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Dr. Mitchell Gail Wins Speigelman Gold Medal For Work in Statistics

Dr. Mitchell Gail of the National Cancer Institute Biometry Branch was recognized as one of the Nation's leading young health statisticians when he was awarded the American Public Health Association's Mortimer Speigelman Gold Medal.



Dr. Gail and I have great respect for all of them," said Dr. Gail when accepting the award at the recent APHA's annual meeting in New York City.

Dr. Gail, who has been with the Biometry Branch since 1972, has published more than 40 scientific articles. He is a 1968 graduate of Harvard School of Medicine, and received a Ph.D. degree in statistics from George Washington University in 1977.

Receives Other Awards

He has received many other awards, including a Public Health Service Commendation Medal and a Knox Fellowship for study at Cambridge.

Recently Dr. Gail published a description of
(See DR. GAIL, Page 10)

Dr. Earl R. Stadtman Awarded National Science Medal

Dr. Earl R. Stadtman, chief of the Laboratory of Biochemistry, National Heart, Lung, and Blood Institute, is one of 20 recipients of the National Medal of Science, the highest honor accorded U.S. scientists and engineers by the Federal Government. (A more detailed account will appear in the next issue of the 'Record'.)

Flexitime Approved for NIH

Flexible and compressed work schedules at NIH have been authorized by NIH Director Dr. Donald S. Fredrickson. Employees will be able to select and vary their starting, lunch, and quitting times within the limits established by NIH and B/I/D policy.

The NIH flexitime policy was developed as a result of experiments here and at other Federal agencies. In order for the program to work at NIH, arrival and departure preferences, rotation of schedules with co-workers, and coordination of attendance at meetings are essential.

B/I/D Will Make Decision

Where flexitime is desired each B/I/D Director will select a degree of flexibility for some or all of the B/I/D. The most structured degree of flexibility is flexitour. Under this model, the employee requests and the supervisor approves a starting time sometime between 7 and 9:30 a.m.

Upon approval, an employee may not

change his starting time until an open season is established by the B/I/D. An open season can occur once a month, once a quarter, or once a year.

Modified Flexitour Planned

Under modified flexitour, where there is no need for an open season, an employee still requests, and his supervisor approves, a starting time between 7-9:30 a.m. However, arrival time may be changed by mutual agreement of the employee and supervisor. Under this plan, employees may also be permitted 5 to 15 minutes leeway on assigned arrival time.

A third model, the gliding schedule, permits employees to select and vary their arrival time without supervisory approval, as long as it is between 7-9:30 a.m.

Another option, the use of credit hours, provides further flexibility. A supervisor may permit employees to work more than an 8-hour day, and use the additional hours as
(See FLEXITIME, Page 8)

Dr. Perry Named Director of National Center For Health Care Technology

Dr. Seymour Perry, NIH Associate Director for Medical Applications of Research, has been named Director for the National Center for Health Care Technology. He will continue to head the Office for Medical Applications of Research at NIH until a new Associate Director is chosen.

Dr. Perry has been with NIH since 1961, when he joined the Public Health Service as a senior investigator in the Medicine Branch of the National Cancer Institute, concentrating on research into tumor cell growth and cell kinetics, especially in leukemia.

The author or coauthor of more than 200 papers on a wide range of subjects, largely in tumor cell kinetics and cell metabolism, he has held a variety of posts in NCI, including chief of the Medicine Branch, associate director for Clinical Trials, and deputy director, Division of Cancer Treatment.

In 1974, Dr. Perry was named Special Assistant to the NIH Director, and assumed his present position in 1978. Since the creation of NCHCT in November 1978, he has

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Dr. Perry has participated in numerous special activities at NIH. As Special Assistant to the NIH Director, he served as chief liaison for NIH to the President's Biomedical Research Panel, chairman of the Clinical Trials Committee, and headed the Secretary's Task Force on the Compensation of Injured Research Subjects.

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NIH Record Office
Bldg. 31, Room 2B-03, Phone 496-2125

Editor
Frances W. Davis
Staff Writers
William B. Reinckens
Susan Johnson

Staff Correspondents
ADA, Judy Fouche; CC, Susan Gerhold; DCRT, Mary Hodges; DRG, Sue Meadows; DRR, Barbara Menick; DRS, Arthur F. Moore; FIC, Toby P. Levin; NCI, Dr. Robert M. Hadsell; NEI, Marsha Corbett; NHLBI, Bill Sanders; NIA, Ann Diefenbach; NIAID, Jeanne Winnick; NIAMDD, Linda Cross; NICHD, Pamela Driscoll; NIDR, Sally Wilberding; NIEHS, Hugh J. Lee; NIGMS, Wanda Wardell; NIMH, Betty Zubovic; NINCDS, Doris Parker; NLM, Roger L. Gilkeson.

1980 R&W Membership Drive Begins



NIH Director Dr. Donald S. Fredrickson (c) purchases his 1980 R&W membership card from R&W President Gerald Stiller (l), as Agnes Richardson, vice-president, and Franklin Jackson, second vice-president, look on. This year's dues will be increased to \$3 beginning Feb. 1. If you join before February, the cost of the membership is only \$2.

Volunteers Needed For New MHA Center

Volunteers are needed at Montgomery House, a new clubhouse center serving the needs of persons with chronic emotional problems who are seeking social and vocational rehabilitation.

Training Provided

Training for volunteers will be provided through the Volunteer Corps of the Mental Health Association of Montgomery County, with continuous in-service training provided by the Montgomery House staff.

Volunteers should be over 18 years of age, relate well to other people, and able to give 2 to 3 hours a week of their time.

To apply, call the Mental Health Association, 949-1255.

Blood Study Needs Volunteers With Sickle Cell Trait

Volunteers with the sickle trait are needed to donate blood for studies in which the effects of various agents on the aggregation of sickle hemoglobin are being investigated.

The donor should be a nonsmoker and in good health. One unit of blood will be collected from suitable donors and payment will be provided.

Please call Dr. Kenneth Luskey, 496-1163, to volunteer.

Benita Valente To Be Featured In FAES Concert January 13

The fourth concert of the FAES 1979-80 Chamber Music Series will present Benita Valente in a song recital with Cynthia Raim, pianist.

The concert will be held on Sunday, Jan. 13, at 4 p.m., in the Masur Auditorium.

Admission is by ticket only.

Filing Date Set For PACE Exam

There will be only one filing date for the 1980 Professional and Administrative Career Examination (PACE). It started Jan. 2 and will run to Feb. 15. Applicants who file during that period will be tested between Mar. 1 and Apr. 26.

PACE is the qualifying examination for a wide variety of entry level (GS 5 and 7) professional jobs in Federal agencies across the Nation. An estimated 135,000 persons took the examination during Fiscal 1978, with some 7,600 selected for jobs.

Additional information regarding PACE can be obtained by contacting any Federal Job Information Center, or by writing the U.S. Office of Personnel Management, Washington, D.C. 20415.

'Breast Cancer Digest' Available From NCI

A new book for health planners on breast cancer has been published by the National Cancer Institute. *The Breast Cancer Digest—A Guide to Progress in Medical Care, Emotional Support, Educational Programs, and Resources* is the first book for health planners to present a comprehensive review of all aspects of breast cancer.

The 165-page book contains information on the rates and risks of breast cancer; detection, diagnosis, and treatment; rehabilitation of the breast cancer patient; the psychological, social, and financial impact of the disease; information and education programs; and resources for information, medical care, and other support services.

Free copies of *The Breast Cancer Digest* are available from the NCI Office of Cancer Communications, Bldg. 31, Rm. 4B-39, 496-6793.

Rep. Mitchell, Yolanda King To Take Part in Program Honoring Martin Luther King

The theme of NIH's second Dr. Martin Luther King, Jr., Commemorative Program on Wednesday, Jan. 16, at noon in the Masur Auditorium is "If I Can Help Somebody."

The theme is taken from Dr. King's last speech in Memphis, Tenn., just before his assassination.

The featured speaker will be Congressman Parren J. Mitchell (Md.), who will be introduced by Yolanda King, Dr. King's daughter.



Rep. Mitchell

Ms. King

A presentation in song and dance of Dr. King's civil rights objectives will also be a part of the noonday program.

Arrangements have been made for an interpreter for the hearing impaired.

All Employees Invited

Also, all employees are invited on Jan. 16 from 7:30 to 9 a.m. to a continental breakfast in the Bldg. 31 cafeteria.

