The NIH Record

ICDs, With DTM, To Lead

Blood Donor Recruitment Effort Expands at NIH

The Blood Donor Center at NIH is beginning a large expansion of its donor recruitment effort that will eventually involve all components of the institutes.

Currently, many employees receive regular phone calls from the donor center asking for blood donations. You may even have seen recruiters from the Clinical Center’s department of transfusion medicine (DTM) desperately walking the halls and poking into labs to solicit donations.

Using these tactics, the donor center has been able to provide most of the blood needed by CC patients. But the demand still exceeds the NIH-provided supply. The small recruitment staff cannot cover the entire NIH campus and many potential donors are unaware of the need and the opportunity to offer lifesaving support to critically ill CC patients.

NIH hopes to challenge its staff, friends and neighbors and become a self-sufficient

(NIAID’s Chanock Wins Major Prize for Virology Research

Dr. Robert M. Chanock, chief of NIAID’s Laboratory of Infectious Diseases, was recently named the winner of the 1990 ICN International Prize in Virology. The annual prize, for which researchers throughout the world are eligible to be nominated, consists of an engraved crystal prism and $50,000 in cash.

An independent committee of distinguished international researchers selects the recipient of the prize and chose Chanock from among 51 nominations submitted by more than 700 scientists.

“Grant acknowledges the cumulative accomplishments of an outstanding team of NIAID scientists led by Bob Chanock,” commented Dr. John I. Gallin, director of NIAID’s Division of Intramural Research.

“What they have accomplished probably could not have been done anywhere else but at NIH. Here intramural scientists can devote themselves full-time to the basic research needed to understand and come up with solutions to difficult public health problems.”

The ICN award honors the work of researchers who have made major contributions to the understanding of viruses or the prevention, diagnosis, or treatment of viral diseases.

Chanock’s selection as the 1990 recipient was based on his remarkable 35-year career that includes discovery of several medically important

(NIH Mother Has Three Sons in Persian Gulf

About a year after Wesley became a sailor, Christy’s oldest son, David Williams, 22, decided that his construction job was too precious—depending as it did upon the whims of the weather—for a solid future, so he followed Wesley’s lead and joined the Navy.

Trained in San Diego, David had been assigned to Hawaii, where he married and had a daughter, when he was posted to the gulf on Dec. 27.

“David said a lot of his mates are scared,” says Christy. “They weren’t supposed to go, but were called at the 11th hour.” David is now a damage control specialist aboard the U.S.S. Harold E. Holt, a fast frigate.

The youngest of Christy’s sons, Mitchell Williams, 20, joined the Navy more for the job than the adventure.

“He wanted to acquire some basic skills and then get his education on the G.I. bill,” Christy explains. “He looked into all of the services and decided that the Navy had the most to offer.”

Mitchell, who last spoke to his mom on Christmas Eve following a 25-hour stretch of work, is a boiler technician aboard the U.S.S. Guam, a helicopter transport ship. He went straight to the gulf in October following boot camp in the Great Lakes.

“Whatever possessed (the boys) to join the Navy, I don’t know—it certainly isn’t a

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unit that collects all the blood needed to assure a constant, safe supply for CC patients. The donor center is calling for a network of volunteers to help in the education and potential recruitment of all eligible employees. The executive officer of each ICD will be approached to help coordinate enthusiastic volunteers to act as blood bank key-recruiters within their organizations.

To date, Dick Sherbert, NINDS executive officer, has successfully initiated the program as NINDS became NIH's pilot institute. Moe Hedetniemi, NICHD executive officer, is currently organizing volunteers throughout his institute. Both EOs are longstanding blood donors and understand the crucial need of exploring every avenue of donor recruitment.

The response from the NINDS network has far exceeded the center's expectations. With as few as 25 individuals, they have recruited approximately 100 donors in just over 2 months. Many of these employees were unaware of the Blood Donor Center's existence and became first-time donors. In addition, many of the transient employees who are on campus for a short time were conveniently reached by a fellow worker.

The donor center provides key-recruiters with various educational materials and constant updates of new programs and eligibility requirements. The staff is responsible for interacting with the key-recruiters and will be available for all necessary education or support.

The network concept of donor resource representatives working with keyworker or donor groups is a proven system used by many other blood collection agencies and hospitals. The primary reason people do not give blood is that they are not asked. By having enthusiastic individuals providing this personal approach, the donor center hopes all eligible NIH employees will be successfully recruited. Most importantly, CC patients will be assured a constant supply of life-sustaining blood.

Members of the new blood donor recruitment network are (standing, from l) budget officer Art Fried, executive officer Moe Hedetniemi, and deputy executive officer Benjamin Fulton, all of NICHD. Seated are (from l) NINDS executive officer Dick Sherbert and Clinical Center executive officer Ray Betich.

The third session in the seminar series "Women's Childbearing Years and Beyond" will be held Feb. 6 at 3:30 p.m. in Lipsett Amphitheater, Bldg. 10.

