Take it Easy on Your Head with 'Grateful Med'

How likely do you think it would be for the National Library of Medicine to develop, in an impressively short amount of time, an extraordinarily easy way for people to access its huge computer files? And, further, to give the project a name that many people love, some people hate, and no one can forget?

That, in a nutshell, is what NLM has accomplished with Grateful Med, a $30 software package that puts anyone brave enough to lay hands on a PC keyboard in touch with the library’s vast MEDLINE and CATLINE files of medical literature.

A word first about the name. Graceful Med is a play on the name of a 21-year-old San Francisco rock group called the Grateful Dead.

Long known for the length of its A) hair, B) concerts and C) lines of people who queue up for its performances, the Grateful Dead is just the sort of group that might shorten a quick-loving librarian’s temper. Actually, the phrase ‘Grateful Dead’ was not invented by the rock group, but is rooted in folklore.

“We considered about 20 candidates for the name,” confides Rose Marie Woodsmall, an NLM program analyst who helped develop Grateful Med. “We originally wanted to use ‘Medsearch’, but it was trademarked already. Whether you like it or not, Grateful Med is very memorable.”

Credit or blame for choosing the name belongs with NLM Director Donald A.B. Lindberg, who 2 years ago challenged his staff to create a simple way for people to tap the NLM archive of medical literature. No particular fan of rock music, Lindberg liked the name because users of the software were bound to be grateful to a program that could ease the burden of finding information.

“He’s taken some guff about the name, but he stuck with it,” reports Woodsmall. “Now he’s glad he did.”

Name aside, Lindberg’s request that computer experts create, in 6 months, an “end-user” (usable by the average person at his or her desk, rather than via a librarian) system for searching computer files was “unheard of,” says Woodsmall. Fortunately, a computer whiz known to Woodsmall had developed a prototype of Grateful Med that NLM could adapt to its own uses. In February 1986, the first version of Grateful Med went on sale. Version two

(See GRATEFUL MED, Page 3)
Notkins Tracks Causes of Diabetes

Tracking the causes of diabetes mellitus was the topic of an NIH Lecture given by Dr. Ahner Louis Notkins, director of intramural research at NIDR and chief of the Laboratory of Oral Medicine.

Notkins' lecture focused on evidence that implicates viruses and autoimmunity as causes of insulin-dependent diabetes mellitus (IDDM)—the more severe form of diabetes that requires treatment with insulin. He discussed how this work has led his laboratory to develop new approaches for making human monoclonal antibodies.

Diabetes, whose complications include kidney disease, heart disease, blindness, gangrene and neuropathy is the fifth leading cause of death in the United States. Between 500,000 and 1 million Americans have the insulin-dependent form of the disease caused by destruction of insulin-secreting beta cells in the pancreas.

During the past decade, Notkins found that in experimental animals, several viruses, including encephalomyocarditis (EMC) virus, can cause diabetes by killing beta cells. He also demonstrated that susceptibility to this type of diabetes is genetically controlled and that the disease can be prevented by a vaccine. Extending his work to humans, Notkins then showed that occasional cases of insulin-dependent diabetes can be triggered by coxsackie B viruses and congenital rubella.

At the same time he was pursuing studies of viruses, Notkins also looked at evidence pointing to autoimmunity as a cause of IDDM. He began tracking factors such as autoantibodies that might be involved in endocrine diseases.

Ordinarily, the immune response defends an individual against foreign invaders such as viruses and bacteria. Under some circumstances, the immune response can turn against and react with the individual's own tissue, a phenomenon known as autoimmunity. Autoantibodies that react with beta cells, for example, have been found in many newly diagnosed IDDM patients. Studies by Notkins and others have shown that the appearance of these antibodies may precede the symptoms of diabetes in some persons by months or even years. These autoantibodies now serve as markers for identifying individuals at high risk of developing IDDM.

Investigating what triggers an autoimmune response, Notkins and colleagues have shown that viruses can sometimes trigger the production of autoantibodies through processes such as molecular mimicry and the transformation of antibody-producing lymphocytes. They also have succeeded in making both mouse and human monoclonal autoantibodies. With the availability of large quantities of these autoantibodies, scientists now have an opportunity to characterize these antibodies and study some of the factors involved in human autoimmune diseases.

ALLERGY (Continued from Page 1)

Kaliner says, "It is a detective story, figuring out what is going on.

"We tailor the treatment individually for each patient," Kaliner continued, "because it depends on the type and kind of allergy. For example, if you are allergic for only one season, then it is desirable to give treatment only for that particular season. But if a person has allergies year round, then it is definitely better to consider putting him or her on the shots for year-round relief."

Kaliner recommends that patients avoid allergies as best they can by using air conditioners in their cars and homes, refraining from mowing the lawn, avoiding going outside in early morning during the pollenating season (particularly on a sunny day with a light breeze, because that is when major pollination takes place), wearing a mask also helps.

"If all this fails," Kaliner says, "then we use medications."

Singles to Meet

NIH Singles Happy Hour will be held on May 14 from 5 to 7 p.m. at the FAES House on Old Georgetown Road ($2 member, $3 nonmembers).

