

# The NIH Record

**U.S. Department  
of Health  
and  
Human Services**

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**National  
Institutes  
of  
Health**



NIH firemen clear debris from wedged tractor which made an unexpected visit to the Credit Union, as spectators peer through the opening. (Story and more photographs on Page 3.)

## Cancer Institute Reorganizes Into Five Divisions To Strengthen Its Efforts

Changes in the structure of the National Cancer Institute's divisions and programs have been approved by HHS Secretary Patricia Roberts Harris.

This culminates an Institute-wide reorganization set in motion nearly 3 years ago by former NCI Director Arthur C. Upton.

The reorganization has four goals:

- Strengthen the Institute's efforts in the prevention of cancer by reorienting fundamental research programs and adding programs of applied prevention.
- Combine in a single division, programs for technology transfer, training, and education.
- Provide the four program divisions access to both grant and contract mechanisms for funding their extramural programs.
- Separate program management from peer review and administration of grants and contracts.

A major change is the creation of a new Division of Resources, Centers, and Community Activities. It will include major programs of applied prevention and screening activities.

These include programs of smoking cessation, educating workers about cancer hazards

in the workplace, and finding ways of limiting exposure to environmental carcinogens such as asbestos. Screening techniques for the earlier detection of cancer will be tested in community populations.

The new division will include the functions and staff of the former Division of Cancer Control and Rehabilitation, along with the Cancer Centers Program and the Institute's training and education activities.

"Combining these programs in one division will establish a biomedical pipeline and allow a better flow of research findings on prevention as well as diagnosis and treatment into the community," NCI Director Vincent T. DeVita, Jr., said.

He announced that a search committee would be formed to select a director for the new division. Two other division directorships are also vacant.

Dr. Thomas J. King, who would have headed the Division of Extramural Activities, recently accepted a position at Georgetown University, and Dr. DeVita has vacated his former position as director of the Division of Cancer Treatment to assume his new post as NCI Director.

(See REORGANIZATION, Page 7)

## DeVita Named NCI Director

The new Director of the National Cancer Institute, Dr. Vincent T. DeVita, Jr., says the next decade "will be the most exciting we've ever been through or are likely to face, because of the explosion of technology" in understanding the causes and treatment of cancer.

Dr. DeVita, whose appointment as Director was announced by the White House on July 9, made these comments at a July 14 press conference at NCI.

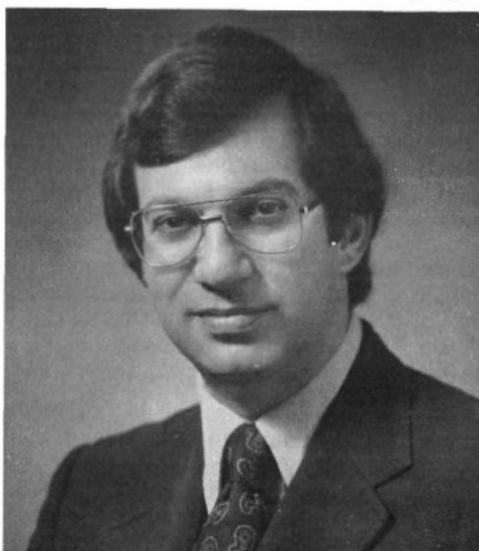
"This explosion," Dr. DeVita said, "will apply to everything we do in cancer prevention and everything we do in cancer treatment and will probably revolutionize diagnosis in a couple of years."

The technology explosion is the work being done now with recombinant DNA and with the new hybridoma techniques, which Dr. DeVita believes may help researchers to better understand the basic puzzle of cancer.

"The central thing we would like to know is, what controls growth? What controls growth in normal cells? We know there's a basic switching mechanism that controls growth in normal cells. We know that this switching is abnormal in cancer cells.

"It is technically feasible now to map the human genome, to map DNA. It's a huge job and it may take 50 years or it may take 5

(See DEVITA, Page 4)



Dr. DeVita will continue as NCI's clinical director.

# The NIH Record

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On July 14, the R&W Association opened its newest store in the Lister Hill Center. Items carried include crystal, pewter, and gourmet candy. The National Library of Medicine deputy director, Kent A. Smith, (l) cuts the grand opening ribbon while R&W President Gerald R. Stiller (r) looks on with the R&W staff who will service the store.

## Judo Exhibition To Show Variety of Techniques

A judo exhibition is planned for the Masur Auditorium at noon on Wednesday, Aug. 6.

Dr. Thomas E. Malone, NIH Deputy Director and a black belt instructor with the NIH Judo Club, will present a variety of judo techniques with some of his students.

Lunchtime spectators will have an opportunity to see throwing techniques and other forms of this modern Olympic sport. The club will soon be accepting applications for its beginners class in September. □

## Savings Bond Campaign Extended

The 1980 U.S. Savings Bond Campaign has been extended by HHS to Aug. 15.

To buy bonds or for more information, employees may contact their coordinators. □



Dr. Kenneth W. Sell (r), scientific director, National Institute of Allergy and Infectious Diseases, recently presented a group award for superior performance to the engineering and maintenance staff at the Institute's Rocky Mountain Laboratory in Hamilton, Mont. Cited for outstanding achievement in a major remodeling and renovation project—undertaken during the recent reorganization of the laboratory—are (l to r): Brian Langton, Ralph (Pete) Miller, Albert Kolb, Robert Hamby, and Tom Kerr, head of engineering and maintenance, who was project supervisor. Also honored but not shown were John Moore, Greg Hacker, and Tim Miller.

## TRAINING TIPS

The following courses, sponsored by the Division of Personnel Management, are given in Bldg. 31 unless otherwise noted.

Office Skills	Course Starts	Deadline
Seminar for Executive Secretaries	Sept. 22	Sept. 9
Communication Skills		
Reading Improvement	Sept. 30	Sept. 16
Supervisory and Management Courses		
Communication Issues Session (II)	Sept. 9	Aug. 26
Cliffside Conf. Center Harper's Ferry, W. Va.		
Survey of Modern Management	Sept. 8	Aug. 20
Survey of Modern Management	Sept. 15	Aug. 20
Cliffside Conf. Center Harper's Ferry, W. Va.		

To learn more about courses in Office Skills and Communication, contact the Training Assistance Branch, 496-2146.

For further information on Supervisory and Management courses, contact the Executive and Management Development Branch, 496-6371. □

## Sailing Club Offers Film On Baltimore to Norfolk Race

The next meeting of the NIH Sailing Club will be held Thursday, July 31, at 8 p.m. in Bldg. 30, Rm. 117.

The program will feature "Chesapeake Bay Challenge," a film about the Baltimore to Norfolk sailboat race. □

## FAES Reserves Concert Tickets For Employees Arriving in July

A limited number of tickets for the 1980-81 Chamber Music Series have been reserved by FAES to give employees arriving at NIH in July an opportunity to subscribe to the concert series. Proof of July "entrance-on-duty" dates must be presented when applying for tickets.

The Foundation for Advanced Education in the Sciences will present eight concerts in this series: Oct. 5—Richard Stoltzman, clarinet, with Bill Douglas, piano and bassoon; Oct. 19—Polish Chamber Orchestra; Nov. 9—Quartet Beethoven di Roma; Jan. 25—Smithsonian Jazz Repertory Ensemble.

Also, Feb. 8—Lydia Artimiw, piano; Mar. 7—Maurizio Pollini, piano; Mar. 29—Trio di Milano; and one additional concert, the date and artist to be determined.

Tickets will be available through Aug. 15.

For more information and a subscription form, contact the FAES office, Bldg. 10, Rm. B1L-101, 496-5272. □

## Information Session on Mgmt. Intern Program To Be Held July 24

The NIH Management Intern Program is accepting applications for 10 positions at the GS-5, GS-7, or GS-9 levels through July 28. (See *The NIH Record*, July 8, 1980.)

## Women and Minorities Are Urged To Apply

NIH is making a concerted effort to increase participation of women and minorities in this program.

An information session is being held on Thursday, July 24, from 4 to 6 p.m., in Bldg. 1, Wilson Hall.

