

# The NIH Record

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## Task Force Recommends Steps To Strengthen Division of Equal Opportunity

A Task Force appointed by NIH Director Dr. Donald S. Fredrickson to evaluate the Division of Equal Opportunity has submitted eight proposals for strengthening the DEO as well as the equal opportunity, affirmative action, and civil rights programs of NIH.

The group recommended that the currently vacant position of Director, DEO, be reconstituted as NIH Associate Director for Equal Employment Opportunity, Affirmative Action, and Civil Rights Programs, and that recruitment for the position at the Senior Executive Service level be initiated at once.

The Task Force emphasized that the occupant of the new position should report directly to the NIH Director and recommended that a small EEO council composed largely of non-NIH members be established

to advise the new Associate Director.

The Task Force also recommended the reorganization, strengthening, and upgrading of the current Division of Equal Opportunity and the creation of the post of Deputy Associate Director EEO/AA/CR.

A seven-member Arbitration Board was proposed by the Task Force as a means for accelerating the process of adjudicating discrimination complaints.

Other recommendations included a re-vamping of the extramural Civil Rights Compliance Program by making the Associate Director EEO/AA/CR responsible for establishing and monitoring compliance criteria and policies as well as for clearance of contracts; special emphasis on the Federal Women's

(Continued on Page 9)

## Dr. Fredrickson Reaffirms Commitment To Improve Equal Opportunity

After expressing appreciation to the Task Force members for their report on the evaluation of the Division of Equal Opportunity, NIH Director Dr. Donald S. Fredrickson announced that he had asked that 500 copies of the Report be printed for distribution to the NIH staff.

In response to the report, Dr. Fredrickson said:

"I intend to work personally with the DEO in developing organizational options for more effective EEO, affirmative action, and civil rights programs based on the recommendations of the Task Force, the shortly expected report on the Conflict Study and my first-hand impressions.

"The report urged immediate implementa-

(See COMMITMENT, Page 9)

## T. W. Blakeney Appointed Acting Director of DEO

Theodore W. Blakeney, Jr., has been appointed Acting Director of the Division of Equal Opportunity.

A native of Charlotte, N.C., Mr. Blakeney came to NIH in 1972 as the EEO coordinator for NICHD. In that position, he was the principal advisor to the Institute Director on all activities concerning civil rights and affirmative action. He helped develop for that Institute special emphasis programs to include women, Hispanic, aged, and the handicapped.

### Experienced in Counseling

He has had extensive experience in counseling. Previously, he worked for the Montgomery County Board of Education, where among his many responsibilities he provided career and academic counseling for approximately 350 students and coordinated a part-time job placement program.

Mr. Blakeney is temporarily filling the vacancy left by Jose Acevedo, Jr., who has been Acting Director since Dec. 10, 1979.

(See MR. BLAKENEY, Page 12)

## NINCDS Marks Its 30th Anniversary

The National Institute of Neurological and Communicative Disorders and Stroke is celebrating its 30th anniversary. See pages 5 to 8. □

## Dr. DeVita Takes Oath of Office as NCI Director



Dr. DeVita is sworn in as NCI Director by HHS Secretary Harris, with his wife, Mary Kay, assisting. NIH Director Dr. Donald S. Fredrickson officiated at the ceremony.

Dr. Vincent T. DeVita, Jr., was sworn in as the ninth director of the National Cancer Institute at ceremonies held Aug. 8 in the auditorium of the Lister Hill National Center for Biomedical Communications.

HHS Secretary Patricia Roberts Harris administered the oath of office to Dr. DeVita, who stood with his wife, Mary Kay, and daughter, Elizabeth.

In her introductory remarks, Secretary Harris said that Dr. DeVita's "success in developing treatments for Hodgkin's disease . . . is world renowned."

In his reply Dr. DeVita said, "In the past 5 years, there has been an unparalleled explosion in technology in the biological sciences . . . Experiments requiring DNA sequencing,

(See DR. DEVITA, Page 10)

# The NIH Record

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## Applications for Graduate-Level Courses Now Available At Career Education Center

The Career Education Center (formerly Upward Mobility College) is accepting applications for enrollment in graduate level courses. The closing date for applications is Sept. 15.

The fall courses, taught by full-time faculty from American University, will begin Sept. 29.

These courses are designed to provide present and future NIH managers with an academic core of managerial experience in public administration, financial management, computer science, administration of science, and personnel administration.

Classes meet once a week for 2½ hours in the evening and are held in classrooms in Bldg. 31. This program, funded centrally at no additional cost to B/I/D's or individuals, is administered by the Career Development Branch, DPM.

For more information, call the Career Development Branch, 496-6211. □

## Volunteer Tutors Are Needed To Teach Reading to Adults

Volunteer tutors are needed, for as little as 2 hours a week, to teach reading to adults who want and need to learn.

In Montgomery County alone, an estimated 30,000 adults are functionally illiterate, and another 35,000 foreign-born adults need help learning to speak English.

The Literacy Council of Montgomery County trains volunteer tutors to work with these adult students.

A workshop of five 3-hour sessions in technique, plus participation at in-service training session will be held.

Tutor training workshops begins Sept. 10 and runs through November. To volunteer, call 770-4550. □

## Hispanic Heritage Program Features Job Fair Sept. 25

A Job Fair for Hispanic Clerk Typists is one of the activities planned for the 1980 Hispanic Heritage Week, which begins Sept. 22.

Two clerk typist tests will be given prior to the job fair in Bldg. 31, Rm. B3C-08. One test will be given on Thursday, Sept. 4, at 9 a.m. (no admittance after 9), and the other on Friday, Sept. 5, at 1 p.m. (no admittance after 1).

Hispanics interested in taking the clerk typist test must contact Marlene Patino, Bldg. 31, Rm. 2B-40, 496-9013, by Aug. 29.

To take the test, participants should: be an American citizen; have a Government Standard Form 171 filled out; be able to type a minimum of 40 words per minute; and be willing to work part-time (32 hours per week). □

## Minority Students Working As Summer Research Aides

Black, Hispanic, Native American, or Oriental high school students from all over the U.S. are learning about biomedical research this summer, while working as Federal research apprentices in universities, health professional schools, hospitals, and other research centers.

The program, sponsored by the Division of Research Resources, is operating in 21 states, at 45 institutions already receiving biomedical research support grants from NIH.

Each institution has selected apprentices from the minority high school students in their areas. The 200 students will work for 8 to 12 weeks and earn minimum wage or the prevailing scale, whichever is greater.

"This is a tremendous opportunity for these young people to learn firsthand about biomedical research," said HHS Secretary Patricia Roberts Harris. "It is my hope that this experience will encourage many to choose careers in the biomedical sciences, an area in which minorities are still underrepresented."

Other Federal agencies supporting similar programs in 1980 are the Department of Defense, National Aeronautics and Space Administration, National Science Foundation, U.S. Department of Agriculture, Environmental Protection Agency and the Department of Energy.

The overall program goal is to employ at least 1,000 high school students this summer. The NIH portion of the summer program funds 200 students at a cost of \$400,000.

At the end of the summer, students and program directors are sending written reports summarizing their experiences to the biomedical research support grant program. The program, established 18 years ago, administers this new minority research opportunity program for the HHS.

President Carter announced the administration's research apprenticeship program for minority high school students last October. The Office of Science and Technology asked NIH to provide 200 positions for the students this summer. □

## TRAINING TIPS

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

	Course Starts	Deadline
Office-Skills		
Medical Terminology	Sept. 8	Aug. 25
Seminar for Executive Secretaries	Sept. 22	Sept. 9
American Language Shorthand (ALS)	Sept. 15	Sept. 2
Communication Skills Reading Improvement	Sept. 30	Sept. 16

To learn more about these and other courses in office and communication skills, contact the Training Assistance Branch, 496-2146. □

## FAES Offers 'Open Season' For Health Insurance To Eligible Subscribers

The Association of Visiting Fellows Group Hospitalization Program, sponsored by the Foundation for Advanced Education in the Sciences, will have "Open Season" for new subscribers from Aug. 25 through Sept. 12.

Coverage will be effective Oct. 1. Current subscribers may change their coverage to "Family" at this time.

NIH postdoctoral fellows, commissioned officers, visiting fellows, associates, scientists, experts, consultants, and guest workers who have not yet enrolled in the program will be eligible for coverage with certain restrictions because of joining late.

Applications and premiums are due in the FAES insurance office by Sept. 12.

