Mixed Analgesics Can Cause Kidney Disease; Should Be Withdrawn, Consensus Panel Says

"Serious consideration" should be given to the withdrawal of products containing combinations of some common analgesics (pain relievers) from over-the-counter use in the United States, according to an NIH Consensus Development Panel. The products involved are those containing mixtures of aspirin, acetaminophen, salicylamide, or salts of salicylates.

Large doses of these antipyretic (anti-fever) analgesics taken in combination over a long period cause a specific form of kidney disease (analgesic nephropathy) and can lead to chronic kidney failure, the panel concluded. An example of heavy use would be 10 or more tablets per day for 3 years or longer.

The panel estimated the cost of treatment of end-stage renal disease caused by this disorder to be "at least $40 million in the U.S. each year."

The panel also said, however, "Preparations containing single antipyretic analgesics such as aspirin or acetaminophen should remain available as over-the-counter medications since there is no evidence that their occasional use is related to analgesic nephropathy. The risk from prolonged use of single-ingredient analgesics appears to be small."

The conference, held February 27-29, was sponsored by the National Institute of Arthritis, and the result of the conference was a statement that was read on the final day, and a press conference followed at 11:30 a.m.

Osteoporosis: Causes, Prevention and Treatment Will Be Reviewed At April Consensus Conference

Osteoporosis will be the subject of a Consensus Development Conference at NIH on Apr. 2-4.

The meeting, which is open to the public, will be held in the Clinical Center's Sauer Auditorium from 8:30 a.m. to 5:30 p.m., Apr. 2; 8:30 a.m. to noon, Apr. 3; and 8:30 a.m. to 11:30 a.m., Apr. 4. The consensus statement will be read on the final day, and a press conference will follow at 11:30 a.m.

Osteoporosis is a condition in which bone density decreases, causing the bones to be more susceptible to fracture. A fall, blow, or lifting action, which would not bruise or strain the average person, can easily cause one or more bones to break in a person with severe osteoporosis.

The disorder is the leading underlying cause of bone fractures in postmenopausal women and older persons in general.

This consensus conference is being held to address specific issues, such as calcium intake, vitamin D, hormones and exercise that are currently considered to be important in the prevention and treatment of osteoporosis.

Dr. William A. Peck, chief, department of medicine, Jewish Hospital of St. Louis, Mo., and president, American Society of Bone and Mineral Research, will be the chairman of the consensus panel.

Featured Questions

The conference will discuss and develop responses to the following questions:

(See OSTEOPOROSIS, Page 8)
The NIH Record

Published biweekly at Bethesda, Md., by the Editorial Operations Branch, Division of Public Information, for the information of employees of the National Institutes of Health, Department of Health and Human Services, and circulated by request to writers and to researchers in biomedical and related fields. The content is nonattributable without permission. Pictures may be available on request.

The NIH Record reserves the right to make corrections, changes, or deletions in submitted copy in conformity with the policies of the paper and NIH.

NIH Record Office
Bldg. 31, Room 20-20, Phone 496-2125

Editor
Heizschel Cribb

Staff Writers
Joyce P. McCarthy
Annie Barbel

Staff Correspondents
CC: Richard McManus; DCRT, William Hall, DPM, Judy Feuchter; DRG, Sue Meadows; DRR, Barbara Weldon, DRS, Jim Doherty, FCIC: Susan P. Fark, NCJ: Patricia A. Newman, NEI, Marsha Corbett; NIHBI, Bill Sanders; NIA, Esther Solomon, NIAID, Jeanne Wintzick; NIAIDK, Barbara Weldon; NICHIO, James Maday; NIDR, Jody Dove, NIEHS, Hugh J. Lee, NIGMS, Wanda Wardell; NIH, Harry Bell; NIMH, Carol Howan, NLM, Roger F. Gilkeson.

Training Tips

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

**Executive, Management and Supervisory**
- Course: Starts Deadline
  - Capitol Hill Workshop: 3/29 3/13
  - Effective Supervision: 4/2 3/16
  - Communication Issues: 3/31 3/23
  - Manage Your Meetings: 5/4 4/19
  - The Judiciary, Media, and Interest Groups: Influencing Public Policy: 4/26 4/10
  - Behavioral Strategies for Supervisors and Managers: 5/23 5/7

**Technical**
- Effective English Workshop: 4/5 3/16
- Medical Terminology II: 4/5 3/16
- Labor Relations for Professionals: 4/10 3/23
- Letterwriting for Secretaries: 5/16 4/25
- Proofreading: 5/30 5/18
- Principles of Editing: 6/5 5/17

**Administrative Systems**
- DELPRO (Delegated Procurement): 4/2 3/19
- Stock Requisition: 5/11 4/27

*Course ends June 25.

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

Small Business Conference

The Public Health Service will conduct a 1-day Small & Disadvantaged Business Conference, Apr. 4, at the Uniformed University of the Health Sciences, Bethesda Naval Medical Center. Representatives of disadvantaged businesses interested in attending can contact Willie T. Gibson, 443-6631 or Nat Lindsey, 496-4637.

**Selected NIH Posters On Sale**

Selected posters announcing NIH conferences and other events are now available for sale in the FAES Bookstore on the B1 level of the Clinical Center (Bldg. 10). The first poster offered is for the recent NIH Consensus Development Conference on Autoimmune Associated Kidney Disease.

The Federation for Advanced Education in the Sciences is providing the posters at a nominal charge as a service to the NIH community. Prices will vary according to production costs, but will be under $10.

Because the posters are prepared by the Medical Arts and Photography Branch, Division of Research Services, are of high quality, NIH employees have often asked about obtaining copies.

Posters placed around campus also sometimes mysteriously disappear before their scheduled removal.

The idea of making the posters available for sale originated with George Nelson, a noted industrial designer who was serving on an ad hoc committee of nongovernmental experts reviewing DRS branch operations.

**Open House for Bikers**

The R&W Bicycle Commuter Club will host a wine and cheese party for members and nonmembers on Tuesday, Mar. 27, from 5:30 to 7:30 p.m. in the FAES house.

Films on touring, racing, commuting, and repair will be shown. Harley Sheffield will present a slide talk on his bike tour of Germany and Keith Bate will show slides on a 1983 Tour of America.

A representative from the Bicycle Place will host a wine and cheese party for members and nonmembers on Tuesday, Mar. 27, from 5:30 to 7:30 p.m. in the FAES house.

Films on touring, racing, commuting, and repair will be shown. Harley Sheffield will present a slide talk on his bike tour of Germany and Keith Bate will show slides on a 1983 Tour of America.

A representative from the Bicycle Place will be present to answer questions. Free literature will be available and there will be a drawing for a door prize.

Admission will be $1 to nonmembers; no charge to members. Membership cards will be available for $2.