For additional information, call Harry Marshall, 496-2496. □

## 3-D System To Aid Microsurgery To Be Shown on Video

A 3-D video microsurgical system, which may benefit microsurgery to the same degree that the CT scanner has revolutionized diagnostic radiology, will be shown on video in Wilson Hall, Bldg. 1, on Friday, July 25, from 10 to 11:30 a.m.

This instrument is designed to relieve the strain of maintaining a fixed head position while conducting microsurgery. The surgeon's work is displayed in three dimensions, and he or she is free to refer to other instruments or attendants.

The inventor, James Butterfield, will be available for discussion at the meeting.

This seminar has been coordinated by the Office for Medical Applications of Research to allow this new technology to be evaluated by NIH scientists and clinicians. □

## Dr. Judd Will Be President Of American Genetics Society



In addition to being an NIEHS laboratory chief, Dr. Judd is adjunct professor in genetics at both the University of North Carolina at Chapel Hill and at Duke University.

Dr. Burke A. Judd, National Institute of Environmental Health Sciences, will assume the presidency of the American Genetics Society in September. Dr. Judd is chief of the Institute's Laboratory of Animal Genetics.

The American Genetics Society consists of over 2,800 science professionals and students from the United States and several foreign countries. Founded in 1932, the society has published the scientific journal, *Genetics*, one of the primary journals for publication of scientific papers in the field for many years.

The Laboratory of Animal Genetics is involved in investigations regarding the structure and function of genes and the nature of gene mutations, with particular emphasis on the study of whole animal (eukaryotic) systems, including the mouse and *Drosophila* (fruit fly). □

## Toastmasters Invite Summer Employees To Attend Club Meetings

The NIH Toastmasters Club invites summer employees to attend its meetings, held every Friday at noon in Bldg. 31, Rm. B2C-06.

## Runaway Tractor Crashes Into Credit Union



NIH Federal Credit Union Manager Fred N. Kruhm assists police and firemen in securing the Bldg. 31 branch just after the accident.

Lunchtime transactions at the NIH Federal Credit Union in Bldg. 31 were abruptly interrupted when a grounds maintenance tractor and trailer came crashing through its window at 1 p.m., on Tuesday, July 1.

Approximately 50 patrons were standing in line at the time of the crash. The tractor slammed through the windows, burying its engine in the Credit Union's ceiling.

Some CU customers fell to the floor to avoid being hit by flying glass, others ran for the rear exit or just stood in place stunned, says Jenny Porter, Credit Union branch supervisor.

She witnessed the customers reaction to the crash when she ran from the Credit Union's vault where she was counting checks.

Despite the flying glass and debris, there were no reported injuries; however, one teller who was standing near the point of



Credit Union window partitions were removed to free the tractor before it was pulled out by a front-end loader.

impact later went to Occupational Medical Services suffering from minor shock.

The incident occurred 1 day after the Credit Union installed its new computer system. Normally, there would have been a teller stationed at the place where the tractor broke through, but on the day of the accident, one of the new terminals was not functioning and the teller was moved.

Just prior to the crash, Lou Goddard—a representative of World Computer Corporation, the company that installed the new banking system—was attempting to repair the out-of-order terminal.

### Soft Drink Saves Man

After working on the machine for a while, he decided he wanted the soft drink he had left on the other side of the room. "Just after I went to get my drink, it hit," said Mr. Goddard.

Within minutes after the crash, NIH police and fire fighters were at the Credit Union to examine the damage and determine the best way to remove the tractor. They credit the vehicle's roll bar with stopping the tractor when it struck the building. Officials secured the bank and ordered the evacuation of the second floor offices over the Credit Union.

The tractor and trailer had been left in gear on the hill overlooking Bldg. 31, while its operator went to get more gasoline for the empty vehicle, according to officials. While the operator was absent, the machine rolled down the hill striking the building.

A crowd of spectators gathered to watch a front-end loader pull the trailer and tractor from the building. Despite the damage, the NIH Federal Credit Union was able to reopen for business the following day, although three of the new computer terminals had to be replaced. □

**IS YOUR LIFE OUT OF CONTROL?**  
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**Employee Assistance Program**

## DEVITA

(Continued from Page 1)

years. But every time a new technology comes along it shortens 2 years of work down to 2 days," said Dr. DeVita about the impact of new technology on scientific discovery.

"If we can map the human genome, we should then be able to look for, and find, the mechanisms that affect the switching controls. Then we could repair it directly, rather than what we're doing now. Currently, we're really hitting at the result of the defect, not the root of it," he noted on today's use of cell-killing cancer drugs.

Dr. DeVita brings to his new position some 16 years of experience within NCI. He was first a senior investigator in the Solid Tumor Service, later became its head, and in 1971 he became chief of the Medicine Branch.

In 1974 he became director of the Division of Cancer Treatment and a year later became NCI Clinical Director, holding both posts concurrently. Dr. DeVita was named acting director in January of this year, after the resignation of Dr. Arthur C. Upton.

During his career, Dr. DeVita became widely known for his work in chemotherapy for Hodgkin's disease, specifically for his role in developing the combined chemotherapy known as MOPP (nitrogen mustard, Oncovin

or vincristine, procarbazine, and prednisone).

He has also been cited for his accomplishments in the therapy of non-Hodgkin's lymphomas, and in using combination chemotherapy for ovarian cancer and breast cancer.

Asked at the press conference about the merits of having an "insider" take over as NCI Director, rather than bringing in someone from the outside, Dr. DeVita said he thinks there are advantages in being an insider.

"I think this is a very complicated Institute. If you know where everything is and how it runs then you're going to have a less difficult job in finding it," he said.

"The hardest thing for me (in assuming a new position) always is what I have to leave behind," said Dr. DeVita about filling his new role as Director. "When I left behind being chief of Medicine (to take the job as director of the Division of Cancer Treatment), I left behind what is probably the best job of its kind in the country."

"We had all the resources we needed to do the kind of research that I was doing and there are probably few institutions in the country that could match it."

In deciding to take his new job, Dr. DeVita said, it was really a matter of finding a way to "stay personally involved in lymphoma research. I think I can do that by continuing to work on the lymphoma data bank that has been building here for 16 years." □

## Judy Lorette Finds It Exciting To Play Dual Role As White House Volunteer and CC Nurse

In the last 6 months, Judy Lorette, a Pediatric oncology nurse on NSI's 2-East, has learned to adjust to the Washington area thanks to her own initiative and interest.

Judy came to Bethesda in December from Dayton, Ohio, where she had worked on cancer wards in several hospitals.

As the daughter of a military officer, she moved many times while growing up and found that the best way to survive in a new city was to become involved as much as possible.

Judy always had a strong interest in the political system, so when a friend suggested she might be interested in working as a White House volunteer, Judy gave the White House a call.

After an interview and security clearance, she was given a volunteer job working for the Interdepartmental Task Force on Women—an organization that deals with women's issues in business and government.

Because of the flexibility of her schedule as a nurse, she is able to work as a volunteer when needed.

Judy's duties are varied and sometimes include organizing materials for briefings and helping with the day-to-day operations of the office.

She found that being a White House volunteer sometimes pays off in unexpected ways. On her way to the White House on her first day Judy was pulled over by a policeman for speeding.

Slightly late and unfamiliar with the Washington traffic regulations, she interrupted the officer's lecture to explain her situation. She mentioned that she was on her way to the

White House, and was then offered an escort. She refused the offer but received excellent directions to Pennsylvania Avenue.

"Working at the White House for the past 6 months has been great," Judy says. "Instead of receiving a paycheck once every 2 weeks, I get paid by meeting interesting people and attending some political functions."

At NIH Judy works in pediatric oncology and with the laminar air flow patients. She enjoys the children she works with. "They always make my day for me," Judy says.

Pediatric oncology and laminar air flow have both been new experiences for Judy.

## Katie Davis Retires; Ends Long Printing Career



At the retirement luncheon for Ms. Davis, she was given a "key" to the NIH Printing Plant by Benjamin Jenkins (standing). The key was one of many gifts she received. George Graham (r), Printing and Reproduction Branch chief, was one of several speakers who wished her well.

