Conferees Submit Preliminary Health Research Principles

The National Conference on Health Research Principles held at NIH on Oct. 3 and 4 was attended by more than 700 representatives of professional societies, the public, Federal, and other advisors.

At the opening plenary sessions, HEW Secretary Joseph A. Califano, Jr., outlined the three-step process for formulating a health research plan.

"The process by which we arrive at any 5-year strategy is almost as important as the strategy itself... The principles should set out the fundamental tenets of our research strategy, identifying the most important scientific and ethical considerations on which a research strategy should be based, as well as identifying potential criteria for choosing among various research priorities...

"During 1979 we will attempt to spell out specific research goals based upon the principles finally adopted... By the fall of 1979 I have asked that a full-scale 5-year health research budget be developed, a budget that attempts to spell out by agency and by general type of research the funding targets for research for the fiscal years 1982 through 1987..."

"If we can do that, if you can help us do that, you will have made such a single contribution and signal achievement in terms of putting this research process on the highest plane we can put it on, on the most effective plane we can put it on."

Further introductory remarks were made by Dr. Donald S. Fredrickson, NIH Director and Conference Chairman, and by Dr. Julius Dyer (See Principles, Page 9)

Four From NIH Elected To Institute of Medicine

Four NIH scientists were among 39 new members recently elected to the Institute of Medicine, National Academy of Sciences, for 5-year terms beginning next Jan. 1.

Elected from NIH were:

Dr. David P. Rall, Director, National Institute of Environmental Health Sciences; Dr. Arthur C. Upton, Director, National Cancer Institute; Dr. Robert N. Butler, Director, National Institute on Aging; and Dr. Maxine F. Singer, head, Section on Nucleic Acid Enzymology, Division of Cancer Biology and Diagnosis, NCI.

New members to the Institute are elected by present active members from among candidates chosen for major contributions to health and medicine, or to such related fields as the social and behavioral sciences, law, administration, or engineering.

Drug Resistance Transferred Between Anaerobic Bacteria of Digestive Track

By Mary Donovan

An investigator, supported by the National Institute of Allergy and Infectious Diseases and his co-worker have identified a genetic marker for multiple antibiotic resistance in a strain of anaerobic bacteria—ones that do not require oxygen to grow—that commonly reside in the digestive tract. In addition, this resistance was transferred in the laboratory to another bacterial inhabitant of man—Escherichia coli—suggesting that this transfer occurs naturally.

The demonstration of transferable antibiotic resistance in these organisms is yet another example of bacterial populations responding to the widespread use of antibiotics. The development of antibiotic resistance is an elusive process, thought to result from genetic mutation occurring in bacterial chromosomes.

The spread of resistance among different types of bacteria, however, appears to depend upon circular pieces of DNA, called R (resistance) factors or R plasmids, that are usually transferred by a type of genetic exchange or mating known as conjugation.

Although the mechanisms involved are not completely understood, the spread of anti-

Dyer Lecture Tomorrow

Dr. Francis H. Ruddle will deliver the 26th R.E. Dyer Lecture tomorrow (Wednesday, Oct. 18) at 8:15 p.m. in the Masur Auditorium.

Dr. Ruddle, chairman and professor of biology and human genetics at Yale University, will discuss Gene Transfer in Mammalian Cells.
Workshop Explores Mediation Of Antibody Functions

Scientists from 13 countries will be meeting Oct. 25-27 to take part in a Workshop on Mediation of Efferent Functions by Antibodies in Bldg. 31, Conference Room 10.

The conference has been organized by Dr. Henry Metzger, chief, Section on Chemical Immunology, Section 10, and Dr. David Segal, senior investigator, Immunology Research Branch, NCI. Sponsors include NIADDK, NCIC, CDC, ROB/FDA, NCI, and the Fogarty International Center.

The workshop is designed to bring together scientists working directly on the relationships of antibody structure to antibody-mediated functions. The emphasis will be on studies which use largely biochemical and biophysical approaches to explore this area.

For further information, call Dr. Henry Metzger, 496-2912.

General Schedule Rates as of October 1978

A 5% percent increase is effective for the first complete pay period which begins after Oct. 1. At NIH this is from Oct. 1 through Oct. 21. NIH employees — except those in special categories — will receive the increase in their Oct. 31 paychecks.

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If you lose, or some one steals your envelopes, salary check, you might as well lose just a roll of $10, $20, $30 bills in currency. The chance of ever recovering it is remote.
If you lose, someone steals your unenveloped salary check, you can wait months for replacement. Why take the chance? THERE IS A BETTER WAY.

The U.S. Treasury Department offers Compostite Net Pay Procedure by which you can have your pay automatically deposited in your bank or Credit Union on payday whether you are at work or not.
Your Payroll Representative can furnish you with the appropriate S.S. 1181 to fill out or you can contact Disbursement Services Section, 496-1248, for further information.

There is a Better Way
**Dr. Hasenclever Dies; Eminent Mycologist**

Dr. Herbert F. Hasenclever, eminent mycologist at the National Institute of Allergy and Infectious Diseases until his recent retirement, died at his home in Corvallis, Mont., on Sept. 21.

During his outstanding career, Dr. Hasenclever conducted important research on such diseases as histoplasmosis, candidiasis, and cryptococcosis.

Dr. Hasenclever was born in Iowa and received his undergraduate training at Iowa Wesleyan College, obtaining his master's and doctorate in microbiology from the University of Iowa. Immediately after graduation he served as an instructor in bacteriology at the University of Iowa. He then served with the U.S. Marine Corps during World War II. He joined NIAID in 1957, serving with the Laboratory of Infectious Diseases. During 1965 and 1966, he was stationed at the Middle American Research Unit in the Panama Canal Zone. Returning to Bethesda, he became head of the Institute's Medical Mycology Section, Laboratory of Microbiology, until 1974, when he joined the staff of the Rocky Mountain Laboratory.

He was an active member of the American Society for Microbiology, serving in several capacities, including chairman of the Medical Mycology Section and as chairman of the Standards and Examination Committee, Public Health and Medical Mycology, American Board of Microbiology.

