Kaposi Sarcoma Work Group Is Formed; Requests Research Assistance From NIH

An NIH working group has been formed to aid in controlling the current epidemic of acquired immunosuppression, opportunistic infections, and Kaposi’s sarcoma—a disease which began among homosexual males, but is now apparently increasing in incidence and spreading to other segments of the population.

The cause of the epidemic is yet unknown. Since first detected 2 years ago, 485 people in 24 states and 8 foreign countries have been infected, with 187 deaths in the U.S. as of July 23.

NIH Director Dr. James B. Wyngaarden has asked that the working group be formed to aid the Centers for Disease Control, the principal USPHS agency actively involved in surveillance, study, and efforts to control the epidemic.

Scientists From Egypt, Israel, U.S. Meet To Discuss Cooperative Research

Egyptian, Israeli, and American scientists involved in a cooperative research project on arthropod-borne diseases met together for the first time in Stockholm in June to exchange information and discuss plans for the coming year.

The project supports studies on Rift Valley fever, malaria, and leishmaniasis, three diseases of considerable public health importance in the Near East. Malaria is spread by mosquitoes and leishmaniasis by sand flies. The natural vectors of RVF are not confirmed but are probably mosquitoes.

The project began last December when contracts were signed in a simple ceremony at NIH by representatives of the National Institute of Allergy and Infectious Diseases and two of the leading research institutions in Egypt and Israel.

The 5-year contracts, administered by NIAID, are funded by the Agency for International Development. Support for the first year is about $1.5 million.

Similar cooperative investigations in marine science and dryland agriculture, also issues of interest to both Israel and Egypt, have evolved since 1979 when the late Egyptian President Anwar Sadat announced he would travel to Jerusalem, opening a door to such exchanges.

From June 4 to 6, NIAID convened a regional meeting in Stockholm on the Epi-
EXPLOSION

(Continued from Page 1)

Power Plant officials inspect the switching box in Bldg. 29 where the explosion that injured two employees occurred, while cleanup crews began their work.

but officials believe that the unit grounded itself out.

Damage from the blast was not extensive though it did knock out power to Bldgs. 29, 30, 35, 36, 37, and a portion of Bldg. 10.

Within minutes of the incident, members of the NIH Fire and Police departments arrived and assisted in the treatment of the victims who had been burned about the face and hands.

Mr. Thompson was taken to the National Naval Medical Center where a U.S. Park Police helicopter transported him to the Washington Hospital Center trauma unit. Mr. Layman was taken there by a Montgomery County mobile intensive care unit.

At the burn center, it was determined that Mr. Thompson had received second- and third-degree burns to 60 percent of his body. Mr. Layman had 27 percent.

As The Record went to press, Mr. Layman was removed from the critical list, but Mr. Thompson remains critical.

Power plant officials say that within 3 hours of the incident full emergency power had returned to all affected buildings. Officials also say that there was no loss to any scientific experiments nor did the incident interfere with patient care.

MFL Series Schedule Announced

The Medicine for the Layman series for this year features NIH physicians presenting lectures on the human body in health and disease. They will be held on Tuesday evenings, in the Masur Auditorium, from 8 to 9 p.m. Visitors may park in any of the parking areas near the Clinical Center.

The following is a list of dates, topics and speakers for the program.

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String Quartet To Play at NIH Prior to International Concert

The Manchester String Quartet, a chamber music group formed from members of the National Symphony, will give three concerts in the Masur Auditorium on Aug. 6, 18, and Sept. 1, beginning at 8 p.m.

The quartet is coached by Ms. Tatiana Rostropovich. The repertoire presented is a sampling of the music to be performed at the 31st International Music Competition in Munich in September.

Since their formation in 1961, the quartet has appeared on the World Bank Concert series and the National Press Club's Symposia series, in addition to performing numerous radio concerts. During the 1982-83 season, they will be the resident chamber ensemble for the Dumbarton Concert Series in Georgetown.

The programs include selections composed by Haydn, Schubert, Smetana, Mozart, Beethoven, and Ravel.

Tickets for NIH employees are $3 for each performance. They may be purchased at the R&W Desk Rm. 1A18, in Bldg. 31.

A man's work is in danger of deteriorating when that individual decides that he has found the one best way for doing his work.—Eugene O'Neill
Multicultural Awareness Fair Attracts Large Crowd

Ena Camargo's dance company performed several classic Spanish dances. Those attending NIH's Multicultural Awareness Fair also saw and heard a variety of folk music and dance from the Middle East, the Philippines, Ireland and other countries. Art, jewelry, and cultural exhibits from Nigeria, Panama, Hungary, India, Guatemala, and Pakistan were on hand.

Music, Poetry, Dance

Spectator Robin Point, 4, decided to join members of Trim and Terrific, an aerobics dance group, while they performed. Italian, Nigerian, Hispanic and other international foods could be sampled by those attending.

'Ms.' Magazine Picks NIH Researcher Among Heroes Who Have Taken a Chance

Dr. Philip A. Corfman, director of NICHD's Center for Population Research, was named in the July-August issue of Ms. magazine as 1 of 40 "Ms. Heroes: Men Who've Taken Chances and Made a Difference."

As cited in the magazine, Dr. Corfman was chosen for "his sensitive response to feminist health activists and his efforts to change the direction of birth control research so that male methods were included and safe methods for women were emphasized."

The magazine selected those named on the basis of two criteria: "men who had performed one or more particular career-endangering acts on behalf of equality, and men who consistently, over a period of time, had aided large numbers of women." Dr. Corfman was the only current Federal official selected.

Among those sharing the spotlight with him are television producer Norman Lear, actors Ed Asner and Alan Alda, talk show host Phil Donahue, the late John Lennon, UAW president Douglas Fraser, Dr. Benjamin Spock, Washington Post columnist Richard Cohen, former chief of U.S. Naval Operations Admiral Elmo Zumwalt, author John Irving and syndicated cartoonists Garry Trudeau and Mike Peters.