Seminar III is a multidisciplinary examination of major diseases threatening the health and well-being of women. Dr. Ruth Kirschstein, NIGMS director and acting director of NIH's Office for Research on Women's Health, will give introductory remarks.

Panel speakers include Dr. S. Leonard Syme of the University of California-Berkeley, who will present an overview of social and behavioral factors associated with diseases and health behaviors in women; Dr. Maureen Henderson of the University of Washington, who will give data on cancer morbidity and mortality; Dr. Lewis Kuller of the University of Pittsburgh, who will discuss cardiovascular disease; and Dr. Robert Lindsay of Columbia University, who will talk about osteoporosis and arthritis. Dr. Shiriki Kumanjila of Pennsylvania State University will lead the discussion and synthesis of panel presentations.

Two CME credits are available for documented attendance at this seminar. Sign language interpretation will be provided. For reasonable accommodation needs, contact program chairman Dr. Joan Rittenhouse, 443-8923.
Experts Make Recommendations on Reducing Tuberculosis Rates

More than 80 basic scientists, clinicians, pharmaceutical company representatives, and public health physicians working in tuberculosis (TB) research and control convened at NIH recently. The purpose of the workshop, titled “Future Directions in Tuberculosis Research,” was to set a national agenda for TB research in the 1990’s.

“Tuberculosis should be a part of our past, not our present,” said Dr. James O. Mason, NIH assistant secretary for health. “We need to exercise the courage and tenacity required to overcome obstacles to the elimination of tuberculosis.”

Worldwide, TB kills 3 million people a year—more than any other infectious disease. A century ago, TB was a leading cause of death in the United States. Through improvements in living conditions and the introduction of effective drug therapy, the number of TB cases in the U.S. declined steadily for 40 years. Since 1985, however, this trend has reversed itself, making TB again a more serious health problem in this country.

Today, at a time when effective and relatively inexpensive drug therapy is available, Americans account for 25,000 cases of TB and nearly 2,000 deaths per year.

The number of TB cases in the U.S. increased 5 percent in 1989 and 8 percent in 1990. The largest increases have occurred among children under age 5, in young adults ages 25 to 44, and among African Americans and Hispanics. Experts attribute much of this rise to TB cases that are occurring in persons with HIV infection and AIDS. Other causes include the emergence of a drug-resistant strain of the organism causing TB, the growth of the indigent, homeless population, increased immigration from high-prevalence countries, and transmission in institutional settings such as homeless shelters, correctional facilities, hospitals, and nursing homes.

The Division of Microbiology and Infectious Diseases, NIAID, cosponsored the workshop with the American Thoracic Society, the Centers for Disease Control, the Food and Drug Administration, and the Pittsfield (Mass.) Antituberculosis Association.

The workshop began with state-of-the-art presentations on global research needs, epidemiology, treatment, immunology, and the molecular biology of tuberculosis. The remainder of the 2½-day conference was devoted to the development of research goals in epidemiology and basic and clinical science.

Conferees made specific recommendations for more studies on the development of quick, improved diagnostic methods, more effective preventive drugs, requiring shorter treatment time, and therapies for patients with drug-resistant disease.

Recommendations were also made to study behavioral, economic, and other factors affecting lack of compliance with drug regimens. New methods are also needed to improve compliance with and to increase availability of the most cost-effective preventive and therapeutic interventions.

Mason suggested that federal agencies and voluntary private organizations join forces to encourage sources of funding to help carry out such a comprehensive TB research and control program.

Proceedings of the workshop will be published in the American Review of Respiratory Disease.—James Hadley

Wallace Rowe Virology Symposium Set, Feb. 4-5

The seventh annual Wallace P. Rowe Symposium on Animal Virology will be held Feb. 4-5 in the Lister Hill Auditorium, Bldg. 38A. The program begins with opening remarks by NIAID director Dr. Anthony S. Fauci at 8:45 a.m. on Monday, Feb. 4, with the final presentation at 3 p.m. on Tuesday, Feb. 5. Preregistration is not required.

Sponsored by NIAID, the symposium honors the late Dr. Rowe, who was an internationally recognized authority on animal virology. Rowe served as chief of NIAID’s Laboratory of Viral Diseases from 1968 until his death in 1983.

The theme of this year’s symposium is “Viral Pathogenesis.” Internationally renowned investigators will review findings from their research. On Monday, Dr. Niza Frenkel will discuss human herpesviruses 6 and 7; Dr. Thomas Kelly, replication of SV40; Dr. Mark Chubb, the molecular biology of human herpes simplex virus; Dr. James Hogle, the structure-function relationship of polyomaviruses and Dr. Eckard Wimmer, the molecular biology of polyomaviruses; Dr. Raymond Roos, Theliler’s viruses; Dr. Robert Purcell, hepatitis C and E viruses; and Dr. C. J. Peters, filoviruses, bunyaviruses and arenaviruses.