**Shape Up With Exercise at NIH Fitness Center**

Shape up, firm up and trim down in exercise classes at the NIH Fitness Center (T-39). Spring classes begin Monday, Apr. 2 and will run for 12 weeks through June 23, with a makeup week, June 25-30.

Register for 1, 2 or 3 or more classes per week and pay only $2.50 per class ($2 for NIHFC members). Or you may drop in to any class and pay $3 per class. All classes are coed and open to all NIH employees and their spouses. Any class can be used for a make-up or a drop-in.

**Programs Noted**

The following programs are offered:

Quik Fit (Stretching, strengthening and cardiovascular exercises) Mon.-Wed., Fri., noon to 12:45 p.m.; 5:15-6 p.m. and 6:05 to 6:50 p.m.

Alive! (slimnastics, calisthenics and ballet) Tues. and Thurs., 5:6-7 p.m. and Sat. 9:30-10:30 a.m.

Aerobic Action (Choreographed dancing, strengthening and stretching) Mon. and Wed., 4:15-5:15 p.m.

Register at the R&W Activities Desk, Bldg. 31, B1W30, 496-4600 or at the NIH Fitness Center, T39, 496-TRIM.

**Scientific Fraud Will Be Examined at STEP Forum**

A STEP forum entitled "Scientific Fraud and Abuse: A Potpourri of Views," will be held on Thursday, Mar. 29, from 1:30 to 4 p.m. in Wilson Hall, Bldg. 1.

The forum will examine the issue of scientific fraud from historical perspectives as well as the viewpoint of the media, the university, NIH, and the investigator.

Featured speakers will be: Dr. Judith P. Swazez, College of the Atlantic; Barbara J. Pullion, Science magazine; Dr. Robert M. Rosenzweig, Association of American Universities; Dr. Lazaro G. Erschen, University of Colorado; and Mary L. Miers, NIH.

The forum is open to all NIH staff.
Dr. Ernst Freese Receives German Humboldt Award

Dr. Ernst Freese, chief of the Laboratory of Molecular Biology, National Institute of Neurological and Communicative Disorders and Stroke, has received a Senior U.S. Scientist Award from the Alexander von Humboldt Foundation of the Federal Republic of Germany. This award honors U.S. scientists who have gained an international reputation and is intended to promote the interchange of ideas between German and American investigators and research institutions.

Dr. Freese, whose research focuses on the molecular mechanisms of mutations, was honored for his discovery of two types of point mutations. He calls these mutations, which alter DNA by changing just one of its base pairs, “transitions” and “transversions.” Dr. Freese explained that a transition is caused by changing a purine base into another purine base or a pyrimidine base into another pyrimidine. A transversion, on the other hand, is caused by changing a purine into a pyrimidine or vice versa, Dr. Freese said.

Dr. Freese also has studied more drastic types of DNA alterations—those causing chromosomal breakage. He was one of the first scientists to call attention to the potential carcinogenic nature of radical-containing compounds and those containing certain chemical groups, such as epoxides.

Dr. Freese’s work has included studies of lipophilic acids, a class of compounds that includes most antimicrobial food additives. He discovered that these additives inhibit bacterial and fungal growth by preventing an organism’s uptake of amino acids.

Dr. Freese is currently investigating microbes for the mechanisms controlling the stages of their life cycles. He and his colleagues have discovered that a decrease of guanosine triphosphate (GTP) is the particular signal that causes bacteria to form spores and yeast to begin meiosis.

This work has potential applications for the improved production of antibiotics and of bacterial spores that kill agricultural pests.

The investigators expect that GTP similarly controls cell differentiation of other organisms.

As a recipient of the Senior U.S. Scientist Award, Dr. Freese has been invited to work in the Federal Republic of Germany for extended periods, totalling 12 months, and will receive up to 75,000 Deutsch marks (approximately $28,000) to cover living expenses.

As MAPB’s sole cinematographer for a number of years, Mr. Mortillaro provided motion picture coverage of progress in current medical research programs, filming surgical procedures, animal experiments, instrumentation techniques, laboratory procedures, and other activities of NIH intramural investigators.

Mr. Mortillaro began work in MAPB in 1961. Following an introductory period doing routine laboratory assignments, he began specialized work with biology X-ray film, oscillographs, electronmicroscope, and negatives produced in laboratories.

In 1963 he began his motion picture work, starting with training at a motion picture studio in Philadelphia and additional special training in animation.

He has been making his very specialized contribution to NIH intramural research ever since, performing every aspect of motion picture work including filming, editing, directing, animation, sound recording, and microcinematography.

Mr. Mortillaro followed his initial training with courses in motion picture production and television production at the Maryland Institute College of Art, Baltimore, and studied script writing at American University under Larry McMurtry, novelist and screenwriter, who wrote the screenplays for Terms of Endearment and The Last Picture Show, based on his own novels.

“Paul is scrupulously precise in his work, demanding perfection of himself,” said co-worker Al Laang, an artist in MAPB’s Graphics Unit. “But he is informative and easy to work with, always ready to stop and help a collaborating artist. I was in awe of his skills.”

Mr. Mortillaro still lives in Baltimore; he has commuted to NIH daily for 22 years. His retirement plans include a move to Florida.

Film on Cholesterol Control To Be Shown March 20-30

Dr. Basil Rifkind of NHLBI—in a specially prepared videotape for NIH employees—will discuss a recent trial study conducted by NHLBI which shows new evidence that reducing blood cholesterol in men with high cholesterol will reduce heart attack risk.

These tapes will show ways to control weight and reduce cholesterol in your diet.

Dates and locations are:

Tuesday, Mar. 20, 11:30 a.m., Federal Bldg., Rm. 1019, Friday, Mar. 23, 11:30 a.m., Bldg. 1, Wilson Hall; Monday, Mar. 26, 11:30 a.m., Bldg. 10, ACRF Auditorium; Wednesday, Mar. 28, 12:15 p.m., Bldg. 31, ACRF Auditorium; Tuesday, Mar. 27, 11:30 a.m., Bldg. 31, Conf. Rm. 110; Wednesday, Mar. 28, 11:30 a.m., Bldg. 38A, Rm. B1N30B; Thursday, Mar. 29, 11:30 a.m., Blair Bldg., Rm. 110 and Friday, Mar. 30, 11:30 a.m., Westwood Bldg., Conf. Rm. D.
NCI's Dr. Cecil Fox Will Lecture on History of Microscopes
At Smithsonian Exhibit Based on His Research

NCI's Dr. Cecil Fox has worked with staff of the Smithsonian Institution's National Museum of Natural History to prepare an exhibit called "Exploring Microspace." The exhibit opens Mar. 16 in the museum's Evans Gallery. It shows panoramically over time how microscopes have been used.

