NCNR Enters Third Year

Nursing Center Broadens Research Role

By Esther McBride

From promoting infant health to easing the concerns of the elderly, in hospitals, nursing facilities, schools and homes, nurses serve every segment of society. They function not only as nurses, but also as teachers, scientists, counselors, administrators and public health experts.

Research supported by the NIH National Center for Nursing Research reflects these diverse roles. Now entering its third year, NCNR funds more than 130 grants to study better ways nurses and other caregivers can promote health, help prevent disease, and care for people with acute and chronic illnesses.

"The creation of NCNR within NIH has moved nursing research into the mainstream of health care research and has opened up new opportunities to set research priorities and to collaborate with scientists from other disciplines," says Dr. Ada Sue Hinshaw, NCNR's first permanent director.

Nurse scientists are developing improved methods to control pain, testing educational programs to help people manage the side effects of radiation therapy, and assessing the use of respiratory muscle training for patients with certain types of lung disease. They are also looking for better ways to care for individuals with diabetic conditions or the complications of arthritis or heart disease.

NCNR grantees are concerned with the behavioral and environmental factors that contribute to illness and disability. NCNR-funded investigators are evaluating self-management programs to help people control obesity associated with hypertension, diabetes and other health problems. Nurse scientists also are investigating ways to help children and adolescents deal with stress or cope with chronic disabilities. They are looking for ways to assist families who have children with behavioral problems.

Researchers are testing methods to help patients in nursing homes deal with depression. They are evaluating the delivery of care across health care settings and developing programs to ease the patient's transition from hospital to home.

In the area of women's health, investigators are studying mood disorders associated with premenstrual syndrome and looking at various aspects of menopause. They are seeking ways to increase the number of older women who

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An Appreciation

Art Classes Offer Enrichment

By Diane Maisel

Though best known for its science courses, the FAES Graduate School also features classes in photography, language, public speaking and art. The art department is distinguished by two personable lecturers, each one very different. Dr. Luigi Giacometti grew up surrounded by the Renaissance works he obviously relishes talking about; B.J. Wilson offers a journey through the world of both traditional and modern art and then skillfully draws her classes along with her—sometimes with an artist, sometimes in a time period—to form some sort of feeling about what is going on.

As an art historian, Wilson takes the viewpoint of a painter who has exhibited all over the United States and in Europe. I have just spent a most rewarding year in her two evening classes where it was a treat for all of us to listen to a painter talk about Rembrandt or Van Gogh. As an art historian, she not only helped us see and identify growth patterns and the development of ideas, but guided us in knowing what to look for in works we had never seen before. "If you have some idea of what to look for," says Wilson, "going to a museum is just that much more fun..."

As a group we made occasional extra trips to the National Gallery of Art to focus on some aspect of that splendid collection that related to a recent lecture that had been filled with slides, anecdotes and insightful information. After the last class was officially over, we got to see the Gauguin show with her as a group. These special tours brought all that we had learned in class into realistic focus; it was at times like those, looking at priceless works of art with greater understanding, that we realized with delight that a new perspective had been added to our lives.

Are you a scientist who has "never had time" to study art? The FAES classes are a fine opportunity to enhance your creative instincts, extend your appreciation in a possibly unknown area, and expand your curiosity about how the world has been viewed. One of Wilson's favorite quotes is by Leonardo da Vinci: "Artists are the best scientists; not only do they observe things better than other people, they think about what they see and then tell the rest of us about it in pictures."

B.J. Wilson's next personally guided "tour" begins in mid-September. You can audit it or take it for credit. Mark your mental calendar now so you won't miss the trip. Also, please join us Thursday, July 28 in the Visitor Information Center, Bldg. 10, Little Theatre, from noon to 1 p.m. for Wilson's preview lecture entitled: "A Better Understanding of Sculpture; a Sample Art Appreciation Lecture Offered by FAES."

Auditions Set for Musical

Auditions for the NIH R&W Theatre Group's fall musical production "The Forgotten Fifties-A Musical Review" will be held Aug. 14 and 15 at 7 p.m. in the Clinical Center's Masur auditorium.

Director Alice Page Smyth is looking for soloists, ensemble singers, instrumentalists, dancers, production helpers and a choreographer. Prepared materials for auditions is not required, she said.

"The Forgotten Fifties" will feature dozens of favorite songs that were not created especially for stage shows or movies. These include such favorites as "Old Cape Cod," "Unforgettable" and "Mockingbird Hill." The new NIH production is the first since last year's record-breaking, "Magical Musicals of the 1940's," which raised $3,000 for the NIH Patient Emergency Fund.

Opening night for "The Forgotten Fifties" is Friday, Nov. 4. For audition information, call Alice Page Smyth at 921-4358 after 11 a.m. or Louise DeSimone at 703-356-9480.

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Dr. Anthony S. Fauci, NIAID director (standing, r), recently presented NIH Merit Awards to eight NIAID staff members. The awards were given "in recognition of significant scientific research or administrative support efforts which have contributed substantially to the accomplishment of NIAID's major mission."

