$17 Million Grant Supports Study Of Toxic Drugs

A research and training program of greater scope than any prior effort in studying the possible toxic effects of drugs and other chemical substances to which man is exposed will be established at the University of North Carolina.

The program will be supported by a $17 million 7-year grant from the National Institute of General Medical Sciences.

The award was announced by Dr. Luther L. Terry, Surgeon General of the Public Health Service.

**Purpose Explained**

The research and training center in pharmacology and toxicology is to bring to bear all the modern knowledge and techniques of the physical and biological sciences as well as mathematics in attacking problems relating to the safe and rational use of drugs and to the toxic effects produced by drugs or other chemicals.

In announcing the award, the largest grant ever made by the National Institute of General Medical Sciences, Surgeon General Terry expressed the belief that many things would be accomplished in the multidisciplinary program that could not be achieved

(See TOXIC DRUGS Page 4)

**Dr. Barrows Lectures To Students at MIT**

Dr. C. H. Barrows Jr., of the Gerontology Branch, NHI, Baltimore City Hospitals, spoke on "The Effects of Aging on Enzyme Content of Tissues" at a summer course conducted by the Massachusetts Institute of Technology.

The course, on applications of basic sciences and engineering to aging, was offered by the MIT Department of Nutrition and Food Science as a supplement to the Oral Science Training Program.

Dr. Barrows summarized his Baltimore work on the effects of senescence on the biochemical composition of animal tissues.

(Continued on Page 4)
EMPLOYEE TRAINING

With the approach of the 1965-66 academic year, NIH personnel considering job-related courses may be interested in learning what financial assistance is available under the Government Employees Training Act or the Public Health Service Act.

Under authority of the Government Employees Training Act, NIH may support job-related training for civil service employees when:

1) the gains to be derived by NIH justify the cost; 2) the employee has at least one year of current continuous civilian service (when training is more than 40 hours in a single course); 3) training is not for the sole purpose of obtaining a degree; 4) training is not designed to provide skills which normally would be required for the employee to qualify for his job; 5) training is not designed primarily to qualify employee for promotion; 6) funds are available; and 7) supervisors recommend employee for the training.

Discussion Urged

To assure timely processing of requests and to meet a maximum number of training needs, employees and supervisors are encouraged to discuss training and development plans in advance of school registrations.

Commissioned Officers desiring NIH support of training should refer to the Commissioned Corps Personnel Manual Circular No. 113, July 4, 1965, distributed to all Commissioned Corps officers on duty as of July 1, 1965.

The circular defines short- and long-term training, outlines the method to be followed when applying for training both inside and outside the Service, and provides three copies of Form PHS-1122, Application for Training Outside the Service.

Training Application Revised

Attention is called to the fact that the application for training has been revised. The old application form may be used for short-term requests only. Completion and long-term training requests must be submitted on the revised application form.

Since the new form will not be available immediately throughout regular service areas, Commissioned Corps Officers are urged to retain for use the copies attached to the Manual Circular.

MUE Work Near Bldg. 31 Affects Center Dr. Traffic

Examination work for the MUE Master Utilities Extension program began August 12 at the main entrance of Building 31.

The Plant Safety Branch reports that until the work is completed one-way traffic will be maintained on Center Drive near Buildings 31 and 6. All NIH shuttle busses and private automobiles and taxis will be routed to the East Entrance of Building 31.

The information desk normally located in the A wing is now on the B-2 level of the B wing —no change in phone.

Construction work now in progress for new stairwells at the north end of Building 4 will also affect traffic on Center Drive and Memorial Road. Employees are requested to use alternate routes to bypass this area.

NATIONAL INSTITUTE OF HEALTH, Bethesda, Md.

News from Personnel

NEW IDENTIFICATION CARDS

As of October 1 the color of the identification card of PHS Commissioned Officers will change from blue to green to conform with identification cards issued by other uniformed services.

This change will necessitate issuing new cards for nearly 1,200 Commissioned Officers at NIH. The Commissioned Officer Section, Personnel Management Branch, and I/D Personnel and Administrative Officers have arranged for designated points within I/D work areas to which COs may go for fingerprinting and signing the new cards. Officers will be notified when the designated points have been established.

Any officer who has not had an official identification card picture taken at NIH within the last three years will need a new photograph for the new identification cards.

The Photography Section, DRS, will perform this service any work day, Monday through Friday, from 9 a.m. to 4 p.m., in Room B1D40 of the Clinical Center.

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26 Organizations Participate

Twenty-six organizations, including national laboratories operated by the Atomic Energy Commission and several commercial firms, participated in the recent survey conducted by the Foundation.

Film badges were sent from each of the participants to the Foundation in order to provide a variety of types, qualities, and combinations of radiation. The badges were then returned to the participants for processing and evaluation. Comparisons with the known exposures were then made by the Foundation.

NIH's Radiation Safety Department was one of only two organizations which met all of the 10 performance criteria for an exposure of 20 milliroentgens. Only 3 of the participating met the criteria at the 50 milliroentgen level.