On the second day of the symposium, Dr. Richard Lerner will discuss catalytic antibodies; Dr. Peter Palese, infectious cDNA and influenza A virus and Dr. Heinz Arndtner, MX proteins of influenza A virus; Dr. C. J. Lai, improved immunogenicity and infectious cRNA of dengue viruses; Dr. Robert Johnson, molecular determinants of the pathogenesis of alphaviruses; Dr. John Rose, the transport and assembly of viral glycoproteins; and Dr. Bruce Chesebore, influence of mouse and human retroviral envelope genes in cell tropism and pathogenesis.
CHANOCK

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tant viruses, research on infectious viruses that cause childhood diseases, and work in vaccine development.

He was the first to isolate respiratory syncytial virus (RSV), the most important cause of pneumonia during infancy and early childhood, from humans. He also was a codiscoverer of the four human parainfluenza viruses as well as the mycoplasma agent of primary atypical pneumonia. (Parainfluenza viruses are the most common cause of croup.) Having helped identify these disease agents, he contributed to the development of tests to diagnose them and means to protect people against them. In addition, he led the team of researchers that created a novel live adenovirus vaccine now used routinely in the military to prevent epidemic outbreaks of debilitating coughs and fevers.

His laboratory has been instrumental in the discovery of and development of diagnostic tests for the Norwalk and Norwalk-like gastrointestinal viruses, the most important cause of epidemic viral gastroenteritis. He also helped develop several candidate vaccines for preventing severe diarrheal disease of infants and young children caused by rotaviruses.

The nominating committee noted that Chanock's contributions extend beyond laboratory work, and that in his position as laboratory chief he has served as mentor to numerous scientists who now hold major academic positions in infectious diseases with emphasis on virology.

NIH Director Dr. Anthony S. Fauci commented, "Bob Chanock's accomplishments can be attributed to his special combination of intelligence, creativity, persistence, and uncompromised devotion to basic research. He is a superb role model for the institute's young investigators."

Chanock has been with NIAID's Laboratory of Infectious Diseases since 1957. Prior to that time, he held teaching positions at Johns Hopkins University School of Medicine and Public Health and the University of Cincinnati College of Medicine.

He has published more than 570 articles on viral research. His numerous research honors and awards include membership in the U.S. National Academy of Sciences and the Danish Academy of Sciences, and the much coveted Robert Koch Medal of the Robert Koch Foundation (Bonn, Germany). He has served as an advisor to the U.S. Army, the World Health Organization, and foreign governments in the areas of health care and infectious diseases and participated on the editorial boards of several major scientific journals.

ICN Pharmaceuticals, Inc., headquartered in Costa Mesa, Calif., is a family of health care companies dedicated to the discovery and development of prescription pharmaceuticals, including antivirals.—Laurie Doepel

The NIH Madrigal Singers had a busy 1990 holiday season, beginning with the annual Christmas concert in Masur Auditorium Dec. 11. The group sang a mix of sacred and secular Christmas pieces as well as madrigals and English folk songs. In addition to their traditional Clinical Center caroling on Christmas Eve, they also sang (above) at the Georgetown Prep faculty Christmas party; faculty members responded with a donation of $100 to the Children's Inn. To join the singers, call 496-1122.

Dr. Robert M. Chanock

NEI Seeks Patients for Trial

The National Eye Institute is now recruiting participants for the Age-Related Eye Diseases Study (AREDS), a new clinical study that will follow the development and progression of cataracts and a potentially sight-robbing deterioration of the retina called age-related macular degeneration (AMD).

As Americans age, their chances of developing cataracts—a progressive and potentially blinding clouding of the eye's lens—and AMD, markedly increase. Since little is known about the specific factors that initiate AMD or cataracts, the AREDS will be the first attempt to track the natural history of these diseases.

Study participants do not need to have cataracts or AMD to be enrolled in the project. They will receive two comprehensive eye examinations annually until the year 2000. During this period, researchers will monitor and collect data on how the eye ages.

The NEI's Clinical Branch is one of 11 participating centers that is recruiting people for AREDS. To enroll in the study, prospective participants must: be between 60 and 75 years old; complete a preliminary eye examination conducted by AREDS staff; have not had prior ocular surgery (previous cataract surgery, however, is acceptable for participation in the AMD portion of the study); have no illnesses or disorders that would make long-term follow-up unlikely or difficult.

In order to be considered for participation in the AREDS study, you must request that a letter of referral from your ophthalmologist, internist, family doctor, or optometrist be sent to: Dr. Frederick Ferris or Dr. Emily Chew, c/o Donna Optican, AREDS Clinical Coordinator, Eye Clinic, NEI, Bldg. 10, Rm. 10C420, Bethesda, MD 20892.

Any questions regarding the study should be addressed to Optican, 496-5846, between 8:30 a.m. and 5 p.m.

