Proposed Revised Guidelines To Control Recombinant DNA Research Published

NIH has proposed revised guidelines to control NIH-funded research on recombinant DNA, HEW Secretary Joseph A. Califano, Jr., announced on July 28, when the proposed revision appeared in the Federal Register.

"I recognize the extraordinarily difficult challenge that sensitive but effective regulation in this field poses for NIH, for the research community, and for the concerned public," Secretary Califano said. The Secretary indicated that before the revised guidelines become effective, he will have all public comments reviewed by a high level Department committee, which will require a final hearing on the issue Sept. 15, in the Washington, D.C. area. The final revised guidelines will be issued promptly following the hearing and the end of the comment period.

Decoyribonucleic acid, known as DNA, is the material which determines the hereditary characteristics of all living cells. Recombinant DNA molecules contain segments of DNA from unrelated organisms which have been combined in the test tube. Genetic recombination itself, other than what is referred to as recombinant DNA, occurs in nature.

The research techniques used to produce recombinant DNA molecules 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.

As proposed, the NIH guidelines would exempt five classes of recombinant DNA experiments now known to be safe, provide a way to remove others upon proof of their safety, and place primary responsibility for assuring compliance on institutions where the research is done.

The present ban would continue, however, on recombinant DNA research now considered high risk, and institutions would still be required to seek NIH approval before initiating projects or changing the conditions of certain experiments.

Includes Private Industry

Also, for the first time, provisions will be made for private industry to register its recombinant DNA activities with NIH.

Dr. Donald S. Fredrickson, NIH Director, observed:

"Five years have passed since concerns were first raised about the hypothetical hazards of laboratory experiments with recombinant DNA. Thousands of these experiments have been performed, and no adverse effects have been observed."

(See GUIDELINES Page 6)
Over 300 Choose New Or Increased Allotments As Bond Campaign Ends

The 1978 U.S. Savings Bond Campaign at NIH concluded on June 30 with 189 persons taking new bond allotments and 134 previous allotments being increased. The campaign included a raffle and two award presentations for best canvassers. Prizes were donated by R&W.

Raffle Held

Winners of the raffle on July 20 were: Tommy Musgrove (OD, DAS), $50 bond; Lee Souder (NIAMDD, OAM), $25 bond; and Audrey Carter (CC, ESC), $25 bond. Prizes for best canvassers were awarded to Jimmie Driscoll, CC Blood Bank, $25 bond; and Rita Levitan, FIC, Kick-off Rally Bulletin autographed by Arte Johnson.

Led Campaign

Dr. Mortimer Lipsitt, Director of the Clinical Center, served as chairman of the campaign. Howard Kettle, CC executive officer, served as vice chairman, and Steven Groban, chief, CC outpatient department, was coordinator.

Committee Functions

The ADP/EP Committee is concerned with: improved communications among B/I/D processors regarding their problems and systems; increased use and usefulness of centralized services and systems to meet common needs; reduced duplication of efforts, program, and data capture; and increased efficiency of ADP services, and providing a means for NIH data processing professionals to present ideas and suggestions to administration.

For further information, contact Carolyn G. McHale, 496-2194.

Statistics will prove anything—even the truth. —Sir Berkeley Molyneux

Data Base Management Systems Seminar—Open To All—Planned Aug. 16

On Wednesday, Aug. 16, Michael M. Gorman of Computer Sciences Corp. INFONET technical staff will present a 2-hour seminar on Data Base Management Systems in Bldg. 31, Conference Room 7 (Sixth Floor, C Wing), at 1 p.m.

All interested persons are invited. Major topics will include:

- What are DBMS and what can they do for you?
- DBMS structures and standards
- Fundamental definitions

Mr. Gorman has been involved for more than 12 years with DBMS design, development, marketing, implementation, evaluation, and maintenance. He has developed a DBMS evaluation model designed to examine DBMS characteristics as they relate to unique application requirements.

The seminar is sponsored by the ADP/EP (Automatic Data Processing/Extramural Program) Committee, composed of representatives of each B/I/D at NIH. The Committee is organized to provide a formal and effective mechanism for the improvement of automatic data processing services related to extramural activities of NIH.

Trainning Tips

The Executive and Management Branch is sponsoring the following courses at NIH in the next 2 months:

- Supervisory Supervisory and Managerial Effectiveness Sept. 12-14
- Introduction to Supervision Sept. 19-22
- Effective Communications Sept. 26-29

Managerial Understanding and Managing Stress Sept. 7-8
Human Interaction in the Work Environment Sept. 27-29

For further information concerning these courses call Sacelia Damiuth, 496-6371.

Fed'l Application Forms Are Getting a Face Lift With Improved Design

Standard Form 171, the application filed by over a million people seeking Federal Government jobs each year, is getting a face lift.

Increase Legibility

The slightly longer, easier-to-read "Personal Qualifications Statements" will be available in most areas of the country by late summer. Applications already on file need not be resubmitted.

This is the first major overhaul of the form since 1968. A new design makes it easier to complete and to collect more specific information.

Others Reused

Related forms used in applying for Federal jobs were also revised: the SF 171-A, Continuation Sheet; SF 172, Amendment to Personal Qualifications Statement; and SF 173, Job Qualifications Statement.

The review gave special attention to removing, so far as possible, items which could be potentially discriminatory. For instance, height and weight no longer appear on the application forms; this is requested on the vacancy announcement only if a specific job requires it.

Other items on the forms are updated to bring them into line with current usage, such as the addition of the courtesy title "Ms."

