate, let us assume that Bob Davis, a young watch repairman from Chicago, is suffering from arthritis in his hands. His living depends upon expert handling of the tools of his trade. Because of his arthritic hands, his business has steadily dwindled.

Meets Requirements

Dr. Miller, Bob's physician, knows NIH offers special facilities for the study of arthritis and feels that admission to the Clinical Center will benefit his patient, so he refers the case for possible admission. Because Bob's condition meets the rather specific requirements of a current clinical study, he is admitted as a patient.

From the time he registers at the Clinical Center, all four sections of the Medical Record Department are involved in compiling and completing information relating to Bob's condition for use by the NIH scientists who will study his case as part of the larger search for an arthritis cure.

Within 24 hours of Bob's admission, the Transcribing Section, headed by Elizabeth Cavanaugh, receives the dictation of Bob's medical history and physical examination, recorded by his NIH physician on dictaphone discs. This report, the first of several transcribed reports, will be typed and included in his folder with other records of treatments and operations as they accumulate.

8,000 Discs Transcribed

During 1960 Mrs. Cavanaugh's staff of 24 typists transcribed almost 8,000 of these discs for over 28,000 reports. She said that her staff "does not have much trouble with medical terminology because the doctors compensate by enunciating more carefully when using difficult technical terms, but sometimes ordinary prepositions and adverbs are slurred and can present transcribing problems."

Mrs. Cavanaugh finds transcribing work personally valuable. "It gives us a liberal education in medical terminology. It's remarkable how the girls increase their vocabularies."

Another section of the Medical Record Department also plays an important role in Bob Davis's stay at the Clinical Center. This is the Medicolegal Section, headed by

(Continued on Page 4)

Assembly of Scientists Of NIAID Meet, Form Committees for Studies

The NIAID Assembly of Scientists, established last July, held its first formal meeting on October 17 in Wilson Hall. Discussions of subjects of particular interest to the scientific staff resulted in the formation of committees to study specific problems and to make definite recommendations.

One committee will study the channels through which the scientific programs of the Institute are presented to Appropriations Committees. Chairman is Dr. Norman B. McCullough, Chief of the Laboratory of Bacterial Diseases, who has chosen Dr. Herman G. DuBuy of the Laboratory of Biology of Viruses to serve with him.

To Study Regulations

Another committee will investigate the regulations and procedures governing the granting of consultancy privileges to NIH scientists. Dr. Roy Repaske of the Laboratory of Infectious Diseases is its chairman.

A committee will also investigate efficiency of research services and efficiency of administrative services at NIH. Dr. Wallace P. Rowe was named chairman.

Exploratory talks are planned to discuss with NIMH-NINDB Assembly members the possibility of joint action in these areas.

Scientists who have joined NIAID since its Assembly was formed are invited to apply for membership. All scientists working in the laboratories of NIAID, grades GS-11 (Civil Service) or Assistant Grade (Commissioned Corps) or higher, in positions up to and including Laboratory Chiefs, are eligible for membership in the Assembly. Application may be made through the Assembly Secretary, Miss Jane L. Showacre, Laboratory of Biology of Viruses, Ext. 2019.



Omie Reeves (left) and Anita Kramer of the Files Section, Medical Record Department, check the Patient Registry (list of all Clinical Center patients) and the Soundex file of patients' names and addresses.—Photos by Bob Pumphrey.

Distinguished Scientist Is NIAMD Visitor

Dr. Arne Fredga, member of the Nobel Committee of Chemistry and Director of the Institute of Organic Chemistry, University of Uppsala, Sweden, visited the National Institute of Arthritis and Metabolic Diseases, October 18-20, as the guest of Dr. Klaus Schwarz, Chief of the Section on Experimental Liver Diseases, Laboratory of Nutrition and Endocrinology.

Dr. Fredga discussed with Dr. Schwarz and his collaborators the results of their joint studies on Factor 3 active organoselenium compounds. The latter prevent Factor 3-deficiency diseases, such as dietary liver necrosis, heart muscle necrosis, and muscular dystrophy in rats, mice, and other animals.

Heads Royal Academy

Dr. Fredga, who is President of the Royal Academy of Sciences of Uppsala and an international authority on organoselenium chemistry, was accompanied here by Dr. Goeran Bergson, also of the University of Uppsala. An expert in quantum chemistry, Dr. Bergson is associated with Dr. Fredga in studies on selenium compounds.

Both visitors were guest lecturers at NIH during their brief stay here. Dr. Fredga's subject was "Organoselenium Chemistry Analogies and Differences to Sulphur Derivatives." Dr. Bergson spoke on "Some Recent Advances in the Study of Organic Diselenides and Thiolselenenates."

Dr. Helen M. Dyer, NCI, Winner of Garvan Medal

Dr. Helen M. Dyer of the Laboratory of Biochemistry, National Cancer Institute, has been named winner of the Garvan Medal by the American Chemical Society. This award is presented annually to an American woman in recognition of distinguished service to chemistry.

Dr. Dyer's award of \$1,000, an inscribed gold medal, and a bronze replica of the medal, will be presented at the 1962 meeting of the Society to be held in Washington, D.C., next spring.

A graduate of Goucher College and George Washington University, Dr. Dyer joined the staff of the PHS National Hygienic Laboratory in 1920. From 1929 until 1942 she held a teaching Fellowship and later an Assistant Professorship at George Washington University.

She has been with NCI since 1942 and has made many contributions to fundamental research in the chemistry of chemical agents that cause and destroy cancer.