Computer Tech Seminar Held

Silicon Graphics Computer Systems will present "Computing and Visual Processing in the Lab," a day of seminars showcasing the latest in scientific visualization and technology, on Jan. 29, 9 a.m. to 4 p.m., in Wilson Hall, Bldg. 1.

The seminar will include half-hour sessions on molecular modeling, neural networks, data presentation and publishing, project supercomputing and image processing. Selected software vendors will also be on hand. For more information, contact Denise Miller, 564-1980.
National Trials for ddl, ddC Planned

By Margo Warren

The first national clinical trial to compare the effectiveness and safety of two experimental AIDS therapies, ddl (dideoxynosine) and ddC (dideoxyctydine) is being initiated by NIAID. Four hundred persons infected with the human immunodeficiency virus (HIV) are expected to enroll. Participants must be either intolerant of or have failed treatment with the antiviral agent AZT (zidovudine).

The 2-year study will be conducted at 18 sites in 14 cities nationwide as part of NIAID’s Community Programs for Clinical Research on AIDS (CPCRA). NIAID established the CPCRA network more than a year ago to increase participation in AIDS clinical trials by HIV-infected persons who have been underrepresented in such studies: women, minorities, and drug users.

AZT, manufactured by Burroughs Wellcome Co., has slowed HIV disease and prolonged the lives of thousands of HIV-infected persons. Licensed by the Food and Drug Administration in March 1987, AZT remains the only antiviral drug that is approved as an AIDS therapy. However, many patients have had to stop using AZT because of side effects, including bone marrow toxicity that results in anemia. Also, recent studies have suggested the possibility that after 1 to 3 years of AZT therapy, certain HIV strains become resistant to the drug.

Both ddl, manufactured by Bristol Myers Squibb Co., and ddC, manufactured by Hoffmann-LaRoche, showed promising activity against the AIDS virus in phase I studies. Patients in those studies showed an increased number of T4 cells, and a decrease in p24 antigens, which are markers of improved clinical status. They also gained weight and reported higher energy levels.

At higher doses of ddl and of ddC, however, some patients experienced peripheral neuropathy, or painful nerve damage to the hands and feet. In addition, in the phase I trials of ddl, pancreatitis, an inflammation of the pancreas, was shown to be a potential toxicity of ddl therapy.

"This new study represents our first opportunity to compare the usefulness of ddl and ddC in the real-world clinical practice of treating patients with HIV disease. The results will yield important information on the therapeutic benefits and toxicities of both drugs," said NIAID director Dr. Anthony S. Fauci.

The purpose of the new protocol is to compare, in patients who take ddl and ddC, the rates of occurrence of disease progression; the frequency and severity of side effects; and the effects on T4 cell counts.

Physicians affiliated with a CPCRA site may enroll their male or female patients, aged 13 years or older, who have received previous treatment with AZT, are taking a prophylaxis against the opportunistic infection Pneumocystis carinii pneumonia, if indicated, and have T4 cell counts of 300 or less, or have an AIDS-defining illness. Patients with a history of previous treatment with ddl or ddC, pancreatitis, peripheral neuropathy, uncontrolled seizures, excessive alcohol use or heart disease will be excluded.

Participants will be randomly assigned to take either ddl or ddC, which are being provided at no cost by the pharmaceutical companies. Patients will be assured into this study over approximately a year and followed in regular clinical visits throughout the course of the 2-year trial.

Mood Disorder Study

NIMH sponsors evaluation and treatment programs for women with regular menstrual cycles between the ages of 18 and 45, who are medication-free (including oral contraceptives and vitamins) and experiencing mood changes in relationship to menses. For information, call 496-9675.

Information Index Available

The 1991 edition of the NIH Information Index is now available at the Visitor Information Center, Bldg. 10, Rm. 1C218, and at the NIH News Branch, Bldg. 31, Rm. 2B10. This free publication lists 2,051 NIH topics (for example, which institute is studying which disease) with the appropriate telephone number for each.
More Than a Job

Stay-In-Schooler Urges Minority Youth To Consider Science Careers

Unlike some students working their way through college, Kimberly Lockett does not think her position here is just a means to an end. Her work is more than just a job to her. She feels she is on a mission.

"It hurts when I read the newspapers or watch the news and see the things that are happening to kids today," she related. "I feel lucky to be in an office that allows me to help make a difference by developing student visitor programs." Lockett is a stay-in-schooler working in NIH's Visitor Information Center (VIC).

"I often tell students that when I was their age, I had no idea what I wanted to do," she said.

A junior majoring in electrical engineering at the University of the District of Columbia, Lockett works at NIH as a tour coordinator, inviting inner-city junior and senior high school students to visit NIH with the hope that they might someday attend college and explore the various pathways of research and medicine.

"I want to motivate the students to change their points of views on things, maybe things that at one time seemed impossible," she said.

