

# The NIH Record

## New NIH Tradition

### Research Day Draws Thousands to Campus

A new scientific criterion has been established to measure the success of NIH Research Day: the number of belt buckle notches that must be let out to accommodate the meals that are served.

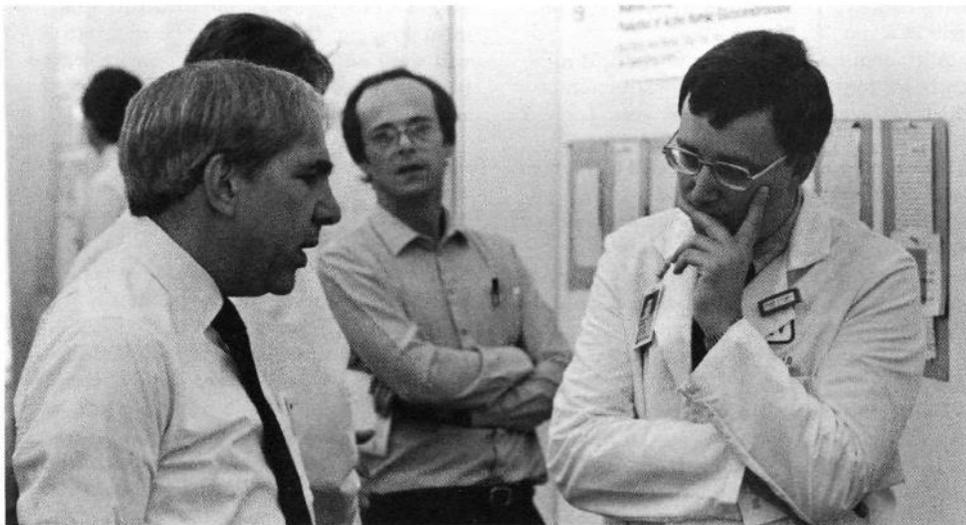
"Just say that more than 4,000 free dinners were given away that night and that we had to send out twice to Safeway to get more food," enthused Tom Flavin, member of the special events committee that helped plan the Sept. 27 occasion.

Far more interesting, but far harder to gauge, were the number of intellectual belt buckle expansions that the three symposia, 243 posters and 20 workshops engendered.

Beginning at 8 a.m. and continuing informally into the evening, hundreds of NIH researchers explained their latest work to colleagues, co-NIH'ers and the merely curious.

"Interaction among researchers at NIH over the years has usually occurred informally and largely by accident," noted NIH director Dr. James Wyngaarden in remarks that opened the

(See RESEARCH DAY, Page 6)



Dr. Joseph Parrillo (r), chief of the Critical Care Medicine Department, CC, listens intently to the comments of Dr. Ronald Crystal, chief of the Pulmonary Branch, NHLBI during a Research Day poster session. They were just two of the hundreds of NIH'ers who toured two Research Day tents filled with exhibits describing current intramural research at NIH.

## Completion in 1992

### New Child Health Building Inaugurated

It was not so much a groundbreaking as a parking lot breaking as officials from NICHD, NINCDS and NIMH gathered on parking lot 10-1 to inaugurate construction of a facility they will share—Bldg. 49, the first new building on campus in 10 years.

To be known as the Child Health and Neurosciences Building, 49 was a very long time in gestation, more than 10 years. No one was happier at the Oct. 4 groundbreaking than Rep. Silvio Conte (R-Mass.), who called it "the proudest achievement in all my years of office."

The ranking minority member of the congressional appropriations committee charged with NIH oversight, Conte had fought for the Child Health facility since 1979.

"I was starting to think I'd never see this day," he related. "I prayed it would come and now it is a dream come true."

Tracing the tortured legislative history of the bill that okayed construction of a 244,000-square-foot building that is expected to cost \$86 million (once related facilities are figured in), Conte said he thought in 1979 that Congress would enact the Bldg. 49 appropriation, then set at \$37 million.

"Then President Carter came in and announced that funds would be rescinded from

(See CHILD HEALTH, Page 4)



Rep. Silvio Conte, who worked for more than a decade in Congress to get funds for Bldg. 49, hugs Clinical Center patient Brianne Schwantes of Milwaukee at the groundbreaking.

## The Bethesda Bug

### Campus Catches Construction Fever

By Anne Barber

As if the current building boom in downtown Bethesda were contagious, NIH has experienced its own growing pains recently. Long known as a mortar-and-pestle kind of place, NIH is fast becoming a brick-and-mortar outpost.

The Division of Engineering Services recently provided an update on the round robin building renovations, plans for new buildings and additions that will be made to existing buildings on campus.

"We hope to have all the people from Building 5 moved into the newly renovated Building 4 by the end of November," says Dr. Emmett Barkley, DES director. The renovation of Bldg. 5 will begin after the first of next year.

A new building, 6B, which will be located north of Bldg. 6 and just east of 31C, has already been started. The ground floor and two basement levels will be an animal facility. The upper floors consist of laboratories, occupied mostly by NICHD.

"The new facility will include animal holding space for transgenic mice bred to genetic specification by the scientific community,"

(See CONSTRUCTION, Page 2)

## CONSTRUCTION

(Continued from Page 1)

states Barkley. The building should be complete in about 2½ years.

A groundbreaking ceremony was held recently for the new Bldg. 49, construction of which will commence early next year. Located west of Bldg. 30 and north of Bldg. 29, it will be occupied primarily by NICHD (see related story in this issue).

In varying stages of completion are sundry expansions and additions to buildings that already exist on campus. For example, four floors will be added to the A wing of Bldg. 10 to accommodate AIDS research.

"We have \$10½ million set aside for that project," Barkley said.

The NHLBI has plans to expand the nuclear magnetic resonance (NMR) facility in Bldg. 10.

"It is now in the preliminary design phase," Barkley reported. "It will house the highest magnetic field system available for human studies."

The institute already has the magnet money authorized in its FY 1989 budget. "So," Barkley says, "we must have a place ready to put it once it arrives."

Renovation of the Twinbrook facility, a rental building that will house AIDS research for NIAID, will cost approximately \$5 million. Construction is scheduled to begin within the next several months and should be complete by the end of next summer. The facility will consist mostly of laboratories with some animal holding space.

Plans for the Consolidated Office Building, a new structure that has been in the works for many years, will no longer follow a lease/purchase option. The DES will handle design and construction, estimated to take 4 years or longer to accomplish. According to Barkley, it will take 3 to 4 months to select an architectural firm; bid solicitation won't occur until the end of October.

The total cost of the building has been estimated at \$100 million. The proposed site is the parking lot located northwest across Center Dr. from NLM, adjacent to the Medical Center Metro Station.

A project always ongoing at DES is the remodeling of older facilities for animals to bring all the animal space operated by the institutes and DRS up from marginal accreditation. "Thus far," said Barkley, "we have spent about \$22 million on this project."

Although it is not technically a DES project, the new Children's Inn at NIH, ceremonial groundbreaking for which occurred on July 29, will probably start going up before Thanksgiving. The \$2.5 million home for 36 pediatric patients and their families, located on the north side of the NIH campus,

is expected to open in the summer of 1989.

In order to renovate the utilities serving the campus in a way that will cause the least disturbance and follow the most logical sequence, DES has established an Infrastructure Enhancement Program Committee. The committee will work on proposals for renovating central plant facilities such as steam, chilled water and electricity.