Money is like the reputation for ability—more easily made than kept. —Samuel Butler

Dr. for the raffle tickets for the 1978 U.S. Savings Bond Campaign are (1 to r) Walter Chakwkin, president of R&W; Jimmie Driscoll, CC Blood Bank (best canvasser); Rita Levitan, FIC (runner up canvasser); and Steven Groban, NIH Bond Coordinator.
Telecast Via Satellite Offers Two-Way Talks On Ulcers, Diarrhea

As part of the REACH program (Research, Education, and Community Health), the fourth live medical presentation via satellite will feature the topic, Peptic Ulcer and Diarrheal Disorders: An Update, on Aug. 15 from 5:30 to 6 p.m. in Wilson Hall, Bldg. 1.

During the telecast form 5:30 to 6 p.m., there will be an open circuit for the public audience with a discussion of Peptic Ulcer and Diarrhea; Messages From Within. A closed circuit program for physicians and other medical personnel will be offered from 6 to 8 p.m.

Panelists broadcasting from NIH will be Dr. Denis M. McCarthy, National Institute of Arthritis, Metabolism, and Digestive Diseases, and Dr. E. Bradley Sack, Johns Hopkins University.

The telecast may be viewed at the National Library of Medicine’s Billings Auditorium. Seating is limited, so please call Bill Leonard, Lister Hill Center, 496-1306, if you wish to attend.

Camera Club Meeting Aug. 23 Features Pictorial Competition

The NIH Camera Club will hold a pictorial competition in black and white print, color print, and slide categories (no deadline) on Wednesday, Aug. 23, at 8 p.m. in Conference Room 7, Bldg. 31, C Wing.

Jim B. Johnson will judge.

All interested persons are invited to attend. For information on membership in the R&W Association-sponsored club, call Gail Planck, 496-1378.

Minorities, Women Numbers in Fed’l Government Increase

The numbers of minorities and women in Federal Government have increased, according to a May 1977 Civil Service Commission study. Minorities accounted for 11.2 percent of the 2.4 million work force, compared to 14 percent in 1969.

Women accounted for 30.5 percent of the work force (30.1 percent in November 1976).

In 1976 and 1977, minorities gained 1.3 percent, compared to only a .02 percent overall increase, in grades 9 through 13.

Clinical Center Holds 25th Anniversary Celebration; Employees, Research Cited

A special exhibit describing Twenty-Five Years of Research for People is on view in the main lobby of Bldg. 10, featuring past Directors, historic moments, plans for the Ambulatory Care Research Facility, and research highlights.

Twenty-five years of research for people was the theme for the Clinical Center’s Silver Anniversary celebration, held July 6 in the Masur Auditorium. Dr. Mortimer B. Lipsett, CC Director, hosted an afternoon program that highlighted a quarter of a century of patient care and medical research at the Clinical Center and paid special tribute to the 61 employees who have worked at the CC since its opening.

Guest speaker Dr. Henry Sebrell, Director of NIH from 1950 through 1955, an internationally renowned researcher in nutrition, traced the evolution of the CC since 1953.

Changes Noted

He noted that while changes have occurred, the primary concerns of the CC have remained constant—that patient care would be the best in the world, and that at the same time, the patient would be contributing to knowledge in medicine.

He reminded a sympathetic audience that two other problems have remained the same—funding and allocation of space. Dr. Sebrell pointed out that 60 percent of the reports coming from NIH between 1973 and 1975 were clinical, not laboratory, papers. This fact, he said, illustrates the importance of the CC, not only to NIH, but to medical research throughout the world.

Added Facilities

He spoke with pride of the construction of the new ambulatory care research addition, but emphasized that “the facilities are only incidental to the people who work at the Clinical Center” and that “the people are what makes the Clinical Center great.”

Edith Jones, chief of the CC Nutrition Department and a 25-year veteran of the CC, talked about the changes that have occurred since her arrival. She reminisced about the early problems of feeding employees as well as patients. She is particularly proud that 19 members of her staff have been at the CC for 25 years.

Dr. Lipsett showed photographs of some of the people in the CC who have made important medical discoveries. Four of these gained
As Broadway Beckons

By Eunice Lewis of DFM

A true story of a dream come true: Ms. Lewis really has a lot to sing about—she was invited to audition and joined the chorus immediately.

Eunice Lewis, a Stride program graduate, left her job as an accountant and joined the Stride program in 1974, graduating in 1977.

Ms. Lewis has sung as long as she can remember. She moved to Silver Spring in 1969. She joined the Stride program 7 years ago, and the choir was selected "in recognition of their important contributions to biomedical research, clinical medicine, and medical education." Recipients are:

- Dr. Avram Goldstein, professor of pharmacology, Stanford University
- Dr. Robert A. Good, Director, Memorial Sloan-Kettering Institute for Cancer Research, and professor of pediatrics and professor of medicine, Cornell University Medical College
- Dr. Howard H. Hiatt, Dean, Harvard School of Public Health
- Dr. Alan F. Hofmann, professor of biology, University of California, Los Angeles
- Dr. Bart W. O'Malley, professor and chairman, department of cell biology, Baylor College of Medicine
- Dr. Donald M. Small, professor of medicine, Boston University School of Medicine
- Dr. Jean D. Wilson, professor of internal medicine, University of Texas Southwestern Medical School
- Dr. Najarian's research is funded by the National Cancer Institute and National Institute on Drug Abuse, ADAMHA, cited for "elucidating the role of brain endorphins in narcotics addiction, and for his advocacy of humane treatment for the chemically dependent."

Dr. Good received the award for "introducing the concept of cellular engineering, and for his work in the possible possibility of cancer research."

He is receiving support from NIA and NIAMDD.

Do you know the meaning of the pyramid and the eye above it on the face of a dollar bill? The pyramid symbolizes the strength of the union of the states which make up our land. The top of the pyramid is unfinished, meaning there is still work to be done to make our systems ever better. The eye stands for the all-seeing God, Supreme Builder of the Universe.
Management Intern Info.
Meetings Scheduled; Apply Before Sept. 25

Applications are being accepted now through Sept. 25 for the 1979 NIHN Management Intern Program. This program is designed to train participants for administrative positions with the potential for promotion to upper level managerial positions.