Dr. Fox says he became interested in the history of the light microscope "...because it was one of the first instruments used to explore 'second sight' the secrets of nature. Curiously, unlike the telescope, which was used extensively by scientists soon after its invention, the microscope languished for two hundred years before the great scientists of the nineteenth century used them to study the cellular nature of disease," says Dr. Fox. "I believe this occurred because scientists of that day had not yet learned how to prepare materials for viewing. Their slides and cover glasses were not sturdy; they had trouble making permanent specimen preparations;..."

The exhibit features films, demonstration of an operating scanning electron microscope and a state-of-the-art, video-equipped light microscope, and a display on the evolution of light microscopes from the one invented by Robert Hooke in 1675 (made by Christopher Cock) to those used in research laboratories today.

The NIH Record

March 13, 1984

Page 4

The NIH Record

March 13, 1984

Page 4
Dr. J. Michael Bishop, Oncogenes Researcher, Will Deliver The NIH Lecture, March 21

Dr. J. Michael Bishop, director and professor, department of microbiology and immunology, University of California, San Francisco, will deliver The NIH Lecture "Cancer Genes Come of Age." The lecture, sponsored by the National Institute of Allergy and Infectious Diseases, will be held on Wednesday, Mar. 21, at 8:15 p.m. in the Clinical Center's Masur Auditorium.

The NIH Lectures were established in 1953 to recognize outstanding scientific accomplishment and to contribute to the vital interchange of scientific information. The lecture-ship is awarded by the NIH Director after recommendations by the Institute scientific directors.

Dr. Bishop began his research career studying how the genetic material of viruses is replicated and expressed. He then turned to investigation of a possible relationship between viruses and the development of cancer, concentrating on a family of viruses called "RNA tumor viruses," or "retroviruses."

These viruses are probably the most prevalent viral cause of tumors in nature, and early studies suggest some of these viruses might possess genes-called oncogenes-whose actions induce the development of tumors.

Dr. Bishop and his colleagues have made discoveries that have improved our understanding of the origins of cancer. They found that in retroviruses the oncogenes are not merely outlaws of nature, but copies of genes found in the cells of all normal vertebrate and invertebrate animals.

This discovery raised the possibility that human beings carry the seeds of cancer in their own genetic dowry, in the form of genes that are essential to normal growth and development. These same genes apparently can become cancer genes when unleashed from their normal controls or damaged in other ways.

Dr. Bishop received his M.D. degree from Harvard University in 1962. Before joining the faculty of the University of California in 1968, Dr. Bishop completed 2 years training in internal medicine at the Massachusetts General Hospital, and a Research Associates Program in the Laboratory of Biology of Viruses at NIAID.

Dr. Bishop has received numerous awards, including the American Association of Medical Colleges Award for Distinguished Research; the Albert Lasker Award for Basic Medical Research; the Passano Foundation Award; the Warren Triennial Prize from the Massachusetts General Hospital, and election to the National Academy of Sciences.

He holds several advisory positions, serves on the editorial boards of three publications, and is a member of many professional associations.

Dr. Bishop

Facts About Premature Birth, a 10-page brochure, is now available from NICHD. The brochure explains maternal conditions, including diabetes, malnutrition, and alcohol and cigarette use, that may cause premature birth.

It discusses respiratory distress, hyperbilirubinemia, hypoglycemia and other problems premature infants may develop, and describes some of the technological advances made in the past two decades in the treatment of preterm babies.

The brochure highlights future areas of research by the Institute, and lists other sources of information available in the United States to parents of premature infants.

Facts About Anorexia Nervosa discusses the symptoms, causes and treatment of anorexia nervosa. Although the symptoms can be corrected if the patient is diagnosed and treated in time, about 10 to 15 percent of anorexia nervosa patients die, usually after losing at least half of their normal body weight.

The brochure also describes current research efforts in anorexia nervosa and lists self-help organizations for patients and their families.

Facts About Cesarean Childbirth is based on the NIH Consensus Development Conference Task Force Report on Cesarean Childbirth. Included are brief discussions of cesarean delivery, types of incisions, current thinking about repeat cesarean delivery, and the medical problems which may lead to this method of childbirth.

Risks to both mother and infant also are discussed as well as the psychological effects of cesarean childbirth.

Facts About Dysmenorrhea and Premenstrual Syndrome provides information on the menstrual cycle and two associated disorders. It reviews the causes of dysmenorrhea (painful menstruation) and premenstrual syndrome and current treatment recommendations.

In addition, the booklet reviews research programs about PMS and lists sources of further information.

R&W Goes to Atlantic City, Mar. 16

R&W will once again sponsor its ever-popular Atlantic City trip on Friday, Mar. 16, to the Playboy Club. The fee of $15 per person includes round trip transportation, $10 rebate, and a prime rib dinner. Buses will leave NIH, Bldg. 31C at 8 a.m. and leave for the return trip at approximately 5 p.m.

Payment in full is due at the time of booking with no refunds. Sign up now at the R&W Activities Desk, Bldg. 31, Rm. B1W30.

There is a moral sense and there is an immoral sense. History shows us that the moral sense enables us to perceive morality and how to avoid it, and that the immoral sense enables us to perceive immorality and how to enjoy it.

—Mark Twain
Dr. T. Konishi, NIEHS Researcher, Receives International Acoustics Award for His Studies

Dr. Teruzo Konishi, a researcher at the National Institute of Environmental Health Sciences, has been recognized recently by two separate scientific societies for his research accomplishments.

He has been named a Fellow of the Acoustical Society of America, and also given the Award of Merit by the Association for Research in Otolaryngology (the study of the organs of hearing and speech). He was the guest of honor at the February meeting of the ARO in St. Petersburg Beach, Fla.

Dr. Konishi, who works in the NIEHS Laboratory of Behavioral and Neurological Toxicology, is an internationally recognized investigator on the physiological and biophysical functions of the inner ear and the effects of environmental factors such as noise and toxic drugs on hearing.

Fellows of the Acoustical Society of America are elected by the society's executive council in recognition of conspicuous service and notable contributions to the advancement of knowledge in the field of acoustics.

The society has an international membership of more than 5,000 professionals in research and applied acoustical technology.

Dr. Konishi has been a continuing contributor of research articles to The Journal of the Acoustical Society of America.

The Association for Research in Otolaryngology also has an international membership. Founded in 1978, the association selects one researcher each year to receive The Award of Merit for scientific investigations.

As the recipient of that award, Dr. Konishi will be honored by both an association and a president's reception. Until now, those receiving the award have held either the M.D., or a research degree. Dr. Konishi is the first to hold both degrees, conferred by Kyoto Prefectural Medical College in Kyoto, Japan.