For further information call Nancy Cassity, 496-5272. □

## Tony Parker, America's Cup Sailor, To Speak at Sailing Club Meeting

Tony Parker, America's Cup sailor, will be telling some inside stories about the prestigious international sailing race at the next meeting of the NIH Sailing Club, on Thursday, Aug. 28, at 8 p.m., in Bldg. 30, Rm. 117.

Mr. Parker, a Washington lawyer and local J/24 skipper, has been both helmsman and tactician aboard the Twelve-Meters. □

## Fall Tennis Tournament Begins Sept. 6; Open to Club Members

The 1980 NIH Fall Tennis Tournament will be held on Sept. 6-7, 13-14, and 20-21. Events scheduled are men and women's singles and doubles and mixed doubles.

Entry forms are available at the R&W Activities Desk, Bldg. 31, the NIH tennis courts, or by calling Dano Cosenza-Murphy, 496-5789.

The entry fee is \$3 per event, and the deadline is noon, Friday, Aug. 29. □

# U.S.-Nigeria Agree on Future Health Cooperation Projects

Discussions held between a visiting Nigerian health delegation and U.S. officials have led to expanded cooperation in health activities between the two countries.

The 10-member delegation, led by Permanent Secretary Mrs. F. Y. Emmanuel of Nigeria's Ministry of Health, was invited by HHS Secretary Patricia Roberts Harris as a followup to her February visit to Nigeria. Part of the 2-week U.S.-sponsored visit included a tour of NIH on July 22.

Areas judged to be of greatest potential for cooperation between the two Nations include: food and drugs; environmental and occupational health; and communicable disease control.

Also considered of great importance are: medical, dental, nursing, and paramedical education; health education; basic health services; health information systems; and health research.

## Joint Task Force Established

The two secretaries agreed that the initial step toward developing activities in these areas would be the setting up of a Joint Task Force.

"Cooperation in health both exemplifies and contributes to the growing friendship between our two countries, and as Nigeria and the United States move closer together in health, I am confident our mutual human and scientific resources will benefit both of our peoples," Secretary Harris said.



Nigerian Minister Mrs. Francesca Y. Emmanuel met HHS Secretary Harris in February during her African visit.

The Fogarty International Center arranged for the Nigerian health officials to meet with researchers and administrators at the National Heart, Lung, and Blood Institute and the National Institute of Allergy and Infectious Diseases.

While at NIH, they explored mutual interests and means of cooperation in cardiovascular diseases, especially hypertension and infectious diseases.

In addition, the Nigerian delegation met with the National Institute of Environmental Health Sciences and National Library of Medicine staffs to discuss environmental health, biomedical information, and health education.



Dr. Martin M. Cummings, NLM Director, explains the Library's operation to Secretary Emmanuel and the Nigerian health delegation during their NIH tour.

The visit focused around how U.S. expertise, technology, training, and research might help to strengthen and expand Nigeria's primary health care and to combat major area diseases.

## Recent Bilateral Talks Held

The recent discussions are a key element of the bilateral talks which are held at regular intervals between the U.S. and Nigeria. The latest such talks, held in Lagos, July 22-23, under the direction of Vice President Mondale and the Vice President of Nigeria, Alex Ekwueme, included discussions of U.S.-Nigerian cooperation in trade, investment, science and technology, agriculture, and energy.

For many years, NIH has had contact with Nigeria primarily through its Visiting Program—a program developed to bring distinguished foreign scientists to NIH for an

interchange of scientific information and research training—and through the World Health Organization.

In 1978, Nigeria became a participating country in FIC's 22-year-old International Research Fellowship Program, an individual fellowship support program that enables young foreign biomedical researchers to conduct up to 2 years of research in the U.S. with a senior American investigator.

This April the National Institute of Neurological and Communicative Disorders and Stroke began collaborating with West African colleagues to develop protocols for the first epidemiological studies of neurological disorders in Nigeria.

In addition to meetings with officials from other health agencies in the Washington area, the group toured health facilities and institutions in South Carolina, Arizona, and California. □

## Revisions in Recombinant DNA Guidelines Designed To Facilitate Research

Notice of a number of actions taken by NIH Director Dr. Donald S. Frederickson under the 1980 NIH Guidelines for Research Involving Recombinant DNA Molecules was published in the *Federal Register*, July 29.

The actions, mostly technical amendments to the guidelines, had been published for comment in the April 30 *Federal Register* and reviewed and recommended for approval by the Recombinant DNA Advisory Committee at its meeting June 5-6.

The revisions reflect additional information and experience by investigators and are designed to facilitate further research without compromising containment and safety standards.

One of the actions permits the transfer of cloned segments of the foot-and-mouth-virus-disease from the Plum Island Animal Disease Center, USDA, to the facilities of Genentech,

Inc., of South San Francisco.

Conditions were specified under which Genentech, Inc., may continue development of the clones in an effort to produce a vaccine to protect livestock from the highly contagious and devastating foot-and-mouth disease.

Action was delayed on a RAC recommended field test of corn plants into which corn recombinant DNA has been added. A final decision on this proposal will be reached after additional information is obtained. □

## Special Rates to Mallorca, Caribbean

Special rates for cruises to Mallorca and the Caribbean are being offered to R&W members during September and October.

The 7-night cruise to the Caribbean departs on Mondays beginning Sept. 1 and continues through Oct. 27. □

## Maxine Bunting Retires

Maxine Bunting, statistical assistant to the assistant director for Clinical Research, OD, National Institute of General Medical Sciences, retired recently with more than 25 years of Government service.



Mrs. Bunting

Her career began in 1950 when she accepted a position with the U.S. Marine Corps in Washington, D.C. Later she joined the staff of the Surgeon General of the U.S. Army, a position she held for 16 years.

Mrs. Bunting joined the NIGMS staff in 1969, and

served 3 years as grants clerk and grants technical assistant in the Cellular and Molecular Basis of Disease Program before transferring with her husband, Tom, to California.

While there, she worked at the Naval Underseas Center in Pasadena from 1972 to 1974. Mrs. Bunting returned to NIGMS in 1974 as a grants financial assistant in the Office of Program Activities, and in 1976, she assumed the position she held at retirement.

During her employment at NIGMS, Mrs. Bunting received three Special Achievement Awards, in 1974, 1977, and 1978.

Mrs. Bunting's co-workers and friends honored her at a party where she received a check for a rototiller. □

## Evelyn Laten and Edward Condon To Serve on PHS Handicapped Employees Committee

Evelyn Laten, a secretary in the Physiology and Biomedical Engineering Program, National Institute of General Medical Sciences, and Edward Condon, management analyst officer, National Institute of Child Health and Human Development, are the two NIH employees chosen by Dr. Julius Richmond to serve on the PHS Handicapped Employees Committee.

Dr. Richmond, HHS Assistant Secretary for Health and PHS Surgeon General, appointed the 14-member committee—two members from each PHS agency—to assist him in identifying problems and suggesting solutions for the equal opportunity of handicapped individuals in the Public Health Service.

The committee will also work closely with the EEO staff of PHS in developing an affirmative action plan for the hiring, placement, and advancement of handicapped individuals including disabled veterans.



Ms. Laten



Mr. Condon

## VISITING SCIENTIST PROGRAM PARTICIPANTS

Reported by Fogarty Internat'l Center

7/21—**Dr. Hidenori Takei**, Japan, Laboratory of Neurosciences. Sponsor: Dr. Stanley Rapoport, NIA, GRC, Baltimore.

7/23—**Dr. Y. Ziya Ziyilan**, Turkey, Laboratory of Neurosciences. Sponsor: Dr. Stanley Rapoport, NIA, GRC, Baltimore.

7/29—**Dr. Giovanna Grimaldi**, Italy, Laboratory of Biochemistry. Sponsor: Dr. Maxine Singer, NCI, Bg. 37, Rm. 4E28.

7/29—**Dr. Pier Di Nocera**, Italy, Laboratory of Biochemistry. Sponsor: Dr. Igor Dawid, NCI, Bg. 37, Rm. 4D06.

7/29—**Dr. Hubert Pehamberger**, Austria, Immunology Branch. Sponsor: Dr. Pierre Henkart, NCI, Bg. 10, Rm. 4B02.

7/30—**Dr. Yasuharu Nakabayashi**, Japan, Dermatology Branch. Sponsor: Dr. Douglas Lowy, NCI, Bg. 41, Rm. D252.

