

# The NIH Record

U.S. Department  
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National  
Institutes  
of  
Health

## Hispanic Heritage Week Sept. 24-25 at NIH

The NIH campus participation of the Hispanic Heritage Week Cultural Program takes place Wednesday and Thursday, Sept. 24 and 25. Festivities begin at 11:30 a.m. on the 24th, and at noon on the 25th, and will be held in the Clinical Center Masur Auditorium. Both lunch-hour shows will last until 1:30 p.m.

The first part of the week's program starts Sept. 16 and 17 at the Parklawn Bldg., Rockville, (see Sept. 1 issue of *The NIH Record*), and the second part is Sept. 23 at the Westwood Bldg., Bethesda.

On Sept. 24, Mariaches de Las Americas—music and dancers from Mexico—will be featured. Classical pianist Gonsalo Marquez will perform on the 25th, followed by the Folkloric Ballet from Mexico.



Beginning at 7 p.m. on the evening of the 25th, an outstanding cast of Panamanian dancers will perform in their native costumes. The program will conclude with festive marimba music from Guatemala.

The first part of Hispanic Heritage Week (Sept. 16 and 17, Parklawn Bldg.), is sponsored jointly by all Public Health Service agencies. The seminar topic is the Hispanic Elderly—La Fuente De Nuestra Historia, Cultura Y Carino, or the Fountain of Our History, Culture and Love. The seminar will be held in Conf. Rms. D, E, and F from 9 a.m. to 4 p.m. both days.

The second part of the program on Sept. 23 (Westwood Bldg., Bethesda), is scheduled from noon to 1 p.m., and will feature music and dancers from Latin America.

To augment these 5 days of cultural awareness, an exhibit of Hispanic American arts and crafts will be on display next to the Clinical Center Library, Sept. 14 through Sept. 30. For more information, call Roy Martinez, Hispanic Employment Program coordinator, 496-9013. □

## NIEHS Reorganizes To Include More Toxicological Testing

The National Institute of Environmental Health Sciences has recently announced a significant major reorganization. While still maintaining its role in basic biomedical research, NIEHS has enlarged its involvement in applied sciences, particularly in the development, validation, and performance of toxicological testing on substances of environmental concern through the National Toxicology Program.

All of the NIH activities within the National Toxicology Program, which also comprises toxicological research activities of the Food and Drug Administration and the Centers for Disease Control's National Institute of Occupational Safety and Health, will be consolidated at NIEHS.

The National Cancer Institute transferred its Bioassay Program from the Division of Cancer Cause and Prevention to NIEHS along with 87 budgeted positions and \$45.6 million.

The reorganization was signed by HHS Secretary Richard S. Schweiker July 14 and appeared in the *Federal Register* July 24.

Resources from the former NCI Bioassay Program will be distributed to the newly created NIEHS Toxicology Research and Testing Program; the new Biometry and Risk Assessment Program (formerly the Biometry Branch); the Office of Administrative Management; and the Office of the Director.

Dr. David P. Rall, NIEHS Director, who serves in a separate collateral appointment as

director of the National Toxicology Program, has appointed Dr. John A. Moore as TRTP director. Dr. Moore also serves as deputy director of NTP. Dr. David G. Hoel, formerly chief of the NIEHS Biometry Branch, has been named BRAP director.

While addressing a meeting of NIEHS employees, Dr. Rall said, "As of last week (with the reorganization), we became a somewhat larger Institute with a broader mission and greater capabilities.

"The reorganization continues our commitment to the highest level of basic research, and at the same time adds to our responsibilities in the area of applied science. Scientists involved in these two missions will work closely, within the organization and within the laboratory buildings themselves."

The reorganization also changes the Research Resources Program within the Office of the Director to the Office of Facilities Engineering. The Comparative Medicine Branch and the Laboratory of Environmental Chemistry have now been officially moved within the intramural research program, and the Environmental Biology Branch has become part of the Toxicology Research Testing Program.

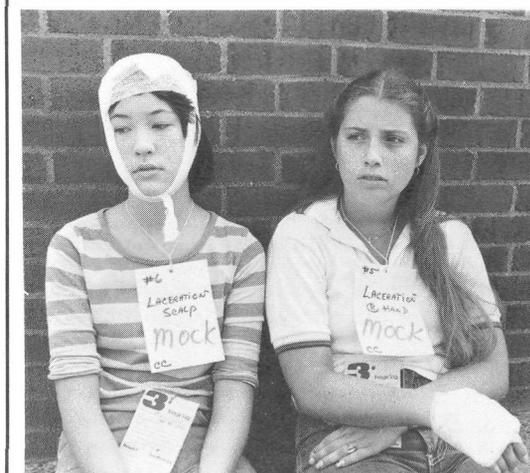
Two formerly separate laboratories, Pharmacokinetics and Organ Function and Toxicology, have also been consolidated within the already-existing Laboratory of Pharmacology. □

## Joint Conference To Be Held On 'Cancer and the Elderly'

A combined 3-day conference on Perspectives on Prevention and Treatment of Cancer in the Elderly will be held at the Lister Hill Center, on Sept. 21-23.

The conference, which is being sponsored by the National Cancer Institute and the National Institute on Aging, will have invited experts to discuss such topics as: medical care problems unique in the treatment of older-aged cancer patients; specific treatment perspectives on patients who have breast, colorectal, prostate, and skin cancer; and monitoring for cancer among the aged. Opening remarks will be made by NCI Director Dr. Vincent T. DeVita, Jr.

NIA Director Dr. Robert N. Butler will make concluding remarks at the Sept. 23 conference session. For further information, contact Dr. Rosemary Yancik, 427-8656. □



Two CC volunteer "casualties" await transportation during emergency evacuation drill. (See Page 3)

# The NIH Record

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## History of Medicine Society Holds Meeting Sept. 24

The Washington Society for the History of Medicine will hold its first meeting on Thursday, Sept. 24, at 8 p.m. in the Cluster Conf. Rm., Lister Hill Center.

Dr. Edwin A. Weinstein will talk about the Effects of Woodrow Wilson's Neurological Illness on the Treaty of Versailles and the Struggle for the League of Nations.

Also, Col. Robert J. T. Joy, Uniformed Services University of the Health Sciences, will speak on the professional accomplishments of Dr. Stanhope Bayne-Jones, medical officer.

Visitors are welcome. □

## Training Tips

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

Office Skills	Course Starts	Deadline
Effective English	10/26	10/9
Communication Skills		
Report Writing*	10/6	9/18

\* This course is being offered at Westwood Bldg., Conference Rm. D.

To learn more, contact the Training Assistance Branch, DPM, 496-2146.

## National Aquarium Visit Planned

R&W plans a visit to the National Aquarium and Harbor Place in Baltimore on Saturday, Sept. 26.

The aquarium contains over 8,000 animals. Buses will leave Bldg. 31C at 9 a.m., and will depart Baltimore for the return trip at 4 p.m. The cost, \$10.50 for adults and \$8.50 for children under 12, includes transportation and admission.

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

## Karate Classes To Begin This Month

The eighth 12-session, beginners course in Tae Kwon Do (karate) is being organized by the NIH Karate Club. Classes will meet on Mondays from 6 to 7 p.m. in the old gymnasium at the Stone Ridge School, corner of Cedar Lane and Wisconsin Ave., beginning Monday, Sept. 28.

Students will learn traditional Tae Kwon Do under Dr. W. French Anderson, first degree black belt. The 12-week beginners class leads to a gold belt and includes: front and back stances, rising and side blocks, hand techniques (reverse punch, chop), front and side kicks, combinations, the first Tae Kwon Do kata (chon-ji), one-step sparring (formalized attack and counterattack moves with a partner) and various self-defense moves.

For students with previous training, intermediate and advanced classes are available (Mondays—intermediates, 7 to 8 p.m. and advanced, 8 to 9 p.m.). Instruction in these classes includes more advanced stances, blocks, punches, and kicks, sparring drills, advanced kata, and board breaking (optional).

The fee for the beginners course is \$25. The fee for advanced students is \$15. Application forms may be obtained by calling Dr. W. French Anderson, 496-5844. □

## AALAS Certification Training To Be Held at NIH

All supervisors of animal handlers and technicians are invited to attend a planning session to discuss the American Association for Laboratory Animal Sciences training certification program to be held at NIH.

The planning session will be held on Wednesday, Sept. 30, in the Masur Auditorium, at noon. Before final arrangements can be made, the names of those expecting to attend should be made known to Adrian Loftis, 496-5479, at least 2 weeks in advance.

AALAS classes will commence on Wednesday, Nov. 18. Session organizers advise that tuition, books, certification, and certificate can be paid for by using Form HHS-350. □

## DRR 1980 Highlights Issued

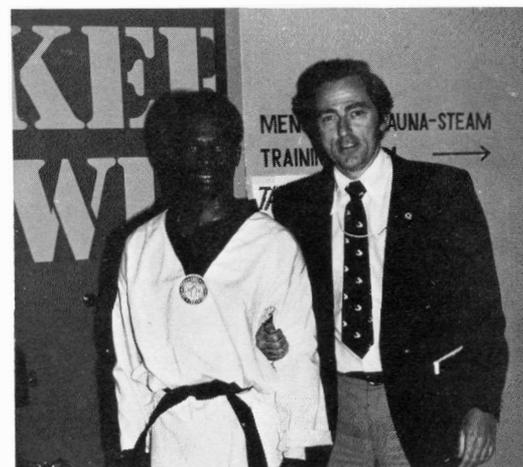
Highlights from activities supported by the Division of Research Resources have been published and are now available.

The 32-page booklet, entitled *1980 Program Highlights*, describes in detail each of the Division's five programs, citing research achievements and predicting future directions.