A Memorial Scholarship Fund has been established in Dr. Hasenclever's memory in Hamilton, Mont., to send deserving high school graduates to college.

**Consumer Specialists Offer Lectures for Employees On Variety of Subjects**

A Consumer Education Program, conducted by specialists from Federal, county, state, and private organizations, is being offered to NIH employees.

The program, sponsored by the Employee Relations and Recognition Branch, Division of Personnel Management, will consist of three morning lecture sessions (3 hours each). Sessions are scheduled for Tuesday, Nov. 7; Wednesday, Nov. 15; and Tuesday, Nov. 21, from 8:30 to 11:30 a.m. in Bldg. 1, Wilson Hall.

Subjects to be covered include: Tax Strategy; Energy Conservation in the Home; Investing in Stocks, Bonds, Real Estate; Housing in the Metropolitan Area; and Ways the Consumer Can Protect Himself from Unfair and Deceptive Practices.

A desk-to-desk personnel bulletin will be distributed on Thursday, Oct. 19. Employees who wish to attend the program may complete the form at the bottom of the bulletin and submit it to their supervisors by Thursday, Oct. 26.

For further information, call Employee Relations and Recognition Branch, 496-4973.

**Have You Had Your Blood Pressure Checked? Screening Continues**

Do you work for the National Institutes of Health? Then join the more than 2,900 NIH employees who have taken advantage of the free blood pressure checks offered by the Occupational Medicine Service.

Many of the employees who have had this easy health check appreciated not only the convenience of the building-by-building screening begun in May, but the opportunity to discuss their own blood pressure reading with a trained nurse.

As one employee commented, "I'm relieved to find out my blood pressure's O.K. But even if I had high blood pressure, it's better to find out now. Either way, you're really coming out ahead."

Blood pressure checks are now being offered to employees in Bldg. 10, 9 a.m. to 4:30 p.m. in the Masur Auditorium Lobby, through Oct. 27.

November screening plans will include Bldgs. 8, 7, 5, 9, 12 and 22. Look for the smiling face on posters and flyers in your building for specific times and places.

**Members Invited To Celebrate Credit Union Founding**

The NIH Federal Credit Union will celebrate International Credit Union Day this Thursday, Oct. 19, to commemorate the founding of the first Credit Union.

All Credit Union members are invited to celebrate this special occasion by visiting the cafeteria locations throughout the NIH Reservation and receive a free coffee mug, coffee, and a doughnut during the 9 to 10:30 a.m. coffee break.

A new booklet, Developmental Dyslexia and Related Reading Disorders, has been published by the National Institute of Child Health and Human Development.

Written by Dr. James K. Kavanagh and Dr. Grace Yeni-Komshian, the booklet describes present knowledge about dyslexia and possible directions for future research, and is directed towards an audience with some background in the fields of reading and disorders, including learning disability specialists, elementary school reading teachers, and guidance counselors.

Parents and pediatricians with a special interest in reading disorders may find it informative to read such a review of current knowledge about dyslexia.

Single copy free of the booklet—DHEW Publication No. (NIH) 78-92—may be obtained from the Office of Research Reporting, Bldg. 31, Room 2A-34, 9000 Rockville Pike, Bethesda, Md. 20014.
**Bacteria**

(Continued from Page 1)

Biotic resistance is known to occur in the human intestinal tract. R plasmids have been identified in the more well-known bacteria that inhabit this area, but, in the majority of intestinal tract bacteria—which survive only in a strictly anaerobic environment—R plasmids have not been well characterized. One explanation has been that anaerobic conditions provide a natural barrier against bacterial conjugation.

In previous studies these investigators were able to identify two plasmids in a strain of anaerobic bacteria—*Bacteroides ochraceus* 2228—known to be resistant to many antibiotics.

In the reported study, they set out to determine if these plasmids are R factors by attempting to transfer antibiotic resistance from the anaerobes to *E. coli* recipients. To do this, they prepared a "matting mix" of the two bacteria so that conjugation could take place, then examined the ability of the resulting "offspring" or transconjugants to grow in the presence of the antibiotic chloramphenicol.

Within 24 hours, *E. coli* chloramphenicol-resistant colonies were observed. Upon further analysis, these transconjugants were also found to be resistant to two other antibiotics, tetracycline and kanamycin, indicating that multiple antibiotic resistance had been transferred from *B. ochraceus* to *E. coli*.

The next step was to determine if the genetic basis for resistance transfer could be attributed to the two previously identified plasmids—designated pGD10 and pGD11.

This was done by examining the effect of the plasmids on three genetically identical descendants or "clones" of the *E. coli* transconjugants. Plasmids were extracted from clones of the *B. ochraceus* and inserted into three *E. coli* clones. One clone received only pGD10; whereas the other two clones received both plasmids.

The scientists discovered that the clone with only the larger plasmid displayed multiple resistance to chloramphenicol, tetracycline, and kanamycin; therefore, the genetic marker for the phenomenon could be assigned to pGD10. In addition, pGD10 appears to be self-transmissible, that is, easily transferred among genetically similar bacteria. The researchers were unable to assign any genetic markers to the other, smaller plasmid—pGD11.

Thus, they conclude that their results identify an R plasmid—pGD10—in *B. ochraceus* strain 2228 that determines multiple antibiotic resistance. In the laboratory, this R plasmid can be transferred to *E. coli*, including weakened *E. coli* K 12 strains, suggesting that this process may also occur in the natural habitat of these bacteria—the gastrointestinal tract of man and other mammals.

Whether or not these findings reflect conditions in the human intestinal tract is unknown, but they do raise possible areas of concern in treating illnesses caused by these and other anaerobic bacteria.

Advanced techniques in culturing and identification have revealed that anaerobes are involved in a significant number of human infections, and often respond poorly to antibiotics. Some scientists speculate that the presence of self-transmissible R plasmids may hasten the acquisition of resistance to these and other antibiotics among these bacteria.

Furthermore, in the digestive tract, strictly anaerobic bacteria, such as *B. ochraceus*, vastly outnumber other bacterial populations and thus may act as an extensive pool for the development of antibiotic resistant genes that could be transmitted to more common pathogens, such as Salmonella and Shigella.

