The NIH Record

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National Institutes of Health

Eminent Geriatrician T. Frank Williams Installed as Second Director at NIA

Dr. T. Franklin Williams became the second Director of the National Institute on Aging in a well-attended ceremony in Wilson Hall on July 5.

HHS Secretary Margaret Heckler was there to welcome Dr. Williams as were Dr. Edward N. Brandt, Jr., Assistant Secretary for Health, Dr. C. Everett Koop, Surgeon General, USPHS; Dr. Frederick C. Robbins, President of the Institute of Medicine of the National Academy of Sciences, and other distinguished guests.

NIH Director Dr. James B. Wyngaarden administered the oath to Dr. Williams, recognizing the new NIA Director as an internationally known scientist, educator and clinician in the field of geriatrics as well as a friend of 30 years and a fellow North Carolinian.

"We feel that your presence here marks the beginning of a new era in the already distinguished history of NIA," said Mrs. Heckler in her welcoming remarks. She spoke of the task ahead of "softening the inevitability of aging" and noted that some do this by laughing about it, like the person who commented: "If I had known I would live so long I would have taken better care of myself."

In a more serious vein, Mrs. Heckler told the audience: "Nothing has a higher priority for me than the problems of older Americans." She added, "President Reagan fully shares those concerns and supports our activities in that field."

Mrs. Heckler used the occasion to say to Dr. Williams and others attending the ceremony that she would like to see "a great deal of added emphasis on the problems of older women in this society." Although women live about 7½ years longer than men, she said these last years are sometimes marred by loneliness, isolation and ill health. "As we study why women live longer than men, perhaps we can also answer the question of why men do not live longer lives."

She also listed Alzheimer's disease as a high priority research area.

Accepting his new position as NIA Director, Dr. Williams noted that aging is usually associated with many normal changes which may be compounded by the effects of diseases and psychosocial stresses. He said that the interrelationships of all of these factors must be emphasized in NIA programs.

Dr. Williams stressed his personal interest

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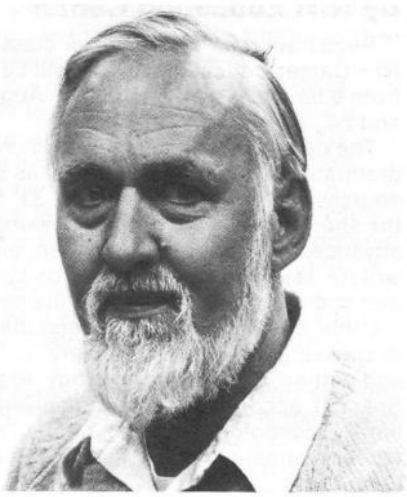
Dr. Wallace Rowe, World-Renowned Virologist, Leader in Recombinant DNA Research, Dies

Dr. Wallace Prescott Rowe, chief of the Laboratory of Viral Diseases (LVD) of the National Institute of Allergy and Infectious Diseases and a commissioned officer in the Public Health Service, died of cancer Monday, July 4, at Johns Hopkins Hospital, Baltimore, Md., the city of his birth.

One of the world's leading virologists, Dr. Rowe was universally recognized for his distinguished scientific leadership and outstanding research in the field of animal virology and for his contributions to the basic understanding of cancer viruses.

His discoveries through the years have changed basic ideas about the relationship among animal cells, viruses and genes, and have provided the scientific community with new tools with which to investigate the causes of many human diseases, including cancer.

(See DR. ROWE, Page 5)



Dr. Rowe

New Cancer Projects Funded in 32 States

The National Cancer Institute is launching a large-scale Community Clinical Oncology Program with awarding of funds this summer to 59 community hospitals or groups of community cancer specialists in 32 states.

The program, designed to combine the expertise of community physicians with ongoing research projects, will introduce the newest clinical research findings into community settings. More than 5,000 new cancer patients are expected to join in research studies through the new program.

"This cooperative venture among the National Cancer Institute, community oncologists and research centers will be a key ingredient in our national effort to reduce cancer morbidity and mortality," said Dr. Vincent T. DeVita, Jr., NCI Director. He said the program will also provide new information on patterns of patient care and how information about new technologies is disseminated.

Qualified community physicians will participate in clinical trials by affiliating with NCI-supported treatment study programs at major medical centers and national and regional clinical cooperative groups that conduct large treatment studies.

A clinical trial evaluates the newest treatments for cancer patients. The research therapies used in such trials are designed to answer specific questions to find new and better ways to help cancer patients.

By increasing the number of patients in treatment studies, the program will cut the time needed to find answers to important questions about new therapies. A miminum of 50 evaluable patients per year (and in many instances more than twice that number) will be enrolled by each of the 59 community programs on approved clinical research protocols. These protocols will be conducted in the 30 centers or cooperative groups selected for research affiliations. Each new patients the community programs bring into research studies must give informed consent.

Almost 200 applications from community hospitals and groups were received from 43 states for this program. Selection was based on technical merit, with some consideration of geographic spread.

Some individual community programs are single clinics, groups of practicing oncologists, or single hospitals. Others are consor-

(See CANCER, Page 10)

The NIH Record

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Jerry Stiller, president of the R&W, presents Dr. Charlotte Berg, deputy chief, Social Work Department, with a check for $3,000 as part of the monies collected by the Recreation & Welfare Association for the Patient Emergency Fund. The presentation took place at the annual meeting.

Training Tips

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

DELPRO	*Course Starts*	*Deadline*
*(Delegated Procurement)	8/8 9/26	7/25 9/12
Executive, Management and Supervisory		
Managing Performance Feedback	8/15	7/29
The Federal Budget Process	9/13	8/26
Committee Dynamics	8/9	7/18

*For new DELPRO users only

To learn about these and other courses, contact the Development and Training Operations Branch, DPM, 496-6371.

Writers Seminar to Discuss Molecular Basis of Stress

"The Molecular Basis of Stress" will be the subject of the NIH Science Writers' Seminar on July 26, from 9:30 a.m. to noon, in Bldg. 31, Conf. Rm. 8.

Dr. Frederick K. Goodwin, director, Intramural Research, NIMH, will be the moderator and will give an overview of the progress being made at unraveling the basic mechanisms by which the brain mediates the body's response to stress.

"Receptors for the Age of Anxiety" will be presented by Dr. Steven M. Paul, chief, Clinical Neuroscience Branch, NIMH. He will describe his studies on compounds that can cause stress when they bind to the same receptors as anti-anxiety drugs.

Dr. Julius Axelrod, chief, Section of Pharmacology, Laboratory of Clinical Science, NIMH, will discuss the relationships between stress hormones.

Corticotropin Releasing Factor and the Pituitary-Adrenal Axis will be the focus of a talk on brain hormones and stress by Dr. Philip W. Gold, chief, section on Neuroendocrinology, Biological Psychiatry Branch, NIMH, and Dr. George P. Chrousos, senior investigator, Developmental Endocrinology Branch, NICHD.

Science Writers' Seminars, sponsored by the intramural scientists of NIH and the Division of Public Information, OD, are designed to provide members of the press with background information on the various areas of research conducted at NIH.

For more information, call Bobbi Bennett, 496-1766. □

FAES Graduate School Sets Registration for Fall Term

Registration is now open for the fall semester at the Foundation for Advanced Education in the Sciences (FAES) Graduate School at NIH.

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

These evening classes, held on the NIH and USUHS (Navy Medical Center) campuses, will begin Sept. 19 and may be taken for credit or audit.

Tuition is $40 per credit hour. Courses that qualify for institute support as training should be cleared with supervisors and administrative officers as soon as possible.

Often FAES credits can be transferred to other institutions for degree work. Also, many courses are approved for AMA Category 1 credit.

Registration is possible by mail through Aug. 19, and in person, Sept. 7-13. A registration form must accompany the check or training form.

Catalogues are available in the Graduate School office in the Clinical Center, Rm. 2C207A and in the Foundation Bookstore, Rm. B1L101, or call 496-7977 to have one sent. □

Grants Associate Graduate Joins NIAID Research Office

Dr. Hortencia M. Hornbeak, a recent graduate of the NIH Grants Associate Program, has joined the Office of International Research, National Institute of Allergy and Infectious Diseases (NIAID).

She will be working with the U.S. Agency for International Development and other federal agencies to develop cooperative research projects with developing countries. □

Dr. William DeCesare (r), director of the DRR-based General Clinical Research Centers Program, presents a plaque to Dr. Jay Stein (c), chairman of the department of medicine at the University of Texas Health Science Center at San Antonio, and Jose Coronado, director of the Audie L. Murphy Memorial Veterans Hospital. The presentation took place at the dedication of a General Clinical Research Center at the San Antonio medical center and hospital. The unit is the first GCRC to be located within a veterans hospital.

Fall Registration Announced By NIH Education Center

Registration for fall semester classes at the NIH Career Education Center will be held from 9 a.m. to 4 p.m. on July 20, Aug. 10, 23 and 24.

The center conducts accredited undergraduate college courses as well as short courses and workshops in Bldg. 31. Some of the short courses are public speaking, advanced speech communication, technical writing, law enforcement, records systems management, and the law and the computer.

Other courses include fundamental skills in speaking, reading, vocabulary building and writing; English, psychology, logic, Spanish, accounting, data processing, library technology, nursing, mathematics, career planning, and English as a Second Language.