The NIH Black Cultural Committee plans and implements the Martin Luther King, Jr., Commemorative Program as well as the Black History Observance Program at NIH. Employees wishing to participate in the organization of these programs should contact Levon O. Parker, 496-5332.

Schedule for Buying Parking Permits Has Been Changed

The schedule for purchasing parking permits at NIH has been changed, effective Jan. 1. The new schedule is:

Bldg. 38—Corridor by Special Police, Fridays, 9 a.m.-noon.

Westwood Bldg.—Rm. 428, third and fourth Thursdays of the month, 9:30 a.m.-noon and 1-3 p.m.

Landow Bldg.—Rm. D, third Thursday of the month, 9-10:30 a.m.

Federal Bldg.—Rm. 6C-01, third Thursday of the month, 11 a.m.-12:30 p.m.

Blair Bldg.—Rm. 110, fourth Thursday of the month, 9:30 a.m.-12:30 p.m.

The schedule for Bldgs. 31 and 10 is unchanged:

Bldg. 31—Rm. B1C-11 (Parking Office), 5 days a week, 9 a.m.-noon and 1-3 p.m.

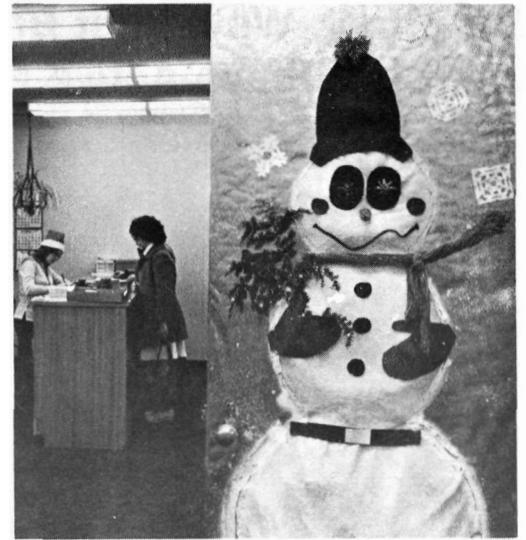
Bldg. 10—Masur Auditorium lobby; Mondays, Tuesdays, Wednesdays; 10 a.m.-2 p.m.

Each employee is allowed 4 days' free parking per month. Temporary permits for

this purpose are available where permits are sold. They are now also available at the following locations: Bldg. 38, Special Police; Parking Lot 10-C, police booth; Bldg. 10 entrance, police booth; Blair Bldg., Hugh Mahanes, Rm. 726 and Bill New, Rm. 501; Landow Bldg., Colleen Sherwood, Rm. 4C-03; Federal Bldg., Chris Leves, Rm. 704; and Westwood Bldg., John Wassell, Rm. 457.

It is no longer necessary for each employee to appear in person to purchase a permit. Employees can now register their co-workers, as long as they have the other person's NIH ID card, signed check, and a completed permit application form.

Employees are reminded that to purchase a permit for an upcoming month or months before the 21st of the current month, they must either show their receipt for the current month or pay for it. This procedure is not followed for permits purchased on or after the 21st.



Permits can be purchased at the Parking Office in Bldg. 31 five days a week.

Applications for 1980 Stride Program Accepted From Jan. 14 to Feb. 8

Up to 18 training positions are expected for the 1980 Stride Program starting Jan. 14. Participants will receive on-the-job training and related academic course work to qualify for placement in professional positions.

Employees should consult the NIH Merit Promotion Plan Vacancy Listing about specific positions, eligibility requirements, application procedures, etc. Applications will be accepted for a 3-week period ending Feb. 4.

As noted in *The NIH Record* (Nov. 13, 1979), employees who anticipate applying for one or more positions should obtain up-to-date transcripts of completed college-level course work. Unofficial (student) copies are acceptable.

Applicants who do not have college credits should obtain a copy of their high school transcript or GED Certificate. If unable to obtain a transcript, they should submit a completed OPM Form 1170, *List of College Courses and Certificate of Scholastic Achievement* (formerly called CSC Form 226). These are available in the Personnel Staffing Branch, Bldg. 31, Rm. B3C-15. Employees who do not submit a transcript or Form 1170 will be ineligible to compete for a position.

Other requirements are:

- Being employed in a career or career-conditional position at NIH for at least 1 year immediately prior to Feb. 4, 1980;
- Being in a nonprofessional position (one grade promotions);

- Working full-time or willing to accept a full-time position;
- Having a high school diploma or GED Certificate and less than a bachelor's degree;
- Being in grades GS 4 through GS 9 or their wage grade equivalents. (Note: those applicants at grades GS 9, 8, and in some cases 7, must accept a downgrade to the highest grade level announced for a position if selected, but may be eligible for salary retention benefits for a 2-year period.)

For information concerning a specific position or positions to which they may wish to apply, applicants should call the personnel representative shown in the Vacancy Listing. For more general information on the Stride Program, they should call the Career Development Branch, 496-6211, and request a copy of the Stride Program Information Sheet. Also, they should plan to attend one of the following information sessions:

Friday, Jan. 18, Bldg. 31, Conf. Rm. 8, noon to 1 p.m.

Thursday, Jan. 24, Bldg. 31, Conf. Rm. 8, noon to 1 p.m.

Monday, Jan. 28, Bldg. 31, Conf. Rm. 8, 5 to 6 p.m.

It is expected that the interns will be selected by late spring and be reassigned about June to positions where they will receive on-the-job training on a full-time basis until they begin classes at American University in September.

NIH Retirees Meet To Start New Club, Plan Activities

The first organizational meeting of the R&W Association Retiree's Club took place in the Masur Auditorium on Dec. 7. The event attracted 50 NIH retirees, who came to discuss topics of mutual interest and to lay the groundwork for the new club's organization.

Among the topics discussed were an

annual retirees' dinner and dance, theater parties, day trips to Hausner's in Baltimore, a winery tour, and an embassy tour.

If you are retired, are planning retirement, or have retired friends who would be interested in the club's activities, call June Jontiff, 496-6061.

'Operation Clean-up' Starts at NIH

NIH is conducting its 14th annual "Operation Clean-up" this month to effect economies by utilizing idle equipment and supplies in all administrative, service, and scientific areas.

As a result of last year's campaign, 288 line items of equipment—valued at \$328,713—were transferred to the Property Utilization Warehouse for reissue to other NIH areas.

As in past years, NIH units should organize internal "walk-thru" teams to survey each program area in order to identify equipment which can be made available for redistribution on a cost-free basis.

It is suggested that special attention be given to cluttered hallways and storage areas in the interest of safety, fire hazard prevention, and general appearance.

B/I/D property representatives will visit off-the-reservation buildings the week of Jan. 21, and "on campus" buildings the week of Jan. 28. They will notify areas of specific dates.

The Scientific Equipment Rental Program, initiated by the Biomedical Engineering and Instrumentation Branch, Division of Research Services, has numerous requests for equipment. Concurrent with the "walk-thru," it would be appreciated if seldom-used expensive research equipment were transferred to the loan pool for redistribution.

For further information, call Herbert Horrell, 496-4131.

Tickets to 'West Side Story' Available From R&W

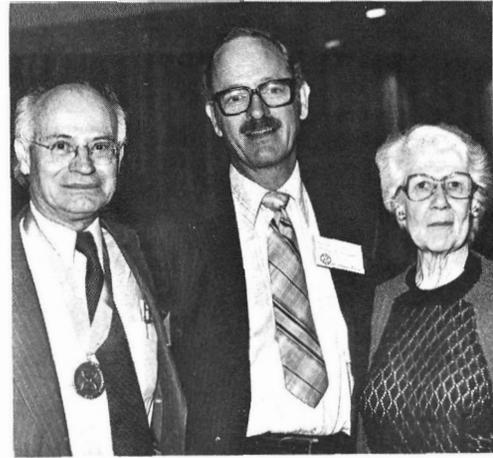
R&W is offering tickets to Arthur Laurent's "West Side Story" at the Kennedy Center Opera House. The new production will feature fresh young talent in a uniquely blended story, with music, lyrics, and dancing.

Orchestra seating is being held for NIH'ers on Thursday, Jan. 17, at \$16.50 per ticket. The performance begins at 8 p.m.

Order tickets now at the R&W Activities Desk, Bldg. 31, Rm. 1A-18.

GERONTOLOGICAL SOCIETY MEETS

Dr. Shock Wins First Brookdale Award; NIA Staff Plays Active Role at Meeting



Dr. Shock (1) displays the medallion symbolic of the first Brookdale Award for Biological and Clinical Research in Gerontology. With him are his wife, Margaret, and Dr. Richard Greulich, NIA scientific director and Director of the Institute's Gerontology Research Center.