According to her boss, Lockett and her job are a perfect match.

"Kim is the ideal person for this outreach program because she is from the inner city and identifies with the visiting students," said Thomas Flavin, NIH special projects officer.

"Her dedication and enthusiasm are readily apparent and the students respond accordingly."

Lockett said the goal of the program she works for is to provide young people the chance to see professionals at work and imagine themselves in those positions.

Levon Parker, EEO officer and director of Summer Programs in the Neurosciences at NINDS, stresses the importance of such a goal. "I think the program is an important NIH initiative that will help to attract and train a cadre of minority scientists for the next century," he said.

Parker often agrees to address the tour groups, telling students about the research training opportunities supported by NIH including the Summer Program, the Stay-In-School Program, the NIH-Howard Hughes Medical Institute Summer Program, and other NIH funds available to support minority students.

In addition to Parker, Lockett said she has had a lot of help from minority scientists who work at NIH. Many have volunteered to lead tours or explain their research projects to the students.

Dr. Ricardo Parker, an NCI research fellow, recently offered his assistance. He said: "This program plays an important role by facilitating meetings and interactions of young African-American students from inner-city schools with role models who are doctors, scientists and clinicians active in biomedical research. I believe that programs such as this one encourage students to consider careers in biomedical research."

Lockett said she thinks seeing scientists and clinicians take time out of their schedules to boost young people may help students develop positive images of themselves and counteract negative publicity.

"I want students to know that there are people who are concerned about them, people who are not going to write them off," she said.

Since the program began, eight student groups have visited from such D.C. junior high schools as Hines, Paul, Eliot, Francis, Lincoln, and Douglass. Recently, students from Phelps High School toured the Clinical Center. More schools are scheduled this year.

Student groups and researchers have discussed drug resistance, sickle cell anemia, biochemistry, cancer research, among other topics.

Presentations conducted in VIC's learning laboratory have included demonstrations of agarose gel electrophoresis, or the technique used to separate DNA molecules of different sizes. A sickle cell bio-kit allows students to observe a lab test that detects the cell abnor-
NIGMS Holds Minority Programs Symposium

Minority students and faculty gathered recently at the NIGMS Minority Programs Symposium in Nashville. More than 1,800 attended, representing approximately 125 colleges and universities with substantial minority enrollments.

During the symposium, students supported by the NIGMS Minority Access to Research Careers (MARC) and Minority Biomedical Research Support (MBRS) programs held poster sessions and gave oral presentations on their work in cell biology, genetics, physiology, microbiology, psychology, and pharmacology. Participants also attended scientific symposia, met with Nashville high school students, and toured laboratories and talked to scientists at Meharry Medical College, Vanderbilt University School of Medicine, Tennessee State University, and Fisk University.

A highlight of the symposium was the key-

Keithia Simpson, an MBRS student at Clark Atlanta University, discusses her poster on "Mathematical Model for the Spread of Disease."

Both the MARC and MBRS programs are administered by NIGMS in collaboration with other NIH components. The goals of the programs are to strengthen science curricula and research opportunities at institutions with substantial minority enrollments in order to prepare students for careers in biomedical research.

The MARC Program offers honors undergraduate research training grants to prepare students to compete successfully for entry into graduate programs leading to the Ph.D. degree in an area of biomedical science. It also supports pre- and postdoctoral research training. The MBRS Program funds research projects, with an emphasis on promoting the involvement of undergraduate and graduate students in the research.

NIAID Funds AIDS Postdocs

To ensure an adequate pool of trained biomedical scientists and clinical investigators to confront the research challenges of AIDS, NIAID has announced the funding of approximately 60 new multidisciplinary postdoctoral fellowships in AIDS research.

Since the magnitude of AIDS and HIV infection will continue to grow for the remainder of this century, the grants will help to expand the number of investigators trained in a variety of AIDS-related scientific disciplines who can perform the research that will help to conquer the disease.

Fourteen institutions will be supported for up to 5 years. NIAID has earmarked a total of $2,062,180 for the first year.

The multidisciplinary program is intended to stimulate interactions among basic research scientists, biostatisticians, epidemiologists and clinicians. Each participating institution has established specific areas of research emphasis and each is responsible for selection of fellows. Research areas include clinical diagnosis and treatment, epidemiology and biostatistics, vaccine and drug development, and basic research in virology, immunology, pathogenesis, and animal models of disease. To encourage collaboration and exchange of information, NIAID's Division of AIDS will sponsor annual meetings of the AIDS postdoctoral fellows.

"It is essential that we maintain a cadre of trained investigators across AIDS-relevant scientific disciplines," said Dr. Anthony Fauci, NIAID director.

Training is for a maximum of 3 years per trainee and is limited to persons who already hold doctoral or medical degrees. Applicants must be United States citizens or official permanent residents of the U.S. Training grant funds are used exclusively for trainee stipends, medical insurance and travel to scientific meetings.