Through its programs the Division supports the development and maintenance of shared research resources. Currently, DRR grants fund 77 clinical research centers, 7 primate research centers, over 100 animal research resources, 38 biotechnology resources, and 82 minority biomedical support grantees.

DRR also provides funds to enhance research through biomedical research support at 506 institutions.

A free copy of the booklet may be obtained by writing to the Research Resources Information Center, 1776 E. Jefferson St., Rockville, Md. 20852, or to the Office of Science and Health Reports, Division of Research Resources, NIH, Bethesda, Md. 20205. □



Dr. Anderson (r) was the tournament physician for the Tae Kwon Do competition at the World Games I, held in July, in Santa Clara, Calif. He also served as the United States team physician. Participants from all over the world competed in this pre-Olympic competition where the U.S. team won three silver medals. Dr. Anderson attended Alfonso Quahhaar, the U.S. lightweight division competitor, who injured his right knee during the competition. Dr. Anderson treated him after his semifinals match; ultimately he won the silver medal.

## USAF To Give Concert

The US Air Force String Orchestra, sponsored by R&W, will present a free concert on Thursday, Oct. 8 at noon, in Masur Auditorium.

It will feature selective music from the 18th, 19th and 20th centuries and will include some of the works of Johann Stamitz, Mozart, Edward Grieg and Benjamin Britten.

A soliloquy for flute and strings will be performed by guest artist Linda Casselberry.

All NIH employees, CC patients and families are invited. For further information, call 767-4224. □

## Free Clinic at NIH For PHS Commissioned Officers

The NIH Satellite Clinic of the PHS Outpatient Clinic, Washington, D.C., is now open every Tuesday and Thursday in trailer C near Bldg. 10. The staff consists of a registered nurse and pharmacist, Jan Horan, and a board certified internist, Dr. Douglas B. Boice.

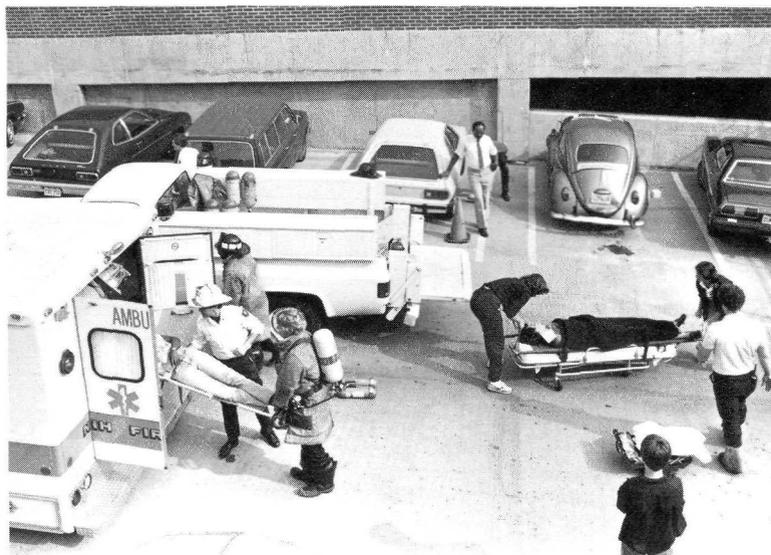
Commissioned officers' physicals and school physicals for dependents age 14 and over will be performed as well as routine breast and Pap exams for active duty personnel and their dependents. Additionally, routine immunizations and limited types of tests can be performed.

For an appointment call 245-1663. Those with a chart established in the Washington Outpatient Clinic, should have the chart number when making an appointment. □

## Reminder: NIH Singers To Meet

The NIH Singers will meet on Sunday, Sept. 20, at 7:30 p.m. Anyone interested may attend. For further information call Richard Shrager 496-1122. □

# First CC 'Mock' Disaster Evacuation Drill Held Here



Parking garage "casualties" were evacuated by the NIH Fire Department and other public safety agencies that took part in the drill.



Dr. Parrillo (r-foreground) and his staff check "casualties" prior to their being transported to Suburban Hospital during the CC disaster drill.

The first large-scale "mock" disaster drill designed to test Clinical Center communications, response and coordination capabilities was staged in the ACRF parking garage on Aug. 28.

Thirty-six volunteers drawn from the CC were recruited to play the roles of "casualties" suffering from different types of injuries as a result of fire and explosion in the garage.

For the last several months, the CC's Safety Committee worked to develop plans to realistically test the medical facility's emergency disaster plans. The drill's scenario was for a truck with propane and acetylene cylinders, and carrying plastic construction materials, to enter the ACRF garage at 9 a.m.

The cylinders fell off the truck, and the acetylene ignited immediately. The truck's gasoline fuel tank ruptured spreading its contents over a large area of the garage floor.

Using smoke canisters to simulate thick black smoke and toxic PVC poisonous fumes, organizers attempted to create the realistic environment that NIH employees might find themselves in if an actual disaster had occurred.

According to the plan, the truck driver sustained mock burns, and 35 other "casualties," who had been laid out under cars and near exits, were scattered throughout the parking area. Each volunteer had been tagged with a different, predetermined injury for evacuation.

The injured driver, enacted by Roger B. Mack, a principal organizer of the exercise, used one of the direct line emergency telephones located in the parking area and called the NIH Police to report the "disaster."

Immediately, the police notified the NIH Fire Department who initiated a communications alert system that involved the creation of a CC command post in the CC executive officer's office, and notification of the Occupational Medical Service. The Fire Department then dispatched a field command post to the scene of the "disaster."

Within minutes, firemen wearing oxygen masks entered the garage to search for and evacuate "casualties" to a nearby medical triage area where their "injuries" could be

assessed. In addition to the NIH Fire and Police Departments, Suburban Hospital, the Bethesda-Chevy Chase Rescue Squad and the National Naval Medical Center Fire Department also took part in the disaster exercise.

As part of the CC disaster plan, CC Director Dr. Mortimer B. Lipsett monitored and directed medical operations over a radio from the CC command post. He was in constant contact with NIH Fire Chief William E. Coleman, who was at the scene directing fire suppression and search-and-rescue operations from the mobile field command post.



NIH Fire Chief Coleman (c) directs search and evacuation operations by radio from a mobile field command post.

While the casualties were being evacuated, Dr. Lipsett alerted Dr. Joseph E. Parrillo, chief, of the Critical Care Medicine Department, and two other physicians to take charge of the triage area. Dr. Stephen Rosenberg, chief, NCI Surgery Branch, and other surgeons acted as medical backup at the South Clinic that was being readied to receive a limited number of the less serious disaster casualties.

Throughout the exercise, an independent team of hospital disaster planning experts observed the operation.

During the 2½-hour exercise, it was determined that 12 persons had been injured

critically; 12 others were semicritical; and another 12 had minor injuries.

Six persons were taken to the South Clinic, near the CC Blood Bank, for emergency treatment and another 30 were transported to Suburban Hospital. Additional nursing staff, to assist at the triage area, were assigned by Rena Murtha, chief, CC Nursing Department, who directed the nurses from the CC command post.

"Each department has a disaster plan, and there is an overall disaster plan for the CC," says Corwin D. Strong, chief, CC safety officer, adding that this is the first time that such an exercise of this magnitude has been done at the CC.

"We are all very pleased with the way it went. We did hold a critique and identify several problem areas. These will be remedied as quickly as we can do it," he noted. Over the next few weeks, he and his staff will be going over the expert evaluations.

"As a community-based organization, this is the type of training that a hospital should have," observed Dr. Lipsett after the exercise.

It is expected, says Mr. Strong, that at least once a year the CC will have similar "disaster" drills, and that different scenarios will be used each time. For example, an unannounced drill on an accident involving radiation, or a chemical spill might take place to see how organizations follow their disaster plans. □

## Blood Bank Has Thank-You Party

The CC Blood Bank is holding the second annual thank-you party for employees who have donated blood. The party will be held Wednesday, Sept. 16, from 1 to 3 p.m., in the 14th floor Assembly Hall of the CC.

Door prizes donated by the R&W Association will be given out, including a 1-day trip for two to Atlantic City. Other prizes include an evening for two at a Roth's theater, a bake-ware set, and an assortment of cards from Hallmark. Blood Bank tee-shirts and mugs, bumper stickers, and keychains will also be given to donors. Refreshments will be served. □

## Human Immunobiology Studied In New NIAID Laboratory

"Virtually everything we do in the Laboratory of Immunoregulation is geared toward understanding human immunobiology and applying that knowledge to the study of human disease," explained Dr. Anthony S. Fauci, chief of NIAID's newest laboratory.

Until recently, the LIR was the Clinical Physiology Section, Laboratory of Clinical Investigation. The expansion took place "to take advantage of the substantial advances which have been made in the field of immunology," according to Institute scientific director Dr. Kenneth W. Sell.

White blood cells called lymphocytes control immunity to all foreign materials. A complex series of cell interactions regulates the activity of each subset of lymphocytes. Excess regulation can lead to severe reactions against an individual's own tissues or to unregulated lymphocyte growth.

Dr. Fauci has been concerned primarily with basic mechanisms that activate and regulate



**Dr. Fauci and his staff have developed a meticulous categorization of the vasculitic diseases, those characterized by inflammation and destruction of blood vessels.**

human B lymphocytes—the cells responsible for antibody production—and the role that T lymphocytes play in assisting them.

While unraveling this delicate tangle, he has developed an exquisitely sensitive system to measure precisely the way in which individual antigens induce B cell activation and immunoregulation.

### Monoclonal Antibodies Developed

In addition, the LIR has developed monoclonal antibodies that define immunoregulatory T cell subsets and antigen specific human T cell clones. These systems enable the description of relationships between particular B and T cell subclasses. They are considered by many to be true breakthroughs in the study of human immunobiology.