Dr. Konishi joined the National Institute of Environmental Health Sciences in 1973 after serving academic appointments at the University of Florida, the University of Chicago, and the Kyoto Prefectural Medical College. The NIEHS, which this year celebrates its 15th anniversary as one of the National Institutes of Health, is the principal Federal agency for basic biomedical research on the effects of chemical, physical, and biological environmental agents on health.

NIGMS Grantee Receives Pharmacology Award

Dr. Henry R. Bourne, NIGMS grantee, received the Rawls-Palmer Award at the annual meeting of the American Society for Clinical Pharmacology and Therapeutics on Mar. 14 in Atlanta.

The Rawls-Palmer Award is given each year to a clinical pharmacologist for significant contributions to drug investigation which apply the efforts of modern drug research to the care of patients.

The recipient of the prize delivers a presentation at the plenary session of the society's annual meeting, and receives a $500 honorarium with a plaque.

Dr. Bourne's talk was on genetic disorders of adenylate cyclase in yeast, mouse and man.

Dr. Bourne is a professor of medicine and pharmacology, and chairman of the department of pharmacology at the University of California, San Francisco (UCSF). He received an A.B. from Harvard University and an M.D. from Johns Hopkins University.

Following an internship in internal medicine, Dr. Bourne was an NIGMS Pharmacology Research Associate Training Program fellow in the Clinical Pharmacology Laboratory of the (then) National Heart Institute.

Dr. Bourne currently has several grants from NIGMS relating to somatic cell genetic analysis of adenylate cyclase, receptor cytoskeleton coupling, drug action and pharmacokinetics. He has developed a series of mouse cell lines having defects in one or more of the components necessary for the intracellular signal indicating that a hormone has bound to its receptor.

He has found that the defect present in one of these cell lines—the absence of a protein that initiates the cell's response to an external stimulus—is the same as the defect in cells from patients with a hereditary endocrine disorder leading to a severe decrease in blood calcium. This is a clear example of a direct link between a receptor disorder and a specific disease, and it points the way to possible therapeutic interventions for this and many other genetic diseases.

Dr. Walter E. Stolz Named NIADDK Extramural Chief

Dr. Walter E. Stolz has been appointed director of the Division of Extramural Activities and associate director for Extramural Activities, NIADDK. His appointment was announced recently by Dr. Lester B. Salans, Institute Director.

The functions of the Division of Extramural Activities include advising the Institute Director concerning extramural program policies related to research grants, contracts and training; providing grant and contract management and processing services; maintaining a system for operational control of funds for budgets of individual programs within the extramural divisions; and providing, scientific merit review of applications for special grant programs and research contract proposals.

Dr. Stolz received his B.S., M.S. and Ph.D. from the University of Wisconsin, Madison. He did postdoctoral work at Harvard University in psycholinguistics under a postdoctoral fellowship from the National Science Foundation.

Dr. Walter E. Stolz Named NIADDK Extramural Chief

After he left Harvard in 1965, Dr. Stolz taught in the psychology department of the University of Texas, Austin, until 1971. From 1969 to 1971 he was also a research associate at the Texas Research Institute for Mental Health, Houston. From 1971 to 1975, at Earlham College, Richmond, Ind., he served as assistant professor, associate professor, and chairman of the department of psychology.

He also served for several years as a reviewer of grant and contract proposals for the National Science Foundation, the U.S. Office of Education, and the Exxon Education Foundation.

Dr. Stolz, who joined NIADDK in 1977, has spent most of his time as a health scientist administrator with the Division of Diabetes, Endocrinology and Metabolic Diseases, serving as acting deputy director from 1981 until his recent appointment as division director, DEA.

He is a member of the American Psychological Association and of the scientific honorary society, Sigma Xi and is a 1983 recipient of the NIH Merit Award.
Dr. Judith Prewitt, DCRT, Honored
By Engineers For Organizing Skills

Dr. Judith M.S. Prewitt, research mathematician in the Office of the Director, Division of Computer Research and Technology, has received the Meritorious Service Award from the Computer Society of the Institute of Electrical and Electronics Engineers.

It is the second time Dr. Prewitt has been honored in public ceremony by the IEEE. She was elected a fellow of the Institute in 1980 for her contribution in applying image processing to automated medical diagnostics. The new award comes for her formation and organization of the IEEE's Technical Committee on Computational Medicine and for her leadership as chairperson through its first 3 years.

During this period, Dr. Prewitt founded the MEDCOMP annual conferences and publications on Medical Computer Science and Engineering and the International Symposium on Medical Images and Icons (ISMI).


Dr. Prewitt came to NIH in 1971 from the University of Pennsylvania, where she was on the faculties of both the radiology and mathematics departments. While at DCRT, her research spanned several areas, most notably image processing and optimal sequential testing.

Since August 1982 Dr. Prewitt has served on an IPA (Interagency Personnel Agreement) at Ohio University, as Visiting Stocker Professor of Electrical and Computer Engineering.

During her work there, she established an image processing facility for the University, and served as thesis advisor for three master's degree candidates in image and speech processing.

She left the Federal service at the end of February for AT&T Bell Laboratories in Holmdel, N.J. There she will hold a position in the Information Systems Laboratory and will deal with a broad spectrum of medical information processing and communications systems.

Dr. Prewitt

Dr. Ernest Johnson Named Division Director in NIADDK

Dr. Ernest Johnson was recently appointed director of the Division of Diabetes, Endocrinology, and Metabolic Diseases and associate director for Diabetes, Endocrinology, and Metabolic Diseases of NIADDK.

The division supports a $160 million extramural program of research project grants, research centers, clinical trials, research training and career development awards, and contract-supported resources related to diabetes mellitus and its complications.

It also supports research in endocrinology and endocrine diseases including thyroid, pituitary, parathyroid, and adrenal disorders, and metabolism and metabolic diseases, including cystic fibrosis.

As division director, Dr. Johnson will coordinate all programs related to diabetes which are supported by the NIH and other Federal agencies. In addition, his office also provides leadership in coordinating NIH research efforts related to endocrinology and cystic fibrosis.

Dr. Johnson came to NIH as a Grants Associate in 1976 and was appointed diabetes program director in 1977. Two years later he became chief of the NIADDK Diabetes Program Branch.

Before coming to NIH, he was assistant professor of physiology and a member of the graduate faculty of the University of Colorado Medical School in Denver.

Dr. Johnson previously served as a Congressional Science Fellow of the American Association for the Advancement of Science in the U.S. Senate.

He received his Ph.D. in physiology and biophysics from the University of Vermont College of Medicine. Among the honors he has received since joining NIH is the NIH Award of Merit "for major contributions to NIADDK and varied diabetes activities which span all NIH Institutes."