Andrews Gives Credit

Dr. Howard L. Andrews, Chief of the Radiation Safety Department at the Clinical Center, states that credit for this outstanding performance is primarily due to Deputy Radiation Safety Officer Joseph M. Brown and Mrs. M. L. Dickinson who is directly responsible for the film badge processing.

"This survey indicates," Dr. Andrews said, "that NIH film badges are reliable and accurate indicators of radiation exposure."
SAFETY
(Continued from Page 1)

These plans—several times changed during the weekend—were communicated to officers of the State and County police to insure their full cooperation.

In all, approximately 200 enforcement and security personnel were assigned to specific posts as to their duties.

The weekend changes in plans resulted from shifts in the location of the ceremonies from the CC auditorium to the area in front of the building’s main entrance, plus the President’s decision to visit some of the patient areas of the Clinical Center.

Each of these changes necessitated replanning and the redrawing of the maps pinpointing the posts and responsibilities of the security forces.

Shannon Praises PSB

Of the numerous commendations received by the NIH Plant Safety Branch none was more welcome than the following memo from Dr. James A. Shannon, Director of NIH:

Shortly after President Johnson left NIH, one of the White House Secret Service men told me that NIH had provided one of the best security arrangements that he had seen. I understand that this didn’t ‘just happen’ but resulted from careful and exhaustive planning that you and your staff developed over the weekend.

“I am sure that you are proud of a job well done, and certainly I am no less so. A number of people have told me that the guard force did a particularly good job, and I am sure that your fire, protection, and safety groups did an equally able job as evidenced by the results.”

Book Chronicles Story Of Modern Medicine

The story of modern medicine is chronicled in a new book, “Famous Modern Men of Medicine,” by Dr. Caroline Chandler of the National Institute of Mental Health. Although written primarily for teenagers, it has been well received by the professional community.

Dr. Chandler is Chief of the Child Mental Health Section of the NIMH Community Research and Services Branch. She joined the staff of NIMH in 1961 as Chief of the Demonstration Section of the Community Services Branch. She is also Assistant Professor of Pediatrics at Johns Hopkins School of Medicine.

Published by Dodd, Mead & Co., the book was released July 19.

NHI Celebrates 17th Anniversary With New Director, Advances in Research

The National Heart Institute is celebrating its 17th anniversary this month with a new Director, Dr. William H. Stewart, and new hope for victory over the heart and blood vessel diseases.

The Heart Institute was established in August 1948 by Act of Congress to administer functions of heart research, training, and administration set forth in the National Heart Act. Intramural research projects in cardiovascular diseases and gerontology conducted elsewhere in NIH were transferred to NHI and the NHI Director was designated as the focal point of leadership and coordination for the total heart program.

Dr. Cassius J. Van Slyke was the first Director. He was followed in 1952 by Dr. James Watt who served until 1961, when Dr. Ralph E. Knutti was appointed. Now retired, Dr. Knutti turned over the reins this month to Dr. Stewart.

Significant Progress Cited

Over the years the NHI has made significant strides in heart research through its intramural studies and world-wide research grants programs.

Though heart disease has been the leading cause of death in the United States since 1921, deaths from rheumatic fever, congenital heart disease and high blood pressure have decreased.

Cures for hardening of the arteries and coronary heart disease are still eluding medical scientists, but researchers have uncovered factors suspected of causing heart disease.

The NHI has been one of the world leaders during the past 17 years in supporting research against the cardiovascular ills. Congress appropriated the Institute more than $124 million for Fiscal 1965 to support a variety of programs, including 12 intramural laboratories, more than 2,000 extramural research grants in the U.S. and overseas, and a number of collaborative and epidemiological studies.

NHI Contributions Impressive

Through the years NHI scientists have compiled an impressive list of scientific accomplishments which contributed to a major report presented by NHI and the American Heart Association in “A Decade of Progress Against Cardiovascular Disease” in February 1969.

More recently the NHI scientists participated in the Second National Conference on Cardiovascular Diseases in Washington in November 1964.

Dr. Knutti was co-chairman for the event when 700 of the country’s leading heart research experts recommended a sweeping perspective of priorities to be confronted in the next decade. The physicians made (See NHI ANNIVERSARY, Page 7)

Drs. Farrier and Black Named CC Assoc. Directors

Appointment of Dr. Robert M. Farrier and Dr. Roger L. Black as Associate Directors of the Clinical Center was announced last week by Dr. James A. Shannon, Director of NIH. Both appointments will be effective September 1.

With the retirement this month of Dr. C. K. Himmelsbach as Associate Director of the Clinical Center, a reorganization in the Office of the Director of the Clinical Cen-
TOXIC DRUGS
(Continued from Page 1)

by the individual scientist or by the usual university department of pharmacology.