Three courses are offered for credit by television in cooperation with WETA, channel 26: Making It Count—An Introduction to Computers, Business of Management, and Writing With a Reason.

For more information and a schedule of classes which begin Aug. 29, contact the Career Education Center, Bldg. 31, Rm. B2B39, or call 496-5052. □

New Mouthpiece Allows Radiation Treatment Of Head and Neck Tumors With Less Hazard

A new method of delivering radiation therapy to patient with superficial malignant head and neck tumors is being used by researchers at the National Cancer Institute, working with scientist/clinicians at the National Institute of Dental Research.

The technique uses an acrylic device containing radioactive metallic seeds that fits externally over a patient's tumor. These appliances—called external-mold bite devices—are designed by physicians and radiation physics scientists in the NCI Radiation Oncology Branch and then built by Dr. William E. Wright and laboratory technician Albert D. McIntyre of the NIDR Dental Clinic.

Each device consists of an intraoral mouthpiece on which the patient bites to provide proper positioning and stabilization, plus an extension that fits over the tumor to be treated (for example, on the lip, or tip of the nose). This external portion may be a single-unit extension of the mouthpiece or multiple units that interlock with the mouth piece for stability.

Typically, cancer patients receive radiation therapy through machines that externally irradiate the tumor site or through radioactive needles implanted into the affected area.

External-mold bite devices offer an alternative method for treating patients with head and neck tumors that are located close to the skin or mucous membrane surfaces of the mouth or nose.

A major advantage is that radiation can be delivered directly to the tumor mass with less exposure to nearby normal tissue. The technique also can be used with other types of treatment such as chemotherapy and surgery.

Designing and fabricating an external-mold bite device requires several steps and close cooperation between the NIDR and NCI clinicians, scientists, and technicians.

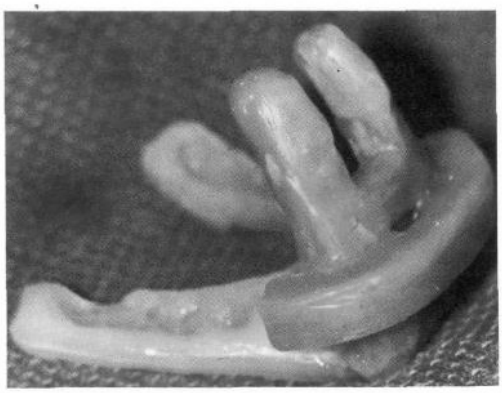
After a dental consultation, Dr. Wright and Mr. McIntyre meet with the NCI personnel to discuss the proposed device. The device is first formed in wax. The mouthpiece or bite portion is constructed on stone models of the patient's teeth.

Next, a wax form, which fits closely over the tumor, is made. This can be done by making a stone cast of the facial anatomy or by free-sculpting the wax over the tumor site.

The patient then models the wax device for Dr. Allen Lichter, chief of the NCI radiation therapy section. Radiation Oncology Branch, and Robert Miller, a physicist in the radiation physics and computer automation section. Once the trial wax device fits the patient satisfactorily, it is converted from wax into the final acrylic by a standard dental laboratory procedure.

The NCI group then estimates where the radioactive seeds should be placed within the external mold.

The appliance is then returned to the Dental Clinic and Dr. Wright and Mr. McIntyre complete the next step by cutting grooves in the tissue side of the mold. Plastic tubes containing dummy (nonactivated) seeds are temporarily imbedded in these grooves.



This photo shows an external-mold bite device used in treating a tumor located on the tip of a patient's nose. The wax model consists of the mouthpiece on which the patient bites, as well as projections which fit into the patient's nose to deliver radiation intranasally.

By using dummy seeds, the scientists can accurately compute the most effective location and activity for the metallic seeds without being exposed to radioactive materials.

Using an "after loading" technique (meaning that the actual radioactive seeds are loaded into the external mold after precomputing the amount of radiation required to treat a particular patient), the NCI investigators prepare the device for active patient therapy.

The radioactive seeds selected for use in these particular molds are composed of iridium-192. This radioactive material has a half-life of 72 days; that is, it loses one-half its strength in that time as it undergoes radioactive decay. During the treatment, the potency of the radioactive seeds is computed daily. As the seeds begin to lose strength, the treatment time is lengthened to deliver a constant daily radiation dose.

Patients come to the Clinical Center as outpatients to use the external-mold bite devices.

The NIDR Dental Clinic staff provides orientation and prevention and control therapies for possible oral and dental side effects that may result from the radiation treatment. A typical radiation treatment regimen with this device may require a patient to wear the appliance 4 to 6 hours a day, 5 days a week, for 3 weeks.

While the device is in use, the patient must stay in an isolated hospital room to avoid exposing others to radiation. The patient may read or watch television, and can communicate with the researchers by telephone. When the daily therapy is completed, the patient can return home without radioactive risk to family or other contacts.

When the total treatment is completed, the device is sent to the Radiation Safety Branch, Division of Safety, for proper disposal.

These external-mold bite devices play an important role, alone or in combination with other modes of oncologic therapy, in successfully treating certain patients with superficial tumors of the head and neck.

—Jody Dove □

Lura Street Jackson Dies; Former Information Chief

Lura Street Jackson, former journalist and public information chief of agencies within the Department of Health and Human Services, died July 5 at Suburban Hospital in Bethesda, Md. She had suffered a stroke following cardiovascular surgery.

Ms. Jackson served from 1961 as chief of public information at the National Institute of Mental Health and later as associate director for prevention at the National Institute of Drug Abuse until her retirement in 1979.

Her work in publicizing the first federally supported Community Mental Health Centers program helped to initiate significant changes in the care and treatment of the mentally ill throughout the United States.

She also originated a program designed to provide youth with alternative pursuits to counteract the lifestyles of the drug culture in the 1960s and 1970s. This "alternatives" activity program is still supported by the Federal Government, providing support to states and local communities in counteracting drug abuse.

Ms. Jackson was born in Manila, P.I., July 4, 1912. She was the daughter of the late Justice Thomas Adkins Street, who was appointed to the first Philippine Supreme Court by President Woodrow Wilson.

She graduated magna cum laude from Pomona College in California in 1933 and received an M.S. degree in journalism from Columbia University.

Ms. Jackson served as a reporter in the Rome Bureau of the New York Herald Tribune and later as copy chief at Life Magazine in New York.

Prior to her appointment to the Federal Civil Service, Ms. Jackson, as a member of PR Associates, provided public relations counseling and authored numerous reports for national health and education organizations.

She was a participating member of the Maryland Women's Suburban Democratic Club of Montgomery County, the Woman's National Democratic Club and the Washington Press Club, as well as acting as spokesman for civic groups in Montgomery County, Md.

Lupus Foundation Convened In Washington on July 14-16

The Lupus Foundation of America held its 6th annual convention in Washington, D.C., on July 14-16. Highlights of the program included a welcome address by Judi Buckalew, Special Assistant to President Reagan and a medical program moderated by Dr. Lawrence E. Shulman, director, Division of Arthritis, Musculoskeletal and Skin Diseases, NIADDK.

Panel members included Dr. John H. Klippel, senior investigator, Arthritis and Rheumatism Branch, and Dr. Alfred D. Steinberg, chief, cellular immunology section, Arthritis and Rheumatism Branch. □

The art of being wise is the art of knowing what to overlook.—*William James*

New NINCDS Immunoblotting Test Predicts Neurologic Involvement in Lipid Disorder

By Diane Striar

NINCDS scientists have developed two new diagnostic tests that predict whether a child with the inherited lipid-storage disorder called Gaucher's disease will eventually show nervous system involvement.

These tests will help scientists plan a course of treatment and provide precise genetic counseling for Gaucher's patients, says Dr. Roscoe O. Brady, chief of the NINCDS Developmental and Metabolic Neurology Branch, where the research was conducted.

Both tests indicate whether a patient suffers from the type of Gaucher's disease that does not affect the nervous system, or instead has one of the two neurologic types.

The second test further discriminates between the two neurologic categories of the disease.

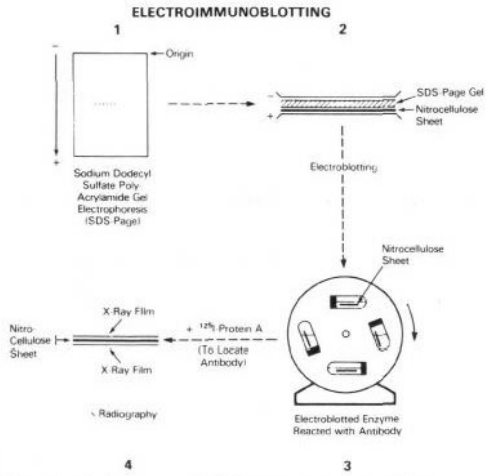
Drs. Edward I. Ginns and John A. Barranger developed the tests after identifying genetically distinct varieties of the defective enzyme that causes the disease.

Gaucher's disease is characterized by an abnormal buildup in tissues of glucocerebroside—a complex fat or lipid. Glucocerebroside accumulates because of a genetically determined defect in an enzyme called glucocerebrosidase that normally breaks down the lipid.