Dr. Fauci has written the classic papers on diagnosis and treatment of the vasculitic diseases—those characterized by inflammation and destruction of blood vessels. For years, fatality rates were high for certain forms of vasculitis and survival was of short duration.

Some success had been achieved with corticosteroids to control inflammation, but the exact mechanisms by which they worked were not known.

Dr. Fauci's group conducted clinical studies of the corticosteroids and of the cytotoxic agent cyclophosphamide. They established dose regimens that led to high remission rates and realistic discussion of cures of the formerly fatal disorders. At the same time, careful regulation of dose levels enabled them to minimize the risks and side effects.

### Survival Rates Replicated.

Their survival rates were replicated in international studies, and the NIH-established protocols are now the state-of-the-art for treating vasculitis. The LIR's current prospective study involves the largest group of patients with vasculitic syndromes being seen at any center in the world.

Their achievements to date have led to an understanding of how corticosteroids selectively suppress functions of various lymphocyte subpopulations. They also revealed that cyclophosphamide, in the doses used in inflammatory diseases, selectively suppresses B cell function with relatively little effect on T cells.

Cyclophosphamide, however, depresses the level of natural killer cells, believed to play an important surveillance role against lymphoid tumors. This may explain evidence of subsequent lymphoid cancers in some groups of cyclophosphamide treated patients.

The expanded staff now includes seven clinical associates. They assist Dr. Fauci in seeing the 30 or so of his hundreds of patients who are in the Clinical Center at any one time. They also gather information for and discuss with Dr. Fauci the 50 or more phone calls that physicians, drawn by the reputation of the laboratory, place to the LIR each day, seeking consultation.

With expanded clinical and laboratory support, the LIR has undertaken several new projects. These include studies using cloning and hybridoma technology and work dissecting out the role that specific genes and their products play in the control of normal immune responses and in disease states. □

## the Great American SMOKEOUT

The Great American Smokeout, promoted by the American Cancer Society, is scheduled for Nov. 19. For 24 hours, smokers throughout the country are encouraged to give up cigarettes if only to prove to themselves that they can.

The Great American Smokeout is now in its fifth consecutive year as a nationwide celebration. The first mass movement by smokers to give up cigarettes was led by Lynn R. Smith, editor of the Monticello, Minn., *Times*, in his hometown in 1974. Mr. Smith's idea, "D-Day," quickly spread throughout Minnesota. In 1976, it skipped west to California, where it became known as the Great American Smokeout. In 1977, the Smokeout was observed for the first time nationwide.

The American Cancer Society offers these tips on how to quit smoking:

- When the urge to smoke hits, take a deep breath. Hold it for 10 seconds, then release it slowly. Taking deep, rhythmic breaths is similar to smoking, only you'll inhale clean air, not poisonous gases.

- Eat rather than smoke, but stick to low caloric, high nutritional foods—fresh fruit, raisins, crisp, crunchy vegetables. Or substitute sugarless gum for a cigarette. Other "pacifiers" to try: lemon drops, cloves, beef jerky, apple slices, celery sticks, unbuttered popcorn.

- Drink liquids—lots of them. Water, herbal teas, fruit juices, and certain soft drinks all fit the bill. Pass up coffee, soft drinks containing caffeine, and alcohol as they all can increase your urge to smoke.

- Change your habits connected with smoking. If you always had a cigarette on your office break, opt for a low-calorie snack and juice or herbal tea instead.

- Treat your body and soul with kindness. Indulge in a bath, massage, or nap. Listen to your favorite music, take in a movie. Enjoying these activities in the absence of smoking will help you realize that you don't need a cigarette to have a good time. □

## Roy G. Martinez, New Coordinator, Hispanic Employment Program

Roy G. Martinez has been appointed Hispanic Employment Program manager, Division of Equal Employment Opportunity, NIH.

Originally from San Antonio, Tex., Mr. Martinez has been active in equal opportunity and civil rights programs both in and out of government. Prior to this appointment, he served as Hispanic Program coordinator for both the Health Services Administration and the Health Resources Administration.

In his new position at NIH, Mr. Martinez is responsible for managing all Hispanic Employment program activities except for the complaint process. He is currently coordinating the Hispanic Heritage Week Program for NIH which will be held Sept. 24 and 25. For more information, call 496-9013. □



**Mr. Martinez stands in front of a Ojo de Dios (Eye of the Lord) in his office. The colorful Ojo talisman is reputed to bring good luck, good fortune, long life and bodily protection to the owner.**

## Suzanne L. Fremeau Dies After Prolonged Illness



All B1/D committee management officers and employees in Bldg. 1 gathered together to greet Mrs. Fremeau while she was hospitalized. Suggested by former Director Dr. Donald S. Frederickson, this picture was presented to her in poster size.

Suzanne L. Fremeau, 40, committee management officer for NIH and a resident of suburban Maryland since her childhood, died Tuesday, Sept. 8, of aplastic anemia at Johns Hopkins Hospital in Baltimore.

A native of Minneapolis-St. Paul, she began her NIH career in 1958, after graduating from Wheaton High School. For a 2-year period starting in 1968, she worked as an administrative assistant at the National Academy of Sciences, returning to NIH in 1970.

Mrs. Fremeau was appointed NIH committee management officer in 1973. In that capacity, she was the chief administrator for some 140 public advisory committees which, under the NIH "peer system," review applications for Federal biomedical grants.

Under Mrs. Fremeau's leadership the NIH Consultant F<sup>1</sup> was developed. She was in-

strumental in widening the representation of female and minority members on NIH public advisory committees.

Until her illness last January, Mrs. Fremeau had attended Maryland University as a part-time student working toward a B.A. degree.

A resident of Rockville, she leaves her husband, Harold L., two daughters, Michele, 18, and Denise, 17, of Rockville; and a son, Robert, of Silver Spring; her parents, Paul and Lorraine La Fontise, of Lunwood, Calif.; a brother, Jack, of La Morada, Calif., and a sister, Mrs. Paula Loewen, of Huntington Beach, Calif.

In lieu of flowers, the family requests that donations be made to the Suzanne L. Fremeau Memorial Fund for Research in Aplastic Anemia, c/o Johns Hopkins University Oncology Center, Rm. 2-127, Baltimore, Md. 21205. □

## NINCDS Scientists Develop Technique To Find Proteins

A protein-detecting microtechnique to help diagnose neurological disorders such as multiple sclerosis, myasthenia gravis, and Guillain-Barre syndrome has been developed by scientists from the National Institute of Neurological and Communicative Disorders and Stroke, the National Cancer Institute, and several cooperating institutions.

The new microtechnique relies on a standard procedure, electrophoresis, and a chemical combination of a polyacrylamide substrate with a sodium dodecyl sulfate (SDS-PAGE) suspension to detect a form of the protein immunoglobulin in extremely small amounts of unconcentrated cerebrospinal fluid.

In at least 10 nervous system disorders, the presence of this protein form in CSF is considered a diagnostic characteristic.

In electrophoresis, proteins in a liquid suspension move across an electrically charged substrate made of paper, starch, or other substances. During this movement, different proteins separate on the substrate into identifiable bands according to their individual reactions to the electric field.

Previously, the standard electrophoretic method for detecting immunoglobulin in CSF used an agar substrate and required relatively large amounts of CSF, which had to be con-

centrated 50 times or more. The process used to concentrate CSF was suspected of making test results difficult to interpret.

A more recent procedure using polyacrylamide and SDS-PAGE detected the protein in unconcentrated CSF, but still required considerable quantities of the fluid.

The new microtechnique largely eliminates these problems. The test not only requires much less CSF from patients, but is more sensitive than the standard electrophoretic technique.

Immunoglobulin has been detected in 94 percent of the previously diagnosed multiple sclerosis patients examined by the microtechnique; only 76 percent of the same individuals tested positively for the protein with the standard process.

The new detection procedure has now been recommended for routine diagnostic use. The lead investigator of this study was Dr. Matti V. Jivanainen, now of the department of neurology, University of Helsinki. □

Life is easier to take than you'd think; all that is necessary is to accept the impossible, do without the indispensable, and bear the intolerable.—Kathleen Norris □

## Information Intern Program Invites Applications

Applications will be accepted from Sept. 21 through Oct. 13, for two positions as NIH public information interns. The Information Intern Program provides an opportunity for a career in public information and science writing to selected college graduates or those with equivalent backgrounds. Many interns in the past have had experience and/or education in journalism or related fields and in science.

Since 1957, the NIH Information Intern Program has trained 42 young men and women in public information. Many of these now hold mid-level or high-level positions in public information at NIH and elsewhere.

The Information Intern Program consists of four different on-the-job training assignments over the course of a year. In addition, interns may enroll in formal course work and attend seminars and meetings to enhance their knowledge of science writing and public information.

Eligible candidates must:

- Have a career or career-conditional appointment, and have worked at HHS for at least 1 year immediately prior to Oct. 13, 1981.
- Work full-time or be willing to be reassigned full-time.
- Qualify under standard requirements for the public information fields in the GS-1000 occupational series.

At the GS-5 level:

- Three years of progressively responsible, nonclerical experience, or 4 years of college or university study leading to a bachelor's degree, or
- A combination of experience and education.

At GS-7 level:

- Requirements for GS-5, and
- Additional education or experience appropriate for GS-7.

Should the applicant need to request a downgrade to enter the program, he or she may be entitled to salary retention.

To apply, send a current Standard Form 171, Personal Qualifications Statement, and a recent HHS Form 623, Employee Appraisal and Performance Rating, to the Career Development Branch, DPM, Bldg. 31, Rm. B2C-32. A list of college courses (OPM Form 1170) should be included if appropriate.

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

For those interested in further details, two information sessions on the program will be held. These will take place in Conf. Rm. 7, Bldg. 31, on Sept. 30, from 10 a.m. to noon; and on Oct. 8, from 3 to 5 p.m.