The University of California, San Diego scientists—Donald G. Guiney, Jr., and Charles E. Davis—reported their study in the July 13, 1978 issue of *Nature*.

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**VISITING SCIENTISTS PROGRAM PARTICIPANTS**

**10/1—Dr. Ellen Andolf**, Sweden, Medical Neurology Branch. Sponsor: Dr. W. King Engel, NINCDS, Bg. 10, Rm. 10D18.

**10/1—Dr. Chang Yong Cha**, Korea, Laboratory of Oral Medicine. Sponsor: Dr. Ji-Won Yoon, NIDR, Bg. 30, Rm. 232.

**10/1—Dr. Takakazu Endo**, Japan, Laboratory of Molecular Biology. Sponsor: Dr. Ernst Freese, NINCDS, Bg. 36, Rm. 3D02.

**10/1—Dr. Simoy Goldstein**, Venezuela, Laboratory of Pathology. Sponsor: Dr. Alan Rabson, NCI, Bg. 10, Rm. 2N116.

**10/1—Dr. Pierre Mallorga**, France, Section on Biochemistry. Sponsor: Dr. John F. Talman, NIMH, Bg. 10, Rm. 2N315.

**10/1—Dr. Yoshio Tsukamoto**, Japan, Laboratory of Microbiology and Immunology. Sponsor: Dr. Sharon Wahl, NIDR, Bg. 30, Rm. 304.

**10/1—Dr. Brenda Wong Uratani**, Hong Kong, Laboratory of Molecular Biology.

Sponsor: Dr. Ernst Freese, NINCDS, Bg. 36, Rm. 3D02.

**10/1—Dr. Brendan Wong**, Hong Kong, Laboratory of Biophysics. Sponsor: Mr. Leonard Binstock, NINCDS, Bg. 36, Rm. 2A31.

**10/2—Dr. Alain Belcourt**, France, Laboratory of Biological Structure. Sponsor: Dr. John Termine, NIDR, Bg. 30, Rm. 216.

**10/2—Dr. Leonard Harrison**, Australia, Diabetes Branch. Sponsor: Dr. Jesse Roth, NIAMDD, Bg. 10, Rm. 8524.

**10/2—Dr. Irma Thesleff**, Finland, Laboratory of Developmental Biology and Anomalies. Sponsor: Dr. Robert Pratt, NIDR, Bg. 30, Rm. 405.

**10/3—Dr. Frank Sim**, Australia, Lab. of Developmental Biology and Anomalies. Sponsor: Dr. Robert Pratt, NIDR, Bg. 30, Rm. 405.

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**Consensus Exercise: Burn Care Therapy**

A consensus development exercise on Supportive Therapy in Burn Care will be held on Nov. 10 and 11.

The meeting, open to the public, is being sponsored by the NIH Committee on Medical Applications of Research and the National Institute of General Medical Sciences in cooperation with the American Burn Association.

Registration forms and agenda can be obtained by writing Supportive Therapy in Burn Care, Conference and Seminar Program Branch, Fogarty International Center, Bldg. 31, Room 2C-15, Bethesda, Md. 20014.
Dr. Leroy Duncan Retires; Expert In Research, Administration on Aging

Dr. Leroy E. Duncan, Jr., Special Projects Officer for the National Institute on Aging, retired Oct. 1 after 30 years of Federal service. The first person to assume the role of Special Projects Officer at NIA, Dr. Duncan was instrumental in stimulating interest and research in teaching geriatric medicine in American medical schools and the transfer of modern technology to the development of electronic and mechanical aids for the impaired elderly.

In the past year, Dr. Duncan devoted much time to the subject of the protection of elderly research subjects and served as co-chairman of the NIA Symposium on the Protection of Elderly Human Research Subjects.

Recent efforts involve efforts to develop a consensus statement for primary care physicians on the detection, diagnosis, and evaluation of treatable brain disorders that mimic senility in the elderly.

STEP Sets 1978-79 Schedule; Application Deadline Is Oct. 28

The Staff Training-Extramural Program Committee (STEP) is offering a number of sessions tailored to the interests of large section of the NIH staff in its Continuing Education Program for 1978-79. A brochure describing these activities has recently been widely distributed throughout NIH.

A new discussion series, the STEP forum, will include lectures and seminars on a variety of interesting and important contemporary issues. The forum will provide an opportunity for NIH staff members to explore issues ranging from topics of immediate operational importance to those that are of broad philosophical interest.

The first of these, The Bakke Decision: Impact on NIH Programs, held Sept. 21, was well attended. Future forum activities will be announced in The NIH Record and the NIH Calendar of Events on an approximate monthly schedule (except for December) through June 1979. The STEP forum is open to all NIH employees, and registration is not required for attendance. Credit for attendance at individual sessions may be obtained.


Applications for participation in these modules must be received by the Special Programs Office, Bldg. 1, Room 314, NIH, Oct. 28. Application Form NIH-2245 may be obtained from Bldg. 1, Room 314, NIH, or from the Special Programs Office.

Calendar of Events.

Applications for participation in these modules must be received by the Special Programs Office, Bldg. 1, Room 314, NIH, Oct. 28. Application Form NIH-2245 may be obtained from Bldg. 1, Room 314, NIH, or from the Special Programs Office.

A 1-day seminar on Behavioral Sciences in Health and Illness is also scheduled on May 9, 1979. Advance registration (Form NIH-2245) is required by Oct. 28. Credit will be offered for attendance.

Seminars on ethical questions associated with biomedical and behavioral research and service also will be offered throughout the year.

The next seminar in this series, entitled Interface of Fetal Research and Medical Ethics will be held Wednesday, Oct. 25, from 3 to 5 p.m., in the 14th floor auditorium of the Clinical Center. The speaker is Dr. Maurice J. Mahoney, associate professor of human genetics and pediatrics, Yale University School of Medicine.

The exhibit will be on display in the lobby of the National Library of Medicine until Jan. 27, 1979. The Library is open from 8:30 a.m. to 9 p.m., Monday through Friday, and 8:30 a.m. to 5 p.m., Saturday.