Katie C. Davis, printing specialist in the Printing and Reproduction Branch, DAS, retired recently after 33 years of Government service, 28 of which were spent at NIH.

Katie began working for the Government in 1942 as a multigraph operator at the Department of Commerce. Later, she was employed by the U.S. Post Office, and in 1952, she joined NIH where she has held various positions in the Printing and Reproduction Branch.

Ms. Davis is active in the Ladies' Guild of her church and a member of the choir. As a retiree, she looks forward to traveling and gardening. □



When Judy isn't working she enjoys exploring the Washington area. She's been everywhere from the Smithsonian Institution to the Inner Harbor of Baltimore. She does much of her exploring by bicycle.

James Catlett, health technician, National Institute of Dental Research, retired on May 31 after 33 years of Federal service. Mr. Catlett was affiliated with the dental services unit of the Clinical Center from 1953 until the time of his retirement.

She feels she has learned a lot at the Clinical Center.

There are always challenging, unlimited opportunities for growth. "It's exciting to work for an organization that has four Nobel Prize winners working for it," she says. □

# CC Clinical Associate 'Pays Back America,' Aids Cuban Refugees at Ft. Chaffee

Last month's massive exodus of Cuban refugees to the U.S. touched off a unique personal decision by Dr. Abe Macher, a CC clinical associate, to help these displaced people. After reading an official request for volunteer physicians he decided it was time to "pay America back."

"Something triggered in the back of my mind while reading the memo," said Dr. Macher. His mind conjured up images from 32 years ago when he and his Polish parents arrived in the U.S. by boat like the Cubans today. Abe Macher, born in a refugee camp in Stuttgart, Germany, in 1947 was 2 years old when he disembarked.

Dr. Macher discussed his decision with his wife, Alice, a part-time special education teacher at Montgomery County's Stephen Knolls School, then asked for a 2-week assignment to begin May 15.

A PHS officer for the last 6 years, Dr. Macher has also worked as a clinical associate with the National Institute of Allergy and Infectious Diseases, and had a year's training in infectious disease pathology at the Armed Forces Institute of Pathology.

He felt that his medical specialty might be of value if the Cubans, who were arriving around the clock, demonstrated any infectious diseases that might pose a health hazard.

Upon his arrival at Fort Chaffee, Ark., Dr. Macher changed into a set of Army fatigues, and was assigned to a 15-hour night shift at the primary screening clinic.

Already, 15,000 Cubans had been seen by volunteer PHS and Army medical personnel. Over the next few days the camp would swell to its maximum of 19,000 and Dr. Macher would be reassigned to one of the four regular medical clinics.

The refugee camp clinics were staffed by volunteer PHS physicians, nurses, and pharmacists from across the country. There was quite a contrast between the MASH-type clinics and the sophisticated clinical center at NIH, but they were quite functional.

The most common problems seen in the



Cuban refugees wait for further processing at the camp. Behind them are the barracks where they live until relatives or sponsors can be located.

clinics included mild upper respiratory infections, gastric distress, and dermatoses. "Generally, their health was excellent, it was a pleasant surprise," said Dr. Macher.

Eight medical students from the Uniformed Services University of the Health Sciences, close neighbors of NIH, were "a great help in the clinics" at Fort Chaffee.

Dr. Macher's Spanish, which he first learned in New York, came in handy when interviewing patients about problems. Sometimes, however, he would need help in translation with a particular patient.

Fortunately, among the Cuban refugees were bilingual volunteers who worked in the clinics as interpreters and medics. In a show of gratitude, the refugees were volunteering their services in all aspects of camp life.

The refugees were from all parts of Cuba and from every occupation—physicians, a geologist, architect, laborers, and sugar cane workers.

"All their clothing was provided at Chaffee," Dr. Macher noted as he projected on an office wall some of the color slides he took while attending the refugees.

His slides show the strained but happy faces of uprooted people who only a few hours before had landed by boat in Key West, Fla., were picked up by U.S. Immigration authorities, and flown—for many of them the first time they had ever been on an airplane—to Arkansas. "There were victory signs everywhere," says Dr. Macher, "they were proud to be in this country."

Patients told him that family members were indiscriminately separated at the whim of Cuban officials who did anything to make life more uncomfortable for them.

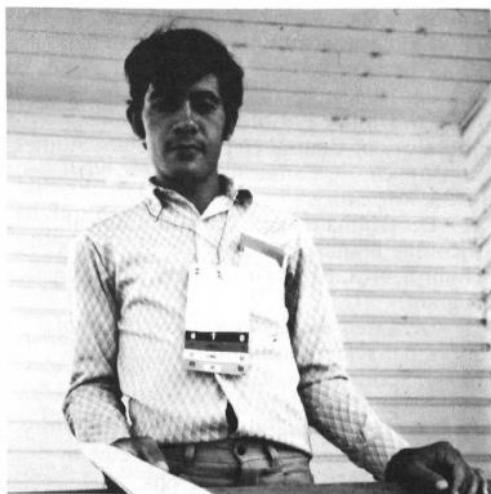
Reflecting on his parents' experience as refugees and their reason for wanting to come to America and comparing it to what he

learned from the Cubans he treated, Dr. Macher says, "the reason is the same. It's what the U.S. has to offer. This is freedom."

Giving his reason for going to a place he had never been to before, to work long hours for people he did not know, Dr. Macher expressed appreciation to the U.S. for "accepting me and my parents in '48. This is my way of paying back Uncle Sam."

Besides Dr. Macher, Clinical Nurse Mary Ann Hazard, NCI Nursing Service, and Clinical Nurse Expert Josephine Sistoza, Heart and Lung Nursing Service, have also offered their medical skills to aid the refugees.

Currently, there is a need for volunteer physicians for 2-week assignments at Fort McCoy, Wis., and for pharmacists for the Cuban refugee camp at Indian Town Gap, Pa. If interested, call 496-4114 for more information. □



This Cuban's tag denotes his medical condition. Refugees arriving with a particular illness such as diabetes, were tagged by PHS medical personnel before they left Florida.



Dr. Macher (r) and Uniformed Services University medical student Linda Strand (l) stand outside the refugee medical clinic where they worked.

# Needs of Foreign Scientists and Families Met by Fogarty Center Programs

The night sky was filled with bursting rockets, hundreds of American flags were distributed, and live music filled the air at the City of Rockville's Independence Day Celebration, an activity this year that included foreign-born visiting scientists and their families from the Fogarty International Center.

The Fourth of July celebration arrangements are just one part of the intensified effort to expand the assistance FIC is giving to the 1,200 visiting associates, fellows, scientists, Fogarty Scholars, guest workers, and experts and their families who come to NIH each year from all over the world.

The logistics for handling such a diverse group is done through the International Visitor's Center located in Bldg. 16, Rm. 208.

Recently, Janet Bartz—a former Foreign Service wife, who has lived all over the world and knows the problems of "cultural shock"—took over from Joan Muller as the person to contact when a foreign scientist needs to find a place to live, furniture, a school for children, or just someone to talk to about adjustment problems associated with living in another culture and country.

Due to travel limitations, the international visitors arrive with no household furnishings. Can you imagine a young family moving into an empty apartment with no beds, tables, chairs, lamps or kitchen utensils? And where does a researcher store all those books, on the floor?

Another critical need facing visiting researchers is adequate housing. The center keeps a house, apartment, and furnished room listing of available moderately priced residences within walking distance of NIH. However, with the declining number of rentals, Mrs. Bartz is interested in additional housing leads.

An outgrowth of the International Women's Group has been the establishment in June of the Women's Support Group, a self-help organization of wives of foreign scientists who get together to discuss the problems of adjust-

ing to cultural shock. The group moderator is Rachael Selzer, senior mental health counselor of NIH's Employee Assistance Program. Twice a month on Mondays, the group meets at 10 a.m. in Bldg. 16-A.

In addition to the July 4 celebration activities, the International Women's Group has also arranged for an informal tour of the U.S. State Department; an exhibition of the watercolors of Nili Mayer-Oser, a member of the group; and a slide presentation on supermarket shopping.