7/31—**Dr. Manuel O. de Landazuri**, Spain, Laboratory of Immunodiagnosis. Sponsor: Dr. Ronald Herberman, NCI, Bg. 10, Rm. 8B04.

7/31—**Dr. Jacob Hochman**, Israel, Laboratory of Molecular Biology. Sponsor: Dr. Ira Pastan, NCI, Bg. 37, Rm. 4B27.

8/1—**Dr. Gururaj Bykadi**, India, Analytical and Product Development Section. Sponsor: Dr. James Craddock, NCI, Blair Bg., Rm. 426.

8/1—**Dr. George Dos Reis**, Brazil, Laboratory of Immunology. Sponsor: Dr. Ethan M. Shevach, NIAID, Bg. 10, Rm. 11N312.

8/1—**Dr. Magdi Mossaba**, Egypt, Laboratory of Pathophysiology. Sponsor: Dr. Peter Riesz, NCI, Bg. 10, Rm. B1B50.

8/1—**Dr. Masaaki Oda**, Japan, Division of Bacterial Products. Sponsor: Dr. Charles Manclark, Bureau of Biologics, Bg. 29, Rm. 418A.

8/1—**Dr. Keshavamurthy Prakash**, India, Laboratory of Cellular & Molecular Biology. Sponsor: Dr. Stuart Aaronson, NCI, Bg. 37, Rm. 1A07.

8/1—**Dr. Kazuyuki Takahashi**, Japan, Laboratory of Chemistry. Sponsor: Dr. Louis A. Cohen, NIAMDD, Bg. 4, Rm. 328.

8/4—**Dr. Kosaku Noda**, Japan, Endocrinology and Reproduction Research Branch. Sponsor: Dr. Erhard Gross, NICHD, Park 5 Bg., Rm. 405.

8/5—**Dr. Beatrice Macchi**, Italy, Surgical Neurology Branch. Sponsor: Dr. Paul Kornblith, NINCDS, Bg. 10A, Rm. 3E68.

8/1—**Dr. Atfan Lal Kasid**, India, Medical Breast Cancer Section. Sponsor: Dr. Marc Lippman, NCI, Bg. 10, Rm. 6B02.

7/13—**Dr. Katsuhisa Tawada**, Japan, Laboratory of Physical Biology. Sponsor: Dr. Richard Podolsky, NIAMDD, Bg. 6, Rm. 110.

7/14—**Dr. Krystyna Lesiak**, Poland, Laboratory of Chemistry. Sponsor: Dr. Paul Torrence, NIAMDD, Bg. 4, Rm. 226.

7/14—**Dr. Paolo Vitti**, Italy, Laboratory of Biochemical Pharmacology. Sponsor: Dr. Leonard Kohn, NIAMDD, Bg. 4, Rm. B1-31.

7/15—**Dr. Zofia Zukowska-Grojec**, Poland, Laboratory of Clinical Science. Sponsor: Dr. Irwin Kopin, NIMH, Bg. 10, Rm. 2D46. □

## New Librarian Career Program Seeks Applicants

A new Librarian Career Development Program designed to find highly qualified entry-level librarians is seeking candidates, according to the National Library of Medicine.

The goal of the educational and training program that will begin in 1981 is to provide NLM with an additional source of highly qualified entry-level librarians, provide career advancement opportunity for degree-holding nonprofessionals with high potential at NIH, and help meet NLM's affirmative action goals.

The program is geared towards nonprofessional NIH and National Institute of Mental Health Intramural Research Program employees holding a college degree.

The program calls for the initial selection of one LCDP intern to participate in the 2-year-program. It will combine on-the-job and master's level academic training prior to placement as an NLM librarian.

LCDP eligibility requirements are:

- Being employed in a full-time nonprofessional career or career-conditional position at NIH or NIMH-IRP for at least 1 year.

- Having a college degree (other than in library science).

- Holding a GS-4 through GS-9 wage-grade equivalent position. (Those persons at GS-9 or 8 level who are selected will be required to request a downgrade to the GS-7, but their pay rate may be saved for a period not to exceed 2 years.)

- Meeting the eligibility requirements of the library science school which has not yet been determined. Requirements include having a grade point average of at least 3.0 in a 4.0 system in the applicant's previous academic work, and having a combined Graduate Record Exam aptitude test score of 1,000 (combination of verbal and analytical or verbal and quantitative score).

Potential applicants should note the following: If you have received GRE Aptitude Test scores in the past 5 years (since February 1976), you may use them to apply.

Others wishing to take the GRE must apply by Sept. 18, for the test being given in Washington on Saturday, Oct. 18. Results of the October test will be provided to NIH and to the applicant in late November.

Information sessions on the LCDP will be held on Wednesday, Aug. 27, from 11 a.m. to 1 p.m., and on Wednesday, Sept. 10, from 4 to 6 p.m. Both sessions will be held in NLM's Billings Auditorium (Bldg. 38).

Interested employees should plan to attend one of these sessions to pick up an application package and to obtain information on the program.

Selection of the LCDP intern is expected by Feb. 1, 1981. At that time the selected employee would be reassigned to a library technician position at NLM and work full time until May, when library school begins. □

# Proud Past

*In a lengthy interview, NINCDS Director Dr. Donald B. Tower described the Institute's past accomplishments and future prospects. Exact quotes are italicized.*

*Never have we been able to be more optimistic about the prospects for progress in brain and nervous system research.*

The speaker is Dr. Donald B. Tower, Director of the National Institute of Neurological and Communicative Disorders and Stroke, which celebrated its 30th anniversary on Aug. 15.

With a budget of \$242 million for the current fiscal year, NINCDS funds 60 percent of all U.S. research in the neurosciences.

The Institute's investment over the years—in research programs, training of investigators, and development of new research techniques—has paid off in a virtual explosion of information about the human nervous system and its disorders.

Dr. Tower believes the 1980's will see continued research advances for NINCDS and all neuroscience.

## A Strategy for the Eighties

*We're not working in some haphazard way, but with a carefully conceived long-range plan for research.*

The National Research Strategy for Neurological and Communicative Disorders was developed by the NINCDS staff, working with the Institute's National Advisory Council, after nearly 2 years of intensive study and consultation. It incorporates the recommendations of seven panels of leading scientists and clinicians.

The recently published 12-volume research strategy describes the major health problems that the Institute and the research community will face in this decade.

*The strategy pinpoints specific goals we can realistically expect to reach in the next 10 years, and spells out the resources—in money and manpower—that we must have to achieve these goals.*

To carry out its programs, NINCDS is organized into an Intramural Research Program, directed by Dr. Thomas Chase, and five program areas dealing with extramural research.

One of these—the Extramural Activities Program, headed by Dr. John Dalton—helps

# NINCDS 30 YEARS 1950 - 1980

## Anniversary Feature

coordinate grants, contracts, and training activities.

The other four deal with extramural research in the areas indicated by their titles: the Neurological Disorders Program, directed by Dr. Floyd Brinley; the Stroke and Trauma Program, under Dr. Michael Walker; the Fundamental Neurosciences Program, headed by Dr. Eugene Streicher; and the Communicative Disorders Program, under Dr. Ralph Naunton.

*Probably one of the most important initiatives we have ever undertaken is our support for positron emission tomography (PET), an intriguing new research technique.*

In 1979, NINCDS awarded grants for seven new PET research program-projects around the country, bringing its extramural PET commitment to some \$9 million.

The Institute has also launched an intramural PET program, providing a facility for shared research with several other Institutes at NIH.

*Clearly, it's too early to draw conclusions about the ultimate significance and impact of PET, but the prospects are very exciting.*

*With PET we will be able to examine what happens functionally, in the living human brain, when a person speaks, hears, sees, thinks. The potential payoffs from this technique are enormous.*

Other big payoffs are seen resulting from the Institute's response to recommendations of Congressionally mandated national commissions on epilepsy, multiple sclerosis,

# Bright Future

diabetes, and Huntington's disease.

Recent progress includes initial awarding of \$2 million to establish two "Centers Without Walls" for research on Huntington's disease and other neurological disorders characterized by brain degeneration and abnormal body movements.

A major recommendation of the Epilepsy Commission was met within the past month with the award of a 3-year contract, totaling nearly \$4 million, to establish a comprehensive epilepsy center in an urban setting where there is a large minority population.

The new center will be located at the University of California at Los Angeles. It is the sixth comprehensive epilepsy program to be supported by the Institute.