General information may be secured from Edith Rollins, Career Development Branch, DPM, 496-2496. □

## Soccer Anyone?

The R&W Soccer Club is now forming teams and is looking for interested players at a competitive level, either on men's or coed teams, or for recreation and exercise after work.

Anyone interested in joining may call Gary Murray, 496-1465; Mark Buller, 840-8000 ext. 340, or Dave Johnson, 496-6647. □

## Barbara Murphy, Former CC Chief, Dies From Lung Cancer

Barbara Murphy, former chief of the CC's Social Work Department, recently died of lung cancer.

Ms. Murphy came to the CC in 1953 after working at Cornell Hospital in New York. She then served as a program supervisor of the Cancer Social Work Section and in 1966 was appointed assistant chief of the Social Work Department. She was named department head in 1972, a position she held until 1979.

She received the Public Health Service Commendation Medal in 1976, and in 1981 was awarded a certificate of appreciation and an outstanding unit citation from the PHS outpatient clinic.

A graduate of St. Lawrence University in Canton, New York, Ms. Murphy earned a master's degree in applied social sciences from Case Western Reserve University in Cleveland, Ohio. She was a charter member of the National Association of Social Workers, a member of the American Association for Child Care in Hospitals, the Society for Hospital Social Work Directors, and the American Public Health Association.



Ms. Barbara Murphy

## Notable Scientists Become FIC Scholars-in-Residence

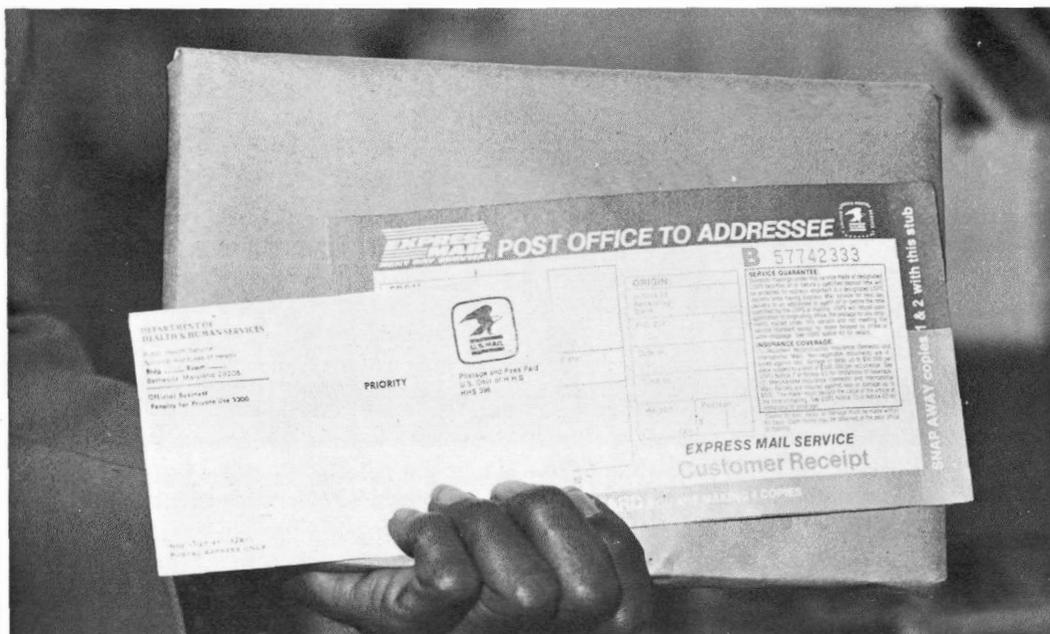
Two Fogarty International Center scholars-in-residence, Drs. Shmuel Shaltiel and Tomas Hokfelt, arrived recently at NIH.

Dr. Shaltiel is professor of biochemistry and dean of the graduate school at the Weizmann Institute of Science, Israel. His early work was concerned with the mechanism of action and cellular regulation of glycogen phosphorylase, but more recently has dealt with such diverse subjects as cAMP-dependent protein kinase, phosphodiesterase, pollen allergens, histones and membrane function.

He is also well-known for innovative studies leading to the development of hydrophobic chromatography as an important tool for the separation of proteins. His office is in Stone House, Rm. 314, 496-2027.

Dr. Hokfelt, professor of histology at the Karolinska Institute in Sweden, is well-known for his work in neuroanatomy. He is recognized particularly for studies on the distribution of biologically active peptides in the central and peripheral nervous system. He was

## New Express Mail Label To Be Used



Shown are the new "priority" label and the Post Service express mail form that should be used together whenever an item is mailed express mail.

"It's got to be there tomorrow!" are the panicky words often heard at NIH concerning the sending out of express mail which must be at its destination the next day. Each week, anywhere from 300 to 400 pieces of express mail items pass through NIH's central mail room in Bldg. 31. A new and less expensive procedure began this month regarding express mail.

Previously, many B/I/D employees sending out items "double labeled" believed that the more franked labels affixed to a piece of mail, the quicker it was delivered by the U.S. Postal Service.

The express mail situation led to an official suggestion being submitted, and a new "priority" label developed exclusively for express mailing.

Under the previous procedure, express mail was received at the central mailroom in Bldg. 31 with the Postal Service's express mail service label and a franked label that had been purchased through the GSA supply stores. Through careful research done by Robert Jennings, mail supervisor, Mail Service Section, it was determined that the generally used franked label for a lightweight package costing \$4.18, was unnecessary.

Mr. Jennings' suggestion, which was officially accepted and implemented, is expected to save the government between \$40,000 and \$70,000 each fiscal year.

A new "priority" address label has been designed, and will accompany the Postal Service's express mail service form when an item has to be received somewhere overnight. By using the forms for express mailing, the

among the first to show that "hypothalamic hormones" act as neurotransmitters at extra-hypothalamic loci and that certain mammalian neurons make more than one neurotransmitter. He can be reached at Stone House, Rm. 307, 496-1739.

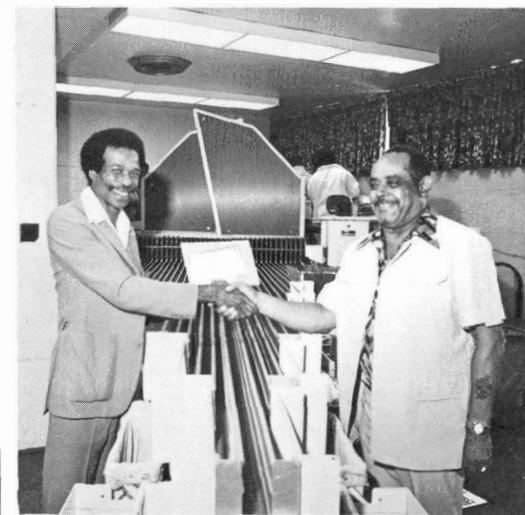
Dr. Shaltiel is sponsored by Dr. Earl R. Stadtman, NHLBI, and Dr. Hokfelt by Dr. Michael Brownstein, NIMH. □

government guarantees delivery within 24-hours, and charges according to an item's weight and to the zone where it is being sent. A B/I/D's common account number or "CAN" number should also be placed above the address space on the express mail service form.

The new "priority" label is to be used exclusively with the express mail form. There is no charge for the label nor will any mail charge be imposed when used. Both labels can be obtained from any of the NIH mailrooms.

Realizing the need in many cases for speed in delivery, the NIH Mail Service Section reminds employees that express mail forms and labels should not be used on Fridays. Most businesses and universities are closed on Saturdays, and in many cases, the addressee would not receive the rush item until Monday.

Each day from Monday through Friday, express mail items will be picked up by the U.S. Postal Service at 3:30 p.m.



Mr. Jennings (l) is congratulated by James Thompson, chief, Mail Service Section, about his award-winning suggestion. Each year, the NIH Central Mail area handles over 12 million pieces of U.S. mail. In addition, nearly 2 million pieces of literature, publications, and desk-to-desk memoranda are processed for home mail delivery.

## Noted Dental Caries Researcher Retires



Research by Dr. Keyes and several other NIDR scientists in the early 1960's laid the foundation for the establishment of the Institute's National Caries Program in 1971. Dr. Keyes was the first chief of the laboratory study section of the program.

Dr. Paul H. Keyes, an internationally recognized scientist in the field of dental caries research, retired from the National Institute of Dental Research recently after 27 years in the U.S. Public Health Service.

Throughout his career, Dr. Keyes has made significant contributions to basic research and to new preventive approaches for diagnosing and treating dental caries and periodontal diseases.

He was a major contributor to the development and clarification of the concept that dental caries is the result of interactions between host, bacteria, and diet, and that this multifactorial disease pattern also applies to humans. Dr. Keyes was also the first researcher to apply fluoride with a mouthpiece in his caries prevention investigations with hamsters.

### Prove Dental Caries Infectious

In 1960, Dr. Keyes and Dr. Robert Fitzgerald, an associate NIDR researcher, were the first to prove experimentally that dental caries is an infectious and transmissible disease, and to isolate and identify the causative organisms. For this work they received the Albert Joachim International Prize from the Federation Dentaire Internationale at its World Congress in Cologne, Germany.

Their findings reemphasized that dental caries is a multifactorial problem, and at the same time offered an experimental approach to assess more precisely the contributing factors in dental caries. These important studies greatly influenced the trend of research in experimental caries, paving the way for new methods to identify specific microbial agents and determine host specificity in human caries.

Dr. Keyes earned his D.D.S. degree from the University of Pennsylvania, and his M.S. degree in anatomy from the University of Rochester. Following his internship in New York, he received fellowships at the University of Rochester and at Harvard, where he subsequently served on the faculty from 1946 to 1954.