Their next meeting is on Thursday, July 31, at the Montrose Park Recreation Center on Congressional Lane in Bethesda. For directions and time, call Janet Bartz, 496-4335. The meeting will feature Japan's ancient arts of flower arrangement and paperfolding by members of the group.

"One of the things we found is that many of the wives need help with their English," says Mrs. Bartz. In order to help the women, she has distributed information on a course on how to *Learn-To Speak English*, offered at the Congressional Elementary School. There must be at least 10 students to hold a class, and the class meets every day.

"Besides all the things that we need, we also need volunteers—people who want to help people," says Mrs. Bartz. □

## R&W Plans White Water Outing On Labor Day Weekend

Plan your Labor Day Weekend with a white water outing on the Youghiogheny River in southwestern Pennsylvania.

On Saturday, Aug. 30, swim or fish in the river, or enjoy a hike in Ohiopyle State Park; on Sunday, there will be an all-day canoe trip, and on Labor Day, a white water rafting trip on the "Yock" is scheduled.

Limited to 30 persons, the cost is \$30. For further information, contact the R&W Activities Desk, Bldg. 31, Rm. 1A-18. □



The Sato family (foreground) and the Vitti family came out to enjoy an "all American evening" on July 4.

## VISITING SCIENTIST PROGRAM PARTICIPANTS

### Reported by Fogarty International Center

6/27—**Dr. Halina Miller-Podraza**, Poland, Developmental and Metabolic Neurology Branch. Sponsor: Dr. Peter Fishman, NINCDS, Bg. 10, Rm. 3B03.

6/27—**Dr. Alfredo Moyano**, Spain. Sponsor: Dr. Joseph Aisner, NCI, Baltimore Cancer Research Program.

6/27—**Dr. Hoshibumi Suzuki**, Japan, Laboratory of Oral Medicine. Sponsor: Dr. Abner Notkins, NIDR, Bg. 30, Rm. 121.

6/29—**Dr. Nelly Blumenkrantz**, Argentina, Laboratory of Biochemistry. Sponsor: Dr. Beverly Peterkofsky, NCI, Bg. 37, Rm. 4C15.

6/29—**Dr. Michael Epstein**, Israel, Macromolecular Interaction Section. Sponsor: Dr. Claude Klee, NCI, Bg. 37, Rm. 4A09.

6/29—**Dr. Eli Shaaya**, Israel, Laboratory of Physical Biology. Sponsor: Dr. Leo Levenbook, NIAMDD, Bg. 6, Rm. 137.

6/30—**Dr. Tadashi Namikawa**, Japan, Laboratory of Cerebral Metabolism. Sponsor: Dr. Marian W. Kies, NIMH, Bg. 36, Rm. 1A27.

6/30—**Dr. Yasuyuki Shimohigashi**, Japan, Endocrinology and Reproduction Branch. Sponsor: Dr. Hao-Chia Chen, NICHD, Bg. 10, Rm. 10B17.

7/1—**Dr. Nikolaos Anagnou**, Greece, Pediatric Oncology. Sponsor: Dr. Arthur Levine, NCI, Bg. 10, Rm. 3B12.

7/1—**Dr. Peter G. Bernad**, Canada, Clinical Neurosciences Branch. Sponsor: Dr. Susumu Sato, NINCDS, Bg. 10, Rm. 4N262.

7/1—**Dr. Jacques Charon**, France, Laboratory of Microbiology and Immunology. Sponsor: Dr. Stephan Mergenhagen, NIDR, Bg. 30, Rm. 332.

7/1—**Dr. Yuan-Tsong Chen**, Taiwan, Neonatal and Pediatric Medicine Branch. Sponsor: Dr. James Sidbury, NICHD, Bg. 31, Rm. 2A50.

7/1—**Dr. Atin R. Datta**, India, Laboratory of Molecular Biology. Sponsor: Dr. R. G. Martin, NIAMDD, Bg. 2, Rm. 214.

7/1—**Dr. Geoffrey M. Dusheiko**, South Africa, Digestive Diseases Branch. Sponsor: Dr. E. Anthony Jones, NIAMDD, Bg. 10, Rm. 4D52.

7/1—**Dr. Luca Gianni**, Italy, Clinical Pharmacology Branch. Sponsor: Dr. Charles Myers, NCI, Bg. 10, Rm. 6N104.

7/1—**Dr. Dmitry Y. Goldgaber**, Stateless, Laboratory of Central Nervous System Studies. Sponsor: Dr. D. Carleton Gajdusek, NINCDS, Bg. 36, Rm. 5B25.

7/1—**Dr. Donna Hogge**, Canada, Clinical Oncology Branch. Sponsor: Dr. Stephen C. Schimpff, NCI, Baltimore Cancer Research Program.

7/1—**Dr. Chen-Road Hung**, Taiwan, Laboratory of Behavioral and Neurological Toxicology. Sponsor: Dr. Jau-Shyong Hong, NIEHS, Res. Tri. Pk., N.C.

7/1—**Dr. Toshiro Inubushi**, Japan, Laboratory of Chemical Physics. Sponsor: Dr. Edwin Becker, NIAMDD, Bg. 2, Rm. 120.

7/1—**Dr. Ian G. Kerr**, Canada, Clinical Pharmacology Branch. Sponsor: Dr. Charles E. Myers, NCI, Bg. 10, Rm. 6N104. □

# Living Human Brain Pictures Pinpoint Specific Functions

By Marilyn Sargent, NIMH

Color photographs of the human brain decorate the wall of Dr. Louis Sokoloff's office in the Laboratory of Cerebral Metabolism, National Institute of Mental Health. Taken by Drs. David Kuhl and Michael Phelps of the University of California at Los Angeles, they are actual photos of brain activity in a living, epileptic patient.

They illustrate a major research advance in trying to determine which parts of the brain are involved in specific functions, and could enable increasingly sophisticated clinical interventions for treatment of a variety of neurological and brain disorders.

The pictures were taken with a computerized positron axial tomograph scanner, using techniques developed by Dr. Sokoloff in collaboration with Drs. Kuhl, Phelps, and Dr. Martin Reivich, University of Pennsylvania, Dr. Alfred Wolf, Brookhaven Laboratory, New York, and their colleagues.

The scanning techniques involve the adaptation of a process, developed by NIMH scientists through animal studies, whereby the brain's metabolism of glucose, the source of brain cell energy, is mapped.



Electron CAT images show local glucose utilization in the brain of a normal man with eyes open (l) and eyes closed (r). The darker areas, except for central cavities, show changes in glucose activity. (Taken from color prints.)

Recent technological developments with computerized axial tomography and the use of fluoro-deoxyglucose, a safe analog of radioactive deoxyglucose, have made it possible to scan the human brain.

During the experiments, the researchers inject the animals with radioactively tagged deoxyglucose, a substance metabolized similarly to glucose, but one which remains in the brain longer and thus permits analysis.

In drug studies, the animal is sacrificed at the height of the drug's metabolism; in functional studies, when the animal is eliciting the behavior under study. The brain tissue is frozen and sliced, and the slices exposed to a photographic plate.

The amount of radioactivity in particular areas of the slice are recorded in dark and

light patterns on the plate, the darker areas representing higher radioactivity and therefore higher metabolic activity.



Dr. Sokoloff worked out the mathematical formula needed to convert the variable glucose metabolism rates into color for computer display. Color photographs are then taken off the computer to show the level of excitation in the brain.

Through the use of a mathematical formula worked out by Dr. Sokoloff, the information is programmed into a computer which converts the variable glucose metabolism rates into color.

A color photograph can then be taken off the computer with the various shades of color showing the level of excitation in various parts of the brain.

The varying shapes and amounts of color—the yellows, blues, reds, and greens—in each picture, reflect the differing amounts of glucose being metabolized in various parts of the brain at the particular moment each picture was taken.

The first picture shows glucose metabolism during a severe seizure, the next, during a lesser seizure, and the last without seizure.

Information gleaned from photographs such as these may be a new way to view the mechanisms of epilepsy, and could lead to improved treatment of the condition.