Several National Institute on Aging staff members were honored during the recent Gerontological Society meeting in Washington, D.C.

NIH scientist emeritus Dr. Nathan W. Shock won the first \$20,000 Brookdale Award for Clinical and Biological Research in Aging. Dr. Shock, a former NIA scientific director, was Director of the Gerontology Research Center prior to his retirement in 1977.

Dr. Reubin Andres, NIA clinical director and chief of the center's Clinical Physiology Branch, became president-elect of the Society. He will take office at the 1980 annual meeting in San Diego, Calif.

Dr. Robert N. Butler, NIA Director, delivered the Kent Memorial Lecture on The Alliance of Advocacy with Science. He appealed to advocates and scientists to work together or both will suffer in the "politics

of austerity" atmosphere being experienced today.

"I believe that there is a greater need now than ever for those who have been advocates on behalf of the elderly to be advocates for science in general, and the new science of gerontology in particular," said Dr. Butler.

Thirteen Institute staff delivered papers during the meeting. Drs. Paul T. Costa, Jr., and Robert R. McCrae of the GRC Section on Stress and Coping presented work showing there is no evidence that health complaints are disproportionate among older adults.

Their results refute the common belief that older people worry and complain excessively about their health. Drs. Costa and McCrae analyzed self reports of health made by 1,024 male subjects in the Baltimore Longitudinal Study of Aging, who ranged in age from 17 to 97 years. While the men did report more sensory, cardiovascular, or genitourinary problems with increasing age, this was not surprising since these systems are known to become more susceptible to disease and decline with aging.

More importantly, they reported no increase in fatigue or frequency of illness as the years went by.

Another GRC investigator, Dr. Charles L. Goodrick, Laboratory of Behavioral Sciences, reported on the experimental prolongation of rat life-span through exercise and periodic fasting.

Wistar rats fed every other day lived about 40 percent longer than animals fed *ad libitum*. For animals fed *ad libitum*, there was a positive effect on life-span for those rats allowed voluntary wheel exercise when compared to non-exercised animals. On the other hand, exercise did not further increase the life-spans of animals fed every other day beyond the gains seen with periodic fasting.

Learn To Control Stress in R&W Course

Faced by challenges at work or home? Want to accomplish more and feel better? Want to have more control over your reactions to everyday harassments?

Enroll in the R&W-sponsored course, Stress Management—An Introduction, being offered at the Clinical Center beginning Tuesday, Jan. 22.

The course, which will be held on six consecutive Tuesdays, is being offered at two times: 11:30 a.m.-12:20 p.m. and 12:30-1:20 p.m. Anita King, a psychotherapist with 15 years' clinical experience, will teach both sessions.

The course will introduce a variety of powerful, yet simple, stress management methods such as muscle relaxation, controlled breathing, meditation, goal setting, and time management. Each method will be discussed and practiced in class. Emphasis will be placed on using the techniques at work and home to improve the student's performance,

sense of well-being, and general health.

The instructor invites anyone wishing to know more about the course before enrolling to visit the first class. Subsequent classes will, however, be limited to the first 25 enrollees. The cost is \$35. Sign up now at the R&W Activities Desk in Bldg. 31, and learn to relax.

How Does Your Herb Garden Grow?

What could be better than the smell of your favorite dish cooking—seasoned with herbs from your own garden?

Herbs can be grown indoors in boxes, pots, or hanging baskets, using good soil, drainage, and lots of sun. They should be picked just before the flowers are fully open and may be dried or frozen for future use.

To get a copy of the free pamphlet *Herbs*, write the Consumer Information Center, Dept. 621G, Pueblo, Colo. 81009.

New Surgical Department Gets First Director

The Clinical Center recently opened a new department—the Surgical Services Department—to coordinate and manage all of the various Institute surgical units and provide necessary personnel, space, equipment, and supplies.

Miguel Jaureguizar is in charge of the new department. He is from Georgetown University Medical Center, where he spent 5 years as operating room manager, and 7 years as director of support services.

He will be responsible for three sections within the department: the surgical nursing service, which is made up of operating room nurses; the surgical support section, which consists of health technicians, unit clerks, housekeeping staff, secretaries, and ECC technicians; and the anesthesia support section, which comprises anesthesia technicians.

The department is responsible for operating rooms on three floors of the CC surgical wing. Six of these rooms are on the 10th floor and are used for cancer and eye surgery, heart and general surgery are performed on the 2nd floor, and neurosurgery and orthopedic cases are handled in suites on the 4th floor.



Mr. Jaureguizar will direct the work of a variety of operating room specialists.

Sailing Club Elects Officers, Plans Program for 1980

Joan Beerweiler has been elected commodore of the NIH Sailing Club for next year. Vice-commodore is Wendy Aaronson (in charge of on-board training). Other officers are fleet captain, Richard Morris; rear commodore, Ruth Lee (social chairman); treasurer, Joan Lunney; and secretary, Mimi Henry.

Committee chairmen appointed are Warren Rumble, Cruising; former Commodore Barb Williams, Advanced Training; and Alison Skeel, Programs.

Meetings Are Open

The Sailing Club meets on the last Thursday evening of each month at 8, in Bldg. 30, Rm. 117. Their Jan. 31 program will feature two short sailing films and a description by the various chairmen of the club's activities. Refreshments will be served, and everyone is welcome.

Use of Artificial Sweeteners Does Not Increase Cancer Risk But NCI Study Indicates They May Be Hazardous

The preliminary findings of a National Cancer Institute study that examined the relationship between the use of artificial sweeteners and the incidence of bladder cancer in humans show that there was no increased risk of cancer among users of the sweeteners in the overall study population.

The \$1.5 million epidemiological study did produce some evidence, however, that sweeteners such as saccharin and cyclamate may be hazardous. That evidence came from observations of three groups.

Evidence Comes From 3 Groups

- Among heavy users of artificial sweeteners, those who consumed both diet beverages and sugar substitutes showed a 60 percent increased risk of bladder cancer. Heavy use was defined as six or more servings a day of a sugar substitute or two or more 8-ounce diet beverages a day.

- People who smoked cigarettes heavily and who also made heavy use of artificial sweeteners showed a higher risk of bladder cancer than heavy smokers who did not use artificial sweeteners. The investigators have not defined the specific magnitude of that increased risk. Heavy cigarette smoking was defined as more than two packs a day for men and more than one pack a day for women.

- Those women who normally would be at low risk for bladder cancer, but who consumed sugar substitutes or diet beverages twice or more a day, had a 60 percent greater risk of bladder cancer than similar women who never used artificial sweeteners. The risk increased with the amount of artificial sweeteners used. Based on these data, the authors of the study estimated that

low-risk women who never used artificial sweeteners had an estimated yearly rate of about five cases of bladder cancer per 100,000, while similar women who consumed sugar substitutes or diet beverages twice a day or more had an estimated yearly rate of an additional three cases per 100,000.

The authors concluded that while saccharin and cyclamate are not strong carcinogens, they should be regarded as potential risk factors for human bladder cancer, based on the results of this study and previous experiments in laboratory animals. The authors also said that saccharin and cyclamate may enhance the cancer-causing effects of heavy cigarette smoking.

One purpose of the NCI study was to examine the conclusions of previous, smaller studies that found a 60 percent increased risk of bladder cancer among men who consumed sugar substitutes. The NCI study did not confirm the 60 percent rate. The investigators said that any increased risk of bladder cancer to males in the NCI study from average use of sugar substitutes would not exceed 18 percent.

Further Analysis Is Needed

The authors cautioned that further analysis of the preliminary data will be needed to separate with precision the effects of saccharin and cyclamate. Cyclamate was the predominant artificial sweetener used during the 1960's; after FDA banned its use in 1970, saccharin became the only artificial sweetener available in the United States. They also noted that the study could not assess the effects of consuming artificial sweeteners during pregnancy or in early childhood.

The NCI study was conducted under an

interagency agreement with the Food and Drug Administration.

"I reiterate my concern about the consumption by so many Americans, especially young people, of large amounts of saccharin," said Dr. Jere E. Goyan, Commissioner of Food and Drugs, when the study was released.

"More than half the subjects in this study were 67 years old or older, and therefore consumed much less artificial sweeteners than their children and grandchildren are today," he said. "We may have to wait 20 or 30 years to assess the possible effects on our young people of consuming large amounts of a weak carcinogen."

Study Largest of Its Type

NCI's study, the largest of its type ever conducted, was based on interviews with more than 3,000 bladder cancer patients and almost 6,000 persons who did not have cancer. Three out of every four persons studied were male.