Friendship: The First Relationship

The Occupational Medical Service will present a program on Friendship: The First Relationship, on Monday, Aug. 9, from noon to 1 p.m., in Bldg. 31, Rm. B2C05. For further information call Morris Schapiro, 496-3164.

Dr. T. O'Donohue Becomes Head of New NINCDS Unit

Dr. Thomas O'Donohue has been appointed head of the newly created neuroendocrinology unit of the National Institute of Neurological and Communicative Disorders and Stroke. His research group will investigate the role of neuropeptides in brain function.

Dr. O'Donohue received his Ph.D. in 1979 from a joint graduate program of the National Institute of Mental Health and Howard University in Washington, D.C. For his graduate and postdoctoral research he studied the role of neuropeptides in the brain and the functioning of multiple neurotransmitter neurons.

The neuroendocrinology unit is part of the Experimental Therapeutics Branch of NINCDS's Intramural Research Program.
PUVA Therapy for Treatment of Psoriasis Promises Relief for Severe Cases

Dr. Laurence Miller, a dermatologist with the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, and NIADDK grantee scientists Drs. John Voorhees, University of Michigan, and John Parrish, Harvard Medical School, met with members of the press recently to discuss the benefits and risks of PUVA therapy for severe psoriasis.

PUVA, a form of phototherapy, combines an oral medication called psor alien (P), and exposure to high intensity, long-wave ultraviolet light in the A range (UVA).

The briefing was held in conjunction with the annual meeting of the Society for Investigative Dermatology in Washington, D.C.

Midway through the briefing came the report that the Food and Drug Administration had just approved the therapy for treatment of psoriasis.

In psoriasis, thickened red patches of skin covered with silvery scales occur over small or large areas of the body. Normally, a person's outer layer of skin, the epidermis, is renewed about once a month. As new cells form, the old skin is shed in tiny, unnoticeable flakes.

In psoriatic skin, however, production of new cells is speeded up, and this outer skin layer reproduces itself every 3 or 4 days. This faster growth results in imperfectly formed cells, which are then shed in large numbers before they mature. Scientists do not yet know what causes skin cells to reproduce so rapidly in psoriasis.

Treatment generally involves topical medications, exposure to the sun or artificial light, or potent drugs. All three physicians noted that severe psoriasis can be difficult to treat and can be quite distressing and disabling for the patient. About 2 out of every 100 Americans suffer from psoriasis.

PUVA therapy has been regarded as a breakthrough in psoriasis treatment since it was first reported in 1974 by Dr. Parrish and colleagues. PUVA combines doses of the drug psor alan plus exposures to ultraviolet light in the A range.

It is thought that psor alen, after being modified in the skin by the absorbed light, slows down the growth of psoriatic cells.

For about 90 percent of patients with severe psoriasis, PUVA therapy can clear the disorder after about 24 treatments given two to three times a week.

Because psoriasis is often chronic, continued treatments may be required to maintain control. Some patients have received over 100 treatments in the few years since the first results were published.

Because of concerns over the long-term safety of PUVA therapy, NIADDK initiated a follow-up study which has been funded since 1977. Sixteen university centers are following over 1,300 patients; the coordinating center is located at Massachusetts General Hospital.

PUVA, unfortunately, is not without its hazards. Chief concerns of investigators include increased occurrence of skin cancers, possible long-term effects of PUVA on the immune system, and a potential risk of cataracts.

"By providing background information we hope to place PUVA therapy in the proper perspective," Dr. Miller said.

"Based on the reports of the followup study, we propose a number of recommendations to guide those who might be candidates for PUVA therapy," he added.

In brief, the recommendations were:

- The decision to use PUVA should be made by patient and physician together, with an understanding of the risks and benefits of PUVA and of other forms of treatment.
- PUVA should be used only for severe cases of psoriasis resistant to conventional therapy.
- Once little or no disease is present, less potent therapies should help keep minor flare-ups under control.
- Patients with mild to moderate forms of psoriasis can and should use a number of already available therapies.
- During and after PUVA, the eyes should be protected against ultraviolet light.
- The patient and physician should look for unusual changes in the skin.

According to Dr. Parrish, "PUVA is exciting and good news. It is a powerful tool to add to the dermatologist's options for treating psoriasis. For some patients it is the treatment of choice. For others it is clearly not indicated, not advisable."

For a copy of the complete statement on PUVA and a fact sheet, contact the Office of Health Research Reports, NIADDK, Bldg. 31, Rm. 9A04, (301) 496-3583.

Forensic Medicine Catalog Available

The National AudioVisual Center now offers a free catalog describing 16mm films, videocassettes, and filmstrip programs in the field of forensic medicine. These audiovisuals show actual autopsies, explore the fundamentals and anecdotal exceptions, and trace the history of forensic medicine.

The center also has more than 13,000 titles produced by Federal agencies on various medical subjects. For the Forensic Medicine catalog or literature on other subjects, write National AV Center, National Archives, Washington, D.C. 20409, or call 763-1896.
cochairman is Dr. Kenneth W. Sell, Intra­mural Research Program director, and chief, immunobiology section, Laboratory of Immunogenetics, National Institute of Allergy and Infectious Diseases.

"While NIH does not bear a direct responsibility for controlling the outbreak, it is apparent that an epidemic of this sort may offer significant scientific opportunities, particularly since immunoregulation and the causation of cancer are areas of intense research activity among several NIH's and their extramural communities," wrote Dr. Wyngaarden in a memo to the NIH working group staff.

Currently no single diagnostic test is available to characterize the disease. Those affected have a severe loss of cellular immune function. "They have antibodies but no effective lymphocytes, and they fall victim to opportunistic infections," said Dr. Gordon.