NLM Exhibit Honors William Harvey

In celebration of the 400th anniversary of William Harvey's birth in 1578 and the 350th anniversary of the publication of his discovery of the circulation of the blood, the National Library of Medicine is presenting an exhibit on his life and work. All books and pictures in the exhibit are from the Library's historical collection.

Featured is a copy of the first edition of Exercitatio anatomica de motu cordis et sanguinis in animalibus (Frankfurt, 1628) in which Harvey set forth the arguments in support of his discovery. Also shown are several of the other editions published during Harvey's lifetime and a number of translations in English and other languages.

Other books on display illustrate the gradual development of knowledge about the heart and the circulatory system from antiquity, including works by Ibn an-Nafis, Michael Servetus, and Reoldo Colombo, describing the pulmonary circulation and books by Hieronymus Fabricius and others on the valves in the veins.

Fabricius especially, who was Harvey's teacher at Padua, had an important influence on the English scientist.

Harvey's discovery was not universally accepted at first, and a number of contemporaries attacked his work. Others besides Harvey defended his views, however, and books from both sides of the controversy are also on display.

In addition, material relating to Harvey's interests as an active member of the Royal College of Physicians and to his other research on generation and muscular motion as well as a selection of portraits of Harvey and his friends are shown.

The exhibit will be on display in the lobby of the National Library of Medicine until Jan. 27, 1979. The Library is open from 8:30 a.m. to 9 p.m., Monday through Friday, and 8:30 a.m. to 5 p.m., Saturday.
Stroke Increasing in Developing Countries,
Attacking Younger Age Groups

Stroke, the third leading cause of death in the United States, is becoming increasingly prevalent in developing countries and is attacking ever younger age groups in those areas, according to Dr. Donald B. Tower, Director of the National Institute of Neurological and Communicative Disorders and Stroke.

Addressing the recent World Health Organization Symposium on World Neurology in Montreal, Dr. Tower reported that stroke, "probably the most devastating and disabling of all human disorders," is prevalent in every country, regardless of economic, ethnic, or cultural characteristics.

In India, stroke is a major problem in large cities like Bombay, Madras, and New Delhi, he said. He also cited reports that stroke has become the number one cause of death in the People's Republic of China.

Asian and Western Pacific regions, too, have seen a shift from infectious diseases to western-style chronic disease, notably stroke. Anecdotal evidence from Asia and Africa indicates that in developing countries the onset of the stroke-prone decades is shifting toward younger groups, aged 30 to 45 years.

Careful epidemiological studies are needed in developing countries to identify major risk factors and preventive measures, Dr. Tower noted. "It is particularly striking," he said, "that in countries like Nigeria and Senegal, hospital admission data documents high incidences of hypertension and stroke, but a very low incidence of myocardial infarctions. Moreover, hypercholesterolemia, which is an established risk factor for coronary artery disease and myocardial infarction in countries like the U.S. and Japan, poses little if any risk for stroke in these [developing] countries."

These observations, together with observed differences in the rate of decrease of stroke and heart disease mortality, indicate that cerebrovascular diseases are not simply extensions of cardiovascular diseases.

"The fact is that strokes are neurological disorders and neuroepidemiological problems," he pointed out. "This distinction is often misunderstood or overlooked in developed countries, but it has special significance for developing countries where there are few neurologists."

Dr. Tower reported that in the U.S. over the past 25 years stroke mortality has dropped by 42 percent. But, he warned, little is known about the quality of life for these additional survivors, since the majority of surviving stroke victims are severely disabled.

He told symposium participants that NINCDS has set up comprehensive community stroke centers to facilitate transfer of clinical research findings to community hospital settings and to ascertain the quality of stroke survivors' lives.

Dr. Resnik Retires
After 26 Years of Federal Service

Dr. Robert A. Resnik, chief of the Reports and Evaluation Branch, Division of Extramural Affairs, National Heart, Lung, and Blood Institute, recently retired after 26 years of Government service.

As branch chief, he designed and supervised fiscal and scientific information retrieval systems, conducting evaluation studies of NHLBI programs.

After 2 years as an NIH postdoctoral fellow at Northwestern University, Dr. Resnik joined the Section on Ophthalmology Chemistry of the then National Institute of Neurological Diseases and Blindness (1954). He left NIH in 1962 to join a private R&D firm as a senior scientist. In 1963, Dr. Resnik returned to NIH as a research chemist with the Laboratory of Physical Biology of the then National Institute of Arthritis and Metabolic Diseases.

In 1968, Dr. Resnik moved to the Division of Research Grants as chief of the Research Analysis and Evaluation Branch, then went to the National Eye Institute in 1971 as program planning officer, after which he joined NHLBI in 1973.

A native of N.Y.C., Dr. Resnik entered Purdue University in 1942 to major in civil engineering. From 1944 to 1946, while in the U.S. Army, he attended the University of Maine, and later received his B.S. and Ph.D. degrees from Purdue.

At a retirement party in his honor, NIH staff and friends presented Dr. Resnik with a set of bongo drums. An accomplished musician, he has played at numerous NIH special events. His retirement plans include continuing to play and study music and doing consulting work.

Biotechnology Resources Directory Revised

The directory describing the biotechnology resources of the Division of Research Resources has been completely revised and is available at no charge.

The 60-page booklet, titled Biotechnology Resources, A Research Resources Directory, Revised 1978, identifies 46 current DRR grantee facilities which may be used by biomedical researchers. These resources provide new technologies and processes for the conduct of biomedical research investigation throughout the nation.

Facilities supported by the Biotechnology Program include large-scale and mini-computer systems, biochemical and biophysical instruments—mass spectrometers, nuclear magnetic resonance spectrometers, electron spin resonance spectrometers—million-volt electron microscopes, electron microprobes, biomedical engineering technologies, and production of biochemical and cellular materials.

To guide prospective users in identifying potential sources of research assistance, the directory details the instruments, services, and current research applications at the individual resources. Complete names, addresses, and phone numbers of the principal investigators and user contact persons are also included.

A geographical index is provided, listing available resources by state, and within each state.

