

# The NIH Record

## Changes in Eating Patterns Sought

### NHLBI Urges Blood Cholesterol Reduction in U.S.

By Rich McManus

Satisfied that the link between elevated serum cholesterol and the incidence of coronary heart disease—the number one killer of Americans—has been established beyond doubt, the NHLBI issued a sweeping plan Feb. 27 to reduce cholesterol levels throughout the population of the United States.

To effect a population-wide lowering of blood cholesterol, NHLBI called for a concerted education effort on the part of health professionals, the food industry, media, government and educational systems at all levels.

"The overwhelming international consensus among medical researchers is that high blood cholesterol is strongly associated with heart disease," said Dr. Claude Lenfant, NHLBI director, at a press conference in the Bethesda Holiday Inn. "These experts point to the unequivocal benefits of reducing elevated blood cholesterol levels."

The plan was the product of 1½ years of deliberation on the part of a panel assembled by the National Cholesterol Education Program (NCEP). The so-called "Expert Panel on Population Strategies for Blood Cholesterol

Reduction" reviewed the scientific evidence on blood cholesterol and coronary heart disease. Its goal was to develop recommendations to help all Americans lower their cholesterol to avoid heart disease.

Two kinds of strategies are needed, the panel said, to reduce the risk of heart disease nationwide: a patient-based approach, which seeks to help those with the highest blood cholesterol levels, and population-based strategies, which seek to reach all Americans.

The following nutrient intakes were recommended for healthy Americans: less than 10 percent of total calories from saturated fatty acids; an average of 30 percent of total calories or less from all fat; less than 300 mg of cholesterol per day; and only enough food to reach or maintain a desirable body weight.

"It is recommended that Americans eat larger amounts and varieties of fruits, vegetables, breads, and cereals, and legumes such as beans and peas," said Dr. Richard Carleton, director of the Pawtucket (R.I.) Heart Health Program, and chairman of the expert panel.

"Americans should use more low-fat or skim  
(See HEART, Page 4)

## Black History Speaker Calls For Creation of 'New' History

By Carla Garnett

Most American history tomes leave a lot of story to be told, according to Dr. Lerone Bennett Jr., who delivered the keynote address at NIH's black history month observance, "Black History—A Living Legacy," held Feb. 16 in Masur Auditorium. African Americans as well as whites and other minorities, challenged Bennett, must create—not just rewrite—an accurate chronicle of the country's past.

"Black people are not guests in America," he emphasized. "We're heirs." Bennett, a historian, writer and lecturer, has been senior editor of *Ebony* magazine since 1958.

"For far too long," said acting NIH director Dr. William Raub in his opening remarks, "the threads of this country that were woven by blacks have gone either neglected or not receiving the proper attention."

Held 5 days after the release of black nationalist leader Nelson Mandela from a South African prison, the program coincidentally celebrated also one of the most recent and long-awaited victories for civil rights worldwide.

"This is a triumph not only for South Africa," declared Bennett, "but also for

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## New Center Created

### Long-Awaited DRR, DRS Merger Occurs; Whitney To Direct

By Jim Doherty

Dr. Louis W. Sullivan, secretary of Health and Human Services, has approved the long-expected merger of the Division of Research Resources and Division of Research Services into a new organization named the National Center for Research Resources (NCRR).

Dr. Robert A. Whitney Jr., has been selected as director of the new center. He was director of DRS since November 1985 and acting director of DRR since October 1988, when NIH proposed the merger.

DRR and DRS both conducted programs providing resources for the performance of biomedical research: DRR developed and supported research resources extramurally, through grants and contracts, and DRS provided research services directly to NIH investigators.

NCRR will continue the full range of these activities, as authorized by Section 479 of the Public Health Service Act. Recruitment is under way for the positions of deputy director for extramural research resources and deputy director for intramural research resources.

"DRR and DRS were long considered possible candidates for merger," Whitney said,



"because of their similar missions and the benefits obtainable from greater information exchange between their programs on research resource issues, particularly biomedical engineering, instrumentation, and animal and nonanimal modeling."

Former NIH director Dr. James B.

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## Midwife of New Institutes

### A Portrait of the Civil Servant As a Modest Factotum

By Rich McManus

Of the 10 associate directors of NIH, only one can claim to have turned an old division into a new institute, surveyed the groundwork for starting yet another institute, overseen NIH research initiatives in space and at the North Pole, headed two major committees on NIH policy and oversight, and been asked, in his spare time, to increase scientific literacy in the United States as well as attract young people to careers in biomedicine.

The wearer of these many hats is a cordial, self-effacing public servant who, in spite of 60-hour work weeks still managed recently to head his neighborhood's home owners' association and coach basketball, baseball and soccer teams in Montgomery County.

In the 20 years since his arrival at NIH, Dr. Jay Moskowitz has seldom said no to an invitation to build, explore, initiate or examine. Having recently passed the torch of leadership of NIH's new National Institute on Deafness and Other Communication Disorders to Dr. James B. Snow Jr., he is now review-

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## HISTORY

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dreamers. It's a triumph for African American leadership, for Randall Robinson and TransAfrica as well."

TransAfrica, headed by Washington D.C., resident Randall Robinson, is one of several black American organizations that urges economic and legislative sanctions by American businesses and government in protest of apartheid policies enforced in South Africa by its white minority government.

"Let's not get locked into February," said Bennett, stressing that black history is made and should be celebrated every week of every month. "Let's do this again in April—I'm available."

Formal celebrations of black history, initiated by Dr. Carter G. Woodson, former Howard University dean of liberal arts and founder in 1915 of the Association for the Study of Negro Life and History, began more than 60 years ago. In the early 1970s, formal observances of black history were celebrated during one week of February to coincide with the birthdays of black leader Frederick Douglass (Feb. 14) and Abraham Lincoln (Feb. 12). The designation of February as black history month was declared later in that decade.

According to NIH Division of Equal Opportunity director Diane Armstrong, "It is a story whose final chapters have not been written."

"The challenge that February presents to each of us is to interweave Dr. King and Dr. J and Robert E. Lee and Sitting Bull," said Bennett, reminding the audience that individual efforts and perceptions can make a difference. "If March 1 comes and we're still the same black and white people in Bethesda that we were on January 1, then we've blown it."

"On the level of culture and history, every American is at least part black," he asserted, mentioning common "soul" cuisine like collard greens, grits, chitterlings and barbecue that have crossed racial lines to become integral parts of the American diet. "If black Americans are not who 'Gone With the Wind' says they are, then white Americans are not who they think they are."

"It's impossible to understand George Washington without understanding George Washington's slaves. You cannot understand the Constitution if you do not first acknowledge and understand the unwritten pages of it."

Bennett offered three suggestions for closing economic, political, educational, health and other gaps between races:

"We must first create a common, multi-racial, multicultural history. But," he

cautioned, "we can't write it in the books until we write it in the streets of Washington, Baltimore, Atlanta, New York, Chicago and Philadelphia. We *must* deal with the spirit of slavery."

"Everything in race relations has changed," he continued. "Paradoxically, nothing has changed. The integration of the money, power, resources and, most of all, the vision, (has not happened)."

"The dream cannot be saved in the United States for anyone if the dream is not saved in the United States for everyone."

According to Bennett, correction of errors in history will be one of the largest obstacles to overcome.

"We have to deal with the history we've made," he claimed. "We have to be free of the false images of the past held by both blacks and whites. We (as blacks) have no images of ourselves as builders of this world."

"We have a right, a duty as parents, as black parents, as poor parents, even as welfare parents, to surround ourselves and our children with images that feed the mind and the spirit."

Earlier in his address, Bennett had acknowledged DHHS secretary Dr. Louis Sullivan as "one of the images that we blacks and whites celebrate."