Enlarged Lymph Nodes First

The first symptoms of the disease apparently are enlarged lymph nodes, a feeling of malaise, sometimes low-grade fever, and weight loss. These symptoms can last months without becoming serious.

"It is obvious that most of the people who get it simply don't know they have it until they get one of these other opportunistic infections," said Dr. Bruce Evatt of the CDC task force.

The "opportunistic infections" are most commonly the Kaposi cancer, a virulent pneumonia called pneumocystis pneumonia, toxoplasmosis which can affect the central nervous system, candidiasis yeast infection, or an odd variant of tuberculosis called atypical mycobacterial infection. Initially, they have attack on four groups. Until recently, the epidemic was concentrated largely among homosexual men in New York City, San Francisco, Los Angeles and Atlanta.

A few drug addicts also developed the disease, known as acquired severe immunodeficiency disease, or AIDS. Recently, the CDC said that AIDS had infected 32 Haitian immigrants in five cities, none believed to be homosexual. Fifteen of the Haitian victims had died.

Two weeks after the CDC reported that three hemophiliacs had developed AIDS, two of whom have died. This development was considered serious because hemophiliacs (20,000 in the U.S.), whose blood doesn't clot, are treated with "clotting factors" extracted from donated human blood. None of the hemophiliacs was homosexual. This "suggests possible transmission through blood products," the CDC report said.

Recent research developments lean toward suspicions that a "transmissible agent," perhaps a virus, is involved. Scientists have noted a strong similarity between the way AIDS spreads and the spread of hepatitis B. Another theory is that the virus is transmitted through other body fluids.

Though each of these ailments can be treated, there is no treatment for the underlying failure of the immune system. Of the 485 who have contracted the disease, none has recovered from the underlying failure of the immune system, but some are now free from the deadly infections. NIH researchers Drs. Henry Masur, Critical Care Medicine, Clinical Center, and James J. Goedert, Environmental Epidemiology Branch, National Cancer Institute, are actively involved in studying AIDS. Currently, a limited number of patients have been admitted to the CC for inpatient care and immunological and virological studies. A number of scientific journal articles have been published recently by NIH and NIH-supported researchers. Among these are the: June issue of Annals of Internal Medicine; The Lancet, May 15 and Feb. 20; the Dec. 10, 1981, issue of the New England Journal of Medicine; and the June 1982 issue of Cancer Treatment Reports.

Other related readings include the CDC publication Morbidity and Mortality Weekly Report. Of particular interest are the June 18 and July 16, 1982, issues.

Apparently this epidemic is growing daily. Nevertheless, CDC officials say the American population at large is not at risk now and may never be. The rate of new cases reported 6 months ago in these urban areas was one per day; now two or three new cases are reported each day.

The disease no longer involves homosexual men exclusively and is, in fact, spreading to other subsets of the population. It is also becoming increasingly evident that there is a transmissible, infectious vector whose transmission may be parenteral as well as sexual.

The following list are the names of NIH intramural scientists belonging to the Kaposi Sarcoma Working Group. They may be contacted if there are any questions.

NIH Kaposi Sarcoma Working Group: Dr. Robert S. Gordon, Jr., chairman, NIH/OD; Dr. Kenneth Sell, NIAID, cochairman; Dr. Heinz Berendes, NICHD; Dr. Amoz Chernoff, NHLBI; Dr. James J. Goedert, NCI/DCCP; Dr. John Hooks, NIDR; Dr. Arthur Levine, NICID/ST; Dr. Michael Luster, NIH/PH, P.O. Box 12233, Research Triangle Park, N.C. 27709; Liaison: Dr. Martin Chernoff, CDC, 1600 Clifton Rd., N.E.

Credit Union Offers SLY

A new investment opportunity—the SLY première account—is being offered by the NIH Federal Credit Union.

SLY, which is a 14-day statement certificate, offers members the safety of federally backed insurance, the liquidity of a short-term certificate, and a high yield based on money market conditions.

For further information call 496-4758, or visit the NIHFCU office located at 9030 Old Georgetown Rd., Bethesda, Md.
Handicapped Access Project Will Be Completed by Fall

By early fall, the construction in and around Bldgs. 35, 36, and 37 will be completed, ending a year-long project to modify entrances for the handicapped and to revamp over 10,000 square feet of brick terrace that had been damaged due to the weather which caused subterranean leakage.

In addition, a new beautification program has been incorporated into the original area design to enhance the research complex.

Inclement weather, particularly last winter's freezing temperatures, delayed the placing of concrete for the specially constructed sloping exterior entrances that will serve the handicapped.

Originally, the project was begun under a fixed-price contract as the second phase of a three-part plan to provide better access to all of NIH's buildings.

At the time the decision was made to go ahead with construction, project supervisors also saw the need to deal with the leaks that have developed there in the 17 years since the $16.7 million building complex was completed.

Over the years, water has seeped through the terrace's surface and run along underneath causing damage to the underground utility/pedestrian tunnel that links the three structures.

After much of the original brickwork had been taken up from the terrace, a rubberized-asphalt membrane was applied as a

Foreman Ramon Hart of Universal Management checks blueprints for the laying of the terrace brick around Bldgs. 35, 36, and 37.

“cold patch” with insulation above, to prevent further leaks. A new design calling for better drainage has also been added.

To allow for easy access and to permit necessary water runoff, construction designers have worked out a unique solution for their terrace problems.

They have instructed that specially ordered bricks be cast into 400-pound panels to be set on raised “rubber donuts.” After each of the panels is set in by hand, the space between bricks will be grouted with mortar to give the new brick panels the same appearance as the original brick work. This has been a time-consuming process.

In addition, construction plans call for a six-car handicapped parking lot to be constructed opposite the existing multilevel parking garage off Lincoln Drive.