"NIH's utilities need to be rebuilt from the inside out," Barkley stated. "We need to replace the old utilities that are obsolete, deteriorating and that can no longer keep up with the growth of the campus."

Serving on the committee is John Jenkins from the Facilities Engineering Branch; Tim O'Connor, Design and Construction Branch; Paul Sebastian, Maintenance Engineering Branch; and Mike Harrison, lately of the Clinical Center's building services office. The committee has already begun working and, although construction will not begin until next spring, a new boiler and three new chillers are first on the agenda.

The Infrastructure Enhancement Program's goal is to assure that adequate and reliable utilities are available to support research in the future.

To help DES and its craftsmen keep up with new technology available within their disciplines and encourage them to share their knowledge with each other, DES has established a Technical Training and Employee Development Program. Heading this program is Arturo Giron, formerly of Montgomery College in Rockville.

"The craftspeople are responsible for operating the buildings and are in the best position to know what problems exist and help establish the proper priorities," Barkley explained.

"There is a constant need to keep up with the modern technology used by the scientific community," he continued. "If we had listened to our craftspeople in the past, we would not be in the position now of having to redo some of our utility systems."

The *Record* will periodically review the progress of various DES projects; see future issues for updates affecting your area. □

## ECS Presents Film

The NIH Employee Counseling Services will present a film about driving under the influence and the symptoms of chemical dependency entitled *Friday Night Five*, on Thursday, Oct. 20, in the Little Theatre, Clinical Center.

This is part of the Guest Lecture/Film Series on addiction presented by ECS. □



*Dr. Anthony S. Fauci, director of NIAID and NIH associate director of AIDS research, has been presented the 1988 Leadership Award by the Columbus Citizens Foundation of New York for his "outstanding role in American life." The foundation cited Fauci's growing responsibilities in medicine and public health and his leadership in the fight against the modern plague, AIDS. This award is given annually to a distinguished Italian-American from New York.*

## The NIH Record

Published biweekly at Bethesda, Md., by the Editorial Operations Branch, Division of Public Information, for the information of employees of the National Institutes of Health, Department of Health and Human Services, and circulated to nonemployees by subscription only through the Government Printing Office. The content is reprintable without permission. Pictures may be available on request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through September 30, 1989.

**NIH Record Office**  
Bldg. 31, Room 2B-03  
Phone 496-2125

**Editor**  
Richard McManus

**Staff Writers**  
Anne Barber  
Carla Garnett

**Editorial Assistant**  
Marilyn Berman

**Staff Correspondents:**  
CC, Elynn Pollack  
DCRT, Christine Pennella  
DRG, Sue Meadows  
DRR, Michael Fluharty  
DRS, Jim Doherty  
FIC, Elizabeth Gillette  
NCI, Patricia A. Newman  
NEI, Claudia Feldman  
NHLBI, Blair Gately  
NIA, Claire McCullough  
NIAID, Jeanne Winnick  
NIAMS, Barbara Weldon  
NIDDK, Eileen Corrigan  
NICHD, James Hadley  
NIDR, Mary Daum  
NIEHS, Hugh J. Lee  
NIGMS, Wanda Wardell  
NCNR, Gerry Pollen  
NINCDS, Carol Rowan  
NLM, Roger L. Gilkeson

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

Someone Is Waiting For You . . .

## Walkers, Runners Kick Off Combined Federal Campaign

By Carla Garnett

It did not matter that rain-threatening clouds loomed overhead or that the sun delayed its appearance until long after the final drum cadence had faded. It also did not matter that the crowd, while appearing expectant and enthusiastic, was relatively small. What really made the difference was the spirit of the occasion.

The 1988-89 NIH Combined Federal Campaign kickoff, complete with race, raffle and refreshment, launched in grand fashion the annual charity drive, whose theme this year is, "Someone is waiting . . . for you to make a difference."

Four bands including the President's Own U.S. Marine Band and marching ensembles from three area high schools—Cardozo, Richard Montgomery and Wooten—led a spirited parade down Center Dr. to the simulated grandstand in front of Bldg. 1. The Baltimore Oriole and several clowns mingled and entertained the cheerful, if somewhat chilled, assembly.

"We're about to make a difference here today," proclaimed NIH deputy director Dr. William Raub, who, clad in a CFC T-shirt, gave opening remarks acknowledging the high spirits of those gathered.

Department of Health and Human Services Undersecretary Don Newman, exhorting employees to reach this year's \$1.5 million departmental goal, said "I have complete confidence in you. The spirit of enthusiasm and dedication here . . . gets better each year." The 1988-89 goal is 10 percent greater than a year ago.

In addition, DHHS assistant secretary for health Dr. Robert Windom announced an interdepartmental goal—that the PHS contribute 75 percent of the total CFC goal. "I know we will be successful," he said.

Abe Pollin, owner of the Washington Capitals and Bullets, and former NIH patient, inspired a team effort. "We should all feel lucky that we're on the giving end and not the receiving end," he commented. "Be a team for a goal that's absolutely worthwhile . . . dig down deep."

While spectators were pondering the depths of contribution, anxious runners and walkers limbered up for the 3-mile race and 1-mile noncompetitive walk to come. The results? Ninety-seven people crossed the finish line. The fastest completion time, 17:52, belonged to Pierre Savagner. Trophies were awarded to the first three finishers in each of four categories.



Abe Pollin, owner of the Washington Bullets and Capitals, exhorts NIH employees to put forth a team effort to help DHHS reach its CFC dollar goal for 1989—\$1,471,000.

ries. The victors are listed below.

<i>Male 39 and under</i>	
Pierre Savagner	17:52
Jay Everhart	18:02
Volver Stephan	18:05
<i>Male 40 and over</i>	
Jack Shawver	18:21
Jerry Moore	18:22
Bill Pitlick	19:20
<i>Female 39 and under</i>	
Kit Tilley	21:45
Regina Kurrasch	22:27
Sherry Sweetman	22:42
<i>Female 40 and over</i>	
Pat Earl	24:33
Connie Lowe	25:30
Louise Ramm	25:35

Employees may donate to two NIH-related charities this year by using the CFC designated numbers listed below:

- 1717 Friends of the Clinical Center (FOCC)
- 1660 Camp Fantastic (Special Love, Inc.) □

### Reproductive Hazards at Work

A brochure on "Reproductive Hazards in the Workplace" is available through the OMS Clinic in Bldg. 10, Bldg. 13 and Westwood. The brochure summarizes the major classes of reproductive hazards employees may encounter at NIH, advises on prudent work practices to minimize risk and summarizes services available through the Division of Safety to help employees with concerns about workplace reproductive hazards. □

### JAMA Editor Addresses Writers

Editors and writers from NIH and the Washington area filled Wilson Hall on Sept. 20 to listen to Dr. George D. Lundberg, editor of the *Journal of the American Medical Association* (JAMA), talk about his techniques for "The Art of Editorship." He offered his audience many insights and experiences since becoming JAMA editor in January 1982.

According to Lundberg, a good editor is unafraid of controversy. He quoted Dr. Hugh Clegg, former editor of the *British Medical Journal*, as saying, "if an editor does his job properly, that editor will always be getting in trouble."

Lundberg said that he edits not only for his readers, but also for publication owners, journalists (to reach the general public), and authors. He sends the last a questionnaire to ask how they liked the way their manuscripts were edited. This is a rare editorial practice and one way Lundberg evaluates the journal.

JAMA receives 70 to 75 major manuscripts each week from scientists around the world. Only about 10½ percent of these are accepted for publication, Lundberg says. This means a 90 percent turn-down rate for major manuscripts.