As recommended by the Multiple Sclerosis Commission, an expert in demyelinating and sclerosing disorders, Dr. Emanuel Stadlan, has been recruited to coordinate the Institute's



Dr. Donald B. Tower, 1973 to present

research programs on multiple sclerosis and related disorders.

*The Institute is supporting a number of clinical research centers on multiple sclerosis, and this fall we will be sponsoring an international workshop to consider new multiple sclerosis diagnostic procedures related to cell membrane phenomena.*

*As for diabetes, NINCDS-supported research on diabetic neuropathy has increased three-fold in the past 5 years. An NINCDS neuro-epidemiologist has developed a clinical protocol for a multicenter, international trial of a new experimental drug that we hope will bring help to sufferers from this disorder.*

*The truly remarkable recent decline in mortality from stroke, it is believed, reflects improved detection and better management of risk factors, more effective treatment, and the basic and clinical research efforts by NINCDS-supported scientists.*

NINCDS supports 12 cerebrovascular

(Continued on Page 6)

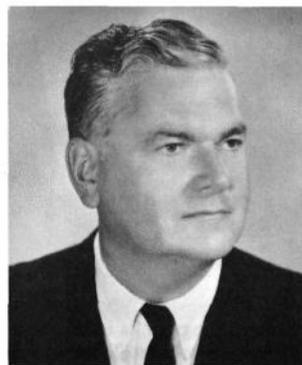
## Former Directors of NINCDS



Dr. Pearce Bailey, 1951-59



Dr. Richard L. Masland, 1959-68



Dr. E. F. MacNichol, Jr., 1968-73

# National Institute of Neurological and

clinical research centers and three comprehensive stroke centers where research findings can be evaluated in community settings.

The centers also try to determine how effective are various techniques to prevent stroke, rehabilitate stroke patients, and educate health care personnel and the public about stroke.

Special promise is seen in the NINCDS-supported study now under way to evaluate the effectiveness of extracranial-intracranial anastomosis in preventing transient ischemic attacks—the “little strokes” that may lead to acute stroke.

As part of its attack on the problem of nervous system trauma, NINCDS supports five acute spinal cord injury research centers, and last fall awarded contracts to establish three comprehensive central nervous system trauma centers.

*The Institute also has quadrupled its commitment to research on regeneration over the last 5 years, and our funding in this area is expected to reach \$8.5 million in fiscal 1981.*

*Our emphasis now is on achieving functional regrowth of spinal cord neurons—and getting them to achieve appropriate reconections with their targets.*

Progress is also reported in NINCDS-supported efforts to develop prosthetic aids that can compensate for certain lost nerve functions.

For example, scientists are developing a “second generation” of cochlear implants—electronic devices surgically implanted in the inner ear to stimulate the auditory nerve and restore at least limited hearing to some patients now profoundly deaf.

NINCDS-supported scientists have nearly perfected a neural prosthesis designed to restore bladder control in paraplegic patients.

Tests in dogs have demonstrated that the device will work, and it is expected that the prosthesis will be available to patients by next year.

Speech and language development is a research area of extraordinary importance, and NINCDS gives high priority to training young investigators and encouraging research in communicative disorders.

*An X-ray microbeam tracking system should soon give us a much better understanding of the way speech is produced, and what goes wrong in certain speech disorders.*

*This new technique is safe and noninvasive. It permits sequential studies of the various mouth and throat elements involved in speaking.*

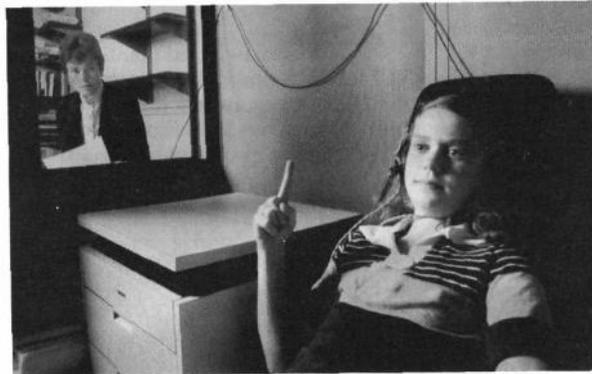
NINCDS expects to award a center grant this year to adapt this instrument to a variety of clinical studies.

With NINCDS support, scientists are investigating one of the most puzzling and controversial of childhood communicative disorders: chronic secretory otitis media—inflammation and accumulation of fluid in the middle ear. This common childhood ailment may permanently impair hearing.

In the past year, the Institute has awarded two contracts for clinical secretory otitis media with decongestant drugs or tympanostomy tubes.



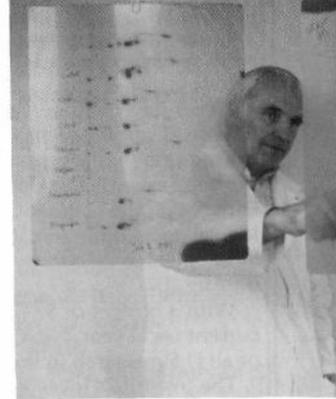
**Drs. Christy Ludlow (standing) and Rolf Ulvestad correlate videotape and voice recordings while studying the role of the larynx in speech articulation. A television camera fitted with a fiber optic tube provides a view of the patient's larynx while his voice is simultaneously recorded.**



**Audiologist Dr. Earleen Elkins tests a child with hearing loss.**



**Dr. John Diggs, deputy director of the Extramural Activities Program, is in charge of the NINCDS manpower program. The Institute training programs are a vital source of new talent for scientific research in neurological disorders.**



**Drs. Ernst Freese (l) and Juan Lopez In electrophoresis, scientists pass separate compounds. Compounds of different spots along a surface with transferred to film.**



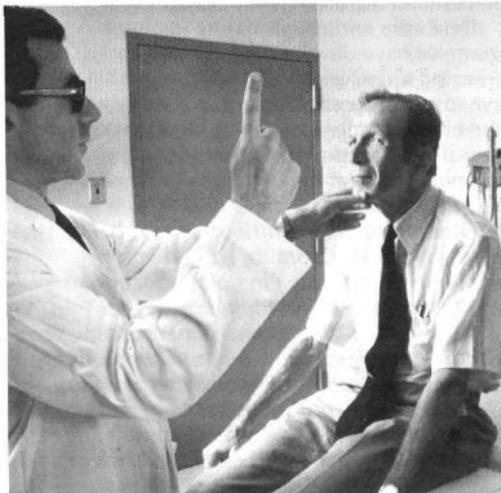
**A patient is being studied with a positron scanner detects positrons emitted from “watch” the movement and deposition within the patient's brain.**



**Drs. Thomas Reese (seated), Kathryn Lynch, and another scientist use an analytic electron microscope to study neurotransmitters developed an ultra-rapid tissue freezing technique to observe neurotransmitters as they are released.**



discuss a sample of electrophoresis film. electrical current through a solution to different molecular weights collect at in the solution, and their image is then



Dr. Donald Calne, NINCDS clinical director, checks eye movement of a Parkinson's disease patient who is undergoing trials with the experimental drug, bromocriptine.



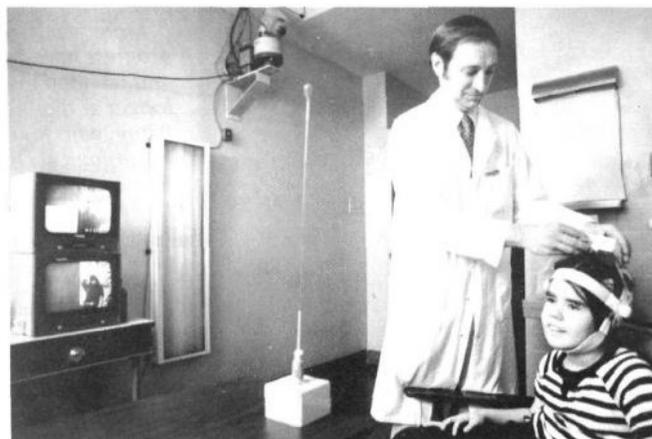
on emission transverse tomography scanner. The injected radioisotopes, and permits scientists to of substances involved in metabolic processes



Supervisory technician Al Bacote hams it up with Mindy, a normal control animal for studies in NINCDS laboratories at Ft. Detrick, Md.



Richard Ormberg use this nitters. Dr. Reese has e that enables scientists to



Dr. Roger Porter adjusts telemetering equipment worn by a child with epilepsy. The child can move freely while this electronic monitoring equipment records seizures simultaneously with a videotape camera.