“Everything will be sloped so that a wheelchair can come up easily,” says Jerry Stiller, acting chief, Construction and Engineering Branch, DES, whose construction experts are supervising the project.

Sloped pathways leading up to the buildings have been placed, new double-door front entrances are being installed in some buildings, and 42-foot-long concrete ramps that are 4-feet high have also been cast in place as part of the handicapped access program.

Large, circular aggregate planters have been placed near each ramp. Eventually, they will be filled with a variety of plants and trees.

Concrete and wooden benches are being installed around the perimeter of Bldg. 35 enclosing the area and permitting employees to better use it during lunchtime.

Plans also call for dotting the area with smaller planter boxes.

Roy Perry, NIH’s First Chief of Photography, Dies

For some, the exposing for light to capture images on film is a way of saving a family's history. For others, such as Roy Perry—NIH’s first chief of photography who retired in 1968—the making and preserving of images of people and events that affected his life was something more—it was his way of documenting what was important to him.

Mr. Perry, 68, died of cardiac arrest at his Rockville home on July 8. He leaves a photographic legacy that stretches from his youth in the 1920’s and 1930’s when he captured the moving scenes of the Great Depression in his native New York City. He began taking photographs when he was 9 years old.

In 1950, his work was honored with a one-man exhibition at the Museum of the City of New York. His photographs have also been accepted as part of the permanent collection of the National Library of Medicine and the National Archives.

Mr. Perry began his NIH medical photography career in 1942 when he moved to Rockville from New York. It was a major transition to come from the cosmopolitan atmospheric of New York, where he had taken thousands of photographs for different city social service agencies, to a changing semirural county where he would

In January, Mr. Perry (l) attended Al Godwin’s retirement party (r-rear). Mr. Godwin, Jack Romine (l) and Randy Kennedy (r-rear) all worked for Roy Perry when he was chief of NIH photography.

live, work, and raise a family. Wherever he saw change he brought his camera to it; Rockville was no exception. During the early forties, he recorded the transformation of Montgomery County. His wife, Blanche, says he became interested in photographing this area because it was so different from what he had photographed in New York.

In 1969, a retrospective show of his photographs was held in the lobby of the Clinical Center. His pictures covered a wide range of subjects which revealed his impressive camera technique and sensitivity to people and events.

Featured were nostalgic prints of PHS and NIH activities from 1942 through 1950, and early views of Rockville and Montgomery County.

While at NIH, Mr. Perry photographed everything from Nobel Prize recipients to prison volunteers. His photographs contributed to such programs as national rat control, restaurant sanitation, and foreign quarantine. He also did photographic essays on malaria and on the early research with radioactive isotopes.

He became head of photography at NIH in 1947. By 1960, he was supervisor for over 40 employees. In 1964, Mr. Perry turned his attention to motion pictures. However, by 1967 he had returned to still cameras.

Since his retirement, Mr. Perry took on many freelance assignments from different Federal and private groups who knew of his work. Two years ago, he had had heart problems and cancelled his freelance assignments, although he did still continue to make prints of his favorite negatives.

At the time of his retirement, Mr. Perry explained what it means to be a medical photographer: “To be a good photographer who can handle the whole gamut of assignments in the PHS, a man must have some knowledge of scientific methods, hospital routines, and medical ethics as well as the purpose and use of specialized scientific equipment.”

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Dr. Jay R. Shapiro checks a fallen Mike Buchanan after he was struck by a ball batted back to the pitcher's mound in the third inning. He was able to play out the remainder of the game.

Sportscaster Glenn Brenner makes a big hit in this year's Patient Emergency Fund softball game between NIH and WDVM-TV.

Despite 97 degree F. temperature and an eventual 14-5 defeat, Channel 9's One and Only team kept the heat on the entire game.

A parched Miles and Sarro seek relief.

The joy of victory.

COOPERATIVE

(Continued from Page 1)

Hebrew University in Jerusalem, and the Research and Training Center on Vectors of Diseases of the Ain Shams University in Cairo.

The 32 participants exchanged research information gathered in the initial months of the project and discussed proposed work plans for the coming year. One of the aims of the project is to increase direct scientific exchanges between Israeli and Egyptian investigators.

Two Kuvin Center staff members have already visited Ain Shams. The participants also discussed the possibilities of including other Mideast/African nations in direct scientific collaborative efforts.

NIH staff members participating in the meeting with Dr. Western included Drs. Richard Kaslow and Alfred Saah of the Microbiology and Infectious Diseases Program and Dr. Robert Gwadz of the Laboratory of Parasitic Diseases.

Colonial Williamsburg Lives Today

Colonial Williamsburg lives today as it did nearly three centuries ago, when it was the social, cultural as well as political capital of England's largest colony in the New World. After a half century of restoration and preservation, it now offers a view of 18th century life.

Tickets are available at the R&W Activities Desk, Bldg. 31, Rm. 1A18.®

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NIDR's National Caries Program Celebrates Its Tenth Anniversary in the United States

Ten years after the inception of the National Institute of Dental Research's National Caries Program, researchers have made substantial progress toward preventing tooth decay, one of the most common diseases in the world today.

Recognizing their close association with the NIDR and in honor of the program's 10th anniversary, the European Organization for Caries Research, officially titled Organisme Europeen de Recherche sur la Carie (ORCA), recently held its annual meeting in the United States for the first time in its 29-year history.

The ORCA congress, which convened in Annapolis, Md., June 30-July 2, examined the current status of research into the causes and prevention of dental caries (tooth decay).

ORCA, a European-based organization with many non-European dental scientists as members, was instituted to foster international exchange of information and to stimulate mutual research interests in dental caries.

As part of a special symposium, scientists from the NCP presented an analysis of their programs based upon a decade of research and development efforts.