Patients' Welfare Fund Is \$43 Richer From Proceeds of NIH Children's Fair



Dr. Jack Masur, Director of the Clinical Center, receives the proceeds from the annual NIH Children's Fair from Louise Holliday, 10, while Richard Zipkin, 14 (second from right), and Douglas Kreshover, 11, look on. The money, raised by the children for the NIH Patients' Welfare Fund, amounted to \$43, nearly four times as much as the amount raised last year.—Photo by Jerry Hecht.

As a result of the annual NIH Children's Fair, planned and conducted recently by children of PHS Commissioned Officers at NIH, the NIH Patients' Welfare Fund is richer by \$43—nearly four times as much as last year's contribution.

The 16 children who participated in the one-day outdoor event on the NIH reservation made all the arrangements for the fair and manned all the booths. They received parental assistance only with the refreshments.

Revenue-producing activities of the fair included a spook house, fortune teller, dart game, wheel of fortune, and refreshments—hot dogs, lemonade, popcorn, and cookies.

Fair workers were Louise and Mark Holliday, Lillian and Barbara Sober, Richard Zipkin; Richard, Marilyn, and Stanley Tabor; Mary, Susan, and Janet Pratt; Carl, Jean, Douglas, and Louise Millican; and Douglas Kreshover.

Dr. McClure Is Named Honorary ADA Member

Dr. Frank J. McClure, Chief of the Laboratory of Biochemistry, NIDR, was awarded honorary membership in the American Dental Association during its annual convention in Philadelphia last month. He is one of the few non-dentists to have been so honored by the ADA.

An international authority in the field of fluoride metabolism, Dr. McClure was cited for his "outstanding contributions to the science of dentistry."

He has been associated with dental research at NIH since 1936 and has held his present position with the Dental Institute since 1948.

President Recognizes International CU Day

October 19 marked the fourteenth annual observance of International Credit Union Day, established to bring to the attention of people everywhere the value and usefulness of credit unions.

Credit unions are organizations of people saving together and lending to each other at a low rate of interest. They are chartered by government and operate under law and government supervision.

President Kennedy, in a letter circulated prior to this year's observance, stated that credit unions are "furnishing an example of democratic control through their principle that each member has one vote regardless of his share in or his debt to the credit union."

The annual observance commemorates the founding of the first credit union in Germany in 1849, and introduced to North America in 1900.

Raymond Baker Retires; At NIH over 30 Years

Raymond Baker, a technician in the Laboratory of Infectious Disease, National Institute of Allergy and Infectious Diseases, retired September 29 after 33 years of Federal service.

Mr. Baker came to NIH in 1930 from the Veterans Administration Hospital at Perry Point, Md. It was in that year that the Congress changed the name of the old Hygienic Laboratory to the National Institute of Health.

Among the scientists with whom Mr. Baker has worked closely while at NIH was Dr. Rolla E. Dyer, Director of NIH from 1942 until 1950.

Dr. Roy Hertz, Of NCI, Gives NIH Lecture

Dr. Roy Hertz, Chief of the Endocrinology Branch, National Cancer Institute, will give the National Institutes of Health Lecture on Wednesday, November 15, at 8:15 p.m. in the Clinical Center auditorium.

Dr. Hertz has chosen for his subject "Endocrine Aspects of the Cancer Problem."

A native of Cleveland, Ohio, Dr. Hertz has been with the National Institutes of Health since 1941. He served initially in the Division of Physiology. In 1944 he transferred to NCI and was appointed Chairman of the Endocrinology Section in July 1946.

Admits First CC Patient

Dr. Hertz was responsible for initiating the Institute's clinical research activities in the Washington area, and admitted the first patient to the Clinical Center when it opened in 1953.

In 1957 Dr. Hertz was awarded the Anne Frankel Rosenthal Memorial Award of the American Association for the Advancement of Science for outstanding accomplishment in the field of cancer research, and the Superior Service Award of the Department of Health, Education, and Welfare.

Dr. Hertz has served as Chairman of the Endocrinology Panel of the National Research Council's Committee on Growth and as Chairman of the American Cancer Society's Committee of Research on Therapy, and is currently a member of that Society's Research Advisory Council.

PHS Awards 8 Grants For Cancer Research

The award of \$5,022,803 in grants to eight institutions for comprehensive cancer research programs has been announced by the Public Health Service.

These program-project grants will help institutions support teams of scientists engaging in long-term study of a range of problems on the nature and control of malignant disease. The investigators, representing many scientific fields, will coordinate laboratory, clinical, and auxiliary services in the search for more effective treatment of cancer patients.

Awards were made by Surgeon General Luther L. Terry on the advice of the National Advisory Cancer Council.

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Schistosomiasis Seen in Lebanon For First Time

Although schistosomiasis has never previously been reported in Lebanon, a field study conducted by a National Institute of Allergy and Infectious Diseases scientist and his associates from the American University of Beirut following discovery of a single case, produced clinical evidence of the parasitic disease in 14.6 percent of the individuals tested.

The investigation of this first focus of schistosomiasis in Lebanon was reported in the American Journal of Tropical Medicine and Hygiene by Drs. J. E. Azar, G. W. Luttermoser, and J. F. Schacher, Department of Tropical Health, American University of Beirut, Lebanon.

Teaches in Beirut

Dr. Luttermoser, on leave from the Laboratory of Parasite Chemotherapy, National Institute of Allergy and Infectious Diseases, is currently teaching and doing research at Beirut.

The investigators collected urine specimens at random from 591 residents in the area in which the first case was discovered.