The human brain studies evolved from animal experiments which have, and will continue to offer new findings on the working of



Local glucose utilization is shown in patient with focal epilepsy through the use of electron CAT images. Between seizures, during a seizure, and during a mild focal seizure are depicted. Glucose activity is shown by sharp white areas rimmed by darker ones in the first two photos and by dark areas edged with blurred lighter areas in the right photo.

the brain. Investigations on the effects of morphine, amphetamines, and other drugs in rat brains and nervous systems have already revealed new findings or confirmed hypotheses about how such drugs affect specific areas of the brain.

Information about what is occurring in the brain during normal everyday functions has been examined through Dr. Sokoloff's techniques. For example, those parts of monkey and rat brains involved in seeing, some previously unknown, were found by experiments carried out when the animals' eyes were open and closed.

Dr. John Eberhart, director of the NIMH Intramural Research Program, feels that the process developed by Dr. Sokoloff and his co-workers will contribute to studies in neurochemistry, neuropharmacology, neurology, and eventually psychiatric treatment.

In the future, studies of psychotic states, aging, and dementia are planned with the arrival of a scanner to the NIH campus. NIMH scientists hope to begin studying brain development by looking at brain protein synthesis, using a model similar to the glucose method. □

## REORGANIZATION

(Continued from Page 1)

Separate extramural and intramural activities will be established in the three other research-oriented divisions: Cancer Biology and Diagnosis, Cancer Cause and Prevention, and Cancer Treatment.

The extramural programs will manage both grant and contract portfolios. "This arrangement will help avoid duplication of efforts between program-initiated and investigator-initiated efforts," Dr. DeVita said.

A fifth division, the Division of Extramural Activities, will be concerned with the process of peer review of both grants and contracts and the business management of NCI grants.

The Institute's Viral Oncology Program, established in 1965, has been reorganized in DCCP. Investigator-initiated studies of tumor viruses continue within a Carcinogenesis Extramural Program, while the several intramural laboratories involved in this research have been incorporated in DCCP's Carcinogenesis Intramural Program.

The Carcinogenesis Testing Program becomes the Bioassay Program and will continue as a major component of the National Toxicology Program. □

## Volunteers Needed for M.C. Friendly Visitor Program

The Centralized Friendly Visitor Program, sponsored by the Mental Health Association of Montgomery County, is offering its spring training session this month to volunteers who are interested in serving as Friendly Visitors to people of all ages who have handicaps, illness, or lack regular contact with the outside world.

Volunteers must be 18 years of age or older and willing to spend at least 5 hours a month for 1 year as a Friendly Visitor. To obtain an application or for more information about the program, call 949-1255, weekdays between 9 a.m.-4:30 p.m.

# FIC Welcomes Arrival of Two Visiting Scholars

## Dr. Grunberg-Manago Working On Molecular Biology



Dr. Grunberg-Manago will present a series of seminars on the regulation of translational genes.

Dr. Marianne Grunberg-Manago, professor at the Institute of Biology of the Rothschild Foundation in Paris, recently arrived on campus to begin her term as a Fogarty Scholar-in-Residence.

Dr. Grunberg-Manago is well-known for her outstanding work in molecular biology, and particularly for her work on RNA phosphorylating enzymes. She has also been a visiting professor at a number of leading American universities and has previously visited NIH.

During her stay, she will be working with the Laboratory of Biochemistry, NCI, and with the Laboratory of Biochemistry, NHLBI. In the future, she will present a series of seminars on the general topic of regulating translational genes.

Dr. Grunberg-Manago and her husband, Armand, will reside in Bldg. 20. □

## FAES Graduate School Schedules Fall Semester Evening Courses; Catalog Now Available

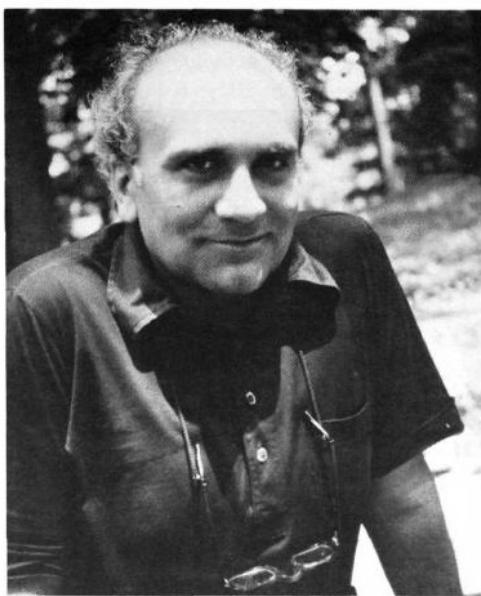
The FAES Graduate School at NIH has scheduled courses for the fall semester. The evening classes, sponsored by the Foundation for Advanced Education in the Sciences, are given on the NIH campus.

Tuition is \$32 per credit hour, and courses may be taken for credit or audit. Courses that qualify for Institute support as training should be cleared with supervisors and administrative officers as soon as possible.

Courses are offered in biochemistry, biology, genetics, chemistry, physics, mathematics, medicine, pharmacology, toxicology, physiology, immunology, microbiology, nursing, psychology, psychiatry, statistics, languages, administration, and courses of general interest.

It is often possible to transfer credits

## Dr. G. Salvatore Renowned For Thyroid Protein Research



Dr. Salvatore, who was here in 1964, has maintained close ties with NIH.

Dr. Gaetano Salvatore, well-known for his research on thyroid proteins, arrived June 18 to resume his duties as a Fogarty Scholar-in-Residence.

Dr. "Nino" Salvatore is a professor of "general pathology" (pathological biochemistry) at the University of Naples, Faculty of Medicine. In 1964 he discovered the thyroid 27S iodoprotein, while he was an NIH visiting scientist in NIAMDD, working with Dr. J. E. Rall.

He has maintained close ties with NIH through his students and younger colleagues whom he has sent here for research experience in different laboratories.

In 1978, together with Drs. Sarah Ratner and Howard Schachman, he organized a set of very successful evening discussions in Stone House on ligand binding, receptor sites, and membrane function.

During the remainder of his scholarship this year and in 1981, Professor Salvatore will organize a series of seminars on current topics in molecular endocrinology. He will also study the relationships between the U.S. and European scientific communities, particularly in basic areas of biomedical research.

Dr. Salvatore and his wife, Marisa, will reside on campus in Bldg. 20. □

earned to other institutions for degree work, and many courses are approved for AMA Category I credit.

Classes will begin on Sept. 15. Registration is possible by mail now through Aug. 15 and in person from Sept. 4 through Sept. 10. A registration form must accompany the check or training form.

Catalogs are available in the Graduate School office (Bookstore) in the Clinical Center, Rm. B1L-101. To have one sent, call 496-5272. □

## Best Life Sciences Book Award Presented to Dr. Goldberger

An award for the Best Life Sciences Book of 1979 was recently presented to Dr. Robert Goldberger, NIH Deputy Director for Science, as editor of the winning volume.

The Association of American Publishers selected *Biological Regulation and Development, Volume I, Gene Expression* for its prestigious award.

Dr. Goldberger was assisted in planning the volume by an editorial board consisting of Drs. Paul Berg, Stanford University; Leroy Hood, California Institute of Technology; Kivie Moldave, University of California, Irvine; Robert Schimke, Stanford University; and Philip Leder, NICHD.

The treatise consists of a series of volumes, the second of which is slated to appear later this year. According to Dr. Goldberger, the third volume is well on its way to completion, the fourth just beginning to evolve. □

## Booklet Tells How To Cope With Insomnia

Insomnia is a problem for many people. The Food and Drug Administration has a free reprint available—*Insomnia*—to help you learn how to cope with this problem.

FDA suggests that insomniacs should avoid beverages containing caffeine, since they act as stimulants in most people. Nicotine is also a stimulant, and many ex-smokers have reported improved sleep after quitting.

In a research study, a beverage that helped sleeplessness was the old folk remedy, a glass of warm milk. Also, regular exercise during the day has a beneficial effect on sleep.