For further information call Judy, 496-6149.
GRATEFUL MED
(Continued from Page 1)

came out last March; preliminary work on a third version is in progress.

"[Grateful Med] is like having a little librarian in your PC," says Woodsmall, a 20-year NIH veteran who has long been interested in binding computers to libraries.

"Librarians have been doing computer searches for 20 years," she said. "Now end users frequently want to do their own searches. They know best what they want. They recognize it when they see it."

Grateful Med allows a user to browse both MEDLINE, a database of references to leading domestic and foreign medical journals, and CATLINE (short for catalog online), a file of medical books. Users can search by subject or author. Subject searches can be broad and imprecise (the brain, for instance) or tight and focused, depending on the user's savvy, Woodsmall said.

"How narrow to get is the toughest chore for an end user," she noted. "A HELP screen is available if your search turns up nothing of use."

When a user turns on Grateful Med, a single screen appears explaining how it works. Users can always retrace their steps once they leave the first screen. Help is just a keystroke away.

Four steps make up a typical Grateful Med search. The user first decides how to search, either by author's name, title of an article, or by subject words (including NLM's Medical Subject Headings—MeSH). The program also asks users if they want English language only, review articles only, or a certain journal. Next, the software calls up NLM, runs the search, then disconnects from the mainframe com-

"[Grateful Med] is like having a little librarian in your PC," says Woodsmall.

puter. Lastly, it displays search results and either prints them on the user's printer or dumps them on a user's floppy disk.

Since Grateful Med keeps a user's time on the NLM mainframe to a minimum, costs are low. The average search costs less than $3, small price for having more than 5 million journal article references and 600,000 book titles at your fingertips.

Woodsmall says that experienced computer searchers who know the NLM command language can reach 20 databases via Grateful Med, not just MEDLINE and CATLINE.

"Some day it will be ever so much easier (to conduct literature searches) than it is now," she enthused. Those whose fingers tremble at the prospect of using a typewriter to pilot a computer can take heart; the latest technology—computers that respond to voice commands—will soon be here.

Some 5,000 Grateful Med packages, consisting of two floppy disks, a manual and an application form (users need a code number and NLM password), have been sold so far. The software is available (for practically a song, though not a Grateful Dead tune) through the Commerce Department's National Technical Information Service (see box).

A GOOD BAND IS HARD TO FIND

NIH has need for a marching band that can perform on a summer workday for an NIH Centennial event. Anyone knowing of such a group, please call 496-6203. □

Before You Can Begin Searching with Grateful Med...

NIH scientists, science writers, and others who might be tempted immediately to write out a personal check for the Grateful Med software package should be aware of a few practical details:

1. You need an IBM-compatible PC with a Hayes or compatible modem.

2. Unless you want to get the system for your home PC and pay for usage yourself, you will need to see your administrative officer to arrange for submitting a purchase order to NTIS (Springfield, VA 22161). The price is $29.95, plus $3 handling charge per order, and the NTIS order number is PB86-158481/GBB.

3. If you don't already have a MEDLARS user ID code, you will need to obtain one. You can either wait to receive the application forms (included in the package from NTIS) or call NLM's MEDLARS Management Section for a copy of the forms (496-6193). Please remember that if you intend to obligate government funds to pay for your monthly Grateful Med use, a purchase order must be set up before you begin incurring these charges.

Questions? Call NLM MEDLARS Management Section, 496-6193.
Worthy of Your Consideration: U.S. Savings Bonds

It’s time again to spotlight U.S. Savings Bonds. They are potential stars in your financial planning, constituting an attractive, convenient and risk-free investment.

Even $3.75 each payday (the minimum payroll deduction) produces a $50 bond seven paydays later. In 1 year (plus one payday), this tiny amount will grow to four $50 bonds.

In today’s market, Savings Bonds are a competitive investment choice. The U.S. Treasury Department points out that if held 5 years or longer, Savings Bonds currently are guaranteed an interest rate of at least 6 percent. When market-based interest rates go higher, interest on bonds increases, but it never falls below the guaranteed 6 percent. The way this works is as before: bond interest rates change every 6 months, with owners receiving an average of the rates for the periods the bonds are held. Each 6-month period is calculated at 83 percent of the average return on 5-year Treasury securities. Thus, bond interest goes as high as the market dictates. But even if during this 6-month period the market falls below 6 percent interest, bond interest will remain at 6 percent.

The interest rate on bonds held 5 years or longer has averaged 8.99 percent since November 1982.

Bonds cashed before the 5-year hold period ends receive interest on a fixed, graduated scale.

At the NIH Bond Drive Kickoff held recently in Wilson Hall for NIH Savings Bonds Drive coordinators and canvassers, Robert Sweeney of the Treasury Department pointed out that Savings Bonds are tax-sheltered. One can defer paying federal income tax on the interest for an EE Bond until maturity and even then avoid tax on the interest by converting an EE Bond to an HH Bond. Further, Savings Bond interest is completely exempt from state and local income tax. Also, if the need arises, one can convert bonds into ready cash anytime after the first 6 months.