The NINCDS Intramural Research Program is a special source of pride, and Dr. Tower is quick to praise its staff of gifted investigators.

Among a number of imaginative projects is work being done in the Surgical Neurology Branch, where Dr. Paul Kornblith and his colleagues are using tissue culture techniques to study the responses of brain tumor patients to antitumor drugs and immunotherapy.

In the Laboratory of Neural Control, Dr. Robert Burke and associates have designed a variety of sophisticated, miniaturized stimulating and recording electrodes for long-term study of movement in free-ranging experimental animals.

From this work, the scientists hope to understand more about the motor organization of the nervous system and the basis for the selective involvement of motor neurons in amyotrophic lateral sclerosis.

In the Neuroimmunology Branch, Dr. Dale McFarlin and his group are carrying out innovative studies of multiple sclerosis and other disorders affecting the nervous system's immune function.

Using the recently developed hybridoma, or cell fusion technique, these investigators have produced in quantity a highly specific antibody to one of the proteins on the surface of the measles virus.

The Developmental and Metabolic Neurology Branch is under the direction of Dr. Roscoe Brady, whose studies over 20 years have shed light on a group of lipid storage disorders shown to be caused by genetic deletion or alteration of specific enzymes.

In each of these disorders a particular fatty substance causes trouble by accumulating in body tissues because the enzyme that should break it down is absent or altered.

But thanks to the research that has uncovered the nature of these disorders, there are now diagnostic and screening tests that can identify carriers and fetuses at risk, and can give us a basis for more effective genetic counseling.

Once a missing enzyme has been identified, the next logical step is, of course, enzyme replacement therapy, and Dr. Brady's group and others are now pioneering this approach in Gaucher's disease.

Early reports have been encouraging, but the patients treated in this manner have not been followed long enough to indicate, with certainty, whether the progress they have shown will be sustained.

Other branch scientists are engrossed in similarly intriguing work. Dr. R.F. Quarles and colleagues in the Myelin and Brain Development Section—working collaboratively with Dr. H. deF. Webster's team in the Cellular Neuropathology Section, Laboratory of Neuro-pathology and Neuroanatomical Sciences—have demonstrated that a compound known as myelin-associated glycoprotein is the first detectable brain component to disappear on the periphery of the expanding multiple sclerosis plaque.

The scientists have reported that destruction of this compound occurs even in brain areas that appear histologically normal.

(Continued on Page 8)

## NINCDS CELEBRATES 30 YEARS OF PROGRESS

(Continued from Page 7)

In the Laboratory of Central Nervous System Studies, Nobel Laureate Dr. D. Carleton Gajdusek, Dr. Clarence J. Gibbs, Jr., and their associates continue to explore certain chronic, progressive, degenerative disorders of the central nervous system—such as Creutzfeldt-Jakob disease—that appear to be slow infections caused by unconventional viral agents.

Dr. R. A. Lazzarini, in the Molecular Virology Section of the Laboratory of Molecular Biology, is studying the regulation and mode of replication of certain viruses that can cause encephalitis or meningitis.

These viruses often produce "defective interfering particles" that, while they restrict replication of the infectious virus, also favor maintenance of a slow viral infection for long periods.

*These defective interfering particles are not only of interest in themselves, but they also appear to have potential for therapeutic approaches.*

In the Infectious Diseases Branch, Dr. John Sever and his colleagues are attempting to develop experimental primate models for herpes virus encephalitis, papovavirus-induced brain tumors, and hydrocephalus resulting from cytomegalovirus infection of the fetus.

The Electron Microscopy Section of this branch, headed by Dr. Monique Dubois-Dalcq, has used sophisticated techniques to help neuroscientists visualize the interaction of viruses with nerve cells—and the effects of antibodies and immune reagents on these interactions.

Other new techniques are being used by Dr. Thomas Reese and his colleagues in the Functional Neuroanatomy Section of the Laboratory of Neuropathology and Neuro-anatomical Sciences, to delineate the precise

steps that occur when a neurotransmitter is released at a synapse.

Dr. Reese and collaborating Institute grantees have developed extremely rapid freezing techniques to fix neuromuscular synapses for freeze-fracture and study with the electron microscope—studies that can reveal fleeting structural changes in the cell membrane when the synaptic vesicles discharge.

*Other important contributions are being made by Drs. T. G. Smith, Jr., and Jeffery Barker in the Sensory Physiology Section of our Laboratory of Neurophysiology.*

*Their studies of mammalian neurons in culture have given us new information on the actions of various neurotransmitters, neuropeptides, and neurohormones.*

*The role of neuropeptides in modulating the activity of brain and spinal cord neurons has important implications for pain and behavioral mechanisms.*

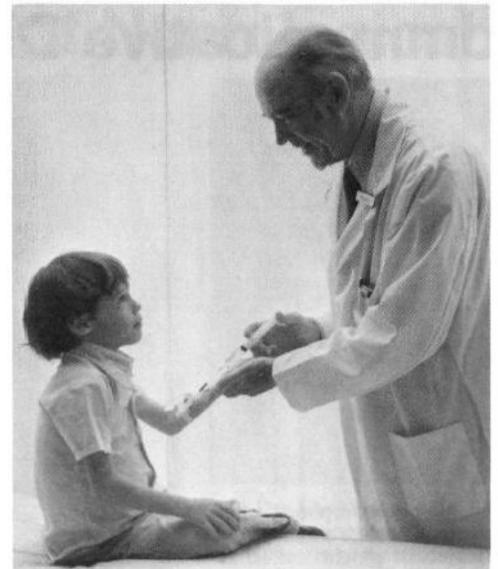
In the extraordinarily active area of neuropharmacology, work is under way in the NINCDS Experimental Therapeutics Branch, headed by Dr. Donald Calne.

There the testing of chemical compounds that act as agonists (mimickers) or antagonists of certain neurotransmitters has given scientists new insight into many movement disorders.

*The development of new drugs is a very active enterprise of this branch, and a large number of compounds are being tested both here in Bethesda and in other laboratories around the country and the world.*

The NINCDS Office of Biometry and Field Studies has begun a series of surveys to determine the incidence, prevalence, and cost of major neurological disorders.

Lack of reliable information has sometimes frustrated efforts to awaken public concern for victims of brain and nervous system



**Dr. Roscoe Brady cares for a patient with Gaucher's disease, a hereditary disorder caused by a missing enzyme, beta-glucosidase. Several children have been successfully maintained on enzyme replacement therapy for longer than 3 years.**

disorders and to attract investigators to these areas of research.

This office has also overseen development of national clinical data banks for stroke and for traumatic coma, each bank involving four participating medical centers.

These data banks are intended to serve both clinical research objectives and patient management, and are prototypes for a planned national data bank network for neurological disorders.

Dr. Tower is particularly pleased with the results of two recent conferences on neuropeptides—the small chains of amino acids that play key roles in pain mechanisms and the behavioral and hormonal aspects of brain function. The first conference was held in May 1979.

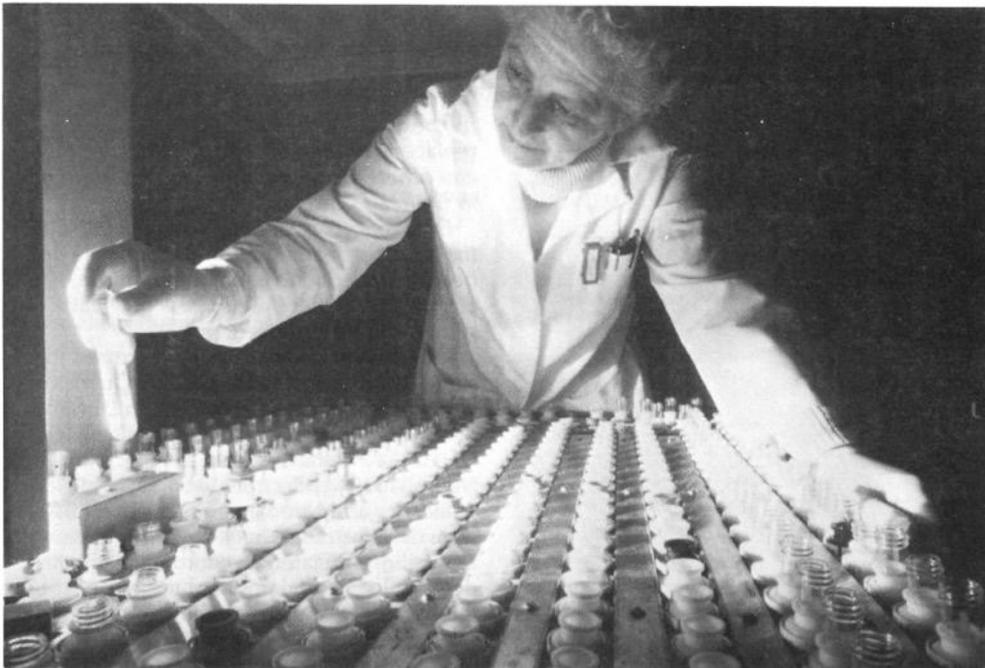
*It was clear from the work presented at a followup conference held last March that explosive progress had been made in this area of research in just one short year.*