A single free copy may be secured by writing to the Research Resources Information Center, 1776 East Jefferson Street, Rockville, Md. 20852, or by request from the Office of Science and Health Reports, DRR, NIH, Bethesda, Md. 20014.

While at DRG, Dr. Resnik revised the NIH Central Scientific Classification Coding System, a part of the IMPAC computer system used for reporting information relating to all grant applications.

LFRA Has Special Sale

The LFRA Commissary Mart will have a special sale for NIH R&W members only, Thursday, Oct. 19 (rain date Oct. 20), from 5:30 to 8:30 p.m., in parking lot 41B. Food and related products can be purchased at wholesale cost plus 5 percent.

Bring a shopping cart, wagon, wheelbarrow(s) or some other means of transporting your selections. Checks in payment are preferred (two items of identification necessary). R&W membership cards are required for admission.

For further information, contact the R&W Activities Desk, 496-4600.
First Lady Visits Clinical Center Again

On a return visit to the Clinical Center, Sept. 27, First Lady Rosalynn Carter, accompanied by HEW Secretary Joseph A. Califano, Jr., visited National Institute of Mental Health laboratories and research units. Above, she is greeted by CC Director Dr. Mortimer Lipsett (r) and ADAMHA Administrator Dr. Gerald Klerman (second from r). Also accompanying Mrs. Carter on her tour, but not pictured, were the newly appointed NIMH Director Dr. Herbert Pardes and Dr. Thomas Bryant, chairman of the President's Commission on Mental Health. Among the scientists Mrs. Carter met was Nobelist Dr. Julius Axelrod, whose discoveries concerning neurotransmitters have provided insight into the actions of drugs in the brain that has led to improved treatment of specific mental disorders. Her tour also included a visit to a research unit on childhood mental illness where NIMH psychiatrist Dr. Judith Rapoport (standing) told her that scientists are investigating the genetics of depression through studies of hyperactive children and children of adult depressed patients.

Three Grants Awarded To Encourage Marine Biomedical Research in Environmental Area

The first three Marine/Freshwater Biomedical Center Core Grants have been awarded by the National Institute of Environmental Health Sciences. Recipients are: Oregon State University at Corvallis, University of Southern California at Los Angeles, and Duke University Marine Laboratory at Beaufort, N.C.

This program was initiated in response to a 1975 meeting on Marine Biomedical Research sponsored by NIEHS and the Smithsonian Institution Museum of Natural History. The meeting identified research needs in the environmental area, including exploration of the health effects from exposure to contaminated drinking water and foodstuffs, transport and alteration of pollutants, natural sources of toxicants, and waste disposal.

The grants are also a response to the growing interest in aquatic species as experimental subjects and as research subjects for understanding human disease processes.

NIEHS support for the centers will be in the form of core grants which provide for personnel, equipment, services, facilities, and program support.

“Our objective is to encourage marine/freshwater science centers to use part of their resources for research in environmental health sciences,” Dr. David P. Rall, NIEHS Director, said.

Though these are the first three centers, other applications are expected to be approved in the future. The Marine/Freshwater Biomedical Center at Oregon State University, under the direction of Dr. Lavern J. Weber, will utilize the trout rearing center at the University. Trout and English sole will be the laboratory animals used in this research.

The center at the University of Southern California at Los Angeles, under the direction of Dr. Don Walsh, will pursue research including work on the immunosuppressive effects of environmental pollutants, the malignant transformation of fish cells in culture, and various toxins in nerve tissue transmission using the nerve tissue of giant squid.

The center at Duke University Marine Laboratory, under the direction of Dr. Joseph Bonaventura, will investigate such areas as the use of larval forms of marine invertebrates in studies of birth defects and cell mutations resulting from exposure to toxic metals and behavioral toxicology related to exposure to environmental pollutants.
Scientists Study Western Pacific for Clues to ALS

The answer to amyotrophic lateral sclerosis may lie somewhere in the Western Pacific, according to Dr. D. Carleton Gajdusek, Nobel Laureate and chief of the Laboratory of Central Nervous System Studies, National Institute of Neurological and Communicative Disorders and Stroke.

"We're roaming the Pacific because an answer is here, if we're clever enough to find it," he told scientists meeting in Guam to discuss new research findings in ALS and Parkinson-dementia.

At the 2-day workshop sponsored by NINCDS last August, researchers exchanged new information about motor neuron disease in three high-incidence Pacific areas: Guam, the Kii Peninsula of Japan, and New Guinea. Among the assembled scientists were investigators who had personally studied ALS victims in at least one of these areas.

According to Dr. Thomas N. Chase, director of the NINCDS Intramural Research Program, the greatest challenge is determining whether the diseases identified in the three high-incidence areas are indeed the same illness.

Good clinical and neuropathologic evidence supports the similarity of Guam and Kii Peninsula ALS, but the status of the New Guinea disease remains uncertain until more clinical reports and initial neuropathologic observations become available.

"When you have a rare disease that is spread equally across a wide geographic area, it's hard to find a handle to the problem," Dr. Chase said. "If it can be shown that the diseases in these areas are similar, then we can undertake a search for common denominators."

A form of motor neuron disease believed to be identical to classic ALS has been studied extensively on Guam and other Mariana Islands since 1950. Early studies of the indigenous Chamorro population in these areas showed motor neuron disease to be about 100 times more prevalent than in the U.S. mainland. About 1 percent of adult Chamorros were affected at any given time, and adult Chamorro had about a 10 percent chance of dying from motor neuron disease.

Dr. Kwang-Ming Chen, director of the NINCDS Research Center on Guam, said the incidence of Guamanian motor neuron disease has been decreasing, especially among males and people living in the southern portion of the island where incidence rates used to be highest. A fair percentage of Guamanian patients now survive longer than 3 to 5 years, contrary to what is usually seen in the continental U.S.

Two ALS foci are present in the Kii Peninsula, a relatively isolated part of Honshu, Japan. One focus is in Kozanawa, where studies have revealed an incidence of 97 cases per 100,000 population; the other is in Hobara prefecture, where there are 194 cases per 100,000 population and considerable family clustering. However, these ratios are based on small patient samples.