Sweeney also pointed out that bonds taken out in your child’s name are a great way to save for an education. The new tax code makes this a particularly smart financial strategy. Bonds are backed by the full faith and credit of the U.S. Treasury—so there is no risk, substantial interest, and tax advantages.

Under Secretary Don Newman and NIH Deputy Director William Raub also gave encouraging remarks at the kickoff. A raffle with a wide variety of prizes will be held as part of the NIH Bond Drive.

Both Ober Travel and U.S. Air have donated a pair of round trip tickets to anywhere in the continental U.S. Abe Pollin of the Capital Cen-

NIH’s Savings Bond Drive kicked off recently with a presentation to the coordinators and canvassers in Wilson Hall. Giving a hand to the ceremonies are (l to r): Gay Harriman, Health Care Financing Administration and deputy coordinator for the 1987 DHHS Bond Drive; Dr. William Raub, deputy director, NIH; Robert Sweeney, U.S. Treasury Department; and Don Newman, DHHS under secretary.

Savings Bonds truly are the Great American Investment. Take Stock in America this year!

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Security Branch Presents
Personal Safety Guidelines

Although NIH enjoys a relatively low crime rate, particularly as it applies to crimes against persons, we do experience an occasional serious crime on our campus. Such a crime occurred on Monday Apr. 6 at approximately 8 p.m.

An NIH employee was returning to the campus from a trip via Metro. He exited at the Medical Center and proceeded to Lor 16E where his vehicle was parked. As he was about to enter his van, he was accosted by two men, one short and one tall, both armed with automatic pistols. The two men forced him to take them to his bank money machine in Bethesda where they obtained $300 as well as the money in the employee's wallet. The two men later released him in Northwest D.C. Both the FBI and Montgomery County Police are investigating this case and are sharing information with the NIH Security Branch.

To try to prevent this situation from happening again, the NIH Security Branch is developing several initiatives to enhance everyone's security.

An in-house phone is located at the top of the escalators of the Medical Center Metro station and is marked "Information or Police Escort Call 496-5685, Police Emergency 115." This is a direct line to the NIH Police Communications Center. If you arrive at the Metro station dark you may call this number and an NIH police officer will escort you to your building or vehicle.

The most successful solution to maintaining a low crime rate is prevention, the Security Branch points out. Everyone should practice the art of self-protection. The following suggestions are provided as guidelines by the NIH Security Branch.

- Stay alert at all times and avoid unnecessary chances. Know your surroundings and be aware of suspicious people or potential danger.
- Arrange to travel with someone whenever possible. Even when traveling with a friend or in a group, the same security precautions should be taken as when traveling alone.
- Beware of or avoid strangers. Walk, drive, and park in lighted areas. Avoid dark back streets and alleys; remote or dark parking areas; seldom used stairways, corridors, or exits; and unsecured exits.
- Be aware and take advantage of security provisions that are available to you. NIH Police personnel help protect people going to their cars after dark and will provide an escort service. In addition, shuttle service is provided by Transportation personnel at night (until 8:45 p.m.) to remote parking lots. When approaching your car, always have the key ready to use, check the interior before getting in and always travel with your car doors locked.
- Upon arrival at your car, never unlock the doors prior to making a visual inspection of the area.
- Carry your purse/briefcase tightly against your body, covering the flap or clasp with your hand or forearm. Wallets should be carried in an inside pocket.
- Avoid carrying large amounts of cash, and don't reveal what you do carry.
- If you think you are being followed by someone on foot, cross the street, quicken your pace, or perhaps change direction. Go directly to an occupied residence, office or business and call police. If you think you are being followed by someone in a car, turn around and walk in the opposite direction. Go up a one-way street if possible. If the person persists, write down the car license number and call the police from the nearest residence, office or business.
- To report suspicious activity, threat, or any situation that presents a danger, dial 115 for Police Emergency; to report theft or crime that has already occurred or to obtain escort service to your car after hours, call 496-5685; to obtain shuttle service information, call 496-3426.

The Security Branch would like to point out that the police do not think of these calls as a bother; they would rather assist you than see you become a victim of a crime.

The Victim's Remarks

The Record spoke with the victim, who asked not to be identified; we share with you his remarks.

"I feel very lucky that my robbers were not on drugs or vicious. In fact, they acted very much like businessmen, and spoke politely but very little. You could sense they meant business by their tone of voice. In a situation like this you are very sensitive to every sound around you.

"People think that when you are in a situation like this, you might go to pieces and do things that perhaps are belittling to you. But, in fact, I felt very strong physically and calm. Perhaps it is because you are so busy listening for clues, you don't have time to think or worry. It is later that you shake and know fear.

"I lost very little in my case—my car was returned to me, my credit cards were cancelled, and the bank card was cancelled the next day. The $300 withdrawal made from the bank was not authorized by me, so basically I lost the money I had in my wallet and my watch.

"I have been at NIH close to 30 years and I used to come in to work and never think about the time or being alone in an office. I always felt safe on the NIH grounds. Now, I won't do this. I am very aware of my surroundings."

The victim was apprised of the new initiatives to improve security on the campus and he was delighted to hear about them.

The Division of Engineering Services and Security Branch are also presently coordinating installation of additional lighting throughout the campus as well as near selected buildings.

