

the



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NATIONAL INSTITUTES OF HEALTH

Dr. Ruth Hegyeli Named To New Post in NHLI For Internat'l Programs

Dr. Ruth Johnsson Hegyeli has been appointed assistant to the Director, National Heart and Lung Institute, for International Programs—a new position created by the growth and success of such activities.

Formal Plans Initiated

After many years of international scientific collaboration in the Institute's program areas, mainly by the informal exchange of information, more formal arrangements were initiated in the early 1970's under the auspices of NHLI's Office of Program Planning and Evaluation.

Scientists Collaborate

For example, the US-USSR Health Exchange Program, for which Dr. Hegyeli has had responsibility since 1972, is part of a Government agreement providing for direct collaboration between scientists in planning and executing research in five cardiovascular problem areas, blood transfusion, and development of an artificial heart.

Born and raised in Sweden, Dr. Hegyeli received her B.A. in 1958 and her M.D. in 1962 from the University of Toronto, Canada.

Before joining the NHLI Arti-
(See DR. HEGYELI, Page 4)



Dr. Hegyeli is a Fellow of the Academy of Medicine, Toronto, and received the DHEW Certificate for Superior Service in 1975.



One of 50 prominent Americans who will discuss aspects of the Nation's future over NBC radio during the July 4th weekend, NIH Director Dr. Donald S. Fredrickson is interviewed in his office by reporter Ben Lacy (c) and engineer Charles Hall (l). The 5-minute segment focuses on American medicine in the year 2076. Another segment features Dr. Robert N. Butler, Director of the National Institute on Aging. At press time, exact schedules for airing had not been set.

Swine Flu Vaccine Trial Data Discussed: Few Reactions; Age Differences Observed

Studies involving more than 5,000 volunteers reveal that immunization of adults against swine-like flu can be accomplished without difficulty, according to Dr. David Sencer, Director of the Center for Disease Control, Atlanta. Dr. Sencer made this announcement at a press conference held in Bethesda June 22 when committees advisory to the FDA's Bureau of Biologics and to PHS reviewed data from vaccine trials, coordinated by the National Institute of Allergy and Infectious Diseases.

At the same time, Dr. Sencer pointed out that none of the vaccines prepared by four different drug companies were presently suitable for use in normal children and young adults.

Cooper to Decide

On the basis of this information, along with other pertinent data, HEW Assistant Secretary for Health Dr. Theodore Cooper will make decisions on plans for mass immunization this fall against the new swine-like virus first isolated last February in New Jersey.

Dr. Sencer indicated that he felt it would be possible to begin offering vaccine to all adults—two-thirds of the U.S. population—in
(See FLU VACCINE, Page 8)

Recombinant DNA Guidelines Issued; Effective June 23

Guidelines for the conduct of experiments involving recombinant DNA molecules were released on June 23 by NIH Director Dr. Donald S. Fredrickson, as well as a document describing the factors he took into account in reaching his decision to issue the Guidelines.

Widespread Adoption Expected

Effective June 23, the NIH Guidelines will govern research at NIH laboratories and those of its grantees and contractors. They are also expected to be adopted by other laboratories throughout the U.S. and foreign countries.

NIH has also undertaken an environmental impact assessment of these Guidelines for recombinant DNA research in accordance with the National Environmental Policy Act of 1969 (NEPA). The assessment will review the environmental effects, if any, of research that may be conducted under the Guidelines.

Recombinant DNA molecules result from recombination in the test tube of segments of deoxyribonucleic acid, the material which determines the hereditary characteristics of all living cells.

These techniques have a remarkable potential for furthering the understanding of fundamental biochemical processes in cells of lower and higher organisms, and promise to revolutionize molecular biology.

Potential Hazards Involved

But the technology, which permits genetic information from very different organisms to be combined, also involves potential hazards which are difficult to evaluate. Therefore, the research must proceed with considerable caution.

Medical advances to be expected through the use of this technology include the opportunity to explore the functioning of cells in complicated diseases. Understanding of a variety of hereditary defects may be significantly enhanced, and some

(See GUIDELINES, Page 5)

Freedom of Information Procedures for Grantees Outlined by Dr. Cooper

Dr. Theodore Cooper, HEW Assistant Secretary for Health, has notified PHS grantees of a new procedure when requestors ask for grant files under the Freedom of Information Act.

When a request is received, an FOI contact—officially designated in each B/I/D—will telephone the grantee. The latter will indicate within 3 days whether information in the file concerns a potential patent or whether the information is copyrightable.

If a potential patent is involved, the HEW patent counsel will make a final determination. Information that could lead to a patent will not be released.

If the grantee intends to copyright part of his grant application or other material, an NIH contact will mark it with a notice to protect it.

Dr. Cooper's letter was made
(See FREEDOM, Page 6)

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3 Units Exceed U.S. Savings Bond Campaign Goal

The final report for the 1976 NIH U.S. Savings Bond Campaign shows that nearly 500 employees signed up for bonds for the first time or increased their current payroll allotments.

At the assembly for bond buyers on June 25 in the Masur Auditorium, Dr. Thomas G. Bowery, DRR Director and Vice Chairman of this year's Campaign, reported that there were 331 new bond buyers, and 156 employees increased their allotments.

Three B/I/D's exceeded their assigned goals. The Division of Research Resources was the highest, with 191% of its goal.

The Division of Research Grants was second with 106% of its goal, and the National Institute of Neurological and Communicative Disorders and Stroke was third highest with 104%.

Dr. Bowery presented award certificates to the coordinators for

the three top components: Audrey Levy, DRR; Errett Straley, Jr., DRG, and Betty McDonald, NINCDS. He also commended the outstanding campaign canvassers.

Dr. Bowery reminded employees that the fact that the Campaign is over doesn't preclude them from increasing their Savings Bond allotment at any time.