One hundred and seventy-one specimens were collected from children in schools, and the remainder from children and adults interviewed during house-to-house visits.

All of these individuals were natives of the area who, with one exception, had never lived outside their birthplace or traveled elsewhere.

Schistosomiasis, a disease highly prevalent in many countries of this region, results from infection by blood flukes which are acquired by penetration of aquatic larval forms through the skin. Intermediate hosts of these small worms are various species of snails which live in fresh water.

Canal Is Water Source

The two chief sources of surface water available to the village in which the study was conducted are a spring at the base of a hill, and the Kamive-Litani Canal.

The canal, which has been operating in the area since about 1953, is a relatively new factor in the life of the community and is probably the chief source of fresh water for the people living along its banks.

Examination of the spring gave no indication that it was a suitable habitat for snails but on the banks of the canal numerous snail shells of the species *Bulinus (Bulinus) truncatus* Audouin were found. No living snails of that

Dr. Sarnoff to Receive Heart Research Award

Dr. Stanley J. Sarnoff, Chief of the National Heart Institute's Laboratory of Cardiovascular Physiology, has been chosen by the Kansas City (Mo.) Heart Association to receive its 1961-62 Award for Outstanding Contributions in the Field of Cardiovascular Basic Research.



Dr. Sarnoff

The award will be presented to Dr. Sarnoff at the Association's Scientific Meeting to be held Friday in Kansas City.

At the meeting Dr. Sarnoff will speak on "The Booster Pump Function of the Atrium," summarizing the findings of studies conducted in collaboration with Drs. Jere H. Mitchell and Joseph P. Gilmore, also of the Laboratory of Cardiovascular Physiology.

MEASLES

(Continued from Page 1)

ing address at today's opening session.

Approximately 80 papers will be presented at the conference, and general discussions will be held at the end of each session.

Dr. James A. Shannon, NIH Director, will be the principal speaker at a banquet tomorrow evening at the Officer's Club of the National Naval Medical Center in honor of Dr. John F. Enders, 1954 winner of the Nobel Prize for medicine and developer of the attenuated measles strains.

Chairman of the Program Committee is Dr. C. Henry Kempe, Professor and Chairman of the Department of Pediatrics, University of Colorado School of Medicine.

Other members of the committee are Dr. Dorland J. Davis, Associate Director for Intermural Programs, NIAID; Dr. Enders, who is Chief of the Research Division, Infectious Diseases, the Children's Hospital Medical Center, Boston, Mass.; and Dr. Fred R. McCrumb, Jr., Director of the Section of Infectious Diseases, University of Maryland School of

species were found in the course of investigation, but live snails of five other types were recovered.

The short history of clinical signs of schistosomiasis revealed during questioning leads the investigators to believe that the disease has only recently been introduced into the study area.

Resettlement of infected populations in areas previously uninfected has favored the introduction of the disease where it had not existed before, and new irrigation

Lung Metastases Seen In Head Cancer Victims

Current concepts indicate that head and neck cancer rarely metastasizes below the collar bone. However, scientists of the National Cancer Institute's Surgery Branch have reported studies indicating that distant metastases in patients with cancers of the head and neck do occur.

The report, by Drs. Marvin S. Arons (now with Georgetown University Hospital) and Robert R. Smith, appears in a recent issue of Annals of Surgery.

Studies were conducted on 89 patients admitted to the Clinical Center over a period of seven years and diagnosed as having extensive epidermoid carcinoma, except for two with adenocarcinoma of the paranasal sinuses. The followup period was six months to 76 months. Admission X-rays revealed no evidence of pulmonary or skeletal metastases.

Distant metastases developed within two years in 23 percent of 72 patients treated by definitive surgery. Local recurrence developed within three years in 47 percent.

In the majority of the patients, the distant metastases were confined to the lungs. Thus the study emphasizes the importance of routine chest X-ray as a post-operative followup for detecting lung metastases, particularly during the first two years.

Medicine.

Also serving on the committee are Dr. Roderick Murray, Director, Division of Biologics Standards; Dr. Frederick C. Robbins, Professor of Pediatrics, Western Reserve University School of Medicine; and Dr. Joseph E. Smadel, Chief, Laboratory of Virology and Rickettsiology, DBS.

Papers on NIH research in measles will be presented by Dr. Leon Rosen, Chief of the Laboratory of Infectious Diseases, NIAID; Dr. D. Carleton Gajdusek, of the Collaborative and Field Research staff, National Institute of Neurological Diseases and Blindness; Dr. Harry M. Meyer, Jr., Chief of the Section on General Virology, Laboratory of Virology and Rickettsiology, DBS; Dr. Murray, and Dr. Smadel.

projects have favored the spread of the disease by creating favorable habitats and vehicles for the snail intermediate host.

In the light of present and projected irrigation plans in Lebanon, the investigators believe that the finding of schistosomiasis is of public health importance.

Although their study is geographically limited, the scientists feel that it is possible that schistosomiasis exists throughout the wide area of irrigation.

Dr. George Z. Williams Is Winner of Annual Ward Burdick Award

Dr. George Z. Williams, Chief of the Clinical Pathology Department of the Clinical Center, received in absentia the Ward Burdick Award for outstanding service in pathology at the recent



Dr. Williams

Joint Annual Meeting of the American Society of Clinical Pathologists and the College of American Pathologists in Seattle, Wash.

Dr. Williams was selected by the Research Committee of the American Society of Clinical Pathologists as the Fellow who has made the "most meritorious contributions in the science of clinical pathology" during the past year.

