NICHD Stresses 4 Program Areas In Reorganization

A reorganization of the National Institute of Child Health and Human Development has been announced by Dr. Donald Harting, Director.

The reorganization, approved by PHS, will place principal emphasis on four scientific program areas:

- Reproduction, Growth and Development
- Aging, and Mental Retardation
- Dr. Roy Hertz, Scientific Director, will provide overall direction and guidance to the four scientific programs. Each program area will be under the leadership of a Program Director who will develop

(See REORGANIZATION, Page 3)

NIMH Study Shows Man’s Job Affects Child Rearing Regardless of Nationality

By Karen Levin

A man’s job profoundly affects how he rears his children, whatever his nationality, two National Institute of Mental Health sociologists have found in studies of parents in Italy and the United States.

The father’s occupation so firmly over into his child-rearing practices, Drs. Leonard Pearlin and Melvin Kohn of the Institute’s Laboratory of Socio-Environmental Studies reported in a recent Clinical Center seminar.

The investigators interviewed 861 working-class and middle-class parents of fifth-grade school children in Turin, Italy, and asked them to choose from a list of 17 characteristics the three they considered most important for a boy or girl at their child’s age. Then

the scientists compared the results with a similar earlier study of parents in Washington, D.C. In some ways, the values of Italian and American parents turned out to be alike. For example, honesty was given the highest priority of all the 17 characteristics by parents in both Nations.

Certain national differences were underscored. Regardless of social class, American parents’ values

(See NIMH STUDY, Page 8)

New Classification Set For Hearing Handicaps

Guidelines to categorize hearing impairments is the aim of a recent study supported by the National Institute of Neurological Diseases and Blindness.

Investigators have established standards for relating the hearing handicap of the individual, under varying circumstances of everyday life, to the more accurate measurements of pure-tone audiometry. These standards were seriously needed for statistical purposes in determining requirements for facilities and trained personnel.

Dr. Hallowell Davis of the Central Institute for the Deaf, St. Louis, Mo., prepared the report of the investigation with the assistance of the Subcommittee on Hearing in Adults for the Committee on Conservation of Hearing.

(See BUDGET, Page 7)

Booklet Traces History Of Mental Illness, Care

Facts and fancies about mental illness, from witchcraft practices to contemporary community mental health centers, are presented in an illustrated booklet issued recently by the National Institute of Mental Health.

The 20-page publication, Mental Illness and Its Treatment—Past and Present, traces the historical development of man’s recognition of and reaction to the problems of defective behavior among members of his social community.

Single copies of the booklet, PHS Publication No. 1345, may be obtained free of charge from the Public Health Service, Washington, D.C. 20201.

In submitting the Fiscal Year 1967 Federal Budget to Congress Jan. 24, President Johnson included a request of nearly $1.31 billion for the coming fiscal year. The Fiscal Year 1967 NIH budget request

NIH funds are provided in the Public Health Service request of almost $2.5 billion. The latter is part of the Administration’s budget request of nearly $11.7 billion for the Department of Health, Education, and Welfare. Another $60 million is budgeted for the Department under proposed legislation.

Breakdown Follows

Overall, the NIH request for Fiscal 1967, which begins next July 1, breaks down as follows: operating appropriations, $1.23 billion; direct construction, $4.7 million; grants for construction of community mental health centers, $50 million; and grants for construction of health research facilities, $21 million (the latter includes $6 million in matching grants to construct facilities for research in mental retardation under P. L. 88-164).

The request for operating funds for Fiscal 1967 represents an increase in the request for operating funds for Fiscal 1966.

In submitting the Fiscal Year 1967 Federal Budget to Congress Jan. 24, President Johnson included a request of nearly $1.31 billion for the National Institutes of Health for Fiscal 1967.

Dr. Robert Q. Marston, NIH Associate Director for Regional Medical Programs as Chief of the new Division, effective Feb. 1.

The Division will administer grants authorized by Public Law 89-239—the “Heart Disease, Cancer, and Stroke Amendments of 1966”—to encourage and assist in the establishment of regional cooperative programs involving the Nation’s medical institutions and members of the health professions.

More Diagnosis Seen

These programs will afford to the medical community increased opportunities to make the latest advances in the diagnosis and treatment of heart disease, cancer, and stroke more widely available to all Americans. These diseases account for nearly 70 percent of all deaths in this country each year.

Under the regional cooperative programs medical schools, hospitals, and research institutions may join together to carry out research, training, and demonstrations of patient care directed toward accomplishing the objectives of the legislation.

Regional Programs Vary

Since much emphasis will be placed on local initiative in planning and organization, the exact nature of an individual regional program will vary according to the needs and resources of that region.

However, it is expected that coordinated patient referral, cooperative use of advanced medical equipment, continuing education for medical personnel, the development

(See NEW DIVISION, Page 4)
Building 10, may be reached on Monday through Friday in the cloakroom of the main lobby.

Plan care fully before signing insurance and even though he is a Federal employee a Federal employee plan.