"Through this research and training program," Dr. Terry said, "the University of North Carolina can exert a generally salutary effect on American pharmacology by fostering new outlooks and by substantially increasing the number of talented scientists interested in pharmacological problems."

The Director of the new Pharmacology-Toxicology Center will be Dr. Thomas C. Butler, Professor in the Department of Pharmacology, School of Medicine, University of North Carolina at Chapel Hill. Dr. Butler is internationally known for his contributions to pharmacological research.

Center at Chapel Hill

The Center will be located at Chapel Hill, a part of the "research triangle" formed by the University of North Carolina at Chapel Hill, Duke University, and North Carolina State University at Raleigh.

The triangle area is also the site of the projected U.S. Public Health Service National Center for Environmental Sciences.

The proximity of all these research facilities will provide ready opportunities for consultation and cooperation and will greatly enhance scientific communication.

The Center's research programs in pharmacology and toxicology will include:

1. Studies of the physical and chemical disposition of drugs.
2. Studies of drug idiosyncrasy (how individuals differ in their responses to drugs) jointly investigated by biochemists, immunologists, and geneticists.
3. Studies of the biochemical effects of drugs and their influence on tissue morphology, with major emphasis on the mechanisms by which drugs induce abnormalities in the developing fetus.

Other Programs Listed

5. Biostatistical studies which will include analysis of pharmacological data and theoretical studies of the mathematical drug disposition and drug action.

The Surgeon General pointed out that potential toxic reactions to the mounting numbers of drugs currently prescribed is a serious problem. As the practice of medicine have become a matter of increasing concern in recent years, there is recognition in both lay and medical circles that these problems are not receiving adequate attention.

Although there have been in the past numerous studies of the physiological and chemical disposition of drugs, research in this area, Dr. Terry emphasized, has not been as systematic or comprehensive as would be desirable to furnish a basis for the wholly rational use of drugs.

Olive Meader to Retire From Research Grants Review Post at DRG

Mrs. Olive R. Meader, a Scientist Administrator in the Research Grants Review Branch, Division of Research Grants, will retire from Federal service August 27. She had been a member of the DRG staff since 1945.

An alumnus of Ohio Wesleyan University, Mrs. Meader was at one time on the medical record librarian for the Grace New Haven (Conn.) Hospital. She was later associated with Yale University as editorial assistant of the Journal of Economic Geology.

Mrs. Meader joined the DRG staff as special assistant to Dr. Dale R. Lindsay, former Chief of the Division. She was Executive Secretary of the Advisory Panel on Accident Prevention, which later became a study section, from 1958 until 1962.

Serves Study Section

She also served as Executive Secretary of the Special Study Section from 1957 until her retirement. In this position she developed and maintained a system to ensure complete and objective scientific review of the many research grant applications that do not fall within the purview of a study section.

This system of special review fostered the development of emerging new fields of research, many of which have matured to the extent of becoming study sections.

These include accident prevention, computer research, primate research, toxicology, disease control, and history of life sciences.

The subject matter now reviewed by the Special Study Section ranges from air pollution meteorology, ultrasonic physics, and urban sociology to anthropology.

NIMH Announces 1st Grant Under 1963 Community Mental Health Centers Act

Approval of the first construction grant under the Community Mental Health Centers Act of 1963 was announced recently by the National Institute of Mental Health.

The Act authorized a total of $150 million for assistance in constructing comprehensive community mental health centers over a 5-year period. First appropriation of $35 million was made for Fiscal 1965, with the funds available through Fiscal 1966.

The grant, totaling $351,000, was made to the Mid-Missouri Mental Health Center in Columbia, Mo. The Federal funds will provide 49.91 percent of the mental health center portion of the Columbia construction costs. Construction of this center is under the direction of the Missouri Division of Mental Diseases, George A. Ulett, M.D., is Director of the division.

Center to Serve 9 Counties

Aided with the University of Missouri Medical School, the Mid-Missouri Mental Health Center is part of a $9.2 million medical facility already under construction. The Federal funds will assist in the construction of a community mental health center designed to serve nine counties with a total population of 197,072.

An advisory council, representing public and private local agencies, will assure coordination of community facilities with the mental health center.

According to regulations for the Centers Act, to be eligible for Federal assistance a center must be a part of a program providing "as least the essential elements of comprehensive mental health services."

These are defined as inpatient and outpatient services, partial hospitalization, social work services, 24 hours a day, together with consultation and education services to community agencies and professional personnel.

Optional Services Noted

In addition, the regulations list a complete range of optional services that include diagnostic, rehabilitative, precare and aftercare services, and training, research and evaluation. The Mid-Missouri Center will offer this full range of services.

Provisions of the Centers Act are being administered jointly by NIMH and the Division of Hospital and Medical Facilities, both agencies of the Public Health Service.

Before approval of individual center projects by the PHS Surgeon General, each State must submit and have approved a State plan for centers covering an inventory of existing mental health resources, a survey of the area needs, and an establishment of priorities to meet these needs.