Receives Gold Medal

The award, a gold medal, was accepted for Dr. Williams, who was unable to attend the annual meeting, by Dr. Lester H. Hoyt, Secretary-Treasurer of the Society.

Dr. Williams' paper, "Clinical Pathology Tomorrow," will be published in the American Journal of Clinical Pathology, official publication of the Society, as the Ward Burdick Award contribution.

Before coming to the Clinical Center in 1953, Dr. Williams was a faculty member of the Medical College of Virginia for 17 years.

Dr. Williams, a Captain in the U.S. Naval Reserve, served on active duty from 1940 to 1946 and became Acting Fleet Medical Officer, Seventh Fleet, in the Pacific Theatre of Operations.

Activities Are Many

Active in many medical and health organizations, Dr. Williams is a Diplomate, American Board of Pathologists; a Fellow, American Society of Clinical Pathologists; and a Founding Fellow, College of American Pathologists. He is also a Consultant, Radiation Medicine, to the Surgeon General, Department of the Air Force; Consultant in Pathology, Atomic Energy Commission, Medical Division, Oak Ridge, Tenn.; Research Associate, National Cancer Institute; and a member of the Expert Panel on Health Laboratory Methods, World Health Organization.

The Ward Burdick Award is given annually in honor of the Denver pathologist who founded the American Society of Clinical Pathologists.

NIHUGF'61

Grounds Upkeep Complicated By Wide Range of Problems

By Mike Maroney
NIH Information Trainee

The typical suburban homeowner, recently recovered from the summer's lawn-mowing efforts, is now regarding with alarm the arrival of the leaf-raking season.

There are times when Milford Myers, Chief of the Grounds Maintenance and Landscaping Section, Plant Engineering Branch, DRS, would like to capsulize his work to domestic scale. But the GM and L Section is responsible for the maintenance of 306 acres here, with approximately 25,000 trees and plants, six miles of roads, 53,000 feet of sidewalks, and 25 acres of parking lots, not to mention the 500 acres that comprise the NIH animal farm.

Hazards Involved

And the job is, of course, complicated by the natural hazards of snowstorms, heavy rains, insects, and plant diseases.

In addition, the Section occasionally takes on such jobs as the safe moving of delicate, expensive electron microscopes weighing up to 1,000 pounds, and the installation of special equipment such as mass spectrometers. These require the use of special rigging equipment.

Under Mr. Myers, the GM and L Section is staffed by Thomas J. Cook, in charge of planning; Charles H. Dove, General Foreman; and 48 fulltime maintenance men.

Are Landscape Architects

Both Mr. Myers and Mr. Cook are landscape architects. They are primarily responsible for maintaining the general appearance of the grounds and the serviceability of the roads and walks; and for development and updating of a master landscaping plan, enabling the GM and L Section to keep pace with the problems accompanying growth and expansion.

As General Foreman, Mr. Dove has charge of the five grounds-maintenance units that insure the NIH reservation's well-groomed look. These units employ tractors, king-size lawn mowers, trucks, and jeeps in their large-scale methods of operation.

The duties of the landscaping crews do not follow a humdrum daily routine, as do similar chores around the home. The work is carefully and scientifically planned from known, anticipated factors. Careful records of seasonal weather are kept, and this information is applied to useful advantage in planning.

The staff recalls last winter's crippling snowfalls with little en-

thusiasm. At that time, while many employees were granted emergency leave owing to the hazardous conditions, the Section was encamped on the reservation on a 24-hour operating schedule, clearing roads, sidewalks, and parking lots, and maintaining the general safety of the grounds.

One of the most notable statistics resulting from this experience is the (estimated) 4,000,000 times the GM and L men "cussed" the weatherman and those who abandoned their cars on NIH roads and parking lots. This "statistic" was humorously reported in the spring issue of the PEB Newsletter. Mr. Myers calls it "a conservative one."

Overtime Is Extensive

It is noteworthy, however, that the Section averaged 52 hours of overtime per man over a period of five snowstorms. The maximum overtime for one man was 160 hours.

The yearly maintenance of the NIH grounds and the animal farm, Mr. Myers said, calls for the use of approximately 125 tons of fertilizers, 25,000 to 30,000 gallons of insecticides and fungicides, and two tons of grass seed.

When asked what plants required special attention, Mr. Myers grinned. "All of them," he said.



The transplanting of this northern red oak in front of the Clinical Center is one of the multiple tasks of the Grounds Maintenance and Landscaping Section, DRS. This 20-foot tree, with its ball of earth, weighs approximately 2½ tons. It is one of 25,000 trees and plants cared for by the GM and L Section. Milford Myers, Section Chief (right), supervises the operation. Charles H. Dove, General Foreman (left), prepares the cable for a hook-up. The three men in the center are contractor's employees who delivered the tree.—Photo by Sam Silverman.

Two Advisory Councils Appoint New Members

The appointments of new members to two National Advisory Councils to replace outgoing members whose terms have expired were announced recently.

Appointed to the National Advisory Heart Council are Drs. George N. Aagaard, Dean of the School of Medicine, University of Washington; Champ Lyons, Chairman of the Department of Surgery, Medical College of Alabama; and Stewart G. Wolf, Jr., Chairman of the Department of Medicine, University of Oklahoma Medical Center.

Others Listed

New members of the National Advisory Neurological Diseases and Blindness Council are Drs. Clark H. Millikan, Neurology Consultant at the Mayo Clinic and Professor of Neurology at the University of Minnesota Graduate School; Raymond DeLacy Adams, Bullard Professor of Neuropathology, Harvard University Medical School, and Chief of Neurological Service at Massachusetts General Hospital, Boston; and Paul C. Bucy, Professor of Surgery, Northwestern University Medical School.