He joined NIH in 1955 in NIDR's laboratory

## STEP Training Activities Described In New Brochure for Extramural Personnel

The Staff Training in Extramural Programs Committee has issued a brochure describing its 1981-82 series of training activities—six modules, or short courses, and the STEP Forum discussion series.

The program is planned to broaden the interests and improve job skills of those in NIH extramural programs, and to introduce new extramural personnel to the programming, review, and management of NIH extramural activities.

Module I, Introduction to the Extramural Programs, provides a broad overview of grant and contract activities for personnel new to extramural programs. It will be offered Dec. 8-9, 1981.

The well-received module on Information Systems for Extramural Staff will be offered again this year on Jan. 6-7, 1982. It will describe the content and capabilities of NIH information systems, and will demonstrate applicability to review, program administration, and grants management functions.

Peer Review of Grant Applications: Creative Response to Changing Demands will be held Feb. 17-18, 1982. This new module will ex-



Carolyn Stephens, cataloger for the NIEHS Library, was one of three students to receive a minority stipend from the international Special Library Association to continue her education in the master's degree program at North Carolina Central University School of Library Science in Durham. The SLA has 10,000 members who work at industrial, research and business libraries throughout the world.

of histology and pathology to conduct research on dentobacterial plaque diseases.

In 1972, Dr. Keyes moved to the Institute's Dental Clinic where he has pursued clinical investigations on the relationships between oral bacteria and periodontal disease at the microbiology section of the Laboratory of Microbiology and Immunology.

### Author and Lecturer

The author of over 80 research papers in the field, he has lectured extensively in the U.S. and abroad. He has also conducted courses in preventive dentistry at the National Naval Medical Center Dental School.

Dr. Keyes is recipient of various other awards including the Award of Honor of the French Society of Pedodontics, the Caries Research Award of the International Association for Dental Research, the Annual Research Award from the Chicago Dental Society, and the USPHS Meritorious Service Medal. □

amine the impact on the review system of increased competitive pressures and limited resources, and will identify alternatives which might strengthen the review system.

Shrinking Research Dollars: Funding Issues, Mechanisms, and Alternatives, will be given Mar. 25-26, 1982. This is a new module geared to facilitate exploration of funding issues, new mechanisms, and alternatives designed to permit achievement of program goals within a limited growth budget.

Another newly designed module, Review, Program, and Management: Responsibilities and Interactions, will focus on the interactions, separate responsibilities, and potential conflicts among the executive secretary, the program administrator, and the grants management officer or specialist. It will be offered Apr. 27-28, 1982.

The popular Politics of Health: 1982 will be presented this year May 13-14, 1982. Prominent government and private sector leaders will discuss current health issues of political relevance.

The STEP Forum is a discussion series held at monthly intervals, often at the Westwood Bldg. These 2-hour seminar-type sessions deal with a wide range of topics of current interest to NIH personnel.

Dr. William F. Raub, NIH Associate Director for Extramural Research and Training, notes in his foreword to the STEP brochure, "In these times of great scientific opportunities, continuing education is increasingly critical to health science administration."

The STEP activities are developed and managed by the STEP committee which consists of 20 extramural staff appointed to 3-year terms as well as four ex-officio members. This year the committee is chaired by Dr. David G. Badman, Hematology Program director, NIADDK.

The brochure detailing this year's STEP program is available in personnel offices or from Arlene Bowles, executive secretary, STEP committee, Bldg. 31, Rm. 1B-63, 496-1493. □

## All-Savers Certificates Available At Credit Union

All-savers certificates will be offered by the NIH Federal Credit Union Oct. 1. Minimum investment for the 1-year certificates is \$500. The interest rate will be 70 percent of the 52-week Treasury Bill rate which is currently announced once a month.

Each all-saver certificate owner is allowed \$1,000 tax-free interest, and \$2,000 worth of tax-free dividends if married. This tax-free interest will be added to income for 1982 State taxes. The advantages of the tax exemption depend on an individual's tax bracket. Charts showing interest and income according to tax bracket are available at most financial institutions participating in this program.

Certificates can be purchased in the NIHFCU Bldg. 31 A-wing offices, or at their administrative offices located on Old Georgetown Rd., Bethesda. Inquiries are welcome; call 496-2331. □

## Tropical Disease Research Expands at Johns Hopkins

An intensified effort to find better methods to combat tropical diseases in developing countries has moved into full operation through the establishment of the Tropical Medicine Center at the Johns Hopkins School of Hygiene and Public Health in Baltimore.

"The problem with tropical diseases is that the countries in which they occur are generally poor and have little advanced scientific research," says Dr. Howard Goodman, the center's director and the founding director of a World Health Organization tropical diseases research and training program.

"Malaria and some other tropical diseases continue to spread, and Americans who travel to these countries come home with a variety of ailments. It is an essential area of public health at home and in tropical countries."

Tropical diseases plague 1 billion people each year. An estimated 400 million humans have malaria or suffer from schistosomiasis, while 300 million have filariasis. That group of parasitic diseases includes onchocerciasis—which affects 40 million people.

In Latin America, 12 million people suffer from Chagas' disease. Its African counterpart, sleeping sickness, kills 3 million cattle each year. Victims of leishmaniasis (another parasitic disease) number in the tens of millions. Approximately 12 million people have leprosy.

### Tropical Disease Research

The center at Johns Hopkins, which received its start-up support from the Division of Research Resources through its Biomedical Research Support Grant program, contains insects, parasites, and fungi originating from exotic tropical lands. But the glamor of the tropics is forgotten as scientists delve intensely into the intricacies of tropical disease transmission.

In one windowless room, 30 different kinds of mosquitoes, native to the tropic islands of Polynesia, are buzzing around in confined

spaces. Fish tanks in another room are populated with snails from Brazil and other equatorial countries. A freezer in the basement is filled with parasites that began their life cycles in fast-flowing mountain streams in Guatemala.

Major investigations, still in progress, are beginning to produce results. A biomedical-pharmacologist has developed what may be a simple and inexpensive treatment for schistosomiasis (snail fever), one of the world's major tropical parasitic diseases. The first human trials are just beginning at Hopkins, although the Chinese government has used the drug with good results on more than 100,000 people. The drug is effective with a single oral dose and costs about a \$1 a dose.

### Skin Diagnosis

Another researcher has developed a method of diagnosing "river blindness," a tropical disease that has caused blindness in 2 million people worldwide. The method uses a new skin test to diagnose the diseases, which is caused by parasite worms carried by biting flies.

The center has helped initiate a major joint endeavor with WHO and the Wilmer Institute of Baltimore to examine the leading worldwide causes of sight-destroying diseases.

Dr. Goodman recently completed a WHO consulting assignment in Thailand designed to help coordinate national health research planning. Among the areas addressed were malaria, diarrheal diseases, and laboratory support to develop simplified methods so that trained nonprofessional village health volunteers could learn to test for tropical diseases.

"A trained village volunteer can take a finger-prick blood sample on a piece of filter paper, dry it, and send it to a central lab where tests could show whether the patient has been exposed to a specific tropical disease," he explains.

"The U.S. Centers for Disease Control now gets these dried samples from all over the world to check for malaria. This type of testing can be done for epidemiologic surveillance of other diseases as well." □

## Barbara D. Watley Dies; Recently Retired From NCI



**Ms. Barbara D. Watley**

Barbara D. Watley, 57, recently retired supervisory grants technical assistant, National Cancer Institute, died of cancer Aug. 8 at Johns Hopkins Hospital in Baltimore.

Ms. Watley worked for more than 25 years for NCI, beginning as a grants clerk in 1956. She was involved with most types of grants, except for fellowships. Some of the grants she dealt with included construction grants for the oncology center at Johns Hopkins Hospital.

A Washington area resident since 1948, she was born and raised in Norfolk, Va. She attended business college there before becoming a clerk-typist for the Norfolk Naval Shipyard in 1942. She had planned to retire in Norfolk.

Ms. Watley is survived by her daughter, Lynette D. Kottler, Arlington, Va.; her son, Dennis G. Watley, Laurel, Md.; her mother, Marjorie M. Dalton, Norfolk; and two brothers, John H., Arlington, and Graham G., Norfolk.

The family suggests that expressions of sympathy be in the form of contributions to the American Cancer Society.

## Dr. Dement Appointed NIEHS Safety and Health Manager

Dr. John M. Dement has been appointed safety and health manager for the National Institute of Environmental Health Sciences. He assumes responsibility for maintaining health and safety standards and procedures for the more than 600 employees working in NIEHS offices and laboratories.

Dr. Dement comes to NIEHS from the Division of Respiratory Disease Studies in the National Institute for Occupational Safety and Health in Morgantown, W.Va., where he was deputy director. Prior to that assignment, he was assistant chief of the Industrial Hygiene Section of NIOSH in Cincinnati, Ohio.

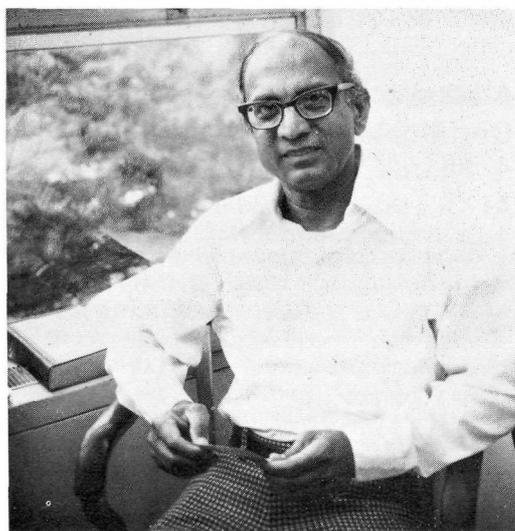
He is certified in the comprehensive practice of industrial hygiene by the American Board of Industrial Hygiene, and received the U.S. Public Health Service Commendation Medal for exemplary service in 1977.