Dr. Stanley F. Yolles, NIMH Director, said the Missouri Center is the first of between 500 and 700 community mental health centers expected to be in operation by 1976.

The centers, he said, are the key segment of a new national mental health program designed to establish the foundation for a new system of treatment with its focus in the community.

Traditionally, the responsibility for the mentally ill has been vested solely in the State, and has been discharged through a system of operating State mental hospitals, many of which have become obsolete.

Dr. Brody Named Chief Of Neurology Institute's Epidemiology Branch

The appointment of Dr. Jacob A. Brody as Chief of the Epidemiology Branch of the National Institute of Neurological Diseases and Blindness was announced recently by Dr. Richard L. Masland, Director of the Institute.

A career Public Health Service officer, Dr. Brody has headed the Epidemiology Section of the Arctic Health Research Center in Anchorage, Alaska, for the last three years. His experience in infectious diseases will strengthen the Neurology Institute's investigation of viruses as a possible cause of such chronic neurological disorders as multiple sclerosis, amyotrophic lateral sclerosis, and certain forms of Parkinson's disease. Dr. Brody served as secretary of a scientific mission to Russia concerning viral infections of the nervous system last year.

A Graduate of Williams

Dr. Brody received the A.B. degree from Williams College, Williamstown, Mass., and the M.D. degree from Downstate College of Medicine, State University of New York, near his childhood home and birthplace in Brooklyn.

He was elected to Alpha Omega Alpha, honorary medical fraternity, and following an internship at Roosevelt Hospital, New York City, joined the surveillance staff at the Communicable Disease Center in Atlanta, Ga.

In addition to the Russian mission, Dr. Brody's international assignments have taken him to Mexico, Pakistan, Costa Rica and Panama.

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LBJ Signs Research Facilities Act Here

(Continued From Page 1)

Anthony J. Celebrezze and John W. Gardner, the outgoing and incoming Secretaries of DHEW; Wilbur J. Cohen, Under Secretary of DHEW; Dr. Terry, the outgoing Surgeon General; Dr. David E. Price, Deputy Surgeon General; and Dr. James A. Shannon, Director of NIH.

Also among the President's hearers were representatives of many universities and health and scientific organizations, as well as a large number of foreign diplomats and NIH employees.

Referring to NIH, the President said, “Here on this quiet battleground of our Nation today leads a worldwide war on disease. The experience of the past ten years as we know that we can win.”

He listed some of the major achievements of that period as:

• the development of new vaccines that “have almost eliminated from our entire land the crippling curse of polio”;
• development of a measles vaccine that “promises victory over disease which kills 20 to 30 percent of the people of other countries”;
• a new vaccine that “may soon rid mothers of the fear that their unborn children could become the victims of German measles”;
• chemical treatment that has “already extended the lifespan of cancer victims and shows a very high promise of far greater successes”;
• the artificial kidney that “gives invalids new hope for normal and productive life,” and
• research that is “making it possible to renew and to rebuild the human heart.”

Referring to the Research Facilities Construction measure, Mr. Johnson said, “This bill that I will sign shortly will provide the bricks and mortar for the biomedical research laboratories through which this entire Nation. It will, he added, “help foster new breakthroughs in our war on disease” and “will accomplish the miracles of which today we only dream.”

Grants on Matching Basis

The grants under this law will go to universities, hospitals, medical schools and non-profit organizations on a 50-50 matching basis.

Looking ahead, Mr. Johnson said, “A staggering era for medicine has begun. . . . You here at NIH are shaping it, and you can be proud of what you are doing as we are proud of you.”

In announcing Dr. Terry’s resignation, Mr. Johnson referred to him as “one of our great leaders in the health field” and said, “We owe a deep debt of gratitude to Dr. Luther Terry and his family, and we regret that he has seen fit to go on to other pursuits in the educational field.”

The President also paid tribute to Mr. Celebrezze who will soon rejoin as Secretary of DHEW to accept appointment to the U.S. Court of Appeals for the Sixth District (Cincinnati), and to Mr. Gardiner, his successor subject to Senate confirmation.

Praise Is Non-Partition

He also praised members of both parties in Congress who have supported legislation for medical research, especially Sen. Hill and Rep. Fosgate, long recognized for their leadership in sponsoring such legislation in their respective branches of the Congress.

The President also announced his intention to establish a task force to set up goals for the Great Society in health and happiness.

At the conclusion of his speech the President signed the Research Facilities Construction measure, using many pens which he handed to congressmen, diplomats and government officials.

He then spent a half-hour within the Clinical Center, visiting the Heart Nursing Unit where Dr. Andrew G. Morrow, Chief of the Heart Institute’s Surgical Branch, introduced him to three patients and described their conditions; and the Pediatric Ward, including children leukemia patients, where Dr. C. Gordon Zaborod, NCI Director of Intramural Research, briefly described progress in the treatment of leukemia.