The MI program consists of four different-on-the-job training assignments over the course of a year. In addition, interns enroll in formal courses and attend seminars and meetings to enhance their knowledge about aspects of administration and management.

Applications from minority group members are encouraged. Eligible candidates must:

**Qualifications Listed**

- Have a career or career-conditional appointment;
- Work full-time or are willing to be reassigned to full-time;
- Qualify under standard requirements for an Administrative Assistant in the GS 341 occupational series;

At the GS 6 level: 3 years of progressively responsible, nonclerical experience; a bachelor's degree; or a combination of experience and education.

At the GS 7 level: requirements for GS 5; and 1 year of specialized administrative experience or graduate education.

- Should you need to request a downgrade to enter the program, you may be entitled to salary retention for a 2-year period.

To apply, send a current Standard Form 171, Personal Qualification Statement, to the Career Development Branch, DPM, Bldg. 31, Room B2C39. A PACE examination score is also needed. Arrangements to take the PACE examination may be made through your personnel office.

All eligible applicants will be rated as qualified or highly qualified. Applicants rated highly qualified will be interviewed.

For more information, attend one of the PACE Preparation Mini Courses from noon to 2 p.m.:

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| For preconference material, contact Karen Mathsen, Training Assistance Branch, DPM, on 476-2146.

You may also attend one of the following MI Workshops from noon to 2 p.m.:

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Qualifying experiences will be discussed, and there will be an opportunity for questions and answers.

**Twentieth Comprehensive Cancer Center**

**Designated in Detroit; Program Detailed**

HEW Secretary Joseph A. Califano, Jr., announced on July 27 the recognition by the National Cancer Institute of the Cancer Center of Metropolitan Detroit as a Comprehensive Cancer Center.

This is the 30th in a group of 30 centers supported under the National Cancer Act of 1971. The centers are multidisciplinary centers recognized as comprehensive under the authority of the National Cancer Act of 1971.

Eligible candidates must:

- Meet the MI Program Requirements;
- Have a career or career-conditional appointment;
- Work full-time or are willing to be reassigned to full-time;
- Qualify under standard requirements for an Administrative Assistant in the GS 341 occupational series;

At the GS 6 level: 3 years of progressively responsible, nonclerical experience; a bachelor's degree; or a combination of experience and education.

At the GS 7 level: requirements for GS 5; and 1 year of specialized administrative experience or graduate education.

- Should you need to request a downgrade to enter the program, you may be entitled to salary retention for a 2-year period.

To apply, send a current Standard Form 171, Personal Qualification Statement, to the Career Development Branch, DPM, Bldg. 31, Room B2C39. A PACE examination score is also needed. Arrangements to take the PACE examination may be made through your personnel office.

All eligible applicants will be rated as qualified or highly qualified. Applicants rated highly qualified will be interviewed.

For more information, attend one of the PACE Preparation Mini Courses from noon to 2 p.m.:

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**Meetings Scheduled**

- **For**:
  - Career Development Branch, DPM, on 496-6211, for additional information.

To apply, send a current Standard Form 171, Personal Qualification Statement, to the Career Development Branch, DPM, on 496-3921, for additional information.

Remember—the application deadline to apply is Sept. 25.

**Scholar, Mathematician**

Robert Waldmann Works Second Summer at NCI

Robert spent summer 1976 at the National Science Foundation Summer Program in Mathematics at Hampshire College.

For the second summer, the National Cancer Institute's Laboratory of Molecular Biology has a remarkable summer worker—Robert J. Waldmann, one of the 1,000 students in the U.S. who are National Merit Scholarship winners. He is also a Presidential Scholar Finalist.

Robert plans to enter Harvard University in September as a biochemistry major.

Last year he received an American Cancer Society Scholarship to work at NCI on projects for which he received an award from the Washington Academy of Science and placement on the Westinghouse Talent Search Honors List. This year he is continuing work on projects with Rapoport.

His abilities in mathematics have also won wide recognition: a silver pin in 1977 and a bronze medal this year from the Mathematics Association of America (for one of the five highest scores in the D.C. area on an examination).

In addition, he was on the 15-member math team from Montgomery and Fairfax Counties that placed first in a competition of 30 teams in the Atlantic Regional Mathematics League Meet in New Brunswick, N.J., in June.

The team placed second among 26 teams last year when the competition was held in Hartford, Conn.

In the competition, individual members solve problems, the whole team must solve 8 problems, and the team is divided into groups of 5 for a "relay" of 5 problems which must be solved in sequence. The first group to correctly solve the whole sequence wins.

Robert, a 1978 graduate of Georgetown Day High School, also likes chess, gardening, ceramics, and textiles. He shares an interest in photography with his father, Dr. Thomas A. Waldmann, chief of the Metabolism Branch, NCI.

Robert's older brother, Richard, is also a summer employee with Dr. Jacob Maizel of NICHHD.
Five key administrators from schools which contribute significantly to the pool of minorities and women in science have been selected as the first participants in the Extramural Associates Program from Aug. 1, 1978, to Jan. 31, 1979.

The new associates are: Dr. Bonnie Wood, University of Maine, Orono; Dr. John Hayes, Paine College, Augusta, Ga.; Dr. Jean Lum, University of Hawaii, Manoa; Dr. Marian Wilson, Chicago State University, Chicago, Ill.; and Dr. William Hamm, St. Mary's University, San Antonio, Tex.

**Spending 6 Months at NIH**

The Extramural Associates Program is a new program to promote the entry and participation of ethnic minorities and women in NIH-supported research. Under the Interagency Personnel Personnel Mechanism, NIH invites up to eight administrators, involved in science, from those schools which traditionally contribute to the basic preparation of minorities and women for biomedical science to spend 6 months in residence.