TAX INFORMATION

cide with Medicare's effective date, plans because of Medicare. Any individual.

is a premium of $3 per month per employee. Employee Relations Section.

coverage is not automatic. Employee must enroll unless current ly receiving Social Security benefits. Application forms are available from the Employee Relations and Services Section.

Must Enroll March 31

If 65 or over on Jan. 1, 1966, employees must enroll by March 31, 1966, to be eligible when the program starts in July 1966.

Do not cancel present health plans because of Medicare. Any change or cancellation should coincide with Medicare’s effective date, July 1, 1966.

Compare the benefits of both Medicare and Federal employee plan carefully before acting.

Any employee who is eligible for Medicare's hospital insurance should enroll in it, regardless of whether he enrolls for the medical insurance and even though he is in a Federal employee plan.

Designation of Beneficiary

A Department Bulletin posted on NIH Bulletin Boards until the end of February explains it is not necessary to designate a beneficiary unless employees wish to depart from the usual “order of preference” shown below or wish to arrange in a different order the person or persons listed.

For Civil Service Retirement, Federal Employees’ Group Life Insurance, and for any unpaid compensation, the first of the following who are alive on the date when title to the payment arises, will be deemed as the beneficiary or beneficiaries:

Beneficiaries in Sequence

1. The widow or widower. (In insurance claims, the courts have ruled that widow means lawful widow. Accordingly a woman who married a man who had a living undivorced wife is not entitled upon his death to the insurance as his widow.)

2. If neither of the above, the child or children in equal shares, who is a share of any deceased child distributed among the descendants of that child.

3. If none of the above, the parents in equal shares or the entire amount to the surviving parent.

4. If none of the above, the executor or administrator of the estate.

5. If none of the above, the next of kin as determined under the laws of the State in which the employee was domiciled.

Instructions are included in the Bulletin about the forms to use and where to send them if you do wish to name beneficiaries not included above, or prefer them in a different order, or wish to change a previous designation. These forms may be obtained from I/D personnel offices.

R&W Hamsters to Audition

For Musical Feb. 16 and 17

Auditions for the R&W Hamsters' spring production, "Kiss Me Kate," will be held Feb. 16 and 17 at 7:30 p.m. in the Clinical Center auditorium.

Actors, singers, dancers and a large production staff are needed. Dancers and singers should have their own audition material; a pianist will be provided.

The show will be directed by Lee Lawrence and co-produced by Floyd Abernathy and Delray Green.

Ten Retire From DRS; Serve Federal Gov’t A Total of 234 Years

Ten NIH employees, with a combined total Federal service of 234 years, recently retired from the Plant Engineering Branch, Division of Research Services.

Low-income employees are Newton Carrington (39 years of government service), electrician; Lawrence E. Colvin (36 years); sheet metal worker; and Cyril Merrick (53 years), incinerator operator foreman.

Also Wilbern O. Cissel (31 years), electrician foreman; Ruth T. Reynolds (21 years), clerk-typist; and Glenn H. St. Johns (37 years), fixed industrial equipment operator lead foreman.

Also Vinson Mullican (17 years), fixed industrial equipment operator; Obie Hawker Sr. (14 years), fixed industrial equipment operator; Cecil Hemingway (14 years), plumber; and R. Stacy Brunson (12 years), fixed industrial equipment operator.

All Savings Bonds Above $25 'Average-Dated'

The Treasury Department has announced that all Savings Bonds above the $25 denomination bought by Federal agency and military payroll savers will now be "average-dated." This means that $50 and higher denomination bonds will be dated as of the first of the month in which half of the purchase price is accumulated, regardless of the total number of payroll deductions required to buy the bond.

This change, the Civil Service Commission notes, comes at a most appropriate time—just when it can serve as an additional incentive to put part of the recent pay raise into savings.

On August 10, 1935, Mr. and Mrs. Luke I. Wilson made the first gift of 45 acres of their estate “Tree Tops” for use of the National Institute of Health in Bethesda, Md.—NIH Almanac.

2d-3d NCI Radio Shows Set for February 12, 19

"Nature of Cancer," the second program of the NCI Research Report Series, is scheduled to be broadcast locally over WAMU-FM (88.5 mc) Saturday, Feb. 12 at 4:30 p.m.

The discussion by scientists will cover research on the factors—genetic, hormonal, immunologic, viral, and chemical—that may influence the change from the normal to the malignant state; the biological behavior patterns of normal and malignant tissues; and host-tumor relationships.

Participants Named

Participants in this program will be Dr. Morris K. Barrett, recently retired from the NCI Laboratory of Biology; Dr. W. Ray Bryan, Associate Scientific Director for Viral Oncology; Dr. Thelma B. Dunham, Laboratory of Pathology; and Dr. Walter E. Heston, Chief, Laboratory of Biology—all of NCI.

"Progress against Acute Leukemia," the third program of the series, is scheduled for the same time and station on Saturday, Feb. 19.