On the elevated platform under a protective canopy, Dr. James A. Shannon, Director of NIH, congratulates the President following his speech and signing of the National Research Facilities Construction Act. The First Lady, in background, chats with Sen. Lister Hill of Alabama.—Photo by Ed Hubbard.

5th Human Virus Found That Induces Cancer in Laboratory Animals

A virus isolated from a sick child has caused cancer in laboratory animals.

Scientists at the National Institutes of Health and Microbiological Associates have found that adenovirus type 3 is the common cause of severe respiratory disease in infants and young children, induces tumors in hamsters after a long incubation period.

This pattern of tumor-causing action resembles that of another strain, adenovirus type 7. Further analysis of type 3 revealed that both adenovirus types have common tumor and cellular antigens.

So far, 5 human adenoviruses have induced tumors in laboratory animals. These viruses fall into two distinct antigenic categories.

Three of the most potent cancer-inducing strains, adenovirus types 12, 18, and 31, fall into one antigenic group.

Although commonly present in man, types 12, 18, and 31 have not been shown to cause much, if any, human disease.

Type 3 Causes Concern

On the other hand, adenovirus types 3 and 7, which are in the second group, are common causes of severe respiratory disease in man.

The oncogenic properties of adenovirus type 3 are of special concern, however, since infants and young children are particularly susceptible to infection with this agent.

Based on viral surveys throughout the world, it is estimated that well over 50 percent of children have been infected with adenovirus type 3 by the time they are 10 years old. The investigators caution, however, that there is no evidence that adenoviruses cause cancer in man.

These findings were reported in the August issue of the Proceedings of the National Academy of Sciences by Drs. R. J. Huehner, M. J. Casey, and R. M. Chanock of the National Institute of Allergy and Infectious Diseases, and Dr. K. Schell of Microbiological Associates, Bethesda, Md.

Dr. Byrne Is Chairman

Dr. Robert J. Byrne, Chief of the Laboratory Aids Branch, Division of Research Services, has been appointed Chairman of the Legislative Committee of the Maryland State Veterinary Medical Association.

The association represents more than 200 of the practicing public health regulatory and research veterinarians in the State.
PHS Awards Grant for 7-Year Study Of Psychosomatic Factors in Asthma

A major 7-year study of the possible psychosomatic causes of bronchial asthma will be conducted by Dr. Marvin Stein of Cornell University Medical College under a Public Health Service grant announced recently by Surgeon General Luther L. Terry. Dr. Stein, who has studied the psychosomatic factors in asthma for 10 years, will lead a team investigating the many allergic, infectious, psychological, social, neuroendocrine, and hereditary factors that may be involved in bronchial asthma in humans and animals.

$106,542 First Year

The grant for this multidisciplinary study totals $106,542 in direct costs for the first year plus additional support for 6 years by the National Institute of Mental Health. Dr. Stein, Professor of Psychiatry at Cornell, says no specific cause of asthma is known. Because many factors have been found to trigger asthma, he considers it a syndrome rather than a single disease entity.

An estimated 5 million Americans have asthma. The disease is characterized by breathing difficulties, coughing, wheezing, and a feeling of tightness in the chest. These symptoms are caused by constriction of the bronchioles, the small branches of the bronchi which are the primary airways leading from the windpipe or trachea.

Emotional Involvement Possible

A number of psychological processes may be involved in asthma, Dr. Stein said. For example, emotions may predispose a person to asthma by acting through the central nervous system to make the bronchial lining hypersensitive to allergens which trigger bronchial constriction. The emotions may also act to directly constrict the bronchioles through the central nervous system which controls bronchial function.

"These two processes may occur simultaneously and probably reinforce each other," Dr. Stein said. "We propose to investigate this interrelationship."

One approach will be through animal studies. It is already known that psychological stress in animals can affect temperament, behavior and susceptibility to disease later in life. Dr. Stein's team will study effects of such stresses as cold and high-intensity sound on guinea pigs with experimental asthma and anaphylaxis (an acute asthma-like reaction caused by injection of a substance to which the guinea pig was previously made hypersensitive).

The researchers will study the effects of central nervous system stimulation on breathing mechanisms in the guinea pig. They will also investigate a number of neuroendocrine mechanisms in animals and humans, such as the relationship between adrenal cortical activity and asthma, and cortisol production and catabolism rates in asthmatic patients.

Sessions to Be Taped

In studies of humans, Dr. Stein will examine asthmatic patients undergoing psychotherapy to learn what psychological and physiological phenomena are associated with spontaneous attacks during treatment. Psychotherapy sessions will be tape recorded while patients' respiration, heart rate, and galvanic skin response (GSR) are measured.

It is known that conflicts between hostile feelings and dependency needs may cause asthma. For example, threatened loss of a mother figure may lead to an attack. The investigators will attempt to induce such conflicts experimentally in the laboratory, using asthmatic and non-asthmatic subjects.

Some patients have reported during psychotherapy that nocturnal asthma attacks were preceded by dreams. Dr. Stein and his group will study a number of asthmatic and healthy persons to determine whether a specific antigen or emotional factors are involved.