As NAACP director Dr. Benjamin Hooks did a month earlier at the Martin Luther King program, Bennett noted success by blacks in a variety of fields. It is not enough for blacks to do well in just a few fields, he cautioned; blacks must explore more across-the-board pursuits in such areas as business and science as well.

"They can't hold a national basketball championship without us. They'd have to turn off the lights and give the people their money back. Our call won't be safe, though, until they can't hold a national science or mathematics conference without us either. We've got to slam dunk some money."

Bennett's final instruction incorporated a reminder written by historian and NAACP cofounder Dr. W.E.B. DuBois. According to Bennett, DuBois wrote that blacks have added three all-important items to American history: story and song; sweat and brawn; and spirit.

"From black brawn came brown tobacco," said Bennett. "From black blood came the white sugar, the white rice and the white cotton that made Memphis and Charleston and Baltimore and Washington."

"Black history tells black Americans: No one has done more in this country with less. Black history tells all Americans: You can't help or hurt one group without helping or hurting the other."

He concluded, "We've got to put our backs to the plow . . . and hold on."

Sponsored by DEO, the program also

included impromptu musical entertainment by jazz pianist Doug Carnes and special performances by Tony award-winning singer-actress Melba Moore, who recalled for the audience her inspiration, and that of many other black entertainers, to pursue God-given talents.

"It's no accident that some of the world's greatest singers had their foundations in the church," she said. "When we didn't have anything else, we had God. Then we couldn't get confused." □

## NIH Holds Safety Symposium

The Division of Safety is sponsoring the 12th NIH Research Safety Symposium Mar. 22-23 at the Omni Shoreham Hotel in Washington.

The symposium will examine mechanisms involved in managing technological emergencies that can occur in biomedical research facilities. The components of both the emergency and postincident response will also be explored, with attention devoted to keeping the risks in perspective. Safety professionals, hazardous materials specialists and research administrators will examine major issues through panel discussions and case studies.

There is a registration fee of \$35. For more information, contact Patricia Smith, 986-4886. □

## The NIH Record

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## NCI Sponsors Adopt-A-School Program

The National Cancer Institute's Adopt-A-School Program is one of many ways that the NCI and its EEO program impact on minority needs. The program was developed by the institute's equal opportunity advisory group under the leadership of Dr. Susan Garges of the Laboratory of Molecular Biology; O. H. Laster and Maxine I. Richardson, NCI's EEO officer. Through this program, NCI has entered into a partnership with the District of Columbia's McKinley High School to enrich the school's science curriculum and to motivate the students toward careers in science.

The program includes: seminars given by NCI scientists to science classes and science clubs, donations of surplus lab equipment, small group after-school laboratory projects supervised by NCI staff and summer positions for selected students. During the first plenary session held in October 1989, NCI deputy director Dr. Maryann Roper gave the opening address followed by a presentation on AIDS research given by Dr. Michele Evans, special assistant to the director.

During the month of December, Drs. Nancy Trun and Valarie Stout, two postdoctoral fellows from the Division of Cancer Biology and Diagnosis, conducted a 2½-hour laboratory on DNA isolation, restriction enzyme analysis and gel electrophoresis. Dr. Roslyn Epps from the Division of Cancer Prevention and Control conducted a plenary session on smoking and tobacco use prevention.

February events included: a laboratory session on plasmid restriction enzyme mapping conducted by Alfred May and Edward Beecham of the Division of Cancer Treatment's Laboratory of Molecular Pharmacology and a plenary session on the Biology of Cancer

by Dr. Otis Brawley of DCT's Clinical Oncology Program.

The NCI's partnership with McKinley will continue through the summer months when several students will hold summer positions within institute laboratories. □

## Theatre Group Holds Auditions

The NIH R&W Theatre Group will hold auditions for *The Dining Room*, A. R. Gurney's delightful comedy about life's milestones and changing social mores, on Monday, Mar. 12 and Tuesday, Mar. 13 from 7 to 9 p.m. in the Clinical Center (Bldg. 10). On Monday, the auditions will be held in the 14th floor auditorium and on Tuesday the auditions will be held in Lipsett Amphitheater.

Director Alex Totz needs three women and three men from about age 20 to about 60. The play consists of a series of funny and piquant vignettes of American life, all taking place in a dining room. Each actor and actress will have the opportunity to create several different characters in this show. Technical, backstage, costume, house management and publicity assistants are also needed and invited to attend the auditions. Performance dates are the last weekend in April and the first two weekends in May.

The NIH R&W Theatre Group is an ensemble of NIH employees and other community members who each year present a musical review and a dramatic production for the benefit of the NIH Patient Emergency Fund. The group also presents touring productions of its shows. For more information call Nancy Magurn, 948-2507. □



Dr. James B. Snow Jr. (above, l) is sworn in as the director of the National Institute on Deafness and Other Communication Disorders by Dr. James O. Mason, DHHS assistant secretary for health (r), Feb. 12. Holding the Bible is Snow's wife, Sally, and in the background is Dr. Jay Moskowitz, who served as acting director of the institute. Snow is the first native American to be appointed as director of any NIH institute. He is of the Arapahoe/Cheyenne tribe from Oklahoma. Immediately following the ceremony, Snow met with DHHS secretary Dr. Louis H. Sullivan (below, l). An evening reception was held in Snow's honor at the Stone House with more than 100 persons attending. Snow's office will be located in Bldg. 1, Rm. 201, telephone numbers, 402-0900 or TDD 496-6596.



## Lecture on Deafness

The Division of Equal Opportunity, Equal Opportunity Branch, will sponsor a lecture, "A Sociological Model of the Deaf and Hearing Communities: Roles of Oppressed and Oppressor Peoples," on Mar. 8, in Bldg. 10, Lipsett Amphitheater, from 10 a.m. to 12 p.m. The speaker, Dr. Patricia Peery, is a clinical sociologist in private practice who specializes in helping people deal with oppression on a personal level. All NIH employees and their guests are invited. □



Students from McKinley High School in Washington, D.C., learn about laboratory science at NCI. The institute 'adopted' McKinley as part of an EEO outreach program.

## HEART

*(Continued from Page 1)*

dairy products in place of butter-fat rich products."

He also advised "moderate portions of trimmed lean red meat, poultry without skin, or fish in place of high saturated fatty acid choices." Egg yolks should be eaten in moderation, but egg whites, which contain no cholesterol, can be eaten often.

"Significant portions of fat come from oils, margarines and shortenings," Carleton continued, "and we recommend use of those containing primarily unsaturated fatty acids instead of saturated fatty acids. In essence, what is needed is an habitual pattern of eating that is low in saturated fatty acid, total fat and cholesterol. No single food or supplement will magically bring down an elevated blood cholesterol level. Specifically, fish oil supplementation will not usually lower a person's blood cholesterol level."

The diet recommendations extend, for all Americans, from age 2 to beyond age 65 and include women as well as men. Advice on eat-

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*"In essence, what is needed is an habitual pattern of eating that is low in saturated fatty acid, total fat and cholesterol. No single food or supplement will magically bring down an elevated blood cholesterol level."*

—Dr. Richard Carleton  
Panel Chairman

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ing patterns for children are forthcoming this year from the NCEP's children's panel.

Carleton emphasized the responsibility borne by the food industry.

"Its scientists, nutritionists and technologists are crucial to the effort," he said. "The industry should expand efforts to develop, manufacture and market foods lower in saturated fatty acids, total fat and cholesterol while increasing the amounts of complex carbohydrates, including soluble fiber."

Carleton urged all schools, from kindergarten through university, to promote heart-healthy eating, and particularly emphasized that "culinary arts schools, from which will come many cooks of the future," get with the program.