For a free copy of *Insomnia* write to Consumer Information Center, Dept. 594H, Pueblo, Colo. 81009. □



Carol M. Stevens (r), library technician at NIEHS, receives an award from NIEHS librarian Dav Robertson. She was cited for purchasing more than 1,900 books for the Institute's technical collection, maintaining purchasing information in a computer retrieval system, and processing and cataloging the books upon delivery. With speed, efficiency, and accuracy Ms. Stevens made the new acquisitions available to researchers in a minimum amount of time.

## Bldg. 31 Window Project To Be Completed; Windows May Open Under Special Conditions

As a result of discussions with representatives of the Division of Engineering Services and the occupants, Dr. Edwin D. Becker, NIH Associate Director for Research Services, has agreed that windows in Bldg. 31A and B wings may be opened but that responsibility for their proper control will rest with the occupants.

Dr. Becker said that in order to make this approach work, occupants must adhere to the following guidelines:

- Windows may be opened on weekends when the air conditioning systems are shut down.
- When the air conditioning system is working, windows should normally be closed; any opening should only be to alleviate severe discomfort. The building engineers should be asked to correct any continuing problems, rather than relying on habitual opening of windows.
- Care must be exercised when opening windows to prevent the window from colliding with and damaging the sun shades.
- All windows should be closed when leaving the building.
- The sun shades are designed to slide away from one half of the module window opening to accommodate window washing. Occupants should not open the sun shades since it would defeat the purpose of the shades.

About 35 representatives of employees in Bldg. 31's A and B wings met on July 1 with NIH officials to question the installation of dark sun screens and double-paned windows.

## Stan Kissel Appointed Chief Of CC Social Work Dept.

Stanley J. Kissel has been appointed chief of the Clinical Center's Social Work Department. Mr. Kissel, working for the PHS for the past 18 years, formerly held positions as chief of the social work department in Baltimore and chief of the social work staff for the Bureau of Medical Services, Division of Hospitals and Clinics, in Hyattsville, Md.

Beginning his career in 1962 as a social worker in Staten Island, N.Y., he became chief of that social work department in 1968. He then worked as a social worker in San Francisco and is a former personnel management specialist of the health services office in Rockville.

Mr. Kissel is a member of numerous professional organizations such as the National Association of Social Workers and the Council on Social Work Education.

He is presently the HSO representative on the national board of directors for the Commissioned Officers Association and secretary of the social work section of the American Public Health Association.

In 1979, while working at the Bureau of Medical Services, Mr. Kissel received the director's Bureau of Medical Services Award and the PHS Plaque. □

Despite criticism and sometimes sharp questioning from many of those present, Dr. Becker said that the \$800,000 project would be completed.

This course is indicated because the changes are expected to result in significant savings of energy costs, and to improve the effectiveness of the Bldg. 31 atmosphere-control system, Dr. Becker said.

Much discussion focused on the fact that the screens interfere with the opening of windows. Others complained that there is noticeable darkening of interiors.

Ross Holliday, director of the Division of Engineering Services, on hand to answer questions about the project, said that the screens are expected to cut the "sun load" on Bldg. 31 air conditioning by about 80 percent, and that the double-paned windows on the opposite side of the building will cut heat loss by about 20 percent.

Both changes should permit better operation of the heating and cooling systems, with greater comfort for building occupants despite localized inconveniences.

The complexity of the engineering problem was illustrated by Mr. Holliday, who noted that in December and January, the building's air system is called upon to provide maximum cooling and heating at the same time.

The paradox is due to the fact that the rays of the winter sun, low in the southern sky, are collected by the large areas of glass fronting the south side of the A wing, while the north side of the B wing is completely shaded. □



Mr. Kissel says he looks forward to the challenge of working with a competent and skilled social work staff at the CC.

## Jewish Theater Dept. To Perform At CC on July 31

The Jewish Community Center Theater Department will present "100 Years of American Music Theater" for Clinical Center patients on July 31, at 7 p.m., in the Masur Auditorium. For further information, call Jane Millman, Patient Activities Department, 496-2276. □

## Alexander Davis Retires; Fabric Care Chief Had 40 Years Govt. Service



Mr. Davis was awarded the CC's first EEO Award in 1972 for outstanding contributions as an EEO counselor, a Certificate of Appreciation in 1976 from the HEW Secretary for outstanding contributions as a manager; and in 1978 was chosen "Manager of the Year" by the National Association of Institutional Laundry Managers.

Alexander Davis, chief of the Clinical Center Fabric Care Department, retired July 3 with more than 40 years of Government service.

After serving in the U.S. Army, he worked at the Walter Reed Army Medical Center for 12 years as a ward attendant, janitor, and housekeeping supervisor.

He came to the CC in 1952 spending 19 years in the Environmental Sanitation Control Department, where he moved from housekeeping supervisor to assistant chief. In January 1972, Mr. Davis became chief of the Fabric Care Department.

Under his administration, many longstanding problems in the 42-employee department were addressed and eliminated. Work quotas were abandoned, hazardous work conditions improved, and annual safety inspections instituted.

Supervisors formerly recruited from outside were selected from within the department; employee grades and salaries were upgraded; employees worked Monday through Friday instead of extended work weeks.

The laundry—known to reach temperatures as high as 112°F—was completely air-conditioned and renovated and its name changed to the Fabric Care Department. □

## R&W Travels to Baltimore To See Orioles

R&W is sponsoring several trips to Baltimore this summer to see the Orioles.

The \$10 fee includes bus fare and reserved seats for baseball games on the following dates: Sunday, July 20, Texas Rangers; Friday, Aug. 15, New York Yankees; and Sunday, Aug. 31, California Angels.

Sign up now at the R&W Activities Desk, Bldg. 31, Rm. 1A-18. □

# Cross-Country Jogging Grandfather Brings Fitness Crusade to Institute on Aging



U.S. Senator Spark M. Matsunaga (D-Hawaii) meets Don Almy on the steps of the Capitol at the end of his cross-country run to present him with a certificate of appreciation.

Don Almy, the 68-year-old "happy jogger from Hawaii," visited the National Institute on Aging the day after he completed a year-long, 3,127-mile cross-country run on foot. His effort ended under the glare of television lights on the steps of the U.S. Capitol. The news coverage was a fitting finale to an odyssey whose purpose was to herald the cause of better health and physical fitness among the Nation's senior citizens.

Mr. Almy started his trip 13 months ago in Hawaii, where he and his wife, Camille, and their dog boarded an airplane for Los Angeles. Upon their arrival, they purchased a 30-foot mobile home and started their trek across the country.

"I jogged anywhere from 9 to 13 miles at a time, most days I covered 26 miles," said Mr. Almy. He discussed his 6-day-a-week running regimen with Dr. Milo D. Leavitt, Jr., special assistant for Medical Program Development and Evaluation, NIA, during their meeting at NIH on June 24.

Mr. Almy explained the reason why he set out on such a trip at his own expense—he wanted to learn about older citizens, their thoughts about growing old, their health, and how they regarded regular physical exercise for people their age.

Health and physical fitness have not always been of interest to Don Almy; he was never a college athlete nor a person who exercised regularly.

It was not until his retirement as a medical administrator from the U.S. Air Force that he started to take an interest in health—particularly his own.

"In 1965, I had to take a disability retirement from the Air Force due to heart problems," he says. "I was placed on medication. I grew despondent, overweight, my blood pressure and cholesterol levels shot up.

"I developed chronic headaches and an irregular heartbeat. By the time I was 62, I was

a sick old man, dependent on five prescription drugs and steady doses of aspirin."

Now, only 6 years later, Mr. Almy's weight has dropped from 195 to 145 (he is 5 feet 7 inches tall), his blood pressure and cholesterol are normal, headaches are gone, he is off medication, and says that he has never felt better physically or mentally. He attributes his health turnaround to the decision he made in 1974 to correct his diet and start a regular physical fitness program.

After consulting his physician, he says, "I started off slowly by walking then just fast walking." From these early attempts to improve his physical condition, Mr. Almy learned enough to be able to develop and teach a physical fitness course for Honolulu senior citizens.