Dr. George Lundberg

JAMA employs eleven in-house editors to check each manuscript initially. The 50 percent that survive are sent to two or more of JAMA's 4,000 outside reviewers. These reviewers base their judgment on three basic rules: Is it true? Is it new? and Is it good research?

Referring to the use of great works of art on JAMA covers, Lundberg mentioned that during a recent trip to Washington, D.C., he toured the National Gallery of Art. "I feel wonderful when I walk around the Gallery because every room I enter has a JAMA cover on the wall. But the artists never use the JAMA logo!" he joked.

The NIH Information Officers Training Committee sponsored the talk and the American Medical Writers Association hosted it.

—Judi Abramson □

**CHILD HEALTH**

*(Continued from Page 1)*

many government projects. I fought to reject the rescission but the House voted against it, to my lasting and bitter disappointment.

"It's been a long, long haul but 2 weeks ago, the funding bill was enacted. It was a real relief to see the president put his signature on that bill."

Conte said that what kept him going during a decade of struggle for Bldg. 49, which will combine brain and mental retardation research with a modern primate facility, was "the assurance that this building would improve children's health.

"You know, 95 percent of all that is currently known about brain science was learned in the last 10 years of research," he said.

Turning to a group of young NIH patients, he said, "I wish every member of Congress could meet you beautiful kids. Oh, you're great kids. You've got so much guts. You are pioneers in medicine, just as much as the doctors and researchers. Kids are the most important reason for getting this building under way."

Conte added that he felt he had "won the gold medal" in seeing the appropriation enacted.

"It's no secret that Italians dote on their children, and Silvio Conte has done that with this building," said Dr. Robert Windom, DHHS assistant secretary for health. "I know that the research done in this building will be world class and second to none."

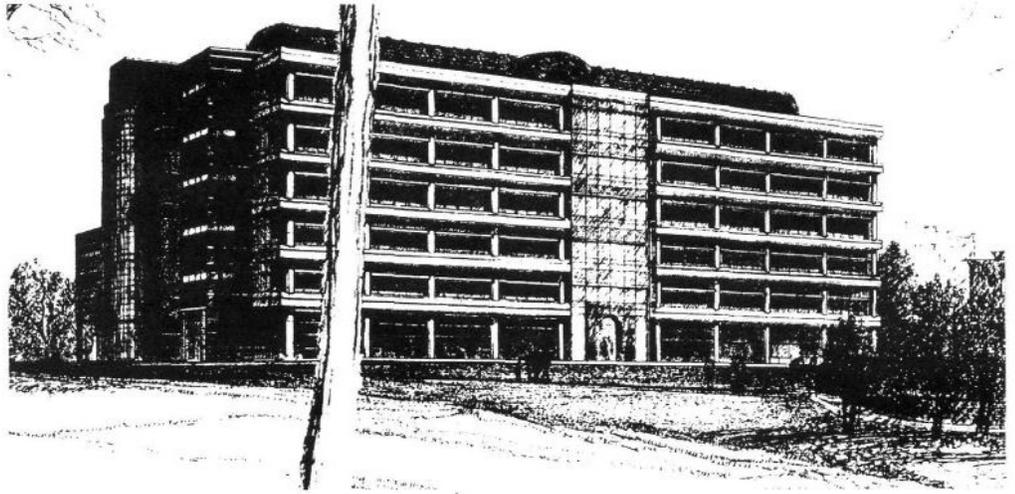
Said Dr. William Raub, NIH deputy director, "This is a great day for children. This is a great day for the neurosciences."

While most of the 500 workers who will occupy the building when it is finished sometime in 1992 will be affiliated with NICHD, two other PHS arms—NINCDS and NIMH—will also be represented. Major areas of research include improving child health and developing a better understanding of the human brain.

Brain studies will probe the organ's normal structure and function, and medical problems ranging from mental retardation to epilepsy to mental illness. These illnesses can only be prevented when researchers understand the mechanisms that govern early brain development.

Some of the NICHD research will focus on the brain's mechanisms for controlling hormone secretion and action in all organs of the body. This research may have potential applications in treating hypertension, infertility and other hormone-related disorders, as well as in developing new contraceptives.

The NINCDS research will explore processes that maintain or disrupt mature brain and nerve structure and function, including



*An artist's rendition of the new Child Health and Neurosciences Building. In addition to laboratories, the structure will house a state-of-the-art primate facility.*

the effects of viruses, toxins, injury and aging. Targeted for elucidation are such illnesses as Alzheimer disease, epilepsy, multiple sclerosis, Parkinson's disease, and nervous system complications of AIDS.

NIMH priorities for the building include fundamental studies of the anatomy and biology of the brain and its specific chemical messengers and their receptors, particularly as they relate to schizophrenia and manic-depression.

"This joint enterprise and collaboration in research ensure that advances will come," said Raub.

Dr. Frederick Goodwin, administrator of the Alcohol, Drug Abuse, and Mental Health Administration, and a 24-year veteran of NIH

research, said he considered the day "a homecoming for us (since NIMH was a part of NIH until 1968). It is also appropriate that this occurs during Mental Health Awareness Week. This building will bring together first class neuroscientists and first class behavioral scientists."

"The work done in this building will benefit not only the citizens of the United States, but also the citizens of the world," said Rep. Steny Hoyer (D-Md.). "Bricks and mortar do not a research facility make. I salute the researchers who are the guts of this enterprise. Ultimately it is you upon whom these children rely."

NICHD director Dr. Duane Alexander welcomed a tentful of guests on behalf of the

*(Continued on Page 5)*



*Adults and children joined in the groundbreaking for Bldg. 49, completion of which is expected in 1992. Three institutes—NICHD, NINCDS and NIMH—will share the facility.*

*(Continued from Page 4)*

institute directors, then turned the podium over to Brianne Schwantes, an 8-year-old patient from Milwaukee who, along with her mother, thanked NIH for treating her childhood illness, osteogenesis imperfecta. Brianne gave Conte an architect's drawing of Bldg. 49 for his office then helped him tug on a rope that released balloons into the crowd.

Conte, who has been in Congress for more than 30 years, relished the effort to free the balloons and yanked the rope with obvious gusto. As the U.S. Marine Band played celebratory airs, young NIH preschoolers dug the first spadefuls of earth for the new building. □

### Frieden Keynotes Disability Program

An international expert currently advising Sweden's king and queen on disability programs, Lex Frieden, keynotes NIH's sixth annual Disability Employment Awareness Program on Thursday, Oct. 20 at 11:30 a.m. in Wilson Hall, Shannon Bldg.

NIH deputy director Dr. William Raub will introduce Frieden, executive director of the Institute for Rehabilitation and Research in Houston and former executive director of the National Council on the Handicapped (1984-88). He received a 1988 presidential citation for meritorious service to the president's committee on employment of the handicapped.

Frieden has been active in the independent living movement for persons with disabilities since 1970. This year he received a World Rehabilitation Fund fellowship to study programs for the disabled in Europe.

The featured performer for this event is Agnieszka Gawin, an accomplished piano player who also sings in six languages—English, French, German, Italian, Polish and Russian. A student at the Peabody Conservatory of Music in Baltimore, she is the daughter of Dr. Aleksander Gawin who came to the U.S. from Poland in 1987 to work on a research fellowship at the National Institute of Allergy and Infectious Diseases.