The frequency of motor neuron disease is decreasing in the Kii Peninsula, with the disease now occurring in nearly equal numbers of men and women. Mortality appears to be declining as well.

This region has gradually become less isolated from the rest of Japan and is undergoing rapid transformation, with increases in socioeconomic status and improvements in diet, living standards, and transportation occurring rapidly in recent years.

A third focus of motor neuron disease was discovered in New Guinea by Dr. Gajdusek, who studied the area in 1962-63 and again in 1974-75. In his earlier study, he found 18 cases of motor neuron disease among approximately 5,000 inhabitants.

More recently, he observed 15 cases among an estimated population of 3,000 when the area of investigation was expanded to the contiguous population, bringing the total at risk population to about 10,000; he found another seven cases. Because of the relative inaccessibility of the region, Dr. Gajdusek is the only physician known to have examined these patients.

New Guinea also appears to be a focus: the incidence of ALS among Filipinos who have lived there for many years, often working on sugar plantations, is estimated to be about three times higher than in other ethnic groups.

A second disease, the Parkinson-dementia (PD) complex, is frequently associated with ALS among Chamorros and has also been observed in the Kii Peninsula. PD is characterized by progressive dementia, rigidity, and abnormally slow movements, and less commonly by resting tremor.

Dr. Gajdusek told workshop participants that in New Guinea he saw six patients with a new, unnamed disorder characterized by dementia, movement "as slow as sloths," and myoclonic jerks, but said he saw no patients with features of PD as described on Guam.

At autopsy, neurofibrillary tangles similar to those seen in Alzheimer's disease (presenile dementia) have been found in Guamanian ALS victims. These neurofibrillary tangles are the major pathological feature that distinguishes Guamanian ALS from the classic form of the disease found in the U.S.

Several participants suggested that aluminum may contribute to nerve cell damage in motor neuron disease. Animal studies have shown that neurofibrillary tangles can be induced by aluminum, but these appear to differ from tangles found in Guamanian patients.

On Guam, where the volcanic soil has generally low levels of calcium and magnesium, there is considerable aluminum and manganese. Limited autopsy studies of Guamanian ALS patients have revealed increased calcium and aluminum in the areas of neuronal degeneration.

Central nervous system tissues from Kii Peninsula ALS victims have also shown high concentrations of calcium, manganese, and aluminum. No autopsies have been done of patients in New Guinea, but workshop participants noted that the soil there is red because of bauxite, which is high in aluminum.

The aluminum traces on Guam and Kii are not the answer in themselves," Dr. Gajdusek said, "because aluminum can be found in almost every spot in the world."

Furthermore, Caucasians, spending only a short time in Guam have not developed ALS or PD, while some transient Filipinos and Chamorros with Caucasian ancestry have been affected.

"People who have been away from Guam for up to 30 years are now being found with the disease," Dr. Gajdusek pointed out, "that leads us to believe that the disease 'trigger' must have been started before they left the island."

Investigators are looking for a second-generation Guamanian who has never been to Guam but who has ALS. "If we could find someone like that, it would change everyone's thinking about a trace element," Dr. Gajdusek said.

The scientists considered whether ALS or PD might be of genetic origin. If genetic factors are important to either disorder, they do not operate through inheritance in the...
classic manner. It was suggested that multiple chromosomal locations may be involved, or that genes may merely predispose a patient to disease, with some other injury needed for pathological changes to occur.

Dr. Kiyotaro Kondo, department of neurology, Mie University, Japan, reported on two case-control studies carried out in Japan, both of which showed an association between motor neuron disease and a prior history of trauma. However, several other investigators noted that patients or their families may have selective recall of a past history of trauma.

Dr. Kondo also discussed a case-control study conducted in the U.S. based on 25 patients with motor neuron disease. The study revealed that a history of exposure to lead and mercury, participation in athletics, and consumption of large quantities of milk occurred more commonly in the patients than in two control groups.

A recent case-control study based on veterans of World War II who subsequently died of ALS revealed more trauma and surgical operations in the ALS patients than in a control group. Also, the ALS patients may have participated more than controls in certain forms of athletic activity.

Dr. Gajdusek said that a worthwhile initial step for investigators might be a careful synthesis of descriptive data. If ALS in Guam is the same as ALS in New Guinea, and is the same as ALS in the Kii Peninsula, then analysis of environmental, historical, and cultural characteristics in the three areas would allow investigators to rule in or rule out possible causes of disease.

Most workshop participants agreed that Guamanian and Kii ALS probably differs from sporadic ALS, so the relevance that findings in Guamanian and Kii patients may have to patients with classic ALS remains uncertain. But even if there are significant differences between these forms of the disease, studies of ALS in the Western Pacific hold the promise of leading investigators closer to finding the cause of classic ALS.

Principles

(Continued from Page 1)

Richmond, HEW Assistant Secretary for Health.

After the plenary session concluded, the meeting broke into five panels to consider: Fundamental Research; Clinical Applications and Health Services Research; Health Regulation and Promotion; Research Capability; and Unifying Concepts.

Over 200 witnesses gave testimony during the remaining morning and afternoon of the first day.

The panels then met in evening sessions, and on the morning of the second day.

At the plenary session held in the afternoon, the panel chairmen presented the proposed principles in preliminary form.

The public record for testimony concerning health research principles, in written form, will be open until Oct. 18. The proposed principles will be polished and refiled for subsequent consideration and criticism under a prior arrangement with the Institute of Medicine, National Academy of Sciences, before being put into final form.

Dr. David Beck Named To NIGMS Post

Dr. David P. Beck has been appointed health scientist administrator with assignments in both the Genetics Program and the Cellular and Molecular Basis of Disease Program of the National Institute of General Medical Sciences. Dr. Beck's responsibilities include managing and evaluating research grants and research training grants in the areas of genetics dealing with physical and organic chemistry of nucleic acids and molecular genetics. In the CMBD Program he will assess grants in the bioenergetics area.

Prior to his joining the NIGMS staff, Dr. Beck was an NIH grants associate for a year of training in health science administration with Dr. Fred Bergmann, director of the Genetics Program, NIGMS, as his preceptor.