Dr. Johnson

Beverly Surles Leaves
NINCDS After 16 Years

Beverly E. Surles, secretary to the Director of the National Institute of Neurological and Communicative Disorders and Stroke, retired on Feb. 27, ending a 16-year NIH career.

"It's time I relaxed and did what I want to do for a change," Mrs. Surles said with a broad smile. Mrs. Surles said she has enjoyed a fascinating Federal Government career, including secretarial positions in Iran and Indonesia while accompanying her husband on his U.S. State Department assignments.

Mrs. Surles began her NIH career in 1968 as secretary to the chief, Office of Scientific and Health Reports, NINCDS. While in this position, Mrs. Surles recalls, there was an incident that seemed to predict her future. Having come to work very early one morning because of the crunch of special report deadlines, she saw Dr. Robert Q. Marston, then NINCDS Acting Director, who mentioned that he hadn't been able to get a cup of coffee because the cafeteria was not yet open.

A coworker, seeing Mrs. Surles preparing a cup of coffee for Dr. Marston, warned her that if she wasn't careful, she'd end up as the Director's secretary.

In 1979, after also serving as secretary to the director of the NINCDS's Communicative Disorders Program, Mrs. Surles did become secretary to the NINCDS Director.

"The Directors I've worked with, Dr. Donald Tower and Dr. Murray Goldstein, are the tops in their field," Mrs. Surles said.

Now she's looking forward to beginning her retirement with a trip to New Orleans for Mardi Gras, followed by a trip to Florida.

Mrs. Surles has lots of plans for retirement, including gardening, traveling, reading, learning to quilt, and improving her golf game.

She especially looks forward to spending more time with her husband, Bill, who has been retired since 1975, and her "artist daughter" Vicky and "married daughter" Rhonda Lam, of Virginia Beach, Va.

A retirement party honoring Mrs. Surles was held at the National Naval Medical Center Officers' Club on Feb. 23. Coworkers and other friends expect the golf clubs presented to her there will be put to good use.

Retirement Seminar Planned

The Recruitment and Employee Benefits Branch, DPM, is offering a Retirement Planning Program for NIH employees on Apr. 11 and 12. A personnel bulletin was distributed desk-to-desk giving more detailed information. If the bulletin is not received, call 496-4543.

We oft lose the good that we might win by fearing to attempt... — William Shakespeare.
The problem of analgesic-associated kidney disease was first reported in the 1950s, described as a chronic tubule-interstitial condition. Since then, it has come to be recognized as a significant, costly, and potentially treatable and preventable disease. The condition, described as a chronic tubulointerstitial nephropathy, is slowly progressive and usually asymptomatic until the patient's kidneys fail.

The problem occurs primarily in women who take large doses of analgesic mixtures daily over a period of years. Patients with the disorder often exhibit gastrointestinal disorders, ischemic heart disease, anemia, emotional disturbances, and prematurely aging skin.

Experts estimate that each year more than 250 people in the U.S. develop end-stage kidney disease from overdose of analgesics (about one new case per million population per year). The incidence is much higher in some parts of the nation, such as one region of North Carolina where 10 new cases per million occur each year.

For every patient whose kidneys fail, many other habitual users of painkillers develop milder forms of the disease.

For reasons as yet unknown, the problem is far more common in certain countries outside the U.S., such as in Australia, Belgium, Scotland, and Switzerland. In fact, surveys have shown that Australians have an exceedingly high daily consumption of analgesics, and the incidence of the disease in that country has been reported to be “50 times higher than that recorded in the United States and in Europe.”

In its consensus statement, the panel noted four clinical and experimental features that are relevant to the pathogenesis of analgesic nephropathy:

- The disease is most commonly associated with the ingestion of analgesic mixtures in large doses over a prolonged time.
- The initial lesion occurs in the papilla; changes in the kidney's cortex are secondary to papillary damage.
- Papillary necrosis may be accentuated experimentally and in certain patients by dehydration and low urine volumes.
- The major phenoacetin metabolite, acetyaminophen, as well as salicylates, are concentrated in the papilla, particularly during low urine output.

Although the precise pathogenic mechanisms of the disorder are still unclear, the panel concluded that the above features suggest that the disease results from the effects of a toxic agent or agents in the renal papilla.

The panel stated: “Present evidence suggests that acetyaminophen causes tissue injury as a result of its conversion to toxic metabolites. By lowering the concentration of glutathione, a substance that protects against such tissue injury, aspirin and other salicylates enhance toxicity. Salicylates and acetyaminophen also exhibit prostaglandin synthesis and thus may reduce medullary blood flow and potentiate papillary damage.”

These data, according to the panel, offer attractive though yet unproven explanations for the synergistic effects of phenoacetin and aspirin in causing papillary necrosis. They also suggest avenues for research into interactions of other analgesic and anti-inflammatory drugs that may lead to renal disease.

The main strategies in management of analgesic nephropathy suggested by the panel were:

- Avoidance of antipyretic-analgesic agents, as well as non-steroidal anti-inflammatory drugs.
- Prompt treatment of proven urinary tract infections.
- Awareness that a necrotic papilla may slough and obstruct the urinary tract, sometimes requiring prompt intervention to prevent further loss of renal function.
- Careful supervision of hypertension (high blood pressure).
- Recognition that tumors of the urinary tract may occur more frequently in patients with analgesic nephropathy. Unexplained episodes of hematuria (blood or red cells in the urine), including a marked increase of microscopic hematuria, should therefore be evaluated carefully.

The panel called for more epidemiological research, evaluation of the effectiveness of measures designed to reduce analgesic abuse, research on factors that may predispose patients to the disease, and study of the nature of the toxic metabolites.

More research was also recommended on the mechanisms of cell injury in the papilla, the role of ischemic (impaired blood flow) versus toxic factors, and the interactions of drugs in causing papillary damage. In addition, the panel said more information is needed on the relationship between analgesic nephropathy and urethelial cancer.

The panel members included nephrologists, pathologists, epidemiologists, pharmacologists, biostatisticians, family physicians, and statisticians. The chairman was Dr. Roscoe R. Robinson, vice chancellor for Medical Affairs and professor of medicine, Vanderbilt University Medical Center, Nashville, Tennessee.

Copies of the statement are available from the NIDDK Office of Health Research Reports, Program, Reference Section, National Library of Medicine, Bethesda, MD 20209.

Old age puts more wrinkles in our minds than on our faces.—Montaigne

**OSTEOPOROSIS**

(Continued from Page 1)

- What is osteoporosis? What are the clinical features of osteoporosis and how is it detected? Who is at risk for developing osteoporosis? What are the possible causes of osteoporosis? How can osteoporosis be prevented and treated? What are the directions for future research?

This meeting is one of a series of NIH consensus conferences held to bring together biomedical investigators in relevant specialties, practicing physicians, consumers, and representatives of public interest groups to provide a scientific assessment of drugs, devices, and procedures and to evaluate their safety and effectiveness.