Denise Banks, chief, Equal Opportunity Branch, DEO, will present awards recognizing individual achievements toward assisting the NIH disabled community. All attendees are invited to a reception immediately after this program sponsored by the NIH Handicapped Employees Committee, Handicap Program, DEO. □

### Reflections: Three NINCDS Scientists in Transition

By Louise Williams

Together, they have logged 74 years of biomedical research at the National Institute of Neurological and Communicative Disorders and Stroke. That many years ago, no one had heard of monoclonal antibodies, retroviruses or even the NINCDS.

Now the three—Drs. Robert Lazzarini, John Sever, and Henry Wagner—are closing their NINCDS logbooks. Lazzarini and Sever are leaving for positions with other institutions; Wagner is assuming an emeritus role with the institute.

After so long, none will completely cut their ties to NINCDS. All take to their new positions memories of working in a special environment, the "citadel" of biomedical research.

Lazzarini: North To Mt. Sinai

"The National Institutes of Health represented the citadel of contemporary biomedical research back then (in the 1960's)," recalls Lazzarini, leaving as chief of the Laboratory of Molecular Genetics. "I wanted to work at the NIH because of that and of the personalities there at the time.

"A new molecular biology was just starting up," he continues, "and the NIH was one of the few places where really great things were happening in that area."

Lazzarini began his NIH career as a staff fellow with the National Institute of Dental Research, but soon switched over to the NINCDS Laboratory of Molecular Biology.

"We were examining questions of control and regulation of sporulation in bacteria," Lazzarini says. He became intrigued by problems of controlling and regulating ribosomal RNA synthesis, too.

He went on to head the Laboratory of Molecular Biology's section on regulating nucleic acid synthesis, and then its section of molecular virology. In 1981, he took over as chief of the newly formed Laboratory of Molecular Genetics.

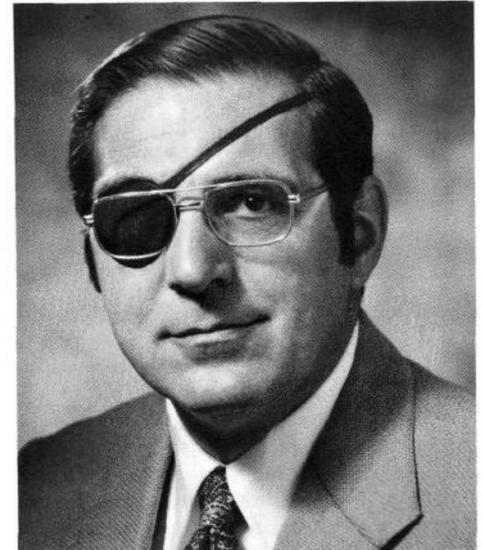
Through the years, he has published nearly 125 scientific papers and served on the editorial boards of 4 virology publications.

A native New Yorker, Lazzarini returns to his home turf to become director of the Brookdale Center for Molecular Biology of the Mount Sinai School of Medicine.

Sever: Crosstown To Children's Hospital

Nearly 30 years ago, Sever came to NINCDS from Chicago as a postdoctoral fellow. He planned to stay only 2 years.

"I came to the institute in 1960 and started



Dr. Robert Lazzarini

working on viruses, particularly German measles," he says. "I examined its effect on the nervous system and pregnancy. I found the NIH and the research opportunities so exciting that I did not go back to Chicago."

Instead, he stayed and became head of the Perinatal Research Branch's section on infectious diseases. For the past 17 years he has served as chief of the intramural research program's Infectious Diseases Branch. During his tenure with the branch he has published more than 500 scientific papers and 8 books. He also serves on the editorial boards of 5 medical journals and as an officer of several medical research societies.

"The NINCDS has been a wonderful opportunity to work with marvelous people and do exciting research. The NIH is the premier environment in the world in which to do medical research. The people have been special, from the NIH and NINCDS directors to the investigators. It's like Camelot."

Sever now takes on appointments at two Washington, D.C., institutions: He becomes professor and chairman of the department of pediatrics at the George Washington University School of Medicine, and senior vice president for medical and academic affairs of the Children's Hospital National Medical Center. In addition to overseeing clinical care, teaching and research activities for the university and hospital, he will hold a guest-worker appointment with NINCDS. "So, I'll be trav-

(See REFLECTIONS, Page 10)

## RESEARCH DAY

*(Continued from Page 1)*

first morning symposium on signal transduction. The tradition of Research Day, now in its second year, has changed that.

"What we have today is a genuine embarrassment of riches," he said.

Wyngaarden was the surprised recipient of a special plaque given to him by the intramural scientists at NIH. Dr. Arthur Levine, chairman of the Research Day organizing committee and NICHD scientific director, presented the award.

"The intramural staff wants to recognize your outstanding leadership of the NIH," he said.

Levine catalogued a few of the achievements for which many scientists are grateful to Wyngaarden, including his defense of Dr. Edwin Becker against charges of mismanagement by DHHS, his opposition to certain PHS proposals "antithetical to the culture of NIH," and his regard for the priorities of scientists in general.

As a lighthearted gesture of gratitude, Levine presented him with a small blue yo-yo inscribed, "NIH Scientists Are Not Yo-Yos." The toys were on sale throughout the day outside the two Research Day tents erected on parking lot 10-I.

Wyngaarden seemed taken unawares by the presentation. He might have gotten a clue when Dr. Joseph E. Rall, NIH deputy director for intramural research, sat down next to him in Masur Auditorium just prior to the announcement. Rall was supposed to be in Lipsett Auditorium at that hour to start the

symposium on gene structure and expression.

"Oh, starting a little late over there?" Wyngaarden asked his deputy, who quietly kept the ruse intact. Rall joined Levine in giving the plaque, imploring the director to find some room for it among his many awards.

Accepting the honor, Wyngaarden remarked that directing NIH has much in common with Yogi Berra's formula for playing baseball; Berra once said that baseball is "95 percent physical and the other half is mental." Appended Wyngaarden, "Directing NIH is 90

*(Continued on Page 8)*



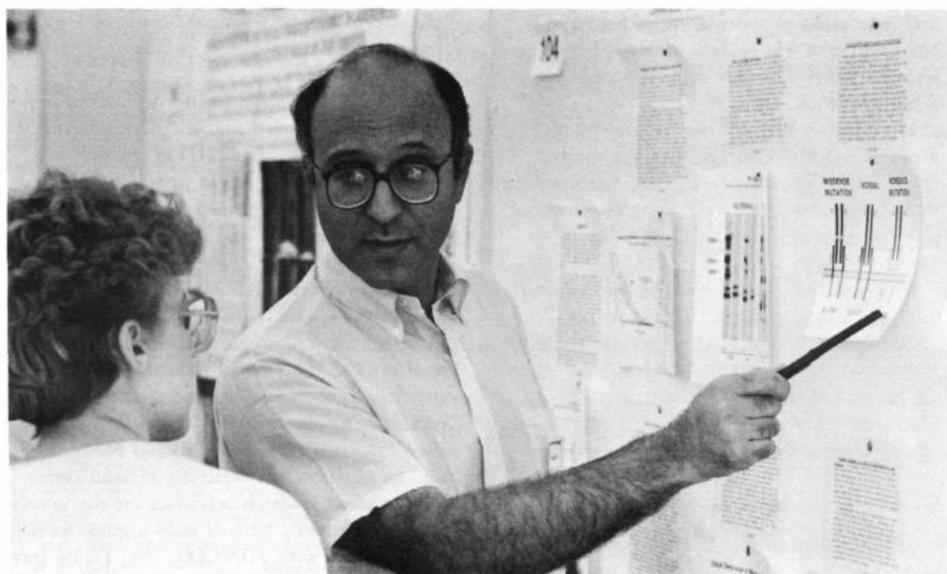
*Dr. Dilys Parry of the Clinical Epidemiology Branch, NCI, gestures to make a point with a visitor to her poster.*