NINCDS scientists are investigating Gaucher's disease in the hope that it will be a prototype for the study of all lipid storage disorders.

There are three types of Gaucher's disease:

- Type 1 (nonneurologic) involves the liver, spleen, lung, and bones;
- Type 2 (acute neurologic) causes severe mental and physical retardation and leads to death before age 2;



The electroimmunoblotting process used by NINCDS scientists to identify different forms of the defective Gaucher's enzyme uses electrophoresis to separate enzymes from tissue samples (step 1); the enzymes are then transferred to a sheet of nitrocellulose paper (step 2); specific enzyme antibody reacts with glucocerebrosidase and a radioactive protein is added to the mixture to locate the antibody (step 3); and X-ray film is placed over the nitrocellulose sheet. The film is exposed and the radioactive probe reveals the different forms of glucocerebrosidase present in each sample (step 4).

Drs. Ginns and Barranger finish skin biopsy procedure on Gaucher's patient.

- Type 3 (subacute neurologic) causes seizures and eye movement abnormalities in children, and usually involves all the symptoms of type 1.

The standard method of diagnosis does not identify which type of Gaucher's disease a patient has, or —in the case of prenatal detection—which kind a fetus will develop.

"It is obviously very important to be able to distinguish among these patients to develop rational therapeutic strategies for those who have the disease," says Dr. Brady.

There is as yet no treatment for patients who have the neurologic types of Gaucher's disease, according to Dr. Brady. Patients without neurologic involvement may be helped by replacement of the defective enzyme in much the same way that diabetic patients are treated with insulin.

Drs. Ginns and Barranger have used the new tests to diagnose several dozen Gaucher's disease patients. The scientists are now studying the usefulness of the tests in prenatal diagnosis.

"When these prenatal versions are ready for clinical use, they will have a tremendous impact on genetic counseling," Dr. Brady predicts.

The new tests rely on a laboratory technique called electroimmunoblotting. Drs. Ginns and Barranger use electrophoresis to extract enzymes from Gaucher's patients' cells and from cells of normal persons, and transfer the enzymes from separating gels onto a nitrocellulose paper.

A specific enzyme antibody and a radioactive protein are then added to the enzyme mixture. When X-ray film is placed on top of the paper and exposed, the radioactive compound acts as a probe, revealing glucocerebrosidase as a collection of bands. The bands of both Gaucher's patients and normal individuals can then be compared on the same nitrocellulose paper.

According to Dr. Ginns, normal glucocerebrosidase is seen as a series of three bands—each one a different size.

"Each band corresponds to a stage in the normal maturation process of the enzyme," he says. "The enzyme is largest when it is first synthesized in the cell. Then it is broken down to two successively smaller molecules. The smallest one appears to be the biologically active form within the cell. This is the form of the enzyme that actually breaks down the lipid."

The NINCDS investigators found the three enzyme bands in both normal cells and cells from type 1 Gaucher's patients, those without nervous system involvement.

But in cells extracted from patients with types 2 and 3, the smallest band—the active form—was not visible, indicating a lack of the mature enzyme.

This discovery enabled the scientists to predict whether a patient will have the non-neurologic or neurologic type of Gaucher's disease.

The second test uses a monoclonal antibody developed by the NINCDS research team in collaboration with scientists in the Netherlands to further distinguish between the two neurological types of the disease.

The monoclonal antibody reacts with the largest enzyme band in tissue extracts from type 3 patients, but does not react with this band in tissue from type 2 patients.

Additional studies are now under way to find out why the antibody reacts to the type 3 Gaucher's enzyme but does not react to the enzyme in type 2 patients.

The NINCDS scientists collaborated with Dr. Joseph M. Tager and coworkers at the University of Amsterdam and Dr. Hans Galjaard and his colleagues at Erasmus University, the Netherlands. The most recent report on this research can be found in the July 15 *Clinica Chemica Acta*. □

DR. ROWE

(Continued from Page 1)

Dr. Richard M. Krause, NIAID Director, said of Dr. Rowe: "He was one of our most brillant and creative scientists . . . truly a leader in biomedical science. It was his analytical mind that resolved many of the complex and controversial issues surrounding the use of recombinant DNA technology, paving the way for its use as a major tool for all biomedical research today."

Dr Rowe's research career began in the early 1950s at the Naval Medical Research Institute with his investigation of lymphocytic choriomeningitis (LCM) virus infection of mice. He described for the first time a situation in which the immunologic response to a virus, rather than the virus itself, causes the disease—the first identification of a virus-caused autoimmune disease.

He came to NIAID in 1952 where he collaborated with Dr. Robert J. Huebner in discovering a new group of viruses, now known as adenoviruses. This research provided the basis for the current classification of these organisms into more than 33 distinct types responsible for a number of respiratory diseases and eye infections.

Developed Adenovinus Vaccine

Largely through Dr. Rowe's efforts in the laboratory, an adenovirus vaccine was developed by colleagues that has been highly effective in reducing illness, particularly among military recruits.

Dr. Rowe's last years of research focused on the important and complex group of murine C-type RNA viruses (retroviruses). With his colleague of 29 years, Dr. Janet Hartley, Dr. Rowe developed many now widely used techniques for detecting, growing and measuring mouse leukemia and sarcoma viruses.

They were the first to demonstrate that mouse sarcoma viruses only replicate in the host cell in the presence of another "helper" virus. Dr. Rowe's studies, using leukemia-prone and leukemia-free strains of mice, provided the first proof that the blueprints for a leukemia virus may be present in unexpressed form in the normal cell's genetic material.

As a direct consequence of this work, it is now possible to manipulate specific viral genes by classical genetic techniques to determine their effects on spontaneous, chemically, or physically induced tumors in mice.

Pinpointing the chromosomal locations of genes of known function is necessary if one is to understand the regulation of gene expression in all animal cells and, ultimately, to understand and control cancer.

Dr. Rowe was also a leader in recombinant DNA research, both at NIH and throughout the nation. Working with NIAID's Dr. Malcolm Martin, he conducted the first risk assessment studies to evaluate the potential risks involved in this pioneering research.

A gifted lecturer and teacher, Dr. Rowe taught virology at Howard University from 1960 to the mid 1970s. One of his students, Dr. Siser Chattopadhyay, is now a molecular virologist with the National Cancer Institute.

He recalls that Dr. Rowe "was a superb teacher with an exceptional ability to reason and also remarkable patience." He went on to say: "My enrollment in his class became on of the most significant events in my professional life. It changed my entire career in science."

Dr. Hartley, his longtime collaborator recalled that Dr. Rowe was "a wonderful man to work with, always supportive, always the first to recognize the contributions of others." One of his great satisfactions was the success of many of the research associates and post-doctoral fellows who trained in his laboratory.

She added: "He had remarkable clarity of thought and analytical skill, but what I shall remember most clearly is the joy he felt—and generated in others—in discovery, in seeing patterns evolve and develop into concepts of biologic importance."

Dr. Rowe was warmly thought of in his laboratory. LVD staff stayed with him for such long periods that a 10-year employee was considered "new" to LDV. Joan Austin, a technician, pointed out that Dr. Rowe, with whom she worked for 27 years, was the only boss she ever knew. She recalled his sensitive nature—his love of classical music, poetry and art. She said that his sketches often decorated the protocols describing staff working assignments and that children's faces and birds were his favorite subject. "If the work was going well, the birds were serene—if he had a particularly knotty problem, the birds were fierce and threatening."

Received Many Awards

During his career, Dr. Rowe received many important awards, including the Rockefeller Public Service Award, the Paul-Ehrlich and Ludwig-Darmstaedter Prize, the Eli Lilly Award, the PHS Distinguished Service Medal, the Howard Taylor Ricketts Award and the National Academy of Sciences Selman A. Waksman Award in Microbiology.

Despite the accolades received by Dr. Rowe throughout his distinguished career, he remained a modest man with some reservations about awards. After receiving the Rockefeller Award, he said: "It's always sort of an embarrassment to be singled out. I'm one of a chain. You can't separate out what only one person does."

In 1981 Dr. Rowe received the General Motors Cancer Research Foundation Award. He was presented the Alfred P. Sloan, Jr., Medal and $100,000 for the "most outstanding recent basic science contribution to cancer . . ." In accepting this prestigious award, Dr. Rowe said: "The distinctions are becoming increasingly blurred between tumor viruses and nontumor viruses, between virus and cell genes, between virology and cancer research, and between virology and cell biology.

"This, of course, is as it should be, and is what basic virologists have been aiming toward all along. We have known intuitively for many years that tumor viruses were going to play the same role for higher cells that the bacterial viruses had played in unravelling the complexities of bacterial cells. We are now seeing that intuition coming into full flower, and cancer research will clearly be the beneficiary."

Arthritis Prevention Conference Scheduled in Warrenton

The National Arthritis Advisory Board will hold the first National Conference on the Prevention of Arthritis on July 19-22, at Warrenton, Va.

Dr. James B. Wyngaarden, Director, NIH; Dr. Lawrence E. Shulman, director, Division of Arthritis, Musculoskeletal and Skin Diseases, NIADDK, and Dr. James R. Klinenberg, chairman of the department of medicine at the Cedars-Sinai Medical Center in Los Angeles and chairman of the National Arthritis Advisory Board, will speak at the opening plenary session.

