Dr. Otto Bessey, NIEHS, Named Assoc. Director, Extramural Programs

Dr. Otto A. Bessey has been named associate director for Extramural Programs, National Institute of Environmental Health Sciences in Research Triangle Park, N.C. Dr. Bessey, who has been with NIEHS since 1967, has been serving as acting associate director.

During his tenure at the Institute, he has also been a special assistant to the NIEHS Director and head of the Special Projects Branch, Extramural Programs.

Duties Described

Dr. Bessey will divide his time between his offices in Research Triangle Park and in the Westwood Bldg. He will coordinate all NIEHS extramural program planning, formulate major policies governing those activities, and direct scientists and administrators in carrying out the programs.

Dr. Bessey will have liaison and advisory responsibilities to other NIH programs and to agencies outside NIH, principally the Environmental Protection Agency and the Food and Drug Administration.

He will also serve as a full voting member of the NIH Executive Committee for Extramural Activities—the major advisory group to the NIH Director on extramural matters.

Education Noted

Dr. Bessey received his B.A. degree from the University of Montana, and his Ph.D. in biochemistry from the University of Pittsburgh.

He began his career as a research assistant at Columbia University and as a clinical biochemist at Margaret Hague Hospital. From 1934 to 1942 he was at the Harvard Medical School and School of Public Health as an associate in pathology and biochemistry.

He left the university to help develop the Public Health Research Institute of the City of New York. Later, he became director of the Institute and chief of the

2 Noted Scientists, Dr. Margaret Mead, Dame Janet Vaughan, Are FIC Scholars

Two eminent women scientists have been appointed Fogarty Scholars-in-Residence.

This is the first time women have been invited to join this prestigious group of scientists from all over the world who continue their studies at NIH, lecture, write, and meet with other researchers on the campus.

One of the newly appointed scholars is Dr. Margaret Mead, world-famed anthropologist; the other is Dame Janet Vaughan, an outstanding British pathologist who was knighted for her work during World War II.

Dr. Mead, who will arrive on Thursday (Aug. 30), has been associated with the American Museum of Natural History in New York for most of her career. Now, she is the museum’s Curator Emeritus of Ethnology, and she is also adjunct professor of anthropology at Columbia University.

Dr. Mead, a graduate of Barnard College and Columbia University, has received 18 honorary degrees. Her books on her prolific studies of the peoples of the Southwest Pacific area have made her one of the few anthropologists whose name is almost a “household word.”

In May of 1971, the Hall of the Peoples of the Pacific was opened at the Museum of Natural History. The work is an exhibit of 45 years of Dr. Mead’s endeavors.

She is a Fellow of the American Academy of Arts and Sciences and the World Academy of Arts and Sciences. She is also a member of other scientific organizations.

Dame Janet Vaughan will arrive on Monday, Sept. 3, and stay until early December. She will also reside in Stone House.

During World War II, Dame Janet served as Director of the Medical Research Council Northwest London Blood Supply Depot.

After the war, she was appointed principal of Somerville College, a women’s college at Oxford University. Dame Janet received both her undergraduate and medical degrees from that university.

Dame Janet most recently served as Honorary Director, Medical Research Unit for Research on Bone-Seeking Isotopes, in Oxford.

She has written two books—The Physiology of Bone, published in 1959, and The Effects of Irradiation on the Skeleton, which was published this year.

She has also written and had published a number of articles on blood diseases, blood transfusion, and the metabolism and biological importance of radioactive nuclides.

Dame Janet is a recipient of honorary degrees and has served on a number of scientific committees and commissions in England.

Intensive Five-Year Plan for Fighting Cancer Announced

Documents on the National Cancer Program Plan and two annual reports of that Program were received by President Nixon on Aug. 17. The reports, submitted by Dr. Frank J. Rauscher, Jr., National Cancer Institute Director, were recommended by Dr. Rauscher and the National Cancer Advisory Board.

The documents detail a 5-year strategic plan for research in fighting cancer. The documents are: 1) The Report of the Director describes expanded and intensified biomedical research unparalleled in history. In this report, Dr. Rauscher said, “The two broad thrusts of the National Cancer Program research strategy are a renewed commitment to basic exploratory research, and an intensified emphasis on quickly following up new scientific leads . . .”