It will cover the nature, symptoms, and incidence of acute leukemia and some of the research approaches used to determine the roles played by radiation, heredity, and viruses, in its causation; and research on treatment by drugs and transfusion of blood fractions.

3d Program

Participants will be Dr. Emil J. Freireich, formerly with NCI’s Medicine Branch and now with the University of Texas M. D. Anderson Hospital and Tumor Institute; Dr. Myron Karon, formerly of the Medicine Branch, NCI, and now a Special PHS Fellow in Paris; Dr. Lloyd W. Law, Laboratory of Biology, and Dr. Robert W. Miller, Chief, Epidemiology Branch—both of NCI.

NIH Library Provides Translating Services

The Translating Unit of the Library Branch, Division of Research Services, provides free translating service to NIH scientists and other NIH personnel.

This library service is given in support of the research projects here. "Full dress" written, oral, and recorded translations are provided.

For further details consult the Library entry in the NIH Telephone Directory or call William H. Everhardy, Head of the Translating Unit, on Ext. 62257. The unit is located on the 11th floor of Building 10.
both intramural and extramural research activities.

The Reproduction Program, with Dr. Hertz as Acting Program Director, will be concerned with clinical, biological, and behavioral aspects of human reproduction. Problems of fertilization, pregnancy, congenital malformations, and perinatal biology will be included.

The Growth and Development Program, under the direction of Dr. Dwight Walcher, will be concerned with factors accounting for differences in development up to adulthood. Biological, psychological, social, and cultural considerations will be included.

Scope of Aging Program

The Aging Program will be concerned with biological, behavioral, and social aspects of aging. Dr. Leroy E. Duncan is Acting Program Director.

The Mental Retardation Program, to be directed by Dr. Gerald LaVeck, will deal with all aspects of retardation from the biomedical, behavioral, and social points of view. In cooperation with the Division of Research Facilities and Resources, this unit also administers a program of construction and support of centers for research in mental retardation and related aspects of human development.

In addition to defining the four major scientific program areas, the reorganization also provides for three Associate Directors.

Technical and administrative services will be provided by the Associate Director for Program Services and his staff. Under his direction will be the Extramural and Contract Management Branch, the Facilities and Resources Branch, the Program Statistics Branch, and the Epidemiology and Biometry Branch.

Staff Duties Listed

The Associate Director for Planning and his staff will be responsible for projecting needs and future activities of the Institute.

Finally, provision is made for an Associate Director for Technical Communications, within whose area will be the Public Information Branch, the Interdisciplinary Conference Branch, and the Scientific Information Centers Branch.

DRS Develops Shedding Tent To Detect Microbe Carriers

As a contribution to a possible solution of this problem, members of the Environmental Services Branch, Division of Research Services, have recently developed a plastic unit called a “shedding tent,” designed to detect the potential carrier and shedder of this organism among hospital staff and patients.

This tent is one of a handful of plastic-type units of this particular kind in use in the country today. The tent is portable and has proven helpful in all areas of the hospital where staph infection can become a problem. It has also been successful in detecting a shedder who was working with specific-pathogen-free animals in the DRS Laboratory Aids Branch.

Strict precautions are necessary here, too, so that these disease-free animals are not contaminated with undesirable species of bacteria. The shedding tent is designed to provide an enclosure which is of a known volume and easily decontaminated. It has been used in various studies to evaluate reduction of skin shedding by bathing with various products, to evaluate shedding as related to rate of activity, and to evaluate clean room garments against conventional surgical garments.

A new clean room garment in use here now is made of dacron-rayon synthetic herringbone twill fabric and has been quite successful in experimental trials.

It is being considered for use in surgery as soon as the problem of static electricity buildup in the garment can be overcome. Presently it is being used by the staff working with the specific-pathogen-free animals in the Laboratory Aids Branch.

While experimenting with the shedding tent, researchers tried various methods of controlling shedding of skin bacteria. Paradoxically, they found that showering just prior to entering the tent only caused many to shed even more organisms than non-showered personnel.

Results also showed that the number of organisms shed was directly related to the activity of the person. A normal person sitting or standing still shed less than a person moving or running in place.

The first step in operating the shedding tent is to assemble the (See SHEDDING TENT, Page 4)

Conference to Implement Mental Health Programs Held in Chicago Recently

The National Institute of Mental Health was co-sponsor of a meeting which attracted 350 Federal and State mental health officials and interested laymen to Chicago recently.

Purpose of the conference was to discuss methods to speed implementation of community mental health programs. Conferences unanimously approved a resolution calling for increased effort to create community mental health centers.

Specifically, the resolution urged the States to pass new and expanded community mental health services acts which provide for State-local matching funds for community mental health facilities.

Noting the burden on the limited tax base of the States, the resolution also declared that it is imperative for the Federal Government to provide critically needed additional seed money for community mental health programs.

2,000 Centers by ‘75

Dr. Stanley F. Yolles, Director of the NIMH, told the conference that the Nation should have 2,000 such centers in operation by 1975.