*None of these accomplishments could have been achieved without the hard work, talent, and devotion of a great many people. There are so many whose contributions deserve praise.*

*Moreover, the foundations of our present progress have been laid by a number of able and talented men and women who are no longer at the Institute: people like Dr. Kiffin Penry, who for many years headed our Neurological Disorders Program and Epilepsy Branch before returning to academic life; Dr. Karl Frank, retired director of the Fundamental Neurosciences Program; Dr. Eldon Eagles, who gave long and capable service as deputy director of the Institute; Mrs. Ruth Dudley, for many years chief of the Office of Scientific and Health Reports—these and many more.*

*I expect the 1980's to be a time when our knowledge of the human nervous system will advance by quantum leaps, but we cannot let our efforts slacken.*

*As John Donne so aptly put it: 'The greater the island of knowledge, the longer the shoreline of the unknown.'* □



**Chemist Elizabeth Mingioli checks a sample in a gamma counter used to study immunoglobulins and specific antibodies to viral proteins and human cell antigens in multiple sclerosis patients. Evidence is accumulating that MS is an autoimmune disease possibly triggered by an as yet undiscovered virus.**

## COMMITMENT

(Continued from Page 1)

tion of all its recommendations. I agree that we must act expeditiously and responsibly. The target dates the Task Force suggested for carrying out a number of the proposals, however, are unrealistic.

"The constructive actions we will take must be thought through with the care these matters deserve. I am committed to improvement of our equal opportunity programs, but I want the structure for maintaining such progress to be soundly based.

"The report, as requested, focused its attention on the problems of the Division of Equal Opportunity and closely related programs.

"Taken alone, it gives little recognition to the achievements of the EEO coordinators in the BID's and gives no indication of the successful and effective efforts that have been made at the NIH over the past decade and that continue to serve the objectives of equal opportunity, affirmative action, and the enforcement of civil rights.

"We must assure that these positive programs, which operate throughout the NIH, are recognized and strengthened. We need to make certain that our current decisions are made on the basis of a total view of NIH activities." □

### Dr. Nylén Receives Honorary Degree From Georgetown University

Dr. Marie U. Nylén, director of Intramural Research, NIDR, recently received an honorary degree of Doctor of Science at the Georgetown University School of Dentistry's 1980 commencement.

Dr. Nylén was honored for her many years of dedication to the enrichment of dental education and service as a dental clinician, teacher, administrator, and scientist. □

## DEO TASK FORCE MAKES RECOMMENDATIONS

(Continued from Page 1)

Program, the Hispanic Employment Program, and the NIH Handicapped Program; more effective and uniform Affirmative Action Programs throughout the NIH; and the allocation of a minimum of 30 personnel slots to the DEO with appropriate space and budget.

The Task Force pointed out the need for the DEO to shift from its original emphasis on advocacy to policy making, evaluation, and management by recasting the staff and revamping their relationships with the rest of NIH.

### Urges Top Priority

The Task Force submitted target dates for each of its recommendations and urged that the NIH Director make an explicit public commitment to give top priority to their prompt implementation.

In its findings the Task Force was sharply critical of the current state of the EEO, Affirmative Action, and Civil Rights Programs at NIH and indicated that the programs face a crisis of credibility and leadership.

Noting that Division of Equal Opportunity personnel have worked under most difficult conditions with dedication and diligence, the Task Force concluded that DEO personnel had been denied necessary support in commitment and resources from NIH top management, and that the Division has been allowed to deteriorate.

The Task Force reported that it encountered expressions of a deep sense of frustration, resentment, and anger by the NIH-EEO community, and the perception that NIH management, viewing EEO as a "social program," makes no serious commitment to the spirit or letter of the laws, regulations, and policies concerned with EEO.

The 11-member Task Force was formally established by Dr. Fredrickson in a Jan. 21, 1980, memorandum in which he charged its

members "... to take a hard, deep look at the NIH Division of Equal Opportunity and to come up with recommendations and creative ideas that will make the NIH-DEO a symbol and model for the government."

The Task Force met at least weekly and held some 60 hours of hearings involving 35 groups and over 100 individuals.

The Task Force co-chairpersons, Dr. Donald B. Tower, Director of the National Institute of Neurological and Communicative Disorders and Stroke, and James S. Alexander, Equal Employment Opportunity coordinator of the Clinical Center, presented the group's Report of Findings and Recommendations to Dr. Fredrickson on July 31.

On the same day, at Dr. Fredrickson's request, Dr. Tower and Mr. Alexander made an informal presentation of the report to the Bureau, Institute, and Division Directors.

### Copies Are Available

Copies of the report were scheduled to be distributed beginning about Aug. 11. Voluminous background documentation (Task Force minutes, 2,000 pages of verbatim hearing transcripts, etc.) are available for review at the Office of the Director, NIH, the DEO Office, and the NIH Library.

Members of the Task Force that evaluated the NIH-DEO, in addition to Dr. Tower and Mr. Alexander, are:

J. Calvin Adams, HRA; Vivian A. Betton, NINCDS; Edward S. Condon, NICHD; Dr. Teresa I. Mercado, NIAID; Dr. Kenneth W. Sell, NIAID; Nathaniel B. White, NICHD; Jose Acevedo, Jr., DEO; Helen Stafford, DPM; Dr. Ruth D. Sanchez-Dirks, PHS; Barbara Iba, NIDR. □

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## Dr. Roderick Murray Dies; Former Head, Division of Biologics Standards

Dr. Roderick Murray, 70, a biochemist and authority on biologics standardization, died recently after a heart attack at the National Naval Medical Center.

Dr. Murray headed the Division of Biologics Standards from 1956 to 1972 when it was part of NIH. The division was then transferred to the Food and Drug Administration and became the current Bureau of Biologics.

Until his retirement in 1973, he remained with NIAID as special assistant to the Director, appointed for his expertise in hepatitis research. At that same time, he also retired from his position as assistant surgeon general, a rank which he attained in 1968.

Dr. Murray was born in Christchurch, New Zealand, and grew up in Scotland and South Africa. He received a bachelor of science degree in chemistry and physics from the University of Witwatersrand, South Africa, a master's degree in organic chemistry from the University of South Africa, and a medical degree from Harvard Medical School.



Dr. Roderick Murray

During World War II, Dr. Murray served with a medical laboratory in the South Pacific,

and devoted time to studying hematology and outbreaks of parasitic infestations.

In 1947, he became a commissioned officer for the U.S. Public Health Service and started work in NIH's old Laboratory of Biologics Control. He became assistant chief of that laboratory in 1949, and conducted studies on infectious hepatitis and serum hepatitis. In 1952, he was promoted to the rank of Medical Director of PHS.

In 1956, he became Director, Division of Biologics Standards, and in 1965, he received the Distinguished Service Medal from then HEW Secretary Anthony J. Celebrezze.

Dr. Murray was the author and co-author of more than 50 scientific papers in his field and served on numerous scientific and advisory committees and panels.

He was a member of the World Health Organization Expert Committee on Biologic Standardization and the Surgeon General's Advisory Committee on Immunization Practices. □

# Consensus Conference Finds Pap Smear Safe and Effective

Recommendations concerning screening for uterine cancer by using the Pap smear test were developed last month at an NIH consensus development conference.

The 14-member panel of nongovernmental experts believe that the Pap smear is a safe screening procedure and should be used routinely for detecting cervical cancer.

Dr. Maureen Henderson, associate vice president of the University of Washington Health Sciences Center, headed the panel, which examined the scientific basis for cervical cancer screening as more than 20 participants presented their findings.

The panel concluded that as the screening for cervical cancer has become more common, the incidence and mortality rates of the cancer have declined. In addition, an apparent precursor to cancer of the cervix, carcinoma *in situ*, is now being detected with increasing frequency.