In further explaining, Dr. Rauscher stated, “Our ability to put usable knowledge and tools into the hands of practicing physicians (Continued on Page 5)

Dr. Ray D. Owen Appointed To President’s Cancer Panel

Dr. Ray D. Owen, a specialist in genetics, has been appointed by President Nixon to the President’s Cancer Panel.

Dr. Owen, a professor of biology at the California Institute of Technology, fills the post formerly held by Dr. Robert A. Good, Memorial Sloan-Kettering Institute.

The White House also announced the reappointment of Benno C. Schmidt as chairman of the panel. Mr. Schmidt is a member of J. H. Whitney & Co. in New York.

The third member of the panel is Dr. R. Lee Clark, Houston, Tex.

Dr. Philippe Shubik has been appointed to a vacancy on the National Cancer Advisory Board. Dr. Shubik is Director of the Epilepsy Institute for Research in Cancer, University of Nebraska.
Lecture Series on Blood Banking Videotaped; M. McGinniss, CC, Explains Immunohematology

A series of lectures on various aspects of blood banking have been videotaped by the Food and Drug Administration to train their blood bank inspectors.

Five of the lectures were given by Mary McGinniss, a research biologist in the Clinical Center's Blood Bank.

Ms. McGinniss discussed immunohematology. In her lecture she described the cross-match test used to determine patient-donor compatibility.

When foreign antigens from donor blood are introduced into a recipient, she explained, sensitization sometimes occurs.

This process is similar to preventive immunization for a disease, but in blood transfusion the end result can be harmful rather than protective.

The cross-match test, the most important part of the procedure, detects a patient's state of sensitization to foreign red blood cells. It is the reaction of the patient's serum to the actual cells to be transfused.

Compatibility testing, including the cross match, utilizes saline, albumin, and indirect Coombs techniques.

The antibody screening test is an integral part of compatibility testing and is a process by which the recipient's serum is reacted with several known red cells to seek a positive reaction.

If one is found, the recipient's serum is reacted with many known red cells to identify the antibody causing the reaction.

Once an antibody is identified, only donor blood without the antigen is cross matched.

Staffers Take New Role

In July 1972 responsibility for inspecting and licensing all blood banks in the country was transferred from NIH to the Bureau of Biologics.

The CC Blood Bank began a close liaison with the new organization, and CC staffers assumed an advisory role.

Under an informal training program recently established, about 75 people spent 3 hours in the Blood Bank.

During that time, a working tour of the facility was conducted for participants to observe day-to-day blood banking techniques.

whether there actually is an increased risk of blindness for nonwhites.

Evidence suggests that while nonwhite reporting may be somewhat more complete, that factor alone is not sufficient to account for the difference in blindness rates.

Another significant finding revealed by the study is that the only sizable male-female difference observed for both whites and nonwhites is the increased risk of blindness due to optic nerve disease for males.

Single copies of the publication are available free from the NEI Office of Information.

Quantities can be purchased from the Superintendent of Documents, U.S. Government Printing Office, for $2.10 postpaid or $1.75 at the GPO Bookstore.
Dr. Wm. Friedewald Heads NHLI Branch

Dr. William T. Friedewald was recently named chief of the National Heart and Lung Institute's Clinical Trials Branch. This branch is part of the NHLI Office of the Associate Director for Clinical Applications and Prevention.

Dr. Friedewald's branch plans and directs Institute-supported clinical research on new drugs and devices used in the prevention or treatment of cardiovascular disease.

Dr. Friedewald graduated from the University of Notre Dame in 1960. After receiving his M.D. degree from Yale in 1963 he served his internship at the Yale-New Haven Hospital.

Following 2 years with the National Communicable Disease Center, Dr. Friedewald returned to Yale, completing his residency in internal medicine in 1968. He spent a year of postgraduate study in biostatistics at Stanford.

He has been associated with NHLI since 1967 and joined the Institute staff in 1969. He headed the Consulting Section in the NHLI Biometrics Research Branch prior to his appointment as chief of the Clinical Trials Branch.

Major studies presently being conducted by this branch include the Coronary Drug Project, evaluation and comparison of regimens for the treatment of sickle cell anemia.
Marine Biologists Meet to Help Identify Problems Involved in Invertebrate Studies

In an effort to help identify resource-related problems which exist in the marine invertebrate research area, a panel of 20 prominent marine biologists was recently brought together on the NIH campus by the Animal Resources Branch of the Division of Research Resources.