Lab Seeks Volunteers for Study of 'Common Cold'

The Laboratory of Infectious Diseases, National Institute of Allergy and Infectious Diseases, is in need of volunteers for its continuing study of the "common cold."

The researchers in this laboratory are attempting to isolate and identify the viruses which cause common colds. Volunteers will be asked to contribute nasal washings plus two blood specimens. Interested personnel with colds, preferably within the first three days of illness, may call Mrs. Sara Kelly, Ext. 65811, for additional information. Participants will be paid $2 for each blood sample.

List of Latest Arrivals

Of Visiting Scientists

7/1—Dr. Alisa B. Gutman, Israel, Research in the Laboratory of Metabolism. Sponsor: Dr. D. Steinberg, NIH, Bldg. 10, Rm. 5N307.

7/2—Dr. Jacques Andre de Champlain, Canada, Research in the Laboratory of Clinical Sciences. Sponsor: Dr. L. Axelrod, NIH, Bldg. 10, Rm. 2D55.

7/2—Dr. John V. O. Reid, South Africa, Research in the Laboratory of Experimental Therapeutics. Sponsor: Dr. A. Sjoerdma, NIH, Bldg. 10, Rm. 7N260.

7/6—Dr. Paul Renz, Germany, Research Training in the Laboratory of Biochemistry. Sponsor: Dr. T. C. Stadtman, NIH, Bldg. 10, Rm. 120.

7/6—Dr. Hsin-Tin Lin, Taiwan, Research in the Laboratory of Behavioral Environmental Studies. Sponsors: Dr. W. A. Caudill, NIH, Bldg. 10, Rm. 2N220, and Dr. L. C. Wyne, NIH, Bldg. 10, Rm. 3N212.

7/6—Dr. Pal Venetjaner, Hungary, Research Training in the Laboratory of Chemical Biology. Sponsor: Dr. C. B. Anfinsen, NIMH, Bldg. 10, Rm. 9N309.

7/6—Dr. Folke F. G. Sjoqvist, Sweden, Research in the Laboratory of Special Research Training. Sponsor: Dr. B. B. Brodie, NIH, Bldg. 10, Rm. 7N117.

8/2—Dr. Kazuo Suzuki, Japan, Research in the Carencine Screening Section. Sponsor: Dr. J. Weisburger, NCI, Auburn Building, Rm. 204.

8/3—Dr. Pandalkl K. Nayak, India, Research Training in the Laboratory of Clinical Pharmacology. Sponsor: Dr. L. Schanker, NIH, Bldg. 10, Rm. 8N114.

ASSOCIATES

(Continued from Page 4)

sachusetts General Hospital in Boston.

Dr. Black was Co-Director of the Rheumatology Service at the Georgetown Division of D.C. General Hospital from 1957-1962. His university appointments include a 3-year term as Assistant in Medicine at Johns Hopkins University, 1954-1957, and an appointment as Clinical Assistant Professor of Medicine at Georgetown University from 1958 to June 1964.

ARA Member

He has published extensively in his field and is a member of the American Rheumatism Association.

Before his assignment to NIH seven years ago, Dr. Farrier headed foreign quarantine programs in both Austria and France, and served as Deputy Chief of Medicine at the PHS Hospital in Norfolk, Va.

Dr. Farrier graduated from WASHINGTON University School of Medicine in 1946 and then served an internship and residency in Internal Medicine at the PHS Hospital, Staten Island, N.Y.

He is an Associate of the American College of Physicians and the American Board of Internal Medicine for the Advancement of Science.
Instrument Symposium
And Equipment Exhibit
To Be Held Oct. 4-7

Plans have been completed for the 16th Annual Instrument Symposium and Research Equipment Exhibit to be held at NIH October 4-7.

More than 45 scientists of national and international repute will discuss recent developments in research methods and instrumentation at the symposium. The concurrent exhibit will display the latest products of 76 of the nation's leading manufacturers of research equipment.

Dr. Arthur E. Rappaport of the Youngstown Hospital Association, Youngstown, Ohio, will serve as Chairman of the opening session on a comprehensive medical data processing system.

Topics of discussion for subsequent sessions include retrieval of scientific information, medical applications of fiber optics, trace contaminants in closed systems, and trends in oceanographic research methods and instrumentation, special infrared sampling techniques, germfree animal research, and single cell research.

Mider Greets Participants

Dr. G. Burroughs Mider, NIH Director of Laboratories and Clinics, will welcome participants at the opening meeting in the Clinical Center auditorium at 2 p.m., October 4. Other sessions are scheduled for 8:30 a.m., that day, and at 2 p.m. and 8 p.m. on October 5, 6, and 7.

The research equipment exhibit will be located in Building 22. It will be open daily from 10 a.m. to 5:30 p.m., October 4-7.

Complementing the exhibit, special instrumentation sessions will be held in Building 16 each morning throughout the meeting. Qualified representatives will discuss and demonstrate newly developed items and their applicability to research.