"In short, the report conveys a message of informed choice rather than prescribing a monolithic 'diet,'" said Dr. James I. Cleeman, NCEP coordinator. "The report emphasizes that what is important is the overall pattern of eating rather than simplistically labeling individual foods as 'good' or 'bad' and recommending that the public eat only the

'good' foods and never the 'bad' ones.

"Another vitally important aspect of the panel's report is that it calls for gradual change, recognizing that it takes time for individuals to alter their eating habits," Cleeman noted.

What can be gained by adding diet to the list of modifiable risk factors (including high blood pressure, cigarette smoking, obesity and physical inactivity) for heart disease? For starters, a reduction in the rate of coronary heart disease (CHD), which kills more than 500,000 Americans annually. (It is estimated that for every 1 percent reduction in serum cholesterol, there is a corresponding 2 percent reduction in chances of developing CHD.) In addition, some 1,250,000 Americans suffer heart attacks each year, and millions more have angina pectoris (chest pains that may signal underlying heart disease). Experts estimate that CHD costs the U.S. economy more than \$50 billion every year.

CHD is the result of atherosclerosis, in which deposits of cholesterol and other lipids (fats), along with cellular reactions, thicken artery walls. This process gradually reduces the caliber of the artery and restricts blood flow. Inadequate blood flow may cause injury to or death of tissue beyond the site of the reduced flow; in coronary arteries, this leads to myocardial infarction (heart attack) or sudden death.

The average cholesterol level for the adult U.S. population is about 210 mg/dL. While a level of 240 is considered high, levels between 200 and 239 are associated with increased incidence of CHD. It is estimated that more than 6 million Americans have symptomatic CHD.

The NCEP report acknowledges a degree of public skepticism about the relationship between diet and heart disease, a dubiety heightened by the controversy last fall surrounding an article in *The Atlantic* magazine which called into question the validity of data linking diet and serum cholesterol levels. Consequently, although the report stands solidly behind several major international studies linking eating habits to clogged arteries, it quietly acknowledges that further research results are always being sought, and that the last word on the subject may not yet be in.

Nonetheless, a major program has been launched, with consequences for all Americans. This is not the first time that diet recommendations have been issued by a body of experts, however. "Similar recommendations have been made by the National Research Council's *Diet and Health* report, by the Surgeon General's report, and by the American Heart Association," said Cleeman. But those reports included no extensive set of recommendations for actually implementing their suggestions. Nor did they target their

audiences very specifically. Cleeman emphasizes the significance of endorsements and approval offered by the NCEP's coordinating committee, which is composed of the major health professional, voluntary and community organizations that are concerned with cholesterol in the U.S.

"We think that the active involvement of the coordinating committee organizations will

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*"The report emphasizes that what is important is the overall pattern of eating rather than simplistically labeling individual foods as 'good' or 'bad' and recommending that the public eat only the 'good' foods and never the 'bad' ones."*

—Dr. James I. Cleeman  
NCEP Coordinator

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make all the difference in ensuring the success of the population approach," he concluded.

If all of its advice is heeded, NCEP expects an approximate reduction of 10 percent or more in the average blood cholesterol level of the U.S. population, leading to an approximate reduction of 20 percent or more in CHD, and to "significant improvement in the health and quality of life of Americans." □



Dr. Edwin Cocke (l), an ear-nose-throat specialist visiting from Memphis, and Dr. Mark Luciano, an NINDS medical staff fellow, perform an unusual neurosurgery technique to remove a brain tumor lodged behind a patient's face.

Photo: John Crawford, MAPP

## McLachlan Named NIEHS Intramural Research Director

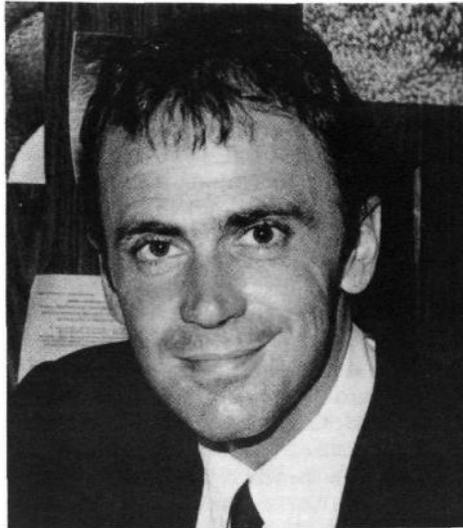
Dr. John A. McLachlan has been named director of the Division of Intramural Research at the National Institute of Environmental Health Sciences.

McLachlan joined the institute as a research associate in 1973. Two years later he became a commissioned officer in the U.S. Public Health Service. He has served since 1983 as chief of the Laboratory of Reproductive and Developmental Toxicology at NIEHS, and since 1976 as head of the developmental endocrinology and pharmacology section.

In his new post, McLachlan will lead one of four major divisions within the institute, one comprising eight laboratories and a branch all devoted to basic biomedical research.

McLachlan's own scientific investigations have included major studies on the drug diethylstilbestrol (DES) once prescribed for pregnant mothers to prevent miscarriage. McLachlan's work on DES established a mouse model for DES exposure and helped establish DES as a transplacental carcinogen and a teratogen. His work showed that DES caused reproductive system anomalies in both male and female laboratory rodent offspring that were also identified in the children of women who had been given DES during pregnancy.

McLachlan's research interests extend to pharmacology, developmental biology and toxicology, endocrinology and hormonal and transplacental carcinogenesis. His laboratory studies the mechanisms for induction and expression of estrogen-associated differentiation defects in the reproductive tract. He has taken a major role in organizing a series of international scientific conferences on estrogens and other hormonally active substances in the environment and their effect on health. He has been an invited speaker at scores of scientific



Dr. John A. McLachlan

meetings in the United States and abroad and has organized and participated in many conferences, symposia and workshops addressing a variety of environmental issues.

McLachlan has coauthored 70 scientific articles and written or edited many book chapters, conference proceedings and monographs. He received the U.S. Public Health Service Commendation Medal in 1980 and the Outstanding Service Medal in 1986. He is a member of the Society of Toxicology, the Endocrine Society and the American Association for the Advancement of Science.

McLachlan is a graduate of Johns Hopkins University and received his Ph.D. from George Washington University. He and his wife and three children live in Raleigh, N.C.—Tom Hawkins □

## Rights in China Discussed

"China and Human Rights" was the topic of an hour-long noon program held in Masur Auditorium recently, sponsored by the NIH medical scientists committee, a letter-writing group associated with Amnesty International, which meets weekly in the NIH and FAES.

The first speaker was Prof. James Feinerman, associate professor of law at Georgetown University Law Center. A doctor of international law specializing in East-Asian studies, Feinerman was on the law faculty of Peking University in 1982-1983, and is currently a member of the American Bar Association's international law section and its committee on the People's Republic of China. He discussed China's human rights record since the Cultural Revolution, focusing on the serious human rights violations that occurred during the student uprising in Tienanmen Square in June 1989 and its aftermath. He pointed out that the absence of a democratic tradition in China should not be used to justify or explain the



Discussing China and human rights at a recent lecture sponsored by NIH's medical scientists committee are (from l) James Feinerman, law professor at Georgetown University, Xiao Qiang, deputy executive director of the Independent Federation of Chinese Students and Scholars, and Pierre Savagner, committee coordinator.

denial of human rights in China today.

Also speaking to the audience of approximately 200 was Xiao Qiang, deputy executive director of the Independent Federation of Chinese Students and Scholars, who described the role of Chinese student associations. The talks were followed by a lively question and answer session.