Some of the professional societies to which Dr. Dement belongs include the American Industrial Hygiene Association and the American Academy of Industrial Hygiene.



**Dr. Dement's new job includes coordinating the activities of both the Safety Office and the Radiation Safety Office within the Office of the Institute Director.**

He received an M.S. from Harvard University School of Public Health in 1974; and his Ph.D. from the School of Public Health at the University of North Carolina, Chapel Hill in 1980. □



**Dr. M. Sayeed Quraishi, chief, Pest Control and Consultation Service, Office of Administration, has been recently appointed to the editorial board of the *Journal of Environmental Toxicology and Chemistry*. This new publication of the Society of Environmental Toxicology and Chemistry will begin in January 1982. The society is holding its second annual meeting locally in November. For further information contact Dr. Quraishi.**

## Visiting Scientist Program Participants

Sponsored by Fogarty Internat'l Center

8/17—**Dr. Eleanora Heisterkamp**, Netherlands, Laboratory of Viral Carcinogenesis. Sponsor: Dr. John Stephenson, NCI, FCRC.

8/18—**Dr. Kenji Nakanishi**, Japan, Laboratory of Immunology. Sponsor: Dr. William Paul, NIAID, Bg. 10, Rm. 11N309.

8/19—**Dr. Ella Mendelson**, Israel, Laboratory of Molecular Carcinogenesis. Sponsor: Dr. Michael Bustin, NCI, Bg. 37, Rm. 3D20.

8/20—**Dr. Eugenio Santos**, Spain, Laboratory of Cellular and Molecular Biology. Sponsor: Dr. Stuart Aaronson, NCI, Bg. 37, Rm. 1A07.

8/23—**Dr. Gideon Bach**, Israel, Genetics and Biochemistry Branch. Sponsor: Dr. Elizabeth Neufeld, NIADDK, Bg. 10, Rm. 9N238.

8/24—**Dr. Ron Breiman**, Israel, Section on Biochemical Mechanisms. Sponsor: Dr. Louis Cohen, NIADDK, Bg. 4, Rm. 234.

8/24—**Dr. Hon Yeung Cheung**, Stateless, Laboratory of Molecular Biology. Sponsor: Dr. Ljubisa Vitkovic, NINCDS, Bg. 36, Rm. 3D02.

8/24—**Dr. Safaa El-Seifi**, Egypt, Laboratory of Molecular Aging. Sponsor: Dr. Bertram Sacktor, NIA, Gerontology Research Center, Baltimore.

8/24—**Dr. Tadashi Kasahara**, Japan, Laboratory of Microbiology and Immunology. Sponsor: Dr. Joost Oppenheim, NIDR, Bg. 30, Rm. 322.

8/25—**Dr. Kazuaki Yoshikawa**, Japan, Laboratory of Behavioral and Neurological Toxicology. Sponsor: Dr. Jay-Shyong Hong, NIEHS, Research Triangle Park, N.C.

8/26—**Dr. Iain J. East**, United Kingdom, Laboratory of Chemical Biology. Sponsor: Dr. Jurrien Dean, NIADDK, Bg. 10, Rm. 9N314.

## Curtis D. Tate Becomes DCG Deputy Director

Curtis D. Tate has been selected deputy director of the Division of Contracts and Grants, Office of Administration.

In his new position, he will assist the director of DCG in leadership and staff direction for NIH research contracting activities, develop contracting policies and procedures, conduct reviews and evaluations, and provide financial advice and services to B/I/D's on management and administration of grants and contracts.

Previously, Mr. Tate had served as chief, Contracts Operations Branch, National Heart, Lung, and Blood Institute, where he was responsible for total contract operations. He also has had contracting assignments with NIAID and the Office of International Research.

A native of Pittsburgh, Pa., he received a bachelor's degree in business administration from Marshall University, Huntington, W.Va. He is a member of the National Contract Management Association, a certified professional contracts manager, and holds the highest HHS contracting manager certification.

Mr. Tate received an NCMA Presidential Citation in 1975 for assisting in establishing a national certification program for contracts professions.

During his 17 years at NIH, Mr. Tate has been honored with four special achievement cash awards, as well as recognition for beneficial suggestions and EEO activities. □

## Dr. Bennett Named Chief of New NIAID Branch

Dr. William E. Bennett has been named chief of the recently established Research Manpower Development Branch of the National Institute of Allergy and Infectious Diseases. This new branch replaces the former Office of Research Manpower Development.

He will serve as principal advisor to the NIAID Director on manpower needs and training. In addition, Dr. Bennett will be responsible for policy and procedure related to extramural research training grants and fellowships.

### Manpower Needs Developed

Dr. Bennett will work with the Director, the NIAID Council, and professional societies in developing projections for future manpower needs and the ways to meet them. He will also be active in minority recruitment for the Institute's grants and contracts programs.

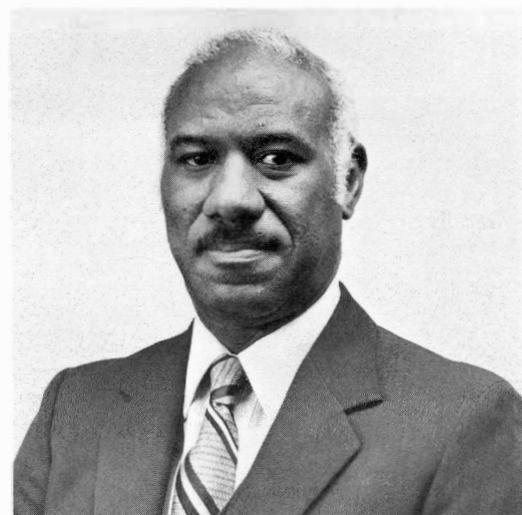
He earned his M.A. degree in bacteriology from Temple University, and Ph.D. in medical microbiology from the University of Pennsylvania, and received postdoctoral training in cellular immunology at Rockefeller University.

Prior to joining NIAID, Dr. Bennett was chief of the Bureau of Health Professionals' Educational Development and International Activities Branch of the Health Resources Administration.

His association with NIH began in 1969 when he was appointed grants associate with the Division of Research Grants.

Earlier in his career, Dr. Bennett was a faculty member in the department of microbiology, Meharry Medical College, and microbiologist with the U.S. Biological Laboratory at Fort Detrick, Md., where he received the Leroy D. Fothergill Award for outstanding research in cellular immunology.

Throughout his career, he has lectured ex-



Dr. Bennett is the recipient of the PHS Special Recognition Award.

tensively on the needs and trends in medical education, with a particular focus on minority programs. He has also served as a visiting lecturer in the microbiology department at Howard University as well as co-chairman of the review committee of HHS' Office of Education at the university.

### Recently Visited Poland

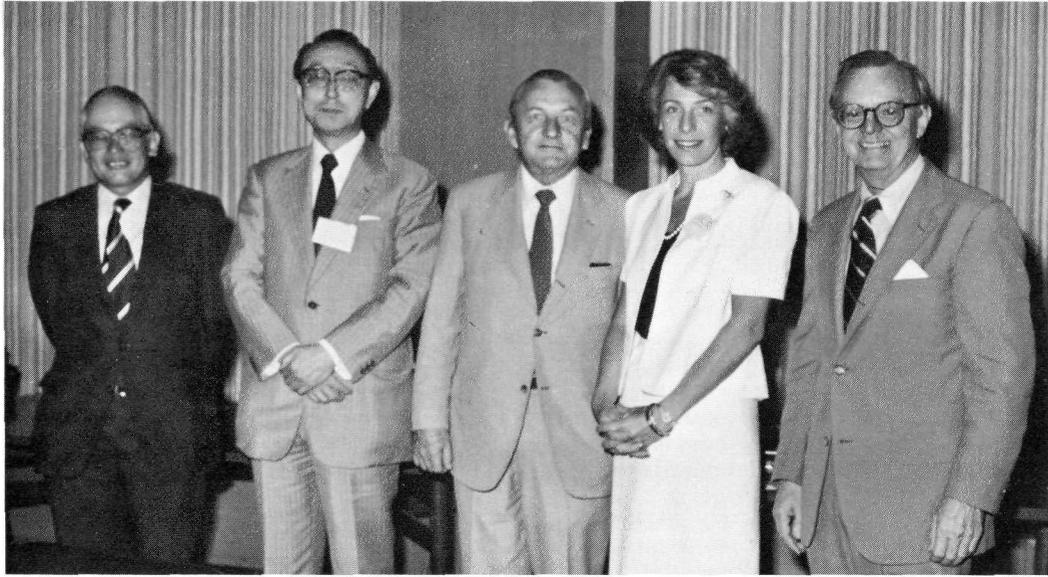
Dr. Bennett organized and participated in a U.S.-Poland Symposium on Prevention and Medical Education in 1979, and recently visited Warsaw to prepare for the U.S.-Poland Medical Education Symposium to be held there in May 1982.

He is a member of the American Society for Microbiology, the Reticuloendothelial Society, and the New York Academy of Science. □



Donna U. Huber (r), who resigned after serving for 3 years as executive secretary of the Westwood Employees Committee on Problem Solving, was honored at a party given for her by committee members and friends recently in the Westwood cafeteria. Ms. Huber was lauded as being the person primarily responsible for improving the working environment at the Westwood Bldg. Bob Kelley (standing behind Ms. Huber), an NIAID contract specialist, was elected to her post.