Sitting (l to r) are Dr. Carla B. Petinelli, medical officer in the Treatment Branch, AIDS Program (AIDSP); Claudia Good, committee management assistant, Extramural Activities Program; Dr. Judy E. Feinberg, expert, Treatment Branch, AIDSP. Standing (l to r) are Holly A. Smith, biological laboratory technician in the Laboratory of Clinical Investigation; Dorothy R. Alberti, patient care coordinator, LCI; Dr. Robert Mark Laidlaw, Butler, visiting scientist, Laboratory of Virological Diseases; Roger E. Pelts, administrative officer, Office of the Director, NIAID; and Fauci. Not pictured is Dr. David Sacks, microbiologist in the Laboratory of Parasitic Diseases.
Recombinant Interferon Corrects Inherited Defect Underlying Serious Childhood Disorder, NIAID Researcher Finds

By Laurie K. Doepel

Interferon therapy may be able to correct an inherited problem underlying a rare but life-threatening group of childhood diseases, according to a new study. Dr. John I. Gallin, director of the Intramural Research Program at the National Institute of Allergy and Infectious Diseases and senior investigator on the study, reports that the data give "the first reason to be optimistic that we will be able to correct the host/defense defect in chronic granulomatous diseases (CGD) of childhood." The defect leaves the immune system's white cells defenseless against certain infectious agents.

Based on the study's findings, NIAID will soon begin enrolling patients in a worldwide, multicenter clinical trial of the drug, recombinant human interferon (rHuIFN) gamma. If this trial confirms the initial results, the CGD defect may well be the first such defect corrected by a drug.

CGD affects one in 1 million persons and usually develops in early childhood. The distinguishing mark of the disease is serious, non-viral infections that recur at a rate of about one per year. CGD patients also often have excessive inflammatory reactions. These reactions are manifested as chronic inflammatory conditions such as gingivitis (swollen, inflamed gums), grossly enlarged lymph glands in response to minor infections, or tumor-like masses called granulomas. While not malignant, granulomas can cause serious problems by obstructing vital body organs in the gastrointestinal and genitourinary tracts.

Because the defect causing CGD can be inherited in different ways—as a dominant trait from one parent, as a recessive trait from both parents, or as a sex-linked trait from the mother—CGD actually represents a group of diseases.

Regardless of how a person inherits the defect, though, the result is the same: phagocytes (such as neutrophils and macrophages, scavenger cells of the immune system) fail to produce the chemicals needed to kill most fungal and bacterial invaders. These chemicals, which include hydrogen peroxide and other oxygen free radicals, are generally toxic to most cells, but the immune system has harnessed their toxic potential to benefit our health.

In the early 1980's, laboratory experiments established that the body produces interferon gamma to enhance the killing activity of phagocytes. Inspired by this finding and other preclinical work, Gallin decided to evaluate further the therapeutic potential of interferon gamma in patients with CGD.

In a controlled experiment, Gallin and colleagues took phagocytes from 30 CGD patients and incubated them with rHuIFN-gamma for 3 days. The scientists measured an increased production of superoxide, an important oxygen free radical, in cells from 19 of these patients. Cells that were not cultured with rHuIFN-gamma produced little or no superoxide.

Encouraged by these results, the scientists chose three patients whose cells had responded well in the laboratory studies and gave them injections of rHuIFN-gamma. Single doses administered daily or every other day for a total of five or six doses resulted in measurable increases in superoxide production in some phagocytes. More importantly, significant increased killing of the bacterium Staphylococcus aureus was noted. These effects persisted for between 1 to 2 weeks after the final injection. Thus, in addition to correcting the host/ defense defect, rHuIFN-gamma also restored the killing function to these cells.

One theory about how rHuIFN-gamma enhances superoxide production is that it stimulates the synthesis of the protein cytochrome b. Cytochrome b helps shuttle electrons, negatively charged particles, between the serial products of the metabolic pathway that generates oxygen free radicals. Some CGD patients' phagocytes contain cytochrome b, while other patients' phagocytes are deficient or totally lacking in cytochrome b.

In laboratory tests, nearly all (15/16) of those patients whose phagocytes contained cytochrome b responded to rHuIFN-gamma; only 4/14 of those patients whose phagocytes produced no detectable cytochrome b responded. "Patients who have a regulatory defect in the production of cytochrome b but who don't have a total deficiency in the capacity to produce it will respond to interferon," Gallin notes, "and one can demonstrate the production of cytochrome b in these patients after interferon therapy."

An understanding of the basis of CGD bears on many other inflammatory diseases involving problems in this metabolic pathway. Oxygen free radicals, while deficient in CGD patients, are overabundant in other disease states such as cachectics, vasculitis, rheumatoid arthritis, adult respiratory distress syndrome, and amyotrophias that may develop following myocardial infarctions or stroke. CGD patients represent a spectrum of abnormalities in this metabolic pathway, and thus the disease can serve as an important model for studying this pathway's control.