Bladder cancer is the sixth most common form of cancer in the U.S. It is three times more common in men than in women, usually occurs in older age groups, and is more common among cigarette smokers and workers exposed to certain chemicals on the job.

Principal authors of the NCI study were Dr. Robert N. Hoover and Patricia H. Strasser, Environmental Epidemiology Branch. Copies of the *Progress Report to the Food and Drug Administration From the National Cancer Institute Concerning the National Bladder Cancer Study* are available from the Office of Cancer Communications, Bldg. 31, Rm. 10A-21.



Westwood Bldg. employees wave U.S. flags to show their support for the American hostages held in Iran while they sing Christmas carols in the lobby on the last day of work before Christmas. The small hand-held flags are part of 1,000 flags that were distributed throughout the building by the Westwood Employees Committee on Problem Solving. "The flags will stay up until the hostages come home," says Donna Huber, WECOPS organizer.

Winter Judo Classes Begin Tonight

The NIH Judo Club is accepting applications for the winter beginner's class. This series of 12 classes in basic judo will be held each Tuesday, from 6 to 7:30 p.m., beginning Jan. 8 and ending Mar. 25.

Classes will be held in the old gymnasium of Stone Ridge School, at the corner of Cedar Lane and Wisconsin Avenue.

Dr. Thomas E. Malone, NIH Deputy Director, will serve as chief instructor, or Sensei. He holds the second degree Black Belt (Nidan), and has had extensive experience as a judo instructor.

The club will emphasize Kodokan Judo and will include judo exercises, methods of breaking falls, and selected throwing and grappling forms. Members who complete this course will be eligible to continue in advanced courses and be considered for promotion.

The fee for the 12 sessions is \$25. Application forms can be obtained from the R&W Activities Office, Bldg. 31, Rm. 1A-18, or from Dr. Malone, Bldg. 1, Rm. 132.

For further information, call Randy Schools, NIH R&W Association, 496-6061.

NIH Combined Federal Campaign Results for 1980 Drive Released

The \$205,618.41 raised by NIH for the 1980 Combined Federal Campaign will help a lot of needy people in the coming year.

Many NIH employees, serving as key-workers, coordinators, or chairpersons, worked hard to reach that figure, and they deserve recognition for their efforts, according to Lanny Newman, campaign coordinator.

He said that special thanks should be directed to all of the NIH'ers who contributed or pledged their dollars at a time when unusual financial demands are being placed on all capital area Federal workers.

When confidential gifts are counted, it is estimated that NIH will achieve approximately 80% of its goal.

The National Institute of Environmental Health Sciences, which participates as part of the Research Triangle Park, N.C., Federal Campaign, reached 109% of its dollar goal, or \$12,449.25, and achieved 58% participation. NIEHS led all other Federal agencies in the Research Triangle Park CFC drive in percentage of goal achieved.

NIH CFC Contributions for 1980 (Final)

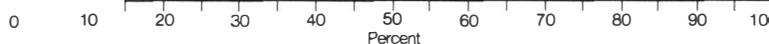
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|-------------|--------------|---------------------|
| FIC | \$1,972 | (Goal \$1,068) |
| NIA | 2,306 | (Goal 1,595) |
| DRG | 11,473 | (Goal 8,678) |
| NIGMS | 4,268 | (Goal 3,738) |
| NLM | 12,942 | (Goal 11,641) |
| OA/OD | 33,473 | (Goal 33,028) |
| NIAID | 13,367 | (Goal 14,498) |
| DCRT | 5,629 | (Goal 6,595) |
| NIDR | 8,928 | (Goal 8,197) |
| NICHD | 8,618 | (Goal 10,333) |
| NINCDS | 11,866 | (Goal 14,338) |
| DRR | 2,422 | (Goal 3,033) |
| NHLBI | 15,451 | (Goal 20,612) |
| NIAMDD | 11,960 | (Goal 17,408) |
| NEI | 2,878 | (Goal 4,219) |
| DRS | 7,158 | (Goal 11,481) |
| NCI | 33,732 | (Goal 55,055) |
| CC | 19,172 | (Goal 32,066) |



NIH CFC Total Gifts for 1980

(Percentage of Employees*)

| | | |
|--------|-------|--------------|
| DRR | 61 | (Goal 86) |
| FIC | 37 | (Goal 54) |
| NIA | 52 | (Goal 78) |
| NIAID | 336 | (Goal 503) |
| CC | 1,021 | (Goal 1,974) |
| DRG | 216 | (Goal 419) |
| OA/OD | 947 | (Goal 1,858) |
| NIGMS | 70 | (Goal 173) |
| NLM | 222 | (Goal 563) |
| NINCDS | 254 | (Goal 670) |
| DRS | 215 | (Goal 632) |
| NIDR | 97 | (Goal 342) |
| NEI | 51 | (Goal 183) |
| NICHD | 130 | (Goal 472) |
| NHLBI | 217 | (Goal 907) |
| DCRT | 66 | (Goal 280) |
| NCI | 531 | (Goal 2,435) |
| NIAMDD | 118 | (Goal 704) |



* NIH full time and temporary staff as of September 1979

DR. PERRY

(Continued from Page 1)

served as its Acting Director.

As Director of the center, Dr. Perry will work closely with the consensus development program at NIH—an effort he has headed as Director of the Office for Medical Applications of Research.

Generally, OMAR focuses on the technical aspects of a technology assessment, while NCHCT, which is in the Office of the Assistant Secretary of Health, HEW, is responsible for comprehensive assessments which include economic, social, and other impacts.

Aids Consensus Development

In bearing the major responsibility for the consensus development program since its creation in September 1977, Dr. Perry and his office have aided the Institutes in the planning, operation, and followup for some two dozen conferences. The subjects have ranged from treatment of primary breast cancer to removal of third molars.

The National Center for Health Care Technology conducts or sponsors evaluations of high priority technologies and coordinates health care technology assessment activities of the Department, sets priorities for assessment, provides advice on the appropriate use of new and existing technologies, supports technology assessment research and syntheses, and serves as a focal point within HEW for technology-related issues.

The results of these evaluations are provided to the practicing and academic health care communities, consumers, and Federal agencies who might be able to

VISITING SCIENTIST PROGRAM PARTICIPANTS

11/30—**Dr. Lev Jacobson**, Israel, Developmental Pharmacology Branch. Sponsor: Dr. Jack Cohen, NICHD, Bg. 2, Rm. B208.

12/1—**Dr. Chandralekha Chatterjee**, India, Laboratory of Chemistry. Sponsor: Dr. Herman Yeh, NIAMDD, Bg. 4, Rm. B233.

12/1—**Dr. Ib Oddershede**, Denmark, Laboratory of Clinical Sciences. Sponsor: Dr. Irwin Kopin, NIMH, Bg. 10, Rm. 2D46.

12/1—**Dr. Kazuma Tsuruta**, Japan, Experimental Therapeutics Branch. Sponsor: Dr. D. B. Calne, NINCDS, Bg. 10, Rm. 6D20.

12/1—**Dr. Froylan Vargas**, Mexico, Laboratory of Preclinical Pharmacology. Sponsor: Dr. Erminio Costa, NIMH, St. Elizabeths Hospital.

12/1—**Dr. Robert Zawydiwski**, Canada, Laboratory of Biochemistry. Sponsor: Dr. E. Brad Thompson, NCI, Bg. 37, Rm. 4C13.

12/2—**Dr. Maria Isabel Garcia-Hidalgo**, Mexico. Sponsor: Dr. Arnold Pratt, DCRT, Bg. 12A, Rm. 3043.

12/2—**Dr. Arie Moran**, Israel, Laboratory of Kidney and Electrolyte Metabolism. Sponsor:

Dr. Joseph Handler, NHLBI, Bg. 10, Rm. 6N311.

12/7—**Dr. Nagarajan Lalitha**, India, Laboratory of Pathophysiology. Sponsor: Dr. Wayne Anderson, NCI, Bg. 37, Rm. 4E12.

12/10—**Dr. Kamal Halim**, United Kingdom, Division of Blood and Blood Products. Sponsor: Dr. Kamal Mittal, BOB, Bg. 29, Rm. 232.

12/10—**Dr. Ian A. Simpson**, United Kingdom, Epidemiology and Field Studies Branch. Sponsor: Dr. Samuel Cushman, NIAMDD, Danac 4 Bg., Rm. 7.