Attending the conference were representatives of State Legislatures, the Governors’ offices, State mental health authorities, Congressmen, other officials of the NIMH and representatives of some 41 organizations interested in mental health.

Sessions at the meeting were divided between general assemblies, at which experts in the various aspects of mental health spoke, and workshops where panels of experts discussed specific problems among themselves and with the audience.

Co-sponsoring the meeting was the Council of State Governments. Mrs. Lura Jackson, Chief, NIMH Public Information Section, and Arthur D. McIntire, staffed the press room.

By Tony Anastasi
Diagnostic, Study Clinic To Investigate Mental Retardation in Children

An outpatient children's diagnostic and study clinic, believed to be the first of its kind located on a military facility, was officially opened recently by officials of the Medical Department of the Navy and the National Institutes of Health.

The facility, called the Children's Diagnostic and Study Unit, is situated on the grounds of the National Naval Medical Center in Bethesda, Md., and serves children of military personnel eligible to receive care at the U.S. Naval Hospital.

The unit operates as a direct research activity of the Mental Retardation Program of the National Institute of Child Health and Human Development, and is run on a cooperative basis with the Pediatric Service of the U.S. Naval Hospital.

Research conducted in the unit is clinical in nature, concentrating on the biomedical and behavioral aspects of mental retardation.

Full Diagnostic Services

As a part of its function, the unit provides complete diagnostic and evaluation studies aimed at detecting mental retardation, gives parent counseling and guidance and, where necessary, suggests facilities where further treatment or training may be obtained for the child diagnosed as mentally retarded.

In addition, the unit's staff utilizes selected educational and therapeutic procedures to help retarded children and their families, whenever such procedures may aid investigations underway there.

Researchers working in the unit include pediatricians, neurologists, psychologists, geneticists, child psychiatrists, social workers, speech and hearing specialists, nursery school teachers, nutritionists, and public health nurses.

Association of Mycoplasma and Leukemia Suggested in Results of Three Studies

Results of three studies on mycoplasma contribute additional information to recent reports suggesting an occasional association—though not necessarily causative—between these micro-organisms and leukemia.

Determined electron microscopically by Dr. Douglas R. Anderson, formerly of NCI's Laboratory of Viral Carcinogenesis and now at the University of California Medical Center, San Francisco, and by Dr. Barile.

In negatively stained tissue preparations most organisms were seen as round bodies approximately 1 μm in diameter with several filaments emerging from their surface, but there were many variations.

This observed variety in shape prompted the scientists to suggest that M. orale may have more than one variety of mycoplasma, and that the morphologic forms were similar to virus-like particles seen in plasma pellets of leukemia patients.

Anderson Issues 3d Paper

In a third paper, another mycoplasma strain, PPL0 880, is described by Dr. Anderson, He and Dr. Robert A. Manaker, Laboratory of Viral Carcinogenesis, NCI, examined with the electron microscope and tissue cultures of strain 880.

They found that the 880 strain also exhibited considerable variety in size, internal structure, and shape, suggesting that this mycoplasma also may vary in methods of replication.

Although mycoplasma strain 880 was usually found attached to the cell surface, it was occasionally seen within the cell cytoplasm.

Dr. Gluckstein Appointed NLM Coordinator for Veterinary Affairs

The appointment of Dr. Fritz P. Gluckstein as Coordinator for Veterinary Affairs for the National Library of Medicine was announced recently by Dr. Martin M. Cummings, NLM Director.

“This Library is making an effort to increase its holdings in the field of veterinary medicine and to improve its services to the veterinary community,” Dr. Cummings said.

Responsibilities Described

“As Coordinator of Veterinary Affairs, Dr. Gluckstein will be concerned with coordinating the Library's involvement in veterinary medicine and veterinary science in general. He will also assist in updating veterinary science vocabulary for Medical Subject Headings.”

Dr. Gluckstein is former Chief of the Microbiology Branch of the Science Information Exchange of the Smithsonian Institution. He holds B.S. and D.V.M. degrees from the University of Minnesota Col-

SHEDDING TENT

(Continued from Page 3)

plastic tent where it is to be used. The interior surfaces are then sprayed with germicidal solution, and after a 30-minute holding period the tent is flushed out with clean air.

Two slit-type bacteriological air samplers are set up inside the tent. The subject is placed inside the tent and the air samplers are turned on. He stays in the tent from five minutes to one hour, and his activity levels may be varied for definite measured periods of time, either sitting, standing, or running.

Test Is Completed

When the test is completed, the subject leaves the tent, the air samplers are turned off, and the agar plates are removed and incubated for 24 to 48 hours. Organisms shed by the subject and impinged on the media can be readily counted and identified by usual laboratory techniques.

The shedding tent has been helpful in evaluating the total shedding potential of patients and hospital personnel, both regarding numbers and species of organisms that are contributed to the environment.

Since the tent is enclosed and decontaminated between uses, only those viable organisms released by each test subject are recovered during the test period.