While rHuIFN-gamma may not be markedly effective in all CGD patients, it may be somewhat effective in most patients, Gallin says, because it probably enhances phagocyte function in less specific and yet undetected ways. Speculating on broader implications of a therapeutic role for rHuIFN-gamma, he said, "If we can demonstrate efficacy in CGD patients, then this drug may also be effective in other patients with similar host/defense deficiencies, such as trauma patients, those with certain malignancies, the elderly, and neonates."
Five Named to Child Health Advisory Council

Five new members were recently appointed to serve on the National Advisory Child Health and Human Development Council.

The new members are Dr. R. Don Blim, a pediatrician in Kansas City, Mo.; Dr. Ralph M. Gibson, a professor of psychology at the University of Michigan Medical School, Ann Arbor; Dr. Stuart Handwerger, a professor of pediatrics and physiology at Duke University, Durham, N.C.; John A. Meyers, chairman emeritus of the Magazine Group of Time, Inc., New York City; and Dr. Keith G. Scott, coordinator of research at the Mailman Center for Child Development at the University of Miami in Florida.

NIDR Council Members Named

Three new members have been named to the National Advisory Dental Research Council. They are Drs. Kathleen M. Lukken, William D. McHugh and Gideon A. Rodan. Lukken is director of the dental hygiene program at Weber State College in Ogden, Utah. She served as a public health hygienist for the Utah State Division of Health prior to accepting her present position at Weber State College in 1975. She is also a past president of the Utah Dental Hygienists’ Association.

McHugh is director of the Eastman Dental Center, and associate dean of the school of medicine and dentistry at the University of Rochester in New York. He is a past president of the American Association for Dental Research, and the British Society of Periodontology and currently serves as the president of the International Association for Dental Research.

Rodan has been the executive director of the department of bone biology and osteoporosis research at the Merck, Sharp and Dohme Research Laboratories in West Point, Pa., since 1985. Before that he was head of the department of oral biology at the University of Connecticut School of Dental Medicine.

The new members replace previous council appointees Dr. Helmut Zander, Dr. Lucille Hurley, and Dr. Winston Frenzel, whose 4-year terms expired last October.

Herpes Prevention Study

For patients with recurrences on thighs, buttocks, back, arms, lips or face. Free evaluation and treatment. Payment offered for participation in selected studies. Call Peggy, 496-0309.

Kings Dominion Trip

R&W is planning a trip to Kings Dominion on Saturday, Aug. 20. Cost is $30 per person, which includes transportation and park admission.

The bus will leave Bldg. 3IC at 9 a.m. and return at approximately 7 p.m.

Sign up at the R&W Activities Desk, Bldg. 31, Rm. B1W30, 496-4600.

Bus to the Beach

R&W is planning a trip to Ocean City, Md., to spend a day at the beach, on Friday, Aug. 12. The cost is $22 per person. (Payment is required upon reservation.)

The bus will leave Bldg. 3IC at 7 a.m. and will leave the beach at 7 p.m.

Interested persons should contact the R&W Activities Desk, Bldg. 31, Rm. B1W40, 496-4600.
Nurse Moves to Pakistan To Train Freedom Fighters

By Elyn J. Pollack

Many donate money, some donate time to help raise that money, but few donate eight months of their lives to help refugees in Third World countries. Clinical Center nurse Sheila Lutjens is one of those rare people.

Lutjens recently resigned as a CC nurse on 5 East and moved to Pakistan to help train the mujahidin, or Afghan freedom fighters, as medics so they can go back into Afghanistan and set up health clinics.

"I decided to volunteer after I read an article in a journal about a nurse who had done the type of work I will be doing," she said. "I always wanted to do this type of thing—work in a Third World country."

Lutjens will be working with the International Medical Corps (IMC), a Los Angeles-based organization with more than 40 clinics in Afghanistan and a $2.5 million annual budget. IMC, one of the largest "underground" medical efforts in the world, was founded in 1984 by Dr. Bob Simon, a Los Angeles physician, in response to the need for medical care in Afghanistan. Simon initially set up one tent clinic in the Kunar River Valley, a scene of heavy fighting in the then four-year-old war between the Western-backed mujahidin and the Soviet-supported government in Kabul.

He soon realized that one tent clinic would not be sufficient. Most medical facilities in Afghanistan had been bombed and the physicians killed, imprisoned, or driven into exile. Once-controlled diseases such as malaria reappeared and the mortality rate for children under the age of five was close to one in three.

Instead of simply treating patients, the IMC clinics are set up to train mujahidin as medics. Each clinic is comprised of eight health care professionals—including nurses, physicians, and physician assistants—who spend eight months training a "class" of freedom fighters. The "students" must pass a screening process, and together they represent all the Afghan tribes. Their basic education is at the high school level, according to Lutjens. IMC volunteers teach the freedom fighters to treat war wounds and any diseases that are prevalent in that area. An estimated 50,000 patients are treated each month by IMC-trained Afghan medics in rural clinics carved out of caves or hidden in bunkers.