## Immunology Board Added to U.S.-Japan Cooperative Medical Science Program at Meeting



At the recent U.S.-Japan meeting (l to r) were: Minister Michio Mizoguchi, Embassy of Japan in Washington; Dr. Norio Suwa, chairman of the Japanese delegation; Dr. Ivan L. Bennett, Jr., chairman of the U.S. delegation; Mary Elizabeth Hoinkes, Deputy Assistant Secretary for Health, Environment and National Resources, U.S. State Department, and Dr. Richard M. Krause, Director, NIAID. Welcoming remarks were made by Mrs. Hoinkes, and Minister Mizoguchi.

The Joint Committee of the United States-Japan Cooperative Medical Science Program approved the addition of a new immunology board, increasing the number of program areas from eight to nine.

This action took place at the 17th meeting of the committee, held recently at NIH, and is the first basic research area to be added since the inception of the program.

The committee also decided to commit research on interferon to all panels, especially those on hepatitis and viral diseases, rather than establish a separate program.

The program was initiated in 1965 following a meeting between Japan's then Prime Minister Eisaku Sato and President Lyndon B. Johnson. The two countries agreed to cooperate on a biomedical research effort, concentrating on health problems of recognized importance in Asia.

At the 1981 meeting, eight joint panels—cholera, leprosy, parasitic diseases, tuberculosis, viral diseases, malnutrition, environ-

mental mutagenesis and carcinogenesis, and viral hepatitis—presented reports of scientific progress.

Possible options were also discussed for reducing program costs without interfering with the quality of scientific activities.

The recent 2-day meeting was attended by scientists from NIAID, NIADDK, NIEHS, FIC, NHLBI, and the Japanese ministries of Health and Welfare and Education. Dr. Ivan L. Bennett, Jr., chairman of the U.S. delegation, and Dr. Norio Suwa, chairman of the Japanese delegation alternately chaired the sessions.

Under the agreement, the U.S. State Department delegates authority for management of the U.S.-Japan Program to the NIH, and NIAID is responsible for its administration. Funding in the U.S. is provided primarily by NIAID, NIADDK, and NIEHS.

Japan will be the host country for the 18th Joint Committee meeting to be held in Tokyo, July 22-23, 1982. □

### New Literature Searches Available

The following new Literature Searches are available from the National Library of Medicine's Reference Section:

LS 81-5 *Percutaneous transluminal angioplasty*. Jan. 1979 through July 1981. 145 citations.

LS 81-6 *Sudden infant death syndrome*. Jan. 1976 through Aug. 1981. 395 citations.

LS 81-7 *Lead exposure in children*. Jan. 1977 through July 1981. 354 citations.

LS 81-8 *Foreign medical graduates in the United States*. Aug. 1979 through Aug. 1981. 100 citations.

A list of titles appears in *Index Medicus* and *Abridged Index Medicus*.

When requesting, please include title and number, enclose a self-addressed gummed label, and mail to: Literature Search Program, Reference Section, National Library of Medicine, Bethesda, Md. 20209. □



Jack Turlik has been recently promoted to chief, Contracts Operations Branch, Division of Extramural Affairs, NHLBI, after having served as deputy branch chief. Mr. Turlik began his government career in 1950 and later came to NIH in 1961. A year later, he moved into the position of administrative officer for the Office of the Director.

## Malnutrition's Effects On Children Examined

Malnutrition's impact on the social-emotional behavior of children was addressed recently by a National Institute of Mental Health intramural team presenting results of a 5-year research study.

Dr. David E. Barrett, now of Harvard Medical School, reported findings of two parallel studies—one in rural Guatemala, the other in San Diego, Calif. Dr. Marian Yarrow, chief, Laboratory of Developmental Psychology, NIMH, collaborated in both studies.

Research on human infants indicates that prenatal undernutrition results in apathy, difficulties in stimulus regulation, and reduced social responsiveness. Therefore, the researchers investigated the effect of poor nutrition on social and emotion development in children of school age.

In Guatemala, 138 children aged 6 to 8 participated. They had taken part in the Institute of Nutrition of Central America and Panama longitudinal study where children and pregnant women received calorie supplements because of chronic malnutrition in the general population.

### Village Children Examined

In the villages, researchers examined the children's current social, emotional, and cognitive behavior, and relationships between their current behavior and early nutritional history.

The 65 children—aged 6 to 7—in the San Diego study were from low-income homes. As in the Guatemala study, data on early nutrition and medical history were used to predict behavior at school age. In both studies, social-environmental conditions such as quality of housing or amount of parents' education were controlled.

In each locale children were observed both in small groups and individually. While playing, children were observed during a sequence of game-like activities including free play in a novel environment, group problem-solving tasks, and competitive games.

"Prenatally undernourished children in San Diego and children in Guatemala who received insufficient calories prior to age 2 were characterized by low social responsiveness, poor emotional expression, and dependent behavior at school age.

"Results from both studies suggest that malnutrition occurring prenatally and during infancy does not necessarily impair the development of higher level cognitive processes (such as reasoning ability) but attentional capacities appear to be affected," Dr. Barrett said. □

### R&W Goes Back to Atlantic City

R&W will return to the Playboy Hotel and Casino in Atlantic City on Friday, Sept. 25. Price per person is \$22 and includes transportation in the new double-decker playboy club motor coach, bunny hostess and bar service on each deck, four complimentary drinks, \$10 worth of quarters, and \$2.25 meal credit.

Buses will leave Bldg. 31C at 8 a.m. sharp and leave Atlantic City at 6 p.m. for the return trip.

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

# Cable Television Focuses on NIH's Many Activities

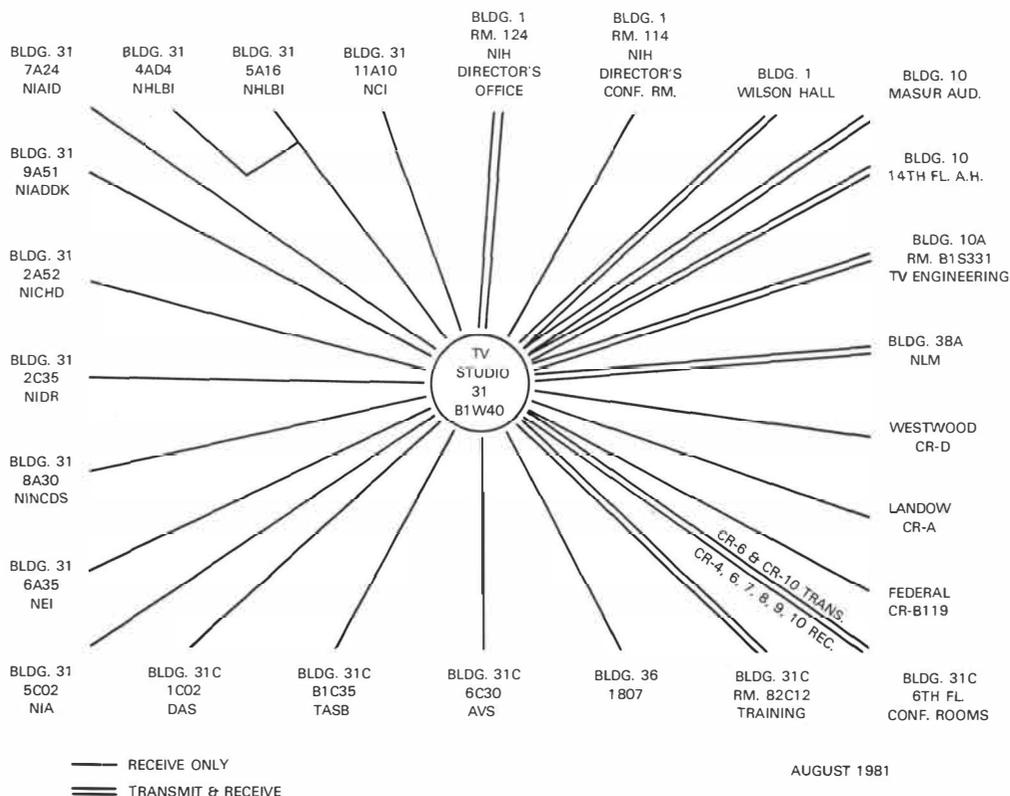
Vivid television images coupled with concisely written scripts, along with other audio and visual techniques have forged a strong communications link at NIH.

Like so many other places in America today, NIH has turned to cable television for information. Researchers use videotapes to record their latest work and send them to colleagues; clerical and administrative employees improve their skills through the medium; and managers keep abreast of new policies by tuning in the electronic eye.

Today with a turn of a switch any of 30 locations in and near NIH can instantly receive television programming. When former NIH Director Dr. Donald S. Fredrickson gave his farewell address to a capacity crowd in the Masur Auditorium, all NIH employees had the chance to see and hear him through the NIH closed circuit color TV system.

The hub of NIH's audiovisual services is located in a studio on the B1 level of Bldg. 31, where AV specialists help get "messages" out in a professional manner.

Besides reaching out to different locations, several of NIH's television monitor locations are equipped to broadcast live coverage from one building to another. A Clinical Center researcher could address a question to a National Library of Medicine librarian, and receive an immediate response.



A single line indicates that a location can only receive programming. Double lines show a transmit and receive capability on the NIH closed circuit television system.



Television production chief Wray (standing) confers with Walter Scharr (l) of the Cox Cable Network and William Morrison of the National Heart, Lung, and Blood Institute on a pilot demonstration program using the national cable TV company. After the program *The Silent Disease* appears in Omaha and San Diego, viewers will be able to request additional information on the subject of high blood pressure by pressing a key pad. NHLBI will then evaluate viewer data gathered by the cable system. Not shown is Dr. Frank Douglas of NHLBI who is medical consultant for the project.

Many live hookups originate in Bldg. 31's conference room area located on the sixth floor in the C Wing. Audio recordings and videotapes can be made of conferences and later be referred to for future use or for transcription.

"This unit has evolved from a projection unit to what it is today," said Charles C. Lee, chief, Audio Visual Section, Travel and Ad-

ministrative Services.