New bond buyers and those who had increased their allotments were eligible for the prize drawing. Ed Condon, president of the R&W which contributed the three prizes, conducted the drawing.

Social Security Protection Explained to Young Families

Young workers with dependents should find out what would happen if they become disabled or die. To learn about protection for the worker and his family, contact any Social Security office and ask for a free booklet, *Social Security Information for Young Families*.



Michael Sposito of Curwensville, Pa., enjoyed a special tour of NIH on June 14—the result of a letter written by his teacher, Michael Keely, to President Ford. A keen science student, 14-year-old Mike is a muscular dystrophy patient facing major surgery this summer. He and his parents talked with the NIH Director and visited exhibits and the Clinical Center, where Dr. Michael Vermess (r) explained the EMI scanner, and scientists discussed research in nuclear medicine, echocardiography and pulmonary biochemistry.

NLM Bicentennial Report Chronicles Historic Role

A special edition annual report, entitled *Communication in the Service of American Health . . . A Bicentennial Report from the National Library of Medicine*, includes extensive descriptions of the role NLM has played in American medicine since 1836, in addition to covering the activities of fiscal year 1975.

An introductory chapter by NLM Director Dr. Martin M. Cummings chronicles the development of American medical literature from its inception with a pamphlet on smallpox (1678).

A second chapter by Scott Adams, NLM deputy director from 1960 to 1970, describes the evolution of indexing and index publications at the Library between 1876 and 1960.

Other chapters cover toxicological information, library operations, history of medicine collections, extramural programs, international activities, the National Medical Audiovisual Center, the Lister Hill National Center for Biomedical Communications, and NLM administration.

Copies of the report have been sent to institutional members of the Medical Library Association. Single copies may be requested by sending a self-addressed mailing label to: Office of Inquiries, ATTN: Report, NLM, 8600 Rockville Pike, Bethesda, Md. 20014.

Joggers Celebrate July 2 With Bicentennial Runs—1-Mile, to White House

To encourage physical fitness, the NIH Jogging Club, Health's Angels, is sponsoring a Bicentennial Classic July 2, beginning at noon in front of Bldg. 1.

Dr. Thomas E. Malone, NIH Associate Director for Extramural Research and Training, will be the starter for both planned events—a 1-mile walk, jog, or run on the NIH campus, and a 10-mile run to the White House, where Dr. Ash E. Hayes of the President's Council on Physical Fitness and Sports will meet the runners.

Commemorative certificates and ribbons will be awarded to all persons completing either event. Those planning to participate in the 10-mile run should pre-register with Jogging Club co-presidents Dr. David Young, Ext. 65433, or Jay Miller, Ext. 66941.

EHS Changes Its Name to Occupational Med. Service

The name of the Employee Health Service has been changed to the Occupational Medical Service.

The change was made to reflect more accurately this Clinical Center program's function to provide occupationally-related medical services—both therapeutic and preventive.

There will be no change in services provided to employees.

Declare financial independence.



Buy U.S. Savings Bonds

Andrew F. Perry Retires; Filled Variety of Roles While Working Here

"It's been a long time coming, but it finally came."

Andrew F. Perry of the National Institute of Arthritis, Metabolism, and Digestive Diseases retired June 1 after 28 years of Government service.

Mr. Perry began his Federal career at Walter Reed Hospital in 1941, and joined NIAMDD in 1951.

A three-letter-man from Armstrong High School in Washington, D.C., his skills as an outstanding baseball player helped NIH to win several championships.

When he first came to NIH, Mr. Perry participated in research dealing with the growth and care of germfree animals.

Later he proved his versatility in fulfilling a variety of roles, including staffing exhibits for the NIAMDD Office of Scientific and Technical Reports at scientific and medical meetings across the country.

In addition to his administrative duties, Mr. Perry has supervised many summer employees. He has received numerous commendations from the Institute's executive and administrative officers.

After his retirement Mr. Perry expects to travel extensively with his wife, Etoile, supervisor-director



Mr. Perry (l) accepts good wishes of NIAMDD Director Dr. G. Donald Whedon for a joyous retirement.

of preschools in the District of Columbia, and his son, Keith, and plans to revisit those cities where he manned NIAMDD's exhibit booths, including San Francisco and New Orleans.

NLM Posts New Hours

Summer hours for the National Library of Medicine—8:30 a.m. to 5 p.m., Monday through Saturday—will continue through Sept. 3.

The Library will be closed Labor Day weekend, before resuming its regular hours, 8:30 a.m. to 9 p.m., Monday through Friday, and 8:30 a.m. to 5 p.m. on Saturday.

Federal Civil Servants Were There! Helped to Create Our Nation's Heritage

When this Nation was founded some 200 years ago, Federal civil servants were there, helping to build the foundation.

The first civil servant, Charles Thomson, was secretary of the First Continental Congress. He even served as president of the Congress for a time.

He also kept *The Congressional Journal*, managed printing, worked on treaties, and signed press releases.

At its peak his office had two clerks, a deputy secretary, and a messenger—"all overworked."

Mr. Thomson continued as a civil servant until 1789, and carried the first official notification of Washington's election to the Presidency to Mt. Vernon.

The earliest woman Federal employee appears to be Mary K. Goddard, who first became postmaster for Baltimore in 1773 under the colonial government of Maryland, then continued in that post under the Revolutionary government.

By 1784, however, the central government had grown further. John Jay, Secretary of Foreign Affairs, had a staff consisting of an under secretary, doorkeeper, messenger, clerks, and three interpreters.

As one writer commented on the Revolutionary Period, "working for a government that was still in the formative stage, the civil servants of this period, far from constituting an entrenched bureau-

FAES Social, Academic Center Plans to Start Regular Schedule by Fall

The Foundation for Advanced Education in the Sciences recently purchased the Public Health Service Officers' Club at Old Georgetown Road and Cedar Lane, Bethesda, to serve as an academic and social center.