The health care professionals also are screened before being accepted into the volunteer program. Lutjens sent a resume and letters of recommendation to IMC, was interviewed over the telephone, and interviewed a second time by a New Jersey nurse who had been to Pakistan.

"IMC is doing a lot of good and making a difference. We are not just going in and giving health care; we are teaching Afghans how to take care of themselves." [3]

Normal Volunteers Needed

The Laboratory of Neuroscience, NIA, is seeking male and female volunteers.

Volunteers must be in good health and free of other medical problems.

For further information contact Beth Trotti, 496-4754. [3]

Stipends Available From FAES

FAES is administering special funds known as Wellcome Stipends to augment the stipends of postdoctoral level guest workers at NIH. Depending on the total funds that are available and the number of eligible applicants, a maximum of $3,600/year ($300/month) may be granted to each approved individual as an income supplement to a maximum total family income of $15,000/year plus $1,000 for each dependent including spouse.

The selection committee will consider the scientific merit of the research to be conducted as well as need and professional qualifications of the applicant.

Awards are made twice a year, Mar. 31 and Sept. 30 for the 12-month period beginning Apr. 1 and Oct. 1, respectively. Applications are being accepted now for the awards to be made on Sept. 30; deadline date is Aug. 26. Forms are available in the FAES Business Office, Bldg. 10, Rm. B1-C-18 or by calling 496-7976. [3]
NCNR

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perform breast self-examination to detect cancer.

Research on the causes and prevention of premature birth and the care of low birth-weight infants is a high priority at NCNR. Scientists are designing clinical interventions to benefit minority and disadvantaged populations who are at high risk for premature birth, and are studying the effects of educational programs in nutrition and other health-related areas on pregnant women and mothers. They are also investigating ways to help prevent teen pregnancy.

NCNR grantees are studying infants born to mothers who carry the AIDS virus, and are following the growth and development of those infants who carry the virus. Other NCNR studies address the physical, environmental and behavioral nursing needs of AIDS patients.

NCNR has cofunded AIDS outreach conferences to give information to health care practitioners on the care of AIDS patients and their families. Future NCNR AIDS research will explore approaches to changing high-risk behavior in those infected or at risk of AIDS infection.

Researchers are seeking better methods for managing the diseases of the elderly, from prevention of osteoporosis to speeding recovery from hip fracture. They are testing techniques to control urinary incontinence and ways to assist patients with Alzheimer disease and their families.

Studies are underway to develop innovative systems of nursing care to help speed recovery from illness and reduce the time patients spend in the hospital. NCNR-supported researchers also are studying the preparation of family caregivers to help patients complete recovery at home.

The ethical questions concerning patients on life support systems or resuscitation of the terminally ill are of increasing concern. Studies are planned to provide a better basis for decision-making in these areas.

Responding to the issue of widespread nursing staff shortages, NCNR recently sponsored a conference to identify research needed to help solve the problem. A report of the conference will be issued in the fall.

The establishment of the center also has created new research training opportunities. "The NIH award mechanisms, particularly career development awards, now allow nurse scientists to obtain training beyond the doctoral level and throughout the person's research career development," says Hinshaw.

"These new opportunities for nursing science enhance our ability to support research that will help promote good health for all Americans and improve the care of people with acute and chronic illnesses," she added.

A New Research Center

The National Center for Nursing Research has completed its second year at NIH. After the center was established by Secretary Bowen in April 1986, nine people from the Division of Nursing, Health Resources and Services Administration, moved to a basement office in Bldg. 38A and worked with Dr. Doris Merritt and several other members of the NIH staff to begin building the structures and systems needed for a nursing research program at NIH.

The NCNR began with 52 grants, initially supported by the Division of Nursing. Today, with a staff of 32 people, the center supports 131 research and research training grants. In October 1987, the NCNR's director, Dr. Ada Sue Hinshaw, presented the center's 23-member charter staff with the first NCNR Director's Award, acknowledging their hard work and dedication.

Outreach conferences for health-care givers cofunded by NCNR and NIAID will lead to better patient care.

Charter Staff Honored

The workers who are credited with getting the NCNR off the ground are:


Nurse researchers are seeking ways to increase the number of older women who perform breast self-examination to detect breast cancer.
NIH NURSING

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to acquaint nurses with NIH and its mission of research, had as its headline: “At NIH, You’ll Do Things That Haven’t Been Discovered Yet.”

“Our research showed that nurses in our own area didn’t know what NIH was all about,” said Feldman. “They didn’t realize we were a regular hospital, with regular patients. So we had to tell them.”

According to surveys and interviews with members of various focus groups at NIH and nationwide, there were specific areas where the public’s image of nursing fell short of the profession’s view of itself.

“We polled nurses to see what we were doing wrong,” says Feldman. “And they told us the things that were important to them.”