The purpose of the conference is to define opportunities for preventing rheumatic diseases, and devise strategies for accomplishing these objectives.

Six workshops will discuss the problem of preventing the following diseases: osteoarthritis; rheumatoid arthritis (and juvenile arthritis); spondylitic disorders; connective tissue diseases (lupus and scleroderma); gout and pseudogout; and low back pain and scoliosis. □

Amnesty International Recognizes NIH Letter-Writing Group

Amnesty International, a worldwide human rights organization (winner of the 1977 Nobel Peace Prize), seeks observance throughout the world of the United Nations Declaration of Human Rights. In May, it gave official recognition to a letter-writing group at NIH dedicated to prevention of torture and medical abuses throughout the world.

For the past several months members of the NIH group have been writing letters, in a private capacity, on behalf of people imprisoned for their political or religious belief.

The letters are short and courteous, mainly consisting of requests for medical treatment or cessation of torture for imprisoned or detained people and immediate fair trial or freedom for "prisoners of conscience" or "disappeared persons."

Meetings are held every Thursday from 12:30 to 1:30 p.m. in Bldg. 10, Rm. B1D25. For further information call Pat McKinley, 496-9285 (daytime) or Genevieve Schiffmann, 657-2863, after 7 p.m. □

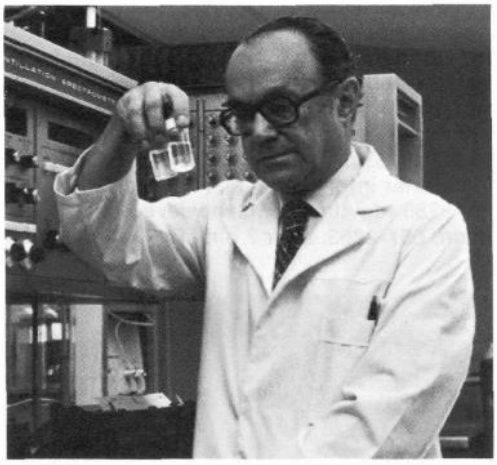
Dr. Carl D. Douglass (l), Director, DRG, presents Dr. Antonia Novella, executive secretary, General Medicine B, study section, with a Commendation Medal. Dr. Novella is a senior surgeon in the PHS Commissioned Corps.

12 NIH Staff Receive Commerce Inventors Awards

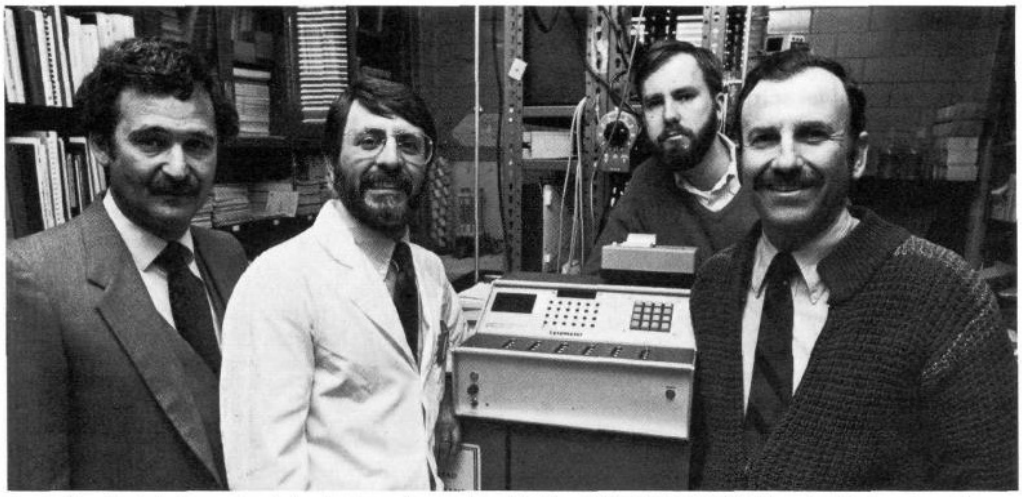
Twelve NIH staff members recently received an Inventor's Award. These awards were given by the National Technical Information Service of the Department of Commerce.

Below are the inventors, their products or description of their inventions.

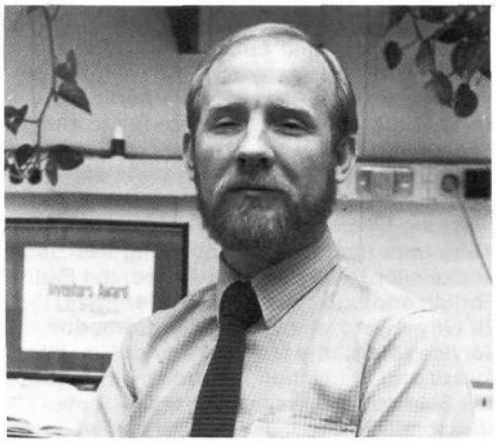
Willadene Zierdt, *a medical technician in the Clinical Center's clinical pathology department, devised a fecalator which concentrates fecal specimens for parasite recovery. It consists of a plastic tube connected to a pyrex tube by a nylon collar containing a stainless steel filter. Before its development, technicians strained samples into a test tube using a funnel lined with cheesecloth. The device provides a more accurate recovery of parasites and protects technicians from direct contact with live material. The fecalator was patented in 1980 and licensed for commercial use by Marion Scientific Products. It is currently being relicensed by Evergreen Scientific Products which is producing a disposable form of the device.*



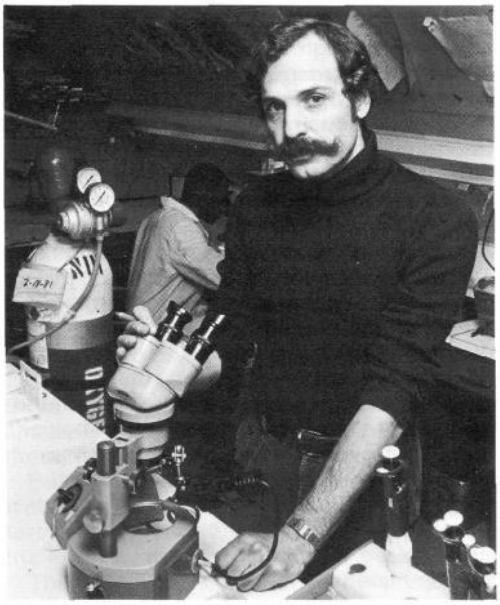
Dr. Hilton B. Levy *received the award for his invention of Nuclease Resistant Hydrophilic Complex of Polyriboinosinic Polyribocytidylic Acid. With the National Institute of Allergy and Infectious Diseases since 1952, Dr. Levy is currently head of the molecular virology section of the Institute's Laboratory of Viral Diseases at the Frederick Cancer Research Facility in Frederick, Md. Dr. Levy was a pioneer in the use of the drug polyI:C (polyinosinic-polycytidylic acid) as an interferon inducer. He proved in earlier studies that this compound—capable of inducing rodent cells to produce large amounts of interferon and develop a high level of resistance to viral infections—was also able to act as an antitumor agent in rodents. However, polyI:C was not effective in primates, including man, because of their high serum levels of nuclease activity. With the invention of the new compound, poly ICLC (polyriboinosinic polyribocytidylic acid, complexed to polylysine and carboxymethylcellulose), Dr. Levy has provided a therapeutic agent proven effective against a variety of viral diseases in monkeys and chimpanzees. The drug is currently undergoing clinical trials in several human viral diseases, malignancies and neurologic diseases involving abnormal immune functions.*



A patent for a biological measuring device, the Lysometer, was issued to (l to r): **Allen Markowitz**, *Biomedical Engineering and Instrumentation Branch, Division of Research Services;* **Dr. Genesio Murano**, *Office of Biologics, National Center for Drugs and Biologics, FDA;* **Dr. Steve Leighton**, *BEIB; and* **Burt Chidakel**, *BEIB. As part of BEIB's program of consulting and design services for the NIH community, the three BEIB engineers designed and constructed the Lysometer in collaboration with Dr. Murano for use in his investigations of the enzymes urokinase and streptokinase, which dissolve blood clots. This research is related to the treatment of thromboembolism. The Lysometer measures the time required for a small plastic sphere to drop to the bottom of a dissolving clot in a test tube. It consists of an internal microprocessor and 24 controlled-temperature sample wells. The descending spheres interrupt infrared light beams connected to the microprocessor. Compared to the visual method ordinarily used, the Lysometer substantially reduces the laboratory workload and allows the experimenter to make dose-response standard curves while simultaneously assaying solutions at multiple concentrations.*



Dr. Leonard M. Hjelmeland *received this year's Inventors Award for developing CHAPS, a leading detergent used in laboratories worldwide to release biochemically active proteins from cellular membranes. Dr. Hjelmeland, a 34-year-old vision research expert in biochemistry in the National Eye Institute laboratory, developed the detergent while doing membrane biochemistry research at NIH. "It came about because I saw the need for a new detergent and had enough background in synthetic chemistry to develop it," Dr. Hjelmeland said. On the market since 1981, CHAPS is commercially available through several biochemical firms as well as at the NIH self-service stores where $15,000 worth of it was bought for use in intramural laboratories last year. The patent for CHAPS is held by the Department of Health and Human Services.*