*Dr. Peretz Weiss (l) of NIDDK explains to two onlookers, Dr. Ashwell, "Modulation of the Asialoglycoprotein Receptor"*



*It was two on one as Darryl Murray (c) of the Laboratory of Molecular Biology, NIDDK, answered questions about work he has done with Anthony D. Carter.*



*Dr. Simeon Taylor, chief of the biochemistry and molecular pathophysiology section, Diabetes Branch, NIDDK, explains his poster to an interested onlooker.*



*The hand to the chin or nose was a common gesture for poster-browsers. The knitted brow was another typical feature on the faces exploring the two Research Day tents.*



...onlookers the fruit of his collaboration with Dr. Gilbert Receptor."



Dr. Carolyn Smith (l) explains details of a study that she and four other investigators are pursuing in NHLBI.



Dr. Jeannine Gocayne of NINCDS peers over her cup to explain a poster on large scale automated DNA sequence analysis to a visitor.



Collaboration and learning, which sometime occur informally and by accident on campus, will become more routine as the tradition of NIH Research Day continues.



Dr. John Stanley (c) of the Dermatology Branch, NCI, has an interested audience for his poster display.



Dr. Peggy Zelenka (r), chief of the section on cellular differentiation in NEI's Laboratory of Molecular and Developmental Biology, pauses to consider an inquiry about her work on lens differentiation.

Photos (except Wyngaarden): R. McManus

NATIONAL INSTITUTES OF HEALTH  
This certificate is presented to  
DR. JAMES B. WYNGAARDEN  
DIRECTOR, NATIONAL INSTITUTES  
OF HEALTH

by the INTRAMURAL STAFF on the occasion of the SECOND NIH RESEARCH DAY, SEPTEMBER 27, 1988 in recognition of his outstanding leadership in advancing biomedical knowledge through research for the benefit of mankind.



NIH director Dr. James Wyngaarden (l) holds a plaque given to him as a surprise by the intramural scientists at NIH on Research Day. Looking on are Dr. Arthur Levine (c), NICHHD scientific director and chairman of the Research Day organizing committee, and Dr. Joseph E. Rall, NIH deputy director for intramural research. Levine and Rall signed the plaque, along with Dr. Alan Schechter, vice-chairman of the organizing committee. The text of the award appears at left.

(Continued from Page 7)

percent damage control and the other half is budget."

Wyngaarden wasn't the day's only honoree; the gift of a warm and sunny day was casually appreciated by hundreds who enjoyed box lunches at the opening of the poster session at 11:30 a.m., and by the multitudes who stayed for dinner. Said organizer Levine, "Just say that I had the sun god in my hip pocket."

Levine called Research Day "superb. We have started a new tradition at the NIH. I think we now have a burgeoning sense of a true scientific community here, a sense of true academic collaboration."

The day left little doubt that there will be future NIH Research Days. And collaboration that, from now on, is a little less informal and not so much of an accident.



Dr. Holly Trenchard (l) explains the effect of tetanus toxin on nerve endings to a visitor to her poster.



Dr. Keiko Ozato (l), chief of the section on molecular genetics of immunity in the Laboratory of Developmental and Molecular Immunity, NICHD, answers a query about her work.

## Science Writers Guild Holds Meetings

Several institutes have recently found slide shows and videos to be a lively way of informing the public about NIH and its rich history. NIDR science writer Susan Johnson found herself having to master the skills of scriptwriting and audiovisual production when assigned to do a slide show for her institute. Since then, she also has produced a slide show on the NIH centennial and a video on NIDR, which have been widely praised. On Oct. 6, Johnson shared her techniques with members of the NIH Science Writers Guild.

The guild is a loosely organized forum for discussion of professional issues of interest to NIH writers. There are about 75 guild members, and newcomers are welcome.

Other programs this fall scheduled by the

guild include:

Wednesday, Oct. 26—"Tips on Interviewing Scientists"—a panel discussion featuring *New York Times* science writer Warren Leary, with a reporter's perspective, and NCI's Dr. Michael Gottesman, speaking from the scientist's viewpoint. The event will be held in Bldg. 31, Rm. 6A35, from 11:30 a.m. to 12:30 p.m. (brown bag lunch). Call Bobbi Bennett, 496-1766, for more information.

Tuesday, Dec. 6—"When Do Scientific Findings Become Public Information?"—a panel of science news reporters and NIH scientists. The session will be held in Bldg. 31, Conf. Rm. 9, from 11:30 a.m. to 1 p.m. (brown bag lunch). For more information, call Florence Antoine, 496-6641. □

## International Oral Health Study Launched

Everything from dental caries to the oral manifestations of AIDS are possible topics; every country in the world is a possible participant; and everybody on earth is a possible beneficiary—it is a study of global proportions.

"International Opportunities for Oral Health Research," as the study is called, has been launched recently to identify oral health issues that would benefit most from international collaborative research. The project will also target agencies in the U.S. and abroad that might participate as partners to support these efforts.

The study's sponsors, the Fogarty International Center and the National Institute of Dental Research, expect the findings to encourage collaborative oral research among nations, speeding the improvement of oral health faster than any one country could alone.

"No study like this has ever been attempted," said Dr. Philip Holloway, professor of child dental health at the University of Manchester in England, who is spearheading the effort as a World Health Organization consultant. Holloway is uniquely qualified to head the study. Dean of the dental school at Manchester, his specialties include dental public health, dental education, clinical trials, as well as basic laboratory research. After completing this project he will return to a study he is directing in his own country involving 700 dentists and a half million children in which a new system of paying dentists is being evaluated.

Holloway will work closely with Dr. Kenneth Bridbord, chief of international studies at the Fogarty Center, and Dr. Lois K. Cohen,

assistant director for international health, NIDR, in defining the specific areas to be covered. One of his immediate goals is to enlist the advice of experts in various oral health research fields, as well as supporters of those fields.

One possible area of study is the oral manifestations of AIDS. Oral candidiasis and oral lesions of Kaposi's sarcoma are often the first clinical symptoms of AIDS. Holloway believes that collaborative studies involving countries where AIDS is prevalent would produce epidemiological indicators and clinical information that would help to diagnose the disease at its earliest stages, thereby helping to contain its spread. Africa and the Americas would be ideal places for such collaboration, he said.

"Although the United States is advanced in this type of research, it would certainly be an advantage for other countries as well as the U.S. to learn about the natural progression of the disease from its earliest symptoms," Holloway added.

Oral cancer, too, is one of the problems listed for possible inclusion in the study. In the western countries, oral cancer is responsible for 1 to 7 percent of all cancers. However, in some eastern countries such as India, oral cancer accounts for up to 50 percent of all cancerous lesions. Studying oral malignancies in countries where they occur the most could provide additional information on etiology, early detection and prevention.