After analyzing the official U.S. position, both speakers expressed concern that recent visits to China by foreign scientists are being publicized by the Chinese authorities for propaganda purposes.

The meeting was coordinated by Pierre Savagner of the medical scientists committee, which welcomes newcomers at its weekly meetings every Thursday at 12:30 p.m. in Bldg. 10, B1D25. For more information call Savagner, 496-6040, or Patricia McKinley, 496-9291. □

## DCRT Holds Computer Security Awareness Day Mar. 28

The Division of Computer Research and Technology is sponsoring Computer Security Day, Wednesday, Mar. 28, 9 a.m.-4:30 p.m., in Conference Rooms 6, 7, and 8, Bldg. 31C, 6th floor.

The event will feature 10 vendors who will display security products ranging from physical locking devices to internal hardware and software packages. These products will focus on PC security and products for the Macintosh.

In addition to the vendor displays, computer security videos will run throughout the day including the video, "Computer Security Awareness at NIH, It's Everyone's Responsibility," produced by DCRT.

Two speakers will also give talks. Angel Rivera, local chapter president of the Information Systems Security Association, will present

"Computer Viruses—Real Solutions to a Real Problem" at 10 a.m. He will demonstrate how a computer virus infects and can ultimately destroy both hardware and data on a PC.

The afternoon speaker will be Dr. Eugene Spafford, professor in the department of computer sciences and software engineering center, Purdue University, at 2 p.m. His presentation, "Programmed Threats and a Practical View of Computer Security," will focus on a more practical view of computer security, including security violations on PCs as well as networks and mainframes.

In addition, 20-minute presentations on products will be given by vendors throughout the day. General computer security brochures and handouts will also be available.

For more information, call 496-4885. □

## MOSKOWITZ

(Continued from Page 1)

ing the possibility of the creation of a new Center of Physical Medicine and Rehabilitation at NIH. Additionally, Dr. James O. Mason, DHHS assistant secretary for health, has asked him to chair a PHS working group on biomedical science education. Its charge? To determine how PHS can contribute to national efforts to increase scientific literacy in the U.S. and how it can "help ensure a pool of well-prepared biomedical scientists and technical personnel to meet future national needs."

Atop these extracurricular assignments is Moskowitz' official day job: NIH associate director for science policy and legislation, a post that oversees three divisions, five branches and the Office of Recombinant DNA Activities.

Recombinant might be the adjective best suited for Moskowitz, so diverse and varied have his assignments been.

He came to NIH in 1969 as a newly minted Ph.D. in biomedical sciences from



Dr. Jay Moskowitz (r) accepts a plaque recognizing his efforts to launch NIDCD from the institute's acting executive officer Geoffrey Grant.

Brown University. Under the auspices of NIGMS' PRAT (Pharmacology Research and Training) fellowship program, Moskowitz began laboratory work with NHLBI's eminent pharmacologist B.B. Brodie. While studying the effects of hormones on cyclic nucleotides, he developed, literally, an allergy to his work.

"I became severely allergic to laboratory animals," he said, explaining the effect of serendipity on his career. "Whether it was rats, mice, rabbits—all dander affected me. I was never aware that I had an allergy before coming to NIH."

Moskowitz, who to this day can tell at a sniff if animals have been in a room, tried to develop immunity to dander through several avenues, including the employee health service

in Bldg. 10 and an allergy clinic at Navy. Meanwhile he wore a scrub suit and mask to protect himself while conducting experiments.

At about this time, Moskowitz realized that his studies were leading him toward a disconcerting narrowness.

"I was going from free fatty acids, to nucleotides, to ion exchange, to receptors," he recalls. "My career was getting much more specific, which wasn't a direction I wanted for my future."

Taking refuge in night classes in management at FAES, Moskowitz discovered that he had a taste for administration. He entered the Grants Associate (GA) Program in 1971 and spent a year cultivating a wider view of biomedical research.

"Most of my GA rotations were not at NIH," he explained. "I wanted to see how NIH fit in with the rest of PHS and government, so I went outside the agency."

Preferring fewer but longer assignments than his classmates, Moskowitz worked at the National Science Foundation, DHHS and, most rewarding to him, the Office of Management and Budget, where he studied mental health programs.

Upon graduation from the GA program in 1972, Moskowitz was hired by Dr. Claude Lenfant, NHLBI director, as one of his first professional staff. Lenfant put him in charge of special programs for the Division of Lung Disease, from which Moskowitz rose through successively more responsible positions. Within 8 years, he was NHLBI's associate director for scientific program operation.

During this ascent, which Moskowitz offhandedly described as "having a normal career," he took two semesters of night classes in American Sign Language in county public schools.

"I just got the notion to learn it," he says. "I don't know where it came from."

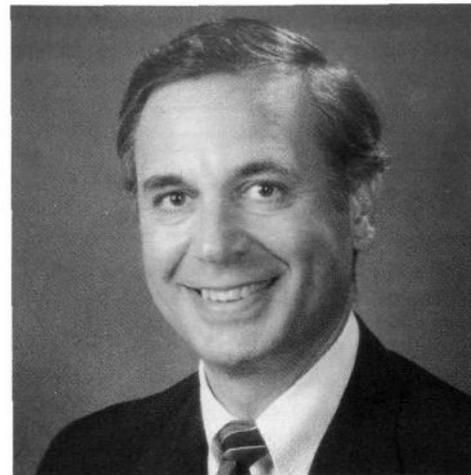
That experience didn't hurt when former NIH director Dr. James Wyngaarden tapped Moskowitz to head NIDCD three days after it was formally established on Oct. 28, 1988.

The deafness institute was not created from scratch. Rather, it had been a division within what was then NINCDS and had a budget of some \$75 million.

"My job was to develop the foundations of the new institute's program," Moskowitz recalls, "according to the mandates of the enabling legislation."

What it really meant was corralling 100 of the country's top authorities on deafness and disorders of speech, voice, language, hearing, balance, taste and smell and giving them 3 days to plan an entirely new research entity.

"Everyone that I called was willing to work on our National Strategic Research Plan," Moskowitz said. "I didn't get one turndown.



Dr. Jay Moskowitz' many administrative duties at NIH in the past 20 years qualify him as a *factotum*, which Webster's defines as "a person having many diverse activities or responsibilities."

That's a tribute to the community we were working with."

Cloistered at an inn in suburban Baltimore, the group worked day and night to hammer out a plan that would address not only the institute's science agenda but also the mechanisms by which it would meet its training, centers, and epidemiology missions. "I can remember people xeroxing papers at 2 in the morning," said Moskowitz of that period.

At the time—January 1989—he reminded his accomplices of what had occurred 200 years earlier in France when, following the revolution, the new government met to create a new constitution.

"The French framers had to take the 'tennis court oath'—which meant they wouldn't leave the court where they were meeting until a new constitution was developed for France. I gave a similar oath to our members at Hunt Valley."

Prior to taking the helm of NIDCD, Moskowitz had spent 3 years as a key assistant to Wyngaarden, acting as NIH's AIDS research coordinator for several years and initiating and serving on the task force that helped create a human genome center at NIH. During 1987, NIH's centennial year, he was executive director of the observance, which involved dozens of events and a higher public profile for the agency than perhaps any time in its history.

In spite of these achievements, Moskowitz still hadn't held the one post he most cherished—institute director. Having reached that goal now, he reflects on its significance:

"It wasn't a daunting assignment (to craft a new institute), but an exciting and exhilarating one. There is something very satisfying about putting together a new entity."

Even as a postdoctoral researcher at NIH, Moskowitz was impatient with the status quo.

"I wasn't the kind of scientist who liked confirming the research results of others or repeating experiments," he said. "I liked being the first person to make a particular discovery."