Dr. Phil Skolnick *Laboratory of Bioorganic Chemistry, National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, in collaboration with* **Dr. Steven M. Paul**, *National Institute of Mental Health, developed a rapid and sensitive radioreceptor assay for measuring benzodiazepines in plasma. The benzodiazepines, which include drugs like Librium and Valium, are the most widely prescribed drugs in current therapeutic use. Their actions are diverse, allowing use as anticonvulsants, anxiolytics (anti-anxiety), sedative-hypnotics, and muscle relaxants. The advantages of this method, over current methods of assay, are that it is rapid, sensitive, specific, and requires no sophisticated equipment or methods.*

Dr. Gary Peck, *senior investigator, NCI Dermatology Branch, patented a dosage schedule for oral 13-cis-retinoic acid (isotretinoin) in the treatment of cystic acne. Dr. Peck established his high-low dosage schedule to produce a maximal therapeutic response and to reduce possible side effects during the 4-month treatment plan. With this schedule, which takes advantage of the drug's delayed effect, Dr. Peck observed that in almost all cases the therapeutic effect becomes apparent only after the initial high dosage has been reduced.*

Not pictured: Drs. Yoichiro Ito (winner of 3 awards) and Theodor Kolobow, from the National Heart, Lung, and Blood Institute. □

Three CC Staff Nurses Honored at Symposium

Three nursing awards to staff nurses opened the 9th Annual Nursing Research Symposium sponsored recently by the Clinical Center Nursing Department. Awardees then joined the audience of CC nursing staff and visiting nurses in listening to the lectures of distinguished keynote speakers Drs. Barbara Stevens and Phyllis B. Kritek.

Honored by the CC Nursing Department were Mary Grace Tighe, Nurse of the Year; Susan Fisher, Nurse Research Award; and Dan Sands, Distinguished Nurse Award. Rena Murtha, Clinical Center associate director for nursing, presented the awards.

The Nurse of the Year Award is presented in recognition of exemplary practice in the care of patients in a research environment. Ms. Tighe is a primary nurse in the field of ambulatory care of medical oncology patients.

She has taught chemotherapy courses for nurses, represented nursing in interdisciplinary programs for medical oncology patients, and has acted for 6 weeks as head nurse on her unit in the absence of a permanent head nurse.

Ms. Tighe "has demonstrated excellence in practice and leadership in the coordination and direction of patient care and nursing activities," it was noted.

The Nursing Research Award honors a professional nurse whose research has improved the practice of nursing. The results of nurse biostatistician Susan Fisher's independent project, "A Study of the Sexual Knowledge and Sexual Attitudes of Professional Nurses in the Clinical Center Nursing Service," has had a significant impact on CC nursing practice and has been published in *Cancer Nursing* and *Oncology Nursing Forum* and through presentations to the American Society of Oncology, the American Lung Association, nurses at Johns Hopkins School of Medicine, and the American Cancer Society.

The Distinguished Nurse Award is given to a professional nurse who has made a significant contribution to the goals of the department and is recognized among colleagues within and outside the department for expertise in nursing practice, research, education, or administration.

Recipient Dan Sands has been an active, effective chairperson of the staff nurse advisory committee. Mr. Sands "has given time, effort and enthusiasm to the advancement of nursing. He has set the highest standards of professionalism and dedication for his staff nurse counterparts at the Clinical Center." □

See 'Old' Cape Cod!

The NIH R&W is planning to visit Cape Cod from Sept. 23 through Sept. 26. The four-day, three-night package includes: roundtrip bus transportation, accommodations at the Sheraton Ocean Park Inn, poolside party, breakfast, clambake, buffet banquet and a dinner at a sea captain's home. Also a customized sightseeing tour with all taxes and gratuities, and baggage handling covered by basic fee.

Price per person: $190 (4 per room); $211 (3 per room); $235 (2 per room). For further information call 496-4600. □

Suicide by Shooting and Gun Ownership Climb Together; Nonfirearms Rate Remains the Same, Doctor Says

The use of firearms to commit suicide has increased dramatically over the past 25 years, according to Dr. Jeffrey H. Boyd, a research psychiatrist/epidemiologist, NIMH Biometry and Epidemiology Branch, in a recent issue of the *New England Journal of Medicine*.

In fact, "the rate of suicide by firearms has been increasing more than twice as rapidly as the rate of suicide by gas or poisoning," he said.

Analyzing data on the number and types of suicides from the vital statistics, for the years 1953 through 1978, Dr. Boyd discovered that for individuals under the age of 40, the suicide rate rose much more rapidly—4.5 percent in 1953 to 9.3 percent in 1978.

This dramatic increase was accompanied by a gunshot suicide rate which rose from 4.9 percent in 1953 to 7.1 percent in 1978.

During the same 25 years, the nonfirearms suicide rate did not change.

Interestingly enough, the number of guns in U.S. households has also increased, Dr. Boyd said. He cited data from the Bureau of Alcohol, Tobacco, and Firearms that "showed that there were 51 guns per 100 persons in 1968 as compared to 73 per 100 in 1978."

He notes that other studies have shown that handguns (as opposed to rifles) account for 83 percent of all suicides by firearms.

Perhaps, he suggests, the increase in suicide might be controlled by restricting the sale of handguns—for instance, instituting a waiting period between the (declared) intention to purchase a handgun and the actual purchase.

"I think," he said "that people who are depressed and/or alcoholic are also inclined to be impulsive. If it became more difficult for them to kill themselves—the impulse might pass."

Dr. Boyd also noted that another study shows that several states with very strict gun control laws have lower suicide rates.

In Britain, a decrease in the carbon monoxide content of domestic gas (gas, rather than firearms being the most common means of suicide) resulted in a decline in the suicide rate.—**Judy Folkenberg** □

NIA DIRECTOR

(Continued from Page 1)

in research on the causes, prevention, treatment and other aspects of dementia in the elderly. He also emphasized the importance of research on the problems of older women.

NIA will continue to give high priority to research on the biological markers of aging, functional disabilities faced by the elderly, intergenerational relationships, the effects of stress, pharmacology and new ways to provide care, Dr. Williams continued.

He emphasized the importance of continued collaboration with other Institutes within NIH as well as with other Government and private organizations.

Dr. Williams also emphasized the need for more academic leadership in the fields of aging and geriatric research and pledged to strengthen the NIA extramural and intramural training programs.

An internationally known geriatrician, Dr. Williams was professor of medicine and of preventive family and rehabilitative medicine at the University of Rochester School of Medicine and Dentistry before joining NIA.

He also served as codirector of the Center on Aging at the University of Rochester Medical Center, as medical director of the Monroe Community Hospital in Rochester, and held research and teaching positions at the University of North Carolina and the University of Rochester.

Dr. Williams is given the oath of office as new NIA Director by Dr. Wyngaarden in a ceremony in Wilson Hall on July 5. Mrs. Williams holds the Bible for her husband as their daughter, Mary Wright Williams, and HHS Secretary Heckler look on.

Scenes at NIH/R&W Annual Family Picnic

Photos by Herbert Alvord, Jr.

Gimme, gimme, as young NIH'ers begin the traditional egg toss.

Meagan Fitzsimmons, daughter of William T. of NIGMS, leads off the sack race, one of the many events at the NIH/R&W family picnic.

Jelly Bean, alias Dr. Marty Frank, entertained many of the children at the picnic.

Volleyball continued on through the day with open play for all the individuals who attended. Other individuals participated in softball, horseshoes, frisbee throwing, and fishing.

NIH employees enjoy a robust tug of war in a mixed couple event. In the age categories 6 and under—women were the winners; 16 and under—men were the winners; and over 16, after a tough 5-minute struggle, the men were declared the winners.

Visiting Scientist Program Participants

5/1 **Dr. Tomoyuki Kanamatsu,** Japan. Sponsor: Dr. Jau-Shyong Hong, Laboratory of Behavioral and Neurological Toxicology, NIEHS, RTP, N.C.

5/1 **Dr. Felix Romagna,** Switzerland. Sponsor: Dr. Marshall W. Anderson, Molecular Pharmacology Section, NIEHS, RTP, N.C.

5/1 **Dr. Hector R. Martinez,** Mexico. Sponsor: Dr. Igor Klatzo, Laboratory of Neuropathology and Neuroanatomical Sciences, NINCDS, Bg. 36, Rm. 4D04.

5/1 **Dr. Neelakandan Muthukumaran,** India. Sponsor: Dr. A. H. Reddi, Bone Cell Biology Section, NIDR, Bg. 30, Rm. 207.

5/1 **Dr. Hildegard M. Reznik-Schuller,** West Germany. Sponsor: Dr. Michael Boyd, Laboratory of Experimental Therapeutics and Metabolism, NCI, Bg. 10, Rm. 6N105.

5/1 **Dr. Ulf Smith,** Sweden. Sponsor: Dr. Samuel Cushman, Diabetes Branch, NIADDK, Danac #4, Rm. 15.

5/1 **Dr. Zelig Asher Tochner,** Israel. Sponsor: Dr. Eli Glatstein, Radiation Oncology Branch, NCI, Bg. 10, Rm. B3B38.

5/1 **Dr. Sanemoto Togo,** Japan. Sponsor: Dr. Lance Liotta, Laboratory of Pathology, NCI, Bg. 10, Rm. 8B17.