Two NIH Investigators Share 'Outstanding' Kudos

Two NIH-trained investigators, Drs. Warner C. Greene and Joel Moss, will share the 1987 Outstanding Young Investigator Award of the American Federation for Clinical Research. The announcement was made at the 44th annual meeting of AFCR in San Diego on May 2.

Sponsored by the Burroughs Wellcome Fund and offered by AFCR since 1983, the $15,000 award is given annually to an outstanding young physician-investigator in recognition of meritorious clinical research.

Greene pioneered the study of the interleukin 2, or T-cell growth factor, receptor, a protein that plays a central role in regulating the growth of normal and malignant T cells. Studies of this protein are providing clues to understanding the nature and treatment of adult T-cell leukemia. This is the first and, so far, only human leukemia known to be caused by a retrovirus. Greene's research was largely carried out at the National Cancer Institute.

He is now professor of medicine at Duke University Medical Center and investigator, Howard Hughes Medical Institute.

Moss is deputy chief, Laboratory of Cellular Metabolism at the National Heart, Lung, and Blood Institute. The Young Investigator Award recognizes his contributions to defining the molecular mechanism of action of three bacterial toxins in cholera, traveler's diarrhea and whooping cough. These toxins modify special proteins that transmit signals from cell surface receptors to the adenylate cyclase system (APP). The APP system is critical to the normal regulation of cellular function.

Recipients of the annual AFCR Award are selected competitively from nominations received nationwide. Ordinarily one award is made, but the selection committee recommended a joint award for 1987 because of the superlative research accomplishments of Greene and Moss.
Hidden Contributions of Nurses Spotlighted in May

Any person who has participated as a research subject at NIH, or who has been a patient in a hospital anywhere, knows that it is nurses who make the daily differences in terms of care, comfort, understanding, and "getting things done in the system." Nursing duties that are often less visible, but just as important, include critical observations of a change in a patient's status, very complex decisions regarding the plan of care, the actions on behalf of a patient or family, the behind the scenes "pulling of strings" to make things happen and the passing on of information to assure continuity of approach day after day, around the clock.

Nurses are visible as care providers, teachers, coordinators and managers. Their roles as clinicians, advocates, and consultants are often less visible, and therefore not as frequently recognized and acknowledged. Nurses' work takes place in settings that vary from clinics to critical care units in every part of the Clinical Center. Their work is the "glue" that allows a complex place like the CC to keep going and fulfill its research mission.

The CC Nursing Department is extending the annual observance of National Nurses Day on May 6 to include a month-long celebration of nursing and the many ways that nurses make a vital contribution to clinical care, and, at NIH, to clinical research. The month began with the 13th Annual Nursing Research Symposium on May 1. This year's program, "Chronicity: a Challenge for Nursing," featured nursing research on topics related to the care of chronically ill patients, and drew papers and posters from nurse researchers all over the country.

The month will continue with a variety of activities in the different clinical areas, and will wind up on a lighter note with a Nursing Department picnic on May 30. The Public Health Service has developed a special poster identifying activities at each of its agencies. Check one for details on activities at the CC.

Sheila Santacroce, head nurse on 13 West, meets with patient Raymond Emerick of Pennsylvania.

Nurses Susan Gross, and Laura Govoni (foreground) work in the 11th Floor AIDS Clinic.

Nurse Gale Heavner, coaxes a young patient into cooperation in the 11th Floor ACRF Clinic.
Conference Focuses on Causes of Osteoarthritis

Studies of Kashin-Beck disease (KBD) may provide new insights into the cause of osteoarthritis, says Dr. Lawrence E. Shulman, director of the National Institute of Arthritis and Musculoskeletal and Skin Diseases.

He made the comment during a NIAMS scientific conference on KBD held here recently. KBD is an endemic, chronic, degenerative osteoarthritis affecting children and young adults who live in hilly, agricultural regions in Northern China, the Eastern Republic of the U.S.S.R., and Korea. The disease primarily affects families that subsist on poor land in remote, mountainous regions.

Dr. Leon Sokoloff, professor of pathology at the State University of New York at Stony Brook, and formerly an NIH scientist, said that the disease seemed to follow the Great Wall of China—from Siberia to Tibet.

"The disease is unique in that it has a selective target—the cartilage," Sokoloff said. In the majority of patients, the first signs are deformities of the fingers. The next stage is shortening of the fingers and toes. Patients with advanced cases of KBD develop sharply limited motion in weight-bearing joints such as ankles, knees, and hips. If the disease is particularly severe, the patient may become completely disabled.

The cause of KBD is unknown. Studies have shown that the disorder is acquired, rather than inherited, and investigators are pursuing several causal hypotheses, including: 1) selenium deficiency; 2) mycotoxins produced by fungi growing on water-soaked grain; 3) toxins in stagnant drinking water; and 4) overall nutritional deficiency.

Selenium is a trace mineral and an essential element in the diet, noted Dr. Orville Levander, U.S. Department of Agriculture. He said China has a severe shortage of selenium in the soil, especially in the mountainous regions where KBD is endemic. In addition, he said that the villagers' simple diet consisting of corn and wheat may contribute to the disease because, when these grains are picked early and stored, they develop mycotoxins or molds.