The new center, introduced to the membership at a yard party on June 17, will be in full use with regularly scheduled social hours and seminars by fall.

It has been redecorated and air-conditioned and may now be rented for meetings or other functions.

The FAES sponsors the Graduate Program at NIH, the Bookstore, and the NIH Concert Series.

Officers elected for the coming year are: president, Dr. Robert Goldberger; vice president, Dr. Robert Adelstein; treasurer, Dr. Alan Peterkofsky, and secretary, Dr. Alan Schechter.

Newly elected members of the Board of Directors are Drs. Gilbert Ashwell, Edwin Becker, and Ruth Kirschstein.

For information concerning membership in the FAES or regarding use of the new center, call the Foundation office, 496-5272.

cracy, were actually self-sacrificing novices lacking even the benefit of precedent."

Then as the country became organized under its new constitution, of course, its staff of civil servants grew accordingly, with U.S. Marshals playing an historically well-known role.

President Thomas Jefferson even delegated census taking to them, a task they performed until 1880.

That year is also a significant one for civil servants because it marks the lowest point of the spoils system with the assassination of President James A. Garfield by a disappointed job seeker, an act that aroused public sentiment for civil service reform and led to passage of the Civil Service Act of 1883.

The concept of a civil service based on merit continued to expand as civil servants demonstrated their capabilities in World Wars I and II.

During World War II, the civilian workforce increased to its record level of 4 million. Two subsequent wars brought somewhat smaller peaks.

Federal employees have figured prominently in many national endeavors.

In World War II, Government scientists made crucial contributions including the development of radar. More recently the space race put the first man on the moon—Neil Armstrong, a civil servant.

'Research Advances 1975' Wins Another Award

NIH's *Research Advances 1975* won a second place Blue Pencil Award in the Annual Reports Category at the National Association of Government Communicators' 13th annual banquet on June 16.

The award was presented to Harold F. Osborne, who edited the report when he was director of the Division of Scientific Reports, Office of Communications, OD. Mr. Osborne is now with the Veterans Administration.

Charles Gailis, in the Division of Research Services' Medical Arts and Photography Branch, designed the report.

The Federal Editors Association and Government Information Organization recently combined to make the NAGC, a national organization for information employees.

Last June *Research Advances 1975* received a first place award from the Society for Technical Communications in the Technical Reports Category.

Commuters, Computer Create Car Pools; Spaces Given Numbers



The 2,645 Commuter Club Questionnaires that so far have been returned to the Parking and Traffic Control Office have been processed by the Washington Area Council of Governments.

Each employee who submitted a questionnaire will soon receive an individualized printout showing the name and work telephone number of other employees who live nearby.

Additional information and detailed instructions on car pool requirements will be included along with the printout.

Numbers are presently being painted in selected parking lot areas to designate car pool spaces, the number reserved to be determined according to the demand. Spaces which are not assigned to car pools will be used for general parking.

A car pool parking manual issuance and schedule of car pool registration dates will soon be distributed desk to desk.

Questionnaires may still be obtained from or returned to the Parking Office, Bldg. 31, Room B1-C11. For further information, call Ext. 66851.

Tutors in Special Subjects Needed for Summer Employees

NIH employees are being asked to volunteer as tutors in special subjects for high school and college students who will be working here during the summer.

Tutors are needed for such subjects as chemistry, algebra, trigonometry, biology, physics, calculus, and geometry.

For further information, call Phyllis Copeland or Linda Cunningham, Ext. 62146.



Irene Robinson was honored by friends, co-workers, and her husband Harry at a recent retirement party. A model of the Capitol marked her 12 years on the staff of the Office of Legislative Liaison, National Institute of Child Health and Human Development. During her 22-year Federal career, Mrs. Robinson received several commendations and a tribute in the June 9 "Congressional Record."

Lister Hill Center Lets Contract on Simulation In Medical Education

Simulation techniques are increasingly important in medical education. By giving the student experience in dealing with situations that are as close as possible to those that might be encountered in later practice, simulation offers obvious advantages to both students and teachers.

The National Library of Medicine's Lister Hill National Center for Biomedical Communications has awarded a contract to the Office of Medical Education, Research, and Development at Michigan State University to gain a clearer concept of the role of simulation in medical education, including:

- A detailed listing of some 180 ongoing and completed projects in simulations.
- A listing of organizations funding research or development in creating, using, or evaluating simulation in medical education.
- An annotated bibliography on simulation.
- A survey of faculty needs and preferences for simulation, and an evaluation design for future testing of simulation effectiveness.

To obtain any of these documents as they become available, write to Dr. Harold Wooster, Lister Hill Center, NLM, 8600 Rockville Pike, Bethesda, Md. 20014.

It is difficult to see the past in true perspective: the years seem almost on one plane like images in a kaleidoscope.—Sir John Bland-Sutton.

Ultrasonic Scanning Technique Can Aid In Detection of Stroke-Prone Persons

Research toward a safe, simple procedure for detection of the potential stroke victim so that stroke may be prevented was described by a University of Cincinnati researcher at the American Heart Association's recent Stroke Conference in Dallas.

Dr. Charles P. Olinger, associate professor of neurology at the University of Cincinnati College of Medicine, reported on evaluation of a new ultrasonic scanner for viewing the interior of the carotid artery, the main artery leading to the brain and chief site of obstruction resulting in strokes.

Dr. Olinger is principal investigator on a research contract from the Devices and Technology Branch, National Heart and Lung Institute, on the development and use of ultrasound as a diagnostic screening device.

Since 1973 Dr. Olinger has been developing a scanner with a team of engineers headed by Dr. William Glenn, Dr. Anant Nigam, and Ken Solomon of the New York Institute of Technology's Nova University in Ft. Lauderdale, Fla.