5/1 **Dr. Ben Avi Weissman,** Israel. Sponsor: Dr. John Daly, Laboratory of Bioorganic Chemistry, NIADDK, Bg. 4, Rm. 212.

5/1 **Dr. Jonathan Whittaker,** United Kingdom. Sponsor: Dr. Jesse Roth, Diabetes Branch, NIADDK, Bg. 10, Rm. 8S243.

5/2 **Dr. Michael Cordingley,** United Kingdom. Sponsor: Dr. Gordon L. Hager, Laboratory of Tumor Virus Genetics, NCI, Bg. 41, Rm. D243.

5/2 **Dr. Morag Park,** United Kingdom. Sponsor: Dr. Donald Blair, Microbiology Section, NCI, Bg. 560, FCRF, Frederick, Md.

5/2 **Dr. Samuele Peppoloni,** Italy. Sponsor: Dr. Elieser Gorelik, Biological Therapeutics Branch, NCI, FCRF, Frederick, Md.

5/6 **Dr. Juraj Culman,** Czechoslovakia. Sponsor: Dr. Irwin Kopin, Laboratory of Clinical Science, NIMH, Bg. 10, Rm. 2D46.

5/9 **Dr. Hiroshi Kuzuya,** Japan. Sponsor: Dr. Gordon Guroff, Office of the Scientific Director, NICHD, Bg. 6, Rm. 1A08.

5/10 **Dr. Hannah Gould,** U.S. Sponsor: Dr. Gary Felsenfeld, Section on Physical Chemistry, NIADDK, Bg. 2, Rm. 301.

5/13 **Dr. Mitsuhiro Itaya,** Japan. Sponsor: Dr. Robert Crouch, Laboratory of Molecular Genetics, NICHD, Bg. 6, Rm. 339.

5/15 **Dr. David R. Critchley,** United Kingdom. Sponsor: Dr. Peter H. Fishman, Developmental and Metabolic Neurology, NINCDS, Bg. 10, Rm. 3D55.

5/15 **Dr. Masashi Kawaichi,** Japan. Sponsor: Dr. Igor B. Dawid, Laboratory of Molecular Genetics, NICHD, Bg. 6, Rm. 408.

5/15 **Dr. Brian Martin,** Canada. Sponsor: Dr. John A. Barranger, Developmental and Metabolic Neurology Branch, NINCDS, Bg. 10, Rm. 4N248.

5/15 **Dr. Reginald O. Morgan,** Canada. Sponsor: Dr. Kevin J. Catt, Endocrinology and Reproduction Research Branch, NICHD, Bg. 10, Rm. 8C404.

5/17 **Dr. Jorg Jendis,** Germany. Sponsor: Dr. Robert C. Gallo, Laboratory of Tumor Cell Biology, NCI, Bg. 37, Rm. 6A09.

5/17 **Dr. Shinji Shimada,** Japan. Sponsor: Dr. Stephen Katz, Dermatology Branch, NCI, Bg. 10, Rm. 12N238.

5/17 **Dr. Min-Kyung Song,** Korea. Sponsor: Dr. Snorri Thorgeirsson, Laboratory of Carcinogen Metabolism, NCI, Bg. 37, Rm. 3B25.

5/23 **Dr. Kenji Hirota,** Japan. Sponsor: Dr. Kevin J. Catt, Endocrinology and Reproduction Research Branch, NICHD, Bg. 10, Rm. 8C404.

5/23 **Dr. Takako Hirota,** Japan. Sponsor: Dr. Kevin J. Catt, Endocrinology and Reproduction Research Branch, NICHD, Bg. 10, Rm. 8C404.

Doris Marshall Retires From MAPB After 33 Years

Doris Marshall, administrative officer of the Medical Arts and Photography Branch, DRS, retired June 30 after 33 years of Federal service. Almost all of her work career was spent in MAPB and its predecessor unit, the medical arts section of the NIH Scientific Reports Branch.

One of the gifts presented to Ms. Marshall at her retirement luncheon was a drawing of herself by MAPB graphic artist Al Laoang.

Mrs. Marshall began in the medical arts section as a clerk-typist in 1952, and later became a Varitype operator and then a secretary in the section. She also spent 2 years as a secretary at the U.S. Naval Communications Station in Pearl Harbor (1960-62) while her husband was assigned there by the Navy.

When the Marshalls returned to the Washington area in 1962, she rejoined MAPB and soon transferred to administrative duties as a special assistant to the branch chief. She became administrative officer in 1970.

"Doris' energy, organization, and good sense of humor have contributed immensely to efficient and sensible operations in a very busy place," said Ron Winterrowd, MAPB chief.

Mrs. Marshall and her husband Harris (who retired from the Navy in 1971 with 31 years of service) have just moved into their recently completed new home located between Rehoboth and Lewes, Del. They had vacationed regularly in that area for many years, and for the past 5 years owned a mobile home there.

The Marshalls plan to travel a good deal, but above all, to devote much more time to their favorite Eastern Shore activities—clamming, crabbing, fishing, and boating. □

R&W Sponsors Farmers Market

R&W is sponsoring a farmers market in parking lot 41B on Tuesdays, from 3:30 to 5:30 p.m. In season, the following items will be offered: strawberries, apples, peaches, squash, tomatoes, cabbage, green beans and other items including home-made jams, jellies, honey, breads and cakes. Treat yourself to fresh fruits and vegetables from local Montgomery County farmers. □

John B. Reed Dies; Former NIH Budget Officer

Former NIH employee John B. Reed, 71, died May 31, 1983.

Mr. Reed, deputy budget officer in the Office of Financial Management, retired in 1969 and moved to Spring Hill, Fla. 7½ years ago. He started his NIH career in 1948 in the National Cancer Institute.

He began working for the Government in 1930 at the U.S. Post Office and was later promoted to what is now the General Services Administration. In 1942 he went to work for the Farm Credit Administration before joining NIH.

Mr. Reed was a member of the Audubon Society and an outstanding photographer. His photographs won silver medals from the Greater Washington Council of Camera Clubs.

He is survived by hs wife Mae, a former secretary and Committee Management Officer to the National Cancer Advisory Board, NCI. Mr. Reed and his wife served a combined total of 77 years in Government service.

GenBank™ Available to NIH Scientists

GenBank™, the Genetic Sequence Data Bank, is a repository of all published nucleic acid sequences greater than 50 nucleotides in length, catalogued and annotated for sites of biological interest and checked for accuracy.

The system, which is updated monthly, currently contains sequences comprising 1.8 million nucleotides.

It was established in 1982 by NIGMS in cooperation with the NCI, NIAID, DRR and several other Federal agencies.

NIH scientists who wish to use GenBank™, may do so through the DECsystem-10 computer facility. For a description of the categories of data that are available, log on to DECsystem-10 and type GNBNK.NWS[2041, 3340,DOC].

Scientists who need project programmer and account numbers should call the DCRT Project Control Office at 496-6146. For instructions on using DECsystem-10, contact the DCRT Technical Information Office at 496-5431. For general information on GenBank™, call Dr. Christine K. Carrico at 496-7181. □

Anaerobic Bacteriology Workshop Scheduled for Sept. 20, 21

The American Type Culture Collection is offering a 2-day course on Clinical Anaerobic Bacteriology, Sept. 20 and 21. The workshop will focus on the most recent principles and methods of anaerobic bacteriology used in clinical laboratories.

Drs. Lillian V. Holdeman and W.E.C. Moore of Virginia Polytechnic Institute and State University will lead the lectures and hands-on exercises.

The workshop is intended for clinical bacteriologists. Attendence is limited to 40 and participants should have previous experience in a clinical bacteriology laboratory or involvement in pathogenic bacteriology.

For more information contact David Grounds, workshop coordinator, American Type Culture Collection, 12301 Parklawn Dr., Rockville, Md. 20852, or call (301) 881-2600. □

Ms. London Retires From CC After 20 Years in Same Job

There are few employees who have happily remained in the same position for 20 years. "I never seriously considered changing jobs," said Claire B. London, secretary in the CC's Social Work Department, who is retiring July 29. "I've always liked it here and, fortunately, have gotten along well with my supervisors," she said.

Ms. London

"Claire's devotion to her work has left a personal and lasting impression on hundreds of social workers and students and thousands of patients and their families," said Stan Kissel, chief of the CC's Social Work Department. "The quality of all our lives is a little better because she cared about all of us."

Before coming to the Social Work Department, Ms. London was a secretary in NCI for 2 years. She also worked for the Justice Department and the Federal Aviation Agency. "There's really never been any reason to look elsewhere since I came here," she said.

Though she thinks she will have a hard time adjusting to retirement, Ms. London is very enthusiastic about having the time to devote to her hobbies—ceramics and knitting. "The hardest thing will be not having my time structured. But I am looking forward to it." She doesn't have definite plans beyond that. "I just want to take it easy and enjoy my home and grandchildren," she said. □

Clarification

Phenylketonuria (PKU) is found in 1 of every 14,000 live births, not 1 in every 1,400 as was indicated in a story on PKU in July 5 issue of *The NIH Record.* □

It wasn't until quite late in life that I discovered how easy it is to say, "I don't know."—*Somerset Maugham* □

Renovations in Media and Glassware Branch Enlarge Inventory Space, Production Capacity

After 2 1/2 years of renovation, "We're back is business now," said George Gardner, chief of the media and glassware services branch, Division of Safety.