Thus far, the shedding tent has been a valuable tool in studying the role of non-pathogenic as well as pathogenic organisms, according to members of the Environmental Services Branch.

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Dr. W. B. Dockstader, Chief of the Bacteriology Unit, ESB (right), and Bob Houseknecht study an isolated “staph” organism shed by subject in shedding tent.
Dr. Ray Is Appointed NINDB Branch Chief

Dr. Richard L. Masland, Director of the National Institute of Neurological Diseases and Blindness, recently announced the appointment of Dr. O. Malcolm Ray as Chief of the Research Grants Branch, Extramural Programs.

Dr. Ray comes to NINDB from the National Cancer Institute where, since 1956, he has served in several positions. His last appointment there was as Acting Chief of the Research Grants Branch.

Dr. Ray’s extensive teaching background includes the positions of Assistant Professor of Zoology and Physiology at North Dakota State College and Assistant Professor of Physiology at the University of Notre Dame.

Background Cited

Dr. Ray received the Ph.D. degree from the University of Iowa in 1938, and served in the Army Air Force during World War II as an aviation physiologist.

Prior to his NIH service Dr. Ray held several staff posts with the National Research Council.

Dr. Ray is a member of the American Society of Zoologists, the New York Academy of Sciences, and other professional societies. He has authored or co-authored numerous scientific papers.

Experts Present Latest Clinical Research Data On Hodgkin’s Disease

The National Cancer Institute and the American Cancer Society co-sponsored a meeting of nine experts in New York City recently to present the latest clinical information and research findings on Hodgkin’s disease.

About 300 physicians attended the meeting, the second in a series planned to acquaint practicing physicians with up-to-date information on malignant disease.

The location of this research center provides an exceptional opportunity for a statistical survey and extensive pathological study of stomach cancer, extremely prevalent in Costa Rica.

Another major advantage is that it enables highly competent scientists to exploit valuable research opportunities abroad without losing their university affiliations.

Thus far 40 research investigators have completed their studies, benefiting from the unique research opportunities provided by the International Centers. These postdoctoral and graduate students in the medical and health fields have pursued their research overseas, usually for two years.

The program has succeeded in its aim to increase the number of competent U.S. scientists and has encouraged foreign affiliate institutions to develop their training and research resources.

Each of the universities in the program takes advantage of its own scientific research interests and experiences as well as the unique environmental and medical conditions afforded by the collaborating foreign center.

LSU in Costa Rica

For instance, Louisiana State University is collaborating with the University of Costa Rica in San Jose.

The location of this research center provides an exceptional opportunity for a statistical survey and extensive pathological study of stomach cancer, extremely prevalent in Costa Rica.

Another facet of the research in San Jose is the development of an effective agent against cutaneous leishmaniasis. The agent, cycloguanil pamoate, suspended in a mixture of benzyl benzoate and castor oil is a striking example of the influence of the physical state of a drug on its effectiveness.

The University of California is collaborating with the Institute for Medical Research, Kuala Lumpur, Malaysia, and the University of Singapore. This Center has placed emphasis on infectious diseases transmitted from animals to man.

One of the most important features of this program is that of long-term support. Grants are awarded for five years with continued support contingent upon program review at the end of the third year of operation.

Before treatment: Dermal leishmaniasis lesions of two years’ duration cover this boy’s face and arm.

After treatment: The same boy following intramuscular administration of cycloguanil pamoate for 49 days.

Dr. Ray

OIR Program of Int’l Centers Provides Unique Research, Training Opportunities

By Frances Davis

Significant contributions in a variety of biomedical disciplines are being made by five universities now participating in the program for International Centers for Medical Research and Training.

The ICMRT program encompasses such diverse research as scientists in Costa Rica developing an effective drug for treatment of dermal leishmaniasis and Malaysian researchers isolating dengue virus from mosquitoes, a proven vector of hemorrhagic fever.

The program is administered by the NIH Office of International Research. Dr. Milo D. Leavitt Jr., Chief of the International Programs Section, OIR, directs the ICMRT program, assisted by Dr. Philip R. Robinson.

Established in 1960 the program at present has five participating institutions—University of California, University of Galifornia, Johns Hopkins University, University of Maryland, and Tulane University.

The International Centers derive their financial support from direct NIH research grant awards subject to regular NIH review and approval procedures. When such a grant is approved, the individual U.S. university establishes an International Center within its own domestic organization.

Foreign Centers Collaborate

At the same time the university negotiates with a foreign institution of its choice to establish an affiliate Center, which will have the necessary research facilities and technical competence to support the research programs agreed upon. These collaborative centers afford scientific conditions unattainable in this country.

One of the most important features of this program is that of long-term support. Grants are awarded for five years with continued support contingent upon program review at the end of the third year of operation.

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NEW DIVISION
(Continued from Page 1)
and support of medical teams trained in advanced diagnosis and treatment, and planning to meet the medical needs of the future may all be aspects of regional programs.

The National Advisory Council on Regional Medical Programs, a 12-member panel of leaders in health and related fields, recently held its first meeting.