The results of the study will be integrated into NIDR's new long-range research plan—*Challenges for the 90s*.—Mary Daum □

## Urine Test May Aid Early Detection of Bladder Cancer

By Elaine Blume

Scientists at NCI have developed a relatively simple urine test that shows promise of detecting bladder cancer at an early, potentially curable stage. Currently, diagnosis and follow-up of this common cancer entails invasive and often painful procedures, and some cases are not discovered until after the disease has spread and can no longer be cured.

The new test could make it feasible to test patients when there was even a slight suspicion of bladder cancer and could make it much easier to monitor bladder cancer patients for recurrences following treatment.

The test, described in the Oct. 5 issue of the *Journal of the National Cancer Institute*, works by detecting a protein known as auto-craine motility factor (AMF) in the urine samples of patients. AMF is secreted by cancer cells and induces movement of these cells. The substance plays a key role in enabling cancers to spread locally and to metastasize to distant sites.

Drs. Raouf Guirguis, Elliott Schiffmann and their coworkers in NCI's Laboratory of Pathology measured levels of AMF in 24-hour urine samples from 22 patients with bladder cancer and 27 patients with noncancerous conditions of the urinary tract. The study was conducted on a "blind" basis; that is, the researchers were not informed of the clinical and pathologic diagnoses until after they had evaluated the urine samples.

The researchers developed and used two methods to measure AMF in the samples. The first method tested the effect of the urine on the motility of selected "responder" cells. Urine samples with high levels of AMF induced a higher proportion of responder cells to pass through artificial membranes than samples containing little or no AMF. The second method, an immunologic test of a type known as ELISA, was used to confirm the motility assay results.

Guirguis and his coworkers found that the urine samples fell into two distinct groups. One group of samples had high levels of AMF, while the other group had low levels or none. When these results were compared with the clinical diagnoses, the researchers found that the group of urine samples with high AMF levels had come from patients with bladder cancer, while the remaining samples were from patients with benign conditions.

In the 49 tests, there were two false positives, one marginal false positive, and no false negatives. In some instances where clinical diagnoses and AMF test results disagreed at first, subsequent more definitive diagnoses confirmed the AMF assay results.

Levels of AMF were highest in urine sam-

ples from patients whose cancers were most invasive. The assay also proved highly accurate in detecting recurrence of bladder cancer following treatment.

"AMF appears to show specificity for the tumor and is only expressed in very low amounts under normal or inflammatory conditions," notes Guirguis. "Cell migration is not common in normal epithelial cells. So when we find AMF, it is likely to signal the presence of an invasive tumor."

The scientists estimate that it will be at least 2 years before a urine test for AMF moves into clinical trials. During that time, AMF must be measured in many more samples. "So far," says Schiffmann, "we have looked at only a limited number of samples, though they represented a variety of different physiological conditions." The trials would be designed to confirm that the urine test was useful in diagnosing bladder cancer and detecting recurrences.

Meanwhile, a number of clinicians are following this work with great interest. In an editorial accompanying the article, Dr. F.K. Mostofi of the Armed Forces Institute of Pathology noted that "the specificity and the simplicity of the procedure and the fact that it can be done on voided urine would make this one of the most valuable tests in the care of patients with cancer of the bladder." Currently, bladder cancer patients must undergo numerous invasive tests in order to monitor their condition.

Ultimately, the scientists hope to modify their assay so that it can be used to measure AMF in blood, making it possible to detect cancers from all parts of the body.

More than 46,000 people develop bladder cancer each year in the U.S., and many of these cases recur despite treatment. The disease is responsible for about 10,000 deaths annually. The 5-year relative survival rate has been 77 percent for patients diagnosed with bladder cancer between 1979 and 1984, the most recent years for which population-based survival data are available. □

### What's New in the URC?

The User Resource Center recently acquired a Macintosh II computer and a Laserwriter II printer. The following software packages have been installed and are available for use: Microsoft Word, Microsoft Excel, Write Now, MacPaint and Cricket Graph. Users are encouraged to come in and try the new machine located in the URC, Bldg. 31 Rm. B2B47. □

## An Expression of Thanks

During the past 5 years, Edith M. Pruden, employee development specialist for the NIH Training Center, has been responsible for working with participants in many of the NIH career development programs. These include: Management Intern, Stride, Career Curricula, Training and Development Services, and the Career Education Center.

She has contributed an extraordinary amount of time, patience, suggestions and understanding to the participants regarding their individual problems and has shared their



Edith Pruden

trials and frustrations as well as successes. She has shown an ability to deal with people from all walks of life and a capacity for confronting problems and providing practical and innovative solutions. In combining innate skills in counseling and interpersonal relations, she has accomplished this in a manner that leaves everyone feeling comfortable and worthwhile.

On that note, the participants of all these programs would like to say "Thanks" to Edith for her insight and understanding as well as being instrumental in enriching all our lives.—Joyce Tilghman □

## Drug Free America Week

The National Campaign for a Drug Free America has declared Oct. 24-30 "National Drug Free America Week."

The purpose of the campaign, a collaborative effort of all federal agencies, Congress and the private sector, is to create a climate nationwide that does not tolerate illegal drug use. All Americans are urged to discourage drug abuse and, further, to reject complacency about it.

The campaign's main messages are that the drug problem in the U.S. is not insurmountable and that drug use affects not only the user but others as well. Organizers would like everyone to commit themselves to taking some action during Drug Free America Week toward stopping this national problem. □

## REFLECTIONS

(Continued from Page 5)

eling back and forth" between the two institutions a lot, he says.

In fact, he's hoping to "increase the contacts and collaborations between Children's Hospital and the NIH."

Wagner: "Retiring" To The Campus

Some persons retire to play golf or lay on a beach. They no longer need calendars and appointment books.

Not so for Wagner, who is resigning as chief of the section on neuronal interactions of the Laboratory of Neuropathology and Neuroanatomical Sciences. His idea of "retirement" to emeritus status sounds like tackling more work, not less: "I expect to continue my presence and involvement at the NINCDS," he explains, "but with a broader mandate. The horizon is full of interesting things to do." For starters, he'll finish several papers about his stroke research.

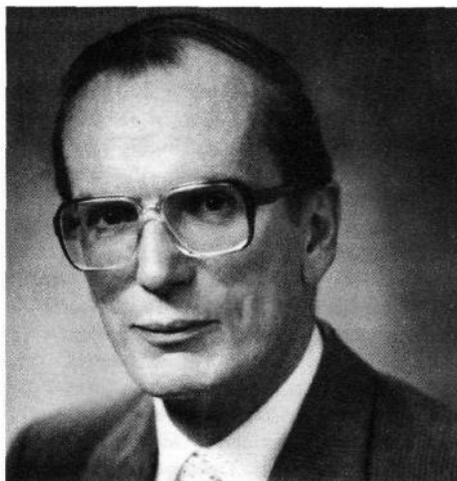
A native Washingtonian, Wagner spent 24 years with the U.S. Navy before joining NIH in 1966. He served the Navy as flight surgeon, research medical officer, executive officer of the Naval Medical Research Institute in Bethesda, Md., and director of the Aerospace Crew Equipment Laboratory in Philadelphia, Pa.

In the Navy, Wagner concentrated on aerospace and vision problems. His vision research covered aspects of retinal physiology, which brought him into contact with NIH investigators working in the same field. At that time, before the National Eye Institute's formation, the NINCDS encompassed vision-related studies. "It had a large commitment to ophthalmological research," recalls Wagner. So when he became the institute's director of intramural research, his "presence there was natural."

Wagner stayed in the NINCDS, concentrating on the neurophysiology of vision until a friendship pulled him into stroke research.