The conference is sponsored by the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases, and the NIH Office of Medical Applications of Research.

**Eight New Bibliographies Available at NLM**

Eight new bibliographies on subjects of current widespread interest are available without charge from the National Library of Medicine's Reference Section. The bibliographies were produced through NLM's computer-based system MEDLARS and contain references from recent medical journal literature.

A complete list of available Literature Searches is published each month in Index Medicus and Abridged Index Medicus. A list may also be obtained by calling NLM's Office of Inquiries (301) 496-6308.

When requesting Literature Searches, please include title and number, enclose a self-addressed gummed label, and mail to Literature Search Program, Reference Section, National Library of Medicine, Bethesda, MD 20205.

The newly available bibliographies follow:


Old age puts more wrinkles in our minds than on our faces.—Montaigne
National Social Work Month

Social Workers Perform Essential Services: They Are “Educators, Advocates, Brokers”

CC social worker Andrew Tartler chats with young patient Justin Knita of Utica, MI.

If the frequency with which social workers are paged on the Clinical Center’s intercom is any indication of their significance, they rank just behind physicians these days.

March being National Professional Social Work Month, a review of what social workers do and how they do it may be in order.

Many times at the Clinical Center, employees hear the words, "Louise Meister... please," over the intercom, and wonder who she is or why people are constantly after her?

Ms. Meister is a social worker, one of 23 at the Clinical Center, all of whom have master’s degrees, and most of whom are members of the Academy of Certified Social Workers.

"Bob Jones... please" is heard quite often as well.

Bob, also a social worker, is so busy he has two phone lines, one of which has a tape recording which he updates and personalizes every day.

So they answer the phone a lot.

What else do social workers do?

"Our input into patient care is generally underestimated," said Andrea S. Hay, a staff social worker for NICHD on 9 West since 1977. "Our work, in many cases, leads directly to the success of the research being conducted here. People don’t realize how time-consuming or important this work can be."

Ms. Hay, a native of Harrisburg, Pa., graduated from Muskingum College in Ohio, and spent her early career days in Cleveland and later with a pediatric teaching hospital at Case-Western Reserve University.

"It was not uncommon in those days for me to have kids in my lap during staff meetings," she recalled. "And there would be kids in the laps of the nurses and doctors."

Her job today is to find out what community resources are available to help parents and their ill children. That is a daunting enough task if you work in a community hospital, where all you have to learn is one town’s public welfare structure. At the Clinical Center, a social worker needs to have much more comprehensive contacts.

Though she tends to lean on local contacts in communities from which patients come, Ms. Hay occasionally dials the operator in a town for information. "There are points where you try to get the information operator to read you the phone book," she said. "But that doesn’t happen too often."

On 9 West, where every patient is screened by staff social workers, Ms. Hay typically sees 17 admissions a week. Because most of her patients are children, Ms. Hay meets parents to find out basic information: Who else is in the family? What stresses are there? What strengths?

"Parents usually have a lot of questions," Ms. Hay said. "They want to know how they are supposed to discipline a sick kid. Or how to comfort their child when healthy kids make fun of them."

"They want to know why their kids, and not other children, are sick. They tend to comb over their past life, looking for reasons for what has happened."

"It’s not uncommon for a parent to cry or to pound on the desk during an interview with a social worker. "You learn a lot from talking to the parents," Ms. Hay said.

Asked to define a social worker’s role in a modern hospital, Ms. Hay said, "We are educators, advocates, and brokers. Our job is to arrange and coordinate services."

The Social Work Department was organized at the CC in 1951. "We were here before Kilroy got here, right?" said Bob Jones.

Every Wednesday morning at 9:30, he meets patients on the 12th floor, ACRF, to introduce social workers at NIH.

Assigned to nursing units in the CC, social workers are considered members of the health care team, along with physicians, physical therapists, nurses and other professionals.

"We are typically called upon to help patients deal with anxieties related to their illness and stress within the family created by unemployment and absence from the home," said social worker Sharon Otto. "Workers also provide help with community referrals for financial aid, rehabilitation, and home health care at discharge."

However, it isn’t all work and no play for social workers.

The other day on 6 West, a pediatric cancer unit, social worker Andrew R. Tartler was walking by the nursing station when a pint-sized patient hailed him from the end of the hall, then ran into his arms, hugging him.

It wasn’t work for Mr. Tartler to pick up the child and hug him right back. □

Man is unique not because he does science, and he is unique not because he does art, but because science and art equally are expressions of his marvelous plasticity of mind.

— Jacob Bronowski
**Medical Art Exhibit On Display at NLM**

"The Medical Art of Frank H. Netter, M.D."—a new NLM exhibit of some 80 paintings and sketches—is now on display in the National Library of Medicine's main lobby through Apr. 20. A related display provides an overview of the history of medical illustration from prehistoric to modern times.

In a brochure discussing Dr. Netter's work, medical illustrator Ida Dox writes that the 77-year-old artist "has successfully conveyed the essentials of medical information to generations of medical professionals. As a result, his name evokes instant recognition in the minds of physicians throughout the world. His unusual paintings are to the learning of contemporary medicine what the work of Andreas Vesalius was to Renaissance medicine: they demand attention, they clarify, and they highlight key information. Through their vivid coloring and unique approach, they make medical learning memorable."

The work, selected for the exhibit by Dr. Biagio John Mellon (formerly NLM special expert in biomedical communications), consists of paintings rendered in opaque watercolors during the artist's ongoing association with the CIBA Pharmaceutical Company. This association, first begun in 1938, has resulted during the last 30 years in a series of atlases covering the systems of the body (The CIBA Collection of Medical Illustrations) and in Clinical Symposia, a series of illustrated monographs produced for students and primary care physicians.

The exhibit includes 56 watercolors illustrating human anatomy, embryology, physiology, and pathology in six body systems: respiratory, excretory, circulatory, nervous, endocrine, and digestive. Also included are 20 paintings and three sketches related to the artificial heart.

The works on the artificial heart are especially interesting because of the artist's keen personal involvement in the subject. In Dr. Netter's words, "The project on the artificial heart has been not only the most interesting but the most stimulating and inspiring."

All of Dr. Netter's work, however, shows a deep involvement with subject matter. He has pointed out that, "the making of pictures is a stern discipline; one may write around a subject where one is not quite sure of the details, but with brush in hand before the drawing board, one must be precise and realistic."

Illustrator Dox details the rigor with which Dr. Netter approaches any medical illustration project. "He reads the available literature and consults leading authorities in the field. He visits cardiologists, embryologists, geneticists and others who can answer questions and expand his knowledge. Frequently, he finds it necessary to visit hospitals to observe clinical cases, to study pathologic specimens, or to watch surgical procedures."