As NIDCD director, he conceived of his role as that of a "harbor pilot, trying to bring the vessel out of the murky waters and brackish estuaries of traditional science and into the mainstream of modern science."

Moskowitz emphasized the importance of such new disciplines as molecular genetics, neurosciences and molecular biology in creating NIDCD, "so we could enter the Decade of the Brain (1990s) with new insights and proper resources."

Another goal was developing a unified constituency from among the varied research interests falling under the umbrella of communications disorders. Moskowitz sought the input of some 40 voluntary health organizations when drafting NIDCD's 3-year strategic plan and corresponded personally with their executives.

A deft political touch was essential considering that the deaf community was coming into its own at about the same time NIDCD was established; protesters at Gallaudet University in 1988 were successful in rejecting a school president who was not deaf and replac-

"We don't have an active clearinghouse or data center yet, but plans have been made for them," Moskowitz reported.

The NIDCD staff and council feted Moskowitz the night before Snow was sworn in as the institute's first chartered director. Moskowitz' reaction was typically understated: "It was a little embarrassing to be honored for something that I got so much pleasure and satisfaction out of doing."

In retrospect, Moskowitz found holding down an institute directorship along with Bldg. 1 responsibilities refreshing.

"It's almost ideal to have the two jobs concurrently," he said. "I needed to be reacquainted with institute issues after being in Building 1 for 3 years."

Turning his sights toward new responsibilities in physical medicine, heightening scientific literacy in the U.S., and recruiting minorities to careers in biomedical science (a new NIH associate director for minority affairs is soon to be named, he reported), Moskowitz expects the 11-hour days and weekend work to continue. Like many other top level scientists and administrators here, he has been lured from time to time by larger salaries in the private sector.

"In the past few years, I've been offered jobs that would more than double my salary," he said. "But the satisfaction of what we do here outweighs the additional dollars. There are few places in the world where you can have the kind of impact offered by a leadership position at NIH. I guess that's the accomplishment of a public servant—to benefit the many, not just the self."

Not that Moskowitz has gone personally unrewarded for his service—after 18 months leading NIDCD, he admitted that, yes, his sign language skills have improved. □

## Social Work Month Observed

In honor of Social Work Month, a lecture on "Social Work and Health Care Beyond the '90s" will be presented Mar. 12 in Lipsett Amphitheater, Bldg. 10, by Dr. Gary Rosenberg; he is senior vice president of Mt. Sinai Medical Center and Edith J. Baerwald professor of community medicine. The lecture, to be accompanied by an awards ceremony, will take place from 11 a.m. to 1 p.m. For more information call Donna Geller, 496-4210. □

## NIH Holds Consensus Conference On Surgery for Epilepsy

An NIH consensus development conference on surgery for epilepsy will be held in Masur Auditorium, Bldg. 10, Mar. 19-21. The scheduled sessions are: Mar. 19—8:30 a.m. to 5 p.m.; Mar. 20—8 a.m. to 12:45 p.m.; and Mar. 21—9 to 11 a.m. A press conference will follow at 12:30 p.m. on Mar. 21.

Key questions to be addressed at the conference are: How should patients be selected? What evaluation is necessary to localize epileptic foci? What procedures are appropriate for specific epilepsies? How should outcome be assessed? Directions for future research—should a controlled trial be done? If so, for what seizure types?

The conference is sponsored by NINDS and the NIH Office of Medical Applications of Research. □

## Donations Needed for PEF Auction

The sixth annual Patient Emergency Fund (PEF) Auction will be held on Tuesday, May 1 from 11 a.m. to 2 p.m. in the Clinical Center. This crowd-pleasing event includes a silent and live auction, bake sale, raffle, white elephant sale, and more.

Donations are needed. NIH employees (or others) can donate their time, talents, and new or unused items. Past donations have included: sailing, skiing and tennis lessons; a photo portrait; a vacation home for a weekend; a car tune-up; craft items and artwork; and tickets to theater and sporting events. Baked goods are also needed. Members of departments are invited to join together to purchase an item or provide a service to donate. Use your imagination. Be creative. Share something of yourself and help the PEF.

Donations can be delivered to: R&W, Bldg. 31, Rm. B1W30. Call Kelly Goka, 496-6061, for more information on how you can help with the PEF Auction. □

## FAES Offers Grants

The FAES will award grants of \$750 to students conducting research at NIH this summer. An additional \$500 to cover travel and living expenses might be available if need can be demonstrated. High school, undergraduate, graduate and medical students who will work for a minimum of 8 weeks are eligible. Applications are available in the FAES business office, Bldg. 10, Rm. B1C18 or by calling 496-7976. Completed applications including a description of the research to be performed and a supporting statement from the NIH sponsor must be received by Apr. 6. Notification of the awards will be made to the NIH sponsor by the end of April. □



*Moskowitz holds a collage of highlights in the struggle to establish NIDCD given to him by institute colleagues. Looking on is Karen Jackson, who has been NIDCD's acting information officer.*

ing her with a deaf leader—I. King Jordan.

"I met with Dr. Jordan for advice," Moskowitz said, "and he has joined our board." Deaf actress Marlee Matlin was also recruited to NIDCD's national advisory council.

"We have adopted a multicultural approach, to make inroads to deaf culture," Moskowitz said. A meeting on cultural issues and deafness will be sponsored by NIDCD later this spring.

As Moskowitz turns over the NIDCD reins to Snow, all of the original mandates have either been met or outlined.

## MERGER

(Continued from Page 1)

Wyngaarden announced the proposed consolidation and instituted preparations in October 1988.

"Dr. Wyngaarden felt strongly that NIH's need to consolidate similar programs to enhance efficiency has been heightened by the recent creation of several new NIH components and the addition of new program responsibilities, including the human genome initiative," Whitney said.

"Our lengthy period of preparation has given us every reason to believe that the National Center for Research Resources not only will continue DRR's and DRS's traditions of excellence, but will integrate and extend them. Our prime research resources are our own people," he added.

The National Center for Research Resources will be one of the larger components of NIH, with a total budget of more than \$400 million and a staff of approximately 550 persons.

NCRR develops and provides its varied biomedical research resources through six extramural and four intramural program components.

### Extramural Programs

- *General Clinical Research Centers Program.* GCRCP funds a national network of 78 centers, usually organized as separate units within hospitals of academic medical centers. The GCRCs provide most of NIH's extramural infrastructure for multicategorical clinical research and introduce house staff and medical students to the relationship between basic and clinical research and the translation of research results into medical practice.

- *Biomedical Research Technology Program.* BRTP is designed to answer technological needs of the biomedical research community. BRTP grants enable scientific institutions to develop and establish centers for advancing the state of the art in a wide variety of research tools and for applying them to biomedical research.

- *Animal Resources Program.* ARP supports numerous research animal resources including seven Regional Primate Research Centers. Its Laboratory Animal Sciences Program supports research into laboratory animal disease, model development, institutional improvements, personnel training, colonies of especially valuable lab animals, and related activities.

- *Biological Models and Materials Resources Program.* BMMRP funds development and support for nonmammalian model systems (intact lower organisms, in vitro systems, and biomaterials).

- *Biomedical Research Support Program.* BRSP conducts three grant programs. Through Bio-



Dr. Robert Whitney will head the new National Center for Research Resources; he has been director of DRS and acting director of DRR.

medical Research Support Grants, institutions that already have project-oriented biomedical research grants awarded by other ICDs receive support for activities that complement and strengthen the existing research structure. Shared Instrumentation Grants permit access to expensive state-of-the-art research equipment by groups of investigators who could not individually afford the instruments. The Minority High School Student Research Apprentice Program promotes interest in careers in health research and the health professions among minority high school students, through the opportunity for hands-on experience in research laboratories.