Their "business" includes sterilizing 4 1/2 million pieces of laboratory glassware, preparing 100,000 liters of biological media for growing bacteria and tissue cultures, and washing 250,000 animal cages and assorted equipment each year.

The main purpose of the renovation was to create inventory space for the branch. By keeping a supply of media and sterile glassware in huge moveable storage racks, the branch can decrease the time needed to fill a researcher's order. A request that used to take 2 weeks to a month to fill now takes only 24 to 48 hours. Emergency needs can be handled more quickly.

The renovations also upgraded the sterilizing equipment which will increase the branch's production capacity.

New ceiling panels were installed and other aesthetic changes made as well, making the "boiler plant conditions" of the Clinical Center basement "more like a laboratory," said Mr. Gardner.

In addition, the media section has been relocated to B2S239. The glassware section is still at B2N244 in the CC.

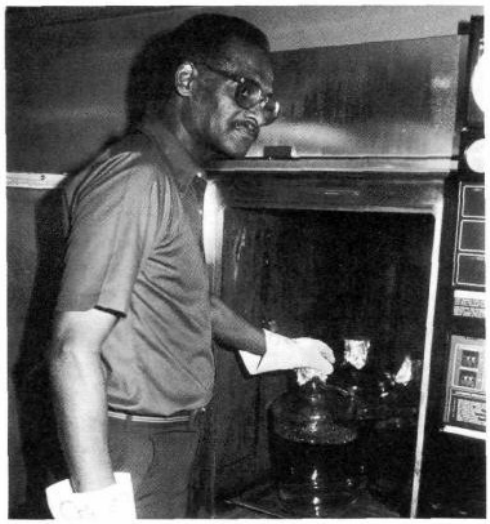
During the upgrading, the media and glassware services branch cut back production. "We had to encourage researchers to buy from commercial sources because we couldn't handle the demand, but now business is gradually beginning to pick up," said Mr. Gardner.

Mary Penn, a biological technician in the newly renovated glassware and media service branch, weighs an ingredient for the preparation of tissue culture media.

The branch does not try to compete with commercial sources, but it does offer a vital service to NIH researchers. Media section chief Robert Grubb emphasized the "custom-type preparation" available.

Customized preparations of media are time-consuming and costly for commercial houses, but at the NIH branch, a researcher pays the same fee for a special request as for commonly-used media. "We are here to cater to the customized preparations," said Mr. Gardner. The branch operates under the Service and Supply Fund.

Another advantage of the NIH media



Frank King removes heat-labile media from a new autoclave sterilizing machine. This medium will be poured into agar plates for NIH researchers to use.

service is the written record of preparation that accompanies each order. If a problem or question arises, a researcher can go directly to the NIH technician who prepared the medium to discuss possible errors.

To sterilize the media, one large and eight small new autoclave sterilizing machines were installed. These machines use steam under pressure and act "like giant pressure cookers," said Mr. Gardner. They can sterilize media at lower temperatures and in shorter time than dry heat sterilizers.

In the glassware section, five new dry heat sterilizing machines were installed. Huge racks of bottles, beakers and flasks can be rolled into the machines where they are sterilized for two hours (twice the required amount of time) at temperatures of 160 to 180 degrees centigrade.

After cooling, the glassware is inspected, wrapped, loaded in boxes and then sent on a programmable AMSCAR to the designated CC loading station.

Before the sterilization process, however, the glassware is sorted and then washed in the renovated tunnel washer which "looks like a bottling plant when it gets going," said Mr. Gardner.

Roy Frazier, chief of the glassware section, urges NIH researchers to return the glassware after use. The items are meant to be rented and returned, not thrown away or kept to stock laboratories. "If researchers make more of an effort to return the glassware, it will result in a better rental price," said Mr. Gardner.

NIH researchers can request sterilized glassware or cage-washing by phoning 496-4595. Requests for biological media must be written, using NIH form 599.

The media and glassware services branch want researchers to take advantage of their services. Now that the renovation debris has been cleared and relocations are over, the media technicians and sterilizing machines are ready to roll full steam ahead.

—Jane White □

CANCER (Continued from Page 1)

tiums of physicians, clinics or hospitals. NCI funding goes to each local program through a community hospital or health care organization associated with that program, and treatment of patients is directed by the local physicians.

Twelve successful applications were from community hospitals where NCI has been supporting Community Hospital Oncology Programs.

CHOP's objective has been to improve the scope and quality of care for cancer patients through the development and implementation of patient management guidelines.

CHOP institutions approved for community clinical oncology program awards are in Binghamton and Brooklyn, N.Y.; Hackensack, N.J.; Cincinnati and Toledo, Ohio; Marshfield, Wisc.; Wichita, Kan.; Roanoke, Va.; Kalamazoo, Mich; Evansville, Ind; St. Louis Park, Minn.; and Los Angeles, Calif.

The 47 other local programs are being developed in a variety of communities. These include:

- ***Small cities*** such as Sioux Falls, S. Dak. (Sioux Falls Community Cancer Consortium); Cooperstown, N.Y. (Mary Imogene Bassett Hospital); Daytona Beach, Fla. (Halifax Hospital Medical Center); Billings, Mont. (Interhospital Oncology Project);
- ***Suburban areas*** such as Evanston, Ill. (Evanston Hospital); Summit, N. J. (Overlook Hospital); Manhasset (North Shore University Hospital) and Mineola (Nassau Hospital), Long Island, N.Y.;
- ***Medium-sized cities*** including Grand Rapids (Butterworth Hospital) and Kalamazoo (Borgess Medical Center), Mich.; Syracuse, N.Y. (St. Joseph's Hospital Health Center); Duluth, Minn. (Duluth Clinic, Ltd.); Pittsburgh, Pa. (Allegheny Singer Research Corporation); Tacoma, Wash. (Consolidated Hospitals); Des Moines, Iowa. (Des Moines General Hospital); Roanoke, Va. (Roanoke Hospital Association); Augusta, Ga. (University Hospital);
- **Certain areas of *large cities***—Newark, N.J. (Beth Israel Medical Center); Chicago, Ill. (Saint Mary of Nazareth Hospital Center); Denver, Colo. (Presbyterian/St. Luke's Medical Center); New Orleans, La. (Alton Oschner Medical Foundation); Boston, Mass. (New England Deaconess Hospital); Greater Los Angeles (Hospital of the Good Samaritan) and Central Los Angeles (St. Vincent Medical Center), Calif. □

NIGMS Conference Planned On Minority Research Careers

A conference on special training opportunities in biomedical research for students and faculty at institutions with Minority Access to Research Career (MARC) programs will be held Oct. 12-14, in Washington, D.C. under the sponsorship of the National Institute of General Medical Sciences.

Besides graduate training opportunities, the Third MARC Scholars Conference and Program Directors Meeting will cover preparation of effective training proposals, new summer research activities for MARC students, and emerging trends in basic research.

Faculty members of institutions which offer summer and graduate programs for MARC trainees as well as representatives of participating minority institutions will make presentations at the conference.

Attendees will have a chance to meet with individuals from their own geographic region to share common concerns and help create a network of resources and programs. For registration details and further information, contact: Dolores L. Lowery, MARC Program, National Institute of General Medical Sciences, Westwood Bldg., Rm. 9A16, Bethesda, MD 20205. □

NHLBI Joins With Public and Private Groups To Promote Good Health and Disease Prevention

Nine million copies are being circulated to Army personnel and their families worldwide. Every employee in a Kansas manufacturing company will be getting copies with their paychecks over the coming year. Exxon Chemical Americas headquarters is distributing new issues to employees every 2 weeks and is serving cafeteria items keyed to each issue.

These organizations are using the *Eaters' Almanacs,* a series of 26 pamphlets which form the core of a joint education demonstration program between the National Heart, Lung, and Blood Institute and Giant Food Inc.

The users are investing their own resources to reprint and distribute the almanacs which provide practical information about heart health and diets.

This commitment of outside resources to reproduce or adapt government materials is the direct result of NHLBI's policy of active collaboration with organizations in the private and public sectors.

NHLBI is working with a broad cross section of organizations to multiply its resources and extend the reach of its disease prevention and health promotion efforts. For example:

- AT&T Longlines in Virginia, the Connecticut and Maryland Departments of Health, the Sentinel/Star newspapers in Orlando, Fla., and the U.S. Navy have all invested staff time, facilities, and funds to reprint and distribute the NHLBI booklet, *Exercise and Your Heart*, to their employees or communities.
- Pfizer Laboratories; Searle Pharmaceuticals; Merck Sharp and Dohme, and Upjohn Pharmaceuticals reprinted thousands of high blood pressure pamphlets and posters for NHLBI distribution to community programs throughout the country.
- National Life Insurance Company reprinted 1 million copies of the pamphlet *High Blood Pressure: Facts and Fiction* to send to their clients.

Collaborators have even included organizations from abroad. The Universidad Nacional de La Plata translated and reprinted a series of NHLBI therapeutic diet booklets in Spanish for hospital patients in Argentina.

This republishing of NHLBI materials is a "leveraging" approach used by the Institute to multiply the available resources for education and intervention efforts.