When the NCP started in 1972 following Congressional approval and allocation of $5,000,000 from NIDR's budget in support of the program, the staff was charged with the mission “to eliminate dental caries as a public health problem in the United States...and to promote cost-effective agents and techniques to prevent the occurrence of caries.”

To cover the multifaceted etiology of caries, the NCP was divided into four areas of research strategy: combating caries-inducing microorganisms, increasing the resistance of teeth, modifying the diet, and improving delivery and acceptance of caries-preventive methods.

Tooth decay is caused by certain bacteria that normally live in the mouth and that convert acids and other carbohydrate foods into acids. These acids then attack surfaces of the tooth with which they come into contact, initiating the progressive destruction of the hard tissues of the tooth.

Theoretically, if the process by which ventive measures, the methods must be inexpensive and available to large segments of the population. In keeping with this goal, NCP researchers are developing an intraoral device that will release constant, predetermined rates of fluoride up to 6 months.

According to Dr. James P. Carlos, associate director for the NCP since 1972, “Research on caries prevention has begun to pay dividends on a national scale. Caries remains a major public health problem, but we are confident it can be solved with continued research and public education.”

Roy (Shorty) Reed Dies; Was Original NIH'er

Roy R. Reed, one of the original NIH personnel who worked for the forerunner to NIDR, the old Hygienic Laboratory at 25th and E Streets, N.W., died recently at the age of 82.

Known to his many friends as “Shorty,” Mr. Reed worked for the PHS for 42 consecutive years before retiring in 1965 as a supervisory medical technician in the section on pathologic anatomy, Laboratory of Experimental Pathology, NIAMD. There he was responsible for preparing human and animal tissue slides for microscopic study and diagnosis.

In 1923, Mr. Reed began his medical career as an attendant in the nutrition laboratory of the Hygienic Laboratory, which consisted of two lab buildings and animal house. There he worked directly under famed nutritionists Drs. Joseph Goldberger and W. H. Seubrell.

Ten years later he became a histopathology technician in the Division of Pathology and Bacteriology, a section which has since evolved into the Institute's Laboratory of Experimental Pathology.

In 1953, Mr. Reed and his laboratory coworkers worked almost around the clock, 7 days a week, on a special project in connection with the development of the Salk polio vaccine.

His laboratory was one of three in the United States where tissues from experimental monkeys were sectioned and prepared for examination. In 1962, he and his staff were honored and given cash awards by NIH for “superb and long-standing performance.”

A baseball enthusiast, Mr. Reed was the star pitcher for NIAMD's softball team for many years, and played on several teams in Prince George's County.

Originally from Duley, Md., he was a former vestryman of St. Matthew's Episcopal Church in Hyattsville, a member of the Birmingham Masonic Lodge, and the Birmingham Order of the Eastern Star, both in Beltsville, Md.

He was also a charter member of the Prince George's chapter of the Fall Cedars of Lebanon.

Mr. Reed is survived by his wife, Helen E. Reed of Hyattsville; two children, Roy R. Jr., of Hyattsville, and Virginia Pursh Huffman of University Park; eight grandchildren and seven great-grandchildren.
Benzodiazepine Pharmacology Discussed During Conference

Benzodiazepines, a class of drugs prescribed to lessen anxiety and sometimes used as sedatives, including Valium and Librium, were the subject of a recent 3-day conference sponsored jointly by the National Institute of Mental Health and Tufts University.

Several years ago, scientists discovered that benzodiazepines bind to specific brain receptors, thereby implicating these receptor sites as mediators of anxiety.

But Valium—and other benzodiazepines of similar composition—not only lessen anxiety but can also act as sedatives, as anticonvulsants, prescribed for some epileptics, and as muscle relaxants, often used to ameliorate the pain of whiplash. These varied effects led scientists to believe that there might be more than one kind of benzodiazepine receptor and to wonder if perhaps other drugs—such as those that increase anxiety—also attach to the receptors.

"For the first time, we may have a reasonable understanding of the biochemical composition from benzodiazepines, " said Dr. Steven Paul, chief, NIMH Clinical Neuroscience Branch. "This understanding has enormous implications for the study and prevention of stress-related disorders such as ulcers and heart disease," he continued.

According to reports of several scientists at the conference, there seems to be evidence to support the theory of multiple kinds of receptors. The researchers found that among drugs which attach to the benzodiazepine receptors are those that block the effects of benzodiazepines, those producing only some of the effects of benzodiazepines, and those which produce anxiety.

Most of these substances have a different chemical composition from benzodiazepines, however, even though all attach to the same set of receptors, according to the investigators.

Attach to Same Receptor

For instance, Dr. Claud Bresdroup, a Danish researcher, described his experiments with another group of substances, the B-carbolines. Dr. Bresdroup discovered that patient volunteers reported feeling extremely anxious after taking the drug. One patient actually had to be restrained, but calmed down quickly after a benzodiazepine injection.

Thus, the scientist concluded, both the B-carbolines which increase anxiety and the benzodiazepine tranquilizer which reduces anxiety attach to the same receptor.

Another B-carboline derivative tested in rats by NIMH researcher Dr. Wallace Mendelson reversed the sleep promotion effects of benzodiazepines and also kept the animals awake during "normal" times without inducing anxiety.

Further complicating the picture are drugs which block some actions of benzodiazepines but leave other actions alone. NIMH researchers Drs. Paul and Philip Skolnick reported that the drug imidazopyridine selectively blocks the anxiety-reducing effects of benzodiazepines, but leaves intact the sedative, anticonvulvent, and muscle relaxant actions.

Professor Merton Sander of Queen Charlotte's Maternity Hospital in London presented evidence showing that both Valium and alcohol suppress an unidentified chemical found in urine which is thought to produce anxiety.

Some chronic alcoholics may drink out of sheer biological need to suppress an overabundance of these anxiety-producing chemicals, he proposed.