The Council at that time recommended a draft of program regulations for consideration by the NIH Surgeon General. After approval by the Surgeon General, these regulations will be published in the Federal Register. Grant application forms and program guidelines will be made available shortly thereafter.

Interest Reported

While formal applications are not yet being accepted, letters of interest from institutions and individuals throughout the Nation have been received. Actual grant applications will be reviewed by the Council in accordance with the provisions of the law.

Meanwhile, Dr. William H. Stewart, NIH Surgeon General, appointed Dr. Leonidas H. Berry, Clinical Assistant Professor of Medicine, University of Illinois School of Medicine, as the twelfth member of the Council (See NIH Record, Dec. 14, 1965).

Dr. Shannon Names NIH Medical Board Chairman

A new chairman and four new members have been appointed to the NIH Medical Board by Dr. James A. Shannon, Director of NIH, for calendar year 1966.

Dr. Donald S. Fredrickson, NIH, will serve as chairman and the new members are Dr. Roger L. Black, CC; Dr. Eugene Braunwald, NIH; Dr. John L. Decker, NIAMD; and Dr. Griff T. Ross, NICHD.

The Medical Board, composed of 16 members and 8 committees, develops policies governing standards of medical care in the Clinical Center.

All actions of the Board are advisory to the Director of NIH. When approved by him, the Board’s recommendations become operating policies of the hospital.

Dr. Robert M. Parrier, CC, will continue as executive secretary. Other continuing members are Dr. Maitland Baldwin, NINDB; Dr. Nathaniel I. Berlin, NCI; Dr. Philippe V. Cardon Jr., NIH; and Dr. Edward J. Driscoll, NIDR.

Also Dr. Paul J. Schmidt, CC; Dr. Robert S. Gordon Jr., NIAMD; Dr. Harold A. Greenberg, NIMH; Dr. Vernon Knight, NIAID; Dr. Jack Masur, CC; and Dr. George Zas Williams, CCs.

Neurotic Parents May Cause Breakdowns in Children, Study Shows

Neurotic parents may be a cause of breakdowns in adolescents, a recent National Institute of Mental Health study indicates.

In a 5-year study of 30 disturbed adolescents and their families it was found that insecure parents feel threatened by the growing independence of their children as the children approach adulthood.

In an unconscious effort to control their offspring, the parents attempt to convince them that they are unreliable, ineffective, helpless and ungrateful.

Thus indoctrinated, the adolescents usually accept this view as true, and become afraid to live independent lives, even though an objective observer can spot the accusations as false.

Role Reversal

In some cases, the investigator found, the child will muster courage enough to strike out on his own, only to find that his parents then turn about and lean so heavily on him that he sometimes collapses.

Family therapy was used to give both the children and their parents more understanding. The therapy seemed to reduce preconceptions on both sides and result in freer and happier relationships.

Most of the 30 disturbed children in the study returned to college or took jobs after therapy.

The study was reported to the Academy of Psychoanalysis in New York City by Dr. Roger Shapiro of the NIMH Adult Psychiatry Branch.

Dr. Tomkins Receives Science Award Of Washington Academy

Morris Leikind Retires From NIMH, Serves 30 Yrs. With Gov’t

Morris C. Leikind, technical writer and editor for the National Clearinghouse for Mental Health Information, retired Jan. 22 after 30 years with the Federal government.

Mr. Leikind, a native of Minsk, Russia, received his training at Ohio State University, Harvard University, the John Hopkins School of Hygiene, and the Johns Hopkins Institute of the History of Medicine.

He was consultant in science and science specialist in biology and medicine at the Library of Congress from 1933 to 1951. Then, until 1959, he was medical historian and archivist for the Armed Forces Institute of Pathology in Washington.

NIH Experience Noted

He joined the staff of the National Institutes of Health in 1959 and for the past two years has been with the National Institute of Mental Health.

Mr. Leikind has written extensively in the field of the history of biomedical sciences, and for the past 12 years has taught the history of medicine and medical research in the Graduate School of the U.S. Department of Agriculture and at NIH.

Shown here with Dr. Stuart Sessions, NIH Deputy Director, PHS Surg. Gen. William Stewart, and Dr. Robert Morston, Chief of the new Division of Regional Medical Programs, are 10 members of the National Advisory Council on Regional Medical Programs. Sitting at table, clockwise, from left: Gordon Cumming, Sacramento County Hospital; Dr. Leonidas H. Berry, University of Illinois School of Medicine; Dr. Sessions; Dr. Stewart; Dr. Morston; Dr. John W. Harst, Emory University School of Medicine; Dr. Clark H. Millikan Mayo Clinic; Dr. George E. Moore, Roswell Park Memorial Institute; and Dr. William Peoples, Maryland Commissioner of Health. Standing from left: Dr. Bruce Everist, General Hotel; Dr. James T. Howell, Henry Ford Hospital; Dr. Cornelius H. Traeger, Cornell University Medical College; and Dr. Robert J. Slater, University of Vermont College of Medicine. Seated at right is Karl D. Yordy, DRMP, Council members not available for the picture taking are Dr. Michael E. DeBakey, Baylor University College of Medicine, and Dr. Mary L. Bunting, Radcliffe College. —Photo by Ed Hubbard.