- *Research Centers in Minority Institutions Program.* RCMI grants enhance significantly the biomedical and behavioral research capacity of predominantly minority institutions that offer doctorates in the health professions or health-related sciences. The 1985 legislation establishing the program focused renewed attention on the disparities in health status between minority and white Americans.

### Intramural Programs

- *Biomedical Engineering and Instrumentation Program.* BEIP staff members collaborate and consult with NIH biomedical investigators on applications of engineering, mathematics, physics, and the physical sciences—including measurement, automation, imaging, mathematical modeling, and design of specialized instrumentation. BEIP also provides comprehensive services for scientific equipment, including construction, modification, maintenance and rental.

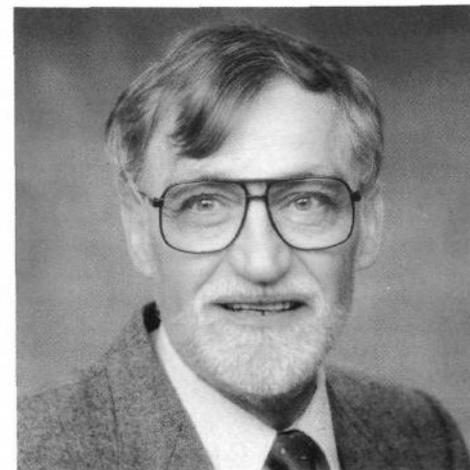
- *Library Branch.* The NIH Library has access to virtually all published biomedical information, and its automated systems deliver

the information rapidly.

- *Medical Arts and Photography Branch.* MAPB meets scientists' and programs' visual communications needs with high quality graphics, design, medical illustration, photography, and video.

- *Veterinary Resources Program.* VRP provides professional and technical support services for NIH intramural research involving the care and use of animals: animal procurement and holding, diagnosis and disease control, surgical support and consultation. Staff also conduct research on diseases of laboratory animals. VRP's NIH Animal Genetic Resource provides breeding pairs of especially valuable small animals to research institutions worldwide.

A task force appointed by ex-director Wyngaarden in late 1988 also considered the best organizational location for some similar NIH extramural research resource programs then administered by DRR and other ICDs. A few program changes resulted, including transfer of the Minority Biomedical Research Support (MBRS) Program from DRR to NIGMS. □



Gyula Kovach recently joined the Division of Safety staff as chief of the Environmental Protection Branch. Kovach received his undergraduate engineering degree in his native Hungary. He came to the United States in the mid-1960s and completed two master of science degrees in water resources engineering and environmental health engineering at the University of Kansas. Kovach then held a number of positions with the State of Kansas before serving as executive manager of the state health department's environment division. As the moving force behind NIH's environmental health program, he plans to "develop NIH's program to act as a prototype to other federal agencies and biomedical research facilities."

## Tralka Named NIDDK Centers Program Director

Tommie Sue Tralka has been appointed director of NIDDK's Digestive Diseases Centers Program and project officer for the institute's liver transplantation database.

Tralka will administer 12 research core center grant awards, which provide funds for core resources such as cell culture, immunoassay, biostatistics, or other central research service facilities; pilot/feasibility projects; and program enrichment funds. The centers focus on liver diseases, gastrointestinal motility, absorption and secretion processes, inflammatory bowel disease, structure/function relationships in the gastrointestinal tract, neuropeptides and gut hormones, and diarrheal diseases.

Tralka will oversee establishment of the liver transplantation database, a 7-year project in which data will be gathered from patients and donors from several transplant centers in the United States. She will also serve as director of the Small Business Innovative Research Program and represent the Division of Digestive Diseases and Nutrition on the NIDDK minority affairs committee.

A native of Louisiana, Tralka attended college at Louisiana State University, Baton Rouge, and McNeese State University, Lake Charles. She completed 2 years of medical school at Louisiana State University School of Medicine, New Orleans, before coming to NIH in 1967.

At NIH, she began as a histopathology technician at the National Cancer Institute, later working as an electron microscopist and biologist at NCI's Laboratory of Pathology. She says that even though she did not yet have her college degree, she was encouraged to conduct research by her lab chief at the time, Dr. Alan Rabson. She became a successful investigator and authored or coauthored more than 40 articles and abstracts before receiving her



Tommie Sue Tralka

B.S. degree from McNeese State University in 1985. Her major areas of investigation were cell differentiation studies and virology, particularly studies of herpesviruses, retroviruses and papovaviruses.

Her administrative career at NIDDK began in 1984 when she took a job as an executive secretary in the Review Branch. She became a health scientist administrator in 1985 and has been responsible for reviewing grant applications and contract proposals for research centers, program projects, multicenter clinical trials, research training, conferences and career development.

Tralka has been an active supporter and participant in Career Day, sponsored by the NIH advisory committee for women. She is a member of the extramural associates advisory board and of the Staff Training in Extramural Programs committee.—Jim Fordham □

## NHLBI's Bill Comstock Retires From NIH After 39 Years

William Comstock of NHLBI's Laboratory of Biophysical Chemistry has retired after 39 years at NIH.

Comstock served in the U.S. Navy, as a member of the Navy Band, from 1943 to 1945. He came to NIH in 1951, first with the National Cancer Institute and later with the National Institute of Arthritis, Diabetes, and Digestive and Kidney Diseases. In 1967 he moved to NHLBI's Laboratory of Chemistry (now the Laboratory of Biophysical Chemistry), where he has been in charge of operating the LKB mass spectrometer. This instrument is used by a wide variety of NIH researchers, many of whom have come to

appreciate Comstock's easygoing, good humored personality.

During his NIH years, Comstock played with the NIH Band and performed for patients and their guests on Friday nights in Masur Auditorium. Still active with local bands, he plays tenor saxophone as often as three times a week for people who like the big band sound and ballroom dancing.

After his retirement, Comstock hopes to continue making music and to spend more time with his children, one of whom lives with him, and with his Akita dog Tara. He will be greatly missed by everyone in the laboratory. □

## DCRT Offers VMS Hotline

The DCRT Computer Systems Laboratory has begun a pilot program to provide limited VMS services to users of Digital Equipment Corp.'s VAX computer systems at NIH locations in Montgomery County. VMS is a computer operating system that runs on the VAX line of minicomputers, a commonly used scientific laboratory computer.

A telephone hotline has been set up to facilitate requests for services. These services include a variety of routine software maintenance tasks such as telephone, electronic mail and on-site consultation about VMS technical and system management topics and assistance with VMS and add-on software product updates and installation. These services are being provided on a trial basis to evaluate NIH response and the desirability of continued assistance.

The VMS hotline number is 496-1027 and is available weekdays from 8:30 a.m. to 5 p.m. □



Dr. Bruce Chabner (r), director, Division of Cancer Treatment, gives an appreciation award to Gerhard Andlinger and his wife, Arntraud, for their generous contribution (\$1.1 million) to NCI to further efforts to develop innovative therapies for the lymphomas. Andlinger said upon receiving the award, "My wife has been a patient here since July 1989 and we have been impressed with the confidence and dedication of the care she has received. Lymphoma is not a political cancer so there is not a lot of pressure for funding. So, we thought our contribution would help out with this research." Chabner cited a few of the projects selected to receive support from these funds: studies of anti-TAC antibodies in B- and T-cell lymphomas; the role of multidrug resistance in non-Hodgkin's lymphomas and trials of reversing drug resistance; studies of the phenomenon of lymphoma cell death in response to CD3 antibodies; new approaches to autologous bone marrow transplantation; further work on molecular aspects of the diagnosis and detection of residual disease in the lymphomas. The award was presented at NCI's Board of Scientific Counselor's meeting, Feb. 12.