While teaching, he was working on a master's degree in gerontology at the School of Public Health, University of Hawaii.

Every day during his cross-country trip he kept a log of the miles he ran, his cardiovascular rates, body temperature, and how he felt after each run. These records were relayed back to the University of Hawaii's School of Medicine for review. He spiced up his daily running during the trip by participating in eight races, which netted him three trophies.

Five years ago at the age of 63, he entered his first 26-mile marathon, since then he has run in 10 marathons. Don Almy is also the proud holder of an Amateur Athletic Union card.

From his conversations with senior citizens at 113 locations across the Nation, Mr. Almy says that one of the biggest problems the elderly face is being negatively "stereotyped" by the public as to what is expected of them mentally and physically. Unfortunately, he says, that stereotype overtakes some of them.

Don Almy believes wholeheartedly that senior citizens can do more and enjoy more than most of us believe possible. During his trip he found only four senior citizens centers providing regularly scheduled exercise classes.

Besides the talks he gave to stimulate interest in physical fitness among older persons, Mr. Almy submitted to 97 radio, television, and newspaper interviews and countless inquiries from passersby, and even from fellow runners.



Dr. Leavitt (l) bids farewell to Mr. Almy in front of his mobile home that he and his wife used during their trip across country.

While he was running, his wife, Camille, was parked several miles down the road working out on an exercise bicycle in their motor home. An avid physical fitness person herself, Mrs. Almy was sidelined by an early hip injury. She is a former opera singer and special education instructor.

Now that his trip is completed, Don Almy plans to write a book about his experiences. He is returning to Hawaii within the next few months because he plans to be in the Honolulu Marathon on Dec. 7. □

## Average Weight Best, Says NHLBI Study

If you're of average weight for your height, you may be better off than those who are over- or underweight, according to a recent report by Paul Sorlie and Tavia Gordon of NHLBI's Biometrics Research Branch, and Dr. William Kannel, former director of the Framingham study.

A 24-year-study of 5,209 Framingham men and women, aged 30 to 60, revealed that lean as well as obese people have higher mortality rates than those of moderate weight.

Although it was found that the number of lean people who smoked was greater than those in the other weight categories, that difference did not account for the excess mortality among the lean.

The National Heart, Lung, and Blood Institute researchers compared results of the Framingham study with the 1959 U.S. insurance industry Build and Blood Pressure Study, using identical body build criteria and similar followup procedures.

The 1959 study showed a direct relationship between weight and rate of death. For any given height, with more weight, there is a greater risk of death; with less weight, there is less risk of death. Minimum mortality was associated with weight well below the norm.

As a result of this study, tables of desirable weights by height and body build prepared by Metropolitan Life Insurance Company became a standard for physicians and patients.

The Framingham study indicates that increased mortality, in 6 years, is associated not only with weighing more than average but also with weighing less than average. The point of minimum mortality rests about at average weight.

What is a desirable weight? The Framingham study still supports the idea of weight reduction if obese but questions the advantages of weight reduction in people of average or near average weight.

"While these results do not rule out the possibility that such reductions may be of some health advantage, proof will have to wait for additional data," Mr. Sorlie says.

A still unpublished 1979 study by the insurance industry contradicts the results of their earlier study and confirms the Framingham data in showing excess mortality among the underweight as well as among the overweight.

Complete results of the Framingham comparative study are published in the May 9 issue of the *Journal of the American Medical Association*. □

# Lead Poisoning Detected in Prosperous Adults; New Victims Often Show No Classic Symptoms

Lead poisoning—which is often related to small children who have eaten paint chips from decaying ceilings and walls in slum dwellings, and more recently, with people who breathe fumes from battery casings burnt for inexpensive fuel—is being detected in an entirely different and unexpected population.

At the environmental health sciences laboratory at Mount Sinai Hospital in New York City, researchers have detected cases of lead poisoning in prosperous adults.

This group of victims encounter lead dust and fumes not as a result of hardship and deprivation, but in the course of a pleasurable pastime, in the preservation and restoration of old buildings and homes, often their own residences.

While stripping coats of old lead paint from interior walls, ceilings, and woodwork, prosperous young professionals have fallen prey to poisoning usually associated with the poor.

Lead poisoning is not unknown among the affluent. Some students of ancient history believe that the downfall of the Roman Empire was a result of lead exposure through the construction of drinking water systems and the making of pottery from materials containing high concentrations of lead.

In contemporary history, Clare Boothe Luce, a former ambassador to Italy, resigned her post in the mid-1950's complaining of illness later attributed to lead exposure from decaying paint in her Italian residence.

## Check Redemption Value of Older U.S. Bonds

There may be advantages in retaining long-held U.S. Savings Bonds despite the interest-rate explosion and mistaken reports that older bonds stop earning interest this year.

The U.S. Treasury Department says before switching to another investment, you should check your bonds' redemption value, consider their effective yield, and calculate the tax consequences of cashing them in.

You can check bond values using the Table of Redemption Values for U.S. Savings Bonds at your bank. Or you can get your own copy by sending \$1.30 to the Consumer Information Center, Dept. 163H, Pueblo, Colo. 81009.

Some people became concerned that older bonds would stop paying interest this year following introduction of the new Series EE Savings Bond. But it won't be until 1981 that even the very oldest bonds, issued in 1941, stop paying interest as they reach final maturity.

All bonds issued between 1941 and April 1952 reach final maturity 40 years after the date of issue shown on the bond. Bonds issued since April 1952 mature between 1992 and 2004.

But your savings bonds investment continues to build until this final maturity, especially since none of your investment (including the interest) has been diminished by taxes.

This June, for instance, a \$100 bond bought in June 1946 is worth \$296.16, four times

Dr. Alf Fischbein, Mt. Sinai Center, points out that these new lead poisoning victims often present none of the classic symptoms, no weakness in the wrist, no colic, no constipation, and no lead lines in the gums.

In fact, the symptoms are often mistakenly attributed to abdominal disorders, overwork, stress, or fatigue.

In one case cited in an article in *Emergency Medicine* (Apr. 30, 1980), the patients' lead exposure came partly from using a heat gun, a tool similar to a hand-held hair dryer except that it generates a much higher heat, approximately 700°F.

The gun is used to quickly peel away layers of old lead paint, but is also hot enough to generate lead fumes. The patient also used a rotary sander which generated dust from the 50 percent lead paint.

In the article, Dr. Fischbein gives both diagnostic and treatment suggestions to physicians dealing with potential or established incidents of lead poisoning.

He said that physicians not used to treating lead poisoning may not know that acceptable blood lead levels have been lowered recently from 80 micrograms per hundred milliliters to 40 for men and 30 for women.

Blood level is not the entire story since lead can accumulate in various organs and may cause poisoning while blood levels are "safe." Doctors should ask questions to reveal lead exposures and examine urine samples for specific indicators in diagnosing possible lead poisoning. □

## USDA Graduate School Catalog Available

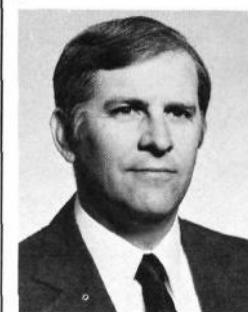
the purchase price of \$75, and will continue to build in value until June 1986. So you should consider the sizable earnings already sheltered in older bonds before shifting to other investments.

If you're retiring in the next few years, you may want to hold on to older bonds until you reach a lower tax bracket. And if your pension plan pays out tax-free income from past contributions first, you can avoid Federal tax on bond earnings when they're cashed early in retirement. Of course, savings bonds are free of state and local income taxes.

If you need current income from your bond investment but want to continue your sheltered earnings, you can convert Series E bonds to interest-bearing Series HH bonds without tax or penalty. These bonds pay interest semiannually by Government check while you hold on to them until your tax bracket is lower. □

## Dr. Clifford Patrick Joins NHLBI as Branch Chief

Dr. Clifford H. Patrick has joined NHLBI's Division of Lung Diseases as chief of the Prevention, Education, and Manpower Branch. He will direct the Division's programs for prevention and control of respiratory diseases, smoking cessation, and personnel training.