Appointments to both Councils were effective October 1, and will extend through September 30, 1965.

The National Advisory Councils, composed of distinguished leaders in science and public affairs, serve in an advisory capacity to the seven Institutes and the Division of General Medical Sciences, reviewing and making recommendations to the Surgeon General of the Public Health Service on grant applications submitted to NIH.

DBS Scientists Identify 4 New Adenoviruses

Four new adenoviruses have been identified and described by NIH scientists from more than 50 strains of adenoviruses isolated during a longitudinal study of the microbial experiences of children in Washington, D.C.

Drs. Leon Rosen and Joseph A. Bell of the Laboratory of Infectious Diseases, National Institute of Allergy and Infectious Diseases, and Dr. Samuel Baron of the Division of Biologics Standards report their findings in the Proceedings of the Society for Experimental Biology and Medicine.

Prototype Chosen

After all untyped adenovirus isolates obtained during the study had been grouped into four serotypes by means of hemagglutination inhibition tests, one strain of each type was chosen as the prototype for further study.

Some of the children yielding isolates of the new serotypes had minor illnesses of a variety of types. However, minor illnesses were extremely prevalent in the study population and the data available were not sufficient to determine whether the newly recognized adenoviruses were etiologically associated with any of them.

After reviewing these and other data presented, the Adenovirus Committee of the NIAID recommended that these viruses be designated adenovirus types 25, 26, 27, and 28, respectively.

Tumor Research in Fowl Discussed at Conference

An informal conference, attended by experts in the avian tumor virus field, was held at the National Cancer Institute recently to advise the NCI Viruses and Cancer Board on problems associated with tumor research in fowl.

The meeting was held at the request of Dr. Stanhope Bayne-Jones, Chairman of the Viruses and Cancer Board and a member of the National Advisory Cancer Council.

The group discussed sources of inbred lines of chickens, turkeys, Japanese quail, and ducks. It also explored the need for germfree and specific pathogenic-free lines of fowl and the need for identifying reagents for avian viruses.

In addition, the consultants considered the possibility of holding a conference on the nomenclature of avian tumor viruses, as well as plans for an international conference on avian leucosis.

The Viruses and Cancer Board is advisory to the Director of the National Cancer Institute.

Medical Records Processes Vital Information

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Hazel Pickett. It supervises the requests for and release of clinical information. For example, if Bob wants clinical data sent to his insurance company, his written consent authorizes the Medicolegal Section to release the information.

When the research project in which Bob has been participating is completed and Bob is physically able to be returned to the care of his referring physician, he is discharged. Work on his medical record continues, however.

After Bob's discharge the Research and Statistics Section, headed by Esther Ridenour, must do a quantitative and qualitative analysis to insure its completion. This includes obtaining the required signatures on all the forms pertaining to his treatment and obtaining any outstanding professional reports.

Records are not always completed as soon as the patient is discharged, since some special laboratory tests may take several months to complete and be forwarded for inclusion in the patient's chart.

Demand Is Constant

Because the Clinical Center is primarily concerned with medical research, there is a constant demand for medical records to be used in retrospective studies. A complete medical record, properly coded and classified, is the only means by which an accurate retrospective study can be conducted.

These studies are classified as minor or major depending upon the amount of assistance required of the Medical Record Department. A minor research study is one in which the investigator needs but minimum assistance when he submits the subject of his study and a list of the medical records needed for his review. A major study, which is the type most often requested, is one for which the in-



Gloria Burich, Chief of the Medical Record Department (left), and Esther Ridenour, Research & Statistics Section Head, consult the Diagnostic Index to obtain information on Clinical Center patients' diagnoses and operations.

vestigator requests the librarian to prepare graphs and statistics.

Examples of requests for assistance may embrace any one of the following: (1) a specific disease; (2) two or more related diseases; (3) a specific operation; (4) the incidence of a type or types of diagnoses on a given Service or Institute for a definite period; (5) toxic reactions; and (6) selected causes by results of diagnostic or laboratory tests. One research study may require the reviewing and screening of a hundred or a thousand medical records.

In medical and administrative research, the planning, preparation, and presentation of clinical data and, subsequently, statistics are of the utmost importance in evaluating the scope of accomplishment of a research center.

The Files Section, under the supervision of Evelyn King and Virginia Bray, is one of the most critical parts of the Medical Record Department. It has the monumental task of receiving, filing, and circulating medical records and reports.

This is accomplished by maintaining a requisition and charge-out system of control. As a result, this Section is able to determine the exact location of any one of the 37,000 medical records, including Bob's, which have accumulated since the opening of the Clinical Center in 1953. Special record forms and folders have been designed to cope with the perpetual expansion of medical records.

Members of the Medical Record Department staff are constantly making an effort to continue streamlining their service to patients, physicians, and administrators. They are indeed doing their part to make sure the Clinical Center will never be "like a clock without hands."

Dr. Shock Sees Preventive Medicine As Best Approach to Care for Aged

Preventive medicine is the most effective approach to medical care of the aged, according to Dr. Nathan W. Shock, Chief of the Gerontology Branch of the National Heart Institute.

Speaking at a symposium on "Health Care for the Senior Citizen," at the recent annual meeting of the American Association of Medical Clinics in New York, Dr. Shock defined effective health care for the elderly as "a continuing service throughout life, practiced by physicians with an awareness of the nature of age changes and a recognition that elderly people can respond to therapy."