Problems involved in the collection, culturing, and study of ocean invertebrates as laboratory animal models for biomedical research were investigated and summarized by the panel representing marine invertebrate supply firms, universities, private research institutes, and governmental agencies.

Recognizing the broad scope of the field (no one knows for certain how many marine invertebrates there are), the scientists confined their considerations to three major categories of species used for biomedical research.

They are:
- Mollusks — oysters, clams, squid, abalone, and snails;
- Arthropods — crabs, lobsters, shrimp, and barnacles, and
- Echinoderms — starfish, sea urchins, and sea cucumbers.

The groups of organisms are becoming increasingly valuable to the biomedical community because of the unique advantages they offer scientists.

Many of the organisms have simple anatomical and physiological systems and can be investigated with ease.

Probably the most frustrating aspect encountered by marine biologists concerns the lack of proper diagnostic techniques to detect diseases and assess the health status of certain marine organisms.

XX or XY?

Researchers candidly admit that as yet they have no method to determine whether the animals used in experiments are healthy or in a morbid condition. Scientists also lack a method of determining the sex of certain marine species.

Other problems discussed at the meeting include how to maintain organisms in an artificial environment prior to usage, methods of closer communication between marine interests and the biomedical community, and supply and transportation.

Also discussed were problems of laboratory culture and the need for medical specialists and veterinarians to enter the marine biological field to promote the health status of marine invertebrate animal models.

Problems of resource categories involved by marine biologists concerns the lack of proper animal models for biomedical research.

One of the ARB's important areas has been the development of animal models for multi-categorical studies related to human health.

Programs in the past have dealt almost exclusively with the development of vertebrate animal models.

The branch recognizes, however, that many invertebrate animal organisms offer great potential for biomedical research.

Cold Study Reveals Some Vit. C Influence; More Research Needed

Recently 190 NIH employees participated in a cold study in which it was reported that vitamin C had a definite but small influence on the frequency, duration, or severity of colds. However, Dr. Thomas C. Chalmers, Clinical Center Director and principal investigator for the study, cautioned that this effect may have been due to a breakdown in control procedures.

A significant number of volunteers guessed their medication and may have been biased by this knowledge.

EHS Screens Volunteers

In fact, he said, those who received a placebo but thought they were taking vitamin C had fewer colds than those on vitamin C who thought they were taking the placebo.

The 81 volunteers for the study—conducted by CC investigators in cooperation with NIAID and DCRT scientists—were screened by the Employee Health Service.

The CC researchers caution that additional study and evaluation is necessary to determine conclusively whether or not vitamin C is effective against the common cold.
Melvin S. Day Attends
U.S.-U.S.S.R. Information
Symposium in Moscow

Melvin S. Day, deputy director of the National Library of Medicine, attended the first U.S.-U.S.S.R. Symposium on Scientific and Technical Information organized under the U.S.-U.S.S.R. Agreement on Cooperation in the Fields of Science and Technology.

Mr. Day was among eight U.S. specialists who participated in the recent symposium in Moscow. Following the 2-day meeting, the specialists visited information organizations at Novosibirsk, Yerevan, and Kiev.

Included in the presentations were discussions of the Integrated Information system for the Soviet Union run by the All-Union Institute for Scientific and Technical Information (VINITI), and a specialized system of scientific and technical information services in instrument making.

Following the symposium, the group visited the VINITI, the All-Union Research Institute of Medical and Medico-Technical Information (VNIMI), and the State Public Library of the U.S.S.R. for Science and Technology (GPNTBSSSR).

The second half of the symposium, planned for Oct. 1-2, will include visits to NLM and the National Medical Audiovisual Center in Atlanta.

Symposium members will define areas for continued cooperation in the development of scientific and technical information dissemination, which will be reported to the Joint U.S.-U.S.S.R. Commission on Cooperation in Science, scheduled for Moscow in November.

Three NCI staff members were recently awarded the PHS Commendation Medal for superior performance by Dr. Bayard H. Morrison III, assistant director of the Institute. From left are Dr. William A. Priester, Jr., head, Epidemiology Section; Dr. Morrison; Dr. George E. Jay, chief, Program Management Branch, Cancer Control Program; and Dr. James A. Peters, director, Division of Cancer Causation and Prevention.