Dr. Patrick

Demography, Epidemiology, and Biometry Program at NIA.

Prior to joining NIA in 1978, he had been employed by Oak Ridge National Laboratory; the U.S. ERDA (now DOE); and the College of Industrial Management, Clemson University.

Dr. Patrick earned his Ph.D. degree in economics from Duke University, specializing in demography, and was a postdoctoral fellow in epidemiology at the Johns Hopkins University School of Hygiene and Public Health. □

## AALAS Branch Seminar To Be Held Sept. 3-4

The 10th annual seminar of the National Capital Area Branch, American Association for Laboratory Animal Science, will be held on Sept. 3 and 4 at the Marriott Hunt Valley Inn, Hunt Valley, Md.

The theme will be the ABC's of Laboratory Animal Science in the 80's. Morning and afternoon sessions include: Animal Models and Their Alternatives; Biology and Care; and Conservation of Energy.

Autotutorials, workshops, technique papers, athletic events, and a placement service will be features of this year's meeting.

For additional information write to: Dr. Harry Rosmiarek, Animal Resources Division, USAMRIID, Fort Detrick, Frederick, Md. 21701. □

## New Booklet Encourages Toy Safety

Toys are great for kids. They bounce, cuddle, waddle, rattle, jump, run, and sing. But some toys aren't so great. They can cut, choke, shock, or burn.

All toy manufacturers must now follow mandatory government safety standards that will prevent most toy hazards, but it still pays to keep a watchful eye out for problems. To help you, the Consumer Product Safety Commission's booklet, *Super Sitter*, has a special section about toy safety.

Other tips included for sitters are about medicines, poisons, high chairs, and cribs. For a copy, send 50 cents to the Consumer Information Center, Dept. 110H, Pueblo, Colo. 81009.

# Insulin-Producing Islet Cells Transplanted Successfully from Rat to Diabetic Mouse

National Institute of Arthritis, Metabolism, and Digestive Diseases grantee scientists in St. Louis, Mo., have made a significant research advance in the search for better methods of treating diabetes.



**Dr. Lacy**  
producing pancreas

Dr. Paul Lacy and colleagues at the Washington University School of Medicine report in the July 11, 1980, issue of *Science*, that they have developed a procedure for the successful transplantation of islets, clusters of insulin-

cells, from one animal species to another.

Their investigations, supported by the NIAMDD and the Kroc Foundation, show that the insulin-producing beta cells within the islets, taken from healthy rats, could reverse diabetes in the diabetic mice that received the transplants.

The most severe form of diabetes, insulin-dependent diabetes mellitus (IDDM) affects approximately 300,000 Americans. The disorder occurs when the beta cells in the pancreas degenerate, producing little or no insulin.

Lacking the ability to secrete natural insulin, persons with this form of the disease must take daily injections of this hormone to regulate the body's use of glucose (sugar) for energy or storage.

Treating diabetes by this method, however, has not been entirely satisfactory since daily insulin injections do not mimic the natural action of normal beta cells in the precise minute-to-minute control of blood glucose and other metabolic processes.

Many scientists believe that lack of good blood sugar control results in the chronic complications of diabetes affecting the eyes, kidneys, heart and nervous system.

Successful transplantation of healthy insulin-producing islets that restore precise blood sugar control could possibly prevent, arrest, or reverse these life-threatening complications.

Islet cells and whole pancreas glands have already been successfully transplanted into inbred strains of diabetic animals. However, islet cell transplantation in experimental animals of different strains has been impeded by immune rejection, a natural defense

## CORRECTION

An honorary degree was conferred upon Dr. Jesse Roth, NIAMDD, by the University of Upsala, Sweden, for his "outstanding research accomplishments in the field of hormone receptors, and in appreciation for his participation in training activities of the medical faculty of the University."

In the previous issue of *The NIH Record* (July 8, 1980), Dr. Roth was incorrectly cited for training the medical faculty. □

response by which the body destroys transplanted tissue as a foreign substance.

Significant progress in this area was made last year when Dr. Lacy, in collaboration with Drs. Joseph M. Davie and Edward Finke, transplanted rat islet cells into rats of a different genetic strain without graft rejection.

This successful transplant led to the research team's most recent accomplishment in transplanting insulin-producing islets from rat to mouse without immunologic rejection.

The investigators placed healthy rat islets in tissue culture for 7 days at 24° C to reduce the rejection-inducing capability of the immunologically active cells in the islet tissue.

Immediately before transplantation, the diabetic mice received a single injection of immune-suppressing drugs to minimize their natural response and to reduce the risk of graft rejection.

The rat islets were transplanted into livers of 10 diabetic mice. Within 2 to 4 days, the elevated blood glucose levels of the mice returned to normal. Significantly, 7 of the 10 mice continued to maintain normal blood glucose levels 116 days after transplantation.

The treated mice will be closely observed to determine if rejection of the islet cells will occur at a later time, or whether this procedure has produced indefinite graft survival. Those diabetic mice who received transplants of untreated rat islets without the immune-suppressing injection rejected their grafts within 7-12 days.

The ultimate research goal is to discover if islet incubation at low temperature combined with a single immune-suppressing injection will eventually permit successful transplants into human diabetics.

While the results reported are a significant scientific advance, it must be stressed that their application to the treatment of diabetes in man is not yet feasible.

## Nominations Being Taken by FIC For Its Scholars-in-Residence Program

The Fogarty International Center is now taking nominations for its Scholars-in-Residence Program. This program, which began in 1969, has brought over 90 scholars from 18 countries to NIH.

Any NIH staff member can submit a nomination to the chief, Scholars-in-Residence Program in FIC. Nominations are reviewed by an advisory panel of senior scientists at NIH.

Upon approval, the Fogarty Scholars are invited to engage in individual study on subjects of their own choosing. They are encouraged to interact with NIH staff through lectures, seminars, and informal discussions. They are also free to work in any intramural laboratory at the invitation of a scientific staff member and the laboratory chief.

Nominations should include a resume of the candidates' career, a statement of their contributions to science and research and their standing in the scientific community.

Emphasis should be placed on the nominee's ability to interact with other scientists.

Before this type of islet transplantation can be attempted in humans, the adaptability of the culture procedure must be examined for suitability to the islets transplanted from other animals, as well as man.

Specific cell type(s) and the numbers of these cells responsible for immune rejection must also be identified. Procedures to eliminate these cells prior to islet transplantation could then be developed.

The researchers hope to find whether islet transplants into different species will maintain normal metabolic activity in the recipients for extended time periods. Similarly, it will be important to determine the minimum number of transplanted islet cells needed to normalize blood glucose levels.

Further research is needed to determine the best site for islet implantation to achieve optimal blood glucose control, as well as to permit removal of the islets if an adverse reaction should occur.

Adequate supplies of islet tissue for transplants need to be established. The use of animal islets for human transplantation could possibly remedy the present scarcity of human tissue and ensure sufficient supplies to meet future demands.

Extraction of islet cells from the pancreas of man, cattle and pigs also needs to be perfected. Presently, the yield of islet cells from these animals is relatively low compared to the amount obtained from the pancreas of small animals.

To preserve these supplies, methods must be developed for long-term storage of islets.

If these problems can be resolved through continued research, it may be possible to use this technique for treating diabetes in man, and subsequently to determine the relationship of normalized blood glucose control and the development, prevention, or arrest of the chronic complications of diabetes. □

All nominations should be accompanied by a curriculum vitae and bibliography as well as the names of at least three references, including persons outside NIH. The Fogarty International Center will request references. Scholars are appointed without regard to nationality, race, sex, or creed. Citizens of any country may be appointed.

Nominators should be prepared to act as, or identify, a campus sponsor in the event their nominee is awarded a scholarship.

Final selection of candidates is made by the FIC Director on the advice of the Scholars Advisory Panel, composed of members of the NIH senior staff.

Nominations should be forwarded to: Chief, Scholars-in-Residence Branch, Fogarty International Center, Bldg. 16A, National Institute of Health, Bethesda, Md. 20205.

Information about the program can be obtained by calling 496-4161. □