Early Diagnosis Stressed

"Most of the handicaps of extreme old age," he pointed out, "may be traced back to early beginnings in middle age. In many instances early diagnosis and the application of present knowledge might well have prevented the final stages of incapacity."

Gerontological studies of individuals between the ages of 20 and 95 have shown that where decreases of function due to age occur they represent primarily a reduction in reserve capacities. From both histological and physiological research, it is now apparent that a part of the loss of reserve capacities in many organ systems is due to the gradual dropping out of functioning cells and units.

It is clear, therefore, that maintenance of body function in advanced age will depend, at least in part, on methods of preventing tissue losses and that these measures must be introduced in middle age or earlier.

Physician Is Keystone

Dr. Shock cited the practicing physician as the keystone of health care for the elderly, stating: "It is he who must bring the results of research to their ultimate fruition in the treatment of the patient. The complaints and infirmities of the elderly must not be considered as the natural concomitance of aging for which nothing can be done."

"Although there is still much to be learned about the nature of aging, laboratory research," he said, "has already shown that older people retain many physiological capacities which will respond to retraining as well as to therapeutic measures."

In the light of wide individual differences in the effects of aging on various body functions, Dr. Shock stressed the need for physicians to recognize that chronological age, in itself, is a poor

index of capability and that each individual requires special study and assessment to determine both his strengths and his weaknesses.

He also emphasized the importance—for middle-aged and elderly persons—of periodic physical examinations and ready access to health maintenance clinics. He labeled as essential a system of adequate nursing homes and home care with free mobility of patients in and out of hospitals. Coordination of medical, hospital, and nursing services, he said, would greatly improve the medical care of the aged and would minimize costs.

NHI Papers, Speeches And Exhibits Presented At Fla. AHA Meeting

Extensive participation by the National Heart Institute in the 34th Scientific Sessions and Annual Meeting of the American Heart Association included a speech by Dr. Ralph E. Knutti, NHI Director; the presentation of five scientific papers, sponsorship of a conference, and the showing of two exhibits. The sessions and meeting were held October 18-24 at Bal Harbour, Fla.

Dr. Knutti's subject was "The Relation of Research Programs of Federal Government to AHA and Other Voluntary Agencies." PHS Surgeon General Luther L. Terry spoke on "Heart Disease Control—A Joint Responsibility," and Dr. James Watt, Chief of the PHS Division of International Health and former Director of the Heart Institute, addressed a staff conference of heart associations.

A field staff conference conducted by the NHI Heart Disease Control Program was held October 16-18 as an adjunct to the meeting.

Dr. Eugene Braunwald, Chief of the Cardiology Branch, and Dr. Arthur E. Rikli, Chief of the Heart Disease Control Program, were participants in two conferences.

Authors of NIH papers presented at the meeting were Dr. Braunwald, Dr. James O. Davis, Dr. Joseph T. Doyle, Dr. Thomas R. Dawber, Dr. William B. Kannel, A. Sandra Kinch, and Harold A. Kahn.

Also, Dr. James W. Feeley, Dr. T. David Lee, Dr. William R. Milnor, Jr., Dr. Roland Folse, and Dr. Maurice M. Aygen.

The exhibits were "Directions of Present-Day Research in Gerontology" and a special exhibit, "Group A Streptococci Identification," sponsored by the Heart Disease Control Program.



Elizabeth Cavanaugh, Transcribing Section Head (left), discusses the narrative summary prepared by a patient's doctor, which Mary Donohue has transcribed.

NCI-NINDB Study Links Cause of Polycythemia To Tumor By-Product

Polycythemia, an excessive number of red blood cells, has been reported in association with various neoplasms; but only with renal and cerebellar tumors have there been a sufficient number of cases to suggest a significance to this association.

Scientists from the National Cancer Institute and National Institute of Neurological Diseases and Blindness have collaborated in a study suggesting that the polycythemia is caused by a tumor-produced substance which stimulates the marrow to an increased production of red blood cells.

Dr. Thomas A. Waldmann, of NCI's Metabolism Service, and his associates observed that none of the many proposed explanations appearing in the literature were completely satisfactory.

CC Patient Studied

A study directed toward an understanding of this association, was undertaken when a patient with recurrent cerebellar hemangioblastoma and polycythemia was admitted to the Clinical Center under NCI sponsorship.

A review of the patient's history showed that previous resection of cerebellar tumors was followed by return of the red-cell volume to normal.

Studies with radioactive isotopes showed that the patient had a high red-cell volume and normal plasma volume.

His plasma iron turnover and red-cell iron turnover were also accelerated, indicating increased red-cell synthesis. (However, the presence of the disease, polycythemia vera, was ruled out by the normal white-cell and platelet counts and splenic size.)

Finding Is Significant

Body-surface scanning over the tumor and other extramedullary sites showed an absence of incorporation and release of radioactive iron, characteristic of red-cell synthesis. This finding showed that the tumor was not producing red cells.

A marked stimulation of red-cell production was observed in fasted rats injected with fluid aspirated from the tumor. This effect was not observed with the patient's concentrated urine, plasma, ventricular or spinal fluids, or with normal plasma or spinal fluid.

The investigators suggest that the best hypothesis to explain the observed association of hemangioblastoma and polycythemia is that the tumor produces a substance that stimulates the production of

NIH-UGF DRIVE

(Continued from Page 1)

not be indifferent to the work of these agencies. As part of an organization dedicated to furthering the health and well-being of other people, we share their day-to-day interests. The quality and scope of the services UGF agencies can render depends upon the kind of response we make to their yearly appeal for help."