NCI ANNOUNCES FIVE-YEAR CANCER PLAN

(Continued from Page 1)

and other health professionals is dependent on both these thrusts.”

Dr. Rauscher's report stresses programs, such as cancer centers, which deliver research results to people.

Management sharing with scientific and industrial groups outside Government, and construction of new laboratory and clinical facilities are cited for contributing to the expanded cancer effort.

Cooperation Emphasized

Dr. Rauscher emphasizes the cooperative aspect of the National Cancer Program, citing cancer research by other NIH components, and also cancer research by voluntary groups, private industry and on an international scale.

1) The Report of the National Cancer Advisory Board states that all aspects of the National Cancer Program are making progress and calls for continuation of training programs and full funding of the National Cancer Program in 1973 and 1974.

Chairman of the 23-member Board is Dr. Jonathan E. Rhoads, University of Pennsylvania School of Medicine.

2) The Strategic Plan defines the goal of the National Program and its seven objectives. It also includes the major policies for conducting the National Cancer Program, and a 5-year projection covering research, cancer control and cancer centers.

This projection outlines the research and cancer control areas to be given high priority for implementing and increasing support.

The Plan resulted from 42 planning sessions between October 1971 and March 1972 involving 250 laboratory and clinical scientists in most biomedical and clinical disciplines. An Operational Plan is expected to be completed late in fiscal year 1974.

The demonstration role of the new NCI Cancer Control Program is described, and the role of cancer centers as focal points of research, development and demonstration of detection, diagnostic and treatment techniques is also illustrated.

4) The Digest of Scientific Recommendations for the National Cancer Plan consists of detailed analyses by the 250 scientists who participated in the planning sessions of what must be done to accomplish the seven National Cancer Program objectives. The objectives are:

1. Reduce the effectiveness of external agents for producing cancer;
2. Modify individuals in order to minimize the risk of cancer development;
3. Prevent transformation of normal cells to cells capable of forming cancers;
4. Prevent progression of pre-cancerous cells to cancers, the development of cancers from pre-cancerous conditions, and spread of cancers from primary sites;
5. Achieve an accurate assessment of (a) the risk of developing cancer in individuals and in population groups and (b) the presence, extent and probable course of existing cancers;
6. Cure cancer patients and control the progress of cancers, and
7. Improve the rehabilitation of cancer patients.

In the midst of your illness you will promise a goat, but when you have recovered, a chicken will seem sufficient.—African Proverb.

DR. BESSEY

(Continued from Page 1)

Division of Physiology and Nutrition.

For the next several years, Dr. Bessey held professorships in biochemistry and department chairman posts at the University of Illinois College of Medicine and the University of Texas Medical School.

Dr. Bessey started his Federal service and his association with environmental research in 1956 with the U.S. Army Natick Laboratories where he was associate chief of the Environmental Protection Research Division.

He joined PHS in 1961 as research and training grants administrator for the Division of Occupational Health.

In 1972 Dr. Bessey received the Superior Service Award at the Fourth Annual NIH Honor Awards ceremony.

Research Grants Index

Available for Purchase

The 1973 edition of the annual Research Grants Index compiled by the Research Documentation Section, Statistics and Analysis Branch, DRG, contains scientific data on some 17,900 grants and contracts supported by HEW.

The two-volume publication, now available, has been published for the past 12 years to aid scientists in identifying others working in like or related fields.

Volume I lists grants and contracts under 6,500 subject headings. Vol. II—in two sections—contains grants and contracts under project number and principal investigators listed alphabetically.


A few complimentary copies are available in the Research Documentation Section, SAB/DRG, Ext 67543.
**Twin Register Proves Valuable Resource for Clinical Research**

The slit lamp or biomicroscope allows Dr. Schwartz to examine the anterior portion of an identical twin's eye, especially the cornea. Her sister waits for her turn.

"Studies of twins offer interesting and valuable opportunities for genetic and epidemiologic investigations but have found comparatively little use in eye research, particularly in the United States," according to Dr. J. Theodore Schwartz.