## DRG's Dr. Zain Abedin, Health Scientist Administrator, Is Mourned

Dr. M. Zain-ul-Abedin, a health scientist administrator with the Division of Research Grants, died on Jan. 10 of multiple myeloma. He was 57 years old.

Born in South India, Abedin received his master's degree with distinction from the Muslim University, Aligarh, where he briefly served on the faculty of the zoology department. He later migrated to Pakistan in search of better career opportunities and settled in the then-capital city of Karachi. While serving as a lecturer in biochemistry at a local college, he won a Fulbright scholarship to come to the United States to work for his Ph.D. degree at Brown University. Having successfully completed his research program there, he returned to his native Pakistan where he shortly married a fellow graduate student from Brown University. They decided to settle in Karachi where Abedin was appointed as an associate professor in the biochemistry department at the University of Karachi. Subsequently, his wife also joined the faculty and together they focused their energies on building up the department, revising and modernizing its syllabus and initiating several research projects.

While at the university, he influenced the lives and careers of countless young people and soon rose to become a full professor. Abedin earned universal respect and admiration among



*Dr. Zain-ul-Abedin*

his students and colleagues who chose him as the first elected dean of the faculty of science. He served with great dedication in both these positions.

While occupying the highest administrative positions, Abedin remained a scholar and researcher. He took time off from his teaching and administrative responsibilities to pursue research at the University of Utah, Salt Lake City, and the Max Planck Institute in Göttingen, Germany. Finally, in 1977, he moved from Karachi to settle permanently in the United States.

At first, he took up a position as a visiting scientist in the Molecular Biology Laboratory under Dr. Ernst Freese. On completion of his tenure at this laboratory, Abedin briefly worked at Dynamac Corporation in Rockville and the National Academy of Sciences in Washington, D.C. He finally joined the Division of Research Grants where he initially served as the executive secretary for the biomedical sciences study section, reviewing fellowship applications. He subsequently became executive secretary of the molecular biology study section, a position he held until his death.

Abedin was the author and coauthor of more than 50 research papers, and besides his native Telegu and Urdu, he spoke English, German and French. He represented his scientific community in many countries including China, France, Sweden, West Germany, Italy and the Philippines. He was the recipient of a Fulbright fellowship, a UNESCO fellowship, and a Senior Research Fogarty Fellowship.

Abedin is survived by his wife, Dr. Barbara Zain, four sons, a daughter and a sister.

Contributions may be made to the Zain-ul-Abedin Memorial Fund at Crestar Bank, NIH, which will be used to establish a scholarship in his name.



*Guest Services Inc., operators of many of the NIH cafeterias, recently donated a check to the Friends of the Children's Inn; funds came from sales of their products in the cafeterias during the holiday season. On hand for the donation were (from l) Sam Ayoub, GSI director; Randy Schools, general manager of R&W and member of the Friends; Samuel Bavaro, manager of NIH GSI programs; and Paul Horton, director, Division of Space Management.*

## CRISP Training Offered

A 1-day training course on the "Introduction to the CRISP System," is being offered by DRG on Mar. 28, Apr. 18, May 23 and June 20.

This course is a comprehensive overview of the extramural and intramural projects covered under CRISP (Computer Retrieval of Information on Scientific Projects), detailing the scientific indexing and the system's search capabilities. A hands-on problem solving session is also included.

A request to attend this course should be directed in writing, to the chief, research documentation section, Division of Research Grants, Rm. 148, Westwood Bldg. and should be received at least 10 days in advance of the preferred course date. Form HHS-350 is not required. For more information, call 496-7543 or consult the Enter Training facility on Wylbur for course details. □

## 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 496-6371</i>	
Applied Creativity	3/16
Networking: Silent Politics	3/20
Effective Communications	3/27
How To Write and Publish Scientific Papers	4/23
Interacting with Difficult Employees	4/17
Time Management	4/17
Presidential Operations Workshop	5/7

<i>Office Operations Training 496-6211</i>	
Delegated Acquisition	4/9
Basic Time and Attendance	4/5
Domestic Travel	4/23
Foreign Travel	4/10

### *Training and Development Services 496-6211*

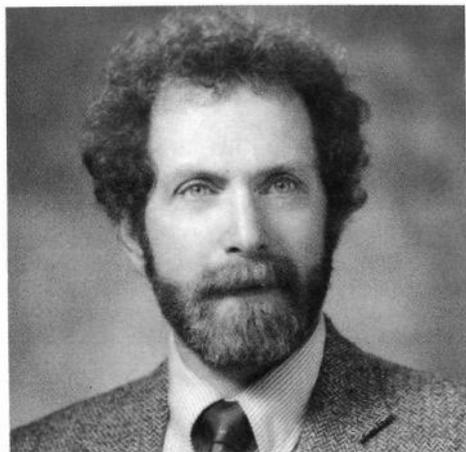
Personal Computer training is available through User Resources Center (URC) self study courses. There is no cost to NIH employees for these hands-on sessions.

The URC hours are:

Monday	8:30 a.m.—7 p.m.
Tues. Wed. Thurs.	8:30 a.m.—7 p.m.
Friday	8:30 a.m.—4:30 p.m.
Saturday	9 a.m.—1 p.m.

Training Center, DCRT, and other training information is available on WYLBUR. Logon to WYLBUR and type ENTER TRAINING

Note: The NIH Training Center is moving from Bldg. 31 to Executive Plaza South at the end of April; TDSP will follow at the end of the semester.



*Dr. Arthur L. Zachary, recently a faculty member in the department of biological chemistry at the University of Maryland School of Medicine, has joined the NIGMS Office of Review Activities. Zachary, whose research interests include DNA structure and function, bacteriophage biochemistry and marine microbiology, will review grant applications in the area of the genetic basis of disease.*

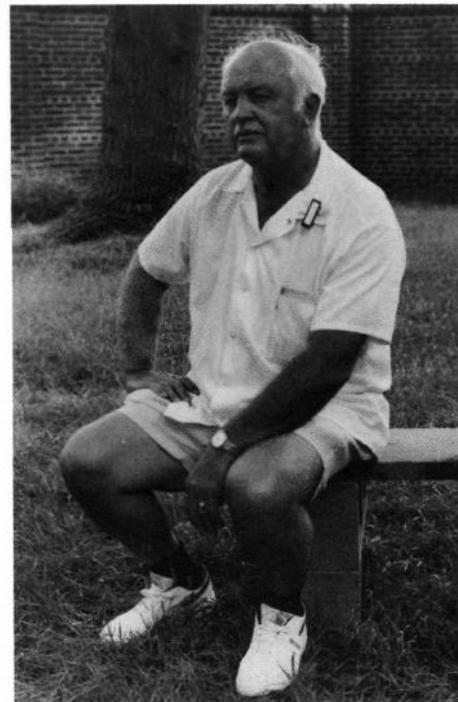
## Harry Belcher Dies, Longtime NIAID Technician

James H. (Harry) Belcher, medical biological technician with NIAID's Laboratory of Molecular Microbiology, died recently near his home town of Dickerson, Md.

Belcher joined NIH's Division of Infectious Diseases in 1947, 1 year before the division became the National Microbiological Institute, the predecessor of NIAID. Beginning in those early years and throughout his entire career with NIAID, Belcher worked with investigators whose work defined the cutting edge of research on viruses. He worked with Dr. Lawrence Kilham during the time of his seminal studies involving parvovirus; with Dr. Karl Habel in his pioneering research on rabies, mumps, and polyoma viruses; and with Drs. Wallace Rowe and Malcolm Martin as they conducted risk assessment studies to evaluate potential hazards associated with recombinant DNA research.