"I had become friends with Dr. Igor Klatzo," now chief of the LNNS, who was working on ischemia and vascular edema, says Wagner. "I was very interested in looking at stroke events in a chronological way and offered to help Dr. Klatzo and a student. Gradually, I became more interested and more involved until I'd neglected my vision research and become almost fully committed to studying ischemia."

Wagner has published more than 60 scientific papers, and through the years has "seen the NINCDS intramural program grow from 10 laboratories to 20. The intramural program is broader now. For example, it now includes

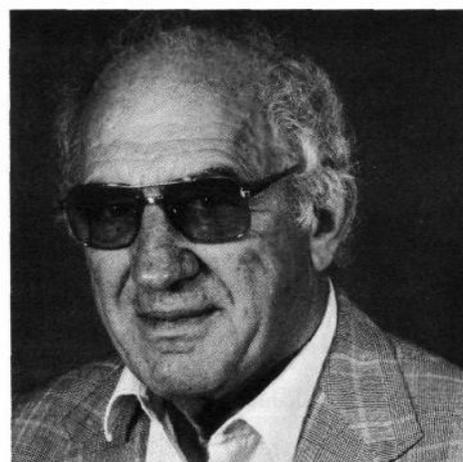


Dr. John Sever

programs on neurootolaryngology and neuroimmunology.

"The NIH is a remarkable place," Wagner observes. "Its parts add up to more than the whole. Investigators of the different institutes communicate and collaborate with each other."

As he puts it, NIH's uniqueness may lie in what it doesn't have, namely "walls between individual efforts. That's probably less possible outside of the NIH."



Dr. Henry Wagner

## NIAAA Needs Volunteers

The NIAAA is seeking normal male volunteers between the ages of 20 and 60 years. Participants must be in good health, on no medications and have no alcoholism in the family. Volunteers will be paid.

For further information, call 496-7513. □

## MARC Scholars Conference

The Minority Access to Research Careers (MARC) Program of the National Institute of General Medical Sciences is sponsoring the seventh MARC Scholars Conference and Program Directors Meeting on Nov. 2-5 at the Bethesda Hyatt Regency Hotel.

The conference keynote address, on "Training Biomedical Scientists for the 21st Century," will be given on the evening of Nov. 2 by Dr. Norman C. Francis, president of Xavier University of Louisiana.

The speakers on the second day of the conference include Dr. Oliver Smithies, professor, Laboratory of Medical Genetics, University of Wisconsin; and Dr. Julius H. Jackson, associate professor in the department of microbiology and public health, Michigan State University.

On Nov. 3 and 4, students supported by the MARC Program will give oral presentations and poster sessions on their research. Also on Nov. 4, the students will tour several NIH research laboratories and speak with intramural scientists. That evening, Dr. Michael A. Zasloff, professor of pediatrics and genetics at the University of Pennsylvania School of Medicine, will give the banquet address.

The conference is designed to bring together MARC students, graduate university faculty, NIH researchers, and others with a strong interest in biomedical research training for minority students. □

## FAES Announces Open Season

FAES Health Insurance Program announces a new open season from Nov. 1 to Nov. 30. The program is open to: visiting fellows, full-time NIH employees and full-time guest workers who are not eligible for government plans. Open season is for those persons who did not enroll when first eligible and for current subscribers who want to change options.

FAES is offering Blue Cross/Blue Shield low option and high option plans and CapitalCare, a health maintenance organization. Changes in benefits and rate increases will be effective Jan. 1, 1989. Information about rates and benefits may be obtained from the FAES Business Office, Bldg. 10, Rm. B1C18. □

## Aerobic Classes Available

The next session of fitness classes will begin Nov. 7 through Dec. 23. Classes include Quik Fit, Alive, Spot Stretch, Healthy Back, and more.

For further information contact the NIH Fitness Center, Bldg. 31C, B4 level, 496-TRIM. □



## TRAINING TIPS

The NIH Training Center of the Division of Personnel Management offers the following:

<i>Courses and Programs</i>	<i>Dates</i>
<i>Management and Supervisory</i> 496-6371	
Voice for Success for Professional Credibility	10/21
Managing Behavior in the Work Environment	10/26
Interacting With Difficult Employees	11/09
Practical Management Approaches	11/21
Effective Presentation Skills	11/28
Coaching: The Performance Extra	11/03
Coping With a Dynamic Environment	11/07

*Office Operations Training* 496-6211

*Adult Education* 496-6211

*Training and Development Services* 496-6211  
Personal Computer training is available through User Resource Center (URC) self study courses. There is no cost to NIH employees for these hands-on sessions. The URC hours are:

Monday–Thursday	8:30–9:00 p.m.
Friday	8:30–4:30 p.m.
Saturday	9:00–3:00 p.m.

NOW AVAILABLE ON SHARE TRAINING  
FY 89 Training Center courses

Access Wylbur and enter SHARE TRAINING.

First time users only, enter:  
x fr &ags2ugL.@@ share (setup) on file37

## Demonstration of S-CRISP

The Division of Research Grants announces the availability of S-CRISP, a user-friendly program that simplifies direct access to the CRISP system database. CRISP (Computer Retrieval of Information on Scientific Projects) is NIH's scientific database describing research projects (both extra- and intramural) supported by the agencies of the Public Health Service.

S-CRISP works well for both computer non-experts and those familiar with computers. It contains simple prompts, error checks and HELP screens every step of the way. It also contains a BULLETIN BOARD menu with announcements about system enhancements and training, a COMMENTS menu and a facility for direct ordering of documentation.

S-CRISP is a product of the research documentation section, Information Systems Branch, DRG. Demonstrations of S-CRISP have been scheduled on Nov. 7 and 8, in Lister Hill Auditorium, Bldg. 38A (National Library of Medicine) from 1:30 to 3 p.m.

Call 496-7543 for further details about the demonstrations or information about S-CRISP. □

## Immunization Awareness Week

What do hepatitis B, flu, measles, pneumonia, tetanus, rubella and diphtheria have in common? They are all diseases that can be prevented by vaccines. But a vaccine is only effective if it is used. Unfortunately millions of adults in our medically advanced society are not protected by that simple dose of preventive medicine.

President Reagan and the U.S. Congress have declared Oct. 23–29 National Adult Immunization Awareness Week. As part of this awareness program at NIH, the Occupational Medical Service and the Hospital Epidemiology Service strongly urge employees to obtain the flu vaccine available at no charge through the OMS Clinic.

Members of the following high-risk groups should make immunization a priority:

- physicians, nurses and other personnel who have extensive contact with high-risk patients in hospitals or at home.
- adults over age 65
- adults with chronic cardiovascular, pulmonary or metabolic disorders, kidney disease, anemia or lowered immunity.

Other adults who wish to reduce their chance of catching the flu should also obtain the vaccine. However, persons allergic to eggs should not receive it. The vaccine will be available on a walk-in basis at OMS Clinics between Oct. 17 and Nov. 10.