Because treatment, prognosis, and ultimate prevention of stroke depend on the ability to make a specific diagnosis, Dr. Olinger has great hope for the scanner as a safe, simple alternative to angiography, the present method of detecting and determining the nature of atherosclerotic plaque, or buildup which forms on the artery wall.

Angiography requires hospitalization of the patient, puncturing the artery to inject X-ray contrast fluid, and a complicated series of X-rays.

Procedure Has Risk

The procedure is not without risk, and because of its relative complexity cannot be used as a screening procedure or be repeated easily for follow-up of increased plaque buildup to determine whether drugs or diet can reverse the process.

Ultrasound in many ways approaches the ideal diagnostic tool, Dr. Olinger believes. Noninvasive, nontraumatic, and not requiring hospitalization, ultrasound permits visualization of soft tissue structures that cannot be seen well—or at all—radiologically.

The equipment is relatively inexpensive compared with X-ray, and poses few operational problems to a trained technician.

Dr. Olinger said the basic design consists of an imaging probe containing a large aperture transducer and a reflective scanning mechanism sealed in a water chamber with a transparent membrane at one end. The probe is moved by hand along the course of the artery.

Ultrasonic waves penetrate the body tissue and bounce back at varying intensities when the beam hits skin, fat, muscle, bone, or artery wall. Converted to a readout

on a TV screen, the reflecting "echoes" show the artery wall. Blood coursing through the artery appears black; other tissues appear white or grey.

Obstructions or thickened areas appear as protrusions into the black area. Some large deposits often look like boulders jutting into the black area, Dr. Olinger commented.

"In the scanner's present stage of development we can pick up plaque of a millimeter or less in the image, and can obtain several hundred views in a matter of seconds. We are also able to differentiate between hard and soft tissues."

Endoscopic Movies Inform

During his presentation at the Stroke Conference, Dr. Olinger displayed endoscopic movies of the interiors of carotid arteries to illustrate how ultrasonic scanning can provide information about the artery wall that angiography cannot detect.

"Buildup in an artery wall in many ways compares to rust and corrosion in water pipes. When the buildup becomes thick enough to block the artery, blood flow is inadequate to supply the brain, and strokes or stroke symptoms occur.

"If a piece of the buildup breaks loose from the wall and travels to the brain, a stroke is likely to occur. When the plaque is ulcerated, clots can form at the site and block the artery or break loose, causing a stroke," Dr. Olinger said.

"While present research is focused on the carotid artery, it should be possible to achieve good results on other major arteries," Dr. Olinger noted.

Detecting, measuring, and visualizing the degree of atherosclerosis present in the carotid arteries and other peripheral blood vessels are also being studied by six other contractors, using the new ultrasonic technology to develop non-invasive instrumentation for diagnosis and medical research.

Two other contractors are using novel magnetic and X-ray imaging techniques as other approaches to this important problem of diagnosing atherosclerosis.

13 Million Have Poor Hearing, According to NCHS Report

More than 13 million Americans aged 3 years and older suffer impaired hearing—an increase in the number of affected persons since a 1962-63 survey—but most of the increase, the National Center for Health Statistics says, is due to

Dr. Greenhouse, Newest Grants Associate, Was On U. of Cal. Faculty

Dr. Gerald Greenhouse, former assistant professor with the University of California, Irvine, has joined the Grants Associates Program for a year of training in health science administration.



Dr. Greenhouse

Dr. Greenhouse has been with the University of California's department of anatomy since 1972. During this period, he received two research grants from the Orange County Medical Research Committee and the Damon Runyon Memorial Cancer Fund, and two research contracts from the U.S. Air Force.

He was also concerned with two training grants, one awarded in 1972 to the department of biological sciences, the other awarded to the faculty research facility in 1975.

He received a B.A. degree from Queens College in 1964, and the Ph.D. degree in developmental biology from the City University of New York in 1969. While at CUNY, he was a NIH predoctoral trainee in teratology.

Held Fellowships

As a postgraduate, he held an NIH postdoctoral fellowship at the Massachusetts Institute of Technology and was a postdoctoral fellow at the University of Geneva, Switzerland.

Dr. Greenhouse's research interests include the etiology of congenital malformations, biochemical events during oogenesis and early embryogenesis, and the translation level control of protein synthesis.

He is the author and co-author of 25 papers and abstracts in his field.

DR. HEGYELI

(Continued from Page 1)

ficial Heart Program in 1969, she worked as a research scientist at the Institute for Muscle Research, Woods Hole, Mass., and as senior research pathologist in charge of the Cell Biology Laboratory, Bette Memorial Institute, Columbus, O.

Last Post Noted

In 1971 she moved to the OPPE where in 1973 she became chief, Program Development and Evaluation Branch, and served as acting director, OPPE, this past year.

different data collection procedures and a change in one question.

The figures showing a jump of 3.8 million persons suffering impaired hearing in one ear are part of the results from the 1971 Health Interview Survey.

GUIDELINES

(Continued from Page 1)

may be prevented or modified.

In the future this technology may produce in microorganisms medically important compounds for the treatment and control of disease.

There are risks in the new research as well as potential benefits. Microorganisms with transplanted genes—called "chimeras"—may prove hazardous to human or other forms of life. Thus special provisions are necessary for their containment.

The NIH Guidelines establish carefully controlled conditions for the conduct of experiments involving the production of such molecules and their insertion into organisms such as bacteria. These Guidelines replace the recommendations contained in the 1975 *Summary Statement of the Asilomar Conference on Recombinant DNA Molecules*. The latter would have permitted research under less strict conditions than the NIH Guidelines.

The chronology leading to the present Guidelines is described in detail in the NIH Director's decision document.

Issues Aired 16 Months

Dr. Fredrickson reached his decision on the Guidelines after extensive scientific and public airing of the issues during the 16 months which have elapsed since the Asilomar Conference.