12/12—**Dr. Peter Molnar**, Hungary, Laboratory of Chemical Pharmacology. Sponsor: Dr. Joseph Fenstermacher, NCI, Bg. 37, Rm. 5C23.

12/16—**Dr. Eduardo Charreau**, Argentina, Endocrinology and Reproduction Research Branch. Sponsor: Dr. Maria Dufau, NICHD, Bg. 10, Rm. 12N216.

12/26—**Dr. Yoshihiko Yamada**, Japan, Laboratory of Molecular Biology. Sponsor: Dr. Benoit de Crombrughe, NCI, Bg. 37, Rm. 2E24.

utilize such information. The center also provides medical advice to Medicare on coverage issues.

In addition to serving as Director of the center, Dr. Perry will continue to serve as cochairman of the Interagency Committee on New Therapies for Pain and Discomfort. He also will continue in his role as executive secretary of the Search Committee to select a new NCI Director.

Health Fraud Film To Be Shown

The Health Fraud Racket, a 28-minute film which shows the activities of quacks who risk lives through unscrupulous methods to promote health, is being offered by the Occupational Medical Service at 11:30 a.m. and 12:15 p.m. on the following days:

Tuesday, Jan. 8, Bldg. 10, Masur Auditorium
Thursday, Jan. 10, Federal Bldg., Rm. B119
Friday, Jan. 11, Bldg. 1, Wilson Hall

Pheresis Unit at CC To Hold 'Open House'; Staff Will Explain New Blood Techniques

An "Open House" for the Pheresis Unit of the Clinical Center Blood Bank is being held on Tuesday, Jan. 22, from noon to 4 p.m. The new facility is housed in a double trailer in the parking lot next to the Blood Bank.

The unit functions for research and therapy of patients with congenital transfusion-dependent anemias and other conditions that require transfusion or removal of blood components.

To obtain various blood components, the Pheresis Unit uses two cell separators, a discontinuous-flow cell separator and a continuous-flow cell separator.

Dr. Harvey Klein, assistant chief of the Blood Bank, his staff, and other NIH investigators will be on hand at the Open House to explain the purposes and operation of the separators.

Blood banking techniques have changed greatly in the past 20 years, and perhaps no development illustrates these changes better than the cell separator. The Pheresis Unit uses these machines to collect blood components for research and therapeutic studies in collaboration with investigators from NCI, NIAMDD, NHLBI, NINCDS, and NIMH.

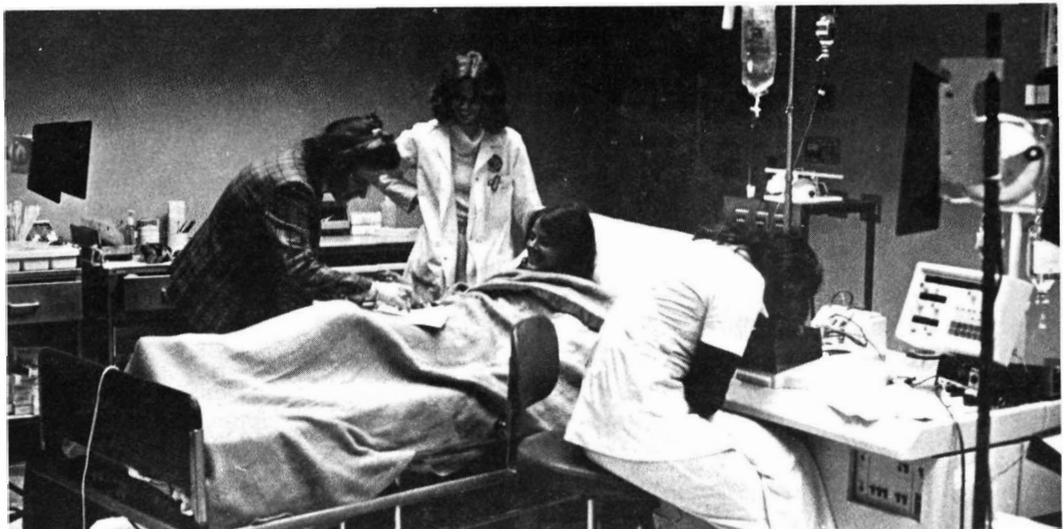
It makes daily collections of platelets, white cells (lymphocytes), and plasma, and also performs therapeutic pheresis, such as plasma exchange for patients with a variety of disorders and exchange of red cells in patients with sickle cell anemia.

In addition, CC researchers use the cell separators to provide special blood products for patients with thalassemia major and sickle cell anemia.

In the past, these patients were treated with chronic transfusion to maintain their hemoglobin levels. Chronic transfusion, however, poses the serious threat of iron overload, since every ml of red cells contains 1 mg of iron. The body cannot clear the excess iron that the dead and dying transfused red cells carry. After about 50 transfusions, the iron overload causes dysfunction of many organs, including the liver and heart. After several hundred transfusions, this dysfunction can be fatal. Iron overload is, in fact, a greater threat to life than the disease itself.

In the 1970's an iron chelating agent, desferrioxamine, came into use to help the body remove the excess iron caused by transfusion. However, removal of iron may not prevent or reverse damage already caused by the excess iron.

At about the same time as desferrioxamine came into use, workers at New York University and Dr. Laurence Corash, a CC hematologist, suggested that transfusion of young red cells (neocytes) might help solve the problem of iron overload. Since the average age of red cells in a standard unit of blood is about 60 days, they advocated transfusing only neocytes to reduce transfusion requirements and the resultant iron overload.



A nurse in the Pheresis Unit (r) monitors a donor's blood on the new platelet separator while the donor learns about the purpose of the procedure from CC staff.

Once the characteristics of neocytes were established, the problem was to find an efficient separation method. Although there were methods to separate these cells, the process could take several days, and the cell yield was small.

During the 1960's, in response to the need for platelet concentrates for his leukemic son who was a patient at the Clinical Center, IBM scientist George Judson started work on a cell separator. Aided by a grant from NCI, the IBM Corporation and investigators at the M.D. Anderson Hospital at Houston, Tex., developed a continuous-flow cell separator.

Continuous-Flow System Used

The device currently used provides blood components effectively and reliably through a continuous flow system, i.e., donor blood circulates through a centrifuge system which separates and collects blood components.

The different densities of the blood cause it to separate into layers on the outer wall of a belt-like centrifuge chamber, where the lighter cells such as platelets, white cells, and neocytes form a layer on top of the red cell layer.

A collection port may be positioned at the neocyte level to withdraw these cells and return the remaining blood to the donor in one continuous, uninterrupted procedure. The position of the neocyte collection port is an important variable, but thanks to an electronic device designed by Carter Gibson, BEIB, DRS, optimum harvest of neocytes is possible.

Through a collaborative study conducted by Dr. Klein, Dr. Corash, Dr. Albert Deisseroth of NCI, and Dr. Arthur Nienhuis of NHLBI, several patients with thalassemia major have received neocyte-rich transfusions. This study has shown that transfused neocytes have an average half-life 50 percent longer than the half-life of red cells in a standard transfusion.

Dr. Furberg Heads NHLBI Branch

Dr. Curt D. Furberg was recently appointed chief of the Clinical Trials Branch, Division of Heart and Vascular Diseases, NHLBI.

Dr. Furberg joined the Institute in 1974 as a member of the Clinical Trials Branch. Since then he has worked actively with three large clinical trials—the Aspirin Myocardial Infarction Study, the Beta Blocker Heart Attack Trial, and the Multiple Risk Factor Intervention Trial.

Received M.D. Degree in Sweden

Before joining NHLBI, he served as an investigator in the Lipid Research Clinics Coronary Primary Prevention Trial.

He received his M.D. degree in 1963 from the University of Umea, Sweden, and later served as director, department of clinical physiology at the Central Hospital, Boden, Sweden from 1968 to 1974.



Since he joined NHLBI in 1974, Dr. Furberg has participated in several major clinical trials.

Upton Farewell Held At Masur Auditorium



Dr. Upton

Dr. DeVita

At a farewell address in the Masur Auditorium in December, Dr. Arthur C. Upton, NCI Director, told his NCI colleagues that he was resigning to assume a new position as director of New York University's Institute of Environmental Medicine.

President Carter, who appointed Dr. Upton in July 1977, said he had accepted the resignation with regret.

"You have filled a very demanding and critically important post in government with high professional standards and deep personal commitment. I am grateful," said the President.

Thanks President for Support

In his resignation letter to President Carter, Dr. Upton thanked him for his "unwavering support" of the National Cancer Institute. Dr. Upton wrote that he was leaving NCI only because the new position was "ideally suited to my experience and lifelong interests."