**Plans Initiated in 1976**

Initial plans for the program were developed by health scientist administrators and others attending the Final Affirmative Action Retreat in February 1976. Plans were completed by Dr. Zora Griffio, OD, chairman, Coordinating Committee for NIH Minority and Women Research and Training. The program is administered by Frank Cady, Division of Research Grants.

The associates will work in rotating assignments with senior staff members of NIH and other Federal agencies. They will attend seminars, committee meetings, workshops, and site visits and will have the opportunity to obtain information about Federal health-related programs and associated granting and contracting activities.

Each associate will be assigned to an advisor, and together they will plan assignments to include the associate's interests. Advisers are: Dr. Vida Beaven, OD; Dr. James F. O'Donnell, DDR; Dr. Betty H. Pleket, NIA; Dr. Robert Rabin, NSF; and Dr. S. Stephen Schaffino, DRG.

**Training Goals Outlined**

Upon completion of their training, the scientists are expected to return to their institutions as resource persons on NIH research concerns, support mechanisms, and policies and procedures which govern the awarding of grants and contracts.

The next receipt date for candidates to apply is Jan. 31, 1979. Further information is available from Frank Cady, Division of Research Grants, Westwood Bldg., Room 448, 553 Westbard Ave., Bethesda, Md. 20016 (496-7395).

**DNA Guidelines**

As part of the telephone series of recordings on personnel topics, the Program of Employee Recognition and Awards will be the theme featured for 4 weeks beginning next Monday, Aug. 14. Call 496-4608 to hear a new topic each week. This recording will be available on a 24-hour basis.

More specific listings of the weekly topics and dates that they will be discussed will be posted on all official bulletin boards.

**About Recognition, Awards**

Dial 496-4608 To Learn About Recognition, Awards

The NIH Guidelines were first issued on June 23, 1976, as a result of the concerns expressed within the scientific community regarding possible dangers from recombinant DNA research. The proposed revisions result from scientific experience with such research and extensive discussions at numerous forums and several Congressional hearings since the subject was first addressed in 1973.

The Director of NIH, on the basis of scientific and technical advice and of a public hearing held in December 1977, noted that there was widespread agreement on the need to update the original Guidelines and that NIH has received numerous suggestions for their revision.

The standards of the guidelines would apply to all recombinant DNA experiments, however supported, that are conducted in an institution receiving any support from NIH for recombinant DNA research.

**Must Register with NIH**

All such experiments must be registered with NIH, even though not all are paid for by the Federal research agency. The research institution would risk losing its NIH recombinant DNA research funds if a non-NIH-funded project is not in compliance with the guidelines.

Prior NIH clearance is mandatory for new NIH grants and contracts involving recombinant DNA techniques and for all projects in P4 facilities. In the proposed revised guidelines, prior NIH clearance is no longer required for changes in ongoing experiments at the P1-P3 levels. These changes must be approved by the institutional biosafety committee (IBC), and NIH will then review the IBC actions.

**EIS Conclusions Noted**

NIH issued a Draft Environmental Impact Statement on the original Guidelines in September 1976, and the final EIS was issued in October 1977. It concluded that activities conducted under the Guidelines would have no predictable impact on the environment.

In the process of revising the NIH Guidelines, NIH has made an environmental impact assessment which indicates that there would be no impact on the environment as a result of the revisions. The assessment and a "Decision" statement explaining the proposed revisions are published in the July 28 Federal Register as companions.

Comments and inquiries concerning the proposed revision of the Guidelines are invited during the next 60 days. All correspondence should be addressed to the Director, NIH, Bldg. 1, Room 124, 9000 Rockville Pike, Bethesda, Md. 20014.

Whenever a man's friends begin to compliment him about looking young, he may be sure that they think he is growing old.—Washington Irving

Four employees in the Disbursing Services Section, Operations Accounting Branch, DFM, recently received special awards. L to r are: Sophie Calderone, DBS chief; Jaime Arenas-Aquila, CC agent cashier, cited for carrying an excessively heavy workload for 3 months until a vacancy was filled; Mary Durrett, recognized for her valuable contribution over the past 3 years to NIH's timekeeper training program; Daisy Broyer and Dorothy Carter, Bldg. 31 agent cashiers, who protected imprest funds by their outstanding alertness; and Samuel George, branch chief, who presented the awards.
Unconventional Viruses—
NINCDS Workshop Held

More than 100 world experts on neuropathology, neuroepidemiology, neuropathology, and clinical neurology met at NIH July 28-31 for a series of informal workshops on the subacute spongiform encephalopathies of the central nervous system and the unconventional virus agents that cause them.

Consider Challenging Questions

The workshops were convened by the National Institute of Neurological and Communicative Disorders and Stroke to discuss challenging questions about slow virus infections of the nervous system.

Participants included many early investigators of kuru, Creutzfeldt-Jakob disease, and scrapie, whose laboratory and field work contributed to the discovery that some subacute, degenerative, fatal brain diseases are caused by transmissible viruses in the form of particles or agents new to microbiology.

The workshops were planned by Dr. D. Carleton Gajdusek and Dr. Clarence J. Gibbs, Jr., of the NINCDS Laboratories of Central Nervous System Studies and Slow, Latent and Temperate Virus Infections.

Open New Labs, Facilities

The event marked the opening of the Institute's new laboratories and animal-holding facilities at the Frederick Cancer Research Center at Ft. Detrick, designed for the study of kuru and related transmissible dementias of man and spongiform encephalopathies of animals.

A workshop report will appear in the next issue of the NIH Record.

Rehabilitation Leaders Discuss Subject: Needs of Surviving Patients and Families

Multiple viewpoints marked the NCI seminar on psychosocial aspects of cancer rehabilitation. Participants included Dr. Fink; Dr. School, scared next to her translator Brigetti Richman; Dr. Howell; Dr. Gregory T. O'Connor, NCI associate director for International Affairs; Dr. Robbins; and (back to camera) Dr. Lack.