Mr. Hansen said he hopes no one will fail to answer that appeal.

A breakdown of contributions at the end of the fourth week of the campaign follows:

	% of Participation	% of Quota
PROG. DRCTN.	80	117
DGMS	108*	101
NIDR	89	98
NIAID	92	95
DRG	109*	94
DRS	94	85
DBS	84	82
NIAMD	69	82
CC	78	70
NINDB	75	66
NCI	65	59
NIMH	56	58
OAM	75	56
NHI	41	44
TOTALS	76	71

* Result of increase in number of employees since establishment of the campaign quotas.



Katherine A. Eckloff, Office Services Branch, OD, tosses coins in the UGF Wishing Well. Designed by the Medical Arts Section and built by the Carpenter Shop, it is located near the Clinical Center cafeteria entrance.

red cells by the marrow.

The paper, which appears in a recent issue of the American Journal of Medicine, was written by Drs. Waldmann; Edgar H. Levin, formerly of NCI and now on the staff of the Department of Medicine, Bellevue Hospital, New York City; and Maitland Baldwin, Director of Clinical Research, NINDB,

Mice Experiments Show Drug-Induced Tolerance To Tumor Homografts

Delta Uphoff, of the National Cancer Institute's Laboratory of Biology, has reported in the Plastic Reconstructive Surgery and Transplantation Bulletin preliminary results of investigations of drug-induced immunological "tolerance" in mice to tumor homografts.

The study originated in Miss Uphoff's earlier observations that the drug, methotrexate, protects mice from the lethal effect of a homograft reaction following total-body irradiation and the inoculation of genetically incompatible bone marrow.

Methotrexate Inhibits Reaction

Since the methotrexate inhibited a graft-vs.-host reaction, it was reasoned that "tolerance" to homografts could be produced by pretreatment with a combination of the drug and a viable cell suspension from an appropriate foreign strain.

In the present study, mice were rendered "tolerant" to tumor transplants from mice of an unrelated strain by pretreatment with methotrexate and a tissue brei of spleen and thymus of the donor strain. Progressive tumor growth was not observed in mice pretreated with drug or tissue brei alone.

Induction of "tolerance" was accomplished in three different strain combinations which varied in their genetic incompatibility. It was found that to induce the "tolerant" state, pretreatment over a prolonged period of time was necessary.

Simple Tests Stressed

In her report, Miss Uphoff stressed the need for comparatively simple test systems for determining the optimum pretreatment method for inducing "tolerance." She noted that marrow transplantation in the lethally irradiated mouse was too complicated a test system, and that tumor transplantation, although less critical than skin transplantation, made possible the trial of more types of treatment schedules than would otherwise have been feasible.

Knowledge of factors that control susceptibility to cancer transplantation is important both to an understanding of immunity to cancer and to the development of practical methods of conditioning an individual to accept a genetically incompatible transplant.

Coatney Elected Society President At D.C. Meeting

Dr. G. Robert Coatney, Chief of the Laboratory of Parasite Chemotherapy, NIAID, is the newly elected President of the American Society of Tropical Medicine and Hygiene.



He succeeds Dr. William W. Frye, Dean of the School of Medicine of Louisiana State University, whose term of office extended through the annual meeting of the Society held last week, Wednesday through Friday, at the Willard Hotel in Washington.

The meeting was attended by more than 400 specialists in tropical disease research from this country and abroad.

Dr. Coatney, well known for his contributions to malaria research, was chosen President-elect of the Society at its annual meeting last year. A Scientist Administrator in the PHS Commissioned Corps and an NIH staff member for more than 20 years, Dr. Coatney has been Chief of the Laboratory of Parasite Chemotherapy since its establishment in 1959.

He is the recipient of a number of awards in the field of malaria research, has served as a special consultant with the World Health Organization, and is presently a member of its Expert Committee on Malaria.

First Meeting in D.C.

Last week's annual meeting of the Society was the first in its 57-year history to be held in the Nation's Capital. Scientists of six of NIAID's laboratories presented papers at the meeting. The laboratories thus represented were the Parasitic Diseases, Parasite Chemotherapy, Tropical Virology, Clinical Investigation, Infectious Diseases, and Rocky Mountain Laboratories.

Dr. Frye, who is a member of the National Advisory Allergy and Infectious Diseases Council, presided at the opening session, at which Dr. Richard M. Taylor of the California State Department of Public Health delivered the 26th Annual Charles Franklin Craig Lecture. He was introduced by Dr. Justin M. Andrews, Director of NIAID. The lecture was on the subject of insect-borne diseases.

Approximately 100 papers were presented during the 4-day meeting.

NIHUGF'61

BUILDING 31

(Continued from Page 1)

public authorities, scientific institutions, and scientists in the conduct of . . . research . . . relating to the causes, diagnosis, treatment, control, and prevention of physical and mental diseases and impairments of man . . ."

Dr. Shannon said he was sorry that members of the Congress could not attend. He conveyed regrets from Senators Lister Hill of Alabama, Margaret Chase Smith of Maine, and Congressman Melvin R. Laird of Wisconsin, and read a message from Congressman John E. Fogarty of Rhode Island.

Shares Gratification

Dr. Terry said he shared Dr. Shannon's gratification in seeing the building finished and occupied. He also acknowledged heavy responsibilities laid on the Service and NIH by the Congress and the Nation, and said to Dr. Shannon, "You and I know that neither we nor anyone else could carry out these responsibilities without the support of the staff and personnel at every level of NIH and the entire Public Health Service."