Early detection of abnormal cell growth in the cervix by means of the Pap smear is probably a major reason for the downward trend.

The meeting—sponsored by the National Cancer Institute, the National Institute on Aging, and the National Institute of Child Health and Human Development—was attended by more than 350 scientists, state and local health department officials, practicing physicians and nurses, representatives of

health professional and lay groups, and members of the public and the news media.

Recommendations by the consensus panel for women without symptoms of cervical cancer are as follows:

- Virgins need not be screened for cervical cancer (with some notable exceptions, such as females exposed before birth to DES, diethylstilbestrol).

- All females who have had sexual intercourse should be screened soon after the beginning of sexual activity. If the first smear is satisfactory and does not indicate abnormal cell growth, the smear should be repeated in 1 year. If the second smear is also satisfactory and negative, screening should then be repeated at regular intervals from 1 to 3 years.

## No Agreement on Frequency

- The panel did not agree however, on how frequently these examinations should be repeated for women of different ages or for those at high risk, except in the case of older women. If two negative Pap smears are obtained after age 60, further screening appears to be unproductive for the detection of cervical cancer.

- Higher-than-average risk factors as indicators for the development of preinvasive cervical cancer appear to be: first intercourse before 18 years, multiple sex partners, and

low socioeconomic status.

- Efforts should be made to recruit un-screened girls and women who have been, or who are, sexually active into screening programs, such as those offered by neighborhood clinics, hospital emergency rooms, venereal disease clinics, immigration examinations, and private physicians.

The Pap smear is usually a safe screening procedure. However, if incorrectly evaluated in the laboratory, some women may be mistakenly told that they have abnormal cells. Additional unnecessary procedures and discomfort may result.

Key factors insuring the reliability of the smear include the proper abstraction of cell samples from the entire cervical area, which must be promptly spread on a slide and immediately fixed for microscopic examination.

High quality evaluation of the smear by the laboratory and proper communication between the physician and other medical staff is necessary.

The panel noted that U.S. health care providers have for many years recommended annual Pap smear screening for women over age 18. But the panelists felt that this policy is not based on adequate clinical studies indicating the impact of Pap smear screening on mortality in this country.

The panel recommended that long-term studies be conducted to monitor the impact of changes and mortality rates in the incidence of cervical cancer due to different Pap smear screening intervals. □

## Drs. Warren Jones and Mary Cardenas Join Grants Associate Program

Two new members have been appointed to the NIH Grants Associate Program for a year of training in health science administration: Drs. Warren Jones, former assistant professor in the Department of chemistry, University of Virginia, and Mary J. Cardenas, former associate professor from the University of North Carolina.

Dr. Cardenas received her B.A. degree from Oklahoma State University in 1963, and M.S. and Ph.D. degrees from the University of Illinois, where she was the recipient of a Parke Davis fellowship for graduate research from 1964 to 1966.



Dr. Cardenas

She taught in Bogota, Colombia, until she became a research associate at Oregon State University, Corvallis, in 1971. She was an NIH Special Fellow at the University of Oregon Medical School during 1972 and 1973, after which she returned to Oregon State University. In 1978 she became associate professor at the University of North Carolina.

Dr. Cardenas has received a Research Career Development Award and a research grant, both supported by the National Institute of Arthritis, Metabolism, and Digestive Diseases. She is the author of 47 research papers, abstracts, and presentations, and has

presented 22 seminars.

She has also served as associate editor for the publication, *Journal of Experimental Zoology*.

Dr. Jones received his B.S. degree from Millsaps College, Jackson, Miss., in 1964, and his Ph.D. degree from the University of North Carolina in 1969.

He did post-doctoral work at the Deutsches Wollforschungsinstitut, Aachen, West Germany; Cornell University; and Indiana University at Bloomington.



Dr. Jones

In his research Dr. Jones has contributed to the areas of peptide synthesis, protein modification, and protein conformation characterization through <sup>13</sup>C NMR techniques.

His work was supported by a grant from the National Heart, Lung, and Blood Institute and the Research Corporation. □

## DR. DEVITA

(Continued from Page 1)

for example, that took 2 years to complete 5 years ago, can now be done in 2 days with current technology.

"The challenge of the Institute," he added, "is to foster the continued expansion of our knowledge base, using the new technology, and . . . to harness it to improve our capacity to prevent the disease and treat it more humanely."

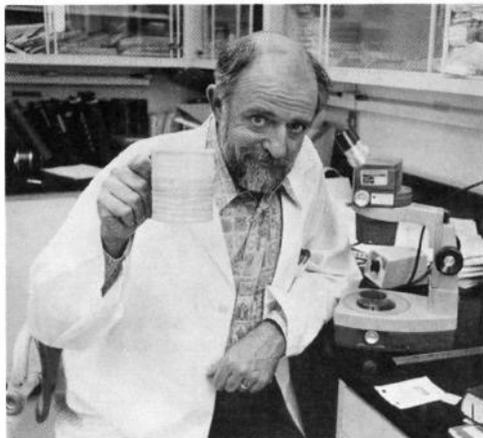
Speaking of his long NCI association, Dr. DeVita said, "I owe a great deal of thanks to many people. When I came for my interview at NIH years ago, I emerged shaken from an interview with Dr. Berliner. I was next met and comforted and reassured by Dr. Fredrickson, who has been comforting and reassuring me ever since.

" . . . Dr. David Rall brought me here and he, Dr. Gordon Zubrod, and Dr. Vince Oliverio taught me much of what I know about cancer. I'm still waiting for them to teach all they know of cancer."

He also praised the strong support he has received from his family and friends, and he stressed the inspiring example of his son, Ted, who recently died after living 8 years with aplastic anemia. "He galvanized all of us and taught us all the meaning of love, friendship and, most of all, courage."

Among those in the audience of the swearing-in were three previous NCI directors, Dr. John R. Heller, Dr. Kenneth M. Endicott, and Dr. Frank J. Rauscher. □

## New Lab Safety Film Stars John Astin



**BEAKERS FOR BIOHAZARDS, BUT NOT FOR TEA—that's the lesson learned by Dr. J. Harold Huntoon, played by John Astin in the new Division of Safety film, *Nobody's Perfect*.**

"Keep your glassware clean; keep your eye on the big question." That's a line from Dr. J. Harold Huntoon, "celebrated molecular biologist," played by John Astin in the new laboratory safety film entitled *Nobody's Perfect*.

Produced and directed by Werner Schumann of Guggenheim Productions, Washington, D.C., through a contract with the NIH Division of Safety, the 24-minute film features five other Hollywood actors and actresses.

*Nobody's Perfect* is an informative as well as humorous film about potentially dangerous accidents. The humorous approach was used as a positive means to motivate employees to assume responsibility for lab safety.

The research laboratory is a potentially hazardous work place. These hazards are biological, chemical, and physical in nature and present in varying degrees. However, by the proper application of good safety practices, such laboratories can become safe places to work.

The basic message of the film is that workers must be aware of the hazards in their particular laboratory and plan and conduct research so as to control such hazards. The degree of safety responsibility varies with the

degree of work responsibility.

Part of the movie was filmed at NIH. One telephone sequence was filmed in the office of Dr. W. Emmett Barkley, Director, Division of Safety, in Bldg. 13. Laboratory workers from NIAID cooperated with the producers and the NIH Fire Department by shooting an evacuation scene in the dead of winter without wearing any coats. They are seen standing in the parking lot of Bldg. 5.

The rest of the film was shot in California in good weather, which accounts for the lack of coats. Other sequences show lab settings based upon a scientist's office in Bldg. 41.

The story takes place at the fictional AAAHDC, the All American Animal and Human Disease Center. John Astin, who may be better known as "Gomez" from the TV show *The Addams Family*, does a good job portraying the preoccupied scientist. Originally from Bethesda, his father was a former Director of the National Bureau of Standards, and his brother is a scientist, so he seems to have a natural affinity for the part.

A safety expert is hired to inspect the building in which Dr. Huntoon works because he has had three serious accidents in 1 week, and is responsible for 84 percent of all accidents occurring in the building. The manner in which the accidents are portrayed is humorous, but all are potentially dangerous.

Technical assistance for accurate production of the movie regarding laboratory setting and environment was provided by Manuel Barbeito of the Division of Safety. The University of Southern California's Virus Cancer Group, the University of California at Los Angeles' Molecular Biology Institute and Division of Research and Occupational Safety, and Contamination Control, Inc. all supplied lab settings, advice, and assistance.