A crowd of more than 150 NCI employees gathered to hear Dr. Upton's farewell remarks, where he told them of his gratitude and the pride he has for the NCI staff.

"Even though I am leaving, I have not abandoned my commitment or my interest in NCI. I am extremely proud of you all. I cherish my relationships with you and I am grateful," said Dr. Upton, reassuring his audience that he planned to visit NCI in the future.

Prior to coming to NCI, Dr. Upton earned his M.D. degree from the University of Michigan Medical School, and remained there to complete his residency as a pathologist. While spending the next 18 years at Oak Ridge National Laboratories in Tennessee, he concentrated on studies of the effects of long-term exposure to low levels of radiation. Later, Dr. Upton was dean of the School of Basic Sciences at State University of New York in Stony Brook.

Testified as Radiation Expert

Since his appointment, Dr. Upton has made many contributions to the success and the international reputation of the National Cancer Program. As a specialist in radiation biology, he furthered the understanding of the risks associated with diagnostic levels of radiation. He also was called before Congress as a special expert to help assess the environmental and health risks of the Three Mile Island nuclear reactor accident.

FLEXITIME

(Continued from Page 1)

credit to work fewer hours another day or to take an entire day off periodically.

Although similar to compensatory time, the employee must elect to earn and use credit hours. If management requires an employee to work more than 8 hours in a day, the employee will be compensated by overtime or compensatory time.

A compressed schedule (e.g., a 4-day week or a 10-hour day) will be available for only a few Clinical Center units. However, the credit hours may be used to achieve a similar schedule.

Official Hours Remain

No matter which degree of flexibility is chosen or whether credit hours are available, there are some NIH-wide requirements governing office coverage, time off for hazardous weather, and timekeeping.

Regular NIH official operating hours will remain 8:30 a.m. to 5 p.m. All key functions requiring immediate answers or attention to requests will be covered during official operating hours.

Whenever a nonsupervisory employee is working, a supervisor or senior staff member

must be present. Clerical coverage requirements will be determined by the B/I/D.

All employees on flexitime will be required to record their arrivals and departures, except for those that relate to a work assignment or a standard lunch period. Each B/I/D will determine whether a time recording machine or sign-in/sign-out log will be used.

For further information, contact your B/I/D flexitime coordinator listed below. (If a coordinator is not listed for your area, call Carol Vogel, 496-4543.)

| | | |
|--------|------------------|------------|
| DAS | Marjorie Graham | 496-2315 |
| DGC | Tom Johnson | 496-6385 |
| | Pat Merriman | |
| DFM | Carol Shelton | 496-9370 |
| DMP | Elaine Brill | 496-2461 |
| DPM | Carol Vogel | 496-4543 |
| OCI | Gretchen Sharpe | 496-4461 |
| CC | Tom Johnson | 496-3227 |
| C | Jennie Mauck | 496-1905 |
| DRG | Judy Vickers | 496-7577 |
| DRR | Billie Kulp | 496-5451 |
| DRS | Bob Einbinder | 496-1087 |
| NCI | Kim Horgan | 496-6985 |
| NHLBI | Nancy Cherry | 496-9737 |
| NIA | Michael Machesko | 496-9121 |
| NICHD | Ed Condon | 496-1636 |
| NIDR | Dorothy Curtis | 496-4768 |
| NIEHS | Paul Waugaman | 8-629-3211 |
| NIGMS | Martha Pine | 496-7714 |
| NINCDS | David Kerr | 496-2575 |
| NLM | Sally Burke | 496-6491 |

Nazario Named Chief Of New CC Department

John Nazario has been selected as chief of the newly created Materiel Handling Department at the Clinical Center. The department consists of several CC sections made up from other departments.

The new department will be responsible for receiving and delivering all equipment and supplies to the Clinical Center. Its other responsibilities will include the new loading dock now being built on the A-wing side of Bldg. 10. It will handle inventory, purchasing, and storage for the Clinical Center. The new department will continue to provide administrative services such as property and space management, central files and duplicating, and sterile supply services.

Will Begin Case-Carts System

As department chief, Mr. Nazario plans to begin the surgical case-carts system, a program in which each operating room will be provided with a cart that has everything needed for surgery. The case-cart system will

provide better quality control as well as better infection control.

Prior to his selection, Mr. Nazario worked at the Clinical Center for 6 years as a pharmacist. He is a Columbia University graduate and a PHS commissioned officer.



Mr. Nazario's new department will take over the duties of other CC departments.

Under Dr. Upton's leadership, NCI took an active role in establishing the National Toxicology Program. He committed the Institute to collaborative projects in toxicology research and to a continuation of efforts to identify cancer-causing agents.

As an administrator, Dr. Upton undertook the reorganization of several NCI divisions. His most recent step has been formation of the Division of Centers, Community Activities and Resources, which combines programs for cancer control and cancer centers.

Dr. Upton worked to bring many cancer-

related health hazards to the attention of Congress and the public. His initiative led to the HEW campaign to alert present and former workers in several industries that exposure to asbestos could increase their chances of developing lung cancer and other diseases. In recent Congressional testimony, Dr. Upton provided tentative dietary principles that might reduce risks of cancer.

Dr. Vincent T. DeVita, Jr., director of the NCI Division of Cancer Treatment, has been named Acting Director of NCI until a permanent replacement for Dr. Upton can be found.

Medicine for the Layman Series Completes 3rd Successful Season

Medicine for the Layman, the Clinical Center's lecture series, concluded a third successful 12-week program on Dec. 4. Attendance throughout the season was high, with many in the audience expressing their appreciation.

A special effort was made to tailor the subject matter to lay audiences. Scientists worked closely with artists to develop clear graphic presentations of scientific concepts, and for a number of presentations used film segments to illustrate body functions or research advances.

Shirley Johnson, a translator for the deaf who signed 11 of the lectures, was a new addition to this year's series.

Frequently, exhibits pertaining to a particular lecture were placed outside the Masur Auditorium for the public. Also, literature on each subject was distributed before each lecture.

This year's topics included: radiation risks and radiation therapy; sleep and dreams; aging: what happens and why; exercise—good and bad; acne, psoriasis, and skin cancer; epilepsy; breast cancer; control and therapy of genetic diseases; nutrition: infancy through adolescence; sickle cell anemia and thalassemia; and viruses.

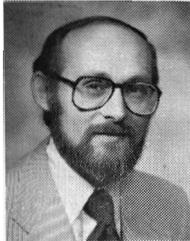
Plans are under way to develop pamphlets based upon this year's topics. Publications from previous lectures on high blood pressure, heart attacks, obesity, and the lungs are available now from the CC Information Office. Edited videotapes of certain lectures will also be available soon to community organizations, schools, and the public.

From the beginning, the DRS Medical Arts and Photography Branch provided invaluable help in meeting many artistic challenges presented by the series. NIH's Audiovisual Section, DAS, videotaped the lectures and the question-and-answer periods that followed each talk, and the OD Audiovisual Section arranged for many speakers to appear on local TV and radio programs to promote the series.

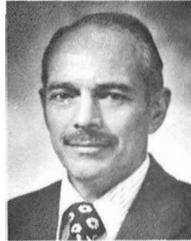
The series, originated by CC Director Dr. Mortimer B. Lipsett and coordinated by the CC Information Office, will be offered again next fall. Send any suggestions for future topics to Bldg. 10, Rm. 1A-05, or call 496-2563.