A native of Wilmington, Del., Dr. Beck received his B.A. degree from Princeton University, and his Ph.D. in 1971 at Johns Hopkins University. He was a postdoctoral fellow at Harvard University until 1974, when he became a research associate with the Maryland Psychiatric Research Center in Baltimore. Dr. Beck came to NIH in 1977.

Financial Planning Seminar

Dr. Francis M. Simon, vice president, The Putnam Group, who holds the master of laws and juris doctor degrees, will conduct a special seminar on Estate and Financial Planning on Wednesday, Nov. 1, noon to 1 p.m. in Bldg 1, Wilson Hall, sponsored by the NIH Recreation & Welfare Association.

Dr. Simon, well known for his activities in the financial planning field, has appeared nationwide and abroad at numerous seminars and conventions.

In addition to having published many articles in trade and professional journals, Dr. Simon is the author of Short Term Shareholders and the Keough Act.

TRAINING TIPS

The Executive and Management Development Branch is sponsoring the following courses at NIH in November and December:

Supervisory

Alternative Management Approaches for the 80's Nov. 1-3

Introductory Orientation Nov. 8

Introduction to Supervision Dec. 4-8

Federal Budget Process Dec. 12-14

Management Forum

Management Forum Dec. 7

For further information concerning these courses call Sacelia Damuth, 486-6371.
Health’s Angels Hold Third Anniversary Run

Part of 205 starters in the 10-Mile Anniversary Run won by Peter Nye in 52:12. The NIH Jogging Club will continue to hold 1-mile fun runs and competitive runs on Wednesdays at 5:30 p.m. in front of Bldg. 1 until Nov. 1. For an application to join the Jogging Club, write to Craig Edelbrock, Bldg. 15K, or pick one up at the R&W Activities Desk in Bldg. 31, Room 1A-18.

Group To Study NIH Working Environment

The U.S. Civil Service Commission’s Organizational Psychology Section is conducting a 1-year study of the NIH working environment. This study—undertaken at the request of Dr. Thomas E. Malone, NIH Deputy Director—will delve into the area of employee dissatisfaction and conflict at NIH and approaches for dealing more effectively with such problems. Drs. Stanley Cohen and John Turney are the study’s principal investigators.

The panel was asked to design a study of the causes of employee dissatisfaction and conflict at NIH and approaches for dealing more effectively with such problems. The panel was led by Dr. Stanley Cohen, who is the study’s principal investigator, and Dr. John Turney, who is the co-principal investigator. The study was funded by the NIH and was completed in 1978. The study was published in the Journal of Applied Psychology in 1979.

Combined Federal Campaign Continues Through October

NIH’s 1978 Combined Federal Campaign, which began Oct. 4, continues through the month of October. This year’s campaign has three goals: to collect $277,195; to obtain 100 percent participation; and to obtain the goals in the shortest possible amount of time—hopefully the first day, Oct. 4.

The kickoff day has come and gone, and we did not achieve all of our goals. We did, however, have excellent results—one most notable accomplishment was that NIH collected $38,990 from 1,809 individuals. This was a network of more than 100 centers which specialize in the diagnosis and care of children with CF and other lung-damaging and digestive diseases.

It Is Wise To Know About Safety

"It will never happen to me." Maybe not. But it could happen to your child or parent or husband or wife—so it is wise to know about safety.

The Consumer Product Safety Commission has a new monthly newsletter called CPSC Memo that has articles about ways to protect yourself and your family, a list of product recalls, and news about safety problems. For a free sample copy of CPSC Memo, send a postcard to the Consumer Information Center, Dept. 705F, Pueblo, Colo. 81009.

The newsletter is a monthly, and your sample copy will give you information on how you can write for a free subscription. With your sample copy of CPSC Memo (free), you'll also receive a copy of the free Consumer Information Catalog. It lists more than 200 selected free or low-cost publications from the Federal Government. The Catalog is published quarterly by the Consumer Information Center of the General Services Administration.
Greek Government Awards Medals to NIH And Two NHLBI Physicians

In a recent ceremony at its embassy, the Government of Greece awarded the Golden Cross of the Order of the Phoenix to Dr. Andrew Morrow, chief of the Surgery Branch, and Dr. Stephen Epstein, chief of the Cardiology Branch, both of NHLBI. In addition, the Golden Medal of the Greek Red Cross, the highest medal given by the Greek Red Cross, was presented to NIH.

For nearly 2 decades, patients—mostly young children—have been traveling to NIH for surgical correction of congenital heart defects. An average of two patients a month arrives in the U.S. from Greece with a family member or relative. In the Clinical Center these young patients join those from other countries and from the U.S. for open-heart surgery that will enable them to lead normal lives.

"This is a very rewarding part of our work," Dr. Epstein said. "These children arrive here with congenital heart defects and can tolerate very little activity without turning blue. It's a good feeling to see them leave here pink and healthy and able to do the things that normal children do."

Many of the patients who arrive here have undergone considerable trouble and sacrifice to do so. NIH does not pay travel expenses, and the cost of the trip from overseas is overwhelming to many who would like to come. After that obstacle has been surmounted, however, others are encountered once the patient is in the U.S. The government does not pay living expenses for the patient's family or relatives. Also, many who arrive here do not speak English.

"The NIH program," Ambassador Menelas Alexandrakis lauded NIH, stating that "we are deeply indebted to the National Institutes of Health for their noble humanitarian efforts on behalf of our fellow countrymen." Dr. Thomas E. Malone, NIH Deputy Director, accepted the award on behalf of NIH.

"The NIH program," Ambassador Alexandrakis continued, "has been identified with Dr. Morrow and Dr. Epstein, two distinguished physicians who have shown special concern for each Greek patient they have treated. Dr. Morrow... has shown love and affection to the children and has been most considerate to the anxious patients. Dr. Stephen Epstein has always shown understanding and care in all the often delicate situations he has faced."

"Following the suggestion of the Greek Government, the President of the Republic has decided to bestow upon Dr. Morrow and Dr. Epstein, for their dedicated services, the Golden Cross of the Order of the Phoenix. It is with great pleasure that I present to Dr. Morrow and Dr. Epstein the insignias of this high distinction."