With death no longer an inevitable consequence of most cancers, researchers have begun to examine the psychosocial needs of the surviving patient and his or her family.

On June 29 a group of leaders in psychosocial aspects of cancer met at House to discuss ways to improve the quality of life for these patients.

Dr. Scheel, a radiologist, is a founder of the West German Cancer Society and wife of the President of the Federal Republic of West Germany.

The group met under the auspices of the NCI and the Division of Cancer Control and Rehabilitation and Office of International Affairs.

Dr. Diane J. Fink, director of DCCB, led the discussion.

Participants Exchange Views

Participants exchanged views regarding the ability of large cancer centers to meet the emotional and psychological needs of patients.

"I think we agree," said Dr. Scheel, "that we need to educate people that cancer is a disease that you can learn to live with. This is a concept that we must start to teach, not when a person gets the disease, but in the first grade."

Dr. Melvin Krant, director of the Cancer Programs for the University of Massachusetts, helped in the communities where he suggested that present day society provides no assistance in coping with chronic disease, either as an individual or as a member of the community.

He said a psychologist in an institutional setting is unable to help an individual incorporate the reality of a long-term illness like cancer into his concept of "how to pour the coffee and go to work each day knowing he has cancer."

Dr. Claus Bahnsen, director of the department of behavioral sciences at Eastern Pennsylvania Psychiatric Institute in Philadelphia, stated, "The fear is that we will take cancer patients and put them on the couch for a 50-minute session. We won't be ridding the corridors treating patients. We will be consulting, listening, and educating."

Dr. Bahnsen emphasized the need to recognize the problems and reactions of the institutional staff and the family as well as those of the patients. He also noted that different psychological problems face the recovered patient who hopes to resume a role in society and the cancer patient who is coping with impending death.

Dr. Jinnie Holland, head of the department of psychiatry at Memorial Sloan-Kettering Cancer Center, expressed confidence in the capability of large institutions to provide meaningful help to cancer patients.

Reviews Center Programs

She reviewed the psychosocial support and training programs of the center.

Patients who had participated in clinical trials of new treatments may provide insights into quality of life changes resulting from such treatments, she suggested.

Large cancer centers may be the only places in which allied health professionals may develop the skills to provide emotional support, suggested Dr. Guy Robbins, director of Cancer Control at Sloan-Kettering, because of the numbers and variety of patients. Professionals could then contribute these skills to their communities.

Dr. Sylvia Lack, director of Hospice, Inc., in New Haven, Conn., defined hospice as an alternative to cancer centers for those patients for whom aggressive medical treatment is no longer appropriate.

"The hospice concept has to be flexible," Dr. Lack said, "in order to work out what's appropriate for a given region or culture." However, a key concept is putting the needs of the patient and family before those of the institution. This includes providing services at home rather than through outpatient clinics and 24-hour access to professionals who know the patient, the patient's family, and the patient's medical and emotional needs.

Dr. Lack also emphasized the importance of appropriate pain control. "We are providing more than tea and sympathy," she noted.

Community Support Is Problem

Community, or lack of it, is a problem for the families of children with cancer, according to Dr. Doris Howell, chairman of the Department of Community Medicine at the University of California, San Diego.

Thirty or 40 years ago the death of a child was easier to bear, she said. "Nearly every family lost a child to cancer in the first few years of life, and families with many emotional supports; and death usually came rapidly."

Today, she said, the stress accompanying a diagnosis of cancer may be drawn out for a year or more while a child is treated.

Measure Impact of Cancer

Dr. Howell said what may appear to be problem behavior in children with cancer actually may be appropriate means of coping with impending death. She praised the work of researchers who are measuring the impact of cancer on hospitalized children, though Dr. Krant cautioned that what is learned in a hospital setting may not be applicable to home life.

Dr. William Markel, vice president of the National Cancer Institute, expressed confidence in the capability of large institutions to provide meaningful help to cancer patients.

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DR. LEAVITT

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Dr. Arthur Hand Is New NIDR Laboratory Chief

Dr. Hand’s research on the structure and function of salivary and related exocrine glands has received honors, including the International Association of Dental Research Basic Research in Oral Science Award and the PHS Commendation Medal.

Dr. Arthur R. Hand has been appointed chief of the Laboratory of Biological Structure, National Institute of Dental Research.

Following his graduation in 1968 from the University of California, Los Angeles, where he received his D.D.S. degree from the School of Dentistry, Dr. Hand joined the staff of the NIDR as a senior dental surgeon of the PHS and a research investigator.

In 1976-77, Dr. Hand was a visiting professor, department of anatomy, McGill University. Since 1977 he served as acting chief of the Laboratory that he now heads.

Two New Members Join NINCDS Advisory Council

Two new members have been appointed to the National Advisory Neurological and Communicative Disorders and Stroke Council for 4-year terms: Dr. Franklin S. Cooper, associate research director, Haskins Laboratory, New Haven, Conn., and Dr. Sidney Goldring, professor and head of the department of neurosurgery, School of Medicine, Washington University, St. Louis, Mo.

Dr. Cooper is internationally known for research on the perception and production of speech, voice communication systems, and prothetic aids for the blind and the deaf.

He holds a Ph.D. degree in physics from MIT, and formerly studied and taught physics at the University of Illinois. An adjunct professor at the University of Connecticut since 1969, Dr. Cooper has held comparable posts at Columbia University and Yale University.

Dr. Goldring is an internationally recognized authority on electrophysiological studies in animal and human brains. In his work with various brain disorders, he has successfully applied a technique that uses direct current amplifiers and non-polarizable recording electrodes to correlate slow electrical changes.

He is also expert in recording electrical changes in a single nerve cell through a combination of computer techniques and use of micro-electrodes; this is an important development in the study of epilepsy.