Washington Ballet Tickets

Tickets for the Washington Ballet's Winter Series performance on Saturday, Feb. 16 at 2 p.m. in the Kennedy Center's Eisenhower Theater are available through R&W at a discounted price of $29 (regularly $31). No service charges. Purchase your tickets at any R&W location before Feb. 5. For more information call 496-1776.

Meeting participants visit with a Vanderbilt University scientist in his laboratory.

A D.C. school student observes the difference between a normal red blood cell and a sickled cell prepared with a sickling inducer (a crisis simulation).

future and made some friends along the way," she said. "I wish I could get to know the students—all of them." For more information on VIC school tours, call 496-1776.
PERSIAN GULF
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ily tradition," laughs Christy. "But I feel lucky that the service they selected was the Navy. At least they're on ships rather than in the desert."

Christy's loneliest and most fretful hours are those she spends by herself commuting the 70 miles between Littlestown and NIH.

"I just take a deep breath," she says. "I'm a positive person so I'm positively hoping that everything goes well."

Christy says her sons, whom she writes once a week and speaks to whenever they are in port and can reach a phone, are in "pretty good spirits. I believe they're all afraid, but not so they couldn't do whatever's asked."

"If war could be avoided through a peaceful settlement, that would be great," she says, "but if that's what it takes, we'll go to war. I'm very proud of my sons. They believe they're doing the right thing, and I believe that they are too. It kind of makes me sick to hear people in disagreement (about U.S. military presence in the gulf)."

Christy's commute to Bethesda takes her across an imaginary line dividing America's liberal and conservative consciences.

"I don't know where the line is on the map, but there is a difference," she says, "between the patriotism expressed in small-town America and the skepticism of city life." "There's more patriotism in small towns," Christy asserts. "It's a bigger deal up there. The big city has too many opinions. People in town don't want to hear about the protesters. They think that's wrong."

Christy copes with dissent silently. "I'm just real quiet and listen." Her coworkers in the Office of Research Services, where she has worked for the past year, know she has boys on the brink of battle. While she knows of other families in Littlestown who have children in the gulf, she is aware of no other families in her position.

"There have been three ORS employees sent to the gulf who are reservists," she mentions. "Mitchell sent pictures of this little pitiful Christmas tree they put up. He also sent a ship's bar and mug. I told David that if prayers mean anything, he's got a ton."

Wesley and Mitchell Williams are both engaged to hometown girls who write daily, sometimes twice a day. "I talk to them regularly," Christy reports. "They'd prefer that the boys weren't there, but they are supportive."

Both Wesley and Mitchell are home-ported in Norfolk. Christy can't wait to hear that they are coming home.

"I plan to go down there when they come in."

In the meantime, Christy nurtures a cautiously optimistic.

"I watch the news a lot more often," she says. "I get cable TV and keep track of developments on CNN. I hang on different things. I want to hear the news more often than I used to."

"I was raised in this area, so I'm used to things flip-flopping. I don't put all my eggs in one headline."

Nevertheless, she says, "Not until every- thing's over will I be relieved. I think."

Since they belong to separate fleets, Christy's sons don't see one another, but they can communicate by mail.

"They're not close enough to be ferried over to each other," says their mom. "They haven't been together in a long time."

Christy gets their mail only sporadically. For instance, a postcard mailed Nov. 23 didn't arrive until early January. While Christy prefers to write her thoughts, she knows her sons would rather phone when in port.

"I was raised in the writing age, and they were raised in the age of instant communica- tion," she muses. "I think it makes them feel better to hear my voice than to get letters."

"She's going to college," says Christy, with relief. "She doesn't want any part of the military."

R&W Offers Tax Service

R&W once again will sponsor an income tax preparation service for NIH employees. An independent CPA will be on campus weekdays from 4 to 5:30 p.m. by appointment only. Call or drop by the R&W Activities Desk, 496-4600, for an appointment or for further information.}

Grants Focus on Minorities

NIAID has announced the award of three grants to develop the infrastructure needed for the potential establishment of AIDS clinical trials units with a research focus on minorities.

Through the AIDS Clinical Trial Infrastructure for Minority Institutions program, cooperative agreement awards totaling $2.4 million for the first year have been made to three institutions not currently involved in NIAID's AIDS Clinical Trials Group (ACTG). The ACTG is a nationwide network of AIDS clinical trials units established to evaluate experimental therapies for AIDS and AIDS-related opportunistic infections and cancers.

Awardees are at Howard University, the University of Hawaii, and the University of Puerto Rico.

Dr. Anthony S. Fauci, director of NIAID, said, "Clearly, HIV infection and AIDS in minorities pose special—and urgent—challenges for NIAID in our efforts to combat this disease. HIV infection is steadily increasing in minorities, yet minority racial and ethnic groups and minority-focused concerns have been underrepresented in AIDS clinical research. We believe these grants will help address these important issues."