Mr. Leikind
**Blood Donors and NIH Employees Meet Snow Emergency; Transfusions on Time**

The “Blizzard of ’66”—the worst snowfall to hit the Metropolitan Washington Area in 44 years—left the NIH reservation only temporarily with impassable streets and rapidly essential services were not interrupted.

Some of the most heartrending stories came from the NIH Clinical Center, where about 400 patients had to be taken care of—and were.

Dr. Jack Masur, CC Director, issued a heartfelt “Thank You” to his own staff members and to others who helped. Some of these were NIH employees who responded to move into the Blood Bank.

Physicians, nurses, pharmacists, food service workers, and others worked double and triple shifts. Some employees, who live in the Bethesda area, arrived at the NIH Center at 6 a.m. to find their fellow workers were stranded in outlying areas, reported to work, though they were not scheduled for duty.

Louise Anderson, Chief of the Nursing Department, noted that a number of nurses worked through two shifts (16 hours), slept one shift at the CC, worked another shift, slept again, and worked again.

**Staffing Incomplete**

Obviously, staffing was incomplete despite the efforts. Department heads pitched in to help. One of these was Edith Jones, Chief of the Nutrition Department. She worked alongside her staff, preparing patients’ trays and serving them. Workers were pulled away from dishwashing machines and assigned to more urgent tasks. Meals were served on paper plates.

Others who forsook their regular duties for other pressing needs were William H. Briner, Assistant Chief of the Pharmacy Department, and Pharmacist John Gimon. Both struggled to work on Sunday and helped in the Central Sterile Supply Service.

Nurses were religious services neglected in the emergency. While Father Armand J. Guicheateau was saying Mass to Catholic communicants, Chaplain Lee Roy G. Kerney was hiking through snow from his home, 4½ miles away.

**Samaritan Gives Ride**

A “Good Samaritan” tow-truck driver, as Chaplain Kerney describes him, picked him up and drove him to the Clinical Center.

The CC chapel has a 3-sided circular altar, which is revolved by a peculiar altar, which is revolved by muscle power foil” each faith’s services before and after the service.

The call for blood needed to sustain the lives of leukemic patients.

Such patients must have transfusions to counteract the effect of the chemotherapy that is being used to fight their disease. Dr. Paul J. Schmidt, Blood Bank Chief, pointed out that the blood must be less than 6 hours old.

Transfusions had been scheduled for Monday, Jan. 31. Blood had been ordered from Baltimore and Washington. Then, on Saturday and Sunday, Jan. 29-30, the blizzard hit, covering the Metropolitan Area with up to 20 inches of snow.

Donors could not get to collection stations. Though staffed, the Blood Bank had an inadequate supply of the life-saving fresh fluid.

Telephone calls went out to NIH employees on the list of typed, available donors. Twenty-one responded. Some were not called. Hearing of the need, they came in voluntarily. The Monday emergency was met. On Tuesday, Feb. 1, outside supplies of blood again began

After 3 days of hiking a mile and a half to her CC Nursing Department duties, Virginia McCormick, R.N., digs her car out of the snow on parking lot 10-A. —Photo by Jerry Hecht.

Dr. Thomas R. Dawber, Noted Epidemiologist

Of NIH, Retires Dec. 31

Dr. Thomas R. Dawber, Chief of the Framingham (Mass.) Epidemiological Section of the National Heart Institute, retired on Dec. 31.

As a research scientist Dr. Dawber accomplished outstanding work in the field of cardiovascular epidemiology while with the Heart Institute. Earlier, as Chief of Medicine in the Hospital Division, Public Health Service, he organized an accredited teaching and residency program at the PHS Hospital in Brighton, Mass.

Prior to that, during World War II, he served with the U.S. Coast Guard. He began his public service career in 1937 as an intern at the U.S. Marine Hospital, Norfolk, Va.

**Foremost Achievement**

His foremost achievement has been his work in the conception, organization and implementation of the Framingham Heart Disease Epidemiology Program, a long-term study of some 5,000 persons in a single community to determine what habits, bodily functions, illness patterns, hereditary or other factors can be identified as associated with or contributing to coronary and other heart disease.

Since the project was started 15 years ago, sufficient information has been gained to implicate a number of definite “risk factors” such as high blood pressure, high blood cholesterol, overweight, low vital capacity, electrocardiographic abnormalities, cigarette smoking, and a family history of heart disease.

Under Dr. Dawber’s direction the study at Framingham has become the model most frequently pointed to in medical research whenever new epidemiologic studies are contemplated.