A native of Poland, Dr. Goldring received his M.D. degree from Washington University in 1947.

The NANCDS Council is an advisory group for the National Institute of Neurological and Communicative Disorders and Stroke. The 16 council members meet twice a year to review applications of scientists seeking support for research and research training in the neurological, sensory, and communicative disorders.

2 Pathology Societies To Hold Joint Fall Meeting in St. Louis

The College of American Pathologists and the American Society of Clinical Pathologists, the country’s two largest pathology societies, will hold their joint fall meeting from Sept. 14-22 in St. Louis.

More than 9,000 persons, including a large number of NIH staff members, are expected to attend.

Discuss Bone Marrow Banks

During the ASCP scientific assembly, Sept. 20-21, the feasibility of establishing bone marrow banks and a new immunohistochemical technique for diagnosing myocardial infarcts are among the recent advances in clinical pathology to be discussed.

The ASCP Basic Science Research Symposium will explore immunologic Advances for Classification, Diagnosis, and Treatment of Malignant Lymphomas. Eight experts will trace the evolution of techniques that are transforming the management of cancers of the lymph system.

Other topics to be covered during the joint meeting will be What’s New in Chemistry and Controversies in Pathology.

In addition to award presentations, honorary lectures, and exhibits, the meeting will present more than 100 workshops during the week as part of its Continuing Education program.

Dr. James R. Weisiger (I), program director for Scientific Evaluation in NIAMDD’s Diabetes, Endocrine, and Metabolic Diseases Program, was honored recently with the first annual Cystic Fibrosis Foundation Medical Award of Merit. In awarding the commemorative plaque, Dr. John Mangos, chairman of the CFF Medical Advisory Council, noted that since he joined NIH in 1963, Dr. Weisiger has accorded cystic fibrosis top priority in his programs, has worked tirelessly to disseminate information regarding CF among investigators, and has encouraged the recruiting of outstanding scientists into the field of cystic fibrosis.

Volume Lists FY 1977

Grants for Construction, Training, Med. Libraries

The publication entitled National Institutes of Health Grants for Construction, Training, Medical Libraries, Fiscal Year 1977 has recently been issued.

Presented in the volume are 3,261 training grants, traineeships and fellowships, cancer research facilities, construction, and medical library grants awarded by NIH components from fiscal year 1977 funds.

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

Listings of NIH grants, contracts, 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 FY 1977 were released earlier.

Single copies of the DHEW Publication No. (NIH) 78-1043 volume are available free of charge from DRR.

WHAT’S IN A NAME?

CHAIRMAN? CHAIRLADY? CHAIRPERSON? The National Association of Parliamentarians has ruled that the proper term is “Chairman,” regardless of sex . . .

If it is necessary to acknowledge the sex of the Chairman, they say, the term “Mr. Chairman” or “Madam Chairman” should be used.

The title “Chairman” . . . is an old and respected one dating from the time when the presiding officer was the only person at a meeting favored with a chair. All other participants were relegated to benches.

—As seen in Executive Newsletter.
**Dr. Darrel Gwinn Named As New Health Sciences Administrator in NIAID**

Dr. Darrel D. Gwinn has been appointed health sciences administrator with the Microbiology and Infectious Diseases Program of the National Institute of Allergy and Infectious Diseases. Dr. Gwinn succeeds Dr. Paul Lambert, who recently retired, and will manage grants and contracts in the fields of tuberculosis and leprosy research.

His responsibilities include working with the Tuberculosis and Leprosy Panels of the U.S.-Japan Cooperative Medical Science Program. He will also administer a new program emphasizing research on mycology and fungal diseases.

Formerly a microbiologist with the Environmental Protection Agency, Dr. Gwinn developed guidelines and standards for the registration of pesticides and the review of pesticides suspected of causing adverse environmental effects.

Prior to his assignment with EPA, Dr. Gwinn worked with the U.S. Army Biological Laboratories at Fort Detrick, Frederick, Md., where he studied genetic properties of chromosomes of different bacterial species and their phase.

Dr. Gwinn was born in Portland, Ore. He received the B.S. and M.S. degrees from Oregon State University, Corvallis, and his Ph.D. in 1973 from the University of Massachusetts.

**New U.S.-Italian Cooperative Agreement Discussed With Researchers at NIEHS**

Dr. Rall guided Professor Pochiari on a tour around the new, permanent NIEHS facility now under construction in Research Triangle Park, N.C. The facility will contain 334,000 gross square feet when completed in 1980. Capable of housing approximately 800 employees, it will be one of the most innovative and up-to-date laboratories of its kind in the world.

Dr. David P. Rall, Director of the National Institute of Environmental Health Sciences, was host recently to Professor Francesco Pochiari, Director of the Institute of Health in Italy’s Ministry of Health. For 2 days Dr. Rall met with NIEHS scientific staff to discuss a new cooperative agreement between the U.S. and Italy in the area of health and medicine.

The agreement, designated a Memorandum of Understanding, was signed by HEW Secretary Joseph A. Califano, Jr., and Italy’s then Minister of Health Luciano Dal Falco in Rome, in November 1977, and listed seven areas of cooperation.

**Area Is First on List**

First on the list was “Health Aspects of Environmental Pollution.” Dr. Rall was named chairman for the U.S. in this area, and Professor Pochiari chairman for Italy.

Topics of mutual interest are:
- the evaluation of chemicals for possible human toxicity, understanding the mechanism of environmental chemicals with possible human toxicity, and surveillance and epidemiological assessment of the effects of environmental chemicals in human and nonhuman populations.

**NIEHS is Principal Agency**

NIEHS is the principal U.S. agency for biomedical research on the effects of chemical, physical, and biological environmental agents on human health and well-being.

The administrative and scientific staff at NIEHS discussed with Professor Pochiari the new international agreement and areas of environmental concern for both countries, the methodologies to approach these mutual problems, and research programs to determine the health effects of environmental agents.