Dr. David P. Rall



Dr. Gary Peck



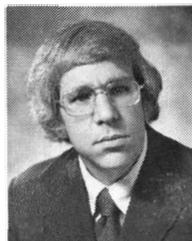
Dr. Lipsett



Dr. Roger J. Porter



Dr. Marc Lippman



Dr. Ronald Crystal



Dr. Reubin Andres

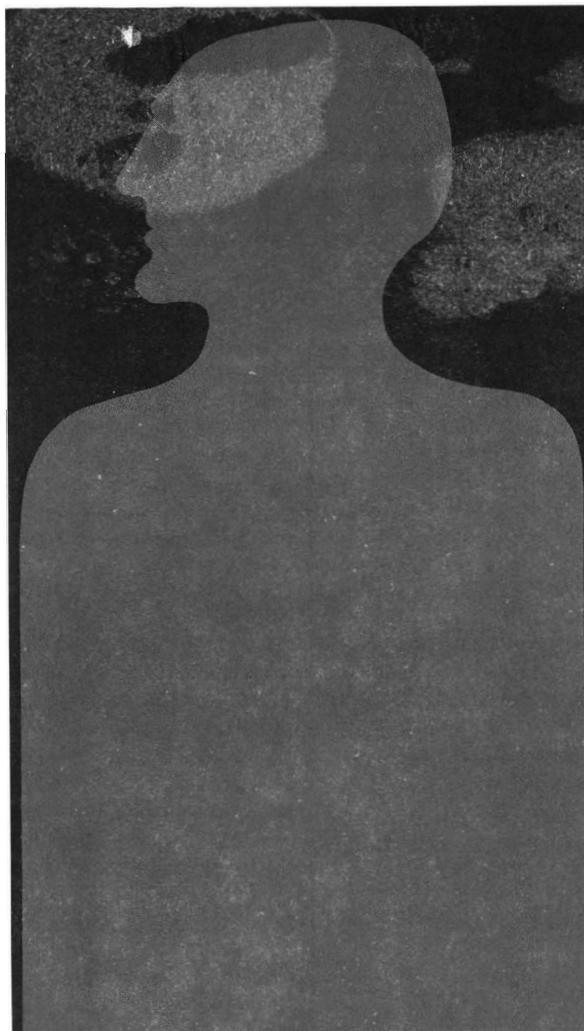


Dr. J. Christian Gillin



Dr. Eli Glatstein

Dr. Lipsett and 12 Lecturers



Dr. Roscoe O. Brady



Dr. Marvin Cornblath



Dr. Arthur Nienhuis



Dr. Robert Chanock

New Approach to Screening Chemicals for Toxicity May Save Time and Money

NIEHS scientists have devised a new way of screening environmental contaminants for toxicity which may cut down on the time and expense spent on this activity.

The new approach involves determining the relationship between toxicity and the size, shape, and symmetry of chemical molecules. Known physical characteristics of molecules are related to their degree of toxicity, explained Dr. James McKinney, chief of the Laboratory of Environmental Chemistry, which pioneered development of the method.

Traditionally, toxicity studies have been based on laboratory experiments using microbes, tissue cultures, and animals. The chemical/molecular approach will not replace these methods, but it will give scientists an important screening tool which they can use to select for further testing those chemicals most likely to show toxicity.

Chemical analysis of molecular characteristics is being used on a variety of environmental contaminants, including PCB's, PBB's, chlorinated dioxins and furans, and related compounds such as naphthalenes.

Academic Health Science Libraries To Be Studied

The National Library of Medicine has recently awarded a contract to the Association of American Medical Colleges to issue guiding principles about the function, structure, and financing of academic health science libraries.

This study will update and expand upon two studies published over a decade ago under NLM and AAMC sponsorship.

Dr. Marjorie P. Wilson, Director of the Department of Institutional Development of the AAMC, will serve as principal investigator.



NIH preschool children listen intently as Santa Claus explains about the spirit of Christmas. A cornered Santa Claus listens to last-minute requests from children as he makes his way from classroom to classroom at the



preschool, just before the big night. There are openings now at the NIH preschool. If interested, call Sherrie Rudick, 496-5144.

DR. GAIL

(Continued from Page 1)

a method for determining the relative success of different types of cancer treatment. His statistical analysis allows a very accurate comparison of treatment techniques by accounting for variables such as sample size, patient age, and geographic location of the populations being studied.

Similar Tests Devised

In the past he has devised similar tests to weigh the success of kidney and heart transplants. His analysis of the survival data for people who undergo heart transplants caused many physicians to reevaluate popular procedures for treating their patients.

Singers Seek New Members, Hold Biweekly Rehearsals

The NIH Singers will welcome new members in all sections as they begin rehearsals for a program of music by prominent composers of the past.

Auditions are not required, but members are expected to be able to sight-read choral music. This year rehearsals will be held every other Sunday at 7:30 p.m. in the Masur Auditorium. The next rehearsal will be on Jan. 20.

Call Dr. Lewis M. Norton, 496-6037.

New Neuroscience Research Topic of Writers Seminar

Current Research in Neuroscience will be the topic of the next NIH Science Writers Seminar to be held Tuesday, Jan. 22, at 9 a.m., in Bldg 31-C, Conf. Rm. 10.

Presenting their findings will be Drs. Edward V. Evarts, NIMH; Ronald Dubner, NIDR; Louis Sokoloff, NIMH; and Thomas S. Reese, NINCDS.

For further information call Tom Flavin, NIH News Branch, 496-2535.

Dr. Jack McLaughlin Joins Grants Associates For a Year of Study

Dr. Jack A. McLaughlin, a former NIH visiting scientist, recently joined the NIH Grants Associates Program for a year of training in health science administration.

Dr. McLaughlin, a graduate of Gannon College, Erie, Pa., received his Ph.D. in neuroscience from the University of Rochester Center for Brain Research, where he was a PHS predoctoral fellow from 1969 to 1973, and a Muscular Dystrophy Association postdoctoral fellow in pharmacology and toxicology from 1974 to 1976. He then joined the National Institute of Neurological and Communicative Disorders and Stroke as a visiting scientist in the Medical Neurology Branch.



Dr. McLaughlin

Has Written Numerous Articles

A member of the Society for Neuroscience, Dr. McLaughlin has written a number of articles on membrane, lipid, and glycoconjugate biochemistry, and the biochemical pathology of neurological disorders.

The Association of Computer Programmers and Analysts recently presented one of its highest honors, the Founders Award, to E. Lawrence Doyle, a computer specialist in the Division of Management Policy, OA, OD. Mr. Doyle, who received the award in recognition of his contribution to the data processing profession through service to the ACPA, was also elected national chairman of the association for 1979-80.

NLM Offering Three New Bibliographies on Hypertension

Three new bibliographies dealing with hypertension can be requested from the National Library of Medicine's Reference Section.

These Literature Searches, part of a 1979 series of printed bibliographies on subjects of current interest, were produced through MEDLINE, and are available without charge.

A complete list of titles appears in each issue of *Index Medicus* and *Abridged Index Medicus*. When requesting Literature Searches, please include title and number, enclose a self-addressed gummed label, and mail to: Literature Search Program, Reference Section, National Library of Medicine, Bethesda, Md. 20209.

LS 79-11 *Hypertension—role of body weight, sodium, food habits, and weight reduction*. January 1975 through September 1979. 81 citations.

LS 79-12 *Hypertension in the elderly*. January 1975 through September 1979. 78 citations.

LS 79-13 *Hypertension in the child or adolescent*. January 1977 through September 1979. 122 citations.



5-Year Clinical Trial Demonstrates Benefits Of Blood Pressure Control

The health benefits of adequate blood pressure control extend to subjects with mild hypertension as well as to those whose blood pressure is high.

Findings from a 5-year clinical trial to assess the impact of blood pressure control measures in reducing mortality from hypertension-associated disorders were announced at a recent press conference at NIH.

Details of the trial were reported by the National Heart, Lung, and Blood Institute's Hypertension Detection and Follow-up Program.

Earlier clinical trials had demonstrated that blood pressure control in patients with moderate to severe hypertension (diastolic blood pressures of 105 mm/hg or higher) substantially reduced the threat of such associated disorders as stroke, congestive heart failure, and renal failure.

The latest results indicate that the health benefits of adequate blood pressure control also extend to subjects with mild hypertension (diastolic pressures of 90-104 mm/hg at entry into the study).

The NHLBI-supported study involved 14 clinical centers and 4 coordination and service centers, with nearly 11,000 subjects, most of them with mild hypertension.

Half of the subjects were referred to their usual sources of medical care and were seen by HDFP annually. The other half participated in a stepped-care program of therapy

at HDFP centers and were seen every 4 months or more often if necessary. All subjects were followed for 5 years.

Goal blood pressure levels were set for all study participants. For those with diastolic pressures of 100 or greater or who were already on anti-hypertensive medication at entry, the goal was a reduction to 90 mm/hg. For those with diastolic pressures of 90-99 at entry, the goal was a reduction of 10 mm/hg.

Not all patients in the stepped-care group required medication. If their blood pressures were at or below goal at the first treatment visit and they were not already on medication, they were given no prescription and designated as step 0 unless or until their blood pressure status changed for the worse.

For stepped-care patients requiring medication, a systematic, standardized program of anti-hypertensive therapy was employed, with medications added or dosages adjusted in stepwise fashion as needed to bring each patient to or below his goal blood pressure.

At step 1, the diuretic chlorthalidone was prescribed (triamterine or spironolactone might be used as necessary to supplement or substitute for this drug). At step 2, an anti-adrenergic drug (usually reserpine) was added. At step 3, a vasodilator (usually hydralazine) was added.