Following his introduction of guests, Dr. Terry presented Mr. Jones, recalling that as Chairman of the Committee of Consultants on Medical Research, he "increased his already extensive knowledge of the National Institutes of Health and its programs, and contributed greatly to the blueprint of its future."

In applying mortar to the cornerstone, just to the right of the main entrance, Mr. Jones employed the trowel used by former President Harry S. Truman at cornerstone ceremonies of the Clinical Center on June 22, 1951, and by Ogden Mills, former Secretary of the Treasury, at the cornerstone laying of the Public Health Service Building at 19th St. and Constitution Ave., N.W., occupied by the Service until World War II.

Lists Cornerstone Contents

Mr. Jones pointed to the significance of the NIH programs and expressed a hope for "the broad purpose of medical research fully backed by the will of the American people."

He listed the items deposited in a specially constructed and sealed plastic box behind the cornerstone: the NIH Brochure, the NIH Scientific Directory and Bibliography 1960; the PHS Grants and Awards by NIH, FY 1960; a master plot plan, an aerial color photograph of NIH; a photograph of Top Cottage with the new building in the background; a roster of PHS Advisory Groups; and one copy each of the NIH and DHEW telephone directories.

Also included is a copy of the *NIH Record* of September 26, 1961, carrying a story and picture of

A PERSIAN FANTASY COMES TO NIH



Members of the cast of "Persian Fantasy," to be presented in the CC auditorium Thursday night by the second U.S. Army Showmobile Unit No. 15, are posed in a scene from the elaborate production.—U.S. Army Photo.

the new building; a copy of the NIH Calendar of Events of October 30-November 3, 1961; a program of the ceremonies with the names of the participants and invited guests; and a photograph of the ceremonies, taken, developed, and printed by means of an automatic camera.

The ceremonies were preceded by a luncheon for the special guests, prepared by Government Services, Inc., which will operate the building's cafeteria, designed to accommodate 450 persons.

Guests Tour Building

Following the luncheon the guests were conducted on a tour of the first and ground floors of the building.

They also visited the ninth floor, occupied by extramural program units of the National Institute of Arthritis and Metabolic Diseases, to see a typical utilization of floor space.

Designed in the shape of an "H" and located at the north end of the NIH reservation, the new structure will house approximately 1,800 employees. The larger of the two wings, Wing A, is 11 stories high, while Wing B rises five stories above ground.

The building is modern in architectural concept and features large glass areas. White cast stone facing and antique lorraine brick form the exterior finish of the poured concrete structure.

Located in the building will be the offices of the Institute Directors and their Extramural Program branches, together with the Division of General Medical Sciences and the Division of Research Grants.

Moves to the new building began October 23 with the arrival of

One of the most elaborate entertainment programs ever presented especially for Clinical Center patients is scheduled for Thursday evening at 8:30 in the Clinical Center auditorium, according to Arnold Sperling, CC Patient Activities Chief. NIH employees, their families and friends are invited.

Members of the Second U.S. Army Showmobile Unit No. 15 will present "Persian Fantasy," performed in the exotic atmosphere of the Arabian Nights. This all-Army award-winning production promises to "take you, on the wings of your imagination, into a land of fabled wonderment . . . of pictorial excitement and exotic sights and sounds . . . for this is a fantasy."

The production, according to report, will include delightful music and dancing, beautiful girls, and fantastic scenery. Arrangements for its presentation here were made by Mr. Sperling in cooperation with Col. William R. Heard, Special Services Officer, Second U.S. Army, Fort George G. Meade.

several units from rented space in Bethesda office buildings. The first scheduled major move is that of personnel and equipment from Building T-6, expected to be completed about the end of November.

Virtually every NIH office will be affected by the moves, with other personnel being shifted to vacated space both on the reservation and in five Bethesda buildings and the Robin Building in Silver Spring.

The Norair Engineering Corporation of Washington, D.C., was the contractor for Building 31 and the architects were two firms: Keyes, Lethbridge and Condon, and Richard Collins and Associates.

Selective Regeneration Of Sympathetic Fibers Seen in Adult Mammals

Although regenerating peripheral nerve fibers may establish connections with foreign nerve cells, National Institute of Neurological Diseases and Blindness scientists have shown that, if given a choice, regenerating sympathetic fibers of adult mammals connect selectively with their appropriate nerve cells.

Thus, specificity of nerve fiber and nerve ending which has been demonstrated previously in lower animals and embryos, can also be assumed to occur in adult mammals.

These conclusions resulted from studies conducted by Drs. Lloyd Guth and Jerald L. Bernstein of the Laboratory of Neuroanatomical Sciences, NINDB.

In initial experiments, the cervical sympathetic trunk of the cat was severed and allowed to regenerate. In normal cats, certain of the fibers connect with ganglion cells that control the dilation of the pupil of the eye; others connect with ganglion cells that constrict blood vessels in the ear.

After regeneration was complete, the investigators stimulated the nerve fibers controlling these functions. They found that the original relationships had been established, indicating that regeneration had indeed been selective.

In additional experiments, they interrupted only those fibers controlling pupillary function. Before complete regeneration, the function of these nerves is taken over by the other fibers via collateral connections. After completion of regeneration the investigators found that the collateral fibers became inactive and the regenerated fibers again established appropriate connection with their original ganglion cells.

These findings were reported in *Experimental Neurology*.



This American eagle, made of cast aluminum with an anodized gray finish, is poised on a polished aluminum ball atop a 48'10" steel flagpole, one of two in front of the Clinical Center.