Each grantee will assess resources available at his or her university and identify needs that must be met to develop the necessary elements for clinical trials. Major tasks during the assessment will include site visits to selected ACTUs to review facility layout, personnel utilization, computer hardware and software, and the clinical trials process itself. Each institution will establish an HIV clinic for patient diagnosis, counseling, treatment and research. The institutions will focus on special risk factors for minority patients, including intravenous drug use.

Statistics show that minorities, primarily African Americans and Hispanics, now constitute about 44 percent of the 157,525 cases of AIDS reported in the United States since the epidemic began in 1981. African Americans comprise 12 percent of the total U.S. population, but more than twice that percentage—28 percent—have been diagnosed with AIDS. Hispanics make up less than 8 percent of the total U.S. population, yet they account for approximately 15.5 percent of the AIDS cases.—James Hadley

Vanpoolers Wanted

Drivers and riders are needed for a vanpool that leaves the Oxon Hill/Central Ave. area of Maryland. Working hours are 8 a.m. to 4:45 p.m. For more information, call Rosa Snell, 496-6477. □
Joint HIV Study To Yield Big Picture on AIDS

By Margo Warren

The National Institute of Allergy and Infectious Diseases and the American Foundation for AIDS Research are cosponsoring a longitudinal study of persons infected with human immunodeficiency virus (HIV). The purpose of this observational database study is to systematically compile information on the progression of HIV infection in a broad spectrum of HIV-infected individuals. This will be the largest study of its kind ever conducted, with several hundred primary care physicians and several thousand patients potentially participating in the project.

The study, which began recently at more than 30 community-based clinics in the United States and Canada, will provide information on how infection with the AIDS virus progresses, which AIDS symptoms and related diseases are most common in different patient populations, and what treatments patients are using, including approved and "alternative" therapies. In addition, the study will help clinicians and researchers identify changing manifestations of HIV illness over time and analyze factors that appear to influence progression.

Subjects for the Observational Database Project (ODB) will come from the 18 Community Programs for Clinical Research on AIDS (CPCRA), sponsored by NIAID and 24 additional programs participating in the Community-Based Clinical Trials Network (CBCTN), sponsored by AmFAR.

The CPCRA was developed by NIAID last fall to broaden the base of AIDS research by involving community clinicians. It includes primary care physicians who serve large numbers of HIV-infected persons including Latinos, African Americans, intravenous drug users, and women, groups that have been previously underrepresented in AIDS research. More detailed information will be gathered for these patient populations.

Dr. Anthony Fauci, director of NIAID, said: "This new initiative lets us look at a much broader spectrum of the HIV patient population. The study will help to identify areas where new research is needed, and may result in some new approaches to treatment. It will also help community physicians identify patients who are eligible for specific clinical trials of experimental AIDS therapies."

NIAID's first large-scale longitudinal study on AIDS was the Multicenter AIDS Cohort Study, begun in 1983, which gathers information about the natural history, risk factors, and clinical manifestations of AIDS among 3,000 homosexual and bisexual men in four major cities. The study has generated huge amounts of data and clues to designing effective prevention and education programs.

The new ODB study will be conducted within a variety of clinical settings. Every 3 to 6 months, during a regular clinic visit, patients in the study will be asked questions about their health and the medications they are taking. Clinicians will be responsible for documenting this information as well as the patient's current symptoms, diagnoses, and laboratory results. No special clinic visits, lab tests, or treatments will be needed for the project.

Eligible participants must be affiliated with a CPCRA or CBCTN program, be under the care of a doctor in that program, be 13 years or older, and have evidence of HIV infection or any opportunistic infection or malignancy indicative of AIDS.

Grantee Gilman Honored

Dr. Alfred G. Gilman, a grantee of the National Institute of General Medical Sciences, recently received the 1990 Steven C. Beering Award for his outstanding achievement in biomedical science. The $10,000 award is given annually by Indiana University.

Gilman's research focuses on G proteins, the "middlemen" in the communication system that regulates the activity of cells. Understanding how cells receive and respond to signals should aid in the development of new or improved drugs.

Gilman earned his Ph.D. and M.D. degrees from Case Western Reserve University, and

Camp Fantastic Night for Caps

It will be Camp Fantastic Night at the Capital Centre on Saturday, Feb. 2, when the Washington Capitals host the Winnipeg Jets. Tickets are only $16 (regularly $23) and include hot dog and soda. Proceeds benefit Camp Fantastic. Donations to send a child to the game are welcome; contact the R&W activities desk, 496-4600.
NCNR Announces New Appointments

The National Center for Nursing Research has announced several recent appointments.

Dr. Sharlene Weiss has been appointed chief, Health Promotion/Disease Prevention Branch, Division of Extramural Programs. Weiss joins NCNR from the Medical Illness Counseling Center in Chevy Chase, where she was a senior clinical associate and conducted behavioral research with cancer patients. She also has research experience developing health promotion/disease prevention strategies. Weiss received a baccalaureate in nursing from Stanford University, a master's in counseling from Michigan State University, and a Ph.D. in health education and behavioral medicine from the University of Maryland.