**Reminder: Dr. Price Gives NIH Lecture Wed. Evening**

A reminder to all interested NIH personnel: Dr. Derek de Solla Price, Avalon Professor of the History of Science, Yale University, delivers the 32nd NIH Lecture tonight (Wed., Feb. 9) in the Clinical Center auditorium at 8:15 p.m.

Dr. Price’s subject, “Quantitative Measurement of Significance and Relatedness of Scientific Literature,” deals with his research on the usefulness of scientific literature to scientists.
were more child-centered, while Italian parental values seemed more adult-centered and emphasized the child's conformity to adult standards.

In spite of important cultural differences between the two countries, striking similarities according to social class were found to exist.

For example, obedience and neatness were more highly valued by the working than by the middle class in both countries, while self-control, dependability, happiness, and consideration were more highly valued by the two middle classes.

The scientists noted that “in both Italy and the United States, middle-class parents are more likely than working-class parents to value characteristics that bespeak the child’s self-direction and independence, while working-class parents are more likely than middle-class parents to value children’s conformity to external authority.”

Worker Respects Authority

“It seems the lot of the worker that he must accord respect to authority, and teach his children to do so. This is the case with the American worker, and even more so, the Italian worker,” they reported.

In an attempt to explain the differences in values between the two classes, the researchers interviewed the Italian fathers about their jobs.

They learned that the closer the father was supervised, the more his work involved the manipulation of things rather than ideas, and the less his job required self-reliance, the more strongly he valued obedience.

The more the father’s job called for self-reliance, little or no supervision, and work with ideas rather than things, the more likely he was to prize self-control and self-direction for his child.

Self-Employed fathers led all others in their regard for self-control as opposed to obedience.

Self-Control Stressed

Dr. Pearlin and Dr. Kohn explain that “the greater the sense of power a man feels he has over the conditions of his work, the more he will value self-control over obedience for his children . . . .”

“One might conclude that fathers are simply preparing their children for occupational life to come, training them for the demands of work as the fathers know them.”

“The contrary, we believe that in a more general and profound way, fathers come to value these characteristics as virtues in their own right, not simply as a means to the goal of occupational success.”

“The experience one has in life, particularly in his job, deeply affects his views of what is important in behavior,” the researchers added. “This does not mean the man necessarily is satisfied with his job, but rather that the things one must do are what one comes to value in life.”

Pictured with John M. Sangster, Personnel Management Branch Chief, and Robert L. Schultheis, Assistant Chief, are members of the Program Services Section who received a sustained superior performance group award in recognition of their performance not only in their normal duties but also in accomplishing significant additional programs. From left: Mr. Sangster, Joan L. Mills, Agnes R. Tilmann, Norma M. Hendrix, Drucilla Lake, Elsie E. Bray, Norma Jean Moyer, Cecelia A. Hauck, Alice W. Carver, Linda W. Thompson, Gertrude C. Marshburn, Ida S. Dayhoff, Patricia Dillon, Cortez R. Freeman, Alvino M. Hagedorn, Mary A. Wolmsley, Katherine M. Ryan (Section Head), and Mr. Schultheis. — Photo by Ed Hubbard.

Technicians Study Group Of NCI Elects Officers

The NCI Technicians Study Group recently elected the following officers for 1966: Edward J. La Montain, President; Gayle Jenkins, Vice President; Marian Macy, Secretary; Melba Wright, Treasurer; and Edwin R. Henson Jr., Delegate-at-Large.

The purpose of the study group, organized 11 years ago, is to help its members become familiar with current cancer research trends and implications of their performance not only in their normal duties but also in accomplishing significant additional programs.

CC Bloodmobile Visit to Westwood Bldg. Feb. 10 Marks 1st Anniversary

When the Clinical Center Blood Bank’s bloodmobile visits the West­wood Building on Thursday, Feb. 10, it will mark the first anniversary of such visits to this largest concentration of off-campus NIH employees. Dr. Paul J. Schmidt, Blood Bank chief, said that during 3 visits in 1965, Westwood employees contributed 120 pints of blood.

Blood Used Next Day

National Heart Institute surgeons plan to use the blood collected Thursday for a CC patient’s non-heart operation the next day.

In such an operation, the heart is temporarily by-passed, with the blood being pumped through a heart-lung machine. Fresh, whole blood for use in the machine is vital to the operation.

Meanwhile, Westwood employees continue to benefit from the blood insurance program, under which they and their families receive blood transfusions without charge as long as NIH donations total 2,000 pints a year.

Baby Has 2 Operations

One staff member who approves of the program is Leonard J. Mihalko, DRG project planner, whose young son Leonard, II, had an operation at the age of one week and a second operation 5 weeks later. The boy received a transfusion free at Children’s Hospital through NIH blood insurance. Now, at the age of one year, he is in “fine health,” according to his father.

The bloodmobile will be set up in Conference Room “A,” the Westwood building, 10 a.m. to 2 p.m., Thursday. Earlier the CC Blood Bank staff is visiting each office in the building to explain the program, answer questions, and make appointments.

All donors will be welcome at the bloodmobile whether or not they have made advance appointments.