"Many people forget that we provide a video service," Mr. Wray said, noting that besides studio work, he and his crew can leave the studio as they did last year to film a 30-second public service spot at the CC Platelet Pheresis Center. The resulting tape received wide exposure on both local commercial and public television stations.

Besides getting a "message" out that might better inform the public about a particular health concern, television is also being used effectively as part of nurse training.

Due to rotating shifts and scheduling conflicts, nurses sometimes miss important lecturers or information about patient care. Today, however, with the use of video recorders, a complete taped program can be left for a particular nurse or group of nurses, as has been done with those interested in bone marrow transplant.

The videotape recorder is also being utilized to relieve patient anxieties about submitting to particular surgical protocol. Not long ago, a physician contacted the AV section for help in developing a tape for patients who were to undergo radiation therapy. Another tape on "informed consent" or patient rights also has been prepared for people being admitted to the CC for treatment.

Gene Cowgill, a former biological laboratory technician and Stride program graduate now responsible for the closed circuit television unit, pointed out that "we are not Hollywood." Commenting on the sometimes unreal expectations people have when they contact the section for video production, he noted: "People forget that for every minute of video, it takes 30 minutes of

production."

"We have the people here to help you with your production," added Mr. Lee. "Come as early as possible (with your idea); so that we can put out the best production."

His cadre of audiovisual specialists provides a number of services and counsels and advises on the mysteries surrounding television and other audiovisual work. They operate the NIH-wide closed circuit television operation, produce and edit videotape programs, provide audio recordings of conferences, and supply projection and sound recording equipment.

"Our service is finding more of a place with the B/I/D's," observed Mr. Lee about the more frequent use of audiovisuals, particularly television, at NIH.

Over the last few years, the section has filmed the very popular Clinical Center Medicine for the Layman series, where experts present in everyday language the latest developments in biomedical research. The tapes have been edited and are distributed by a contractor to cable television and a few different television stations for airing as part of their programming.

In addition, the National Heart, Lung, and Blood Institute has produced a show on the effects of high blood pressure entitled *The Silent Disease*. Beginning this fall, this show will be aired in several cities as part of the Atlanta-based Cox Cable Communications Inc. television network.

"Video is the way. Everything today is going video," said Richard Wray, who is in charge of NIH's three-camera color television production studio. Mr. Wray is the man to see if you have an idea for a videotape production. □

## Evolution of Anatomic Illustration Presented by NLM

Now on display in the National Library of Medicine's front lobby is an exhibit titled the Evolution of Anatomic Illustration presenting samples from the early schematic and traditional forms from antiquity to scanning electron micrography and computerized tomography of the modern era.

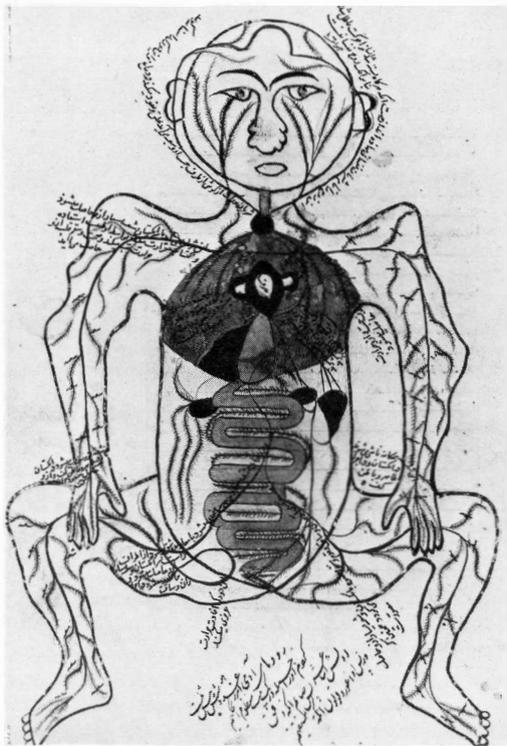
The earliest anatomic illustration on display is a schematic figure depicting the arterial system found in a 15th-century Persian manuscript.

Samples of elementary illustrations from the pre-Vesalian anatomists Johannes Peyligk and Magnus Hundt are compared to the more refined drawings found in the publications by Jacopo Berengario and Johannes Dryander which also preceded the *Fabrica* of Vesalius.

Two highlights of the exhibit are a display of some of the magnificent anatomical drawings of Leonardo da Vinci, recently published from the collection of Her Majesty the Queen, at Windsor Castle, and the monumental *De humani corporis fabrica* of Andreas Vesalius, first published in 1543.

The exhibit also features examples of the great 17th- and 18th-century anatomical atlases with their impressive copperplate engravings. The first colored anatomic plate, a woodcut, is found in Gaspero Aselli's work on the lacteal vessels published in 1627. Early colored copperplate engravings by Le Blon and Ladmiral are also displayed in reproduction.

More recent anatomic texts on display include the first English edition of Henry Gray's *Anatomy, Descriptive and Surgical* (1858), and the classical texts by Werner Spalteholz and Johannes Sobotta which were very popular in the early 20th century. Samples from the work of the fine medical illustrators Max Brodel,



A schematic depicting the arterial system, from a 15th-century Persian manuscript entitled, *Tshrih Al-Badan* (*Anatomy of the Body*).

Tom Jones, and Frank Netter are also in the exhibit.

Finally, a sampling of more recent developments in "anatomic illustration" are displayed in the form of scanning electron micrographs, computerized tomographic scans, and the mapping of metabolic pathways.

The exhibit will be in the NLM lobby through Jan. 8, 1982. □

## Hepatitis B Virus Carrier Antibody Successfully Tested in Newborn Infants

A team of physicians has found that hepatitis B immune globulin (HBIG) will protect newborn infants from becoming lifelong carriers of hepatitis B virus (HBV), a potential precursor of serious liver diseases and liver cancer.

The finding is the result of a recent study supported by the National Institute of Allergy and Infectious Diseases and by the FDA's Bureau of Biologics.

All the mothers of the newborns in the study were chronic carriers of the virus. Usually chronic carriers infect their infants with HBV within a few months of birth, and 85 to 95 percent of infected babies become chronic carriers themselves.

Those infected may never have outward signs of disease, but can still infect others. More than one-third of carriers develop chronic liver diseases, and they have 273 times the risk of noncarriers of developing liver cancer.

In the study, high risk infants received three injections (at birth, 3 and 6 months of age) of HBIG, a human blood component rich in hepatitis B antibodies—the immune system's natural defenders against the virus.

The results were dramatic. Although three-fourths of the infants developed an infection, only one-fourth became chronic HBV carriers.

A second group of newborns received one injection of HBIG at birth, then two injections of a placebo, an inactive substance that lets researchers compare different treatment groups. The single dose of HBIG offered some protection: only half the infants became chronic carriers.

A third group received three placebo injections. As could be expected, over 90 percent became chronic HBV carriers.

Although hepatitis B virus infects millions of people around the world, the rate at which they become chronic carriers varies from country to country.

In the U.S. the overall rate is very low but here, too, subgroups run greater risks. Pregnant women with active hepatitis B infection are one example. Also, Asians living in the U.S. have higher than average carrier rates. Approximately 4 to 6 percent of all Chinese-American mothers will transmit the HB virus to their newborns, and the vast majority of these babies will become carriers themselves.

The study was a collaborative effort under Drs. Wolf Szmuness of the New York Blood Center, and R. Palmer Beasley of the University of Washington Medical Research unit in Taipei, Taiwan. □

## Lithium Helps Children With Inherited Mental Illness

In a 1979 study, Drs. Donald McKnew and Leon Cytryn, National Institute of Mental Health scientists, reported that children of manic-depressive patients are themselves at risk for depression. Their report followed three earlier studies by others who found that genetic factors can influence drug response.

In a more recent preliminary study, NIMH researchers have shown that lithium helps alleviate symptoms of mental disorder in children of manic-depressive parents who also have been successfully treated with the medication.

The investigators said that while world literature on the use of lithium in child psychiatry began appearing as early as 1968, the research lacked the use of controls, systematic behavioral observations, or double-blind methodology. Dosages varied widely, yet reported side effects were relatively few in both adults and children.

In a small sample study recently completed, six children aged 6 to 12 were selected on the basis of their incapacitating psychopathology for treatment with lithium. For 16 to 18 weeks the patients were given either lithium or a placebo, with either child nor those directly involved in treatment knowing which was being used nor when treatment was taking place.

Medication levels were adjusted weekly, side effects were monitored, and the participants evaluated. In addition, a simple and painless method previously found successful in measuring adult response to lithium, the use of brain stimulation (evoked potentials), were used with the children, which were recorded at measured intervals, and the EP changes then paralleled with those occurring in adults.

The scientists concluded that their small sample study gives further credence to the efficacy of lithium in certain childhood disorders and that, taken together with the similarity of EP changes of lithium to those occurring in adult patients treated with lithium, their research supports a physiological parallel between bipolar affective illness in adults and children.

Other researchers besides Drs. McKnew and Cytryn in the study were Drs. Monte Buchsbaum, Joel Hamovit, Judith Rapoport, Elliott Gershon and Martine Lamour. □

## Climbing and Spelunking

R&W has a new adventure! The outdoor school is offering classes in rock climbing and caving.

Rock climbing lessons will be held at Great Falls National Park, Va., and focus on safety, basic climbing and rappelling. The cost is \$25. Classes are being offered on Sept. 19, Oct. 18 and Nov. 21.

Caving lessons will be spent in at least one of several caves located not far from Harpers Ferry, W. Va. The \$40 classes (limited to ages 13 and over) consist of basic equipment usage, caving techniques, ecology, navigation, conservation and safety. The trips will be held on Oct. 10 and Nov. 17 and will depart at approximately 8 a.m. □

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