Belcher, who will be remembered in the laboratories for his good-natured approach to people and his skill with animals, was the inventor of the Belcher Wild Animal Catcher. Not only did his device protect handlers from being bitten by lab animals, especially wild squirrels, it ensured the safety of the animals themselves. The invention brought an award in 1952 and a commendation, for a "high degree of initiative and ingenuity," from then NIH director Dr. W. H. Sebrell Jr. And Belcher's fellow lab workers will long recall his inventive attempts to recycle used lab materials, such as the lead pigs used as protective casings.

In recent years, Belcher has been listed as coauthor on publications describing experiments with human immunodeficiency virus (HIV) in transgenic mice. These animals, crucial to investigations of HIV pathogenicity now being conducted in Martin's laboratory, were totally under Belcher's care. In 1988,



*James H. Belcher*

Belcher received a cash award for the level of commitment and responsibility he showed in the husbandry of such valuable animals. He had previously been commended for procedures he developed and his skill in surgical removal of DNA virus-induced tumors in lab animals.

Surviving besides his wife are two daughters, one son and three grandchildren. Particularly saddened at NIH are the many lab workers who have known Harry Belcher over the years. Harry's presence in the lab offered a perspective that could be matched only by a very rare and special person.

## Whitewater Rafting Weekend

No plans for Memorial Day weekend yet? Consider joining R&W for an exciting whitewater rafting adventure on the Cheat River in Albright, W. Va. We've put together an affordable weekend package, including two nights lodging, 2 full breakfasts, and a guided 11-mile rafting trip with a smorgasbord-style shore lunch. Cost for the package is \$120 per person, double occupancy. (Single occupancy price is \$160). For more information, call or visit the R&W Activities Desk, Bldg. 31, 496-4600. □

## Horseback Ride at Marriott Ranches

Marriott Ranches and R&W invite you to enjoy the beautiful scenery of the Blue Ridge Mountains on horseback. This 1½-hour guided trail ride will take you through mountain passes rich in foliage and wildlife. Marriott Ranches is a 5,000-acre facility located in Hume, Va. (Fauquier County). Date for the ride is Saturday, May 5 at 10 a.m. Cost is \$20 per person and reservations can be made at any R&W location. For more information, call 496-4600. □

*50th Anniversary Celebrated***NIH's Federal Credit Union Emerges From Doldrums**

By Anne Barber

This year, NIH's Federal Credit Union will celebrate its 50th anniversary despite some very shaky times during the early 1980s. Lindsay Alexander, the president and chief executive officer of the credit union since July 1989, is very pleased with her first year's results but says, "We still have a way to go."

According to Alexander, in the early 1980s, the credit union was having problems due to long-term investments that turned bad. When the market and interest rates fell, it was unable to unload the investments. Fortunately, the National Credit Union Administration came to its aid. The NCUA is an agency of the federal government that works much like the FDIC (Federal Deposit Insurance Corporation) in that it insures funds up to \$100,000 and provides regulatory oversight to all federally-insured credit unions. It also provides assistance to troubled credit unions. It determines whether to liquidate, merge, or, if feasible, help save the problem credit union.

A decision was made by the NCUA in 1984 to save the NIH credit union. The board of directors signed an agreement with NCUA, established new guidelines, and a new CEO, Jim Ray, came in to oversee the operation; he was given 3 years to accomplish the NCUA's goals. "Jim Ray did an excellent job of getting the credit union back on its feet and, in fact, completed the task 1½ years earlier than anticipated," says Alexander.

"While we are still not as highly capitalized as we would like to be, our capital-to-assets ratio is pretty good," she continues. "Capital is the total of all our reserves and undivided earnings (used to pay dividends) divided into our assets. NCUA generally requires the ratio to reach at least 5 percent and be maintained there. This ratio is just one measure of financial health. Last year was definitely a strong year for the credit union. We added a great deal to our capital funds and our ratio is now over 3 percent. We are fairly competitive with our interest rates. As we become more stable, we will be able to offer better and more services along with higher dividends."

She continues, "We have a lot of new programs for 1990—revamping the mortgage loan program to include both first-mortgage and home equity loans, full-line servicing including a very competitive 14.5 percent Visa card with a \$15 annual fee that beats all the cards offered in this area. We also plan to add the Gold Visa card in the fall."

When Alexander first joined the credit union, there had not been a CEO for 9 months, and there were many complaints, especially about long lines at teller windows. "We were understaffed and had a terrible

*Lindsay Alexander*

turnover problem as well. We have hired more tellers, are beefing up the training for our employees, and looking for ways to make better use of our staff and offer better services to our customers," she says. "We are also looking at adding more ATMs (automatic teller machines) to help cut down on the lines. But paydays and Saturdays continue to be our busiest days.

"While we will never be all things to all people, we are trying to hire more workers and provide member satisfaction while at the same time remaining financially viable."

The credit union has more than 22,000 members and \$100 million in assets, with branches in Bldgs. 13 and 31, Sibley Hospital, Suburban Hospital and a new branch in Westwood. "While we cannot support another branch, we would like to place more ATM machines across campus," says Alexander.

"To determine our approach to membership growth, we use the term STRETCH as a qualification guide. The initials stand for science, technology, research, education, computers, and health. That is basically what NIH used as a guideline when starting the credit union in 1940. We have added members throughout the years and will celebrate our 50th anniversary May 10 in Wilson Hall. You will see more publicity about this as the time gets closer," she says.

The National Credit Union Act was passed in 1934, allowing credit unions to be established. In the 1900s, only 200 members were needed; today, 2,000 are required.

"Credit unions are a strong force in banking and our Share Insurance Fund is stronger than both the FDIC and FSLIC (Federal Savings and Loan Insurance Corporation)," states Alexander. "Even though the combined assets of 11 credit unions are equal to only 6 percent of the assets of the nation's banks, we have become a force to be reckoned with. Since we

are nonprofit, there are plans under way to try to get us taxed by the bank lobbies."

According to Alexander, "The credit unions were started to take care of employees' financial needs. If we do it successfully and get your business, then we're happy."

Alexander comes to NIH from the Department of State's credit union in Virginia, where she worked for the past 15 years, after starting out as a teller. "While State's credit union is larger and I had 40 people reporting to me," she says, "it is very exciting to be in charge of your own credit union. You can take your ideas and put them to work. I am really delighted to be here."

Her plans for the future include making the credit union more attractive for younger people and retirees. "This should be a family bank: parents, children, grandparents, aunts, uncles, sisters, brothers, and in-laws as well," she states. "We need to get across to our members that we can serve them at any age, as long as they are related to a member."

The credit union has recently received support to be included in the orientation sessions held by personnel for new employees. "This is great," she says. "We can tell them about us, give them all the material, and offer them the benefits of membership the very same day."

There have been other changes made since Alexander's arrival. The most noticeable perhaps are the new tree logo, and the blue and gold colors. "I like the tree," she says, "because it symbolizes stability and growth."

"We have become a lot more efficient," she continues. "We can do a loan in 15 minutes and our car rates have just been lowered recently. We abide by federal regulations and guidelines, have federal exams and an outside audit once a year, just like other institutions. We have a board of directors, budget committee, executive committee, and a supervisory committee made up from members of NIH, your friends and colleagues. These people, all volunteers, provide the general direction of the credit union. I'm here to run the day-to-day operations, and make sure we follow the rules and regulations to keep us solvent and growing."

"Come and check us out," Alexander offers. "I think you'll be pleasantly surprised at our rates and services offered." □

**NIH Alphabet Soup**

*According to recent decision  
Bureau's parted from institute and division  
Instead of familiar BIDs  
We all now hail from ICDs  
Five NIH Centers force this latest fission*