The Division of Safety intends to use the film as orientation for new laboratory workers and to serve as a reminder for those already on campus. The National Audiovisual Center will be the main distributor of the film. For more information, call 496-1985.

The film will be shown on the following dates and locations at 11:30 a.m. and 12:15 p.m.: Wednesday, Sept. 3, Bldg. 10, Masur Auditorium; Wednesday, Sept. 3, Fed. Bldg., Rm. B1-19; Thursday, Sept. 4, Bldg. 1, Wilson Hall; Friday, Sept. 5, Westwood Bldg., Conf. Rm. D.



During the producers' 1½ days of filming at NIH, NIAID employees from Bldg. 5 participate in a staged evacuation scene. The scene was shot in the dead of winter, but the lab workers were not allowed to wear coats since the rest of the movie was filmed in California.

## Dr. John Boice, NCI, Receives Lane Award

Dr. John D. Boice of NCI's Environmental Epidemiology Branch received the J. D. Lane Award from the PHS Professional Association at a recent meeting in Houston, Tex.

The J. D. Lane Award honors "outstanding investigators for the most significant contributions in original health research."



**Dr. Boice**

Dr. Boice, who came to NCI in 1977, was recognized for an epidemiological study he conducted in collaboration with Dr. George B. Hutchison of the Harvard University School of Public Health.

The study showed no increase in the incidence of leukemia among women who received high doses of radiation for treatment of cervical cancer. Hospital records of more than 31,000 women both here and abroad were culled to gather data for the study.

Ionizing radiation has been known to be leukemogenic since 1944 when epidemiologists noted the incidence of leukemia among physicians was higher and nearly twice that of the general population.

Studies of atomic bomb survivors in Japan confirm these statistics. Because leukemia is such a rare form of cancer, any increase in a population can be observed.

Dr. Boice speculated that high doses of radiation may have killed both cancerous and normal cells. Lower doses might have killed cancerous cells, but also transformed normal cells within the irradiated area into precursors of leukemia.

Within the next 2 to 3 years, the international cervical cancer study will be expanded to involve up to 200,000 women—the largest radiation exposure study ever conducted. □

## Manual on Amino Acid Sequences Now Available to Researchers

An in-depth compendium of all known amino acid sequences of immunoglobulin proteins has been published and is available to the scientific community.

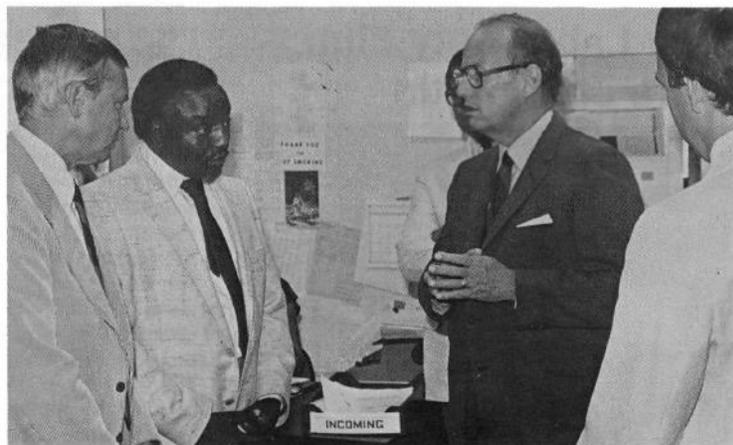
*Sequences of Immunoglobulin Chains*, a 185-page manual, contains data on 36,912 amino acid residues. This collection represents 30 percent of the total number of amino acid residues sequenced in all proteins studied anywhere in the world.

Written by Drs. Elvin A. Kabat, Tai Te Wu, and Howard Bilofsky, and Margaret Reid-Miller, the compilation is essential to understanding how antibodies are generated and how genetic information for antibody specificity is stored in DNA and transmitted from generation to generation.

A free copy of the manual is available by writing to Bolt Beranek and Newman, Inc., 50 Moulton St., Cambridge, Mass. 02238. □



LEFT: NIH Director Dr. Donald S. Fredrickson (c) accompanies Mr. Blakeney (l) to his office in Bldg. 31, where they met with other DEO staff. Mr. Acevedo (r); Calvin Baldwin (l rear), NIH Associate Director for Administration; and



NIH Deputy Director Dr. Thomas E. Malone also met at the DEO office. RIGHT: Dr. Fredrickson discusses DEO plans for the future.

## MR. BLAKENEY

(Continued from Page 1)

Mr. Blakeney holds undergraduate and graduate degrees from St. Augustine College and Bowie State College, respectively. He has taken other graduate course work at the University of Maryland, Southern Illinois University, and George Washington University. His educational background spans such fields as guidance and counseling, and administration.

Among his many affiliations, Mr. Blakeney has been a member of the NIH Black Cultural Committee since 1972, and was chairman of that group in 1979. He belongs to the NIH EEO Council, the D.C. Advisory Council on Vocational Education, the National Human Rights Association, the NAACP, and the National Urban League. □

### Dr. Malone Receives NMA Award

Dr. Thomas E. Malone, NIH Deputy Director, was given the 1980 Scroll of Merit Award by the National Medical Association at its 85th Annual Convention and Scientific Assembly in Dallas on Aug. 5.

On the same day, Dr. Malone also addressed the Black Congress on Health and Law. He spoke on The Black Investigator in NIH: Past, Present, and Future. □



## National Toxicology Program Issues Detailed Data on 26 Possible Cancer Causes

The first Government report on 26 chemicals strongly suspected of causing cancer in humans was released recently by the National Toxicology Program in its First Annual Report on Carcinogens.

"Although Federal agencies have been collecting information on—and regulating—carcinogens for many years, this is the first time that this information has been assembled in one place," said Dr. David P. Rall, Director of both the National Institute of Environmental Health Sciences and the National Toxicology Program.

The report was initiated because of a Congressional mandate enacted in 1978 that requires HHS to publish annually a list of all substances which are either known to be carcinogens or which may reasonably be anticipated to be carcinogens, and to which a significant number of Americans are exposed.

The first 26 chemicals include those evaluated and published by the International Agency for Research on Cancer—a World Health Organization in Lyon, France—in its review of scientific literature between 1971 and 1977.

"It must be understood that there are many more than 26 carcinogens," said Dr. Rall, "just because a substance is not listed in this first report does not mean that it is not a carcinogen."

Future reports will be expanded to include the latest IARC evaluation of chemicals, data on chemicals already being regulated as carcinogens, as well as those tested by the National Toxicology Program or under the 1976 Toxic Substances Control Act.

Several Government agencies agreed that well-conducted tests on laboratory animals provide strong presumptive evidence of carcinogenicity in man, noted the report.

**Dr. Andrew Chiarodo has been named chief of the Organ Site Programs Branch in the NCI Division of Cancer Resources, Centers, and Community Activities. He received his bachelor's degree from Fordham University and a Ph.D. degree from Washington University. Dr. Chiarodo has been at NCI since 1974.**

Noting that typical cancer demonstrates a latency period of 20 to 40 or more years between exposure to a carcinogen and the onset of the disease, Dr. Rall said, "prudent public health policy dictates that regulation of possibly hazardous substances should not have to wait until we can detect their tragic effect in the population."

The original IARC review placed the 26 chemicals and industrial processes in three categories. In Group 1 are "chemicals or industrial processes that are carcinogenic for humans. This category was used only when there was sufficient data to support a causal association between exposure and cancer."

Group 2 includes chemicals or groups of chemicals that are "probably carcinogenic for humans."

### Group 3 Described

Group 3 contains those chemicals or processes which IARC's review of the literature found "cannot be classified as to carcinogenicity for humans."

The information in this first report was developed by four regulatory agencies—the Food and Drug Administration; the Consumer Product Safety Commission; the Occupational Safety and Health Administration; and the Environmental Protection Agency—and for three PHS research agencies—the Center for Disease Control/National Institute for Occupational Safety and Health; National Cancer Institute; and NIEHS.

For a free copy of the report, write: NTP Information Officer, National Institute of Environmental Health Sciences, P. O. Box 12233, Research Triangle Park, N.C. 27709. □

## CORRECTION

In the previous issue of *The NIH Record* (Aug. 5, 1980), the telephone number for the NIH Property Utilization Section, which take old photographic negatives to reclaim them for their silver content, was incorrectly printed. The number should read 496-4247. □

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