One of the things that nurses felt could be handled better was delegation of authority on the patient care scene. “We found that a lot of nurses want more independence,” said Feldman. “They want to be responsible for some of the decision-making.”

Along the same lines, nurses said that in an ideal situation, they would participate in organizational decisions as well as clinical decisions. “They are an important part of the medical team,” said Feldman. “And they want to be thought of as such. Decision-making is one of the most important parts of any team. They have a profound impact, thus they should be included.”

In response to these ideas, one advertisement that ran in the Washington Post began with the headline: “At NIH, Nurses Work With Our Doctors, Not For Them.”

“We got an enormous response to that ad,” Feldman said. “Apparently the feeling was the same with many nurses across the country.”

The ad that received perhaps the most and best response was more of an announcement of recognition than an ad. It was a 2/3-page newspaper ad that ran in January 1988 and identified, by name, 160 nurses for their outstanding work at the Clinical Center. It was a public thank-you addressed to NIH’s nursing staff.

“I got calls and letters from the American Nursing Association, from the Undersecretary of HHS and from plenty of nurses everywhere, telling me what a great thing that ad did for nursing,” Feldman said. “Now hospitals all over the country have run similar ads. As the saying goes, imitation is the sincerest form of flattery.”

At the request of nurses polled, some ads for the campaign were run in general audience magazines, also. “The nurses felt that this view of nursing should be shared with everybody, not just people in the medical profession,” commented Feldman. “We ran ads in Time, Newsweek, The New York Times Magazine, and a few other general interest journals.”

The recruitment and retention campaign does not end with ads. Other concerns voiced by nurses include provisions for education and professional counseling and therapy for high stress patient care such as pediatric oncology.

“Our Professional Update Program has really taken off,” remarks Feldman. “We’ve received more than 200 responses and we’ve completed two courses of it already.”

The PUP program offers training to registered nurses who, for various reasons, have been out of the field for a year or two. After finishing the class, which provides current information on nursing topics, many of the nurses find permanent positions on NIH’s staff.

Even though the campaign has proven overwhelmingly successful (91 of the 98 vacant positions have been filled, prompting Congress to grant 60 more FTE’s to the CC as of May 1988), Feldman and her department are not resting.

New programs and projects targeted at minority nursing institutions, and nurses specializing and experienced in AIDS patient care, are in various stages of completion.

“In any situation, you have to look at the long-range effect,” she says. “This is a 5-year plan. It is an ongoing challenge to recruit and keep good nurses on staff here. We still have a lot to do. But we’re going to do it.”

Dr. Wayne C. Koff was recently named chief of the newly renamed Vaccine Research and Development Branch in the Acquired Immunodeficiency Syndrome Program, NIAID. He had been acting chief of the branch since January. As chief, he will coordinate, manage and encourage research and development of AIDS vaccines by biomedical institutions and drug companies, and will coordinate AIDS vaccine trials in NIAID’s vaccine evaluation units. Prior to joining the AIDS Program, he participated in the NIH Grants Associates Program. Among his scientific interests are virology, immunology, antiviral chemotherapy, lymphokines/immune modulators as well as vaccines.
Friedman Leaves DRG

Dr. Mischa E. Friedman recently retired from federal service after almost two decades with the Division of Research Grants. At the time of his retirement, he served as associate director for referral and review and chief of the Referral and Review Branch.

At his retirement party held recently in the Westwood Bldg., Dr. Jerome G. Green, director, DRG, commented on Friedman’s many contributions to NIH and in particular to the extramural research community. Friedman was also widely praised for his management abilities and input into maintaining the integrity of the NIH peer review system.

Friedman first came to DRG in 1970 as executive secretary of the allergy and immunology study section, one of DRG’s many initial review committees. In 1976, he was named assistant chief for clinical sciences review in DRG’s Referral and Review Branch.

NIH Intramural Scientists Urged To Submit Nucleotide Sequences to GenBank

NIH scientists who determine nucleotide sequences should submit them directly to GenBank, a computerized data base of DNA and RNA sequences. GenBank was established by NIGMS in 1982 in response to the growing need to store sequence data in a timely, accurate and easily accessible manner. Today, GenBank (which is cosponsored by other NIH components and federal agencies) contains more than 18,000 nucleotide sequences from organisms ranging from E. coli to humans. These sequences are available on magnetic tapes, on floppy diskettes, or “online” in several computer systems.

In the past, data were added to GenBank manually by technicians who screened scientific journals for newly published sequences, annotated them for origin and sites of biological significance and entered them into the data bank. Now, however, sequences are being determined so rapidly that it is no longer possible for the GenBank staff to keep the data base current. The problem will grow in the near future as efforts to map and sequence complex genomes intensify. Therefore, scientists are now being urged to submit new sequences to GenBank at the same time that they submit the sequences to journals.