<i>ACRF-10 6C306</i>	<i>Tuesdays</i>	<i>1–3 p.m.;</i> <i>7–10 p.m.</i>
	<i>Thursdays</i>	<i>1–4 p.m.;</i> <i>7–10 p.m.</i>

<i>Federal</i>	<i>Thursday</i>	<i>1:30–3:30 p.m.</i>
<i>Rm. 10B08</i>	<i>(10–20–88)</i>	
<i>Blair Rm. 604</i>	<i>Thursday</i>	<i>10–11:30 a.m.</i> <i>(10–20–88)</i>
<i>Bldg. 13</i>	<i>Friday</i>	<i>8:30 a.m.–4 p.m.</i> <i>(10–21–88)</i>
<i>Rm. G901</i>	<i>Wednesday</i>	<i>8:30 a.m.–4 p.m.</i> <i>(10–26–88)</i>
<i>Westwood</i>	<i>Tuesday</i>	<i>1–3 p.m.</i> <i>(11–1–88)</i>
<i>Rm. 28</i>	<i>Wednesday</i>	<i>2–4 p.m.</i> <i>(11–2–88)</i>
<i>Bldg. 31 B2B57</i>	<i>Wednesday</i>	<i>1:30–3 p.m.</i> <i>(11–9–88)</i>
<i>Bldg. 38</i>		
<i>B1N144</i>		
<i>Exec. Plaza North</i>		
<i>Rm. 103</i>		

Influenza vaccine will be available after Nov. 10 by appointment at the OMS Clinic in Bldg. 10.

In addition OMS offers hepatitis B vaccine to employees at increased risk due to occupational exposure to human blood, and diphtheria-tetanus (dT) immunizations to persons due for a "booster shot" (you need one every 10 years). Employees performing research with any of the organisms mentioned at the beginning of this article should also check with OMS to determine whether they need to be immunized. Finally, NIH employees going on work-related foreign travel may also be candidates for immunizations through OMS.

For further information on your need for vaccination against pneumonia, measles and rubella contact your family physician or your local health department. To obtain hepatitis B vaccine, a dT booster or other occupationally indicated vaccine, contact OMS, 496-4411. □



Colleagues from NIH and many other government and academic institutions joined the staff of the National Center for Nursing Research for an open house in their new offices in Bldg. 31. Above, NIH director Dr. James B. Wyngaarden poses with (from l) Drs. Jan Heinrich, NCNR director of extramural programs, Ada Sue Hinsbaw, NCNR director, and Deirdre Blank, formerly chief of the Health Promotion and Disease Prevention Branch, NCNR.

## Experts on the Air

### Radio News Service Debuts a Success

Time was when the average American citizen had to hie him- or herself to Bethesda in order to find out the latest news in NIH clinical research. Nowadays, the experts are as far away as the nearest radio.

Starting last July 4, the NIH Radio News Service has been providing any radio station with a telephone and a tape recorder access to minute-long messages on topics of current interest in medicine.

Stations can record the NIH-produced tapes and save them for broadcast at their own convenience, usually as part of their news programs.

"We provide down-to-earth stories people can use," said Gerri Blumberg of the Audiovisual Branch, Office of Communications, OD. "The tips we offer can help people get the best information from their own doctors."

So far, the service has averaged more than 175 calls a week from almost 300 radio stations in 47 states, the District of Columbia, Puerto Rico and the Virgin Islands.

Every Monday at 5 a.m., a new message is added to two tape machines that are rigged to accept calls on a special 800 toll-free number; a third recorder will be installed soon. Friday afternoon at 5 (Eastern time), the service takes off for the weekend.

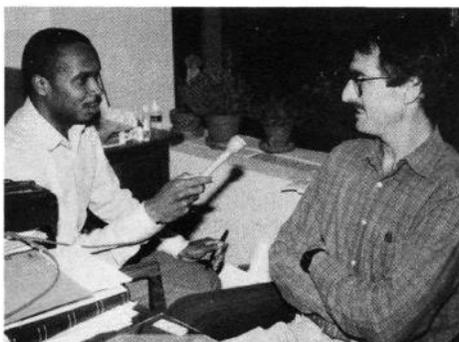
Two criteria determine what science stories go on the air—timeliness and relevance. Recent weeks have included stories on cancer and nutrition (timed to coincide with the surgeon general's report on nutrition), blacks and diabetes, Marfan syndrome (corresponding to the Summer Olympics), amantidine therapy for influenza (at the start of flu season) and voice disorder therapy. A late-breaking research story, however, can preempt any tape prepared for a given week.

"We want to keep people posted on what's going on in the latest medical research," Blumberg said.

Gathered and produced by Blumberg and field reporter Calvin Jackson, the stories typically include a spoken introduction by Blumberg followed by a "sound bite"—an investigator's most concise comment about the subject—then a wrap-up statement. The whole package is known in the profession as a "wraparound."

The service tries to take advantage of two facts—most stations don't have their own medical reporters and radio ranks second only to television in reaching large numbers of the public.

Each month, the NIH Radio News Service mails a schedule of upcoming stories to hun-



Calvin Jackson (l) interviews Dr. Richard Weindruch of NIA for the NIH Radio News Service.

dreds of radio stations across the country. Early indications are that it is a popular public service.

Radio stations that dial the service each week find that it is a far cheaper way to get good medical information than traveling to Bethesda. □

### Pharmacists on TV AIDS Panel

Pharmacists James R. Minor and Robert DeChristoforo of the Clinical Center Pharmacy Department will be participants in a nationally televised special report on AIDS to be aired this fall on cable channels carrying Lifetime Medical Television.

The 30-minute special, entitled "Pharmacists Fight AIDS," was aired initially Sept. 25 and will be repeated at 6:30 p.m. on Sunday, Oct. 30.

The program, funded through an educational grant from Hoffman-La Roche pharmaceutical company of Nutley, N.J., was produced in cooperation with the American Society of Hospital Pharmacists, the American Pharmaceutical Association and the National Association of Retail Druggists.

The special is designed to provide information that practicing pharmacists can use to help overcome their customers' fear and misinformation about AIDS.

The program features actor Tony Randall and U.S. Surgeon General Dr. C. Everett Koop. A panel consisting of Minor and DeChristoforo of NIH, Drs. Paul Volberding and Robbie Wong of San Francisco General Hospital, and Dr. Paul Hutson of the University of Illinois discuss current research, new therapies, public education and the pharmacist's role in dealing with AIDS patients. □

### Lecture on Alzheimer Disease

The first lecture in the 1988-89 STEP series "Science for All" is scheduled for Thursday, Nov. 10 from 1 to 3 p.m. in Masur Auditorium, Bldg. 10, and will be about Alzheimer disease, a major affliction among the elderly.

Entitled "Exploring Alzheimer Disease: Myth vs. Reality," the talk will be presented by Dr. Katherine Bick, NIH deputy director for extramural research. She has been involved for more than a decade in research on Alzheimer disease and other related mental disorders, with special interest in their neurochemistry. Prior to assuming her present position in April 1987, she held several appointments in NINCDS, becoming its deputy director in September 1983. Bick will present an overview of Alzheimer disease, its symptoms, current understanding of its possible causes, its possible genetic basis and methods of treatment. The lecture will be followed by a question-and-answer period.

The entire NIH community is encouraged to attend this event. Advance registration is not required nor is continuing education credit available. For additional information, please contact the STEP program office, 496-1493. □

### Information Index Available

A new edition of the "NIH Information Index," listing over 2,000 subjects and telephone numbers, is available free (while supplies last). For your office copy, please visit Bldg. 31, Rm. 2B10 or call 496-1206. □

### Remember to Fall Back

The nation's annual affair with Daylight Savings Time comes to a close on Sunday, Oct. 30 at 2 a.m. The old adage "Spring forward, fall back" may help remind you to turn



your clocks back an hour before retiring for the evening on Saturday, Oct. 29. Standard time will hold sway until the first Sunday in April. □