The issues were discussed at public meetings of the Recombinant DNA Molecule Program Advisory Committee (Recombinant Advisory Committee) and the Advisory Committee to the NIH Director. During this period, the Recombinant Advisory Committee extensively debated three different versions of the Guidelines.



Dr. G. Donald Whedon, Director of the National Institute of Arthritis, Metabolism, and Digestive Diseases, addresses more than 100 guests at the Institute's recent 25th anniversary dinner at the Naval Medical Center. The head table included (r to l): Dr. DeWitt Stetten, Jr., NIH Deputy Director for Science and former NIAMDD director of Intramural Research; his wife Dr. Marjorie Stetten, NIAMDD researcher, and Dr. William H. Sebrell, Jr., Director of NIAMDD from its inception until he was appointed NIH Director in October 1950.

Augmented with consultants representing law, ethics, consumer affairs, and the environment, the Advisory Committee to the Director was asked whether the proposed Guidelines balance responsibility to protect the public with the potential benefits through the pursuit of new knowledge.

The many viewpoints expressed at this meeting were considered by the Director in making his decision. Dr. Fredrickson emphasized, however, that NIH will continue to deliberate issues raised by the scientific community and the public on this type of research.

Experiments Identified

The NIH Guidelines identify experiments which are not to be performed at the present time. For permissible experiments, the Guidelines define different levels of physical and biological containment, and classify containment criteria for different kinds of recombinant DNAs.

In the combination specified, these measures are designed to protect workers and the environment while permitting research to proceed.

The Guidelines also define the responsibilities of investigators, institutions where the research is conducted, and NIH staff and advisory committees.

Dr. Fredrickson noted that NIH recognizes a special obligation to disseminate the Guidelines as widely as possible. Accordingly, the Guidelines will be sent to all of the approximately 25,000 NIH grantees and contractors. Major societies of professionals working in this area will also be asked for endorsement.

The Guidelines will be sent to medical and scientific journals. Dr. Fredrickson will ask the editors to request that investigators include a description of the physical and biological containment pro-

cedures used in any recombinant research they report on.

Dr. William Gartland, who will head the NIH Office of Recombinant DNA Activities, left June 23 for Geneva to brief various international health and scientific organizations with responsibility in this area and to meet with the WHO Advisory Committee on Medical Research.

European Officials Briefed

Dr. Gartland will also brief officials at the European Molecular Biology Organization and in Great Britain. The Guidelines have also been sent to all science attachés of foreign embassies located in Washington and to science attachés in U.S. embassies.

NIH Visiting Scientists Program Participants

6/1—Dr. Bruna Pegoraro, Italy, Environmental Mutagenesis Branch. Sponsor: Dr. William Sheridan, NIEHS, Research Triangle Park, N.C.

6/1—Dr. Daniela Saggiaro, Italy, Environmental Mutagenesis Branch. Sponsor: Dr. Shiu Huang, NIEHS, Research Triangle Park, N.C.

6/1—Dr. Tohru Yoshioka, Japan, Laboratory of Neurobiology. Sponsor: Dr. Ichiji Tasaki, NIMH, Bg. 36, Rm. 1D02.

6/3—Dr. Flavio Moroni, Italy, Laboratory of Preclinical Pharmacology. Sponsor: Dr. Erminio Costa, NIMH, WAW Bg., St. Elizabeths Hospital, Washington, D.C.

6/6—Dr. Nagaswamy Krishnan, India, Adult Psychiatry Branch. Sponsor: Dr. William E. Bunney, Jr., NIMH, Bg. 10, Rm. 3N212.

6/20—Dr. Anthony S. Lachman, South Africa, Pathology Section. Sponsor: Dr. William C. Roberts, NHLI, Bg. 10A, Rm. 3E30.

Dr. Raymond E. Shapiro Named Director, NIEHS Toxicology Coordination

Dr. Raymond E. Shapiro has been appointed director for Toxicology Coordination for the National Institute of Environmental Health Sciences.

"Dr. Shapiro's major role at NIEHS," said Dr. David P. Rall, Institute Director, "is to serve as a senior advisor to me on toxic substances, especially chemical compounds, as they affect human health."

He will maintain continuing liaison with other Government agencies, private industries, and non-Government research organizations. This will permit him to determine what work is being done, to identify priorities, and to pinpoint available resources.

It will also help him to anticipate changes in focus on new problem areas, recommend appropriate NIEHS action, and advise the Institute on new toxicological research needs.

Dr. Shapiro will also serve as executive secretary for the HEW Committee to Coordinate Toxicology and Related Programs. Dr. Rall serves as the Committee's chairman.

Dr. Shapiro was formerly with the Epidemiology Unit of the Bureau of Foods, Food and Drug Administration.

He graduated from the College



While with FDA, Dr. Shapiro worked closely with the HEW Committee to Coordinate Toxicology and Related Programs and was chairman of the Committee's Asbestos Subcommittee.

of the City of New York, and received his Ph.D. from Ohio State University.

Previously, Dr. Shapiro was with the U.S. Soils Laboratory in Beltsville, Md., and with the Rothamsted Experimental Station in Harpenden, Herts, England, where he was a Guggenheim Fellow.

6/20—Dr. Emmanuel Dominique Van Obberghen, Belgium, Diabetes Branch. Sponsor: Dr. Jesse Roth, NIAMDD, Bg. 10, Rm. 8S243.



George Titrington (r), chief, Construction Engineering Branch, Division of Engineering Services, recently received a special achievement award for sustained superior performance. Ross Holliday, Director, DES, cited Mr. Titrington "for developing a highly motivated staff . . . and for providing effective leadership in . . . contract negotiations."