NIH scientists can submit sequences via DCRT’s DESystem–10 if they are registered users of the system. (To register, call 496-6146.) The file DNA.GBSUB.FRM contains the most current data entry form complete with instructions on how to fill it in and send it to GenBank. It is also possible simply to search and compare GenBank sequences in DESystem–10. The command HELP GENBANK elicits several screens of information about the contents of GenBank and how to search the data base.

Intramural scientists may also search GenBank with a new, experimental system called GenInfo, which will be offered to NIH computer users starting in September. Developed by the National Library of Medicine, GenInfo will provide easy-to-use, menu-based software for querying GenBank as well as 11 related molecular biology data bases. The system will also include a GenBank submission form file. For more details on GenInfo, call Jody Cullen, 496-2475.

Additional information about GenBank is available from the contractor, Intelligenetics, (415) 962-7364. Questions about data submission are answered by the subcontractor, Los Alamos National Laboratory, (505) 665-2177.

Travelogue Highlights NIA Awards Ceremony

The National Institute on Aging recognized employees recently at an awards ceremony that provided an unexpected treat to attendees. From the depths of the Amazon to the heights of Mt. McKinley, staff witnessed a captivating slide presentation and travel lecture by Dr. Richard Hauser, a retired ecologist and botanist from the State University of New York.

Slides depicted awe-inspiring fjords of Norway as Hauser retraced his voyage through Northern Europe northward above the Arctic Circle to capture the “setting of the midnight sun.” Viewers were treated to striking contrasts as they journeyed with Hauser from the North African Sahara to volcanic regions of Argentina where they glimpsed the rare guanaco (a close relative of the llama) once hunted by native Indians and settlers and now returning from the brink of extinction.

From the Beagle Channel—where Charles Darwin made early fossil findings—staff ventured to the Alaskan panhandle and Bonanza Creek, site of the first gold strike. Hauser described 19th century gold mining techniques as he traced the path of fortune-seeking pioneers along a 500-mile course in the Yukon territory. Many persevered for 2 or 3 years up the Chilkoot trail, fighting the elements and the ever-present danger of avalanches. Amid this hostile terrain are the remnants of once-flourishing boom towns like Skagway and Dawson. Now a mecca for tourists, these towns are replete with history; many of the original structures still remain. The defunct railroad, formerly a major means of travel and freight transportation, now runs special limited tours for visitors.

Among the honors bestowed at the ceremony were an NIH Merit Award to the NIA Personnel Office for extraordinary contributions during 1987. Other awards included those given to the Public Information Office staff for exceptional performance in planning and promoting NIH Centennial activities for the institute, and to Barbara Kellner, Office of Planning, Analysis, Technical Information and Evaluation, for services rendered during a demanding and unprecedented workload with limited staff resources.
Termine Wins Basic Research Award

Dr. John D. Termine, chief of the Bone Research Branch, NIDR, is the winner of the 1988 Basic Research in Biological Mineralization Award of the International Association for Dental Research (IADR), which convened at the Palais des Congres de Montreal for its 66th general session.

The award, supported by Chesebrough-Pond, Inc., is designed to stimulate, encourage, and recognize basic research in the field of biological mineralization. It is one of nine distinguished scientist awards conferred annually by the IADR.

"I am extremely honored to be this year's recipient of this prestigious award. As the fourth NIDR scientist to receive it, I am delighted to continue our institute's long record of excellence in this field," said Termine. Drs. David Scott, Marie Nylen and E. David Eanes are all past recipients from NIDR.

Termine has made several significant contributions to the understanding of the structure and function of the inorganic mineral and organic matrix components of calcified tissues. His more recent chemical studies on the non-collagenous proteins of bones and teeth have been critical in advancing understanding of the development, organization, and function of these vital hard-tissue specific proteins. He has successfully isolated and characterized the two major classes of enamel matrix proteins: amelogenins and enamelines. His identification and characterization of osteonectin and other noncollagenous proteins of bone have led to a better comprehension of the overall metabolism and extracellular matrix structure of this tissue. He has published more than 120 papers in his field.

Termine began his career at NIH in 1970 as a special research fellow at NIDR. In 1973 he became a permanent member of the research staff when he was appointed as a research biochemist in the molecular structure section of the Laboratory of Biological Structure, NIDR. In 1980 he was named chief of the skeletal biochemistry section and three years later was named chief of the Bone Research Branch.

Termine received his B.S. degree in chemistry from St. John's University, Brooklyn, N.Y., his M.S. degree in biochemistry from the University of Maryland, and his Ph.D. degree in biochemistry from Cornell University Medical College.

Press Leaves NIDR Budget Post

Gilbert D. Press, budget officer of the National Institute of Dental Research, retired recently after more than 30 years of government service.

"I have enjoyed myself immensely at NIH," he said. "I've made numerous friends here. The unique atmosphere at the NIH is something I'll miss."