An additional medal, the Silver Medal of the Greek Red Cross, was awarded to the Philoptochos Society of St. George for its continuing aid to the patients and their families. Mrs. Peter Doyle, President of the Society, accepted the award.

Dr. Paul Kornblith Named Chief Of NINCDS Branch

Dr. Paul L. Kornblith has been appointed chief of the Surgical Neurology Branch, National Institute of Neurological and Communicative Disorders and Stroke.

Also joining the staff are Dr. Eugene A. Quindlen and Dr. Barry H. Smith, who will work with Dr. Kornblith to develop programs to investigate fundamental neurosurgical problems. Tissue culture studies of benign and malignant tumors of the nervous system, including pituitary tumors, will be a major part of the new team's efforts.

The biological behavior of tumor cells will be studied, as well as their ultrastructural, electrophysiological, biochemical, and immunological characteristics. New knowledge gained through these studies will be applied to the treatment of patients with brain tumors. The investigators also will study nerve regeneration in the hope of finding ways to promote recovery of lost nerve, brain, and spinal cord function.

In addition, the branch will launch a new training effort designed to make NIH a strong resource for encouraging young neurosurgeons and neuroscientists to pursue research goals.
NIEHS Establishes Center To Study
Health Effects of Fossil Fuels Use

The National Institute of Environmental
Health Sciences is providing funds for its
eighth Environmental Health Sciences Center
which will be established at the Massachu­
setts Institute of Technology.

Dr. David P. Rall, NIEHS Director, noted
that its research emphasis will be on health
effects of fossil fuels utilization.

"The health effects of fossil fuels utilization
is a timely subject in environmental health
sciences," Dr. Rall said. "The MIT center
offers high relevance, and their programs offer
a unique blend of combustion engineering,
analytical chemistry, and experimental biol­
ogy. Investigators Drs. Gerald Wogan and
Jean Louis who will head the center have
exceptional expertise in these areas."

The MIT Environmental Health Sciences
Center program will be aimed at developing
and refining information on which assess­
ments of the health consequences of the
combustion of fossil fuels may be based. A
variety of fuels will be burned under varying
conditions. Effluents will be collected and
tested for biological effects, and analysis of
fueling materials will be performed.

"It is expected that information developed
in these studies will permit the modification
of combustion processes in a manner that will
lessen or eliminate environmental hazards.

The total study requires an interdisciplinary
cooperative effort on the part of combustion
engineers, analytical chemists, and b i omed ica l
scientists, including toxicologists, biochemists,
microbiologists, immunologists, and experi­
mental oncologists.

‘Foods for Health,’
Pilot Consumer Education Program Launched

Beginning tomorrow (Wednesday, Oct. 18)
Giant Food, Inc.—with the cooperation of
the National Heart, Lung, and Blood In­
stitute—will launch “Foods for Health,” a
pilot nutrition education research program to
help consumers make informed decisions
at the supermarket.

As a part of the year-long pilot program,
shoppers at Giant supermarkets in the Wash­
ington, D.C. area, will be offered the most
current scientific information available on
the foods they eat and heart health.

Biweekly pamphlets called Eaters’ Almanac,
posters, and shelf signs will offer shoppers
information on different heart health issues,
such as cholesterol and heart disease, as
well as “heart healthy” food preparation tips
and recipes. Giant’s consumer radio spots
and newspaper advertisements will also carry
heart health messages.

Where scientific consensus is lacking on
heart nutrition, issues, the Almanac will
discuss what current evidence exists and what
questions remain unanswered so that the
consumers can decide which foods to buy.

As a part of NHLBI’s Congressional mandate
to translate heart research findings to the
public, NHLBI scientists will evaluate how
effectively heart nutrition information can be
communicated to consumers in the market­
place where food decisions are made. Results
of the pilot program and its education ma­
terials will be made available to the retail
food industry after the 1-year pilot period.

HOW MUCH DO YOU KNOW ABOUT THE FOOD YOU EAT AND HEART DISEASE? The quiz below
is from Eaters’ Almanac Number One. Answers may be found at bottom of page.

A Food and Health Quiz

FACT OR FICTION

1. Overweight is related to heart disease. ____________
2. You have to give up snacks to lose weight. ____________
3. You can eat bread and potatoes on a diet. ____________
4. A skinny child will be a skinny adult. ____________
5. Exercise makes you eat too much. ____________
6. Fats have almost twice as many calories as carbohydrates (sugars & starches) and protein. ____________
7. All fats affect your body the same way. ____________
8. Whole milk is better for you than skim milk. ____________
9. Americans eat too much protein. ____________
10. The fat in chicken is mainly in the skin. ____________
11. You should eat meat every day. ____________
12. Vegetarians can be just as healthy as people
who eat meat. ____________

Answers

Special Program
Marks NIAID
Anniversary

The National Institute of Allergy and In­
fected Diseases will celebrate its 30th
anniversary on Nov. 1. To commemorate the
event, a special program will be held for
all NIAID employees on Friday, Oct. 27, from
2 to 5 p.m. in the Masur Auditorium.

It will include two major addresses by
distinguished Institute alumni. Dr. Baruj
Benacerraf, formerly chief of the NIAID
Laboratory of Immunology, now professor of
pathology, Harvard Medical School, will
speak on immunology, and Dr. Sheldon Wolff,
formerly NIAID clinical director and presently
professor of medicine at Tufts Medical
School, will talk on infectious diseases.

Dr. Dorland J. Davis, former NIAID Direc­
tor, will also participate.

Immediately following the program,
refresher packets will be served for Institute staff
and guests in the Bldg. 10 cafeteria.

A formal dinner, held in Bethesda, Sept.
27, was sponsored by professional societies
representing allergists, microbiologists, para­
sitologists, and specialists in infectious
diseases in honor of the Institute’s 30 years
of support in these fields.

A special insert in the Oct. 31 issue of
The NIH Record will detail the history and
accomplishments as well as the future goals
of NIAID.

CFC

Pledge your fair share to the Combined Federal
Campaign to make our voluntary human care
system work.