His paintings are made with opaque watercolors because he likes the versatility of the medium, finding that it can be used for both careful detail and broad, colorful effects. He has been called "the dean of American medical illustration," but Dox sees him as more than just an illustrator.

He is the consummate communicator, she says. "By combining the normal, the clinical and the pathologic, he sets out to explain a medical fact with such effectiveness that, when studying any of his paintings, one 'gets the point' clearly and unequivocally."

NLM's Frank Netter exhibit can be seen (through Apr. 20) during the Library's regular hours: Mon.-Thurs., 8:30 a.m. to 9 p.m.; Fri., 8:30 to 6; and Sat., 8:30 to 5.

---

**Dr. Saul Rosen, CC's New Deputy Director, Loves Chocolate, Verdi's Operas and CC**

The new deputy director of the Clinical Center is especially fond of chocolate, the operas of Giuseppe Verdi and an open collar.

Qualifications like those would not make most of us candidates for his position, but Dr. Saul Rosen has other talents as well, honed during a 25-year Clinical Center career.

As you read this, Dr. Rosen will be undergoing a gradual metamorphosis. He is spending all of March changing from a senior investigator for NIADDK into CC deputy director.

"My job will be to make sure that the Clinical Center continues to function as a high-quality hospital," Dr. Rosen said, "which is easy because it is already very good indeed."

"I love this hospital," Dr. Rosen continued. "I've been here, man and boy, for 25 years. The Clinical Center is my hospital."

Dr. Rosen's main research interest has been the inappropriate production of hormones by tumors. The body's production of placental proteins in general has interested him since he spent two years here, beginning in 1956, as a clinical associate.

With the exception of a sabbatical year in London during which he studied cells in vitro, Dr. Rosen has been on B West since 1961.

"I'm going to have to leave active participation in lab research," Dr. Rosen said. "I won't be doing any hands-on research. But I don't intend to let my intellectual interests atrophy. I'll be sort of a scientific voyeur."

Dr. Rosen will, however, continue his 20-year association with Prince George's County General Hospital where he attends rounds for 1 month each year. He feels that pointed out that, "the making of pictures is a stern discipline; one may write around a subject where one is not quite sure of the details, but with brush in hand before the drawing board, one must be precise and realistic."

Illustrator Dox details the rigor with which Dr. Netter approaches any medical illustration project. "He reads the available literature and consults leading authorities in the field. He visits cardiologists, embryologists, geneticists and others who can answer questions and expand his knowledge. Frequently, he finds it necessary to visit hospitals to observe clinical cases, to study pathologic specimens, or to watch surgical procedures."

His paintings are made with opaque watercolors because he likes the versatility of the medium, finding that it can be used for both careful detail and broad, colorful effects. He has been called "the dean of American medical illustration," but Dox sees him as more than just an illustrator.

He is the consummate communicator, she says. "By combining the normal, the clinical and the pathologic, he sets out to explain a medical fact with such effectiveness that, when studying any of his paintings, one 'gets the point' clearly and unequivocally."

NLM's Frank Netter exhibit can be seen (through Apr. 20) during the Library's regular hours: Mon.-Thurs., 8:30 a.m. to 9 p.m.; Fri., 8:30 to 6; and Sat., 8:30 to 5.

---

**Dr. Rosen**

Dr. Rosen educating residents and seeing patients "help make me a good doc. It also helps keep my skills from totally paling." Dr. Rosen received his doctorate in biochemistry at Northwestern and his M.D. at Harvard.

"I look forward to helping John (Dr. John L. Decker, CC Director), he's a beautiful guy," Dr. Rosen said. "I've known him for more than a decade."

For the future, Dr. Rosen would like to see the hospital become even better. He describes his style of leadership as a process of acquiring "standing." "I'm no shrinking violet, but I don't like people who go off half-cocked, either," he said.

"With all the research going on, people forget that there's a hospital here," he said. "There is, and it's a good one. We want to keep it that way."
Dr. Hans L. Falk Retires

Dr. Hans L. Falk, an eminent scientist in the study of environmental agents and their relationship to cancer, retired recently from the National Institute of Environmental Health Sciences, after 22 years in Government health research.

He retired as associate director, NIEHS, Office of Health Hazard Assessment, his position since 1971.

Born in Breslau, Germany, which is now Wroclaw, Poland, Dr. Falk was studying at the University of London when World War II broke out. He was deported to Canada as a detainee because of his German background. During the war, members of his family disappeared under the Nazi regime.

Dr. Falk received his undergraduate degree and his Ph.D. in biochemistry at McGill University. He served academic appointments at the University of Chicago and the University of Southern California at Los Angeles before joining NCI in 1962 where he was associate scientific director for carcinogenesis before joining NIEHS in 1968.

While at NCI, Dr. Falk received the PHS-Superior Service Award in recognition of the development of a national program on experimental carcinogenesis.

Dr. Falk's research in the late 1940s and in the 1950s touched on matters that were to become newspaper headlines in the later years. He investigated such health effects as carcinogenic hydrocarbons, air pollutants, particulates in gasoline and diesel engine exhausts, years before Rachel Carson's book The Silent Spring set off environmentalism as an issue and a movement in 1963. His work on the health effects of certain components of cigarette smoke predated the Surgeon General's Report on smoking by 4 years.

Dr. Falk also was one of the early investigators to perceive the importance of environmental chemicals in enhancing or diminishing carcinogenic action.

His suspicion that cancer induction is not a random event affecting DNA at any location, but a specific action at only a few locations is now well-established.

Dr. Falk, at the request of the World Health Organization, spent over a year in Geneva, Switzerland as a consultant in 1973-74.

Though an international expert, Dr. Falk has never been seduced by expertise. His wit sometimes serves as the vehicle of his scientific skepticism. When confronted by some conclusion from a supposedly unimpeachable source, he might narrow his eyes and say, "Well, after all these people are only human ... and even that has not been established."

Dr. Falk was one of the first scientific staff members hired at NIEHS. Under the Institute's first Director, Dr. Paul Kotin, he served as the associate director for laboratory research.

Since the arrival of the present Director, Dr. David P. Rall, Dr. Falk has devoted himself to coordinating the Institute's health hazard assessment function, using his staff to collect scientific and technical literature on substances of concern and to better enable regulatory agencies and others to deal with extensive and sometimes ambiguous scientific data.

Though retired, Dr. Falk intends to remain active in the scientific community in a consulting capacity.

Visiting Scientists

Program Participants

2/7—Dr. Andrew Young, New Zealand. Sponsor: Dr. Clifton Bogardus, Digestive Diseases Branch, NIAID, Phoenix, Ariz.