Dr. Schwartz, an ophthalmologist in the National Eye Institute's Office of Biometry and Epidemiology, is chief of the Section on Ophthalmic Epidemiology and Research Development. For nearly 10 years, he has been conducting ophthalmologic studies on twins and has assembled a registry "to identify a group of twins who would be readily available for multiple clinical examinations."

Of the 700 pairs of twins registered, about 47 percent are identical—developed from the splitting of one fertilized egg.

**Given Eye Examination**

Fraternal twins—resulting from the separate fertilization of two eggs—are no more similar genetically than ordinary siblings but tend to be exposed to a similar cultural and physical environment. All twins in the registry are from the Metropolitan Washington area, and about half have already received a thorough eye examination at the Washington Hospital Center.

In addition to data from these eye examinations, the twin registry contains such information as medical history, age, hand dominance, race, and other pertinent details—including whether or not the twins live together.

There are several kinds of twin studies which can be conducted. In the classical twin study, the relative influence of hereditary and environmental factors on a particular trait or disease is investigated.

Dr. Schwartz and his associates recently completed a twin heritability study on the effect of corticosteroids—compounds often used to suppress inflammation—on intraocular pressure.

The study, done in collaboration with the National Heart and Lung Institute, involved 80 pairs of identical fraternal twins 15 years of age and older.

The researchers investigated the hypothesis that the rise in intraocular pressure which occurs in some patients after application of topical corticosteroids is an inherited response.

This concept led to a further hypothesis that chronic simple glaucoma, which is associated with elevated intraocular pressure, is an inherited disorder.

However, the group's study showed that inheritance played a minor role in its association with steroid response. Dr. Schwartz explained, "This new finding is at variance with the widely accepted genetic hypothesis and marks the need for further investigation . . ."

In another type of twin study, the therapeutic trial, identical twins having the same disease are given different treatment to compare the relative benefit.

Dr. Schwartz is conducting a trial to determine the effectiveness of a treatment aimed at retarding the progress of myopia (nearsightedness). Twenty-five pairs of young identical twins similarly myopic are participating.

In this investigation one co-twin receives specially prescribed bifocal lenses and special drops in his eyes before going to sleep; as the control, the other twin wears conventional eyeglasses.

Through this use of identical twins, Dr. Schwartz noted, it is possible to arrive at conclusions with fewer patients because treatment is likely to be the primary factor influencing the outcome.

Several other investigations utilizing the twin register have also been undertaken in collaboration with NICHD and NIDR as well as the NHLI.

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**Edw. McManus Named NEI Executive Officer**

Edward McManus was recently appointed as executive officer of the National Eye Institute. He previously was financial management officer of the National Library of Medicine.

In his new position, Mr. McManus will serve as the principal advisor to the Director and other key NEI officials on all phases of administration and management.

He succeeds James G. Hill, who has been awarded a Mid-Career Fellowship at Princeton University's Woodrow Wilson School of Public and International Affairs.

A graduate of the University of Massachusetts at Amherst and a former officer in the U.S. Navy, Mr. McManus participated in the Department of Commerce's Management Training Program as a management analyst.

In 1966 he came to NIH as assistant to the administrative officer of the National Institute of Mental Health's intramural research program, and in 1968 became administrative officer of the Division of Research Resources.

While at DRR, Mr. McManus was selected for HNW's long-term training program at the Center for Public Policy and Administration, University of Wisconsin at Madison, where he earned a master's degree in public policy and administration.

He returned to DRR and served as assistant executive officer until his transfer to NLM in 1971.

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**R & W Sponsors a Wide Variety of Clubs**

If you're interested in finally getting rid of that midriff bulge, discovering other radio hams, or tuning up with fellow music enthusiasts, NIH's Recreation & Welfare Association may have just what you're looking for.

Nearly 30 R & W-sponsored clubs will be in full swing this fall. Contact the club chairmen for further information:

**ACTIVITY**

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**NIH Visiting Scientists Program Participants**

| 8/1—Dr. G. S. Aulakh, India, Cytogenetic Oncology Section | Sponsor: Dr. Jacqueline Whang-Fung, NCI, Bldg. 10, Rm. 6B10 |
| 8/1—Dr. H. Ben-Horin, Israel, Laboratory of Chemical Pharmacology | Sponsor: Dr. Vincent T. Oliverio, NCI-DCT, Bldg. 10, Rm. 6N119 |
| 8/1—Dr. J. Theodore Schwartz, United Kingdom, Pregnancy Research | Sponsor: Dr. John D. Townsley, NICHD, Bldg. 10, Rm. 6B22 |
| 8/1—Dr. Umeo Ino, Japan, Laboratory of Neurology and Neuroanatomical Sciences | Sponsor: Dr. Igor Klatzo, FINDS, Bldg. 36, Rm. 4B22 |
| 8/3—Dr. Robert E. Oaken, United Kingdom, Pregnancy Research | Sponsor: Dr. John D. Townsley, NICHD, Bldg. 10, Rm. 6N242 |
| 8/3—Dr. Yae Chen, Taiwan, Laboratory of Technical Development | Sponsor: Dr. John L. Stephenson, NHLI, Bldg. 31, Rm. 9A19 |
| 8/5—Dr. Yasuna Hamai, Japan, Laboratory of Vision Research | Sponsor: Dr. J. H. Kinoshita, NICHD, Bldg. 10, Rm. 6N242 |
| 8/5—Dr. Rachel Schneerson, Israel, Developmental Immunology Branch | Sponsor: Dr. John Robinson, NICHD, Bldg. 10, Rm. 6N242 |

Living the twin register have also been undertaken in collaboration with NICHD and NIDR as well as the NHLI.
7 New Clinical Centers Participate in Studies On Coronary Disease

The National Heart and Lung Institute has awarded contracts for establishing seven new clinical centers to take part in the Multiple Risk Factor Intervention Trial for the prevention of coronary heart disease.

The contracts, awarded under the Institute's Clinical Applications and Prevention Program, increase the number of participating clinical centers to 15 plus a coordinating center.

Up to five additional clinical centers will be funded during this fiscal year. The centers will be selected on a competitive basis.

The aim of the Multiple Risk Factor Intervention Trial is to determine whether and to what extent the incidence of first heart attacks and of death from coronary heart disease can be reduced among a group of men of above-average risk through countermeasures against elevated blood lipids, high blood pressure, and cigarette smoking.

Risk Doubled

The presence of any one of these risk factors nearly doubles the individual's risk from coronary heart disease and such complications as acute heart attacks or sudden cardiac death.

Many people have two or more of these risk factors and may run from 3 to 10 times the CHD risk of those with none.

These factors can be modified, hopefully with some corresponding reduction in the threat that they pose to life or health.

To provide a definitive test for this hypothesis, the Multiple Risk Factor Intervention Trial will recruit approximately 12,000 male volunteers, aged 35-54, whose blood lipid levels, blood pressure levels, smoking habits, or combinations of these factors place them at a higher risk than the general population.

Plan January Recruiting

Recruiting participants for this program is scheduled to begin in January 1974. A total of 6 years will be needed to complete the clinical phase of the trial.

The recipients of the new contracts and their institutions are: Dr. Norman Lasser, New Jersey College of Medicine and Dentistry; Drs. John Wild, John Grover, and Merwyn Greenliek, Kaiser Foundation Research Institute, and Drs. Thomas Dawber and H. Emerson Kuller, U. of Pittsburgh, and Dr. William Holmes, Lankenau Hospital.

Mailing Labels

Revised mailing labels may now be purchased from the Self-Service stores. The new indicia labels come in two quantities — pads of 25 (gummed back) and self-adhesive pin-feed rolls of 1,000. The continuous feed rolls allow use of OCRB computers to address the labels through the Wyburn system. The special fourth class label is designed to save B/I/D's postage when mailing out large quantities of printed matter.

Special Fourth Class Book labels for items weighing 4-8 pounds have red lettering on a white background. Postage is 90 cents compared to using $1.50 first class indicia. Stock numbers are 7-2312 (for pads of 25) and 7-2311 (for rolls of 1,000).

For First Class Packages under 4 pounds, postage is $1. The white label with black lettering may be used for mailing any packages under the specified weight. Stock numbers are 7-2305 (for 25) and 7-2306 (for 1,000).

For First Class Packages weighing over 4 pounds, labels are brown with black lettering and carry $1.50 postage. Stock numbers are 7-2299 (for 25) and 7-2300 (for 1,000).