More than 2 million Chinese are estimated to be afflicted with KBD. Researchers said that 40 percent or more of the population of many villages is affected and, in some remote areas, more than 80 percent of the residents may have the disease.

Current measures to prevent the spread of KBD include providing villagers with clean drinking water and encouraging them to vary their diet with other sources of nutrients.

Dr. Carl Taylor, professor of international health at Johns Hopkins University and senior consultant for UNICEF in China, said that the study of KBD is a major program in China, but research efforts need to be coordinated.

"What is needed is some good solid epidemiologic work in areas of Asia where KBD is prevalent," he said.

In other areas of the world, osteoarthritis is generally a disease of the elderly.

"Its prevalence in younger people, as in the case of KBD, is unique and represents a significant opportunity to gain a better insight into the etiology, pathophysiology, and possible means of prevention of osteoarthritis," Taylor told conference participants. —Barbara Weldon

Poetry of Spring’ Theme of Asian Week

"Poetry of Spring" is the theme for Asian/Pacific American Heritage Week, which will be highlighted at NIH on Friday, May 8.

This year the "poetry" will be presented on the patio of Bldg. 31A from 11:30 a.m. to 1 p.m., and at the Clinical Center’s Masur Auditorium at 7:30 p.m.

Plan to treat yourself at mid-day on May 8. Sample various Asian foods for sale. Watch a demonstration of how to play the Japanese shakuhachi and other flutes. Learn how these instruments are made. Stroll over to the demonstration of Chinese papercraft. Learn how to prepare Chinese pastry.

That evening enjoy the "poetry" of spring at presentations of Indian music played on the vena and the mridangam; Japanese koto music; Korean kayagum; a traditional Chinese music ensemble; and the Vietnamese dan bau (a single string instrument) and the tan thap luc (a traditional 30-string zither).

A reception will be held in the first floor ACRF lounge immediately following the musical program. It is sponsored this year by the NIH Centennial Committee.

The 1987 Asian/Pacific American Heritage Week events at NIH are sponsored by the Division of Equal Employment Opportunity, the NIH Asian/Pacific American Cultural Committee, the Visitor Information Center, and the NIH Centennial Committee.

All events are free and open to the public. For further information call Fu Temple, 496-7219, or Dinah Bertran, 496-1776.
NIH'ers Honored by Secretary Bowen at DHHS Awards Ceremony May 4

Roscoy 1. Jennings of the Laboratory of Viral Diseases, NIAID, has 57 years of service, the longest number of years of service by a DHHS employee. His length of service citation read: “For dedicated and outstanding work performance as a Biological Technician for the NIAID, NIH.”

Carl A. Fretts, director, Division of Contracts and Grants, OD, won the Departmental Management Award “for extraordinary leadership ability and exceptional dedication to the improvement of research and development contracting programs at the NIH.”

Live for Tomorrow, Check Blood Pressure Today

May is National High Blood Pressure Month. The Occupational Medical Service is pleased to announce that blood pressure screening will again be available to NIH employees as a Centennial activity at the following sites around campus. Screening at each location will be conducted from 9 a.m. to 1 p.m.

- May 11—Bldg. 30, Rm. 132
- May 12—Bldg. 29, Rm. 115
- May 13—ACRF, 2nd Floor Cafeteria
- May 19—Bldg. 12A, Rm. 3026
- May 22—Bldg. 1, Wilson Hall
- May 26—ACRF Visitor Information Center, B1 level

Screening is also available in OMS-sponsored blood pressure clinics at the following sites and times:

- May 1-31—Bldg. 10, ACRF Main Health Unit, Rm. 6C506
  Mondays: 1:15-4:15 p.m.; Thursdays: 8:15-11:15 a.m.
- May 1-31—Westwood Bldg., Rm. 28
  8 a.m.-4:30 p.m. except Thursdays.
- May 1-31—Bldg. 13, Rm. G901
  8 a.m.-4:40 p.m. except Tuesday and Wednesday afternoons.
- May 7, 21—Blair Bldg., Rm. 110, 10 a.m.-12 noon.

Photo Competition Planned

The NIH R&W Camera Club will sponsor its annual NIH-wide photo competition on Tuesday, May 12 at 7:30 p.m., in Wilson Hall, Shannon Bldg.

All NIH employees and their families are invited to enter one or all of the categories: black and white prints, color prints and color slides.

Judges will be three well-known photographers. Cash awards will be made. Specific details of the competition can be obtained from the R&W.

10th Annual NIH Relay Scheduled for May 20

The NIH Health’s Angels running club has scheduled the 10th Institutes Challenge Relay for May 20. A new trophy will be inaugurated at this year’s event. Named in loving memory of one of the founding members of the club, the Allen Lewis NIH Memorial Trophy will be inscribed with the winning teams from all three divisions: all-male team, all-female team, and mixed team (members must include at least two females). Ribbons will be awarded to all runners.