Through this international agreement the scientists from both countries will pool their knowledge for a better opportunity to move quickly in identifying and under-

**R&W Sponsors Touch Football Team; Practice Starts Soon**

The team's first practice sessions are scheduled for 10 a.m., on Saturday, Aug. 26 and Sept. 2, at 16th and Kennedy Streets, N.W., Washington, D.C., (near the tennis courts). Practice will continue at this location until the season starts.

All new and old players are welcome to try out for the team. R&W hopes to make this another championship team!

For further information, contact coach Norman Jones at 456-6277.

He that falls in love with himself will have no rivals.—Benjamin Franklin
Conference in September Will Be Held on Reading, Dyslexia, Orthography

A Cross-Language Conference on Orthography, Reading, and Dyslexia will be held in Wilson Hall, Bldg. 1, Sept. 17-20.

The conference—part of a continuing effort by the National Institute of Child Health and Human Development to understand the reading process and the failure of some children to learn to read—will bring together 24 experts from this country and several foreign countries to examine these areas as they relate to the reading of various languages.

The conference will address the following major questions: Given the special nature of the written symbol system used to represent a given language:
- What is the nature of the beginning reader’s task? What must the child learn in order to be a successful reader?
- What is the rationale for the instructional (including remedial and therapeutic) procedures for teaching reading in that language?
- What research should be conducted to help us better understand the reading process and the relationships between orthography and reading?

Conferences will address specific issues ranging from strategies utilized in reading specific symbol systems to problems in the design of new writing systems. They will also be examining and comparing the orthographies of such languages as Japanese, Dutch, Hebrew, Russian, Serbo-Croatian, and English.

The eighth in the NICHD’s Communicating by Language series, the conference is sponsored by NICHD; the National Institute of Mental Health; the National Institute of Neurological and Communicative Disorders and Stroke; the National Institute of Education, HEW; the Office of Maternal and Child Health, HSA; and the National Institute of Neurological and Communicative Disorders and Stroke.

Dr. Rolf Ulvestad Joins Commun. Disorders Prog.

Mary Jane Meyers recently rejoined the NICHD as personnel officer for NICHD-NEI after serving as assistant personnel officer for NIAID. Prior to that position, she previously worked as a personnel management specialist in NICHD for nearly 3 years. Before joining NIAID in 1971 she worked in personnel with the Washington office of the Peace Corps. A member of the International Personnel Management Association, Mrs. Meyers earned her B.S. degree in business administration from the West Virginia Wesleyan College.

NIAID-Funded Study Finds Chlamydia A Frequent Cause of Infant Pneumonia

The organism Chlamydia trachomatis caused 3 per cent of all pneumonias in infants hospitalized during a 54-week study at the Children’s Orthopedic Hospital and Medical Center in Seattle. This high prevalence suggests that C. trachomatis may be responsible for many pneumonias previously considered to be caused by viruses.

C. trachomatis is an intracellular parasite, probably related to bacteria, that causes an eye infection called trachoma; it is also responsible for 30 to 50 per cent of nongonococcal urethritis (NGU) in men.

Transmitted by sexual contact, the organism also causes inflammation of the cervix in women, which is often asymptomatic. The infection in women may not be suspected until they deliver babies with a chlamydial-caused eye infection.

These eye infections are usually benign and self-limited. However, a recent study indicates that these eye infections may preclude pneumonia.

None of these infants showed evidence of C. trachomatis infection other than culture and nongonococcal urethritis or by transport of these features is important in making decisions about treatment.

All these infants with C. trachomatis pneumonia were between 3 and 11 weeks old, and had no history of pneumonia developed. Of 28 infants without pneumonia who served as matched controls, only one was positive for C. trachomatis, and he did have upper respiratory congestion.

All these infants with C. trachomatis pneumonia were between 3 and 11 weeks old, and had no history of pneumonia developed. Of 28 infants without pneumonia who served as matched controls, only one was positive for C. trachomatis, and he did have upper respiratory congestion.

The number of eosinophils—a type of white blood cell—and antibody levels were also significantly higher in these patients. Identification of these features is important since many laboratories are not equipped to culture C. trachomatis or to measure anti-chlamydial antibody titers.

Awareness of the prevalence of this infection should aid physicians in making decisions about treatment. Often, infants with pneumonia are treated for bacterial infection with penicillin or ampicillin, drugs ineffective against chlamydial infections.

Infants who do not respond to treatment are assumed to have a viral infection against which there is currently no effective treatment. However, infants with chlamydial pneumonia will respond to treatment with erythromycin or sulfonamides.

The investigators acknowledged that the period of the study (Sept. 1 through Feb. 15) precisely bisected the respiratory disease season. If the study had been longer, more patients with pneumonia due to respiratory syncytial virus—the most important cause of serious lower respiratory tract illness in children under 5—probably would have been included. The authors feel larger case-control studies and longer follow-up periods are warranted.

This study was reported by Drs. H. Robert Harrison, Marilyn G. English, Cynthia K. Lee, and E. Russell Alexander, all from the School of Public Health and Community Medicine, University of Washington, Seattle, in the New England Journal of Medicine (March 30, 1978).

Dr. B. Graham Becomes 130th Grants Associate

Dr. Bettie J. Graham, a native of Beaumont, Tex., has joined the NIH Grants Associates Program for a year of training in health science administration. Dr. Graham is the 130th scientist to enter the program since it was started in 1961 to meet the needs of NIH for health scientist administrators.

Dr. Graham is a graduate of Texas Southern University, Houston, where she received her B.S. degree in 1962. She then joined the Peace Corps where she served as a science teacher in Nigeria from 1962 to 1964.