Press began his government career in 1955 when he joined the General Medical Branch at the National Cancer Institute as a medical biology technician. He was soon promoted to a physical science aide in the same branch. Six years later he advanced to a position as a chemist in the then National Heart Institute, Gerontology Branch. A mass reassignment in the mid-1960's sent him to the National Institute of Child Health and Human Development's Gerontology Branch in Baltimore. Prior to his career at NIH, Press attended Morgan State University in Baltimore and served in the Army.

In 1973, he was ready for a new challenge and was accepted into the Management Intern Program at NIH. The program's purpose was, as it is now, to recruit outstanding candidates with the interest and ability to administer a public, scientific research effort. Press excelled in this program and upon graduation in 1974 was chosen as that year's extern—the program's outstanding achiever. His first rotational assignment was in the NIDR budget office. "The NIDR offered me a job as a budget analyst after I finished the intern program. I took the job and have been here ever since," he said.

A few years later, Press was promoted to budget officer. In that position he provided expert advice to top management at the institute on all aspects of the NIDR budget. He developed options for the allocation of funds and advised on various funding mechanisms.

During his many years of service he has won the NIH Merit Award and the EEO Special Achievement Award.

Asked about retirement plans, Press said, "I plan to relax. And then just take things as they come."

Volunteers Needed for Study Of Early Infant Development

The NICHD seeks mothers with a first baby, 5 months of age or younger, to participate in a study of the everyday experiences of young infants in interaction with some of the important adults in their lives. Participation involves one 2-hour visit to the home, when a videotape of the baby's typical daily activities will be made. Especially sought are mothers in the following three groups: Adoptive mothers; biological mothers less than 30 years old, regardless of employment status; and biological mothers who are employed outside of the home. Of special interest are employed mothers whose substitute caregivers might also be willing to participate. For more information, call Ann Fox, 496-6832.
Journals Slated for Library Cancellation

The NIH Library is conducting an intensified review of journal subscriptions, occasioned by extraordinary increases in subscription costs, far above the current inflation level. The library advisory committee has recommended this review.

The following titles have been identified on the basis of no evidence of photocopying during the years 1985 through 1987, and are tentatively slated for cancellation. Comment from NIH staff is requested on any title. Please address comments to Else Cerutti, Bldg. 10, Rm. 1121A (496-1156).

Acta Chirurgica Belgica
Acta Medica Nagasakiensia
Acta Medica Polonica
Acta Morphologica Hungarica
Acta Universitatis Carolinae. Medicinae. Monograph
Acta Veterinaria Scandinavica
Advances in Catalysis
Advances in Colloid and Interface Science
Advances in Ecological Research
Advances in Inorganic Biochemistry
Advances in Inorganic Chemistry and Radiochemistry
Advances in Marine Biology
Advances in Nuclear Science and Technology
Advances in Quantum Chemistry
Advances in Thanatology
Advances in X-ray Analysis
Animal Reproduction Science
Annales De Physique
Annales De Radiologie
Annals of Applied Biology
Annual Reports on the Progress of Chemistry, B. Organic
Applied Spectroscopy Reviews
Archiv der Pharmazie, C. Scientifische Edition
Archiv Fur Experimentelle Veterinarenizinln
Archiv Fur Protistenkunde
Archiv Fur Psychologie

AIDS in the Workplace

A special training program, “Perspectives: AIDS in the Workplace,” will take place Friday, July 29 from 9 a.m. to 12 noon in Masur Auditorium, Clinical Center. All NIH employees are invited to attend.

The training will be given by Richard Pimentel of Milt Wright and Associates who developed this program to address a wide spectrum of employee concerns about AIDS in the workplace. The program was developed at the request of the President’s Committee on Employment of the Handicapped.

The training is sponsored by the NIH Handicapped Employees Committee, Handicap Program, Division of Equal Opportunity. Sign language interpretation will be provided. If accommodations for other disabling conditions are needed, please call 496-2906.
Whitehead Ends 34-Year NIH Career

Henry Whitehead, an audiovisual technician with the Division of Technical Services (DTS), bade adieu to coworkers and other well-wishers recently, marking his retirement from NIH and government service. In the same quiet manner that characterized his arrival here 34 years ago, Whitehead left the NIH campus with little fanfare.

Prior to coming to NIH, he worked with audiovisual equipment for 5 years at Ft. Belvoir. After a reduction-in-force at Ft. Belvoir, he began working in the housekeeping department at NIH in 1954. After 89 days he was transferred to the audiovisual department and was active there until the day he retired. As the other half of a then two-person office (former chief William McGraw retired two years ago), Whitehead used reel-to-reel equipment only. "Cassettes and television came a little later," he said.

Whitehead witnessed much growth during his quarter century-plus tenure at NIH. He has a strong sense of the role NIH has played in medicine. His department was instrumental in the satellite link that enabled a dialogue, earlier this year, between top cancer specialists from Russia and the United States.

"Years ago, I remember taping Grand Rounds sessions and hearing the doctor talk about the possibility of taking a heart out of one person, examining it and replacing it with another heart. I thought that was impossible 30 years ago, but it's almost a regular practice at most hospitals today," he said.