The relay will begin at 12 noon in front of Bldg. 1. The teams are comprised of five runners with each running a ½ mile loop around Bldg. 1. A $5 entry per team will help defray the cost of the race. A post-race party is planned that afternoon at the FAES center. Entry forms and specific instructions are available at the R&W Activities Desk located in Bldg. 31, Rm. B1W30. Completed forms and payment in the form of a check to the R&W must be returned to the activities desk by Friday, May 16.

The relay is primarily intended to promote friendly and constructive competition among people at NIH. Participants of all levels of ability are welcome to share in this annual event.
Dr. George Khoury Dies; NCI Laboratory Chief

Dr. George Khoury, 43, chief of the Laboratory of Molecular Virology at NCI died of complications of lymphoma April 23 at NIH.

Khoury was a research specialist in gene regulation in mammalian cells using certain viruses as model systems. He was among the first to discover the importance of generic sequences known as enhancers, which play a key role in gene regulation.

He was author or coauthor of more than 140 articles in scientific journals and served on the editorial board of the journal Cell and the Journal of Virology.

A resident of Bethesda, Md., he was born in Pittsburgh and graduated from Princeton University and Harvard Medical School. He did his internship at Massachusetts General Hospital, then in 1971 became a research associate and scientist at the Laboratory of Viruses at NIH.

In 1976, Khoury became head of the virus tumor biology section of the Laboratory of Molecular Virology and in 1980 was made chief of the laboratory.

He was a member of the Society of Clinical Investigation, the American Society for Microbiology, the American Society for Virology, the American Society of Biological Chemists, and recently had been elected to membership in the National Academy of Sciences.

Khoury was named Outstanding Young Maryland Scientist in 1977, and in 1981 he received the Arthur S. Flemming Award for outstanding government service. He traveled and lectured widely in the United States and in Europe, and in recent years was an annual speaker for the Westinghouse National High School Science Competition winners.

Survivors include his wife, Marilyn, a daughter, Lisa, and a son, David, all of Bethesda, and a brother, Thomas, of Allentown, Pa.

First Ross Lecture Honors Proud Figure in NIH History

The first Griff T. Ross Memorial Lecture, entitled “From Choriocarcinoma to Pulsatile Secretion in Normal Humans: HCG from 1960 to 1987,” (a view of 27 years of research) was delivered recently by Dr. William D. Odell in the ACRF Amphitheater.

Dr. David Rodbard, chief, Laboratory of Theoretical and Physical Biology, NIDDK, introduced Odell, who was not only Ross’s collaborator and colleague, but also a friend of the Ross family. He is now chairman of the department of medicine at the University of Utah.

Prior to his lecture, Odell introduced Mrs. Ailene “Pinky” Ross, who was here to attend the lecture and, as a former NIH’er, to meet with her many friends and coworkers at NIH.

“I, as you are here to remember Griff and to talk a little about science too,” she said. By discussing the hormone human choriocarcinoma gonadotropin (HCG), Odell felt he could put the two together “for Griff and I started a lot of our work here studying HCG.”

Several major research advances were attributed to Griff Ross as an NIH scientist and physician. His studies on reproduction illuminated many aspects of pregnancy, including endocrine changes of the menstrual cycle and its disorders.

While at NCI, Ross and his colleagues developed a treatment for choriocarcinoma, a cancer of the placenta occurring as a complication of pregnancy. Actinomycin D was found to be an effective treatment, and the number of women’s lives saved from this disease increased dramatically.

These joint studies proved to be of major importance to the fields of medicine, physiology, biochemistry, and immunology. HCG is the major hormone secreted by the placenta during pregnancy and forms the basis for all pregnancy tests.

Ross and Odell Among First To Develop Assays for HCG

Ross and Odell were among the first to develop radioimmunoassays for HCG and, subsequently, the related pituitary gonadotropins human luteinizing hormone (HLH) and human follicle stimulating hormone (HFSH). Studies of these hormones were of fundamental importance in understanding the human ovulatory cycle. Odell and Ross, with colleagues including the late Dr. Mortimer B. Lipsett (former director of NICHD, the Clinical Center and NIADDK) used these assays to establish the hormonal changes during the normal menstrual cycle, during use of oral contraceptives and in a variety of conditions such as infertility and hirsutism. They described the syndrome of the “short-luteal phase” or “luteal insufficiency”, a treatable form of infertility. Ross studied the biochemistry and immunology of HCG and its subunits with Dr. Judith Vaitukaitis, now of the Division of Research Resources. He also made major contributions to the study of ovarian physiology, including the control of follicular atresia.

For 21 years, from 1960 to 1981, Ross was in the forefront of endocrinology at NIH. When he retired in 1981, he had been deputy director of the Clinical Center since 1976. He then became professor of medicine and associate dean for clinical affairs at the University of Texas Medical School. Earlier this year the Griff T. Ross Memorial Library was dedicated at the department of obstetrics, gynecology, and reproductive sciences, University of Texas Medical School at Houston. In addition, he served as 57th president of the Endocrine Society and received its highest honor, the Fred Conrad Koch Award.