2/13—Dr. Thomas Olivecrona, Sweden. Sponsor: Dr. Robert Scow, Laboratory of Cellular and Developmental Biology, NIAID, Bg. 10, Rm. 8D14.

2/15—Dr. Rachel R. Capal, Israel. Sponsor: Dr. Robert B. Nussenblatt, Clinical Branch, NEI, Bg. 10, Rm. 10019.

2/21—Dr. Elizabeth M. Benson, Australia. Sponsor: Dr. Warren Sirober, Laboratory of Clinical Investigation, NIAID, Bg. 10, Rm. 11N250.

2/21—Dr. Tsutomu Fujimura, Japan. Sponsor: Dr. Reed Wickner, Laboratory of Biochemical Pharmacology, NIAID, Bg. 4, Rm. 103.

2/21—Dr. Chilakalapudi Durga Rao, India. Sponsor: Dr. Stuart Aaronsen, Laboratory of Cellular and Molecular Biology, NCI, Bg. 37, Rm. 1A07.

2/21—Dr. Mario Tecce, Italy. Sponsor: Dr. J. E. Rall, Clinical Endocrinology Branch, NIAID, Bg. 10, Rm. 9N222.

2/23—Dr. Eugenia Falent-Kwast, Poland. Sponsor: Dr. D.P.J. Glaudemans, Laboratory of Chemistry, NIAID, Bg. 4, Rm. 205.

Computer Slide System Offers Special Advantages

A computer color slide system is now available in the Medical Arts Photography Branch which offers special advantages over ordinary slides.

The new MAGI "Major Leaguer" system eliminates the need to store "original art" since the slide data are stored on a floppy disk which is kept on file in MAPB. Modifications and additional slides or prints can be ordered at any time.

In addition to color slides, the system also delivers black-and-white slides and both color and black-and-white prints from the same disk. For proofreading, black-and-white photocopies are provided to the requestor. One frequently used option is to order color slides for oral presentations and then black-and-white prints (either identical or modified) for publication use.

Among the slides produced in the MAGI are line and bar graphs, tables, flow diagrams, pie charts, and schematic drawings; 64 colors are available. A file of stock illustrations can be examined in MAPB.

For further information, call Pat Lewis or Crystal Parmelee, Graphics Unit, 496-3221.

Dr. Phillip Gordon, clinical director, NIAID, has been appointed chief, Diabetes Branch of the Institute. Dr. Gordon fills the vacancy created by Dr. Jesse Roth's appointment as director of Intramural Research.

2/2—Dr. Maurice J. Ringuette, Canada. Sponsor: Dr. Jurrien Dean, Laboratory of Cellular and Developmental Biology, NIAID, Bg. 6, Rm. B107.

2/3—Dr. Miriam Falzon, Malta. Sponsor: Dr. H. M. Reznik-Schuller, Laboratory of Experimental Therapeutics and Metabolism, NCI/DCT, Bg. 36, Rm. 5C11.

2/5—Dr. Jon N. Currie, Australia. Sponsor: Dr. David Cogan, Clinical Branch, NEI, Bg. 10, Rm. B107.

2/5—Dr. Oscar E. Cuzzani, Argentina. Sponsor: Dr. Carl Kupfer, Office of the Director, NEI, Bg. 31, Rm. 6A03.

2/6—Dr. Steven Peter Klinken, Australia. Sponsor: Dr. David Hankins, Laboratory of Carcinogenic Metabolism, NCI/DCCP, Bg. 37, Rm. 3C26.

2/6—Dr. Hideko Urushihara, Japan. Sponsor: Dr. Kenneth Yamada, Laboratory of Molecular Biology, NCI/DCCP, Bg. 37, Rm. 4E16.

2/13—Dr. Rodrigo Labarca, Chile. Sponsor: Dr. Steven Paul, Clinical Neuroscience Branch, NIMH, Bg. 10, Rm. 4N214.
Dr. Samuel P. Korper Appointed Director of Legislative Analysis

Dr. Samuel P. Korper has been appointed director of the NIH Division of Legislative Analysis.

For the past 2 years, Dr. Korper has served as director of the Division of Intramural Research at the National Center for Health Services Research. There he was responsible for direction of a number of major projects, including the National Health Care Expenditures Study, the Hospital Cost and Utilization Project, and the center's work on long-term care.

In his new position, Dr. Korper will be responsible for advising the NIH Director and other senior NIH executive staff on legislative developments relevant to NIH programs and activities, the need for proposed changes in the statutory base of NIH activities, and development of new legislative proposals.

In addition, the legislative office coordinates and controls NIH congressional communications; provides NIH liaison on legislative matters with the Department (HHS), the Congress, and other bodies; coordinates preparation of testimony or statements for use of staff in the NIH Office of the Director before Congressional committees or other groups; develops special staff documents, or other studies concerning NIH interests, activities, and relationships; and provides staff support to the Advisory Committee to the NIH Director.

Previously, Dr. Korper served as associate director for Legislation, Epidemiology, and the Environment in the Office of the Deputy Assistant Secretary for Health Research, Statistics, and Technology, OASH.

In 1976, as a recipient of a Robert Wood Johnson Health Policy Fellowship, Dr. Korper took a leave of absence from his responsibilities as assistant dean for regional activities of the Yale University School of Medicine to serve as legislative assistant to members of the Subcommittee on Health and the Environment in the Office of the Deputy Assistant Secretary for Health Research, Statistics, and Technology, OASH.

Dr. Korper completed his graduate training at Yale University, receiving a master's in public health and a doctorate in epidemiology from Yale University School of Medicine.

He has been active in several professional societies, including the Society of Medical College Directors of Continuing Medical Education and is a fellow of the American Public Health Association, serving this year on the executive board of APHA, and as chairman of its action board.

While pursuing a variety of administrative, legislative, and research activities, Dr. Korper has authored or coauthored over 30 articles, and contributed to several books and other publications.

Dr. William J. Zukel Appointed Deputy Director For Heart and Vascular Diseases Division, NHLBI

Dr. William J. Zukel has been appointed deputy director of the Division of Heart and Vascular Diseases, NHLBI. Dr. Zukel has been associate director for scientific programs of the division and will continue in an acting capacity in that position.

Dr. Zukel began his career at NIH in 1957 as the assistant director of the then National Heart Institute and has served in various capacities within the Institute since that time. He has been instrumental in planning, initiating and coordinating many of the major epidemiologic studies and clinical trials carried out by the Institute, including the Coronary Drug Project, the Hypertension Detection and Follow-up Program and the Multiple Risk Factor Intervention Trial.

A native of Massachusetts, Dr. Zukel received his M.D. degree from Hahnemann Medical College and earned the degree of D.P.H. from the London School of Hygiene and Tropical Medicine. He is the recipient of the PHS Meritorious Service Medal and the Distinguished Service Medal.