In view of the changes mentioned above, any B/I/D that mails large quantities of printed matter may exchange the first class labels used in the past for fourth class book labels. Credit will be given for any difference in postage. Indicia labels that have been mis-typed, overstocked, etc. — in quantities of 25 — may also be turned in to the Mail Room, Bldg. 51, Room B-114-B, for credit.
Dr. Chalmers to Head Mt. Sinai Med. Center And School in New York

Dr. Thomas C. Chalmers, NIH Associate Director for Clinical Care and Director of the Clinical Center since 1970, will become President of the Mount Sinai Medical Center and Dean of Mount Sinai School of Medicine of the City University of New York on Oct. 1.

During his tenure here, Dr. Chalmers has been a strong advocate of controlled clinical trials to evaluate drugs and therapeutic techniques.

Formed New Guidelines

He helped form new guidelines for studies involving patients at NIH and lectured extensively urging use of clinical trials at other institutions.

Under his guidance, intramural clinical research at NIH expanded. A new intensive care room for cancer and other surgery patients was completed and construction began on an expanded outpatient facility and a 3-story addition for research in reproductive and perinatal biology.

Also, plans were initiated for a new ambulatory care facility.

“The NIH Clinical Center has a staff of the most capable physicians in the country,” he noted early in his directorship here.

In order to give future clinicians exposure to what he termed the “exciting intellectual atmosphere and high-quality bedside thinking” at NIH, he established a program of clinical electives for medical students.

The program provides in-depth exposure for third- and fourth-year medical students to four clinical subspecialties at NIH. Later, a similar program was established for nursing students.

Under Dr. Chalmers’ leadership, research by the CC professional staff produced innovative advances in hospital supportive services.

The Medical Record Department

New Method for Treating Brain Tumors Combines 2 Distinct Types of Therapy

By Carolyn Holstein

A new experimental method for treating tumors originating in the brain, malignant gliomas, is being initiated by Dr. Ayub K. Ommaya, an associate neurosurgeon in the National Institute of Neurological Diseases and Stroke.

It consists of combining chemotherapy—using drugs to kill as much of the tumor as possible—followed by immunotherapy—agonizing the body’s own defense system to kill off the remaining tumor cells and prevent new ones from growing.

Dr. William Terry, chief of the National Cancer Institute’s Immunology Branch, is collaborating in this aspect of the study.

“Malignant gliomas are one of the worst types of cancer in terms of quality and rate of survival,” Dr. Ommaya said. “It can affect speech, vision, movement and feeling before causing death.”

Dr. Ommaya and his associates have already found that two specific drugs when used together more than double the life expectancy of the average person with a brain tumor.

He indicated that one reason for the success of the two drugs—CCNU, one of the nitrosourea compounds, and 8-Azaguanine—is that CCNU has a quick entry but short acting time, while 8-Azaguanine takes longer to get into the tumor but lasts longer.

Another reason, he added, may be that the two drugs attack different portions of the tumor.

“Although patients receiving the combined chemotherapy had a significantly longer average survival time, all but two patients did not live longer than 27 months.”

“We knew we could not safely increase the drug levels, so we sought another method to eradicate the tumor cells remaining after surgery, radiation and chemotherapy,” he said.

Immunotherapy is being used experimentally to treat other types of cancer, but so far has not been successfully used in preventing the growth of brain tumor cells.

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Its lack of success hinges on a biological “not”—the blood brain barrier—which prevents information about the presence of brain tumor cells from reaching the body’s lymphocytes, its primary defense tools.

To circumvent this problem, Drs. Ommaya and Terry have devised a three-pronged immunotherapeutic regimen. One agent (commonly referred to as a BCG) will be used to arouse the body’s lymphocyte system.

A second agent, the patient’s own deadened tumor cells, will be used to “educate” the lymphocytes to attack specifically, and solely, the brain tumor cells. A third agent, purified protein derivative or PPP, will be injected directly into the tumor to lure the lymphocytes to it.

A new device has recently been developed which may eventually be used to determine the effectiveness of the combined therapy.

Dr. Ommaya also explained that this device measures a tumor’s size and shape by recording differences in density between tumor tissue and normal tissue.

Some patients participating in the study will receive combined chemotherapy. Others will receive immunotherapy. A third group will receive both types of therapy.

“If at any time,” Dr. Ommaya stressed, “we learn that any group is doing far better than the other two groups, we will immediately alter the program so all patients will receive the most effective treatment.”