HCG May Be Used as Tumor Marker

After giving a historical perspective of his work with Ross, Odell described recent studies from his own laboratory. These include development of new, highly specific radioimmunoassays for HCG and HLH. Odell reported that HCG is present in the serum or plasma of normal subjects, that it increases following injection of LHRH (luteinizing hormone releasing hormone), and that it fluctuates. This suggests that it is secreted in an episodic or pulsatile fashion. These findings promise to further revolutionize understanding of hormonal control of human fertility. Further, these findings imply that HCG may be used as a tumor marker.

“The choice of Bill Odell to give the first of what I suspect will be an annual series was appropriate,” said Dr. Saul Rosen, deputy director of the Clinical Center. “Bill was an early disciple of Griff’s and has gone on to a distinguished career in American endocrinology.”

Dr. Phillip Gorden, director of NIDDK, said that “Griff Ross had a profound effect on the entire NIH community. His courage inspired us, his wisdom enhanced us, and his deep dedication to scientific principle enriched us. He added humanity, and there can be no greater gift to medicine.”—Hilda Madine
Dr. Thomas L. O'Donohue Killed in Auto Accident; Former Chief, NINCDS Neuroendocrinology Unit

Dr. Thomas L. O'Donohue, former chief of the NINCDS Neuroendocrinology Unit, was killed Apr. 14, in St. Louis, in a head-on collision as he drove home from a basketball game.

After 4 years with NINCDS, he left the institute last spring to become chief of central nervous system research with the Monsanto-Searle pharmaceutical company in St. Louis.

Former coworker Bibie Chronwall remembers O'Donohue as "a friendly, cheerful, caring person, as well as a good scientist. It is hard to believe someone so young and vital could be struck down so suddenly."

In 1985 the Maryland Academy of Sciences named O'Donohue a Distinguished Young Scientist "for his identification of multiple neurotransmitters in neurons of the central nervous systems of mammals," an achievement that dispelled the widely held belief that nerve cells contain only one neurotransmitter.

O'Donohue received his Ph.D. in pharmacology in 1980 from a joint graduate program of the National Institute of Mental Health and Howard University. He received his B.S. in biology from Bucknell University in 1976.

In lieu of flowers, the family asks that donations be sent to: Howard University, c/o Dr. V. John Massari, Department of Pharmacology, College of Medicine, Washington, DC 20059. Checks should be made payable to Howard University and marked clearly as donation.

Free College Courses at NIH

Are you interested in moving ahead in your career? The Training Development Services Program (TDSP), a continuing education program for NIH staff interested in improving job skills and earning college credit, offers a range of courses including English, math, American government, computer applications, psychology, career development and study skills.

Courses are taught by Montgomery College faculty before and after regular work hours in Bldg. 31. They are approved by NIH as job-related, and provide skills that can be used for career mobility or to improve present job performance.

Applicants must meet the following criteria to be eligible to enter TDSP: GS-8 (or WG equivalent) and below NIH employees who are in one-grade promotional series; have permanent appointments and work at least 32 hours per week; have a high school diploma or GED but do not possess a bachelor's degree; and have been employed at least 1 year at NIH.

For more information contact the TDSP office at 31/B2C17, 496-9228, or come to one of the following orientations held from noon to 1 p.m.

May 6—Federal (B1-119)
May 19—Landow (Conf. Rm. E)
June 9—Bldg. 10 (11th flr. solarium)
June 16—Bldg. 31 (Rm. B2C07).

Getting To Know Kermit

Due to the many requests for more training on Kermit, another "Getting to Know Kermit" seminar will be offered by the DCRT Training Unit. This seminar will cover such topics as transferring files, accessing Kermit, and learning basic Kermit commands such as the server mode and the send/receive mode. This seminar will emphasize TSO Kermit and MS-DOS Kermit for the IBM-PC.

The seminar will be held on May 22, from 1 to 3 p.m. in Bldg. 12A, Rm. B45. To register for the seminar call the Training Unit, 496-2339. Applicants will be accepted on a first call basis.

Facts on Distress

Topics covered in NHLBI's fact sheet Facts About Respiratory Distress Syndrome include risk factors for RDS and methods currently being used to prevent this serious lung disease, which strikes about 1 in every 100 newborn babies and is strongly associated with prematurity.

Single copies are available free of charge; call 496-4236.
The NIH Training Center of the Division of Personnel Management offers the following:

**Courses And Programs**

**Dates**

**Management and Supervisory 496-6371**
- Supervising in the Federal Wage System 6/4-8
- Communication for Results 6/5-25
- The Federal Budget Process 6/6-5
- Successful Middle Management 6/9-11
- Performance Appraisal Counseling 6/10-12
- Report Writing 6/2-4
- Conducting Effective Meetings 7/13-14
- Interpersonal Relationships 7/15-16
- Working with Personal MBTI II 6/19
- Why Can't They Hear Me? 6/18

**Office Skills 496-6211**
- Effective Decision Making 6/8-9
- Working with Personal Differences MBTI for Support 6/16-16
- Improving Voice and Diction 6/29-30
- Introduction to Working at NIH 6/20-21
- 6/17-18

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**Dr. Rodbell and Gilman Share Lounsbery Award**

Dr. Martin Rodbell, scientific director at the National Institute of Environmental Health Sciences, recently received the Richard Lounsbery Award for extraordinary achievement in biology and medicine. Rodbell shares this award with Dr. Alfred G. Gilman, a current grantee of NIGMS.