For example, NHLBI has collaborated with outside groups to establish dissemination networks to special audiences. The Association for the Advancement of Health Education and State Directors of Health, Physical Education, and Recreation redistributed 67,000 copies of the exercise booklet to school health education contacts nationwide in cooperation with the Institute. All redistribution costs were supported by each state.

A wide range of organizations from industry, civic groups, professional associations, and other government agencies—from the Army with approximately 700,000 enlisted personnel to Balderson, Inc., a small tractor parts manufacturer with 150 employees—have joined efforts with the Institute.

One particular area of collaboration has been the insurance industry. Working with Traveler's Insurance, the Metropolitan Life Insurance Company, and Blue Cross/Blue Shield, NHLBI has helped develop cardiovascular risk factor reduction programs which have been promoted among group subscribers of these companies.

In addition, the medical directors of life insurance companies and NHLBI jointly developed a report on the underwriting significance of high blood pressure which insurers are now using to consider premium reductions for controlled hypertensives.

In other efforts, the Institute acts as a catalyst in establishing or improving risk reduction programs. Several companies have initiated or improved health programs for their employees. For example, General Motors began a high blood pressure control program which now reaches 750,000 employees worldwide.

Together with the American Occupational Medical Association and the American Association for Occupational Health Nurses, NHLBI developed seminars on cardiovascular health at the worksite to assist these groups in initiating projects within their own companies.

Technical assistance and advice to ongoing programs such as those at Coca Cola, Boeing Aircraft, Campbell Soups, Ingersall Rand, and Johnson and Johnson are also provided by the Institute.

Voluntary organizations represent another group where leveraging can take place. The American Heart Association recently implemented a nationwide nutrition education program based on a NHLBI demonstration project. □

NIGMS Grantee Receives Clinical Pharmacology Prize

Dr. L. Jackson Roberts II, associate professor of pharmacology and medicine at Vanderbilt University, has been awarded the 1983 Clinical Pharmacology Award by the Burroughs Wellcome Fund.

Dr. Roberts is an investigator at the Clinical Pharmacology Center at Vanderbilt University which is supported by the National Institute of General Medical Sciences.

The 5-year, $200,000 award was made to Vanderbilt on Dr. Roberts' behalf to help support his research in arachidonic fatty acid metabolism.

He is the 36th Burroughs Wellcome scholar in clinical pharmacology and the third Vanderbilt scientist to be honored. He received his M.D. from the University of Iowa School of Medicine in 1969 and has been at Vanderbilt since 1975.

The Burroughs Wellcome Fund, located in Research Triangle Park, N.C., derives its financial base from the Burroughs Wellcome Company, a pharmaceutical manufacturer. The fund has made awards in clinical pharmacology since 1959. □

Rosemary Tobin Retires After 35 Years in PHS

Rosemary Tobin, deputy director of the NIH Executive Secretariat, Office of the Director, retired recently after 35 years in the Public Health Service.

A retirement party was held in Ms. Tobin's honor during which she received a specially made gold medallion of the PHS emblem to honor her 35 years of Federal service.

Originally from Memphis, Tenn., Ms. Tobin joined the PHS in 1948 in the Office of the Secretary which is now the Assistant Secretary for Health's office. She worked there while the Department of Health, Education, and Welfare was established.

In 1969, she came to NIH as administrative officer for the Office of Communications, OD. In 1971, she helped organize and set up the NIH Executive Secretariat's office in the Shannon Bldg.

Ms. Tobin, retiring as deputy director of the NIH Executive Secretariat, cuts the cake at her retirement party.

"The NIH Executive Secretariat provides a staff function for the NIH Director and acts as a liaison between the PHS Assistant Secretary for Health and the HHS Secretary," Ms. Tobin said.

The Executive Secretariat's office staff has responsibility for Congressional and public correspondence received in the immediate Office of the Director, NIH. This includes all Congressional mail received at NIH, mail addressed to the NIH Director and NIH Institute Directors, all correspondence referred to NIH by the Assistant Secretary for Health, the HHS Secretary, and by the White House.

The office staff has the delegated authority to approve or reject, reassign, write or rewrite any correspondence prepared for the signature of the NIH Director, the Assistant Secretary for Health, the HHS Secretary, or the President. □

NIH Singers Seek New Members

The NIH Singers are now accepting new members in preparation for their next season. Many exciting events are being planned including a joint concert with the NIH Chamber Orchestra. Contact Tony DeMarinis, 496-6442, to obtain more information or arrange an audition. □

Five New Members Appointed to NHLBI Advisory Council

Five new members have been appointed to the National Heart, Lung, and Blood Advisory Council of the National Heart, Lung, and Blood Institute.

The new members are Catherine B. Bauer, health planner, Pennsylvania Department of Health, St. Mary's , Pa.; Suzanne P. Cummings, long-time leader in civic and community affairs, Los Angeles, Calif.; Dr. Michael E. DeBakey, Chancellor, Baylor College of Medicine, Houston, Tex.; Dr. Matthew B. Divertie, professor of medicine, Mayo Medical School, Rochester, Minn., and Dr. Sanford A. Mullen, president and medical director, Jacksonville Blood Bank, Jacksonville, Fla.

Reviews Applications

The Council, which meets 4 times a year, is composed of physicians, scientists and persons prominent in public affairs. Its members review applications for research and training support, report to the President and Congress on the current status of the Institute programs, and make recommendations concerning future program activities.

Mrs. Bauer, in addition to her present position with the Pennsylvania Department of Health, is the current secretary and former first woman president of the Pennsylvania Health Council. She is a former president of the American Lung Association of Pennsylvania and represented the state on the national board of the ALA for three terms.

Mrs. Bauer has also served as a member of the National Eye Institute Advisory Council and the NIH Advisory Committee on Clinical Studies Conducted on Diabetic Retinopathy.

Mrs. Cummings served for 25 years as executive vice president of the Los Angeles Jewish Home for the Aged; executive vice president of the Women's Guild, Cedars-Sinai Medical Center; a member of the board of directors of the L.A. chapter of the American Red Cross; and initiated the Earthquake Awareness Program in L.A. She established the Theodore E. Cummings Collection of Hebraica at the University of California at Los Angeles.

Mrs. Cummings was a cofounder and an executive officer of Food Giant, Inc., one of the largest retail chain complexes in the western United States, and is chairman of the board of Harbor Lawn, Inc., as well as consultant and advisor to numerous business entities.

Dr. DeBakey, world-renowned cardiovascular surgeon, is Chancellor, Baylor College of Medicine; director, National Heart and Blood Vessel Research and Demonstration Center at Baylor; surgeon-in-chief, Ben Taub General Hospital; and senior attending surgeon, Methodist Hospital, and consultant in surgery, Veterans Administration Hospital, Houston. Dr. DeBakey has served at the NIH and NHLBI in numerous capacities, including previous service on the Council.

Born in Lake Charles, La., Dr. DeBakey received his M.D. from Tulane University where he also received his M.S. and LL.D. degrees. During World War II, Dr. DeBakey served in the office of the Army Surgeon General and in 1946 was awarded the Legion of Merit.

Dr. DeBakey is editor of *General Surgery* and is on the editoral staff of several medical journals.

Born in Paisley, Scotland, Dr. Divertie received his M.B., Ch.B. in 1947 and his M.D. in 1957 from the University of Glasgow, Scotland. He served in the British Royal Army Medical Corps and conducted a private practice for three years before traveling to the United States. In addition to his present position as professor of medicine, he is a consultant to the division of thoracic diseases, and to the section of respiratory intensive care at Mayo Clinic.

Dr. Divertie has served the American College of Chest Physicians in various capacities and in 1976 became president of that association. He served on the scientific program committee of the XII and XIII International Congresses on Diseases of the Chest and was cochairman, international scientific program committee of the XIV World Congress on Diseases of the Chest.

He has served as a member of the editorial board of *Chest* and the *Mayo Clinic Proceedings,* and on the review boards for *Annals of Internal Medicine, Chest, American Review of Respiratory Disease,* and the *Journal of Laboratory and Clinical Medicine.*

Dr. Mullen, a pathologist who practices in Jacksonville, is immediate past president of the Florida Medical Association and is past president of the Duval County Medical Society, Florida Society of Pathologists, and Florida Association of Blood Banks. He is past governor of the College of American Pathologists and a founding director of the American Blood Commission.

He is also cochief of pathology, University Hospital of Jacksonville and clinical professor of pathology, University of Florida College of Medicine. He is president of the North Florida Medical Legal Foundation and president of the Medical Technology Foundation of Northeast Florida.

Active in many community affairs, Dr. Mullen is a past president of the Arthritis Foundation (Florida chapter) and has been active in the Jacksonville chapters of the American Cancer Society, Salvation Army, Kidney Foundation, and American Red Cross. □

Secretary Heckler to Address NIH Employees on July 19

Margaret M. Heckler, Secretary of Health and Human Services, will address NIH employees in the Masur Auditorium at 2 p.m., Tuesday, July 19. Tickets for admission may be obtained from offices of each BID Director and the National Library of Medicine. The address is part of an all-day "orientation" visit to the NIH by the Secretary. □

Everybody is ignorant, only on different subjects.—*Will Rogers* □

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