She earned her Ph.D. degree from Baylor College, Houston, Tex., in 1971. For the next 5 years, she did postdoctoral work at Albert Einstein College, Bronx, N.Y., and then accepted a Staff Fellowship with the National Cancer Institute in the Virus Tumor Biochemistry Section, where she worked on the role of the virus in the infection of mammalian cells.

The author and co-author of nine publications, her research interests include herpes virus DNAs.
NIAID Grantees Report Stinging Insects’ Venoms Provide Superior Immunotherapy

Researchers at Johns Hopkins University School of Medicine at the Good Samaritan Hospital in Baltimore recently announced that results of the first controlled trial of the treatment of life-threatening allergic reactions to stinging insects clearly establish the superiority of venoms for this purpose.

The Baltimore study, supported by the National Institute of Allergy and Infectious Diseases, also shows that extracts made from whole bodies of insects (WBE)—the only preparations presently available to physicians for the treatment of insect allergy—may provide little or no more protection than a placebo.

Reactions Can Cause Death

Allergic reactions to the stings of insects such as honeybees, yellow jackets, wasps, and hornets can be serious, at times leading to a sudden drop in blood pressure, shock, and possibly death within minutes.

Although 50-100 Americans are reported to die annually from such reactions, many more deaths probably occur but are attributed to other causes such as heart attacks. Those who have had a life-threatening reaction often fear another one.

As a preventive measure, those with insect allergies have routinely received injections of whole body extracts to build up their tolerance to the antigens.

Body Extracts Now Used

This use of WBE has been questioned by some allergists who have insisted that the venom—the cause of the allergic reaction—should be used for immunotherapy rather than the insect’s whole body. They have been unable to identify sufficient quantities of this necessary immunizing material in WBE preparations.

For these reasons and because many examples of treatment failures with WBE had come to their attention, the Johns Hopkins scientists proposed to resolve the issue by comparing the efficacy of venoms versus WBE versus placebo in treating 59 patients with insect sting allergies.

The patients were matched by history of systemic reactions following an insect sting as well as by several laboratory tests indicating a sensitivity to the insect venoms.

One group of patients received injections of the venom from the insect to which they were allergic—either honeybee, yellow jacket, yellow hornet, or white-face hornet.

The venoms were supplied by Dr. Allen W. Benton of Pennsylvania State University and Charles Mraz of the Champlain Valley Apiaries.

Three Groups Studied

Another group of patients received injections of a solution containing whole body extracts from several of the stinging insects, while a third group received injections of a placebo—a solution of histamine which simulated the sensation in the injected skin site.

Only the physicians knew which treatment a patient received.

After 6 to 10 weeks of immunotherapy—or injections—patients were intentionally allowed to be stung in an intensive care setting by the insect to which they were most allergic.

Sting Challenge Used

After sting challenge, only one of 18 patients treated with venoms experienced a systemic reaction (which was mild), whereas 7 of 11 patients treated with WBE and 7 of 12 treated with placebo had systemic reactions; two patients experienced shock. Consequently, the investigators discontinued the sting challenge of the patients in the WBE and placebo groups.

However, the 14 “treatment failures” on WBE and placebo and the one on venom were treated subsequently with venom for 6 weeks and reached full dosage. When restung, only one of these patients had a systemic reaction—hives.

The patients in the WBE and placebo groups who had not previously been subjected to sting challenge were also treated with venoms and subsequently challenged without any serious reactions.

Of the 59 patients put on venom therapy, 58 completed the course of treatment. Forty-eight of these patients were challenged and experienced only minor reactions at the site of the sting.

In one instance, therapy was incomplete, and this patient cannot be regarded as a treatment success. Nine patients with negative challenge after WBE or placebo were not rechallenged.

The scientists believe this study provides evidence that insect venoms are safe and effective in preventing life-threatening allergic reactions to insect stings and should be used to treat the hundreds of thousands of patients currently at risk.

Venoms Hard To Obtain

NIAID-supported efforts are now underway to utilize recently developed methods for the collection of venoms heretofore very difficult to obtain in supplies sufficient to meet treatment needs.


I please all alike—those in high callings and those performing menial tasks. I affect everyone every day. Countless numbers know my value; none has condemned me. I am the world’s best lubricant. Who am I? I’M COURTESY.
Public Health Service Celebrates Its 180th Anniversary

HEW Secretary Joseph A. Califano, Jr., (r) spoke on Future Directions of PHS. He concluded by praising the many PHS Commissioned Officers who as researchers and technicians might earn greater financial reward in the private sector but continue to be dedicated to the work of PHS. Listening, 1 to r, are: Deputy Surgeon General John C. Greene; Assistant Secretary for Health and Surgeon General Julius B. Richmond and Dr. Donald S. Fredrickson, Assistant Surgeon General and NIH Director. Dr. Richmond also gave an illustrated lecture on Highlights of the 180 Years, beginning July 16, 1798, with the approval of an Act "for the relief of sick and disabled seamen." By 1861, 27 hospitals were being operated—at a cost of $41,030.32. Also present at the ceremony were all of the living former Surgeons General.

Hundreds of persons, many PHS Commissioned Officers in dress uniforms, attended the PHS 180th anniversary celebration in Masur Auditorium on July 26. Music provided by the U.S. Coast Guard Training Center Band, Cape May.

Deputy Surgeon General Greene, in today's dress uniform stands next to a display outside the NIH Library of uniforms, instruments, and documents illustrating the 180 years of PHS history.

Mary Calley (l), head of the Special Events Section in the Clinical Center Office of Clinical Reports and Inquiries since 1963, received a surprise, special award for outstanding service in arranging for many conferences, tours, and visits of dignitaries at NIH. Dr. Fredrickson (c) escorted her to the podium for the presentation by Deputy Surgeon General Greene (r) and Dr. Richmond.

N.J. included the first public performance of The USPHS March, specially commissioned for the occasion. Chief musician George King III received a commendation medal at the ceremony for composing the stirring march.