Blood Bank Stretches Resources to Cover Needs of Employees and Their Families



Mr. Driscoll (l), blood replacement coordinator, discusses blood needs with Dr. Davey (r) and Beverley Rogers of DAS, a regular donor whose mother-in-law required several units this year.

Two months ago the NIH Blood Bank was called upon to supply blood for the extensive needs of a patient at Holy Cross Hospital in Silver Spring. Roland Benninghaven, husband of retired NIH employee Frances E. Benninghaven, required 64 units of blood over a 2-week period during a serious illness. He is now well on the road to recovery.

Within a week, another patient at a private hospital in Maryland used 67 units of blood supplied through the NIH Blood Bank. Requests for smaller amounts of blood for NIH employees and their relatives around the Nation are constantly being received and covered by the Blood Bank.

Why does the Blood Bank supply blood and blood products to these patients? The NIH blood replacement policy insures that blood will be available to all NIH employees and their families.

At present all NIH employees, and each employee's spouse, parents, parents-in-law, children under 18, grandparents, and grandparents-in-law are covered. The coverage extends for 1 year after the employee leaves NIH, and is available whether or not the employee is a donor at the Clinical Center Blood Bank.

Although the Blood Bank has thus far been able to fill all requests for family coverage, increasing demands for blood have severely strained existing resources. Less than 20 percent of NIH employees have ever donated blood, and an even smaller percentage could be considered "regular" donors.

These valued donors are providing blood not only for patient care at the CC but for employee replacement needs exceeding 800 units a year.

Since employee donations cannot always meet these demands, the Blood Bank has had to rely on the Washington Chapter of the Amer-

ican Red Cross to fulfill patient care blood requirements. A recent heart surgery patient at the CC required more than 100 units of blood, most of which had to be supplied by the Red Cross.

Because of these increasing demands on the Blood Bank and on the regular NIH blood donors, the NIH replacement policy is being re-evaluated. Consideration is being given to covering only those employees who participate in the NIH blood donation program.

While the Blood Bank is very reluctant to take this step, most similar company or institutional blood replacement programs already require employees to make annual donations to receive coverage.

According to Dr. Richard Davey, acting chief of the Blood Services Section, CC, the preferred solution would be increased numbers of NIH employees who donate blood so that patient care and employee replacement needs can be met without difficulty.

The Blood Bank donor recruitment staff—Jane Kendall, Anna Brown, Elaine Collins, and Jimmie Driscoll—are now developing new methods for expanding employee donor rolls.

To volunteer as a blood donor and contribute to the patient care and employee family coverage efforts, call for an appointment at the Blood Bank, Ext. 61048.

Four New Members Join Nat'l Advisory Council of NINCDS

Four new members have been appointed to the National Advisory Neurological and Communicative Disorders and Stroke Council for 4-year terms: Dr. Merle Lawrence, Dr. Michael M. Okihiro, Dr. Peritz Scheinberg, and David C. Scott.

Dr. Lawrence, Director of the Kresge Hearing Research Institute, University of Michigan Medical School, is a recognized leader in the physiology and neurophysiology of the ear and associated hearing mechanisms.

He previously has served on several NIH committees.

Dr. Okihiro is chairman of the department of neurology and neurosurgery, Straub Clinic, Honolulu.

He is the author of numerous clinical research publications, including several on the blocking of neuromuscular transmission by various drugs, multiple sclerosis, and thyrotoxic periodic paralysis.

Dr. Scheinberg is professor and chairman of the department of neurology, University of Miami School of Medicine.

He is a distinguished leader in research on stroke and neurological diseases, with interests in blood flow and brain metabolism.

Between 1962 and 1966 Dr. Scheinberg served on two NIH study sections.

Mr. Scott is an outstanding business executive and civic leader with special interests in neurological disorders.

In addition to being chairman of the board, chief executive officer, and president of Allis-Chalmers, he is a director of several corporations.

Mr. Scott, a founding member of the Rockefeller University Council, has maintained his interest in technical education by serving as a member of the advisory council of the College of Engineering of the University of Kentucky.

NIH Grants for Training, Construction, Libraries Listed in New Volume

The publication, *National Institutes of Health Grants for Training, Construction, Medical Libraries, Fiscal Year 1975 Funds*, has been issued.

The volume includes 3,891 training grants, traineeships and fellowships, cancer research facilities construction, and medical library grants awarded by NIH components from fiscal year 1975 funds and from fiscal year 1974 released funds.

It also contains listings of grants by area, program director, and the organization having professional responsibility for the work.

Listings of NIH grants, con-

FREEDOM

(Continued from Page 1)

necessary by a court decision and by 1974 amendments to the Freedom of Information Act. The court decision means that applications and progress reports must be released for funded grants.

Material must also be released from continuation, renewal, and supplemental applications. Some information, such as detailed budgets showing individual salaries, can be withheld.

Procedures Explained

The 1974 amendments put a time limit of 10 working days for answering FOI requests. If the requestor does not receive a decision in that time, he or she can bring suit.

Much of the procedure outlined in Dr. Cooper's letter has been used at NIH for several months. His letter extends it to all PHS granting agencies.

The letter is being distributed in *NIH Guide for Grants and Contracts*.



Dr. Dinesh C. Sharma, NIAMDD Extramural Programs, recently shared the Mount Sinai Journal of Medicine 1975-76 Globus Award with Dr. J. Lester Gabrielove, Mount Sinai School of Medicine. Dr. Sharma, formerly Regents Professor at the University of California, Berkeley, won the award for his paper on regulation and biosynthesis of steroid hormones, emphasizing predictive aspects for yet undefined congenital disorders.

tracts, and awards are prepared annually by the Division of Research Grants, based on records contained in the NIH central record system (IMPAC).

Separate listings of research grants and contracts for fiscal year 1975 were released earlier.

Single copies of DHEW Publication No. (NIH) 76-1043 are available at no charge from DRG.