Dr. Mitchell Balter, of NIMH's Psychopharmacology Research Branch, noted that benzodiazepines such as Librium, Valium, Tranxene, and Serax have become one of the most widely used class of drugs in the United States since the development of the first benzodiazepine, Librium, in the 1950's.

According to an NIMH survey on usage, however, the number of prescriptions for benzodiazepines has declined markedly over the last 10 years, except for a small minority of abusers, Dr. Balter said.

Since 1964, the annual volume of prescriptions had risen from 45 million to 104.5 million in 1973, but subsequently the number of prescriptions had fallen to 71 million by 1981.

Contrary to popular belief, this pocket of abusers—1.6 percent of the general population who have been taking a daily dose of the drug for over 1 year, and 6 percent for over 7 years—tend to be elderly, widowed, poor, uneducated, and suffering from a number of chronic physical disorders.

New Hearing Loss Pamphlet Is Published by NINCDS

The National Institute of Neurological and Communicative Disorders and Stroke has published a new pamphlet on hearing loss, a communicative disorder affecting approximately 20 million people in the U.S.

By far the most prevalent cause of hearing impairment is a middle ear disease, otitis media. The classic symptoms of the disorder—an inflamed, swollen, fluid-filled and painful middle ear—can result in temporary and sometimes permanent hearing loss.

External blockage, perforated eardrums, and congenital and genetic abnormalities can also contribute to hearing loss.

Family Doctor Can Diagnose

When hearing loss is caused by a minor problem—for example, a simple infection or impacted wax—diagnosis and treatment may be done in a family doctor's office.

More complicated cases call for the expertise of an otologist, a specialist dealing with the ear and its diseases.

The new pamphlet indicates that many hearing-impaired people can be helped. Research has produced greatly improved hearing aids that provide extra power to amplify sound so that it can stimulate cells in the cochlea.

Other helpful communication equipment includes teleprinters enabling a sender to type a message that is then coded electronically for transmission over the phone.

Speechreading, vocal training, gestures, and sign language are among the skills that hearing-impaired persons can use to communicate with others.

Single copies of Hearing Loss: Hope Through Research may be obtained from the Office of Scientific and Health Reports, NINCDS, Bldg. 31, Rm. 8A06, Bethesda, Md. 20205; telephone (301) 496-5751.

NIH Federal Credit Union Starts Service Fee Changes

As of Aug. 1, the NIH Federal Credit Union began charging a monthly service fee of $1 on all regular share accounts if the balance falls below $100 at any time during the month. Net check participants, persons under 18 years of age or over 65, and dependent members with student loans are exempt from this rule. In addition, after opening a new account, a member has 3 months before this rule will take effect.

As of July 1, a $15 per item charge for processing dishonored share drafts and checks was initiated.

1981 Funds Listings Published

The Division of Research Grants recently announced the publication of three listings of NIH funds for fiscal year 1981. The three volumes present 20,303 research career awards and research grants, 3,283 research training grants, fellowships, and career development awards, 3,295 research training grants, fellowships, and career development awards, and 1,340 research and development contracts awarded by NIH.

A summary indicating the extent of financial support given by each supporting component is presented. In addition, grants are shown by recipient area, principal investigator, program director, or project director, and the organization having professional responsibility for the work.

Single free copies of NIH Research Grants, FY 1981 Funds (NIH Pub. No. 82-1042); NIH Grants for Training, Construction, Cancer Control and Medical Libraries, FY 1981 Funds (NIH Pub. No. 82-1043); and NIH Research and Development Contracts, FY 1981 Funds (NIH Pub. No. 82-1044) are available from the Office of Grants Inquiries, DRG, Rm. 449, Westwood Bldg., Bethesda, Md. 20205.

Deliberate with caution, but act with decision. Yield with graciousness, or oppose with firmness.—C. C. Colton
Tamoxifen Treatment for Osteoarthritis Has Beneficial Effect in Case Western Study

Osteoarthritis, a degenerative joint disorder, affects 16 million Americans, most of whom are over 50. Its cause has not been pinpointed, nor has a specific treatment been found.

An encouraging study was reported recently by investigators receiving support from the National Institute on Aging and the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases. Drs. Itzhak Rosner, Roland Moskowitz, and associates at Case Western Reserve University in Cleveland have found that tamoxifen, an antiestrogen drug used in breast cancer treatment, has a beneficial effect in female rabbits with experimentally induced osteoarthritis.

According to the scientists, tamoxifen treatment results in a marked, statistically significant decrease in the amount of joint damage. Clinicians have noted that symptoms of osteoarthritis become worse in women past the menopause. It has been suspected that sex hormones play a role in cartilage metabolism and the development of this disease. Various hormones have been tested, and found to be of no value in treating this disorder. In earlier studies by Drs. Rosner and Moskowitz, the female hormone estrogen worsened the disease.

The researchers also had found that drugs used in arthritis treatment, including aspirin, corticosteroids, and the antimalarial drug chloroquine, did not alter the disease process. Because their studies showed that estrogen increased joint damage, the investigators decided to test the estrogen-blocking drug tamoxifen to determine if it would have a beneficial effect.

They used a well-established animal model of osteoarthritis, the New Zealand white rabbit. Three groups of 17 rabbits each were studied. The first group received a placebo. The second group was given estriol, potent estrogen, intramuscularly three times per week to maintain chronic estrogenic stimulation.

This treatment brought no improvement in the osteoarthritic lesions. In fact, it increased the number of femoral ulcers.

Tamoxifen was given to the third group of rabbits in doses which, on a weight basis, approximates those used to treat breast cancer in women. This treatment significantly reduced the frequency of femoral ulcers and the severity of “pitting” of joint cartilage. Microscopic examinations confirmed the findings.