There have been seven NIH directors, and almost as many Clinical Center directors, since Whitehead's first day.

"I remember being able to recognize everyone on campus either by name or face. But now, it has grown so that there may be people who have been around for 15 or 20 years and you have no idea who they are," he said.

Whitehead has seen some improvement for minorities at NIH. "Years ago, minorities with college degrees were walking around as animal caretakers. If you saw someone wearing a necktie in Bldg. 1, they were probably working in the mailroom. But I am glad that I was here long enough to see a black become the deputy director of NIH (Thomas Malone, former deputy director).

Whitehead has always been known as a team player. "Henry would go the extra mile and was always ready to serve with a smile," said Charles Lee, chief of conference services, DTS. Even though Whitehead was physically impaired, it never meant a sacrifice to service.

"His dependability and dedication was of more value to the section than some of the more able-bodied personnel. He will be sorely missed," Lee added. —Harriett Bennett

Dr. Anthony S. Fauci, director, NIAID, was honored recently as Public Health Leader of the Year by the Commissioned Officers Association of the Public Health Service. He was cited "In recognition of his extraordinary leadership in medical science and his outstanding contributions to the health and well being of the American public, improving public awareness and understanding of the role of the Public Health Service in the efforts to conquer the acquired immunodeficiency syndrome (AIDS)."

Dr. John I. Gallin, director of the intramural program for NIAID, was recently presented with an honorary doctorate of science degree by Amherst College at its 1988 commencement ceremonies. He graduated cum laude in biology from Amherst in 1965 and was honored for his "pioneering work in cell biology and the mechanisms that defend the human body against infection."
Schambra To Direct FIC

By Jim Bryant

Dr. Philip E. Schambra has been appointed director of the Fogarty International Center for Advanced Study in the Health Sciences effective Aug. 1.

Schambra is currently science attaché and international health representative at the U.S. Embassy in New Delhi, India, on assignment from FIC, the international division of NIH that promotes cooperation in the biomedical and behavioral sciences through research fellowships, studies of world health problems and liaison with foreign governments.

Schambra has been involved in issues of international health for many years at home and abroad. In New Delhi since 1984, he has had direct responsibility for many cooperative U.S.-Indian science projects. He serves as deputy head of the U.S. Embassy Science Office, which administers approximately 250 cooperative science projects funded at about $75 million.

During his assignment in India, Schambra helped expand cooperation between India and the U.S. in the health sciences. He played a major role in initiating the Indo-U.S. Vaccine Action Program, which is designed jointly to develop new or improved vaccines that will benefit both countries in fighting vaccine preventable diseases.

Prior to his appointment in India, Schambra served for 4 years as chief of FIC’s International Coordination and Liaison Branch. He provided leadership and counsel on international matters and related issues to senior NIH staff and represented NIH on international policy and program matters to foreign governments and scientists and to other federal agencies.

Judge To Chair Transplant Panel

Arlin Adams, retired judge of the U.S. Court of Appeals, will chair a panel of 20 to 25 non-federal experts that will meet Sept. 14-16 to hear presentations and report to NIH and the U.S. Public Health Service on issues involved in transplantation of human fetal tissue.

The Human Fetal Tissue Transplantation Research Consultant Panel will hear experts on the scientific, legal and ethical aspects of fetal transplantation in sessions to be held at NIH. Dr. Kenneth Ryan, who is chief of staff of the Boston Hospital for Women and chairman of the department of obstetrics and gynecology at Harvard University Medical School, and Dr. LeRoy Walters, director of the Center for Bioethics at Georgetown University, will chair, respectively, the scientific and ethical sessions of the meeting.

The panel was formed at the request of Dr. Robert E. Windom, assistant secretary for health, to report to NIH and PHS on research involving the transplantation for therapeutic purposes of human fetal tissue obtained from induced abortion. In March 1988, Windom imposed a temporary moratorium on such research supported and conducted by PHS agencies until a consultant panel could be convened to address the relevant issues.

The first day of the meeting will focus on scientific issues such as the status of research on fetal tissue transplantation for Parkinson’s disease and diabetes, tissue compatibility considerations and technical aspects of human fetal tissue procurement.

The second day of the meeting will focus on legal and ethical issues such as current regulations governing use of human fetal tissue in research, the societal context of clinical investigation in the U.S. and new ethical issues arising from transplant research with human fetal tissue. Experts on the various subjects will speak at these public sessions.

In the afternoon of each day, public testimony will be heard from representatives of organizations having an interest in this area of research. The third day of the meeting, during which the panel members will deliberate on the issues, will be closed to the public. An opportunity for individuals to provide written comments for consideration by the panel has been announced in the Federal Register.

Following the meeting, the panel will submit its report to the Advisory Committee to the Director, NIH, which is a chartered HHS advisory committee. The report then will be forwarded by the committee to the NIH director and the assistant secretary for health.