Multiple copies may be purchased at \$1.40 each from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

Science Writers Seminar Held on New Research in Cell Surface Receptors

Three researchers who discussed their current studies on cell surface receptors at a recent Science Writers seminar here were introduced by Dr. Edward Korn, NHLI.

Before introducing the speakers, Dr. Korn, chairman of the NIH Inter-Assembly Council of Assemblies of Scientists, explained the background and importance of cell surface receptors.

Dr. Julius Axelrod, NIMH, chaired the seminar. He discussed recent neurotransmitter discoveries that have led to more effective treatment of Parkinson's disease and schizophrenia.

Dr. Candice B. Pert, also of NIMH, said that opium receptors in the brain may function as natural pain killers.

She indicated that the role of these opium receptors is unclear at present, but they apparently accept morphine-like peptides to function as the body's natural opiates.

Dr. Jesse Roth, NIAMDD, pointed out that there is a relationship between obesity, insulin, and insulin receptors. He noted that while obese people have high levels of insulin, they often have few receptors—an example of hormone resistance.

Cutting food intake will quickly raise the number of receptors and lower the insulin level, according to Dr. Roth.

The seminar is one in a series presented by intramural scientists of NIH and the Division of Public Information.

Accumulated Sick Leave Is Valuable 'Insurance'

The average Government employee could not afford to buy sickness and accident insurance that would pay his or her full salary for a year and a half at, say, age 50.

But that is exactly what sick leave offers if it is conserved for use in a real emergency.

Proper use of sick leave—earned at the rate of 13 days a year for full-time employees—is encouraged. However, if an employee is fortunate and can permit sick leave to accumulate, the benefits mount:

10 years—130 days or 1040 hours	
15 " 195 " " 1560 "	
20 " 260 " " 2080 "	
25 " 325 " " 2600 "	
30 " 390 " " 3120 "	

As one gets older, extended illness is more likely to strike. Used conservatively, sick leave "insurance" will give the employee benefits he or she would not otherwise have, and will prove invaluable when the need arises.

Another advantage, accumulated sick leave at time of retirement gives the employee an additional amount of annuity.



Although many of her duties keep her tied to the A Wing information desk (l)—giving directions, scheduling conferences, calling taxis, locating NIH personnel, and answering 1001 questions—Mrs. Willcoxon also keeps



the bulletin board up to date (c) with the fascinating variety of advertisements submitted monthly by NIH'ers, and organizes the Bldg. 31 Car Pool locator (r) near the cafeteria—an increasingly popular service for commuters.



VIP's, Transit Schedules, Lost and Found--Mrs. Willcoxon Takes All in Her Stride

Over the past 10 years from her vantage point at the "nerve center" of Bldg. 31—the A Wing information desk—Ethel Willcoxon has seen a multitude of people come and go, as well as many human dramas.

A routine day includes answering queries from the telephones in the B and C Wing entrances to Bldg. 31, which are connected to the A Wing information desk.

She also assists in making or changing reservations for persons attending conferences in Bldg. 31 whose plans may suddenly change as meetings end ahead of time or—more often—run over time.

Copes With Predicaments

A typical problem demanding immediate solution was the recent arrival—unannounced—of two Congressmen who wanted to see an Institute Director right away but couldn't find a place to park their cars. With typical aplomb, Mrs. Willcoxon arranged with the guards for the cars to be left in reserved spaces, then directed the legislators to the Director in question.

Numerous times she has called tow trucks for disabled cars, ambulances for visitors or employees who suddenly become ill, and taxis for dignitaries in danger of missing their airport connections.

On one occasion she managed to reunite a family which had missed connections and mistaken directions, with wife and children waiting one place and the man of the family cooling his heels in another building.

Fortunately, not all these incidents happen in one day, but through it all, Mrs. Willcoxon remains calm, collected, gracious, and very helpful. "I take care of anything I can," she says—and backs the statement up with action.

Her worst moment, she says, came some years ago when a stranger suddenly approached her desk, berated first his mother, who was accompanying him, then Mrs. Willcoxon, and finally became quite violent. She managed to call the guards, who arrived "in seconds."

Metro and shuttle bus schedules are available at the information

desk, and Mrs. Willcoxon has become an expert at helping people figure out how to get where they're going one way or another.

That includes job hunters, who may get lost in the maze of offices in Bldg. 31, prospective Clinical Center patients who are mistakenly brought to Bldg. 31, and messengers delivering grant applications who must find a particular office or administrator before a deadline.

Occasionally emergencies arise—electricity isn't working in a conference room, so Building Services must be called.

One harried man arrived late for a meeting, jumped out of a taxi, and only later remembered that he had left his brief case behind. After he returned to New York, and after a week of calling cab companies, Mrs. Willcoxon located the missing item—and received a note and candy as a thank you.

She also has a "secret admirer" who often leaves flowers on her desk before she arrives in the morning. And numerous people stop to say hello as they enter and leave the building—or to ask, "Have you seen X come in yet? Has Mr. Y been past recently?"

The contacts with people keep Mrs. Willcoxon enthusiastic about her job. When she first came to NIH 12 years ago, she was a clerk-typist in the National Institute of Dental Research.

Someone suggested that she might prefer the information desk post, but she says she wasn't sure she would like it until she had tried it for a while.

And, in fact, the initial weeks were tough—especially until she succeeded in accurately updating the desk's central directory of NIH employees. When she first arrived, none of her predecessors had been

able to stay abreast of the endless changes in personnel, position titles, and room assignments. Now she is the first to know who is what, and where.

Mrs. Willcoxon says her life seems to fall into 11-year periods, the length of time she held previous jobs at the Home Loan Bank Board, the Maritime Commission, and War Department. Then she was home for 11 years with her son—now working in the NIH Federal Credit Union—and her daughter, who just graduated from high school.