The Lounsbery Award includes a $50,000 prize, $20,000 travel money to allow professional lecture and study trips to France, and a silver medal. The award is conferred annually by the National Academy of Sciences and the French Academy of Sciences to either an American or a French researcher to recognize "extraordinary scientific achievement in biology and medicine."

Rodbell and Gilman were each involved in determining the role of a class of proteins in mediating the actions of cell-surface receptors in response to light, hormones, and chemicals. These proteins play key roles in cellular communication both in plants and animals, and are the primary targets in the development of such diseases as cholera, whooping cough, and rabies. They are also related both in structure and function to cancer-producing oncoproteins.

Rodbell has been a scientist at NIH for over 30 years. Prior to becoming scientific director at NIEHS in 1985, he was chief of the Laboratory of Nutrition and Endocrinology for the then NIADDK. He is the recipient of numerous awards, including the prestigious Gairdner Award, the Jacobaeus Award from the Scandinavian Endocrine Society in Norway and the Superior Service Award from the then DHEW.

Gilman, a professor and chairman of the department of pharmacology, University of Texas Health Science Center at Dallas, was a 1971 graduate of the NIGMS Pharmacology Research Associate Program. He has also served as a member of the Board of Scientific Counselors for NHLBI.

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**GSA Creates Hotline**

Do you have a complaint about the quality of a supply item you obtained from GSA's Federal Supply Service? If so, call the Quality Hotline (FTS: 557-1368; commercial: 703/557-1368). Your call will be recorded 7 days a week, 24 hours a day; a specialist will get back to you within 24 hours.

FSS wants to hear about your quality problems. You can call the hotline to provide feedback, to get information or assistance on quality problems or to complain. A specialist will follow up on your inquiry and advise you of actions taken. Give the hotline a try.

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**Volunteers Needed for Pregnancy Study by NICHD**

The NICHD is seeking first-time pregnant women and their spouses for a project concerning emotions and feelings, including tension or worries, during pregnancy. Volunteers are needed close to the 28th week of pregnancy. For further information call Nancy Gist, 496-6832.
Fidget Those Extra Pounds Away

Ever wonder why everyone else on a diet is losing weight faster than you?

Well, an NIDDK study conducted by Dr. Eric Ravussin has found that the amount of energy individuals expend may vary as much as 800 calories per day.

Researchers studied 177 subjects—people of similar age, sex, weight, and body composition—who lived in a respiratory chamber for 24 hours while their energy levels were monitored for oxygen consumption and carbon dioxide production.

Radar guns and wrist motion detectors recorded their level of fidgeting, including toe tapping and finger drumming. By the end of the 24-hour period, their nervous movements consumed between 100 and 800 calories. Much of the variability in energy expenditure by the participants was accounted for by their fidgeting.

Researchers say an individual's tendency to fidget may play a role in determining differences in energy expenditure and tendency toward obesity. A defect in energy expenditure may be a factor in the development of obesity.

In addition, the research shows that daily caloric recommendations to meet a person's energy requirements may not be accurate for much of the population.

Ravussin, who works at NIDDK's clinical research facility in Phoenix, says that further study of factors influencing energy expenditure can help explain the causes of obesity and determine who may be prone to being overweight.

The respiratory chamber may also provide an important tool for studying obesity and disorders that affect body weight, such as thyroid conditions, anorexia nervosa, and cancer.

Four Elected to NAS

Four NIH scientists were recently elected to membership in the National Academy of Sciences.

They are Drs. George Khoury of NCI (who passed away on April 25), Bernard Moss of NIAID, Thomas Reese of NINCDS and Martin Rodbell of NIEHS.

Khoury, 43, was a leading molecular biologist and chief of the Laboratory of Molecular Virology. He was a specialist in gene regulation in mammalian cells, using certain viruses as model systems, and was among the first to discover the importance of genetic sequences known as enhancers, which play a key role in gene regulation.

Moss, 49, is chief of the Laboratory of Viral Diseases. Long a leader in research on viral gene expression, Moss is perhaps best known for his discovery of messenger RNA capping, an important maturation step for the molecule. He is currently exploring the use of recombinant vaccines to treat such illnesses as AIDS, herpes, influenza and rabies. His AIDS vaccine has already been given to humans in Africa; results are pending.

Reese, 51, is chief of the Laboratory of Neurobiology, an NINCDS outpost at the Marine Biological Laboratory in Woods Hole, Mass. He is trying to understand a variety of nervous system functions, including synaptic transmission and axoplasmic transport.

Rodbell, 61, is scientific director at NIEHS in North Carolina. His research achievements are profiled elsewhere in this issue—he just won the Lounsbery Award in addition to NAS membership.

Normal Women Volunteers Wanted

The Developmental Endocrinology Branch, NICHD, is seeking healthy women, ages 18-40, for menstrual cycle studies. Participants must be free of medical illness, currently taking no medication (including birth control pills) and have regular menstrual cycles.

For further information call Dr. Golden or Dr. Nieman at 496-6909 or 496-6751.