All persons with an interest in research instrumentation are invited to attend the symposium and exhibit.

Taylor, Bowen Named to DRFR Adv. Committee

Two new members have been appointed by Surgeon General Luther L. Terry to the National Advisory Research Resources Committee of the Division of Research Facilities and Resources for 4-year terms ending Sept. 30, 1969.

The new members are Drs. Isaac M. Taylor, Dean of the School of Medicine of the University of North Carolina, Chapel Hill, and Ted Bowen, Administrator of the Methodist Hospital, Texas Medical Center, Houston.

Robert H. Grant Named
Deputy Chief of OIR

Robert H. Grant, Assistant Chief of the Office of International Research, has been named Deputy Chief of OIR.

Mr. Grant has served as Assistant Chief of OIR since its establishment in 1961 as the Office of International Research Activities.

His association with NIH began in 1948 as Executive Secretary of the NIH Board of Civil Service Examiners. In 1950 he transferred to the National Heart Institute where he became Administrative Officer in '51 and Executive Officer in '55.

Directors Conference Staff

It was during his tenure as NIH Executive Officer that Mr. Grant took a leave of absence in 1960 to serve as Director of the Special Staff on Aging in preparation for the White House Conference on Aging.

For his work on this special assignment, Mr. Grant was commended by the then DHEW Secretary, Arthur S. Fleming. He also received in 1959 a superior performance award for his accomplishments in administration.

Mr. Grant attended the University of Maryland prior to earning an LL.B. degree from Columbus College of Catholic University.

Currently, Mr. Grant is serving as President of the NIH Federal Credit Union and Chairman of the NIH Management Intern Training Committee.

NHI ANNUIVERSARY

(Continued from Page 5)

important recommendations in the fields of research, community services, and education.

Another milestone during the past year was the report of the President's Commission on Heart, Disease, Cancer and Stroke.

The commission requested almost $3 billion to fight the Nation's three leading killers. It urged a national network of centers for patient care, research and teaching.

The commission also called for better application of medical knowledge in communities by getting the most recent developments and techniques of prevention and treatment to grass roots levels to that people can obtain the best possible care.

Surgery has contributed its share of achievements. Most congenital and acquired heart defects can now be repaired, and artificial heart valves are being installed.

Surgery Aids Noted

Heart surgeons can rely on better anesthetics and the heart-lung machine, which performs the circulatory duties of the heart and lungs during an operation.

One of the most significant accomplishments in heart research will be the perfection of mechanical assist devices for the heart and the possibility of totally implantable artificial hearts.

NHI programs have shown great progress against the cardiovascular diseases in the last 17 years. But the struggle will be long and hard, requiring the resources, knowledge and support of all countries.

The battleground of heart disease is everywhere; and in this unrelenting warfare the men of medicine are joined in common cause around the globe.

NCI Contract Calls for Registry of Anti-Cancer Chemicals by Computer

A computer-based registry of chemical compounds tested for possible activity against cancer will be developed at the National Cancer Institute research contract with the Chemical Abstracts Service of the American Chemical Society, Columbus, Ohio. The contract is funded by the Public Health Service at $489,400 for a 19-month period.

Under the contract, Chemical Abstracts Service will computerize information on approximately 100,000 chemicals already tested for anticancer activity by the Cancer Chemotherapy National Service Center, a collaborative research program of the NCI.

In addition, information on new chemical compounds will be entered in the computer as soon as compounds are received.

Registry to Be Complete

Chemicals will be registered according to their structural formulas, molecular formulas, names, chemical names, bibliographic references if available, and registry index numbers.

After the registry has been established, the Cancer Institute intends to merge pharmacologic and clinical information on drugs with the foregoing data, to permit analysis of the relationship of the chemical structure of drugs to anticancer activity. It is anticipated that this information may aid in the design of more effective cancer drugs.

Dr. R. David Nelson of the Chemical Abstracts Service is principal investigator. Mrs. Barbara R. Murray serves as project officer for the NCI.

New Purchasing Manual
Available From SMB

The Procurement Section, Supply Management Branch, OAM, has issued the August 1965 edition of the Small Purchase Procedures Covering Decentralized Cash and Telephone Charge Ordering.

This is the tenth edition of this manual since the introduction of the TCO system at NIH in 1950. The revisions have been necessary to provide the user of the TCO and Cash Ordering systems with current information regarding policies and procedures, as well as information on new TCO suppliers and telephones.

The new edition is loose-leaf, punched for insertion in 3-hole standard binder providing for easy insertion of later revisions. NIH personnel requiring a manual to place TCO's and not having a copy by this time, may call the Procurement Section, Ext. 63182.
PHS Awards Contract To Virus Laboratory For Leukemia Research

A virus laboratory for cancer research will be established by Flow Laboratories, Inc., Rockville, Md., under a contract with the Public Health Service. The award, in the amount of $561,760 for the first year, will be administered by the National Cancer Institute.