The investigators point out that tamoxifen did not reduce the incidence of osteophytes, bone outgrowths which they and other scientists believe may be caused by instability of the joint rather than by the erosive osteoarthritic process.

It is not known yet whether tamoxifen’s beneficial effect is due to its antiestrogen activity or to some other mechanism. Studies will continue to determine the drug’s method of action and to assess its ability to retard the disease process and to repair already established osteoarthritic damage.

These findings will be published in Clinical Orthopaedics and Related Research.

Dr. Vermess To Study NMR at Hammersmith Hospital

Dr. Michael D. Vermess, associate chief of the Clinical Center’s Diagnostic Radiology Department has accepted a 1-year appointment as a senior research fellow at the Royal Hammersmith Hospital in London.

Dr. Vermess will study nuclear magnetic resonance (NMR) a research technique originally used to determine molecular structures and now being explored as an entirely new medical imaging modality. The Hammersmith Hospital has one of the most advanced NMR clinical units today. The CC Radiology Department is purchasing a similar device, and Dr. John L. Doppman, chief, felt that it would be advantageous for a member of his staff to receive training in this new imagery technique prior to installation.

Dr. Vermess’ wife, Camille, a technician in the Nuclear Medicine Department, will accompany him.

Preschool Accepting Applications

The NIH Child Care Programs are now accepting applications for summer and fall enrollment. Three- to five-year-old children of NIH employees are eligible to attend the Preschool Developmental Program located in Building 35. Five through 12-year-old children are eligible to attend the Aylawn school-age programs.

For further information call Sherrie Rudick (Preschool, 496-5144) or Anne Schmitz (Aylawn, 530-5550).

Drug for Pregnant Women May Affect Offspring

Phenobarbital is capable of producing striking and permanent effects on the reproductive function in animal offspring exposed to the drug within the womb, according to research headed by Dr. Sumner Yaffe, director of the Center for Research for Mothers and Children at the National Institute of Child Health and Human Development.

Although the clinical significance of this finding is unknown, Dr. Yaffe said one thing is clear: phenobarbital should be prescribed cautiously to pregnant women. He added that other tranquilizers and sedatives taken by women during pregnancy also may have delayed effects on the biologic functions of their offspring. Such drugs represent the major group of drugs prescribed to pregnant women.

Before joining the Institute last fall, he headed a team of University of Pennsylvania researchers, supported by NICHD. The team conducted three studies which demonstrated a variety of permanent reproductive dysfunctions in the offspring of rats injected with phenobarbital, a sedative commonly used during pregnancy.

The studies showed that a dosage of phenobarbital given to pregnant rats during an 8-day period (12 to 19 days of gestation) produced in their offspring suppressed body weight, infertility and delays in the onset of puberty.

In the male offspring, the drug causes a delay in tesinoctal ductus, infertility and decreased production of sex hormones testosterone and gonadotrophin. However, the age of puberty did not change.

The researchers analyzed hormone concentrations in plasma and found significant increases in both estrogen and progesterone and a decrease in the concentration of luteinizing hormone which is released by the pituitary gland. No differences were observed in the brain, hypothalamus and pituitary.

These findings, said Dr. Yaffe, show that prenatal exposure to phenobarbital produced long-term defects in the onset of puberty, menstrual cycle and fertility.

Rat exposure to phenobarbital only during the period of neuroendocrine development (17 to 20 days of gestation) can produce the same adverse effects. The results also suggest that the drug need not be present during earlier periods of sexual differentiation to produce its effects.

The fact the postnatal administration of phenobarbital can affect reproductive function, even though the development of sexual organs has been completed, lends further support to the theory that the drug’s action is upon neuroendocrine differentiation, said Dr. Yaffe.

Results were discussed during a recent NICHD pediatric grand rounds seminar and were published in Science (May 1980), Pediatric Pharmacology (Vol. 1, No. 1, 1980) and Pediatric Research (December 1981). Coinvestigators were Drs. Chhanda Gupta, Bernard H. Shapiro and Robert Sonawane.
Dr. H. Morris, 82, Dies; Was Cancer Researcher

Dr. Harold P. Morris, 82, former head of the nutrition and carcinogenesis section of the Laboratory of Biochemistry at the National Cancer Institute, died July 14 of heart failure.

He began his work at NCI in 1938, the year the Institute was founded. In 1968, Dr. Morris retired from NCI and moved to a research position in the cancer research unit of Howard University’s College of Medicine. He retired from Howard University earlier this month.

During his years at NCI, Dr. Morris became one of the leading experts in the field of chemical carcinogenesis, the study of the ways chemicals can cause cancer. By varying the amounts of carcinogens in the diets fed to laboratory animals, he developed the first animal model useful in the study of stomach cancer in humans. He and his colleagues used similar studies to develop an extensive line of liver tumors (hepatomas) in laboratory rats.

This line, known as the Morris hepatoma line, has become a useful tool to cancer researchers in more than 250 laboratories throughout the world.

Born in Salem, Ind., Dr. Morris graduated from the University of Minnesota in 1925 with a B.S. in agricultural biochemistry. In 1926, he received an M.S. in animal genetics from Kansas State University. He received his doctorate in agricultural biochemistry from the University of Minnesota in 1930.

He moved to the Washington area in 1931. He worked at the Bureau of Fisheries and at the Food and Drug Administration before coming to NCI.

He was an active member of his Silver Spring community and received many civic and research awards. In 1950, Dr. Morris received the Washington Star Cup for his study of the relationships among school population density, apartment density and school financing.

He served as president of the Montgomery County Civic Federation in 1955 and as a member of the Silver Spring Selective Service Board in the 1960’s.

The University of Minnesota gave him the 1970 Outstanding Achievement Award for his research in the biochemistry field. In 1975, Dr. Morris received the Outstanding Research Award from the graduate school at Howard University.