Now she likes the variety and number of people she meets—even, sometimes, celebrities like Danny Thomas. "I found I like being on my own—and I like coming to work every morning," she says.

So much, in fact, that she enjoyed her stints at the Open Houses last year and this, when she volunteered to stay on duty at her regular post—later receiving a commendation letter from her boss, Daniel Kenney, who also praised her recently after she returned a 2.2 carat diamond ring to its owner and refused to accept a reward.



The University of Virginia School of Medicine and its alumni paid tribute to Dr. Seal (r), NIAID acting deputy director, with John R. Seal Day on the Charlottesville campus on June 4. In the afternoon, a program on infectious diseases was held with colleagues sketching research highlights and stressing Dr. Seal's prominent role in them. Dr. Robert Chanock, NIAID, congratulates Dr. Seal.



On June 21 and 22, meetings were held in the Masur Auditorium on the results of nationwide swine flu vaccine trials in 5,000 persons. Participants represented the National Institute of Allergy and Infectious Diseases, Bureau of Biologics/Food and Drug Administration, the Center for Disease Control,

and the Department of Defense. A press briefing (above) was given Monday afternoon in the Clinical Center lobby by (center, l to r) Dr. Paul D. Parkman, BoB, Dr. John R. Seal, NIAID, and Dr. David T. Karzon, Vanderbilt University.

FLU VACCINE

(Continued from Page 1)

late August or early September. If further studies, now being planned, result in the development of vaccines suitable for younger age groups, these preparations might become available in the late fall or early winter.

Vaccine for adults will be prepared in two forms at dosages to be set shortly by the BoB. A monovalent vaccine which protects only against swine flu will be offered to all normal adults.

Elderly Receive Bivalent

A bivalent preparation, effective against both the swine-like virus and against A/Victoria—the influenza virus strain prevalent in the U.S. last winter—will be given to the elderly (over 65) and to those with underlying serious illness, such as heart disease or asthma.

At a June 21 meeting held at the Clinical Center and co-sponsored by NIAID, BoB, CDC, and the Department of Defense, investigators reported that, in immunized adults, reactions and levels of antibodies (protective blood substances) were similar to those seen in the past when influenza vaccines have been given.

Reported reactions affected from 2 to 15 percent of the adult volunteers studied, depending on the vaccine and dosage given. Most of these reactions were minor and transitory.

Only one fever of 102° or greater was encountered among the more than 1,350 volunteers that received

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still rings.**

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the two smaller doses of vaccines. One of these two doses will be the one selected for the national program.

Perhaps the most interesting data resulting from the studies was the sharp demarcation noted in antibody response between persons born before and after Asian flu swept the world in the late 1950's.

Since the influenza virus changed drastically at that time, individuals less than 23-24 years of age have never encountered a virus resembling the new agent which is believed to be similar to ones circulating in the U.S. population from 1918 through the 1930's, 40's, and early 50's.

Evidently, some "priming" of an individual is necessary for the swine flu vaccine to induce adequate levels of antibody.

Some investigators suggest that

Fed. Work Force Shifts; HEW Gain Is Reported

During the past 5 years a "significant shift" has occurred in the Federal civilian work force, according to a report by the Congressional Budget Office.

The distribution of Federal civilian employees finds a decline in the Department of Defense.

In 1970 DOD had 41 percent of the Federal civilian work force. In 1975 it had 37 percent. The actual number of civilian employees at DOD has decreased by 12.7 percent since 1970.

The report says "significant percentage" losses also have occurred in the Agency for International Development and the National Aeronautics and Space Administration.

"The reduction of 151,955 in civilian employment in DOD since 1970 has almost been matched by a gain of 128, 657 by HEW, Labor, Treasury, Justice, and the Veterans Administration."

a second dose of the vaccines producing few side effects might be given children who did not respond adequately to the first dose. This and other studies are planned by Dr. David Karzon, Vanderbilt University, and by others from 10 institutions cooperating in the vaccine studies in children.

Scope Is Unprecedented

Dr. John Seal, acting deputy director of NIAID, who convened the meeting on June 21, called attention to the fact that in exactly 2 months a total of 5,186 persons (including 1,204 children) had volunteered for the studies, had blood drawn, were immunized, and had given a second sample of blood for antibody determination.

The more than 10,000 sera collected were analyzed by one laboratory at the Center for Disease Control in order to avoid differences in results which could be attributed to differences in laboratory techniques. The size and scope of the test program was unprece-

NLM Aids Study of 1918 Flu

Epidemic and Peace, 1918, a work by Alfred W. Crosby, Jr.—supported in part by a fellowship from the National Library of Medicine—has made a recent (and timely) appearance, owing to current interest in swine influenza.

Published in March by Greenwood Press of Westport, Conn., the illustrated, 337-page book (\$17.50) is a history of the 1918 "Spanish influenza" epidemic, whose toll was twice as great as combat deaths on all fronts during World War I.



Dr. Manning Feinleib, chief, Epidemiology Branch, and chief, Field Epidemiology Research Section, NHLI, has been named a Centennial Scholar by the Johns Hopkins University School of Hygiene and Public Health. He is also clinical professor, department of community medicine and international health, Georgetown University School of Medicine.

dent.

Now that the code under which the vaccine was administered has been broken, all persons participating in the trials will be notified which vaccine they received and whether or not they now have antibodies to the swine flu virus.

If they are not protected (for example, if they received a placebo vaccine), they will be offered the recommended vaccine this fall.

Flu Search Citations Listed

The National Library of Medicine has conducted a search, No. 76-29, of scientific literature on swine flu in the MEDLINE base from January 1966 through May 1976.

Single copies of the list of 148 citations may be obtained free of charge by writing to: Literature Search Program Reference Section, NLM, 8600 Rockville Pike, Bethesda, Md. 20014.