The new laboratory will participate in research on the cause and prevention of human leukemia, one of the objectives of the Institute's virus-leukemia program.

Flow Laboratories will develop systems for the rapid detection and characterization of viruses found in specimens obtained from patients with leukemia.

Viruses' Role Sought

The possible role of such viruses in the cause of human leukemia has not yet been determined. Viruses will be identified by various techniques, including immunological demonstration of the presence of specific viral antibodies, and biological effect of inoculation of the viruses into experimental animals.

Since nonhuman primates are employed in various laboratory tests of human viruses, the viruses that commonly infect these animals will also be characterized, and diagnostic reagents produced to differentiate them from human viruses. Other virus studies will be undertaken as research information indicates.

Bloodmobile Visit Draws 38 Westwood Donations

Some 38 NIH employees in the Westwood Building responded as blood donors when the CC Blood Bank staff visited there on August 12. Seven of these employees were donating for the first time.

Dr. Paul J. Schmitt, Chief of the CC Blood Bank Department, termed the drive "very successful" and added that some of the blood was picked up before noon for immediate use for Clinical Center patients.

New Gallon Donors

The Bank also lists three new members of the "Gallon-Donor Club." They are Edmund E. Kaminiski, locksmith, Plant Safety Branch, OD; William H. Mills, technician, Laboratory of Nutrition and Endocrinology, NIAMD; and Charles S. Moore, Management Analyst, Officer, NIAID.

Dr. Schmidt has announced that coverage under the NIH Blood Insurance Policy has been extended to include children over eighteen who are not able to be blood donors, and grandparents and grandparent-in-law.

Study Shows Lesions of The Kidney Accompany Various Liver Diseases

Disturbances in kidney function may occur in people with liver disease, according to a study supported by the National Institute of General Medical Sciences and the National Institute of Arthritis and Metabolic Diseases.

Investigators suggest that these disturbances follow a characteristic pattern and commonly occur in patients with acute and chronic liver disease even if clinical symptoms are lacking. They call this "hepatic glomerulonephritis."

Twenty-four kidney biopsies were obtained from patients with various types of liver disease, including viral and alcoholic hepatitis and forms of cirrhosis. Most patients showed little or no clinical evidence of renal involvement, and none had high blood pressure.

Mild Changes Noted

Examination of the biopsies with the light microscope indicated only questionable or mild changes in the glomeruli (the "tufts" of coiled capillaries in the kidney where wastes are filtered out of the blood.)

With the electron microscope, however, definite glomerular changes were visible which fell into two categories: 1) deposits of various granules, mainly on the basement membrane; and 2) progressive thickening of the basement membranes and walls of the capillary blood vessels.

Although their nature and origin are not known, the deposits may represent material produced by altered liver cells. There was also swelling and fusion of cells of the glomeruli.

The severity of lesions varied not only from case to case, but also from glomerulus to glomerulus. Generally, lesions were milder in acute liver disease (viral and alcoholic hepatitis) than in chronic liver disease (cirrhosis). However, the changes appeared in every case and were similar regardless of the nature of the liver disease.

This study was reported in Laboratory Investigation by H. Sakaguchi, S. Dachs, E. Grishman, F. Paronetto, M. Sulman, and J. Churg of Mt. Sinai Hospital and New York Medical College.

Sept. 1 Deadline Set for Institutions' Applications For Program Grants

New applications for general research support program grants for 1966 may be submitted from now until September 1, 1965 by qualified institutions not already participating in this program, the Division of Research Facilities and Resources announced recently.

Eligible for this support are schools of medicine, dentistry, osteopathy, public health, pharmacy, nursing, veterinary medicine, hospitals and other nonprofit research organizations substantially engaged in health-related research. Approximately 270 institutions are now participating in the program.

Grants Are Complimentary

The general research support program grants are complementary to other forms of Public Health Service grants and provide institutions with funds for building present and long-range institutional strength for health-related research and research training.

These funds may be used to support the introduction of biomedical research activities new to the institution; to recognize and support scientific talent earlier; to explore new and unorthodox ideas, provide stable salary support for key staff members, the training of individuals engaged in health-related research, and to support other special and general purpose biomedical research activities.

Minimum Criteria

To meet minimum criteria, the applicant institution must have received in the past fiscal year at least $100,000 in Public Health Service research project grants reflecting diversity and breadth of research activities. It must also qualify as a nonprofit organization.

Further information about the General Research Support Program grants may be obtained from Chief, General Research Support Branch, Division of Research Facilities and Resources, National Institutes of Health, Bethesda, Md. 20014.

NIH BUDGET

(Continued from Page 1)

NIH BUDGET

Community Mental Health Center Construction grants, $500,000.

Funds for the Division of Research Facilities and Resources ($3.1 million) and the Office of International Research ($6 million), as well as funds for Computer Research and Technology ($2.7 million) are included in the amount appropriated to General Research and Services.