At step 4, a more potent anti-adrenergic drug (usually guanethidine) was added, with

or without discontinuance of previously prescribed medications. By step 5, the investigators could use any FDA-approved drug or combination that seemed to do the job. Most patients required only step 1 or step 2 therapy for adequate blood pressure control.

Over the 5-year period of the study, blood pressure control was consistently better in the stepped-care group than in the referred-care group. By the fifth year, nearly 65% of the former were at or below their goal blood pressure levels (over half of them in the normotensive range), whereas only 44% of referred-care patients achieved their goals.

The more effective blood pressure control achieved in the stepped-care group was reflected in their lower mortality rates. Compared with the referred-care group, their 5-year mortality for all causes was nearly 17% lower and their mortality from cardiovascular disease was 18% lower.

Particularly noteworthy were the mortality reductions achieved among stepped-care patients with diastolic pressures of 90-104, the group for which the efficacy of treatment has been controversial.

Compared with referred-care patients in the same blood-pressure stratum, the stepped-care patients experienced a 20% lower mortality from all causes and a 26% lower mortality from cardiovascular disease.

The study findings were described in two articles in the Dec. 7, 1979, issue of *JAMA*.

Deadline for STEP Modules Is Jan. 18

Jan. 18 is the application deadline for three modules, or short courses, being offered this spring through Staff Training in Extramural Programs.

The modules are Grants and Contracts: Institutional Perspectives (Apr. 22-23), How to Exploit NIH Information Systems (May 1-2), and Introduction to the Extramural Programs of the NIH (May 15-16).

Modules Specially Designed

STEP modules are designed primarily for health scientist administrators and management staff concerned with grant and contract programs. While enrollment preference is given to personnel in the extramural programs, applications received from other NIH employees will be considered.

For further information, contact Arlene Bowles, 496-5358, in Bldg. 1, Rm. 211.

Youth Services Program Seeks Volunteer Tutors

Middle Earth Youth Services, in Wheaton, is seeking tutors to work on a one-to-one basis with youth between the ages of 13 and 21. If you're interested, at least 18 years of age, and have a spare hour a week, call Doug, 933-2818.

Paychecks for PHS Officers Will Arrive in January

PHS commissioned officers are strongly urged to make every effort to get their designation in by Jan. 15 to preclude delays in receipts of their checks.

CPOD will continue to process the address designations for pay checks required by CCPM Manual Circular 289, which covers 11/27/79 through 01/15/1980.

If you did not receive a copy of the circular, contact either your administrative or personnel office or the Commissioned

Officers' Unit in Bldg. 31, B3C-23 immediately.

Requests for checks to be sent to banks and address designations should be submitted through the NIH Payroll Liaison Office in Bldg. 31, B1B-30, as they will provide messenger delivery to the Parklawn Bldg. to insure receipt.

If there are any questions, call Diane Rose, 496-4212.

History of Medicine Society To Meet Jan. 24

The Washington Society for the History of Medicine will meet on Thursday, Jan. 24, at 8 p.m. in the Billings Auditorium, National Library of Medicine.

The two featured speakers are Dr. John Parascandola, University of Wisconsin, and Grace Goldin, author and lecturer.

Dr. Parascandola, presently a visiting associate professor at the Johns Hopkins Institute of the History of Medicine, will discuss John Abel and the Early Development of American Pharmacology.

Mrs. Goldin, a hospital historian who has published widely, will speak on Some History of Hospitals: 13th to 20th Centuries; Their Architecture, Their Art, and How They Worked.

STEP Forum To Be Held Jan. 15

A STEP forum on the Update of Implementation of Grants Peer Review Study Team Recommendations will be held Jan. 15 from 2 to 4 p.m. in the Westwood Bldg., Conf. Rm. D.

Dr. Vida Beaven, special assistant to NIH Deputy Director Dr. Thomas E. Malone, will discuss the status of all GPRST recommendations approved by NIH Director Dr. Donald S. Fredrickson in December 1978.

D. Solowey To Speak

Dr. Mathilde Solowey, Division of Research Grants, will talk about recent efforts to devise a Pre-Award Grant Appeals System.

The discussion is open to all NIH employees. For further information, call Arlene Bowles, 496-5358.

Military Art Exhibit To Be Held at NLM



Joseph Hirsch's "After the Fascist Fair" is a WWII oil painting that will be on display in NLM's lobby.

The pain and suffering of war has been captured in some 40 military works of art that will be on display in the National Library of Medicine's lobby from Jan. 14 through April 25.

The paintings depict scenes of military medicine from World War II, Korea, and Vietnam ranging from frontline aid being given by medics, to life in a rear echelon hospital, to how medical research is conducted by the armed forces. The works were done by a variety of talented artists, including Peter Blume and Joseph Hirsch, and are on loan from the U.S. Army Center of

Military History.

The NLM has a special interest in the subject of military medicine, since the present-day collection traces its roots back to 1836 and the Library of the Army Surgeon General's Office. That modest collection of books and journals grew over the years, becoming first the Army Medical Library, then the Armed Forces Medical Library, and, in 1956, the National Library of Medicine.

The public is invited to view the paintings during the Library's regular hours: Monday through Friday, 8:30 a.m. to 9 p.m., and Saturday, 8:30 a.m. to 5 p.m.

J. Stewart Hunter Dies, Former HEW Advisor And Information Head

J. Stewart Hunter, public affairs advisor to four PHS surgeons general and information chief of the Public Health Service from 1949 to 1967, died of cancer Dec. 28 at George Washington University Hospital.

Mr. Hunter presided over the planning, announcement, and handling of three of the most significant public health stories of this century—the advent of the first successful polio vaccine in 1955, the Asian flu outbreak of 1957-58, and the Surgeon General's Report on Smoking and Health in 1964.

As director of information, Mr. Hunter helped organize the public relations and information programs of the newly formed HEW and headed the Department's operations from 1953 to 1955.

From 1967 until he retired in the early 1970's, he was associate director for public services in the Office of the HEW Secretary.

In his early career, Mr. Hunter taught English literature and composition at the

University of Pittsburgh, and also edited a weekly news magazine.

Following service in the Navy during World War II, he spent 3 years with the J. Walter Thompson Company in Chicago, where he served as associate director of the public relations department before coming to Washington in 1949.

During his Government service, Mr. Hunter received several honors, including the HEW Superior Service Award, the HEW Secretary's Special Citation, and the Government Information Organization's public relations award.

He is survived by his wife, Lauretta, of Washington; a daughter, Mary Stewart Clark; a stepdaughter, Gayla Land; a brother and sister; and four grandchildren.

Memorial services will be held tomorrow (Wednesday, Jan. 9) at 2 p.m. in the Navy Chapel, 3801 Nebraska Ave., N.W., Washington, D.C.

Experts To Review Status of Problem Of Sexually Transmitted Diseases

A Sexually Transmitted Disease Study Group, sponsored by the National Institute of Allergy and Infectious Diseases, will meet Jan. 14, 15, and 16 at the Shoreham-Americana Hotel, Washington, D.C.

Dr. Holmes Is Chairman

This meeting, chaired by Dr. King K. Holmes of the University of Washington, Seattle, will bring together national and international experts in STD.

Two plenary sessions will be held—Monday morning, Jan. 14, and Tuesday afternoon, Jan. 15. Speakers at the Monday morning session will review the current status of the STD problem, with particular emphasis on the impact of STD on pelvic inflammatory disease, infertility, ectopic pregnancy, and maternal and infant morbidity.

Working Subgroups Formed

Participants will then divide into working subgroups to discuss gonorrhea, chlamydial infections, syphilis and treponemal infections, herpes and cytomegalovirus infections, group B streptococcal infections, hepatitis, vaginitis, and special infections (enteric pathogens, chancroid, ectoparasites, genital warts).

At the second plenary session on Tuesday afternoon, subgroup chairmen will present recommendations for research directions and priorities. Dr. Holmes will be available afterwards to answer questions. A final draft of the Study Group Report will be prepared Wednesday morning.

For further information, call Patricia Randall, NIAID, (301) 496-5717.



Dr. Gary D. Hodgen (l), National Institute of Child Health and Human Development, recently received an award for outstanding contributions to the NIH and the NICHD EEO programs from Dr. Norman Kretchmer, NICHD Director, at the Eighth Annual NICHD EEO Conference. Dr. Hodgen has helped employees in lower grades to advance in the laboratory by means of course work and creative in-house training programs. He also has selected and trained disabled veterans and introduced an innovative team approach to routine animal care.