NIH and Howard University Collaborate
On Annual Sickle Cell Disease Meeting

A joint conference sponsored by the NIH Sickle Cell Disease Branch and the NIH-funded Howard University Center for Sickle Cell Disease will be held Sept. 20-22 to celebrate the 10th anniversary of the National Sickle Cell Disease Program.

The conference is entitled, A Decade of Progress in Sickle Cell Disease: Scientific and Humanistic Advances. The keynote speaker, Dr. Hermann Lehman, emeritus professor of clinical biochemistry, University of Cambridge, England, will present a lecture on Sickle Cell Disease: Thirty-Five Years Ago.

This is the first year that Howard University and NIH have collaborated on a conference. Previously each institution held its own annual conference.

Over 70 clinicians, behavioral scientists, educators and investigators with expertise in sickle cell disease will speak at sessions and present workshops. This includes such NIH personnel as Drs. Clarice Reid, coordinator of the National Sickle Cell Disease Program; William A. Eaton, chief, section of macromolecular biophysics, NIADDK; and Arthur W. Nienuhuis, chief, Clinical Hematology Branch and deputy clinical director.

NIH funds many sickle cell centers around the country. This conference is a chance for people involved in the disease to discuss past achievements and to learn what others are doing. Participants in the conference will learn about the basic disease process, management of complications, humanistic and health needs of the patients.

The conference will also be part of Howard University’s postgraduate program. Physicians may obtain continuing medical education credit for attending the workshops.

The registration fee will be $50 for physicians and $35 for nonphysicians. The conference will be held at the Hyatt Regency Crystal City.

For additional information call Mary Smith, Sickle Cell Disease Branch, (301) 496-6931.

Dr. Dudley D. Culley, grantee of the Division of Research Resources, received the 1982 International Award for Distinguished Service to Agriculture bestowed by Gamma Sigma Delta. Dr. Culley, of Louisiana State University, is known for his research in the culture of bulgur, and his work on duckweed growth for animal food.
Keynote Address Is Delivered by Dr. Brandt At Equal Employment Opportunity Conference

Over 300 PHS senior executives, managers and supervisors participated in EEO program planning for the first time. The occasion was the first national Public Health Service Equal Employment Opportunity Conference held June 27-30 in Reston, Va.

The conference also included representatives from industry and labor, leaders of advocacy groups, officials from the Department and other Federal agencies, PHS personnel staff, and PHS EEO regional and headquarters employees.

The conference developed agreement by consensus on a number of goals and objectives, and strategies for achieving them. The goals centered around affirmative action planning, the complaints process, resource allocation including staff accountability, and special initiatives or programs for minorities, women and the handicapped.

Dr. Edward N. Brandt, Jr., Assistant Secretary for Health, delivered the keynote address, telling his audience, "some people might have questioned the idea for an EEO conference, thinking it was the wrong time to raise such a sensitive, emotional issue.

"But to me, it seemed to be precisely the right time to face the tough questions of fairness, of merit, and of excellence in management."

Dr. Brandt affirmed his continued support for Equal Employment Opportunity.

"Since the enactment of Title VII, there has been an unbroken chain of commitment to the spirit and the letter of the law, a commitment both at the top of the Public Health Service and throughout the Public Health Service. As far as I'm concerned, it's still in force."

He amplified this commitment by calling for "every manager in the U.S. Public Health Service to maintain an abiding, vigorous commitment to Equal Employment Opportunity for all persons, regardless of their race or creed, their color or sex, their age, handicap or national origin," adding:

"I also expect that our managers will continue to apply the principle of merit when evaluating anyone who wants to work with us or is already with us."

A final report on the conference deliberations will be submitted to Dr. Brandt in August.

Travel, Song in Future For CC's Ophelia Harris

Ms. Harris received many gifts from fellow employees at her retirement party in appreciation of her ever-present cheerful and helpful attitude over the years.

Ophelia J. Harris, a food service worker in the Clinical Center’s Nutrition Department for 28 years, retired on Friday, June 26. Ms. Harris was a familiar sight on the 10th floor where she worked for 23 years.

"Ophelia always came to work in wonderful spirits. She was a bright and cheerful spot in our lives while she worked here," says Edith A. Jones, chief of the CC’s Nutrition Department.

The department gave Ms. Harris a farewell party and presented her with a stereo, a television, a watch, and a pair of candlesticks. She later told them, "I was so thrilled with the gifts I couldn't sleep that night."

Although she anticipates enjoying her retirement, Ms. Harris says she will miss everyone she worked with and plans to maintain contact with them.

Ms. Harris plans to travel to the World's Fair in Knoxville, Tenn., in August, and also to Las Vegas in November. She also intends to join her church choir.

Hazen 1983 Awards Nominations To Be Accepted Until February

Nominations for the 1983 Lita Annenberg Hazen Award and Fellowship Grant for excellence in clinical research are being accepted until Feb. 28, 1983.

The $50,000 tax-free prize will be awarded to a physician-investigator or team of physicians jointly conducting research whose current and published work is of evident superiority and importance. A $50,000 companion grant will also be given to the awardee's institution for support of a research fellow or fellows whom the award winner will select as associates. This is to encourage young gifted physicians to become clinical researchers.

For forms, write Office of the Dean, Mt. Sinai School of Medicine, One Gustave L. Levy Place (2B), New York, N.Y. 10029.

Swiss Researcher Begins Fellowship

Dr. Heinz Arnheiter, a research assistant at the Institute for Immunology and Virology, University of Zurich, Switzerland, began a Fogarty International Center research fellowship in June.

He will be under the preceptorship of Dr. Robert Lazzarini in the Laboratory of Molecular Genetics at the National Institute of Neurological and Communicative Disorders and Stroke. The title of his research project is Molecular Cloning of the Human Gene for Myelin Basic Protein.