Dr. Mary D. Lucas has been appointed chief, Acute and Chronic Illness Branch. She previously served as associate professor, department chair and director of the Ph.D. program at the College of Nursing, University of South Carolina at Columbia. Her research involves the quality of nursing care and staff nurse retention in acute care hospitals and public health nursing. Lucas has a master's degree in medical-surgical nursing from the University of Colorado and a Ph.D. from the University of Texas at Austin.

Robyn Strachan is the new budget officer for NCNR. She is responsible for all NCNR budgetary and financial operations, including all facets of budget formulation, presentation and execution. She also advises the director on matters of fiduciary operations. Strachan joined NCNR from NICHD where she served as a senior budget analyst for 5 years. She is the recipient of an NIH Merit Award.

Dr. John Chah has joined NCNR as executive secretary of the nursing science review committee. Previously he served as a senior scientist and professional assistant to the director, Office of New Drug Evaluation and Research, FDA. He was responsible for reviewing the safety and effectiveness of human drugs in the areas of pharmacology and toxicology testing. He also was executive secretary for several ad hoc committees reviewing drug guidelines. Chah is a nutritional biochemist with research experience in both clinical and preclinical fields.

Bonnie W. Cramer is NCNR's first administrative officer, in charge of procurement, space and property management and other services. Her prior experience includes 4 years as the administrative officer with the Division of Financial Management, Office of the Director, NIH. She previously held positions with the National Cancer Institute and the National Institute of Dental Research.

The National Center for Nursing Research recently appointed the following staff members (from l): Robyn Strachan, Dr. John Chah, Dr. Mary Lucas and Bonnie Cramer. Not shown is Dr. Sharlene Weiss.

‘Robbie’ Robinson Retires

Ira “Robbie” Robinson has retired after 34 years of employment at NIH. During that time, he received several awards for superior service and a letter of commendation from Dr. Jack Masur, former director of the Clinical Center. When he retired, Robinson was a supply clerk in the Management Services Branch (MSB), NIAID. According to Vincent A. Thomas Jr., chief of MSB, “Robinson is a valued member of the property section and he will be greatly missed.”

Born in Johnson, S.C., Robinson came to Washington, D.C., in 1948 at age 16. His first job in the D.C. area was for Greenwood’s Transfer and Storage Company. He later worked at the Shoreham Hotel for 12 years. In 1957 he began his career at NIH in the Clinical Center housekeeping unit. Five years later, Robinson transferred to NIAID. As an animal caretaker, he worked in various areas of the Division of Intramural Research, including the Laboratory of Infectious Diseases, the Laboratory of Viral Diseases, and the Animal Care Branch.

“I will miss my many friends and coworkers at NIAID,” Robinson said. “During my years at NIH, I never had a bad day with a coworker.” A devoted family man, Robinson is looking forward to spending more time with his 12 grandchildren and 8 great-grandchildren. He also plans to spend some time fishing.—Ann London

Study Subjects Needed

The National Institute of Dental Research is looking for individuals who have cold sores or fever blisters for research studies. For more information call 496-0309.
TRAINING TIPS

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

Courses and Programs Starting Dates

Management and Supervisory 496-6371                      1/11
Managing Workforce Diversity: Skills 1/12
for Utilizing Differences 1/12
Getting Results in Task-Oriented 1/13
Groups 1/13
Projecting an Effective Executive Image 1/14
Recognition Secrets: Innovation for 1/15
Rewarding Today's Workers 1/15
Interacting With Difficult Employees 1/16
Attitudes: How They Affect Productivity 1/17
in the Work Environment 1/17
Creative Basics for Changing Workplaces 1/18
Working With Personal Differences: MBTI 1/19
for Technical and Support Staff 1/19

Special Courses 496-6211
Introduction to Personnel Management 1/20
Basic Labor Relations 1/20

Personal Computer Training 496-6211
Welcome to Mac 2/1
Introduction to Microsoft Word 2/2
Excel — Level 1 2/3
Excel — Level 2 2/4
Mac Draw II 2/5
Fontbase — Level 1 (Mac) 2/6
3-Com — Network-Level 1 2/7
3-Com — Network-Level 2 2/7
Introduction to Personal Computing for 2/7
New Users 2/7
Intro to DOS 2/8
Introduction to WordPerfect 3.1 2/9
WordPerfect 3.1 — Advanced Topics 2/10
Word Perfect 5.0 to 5.1 Transition 2/11
Introduction to Harvard Graphics 2/12
Introduction to dBase III 2/13
Introduction to Lotus 1-2-3, Release 2.2 2/15
Lotus 1-2-3 Release 2.2 Advanced Topics 2/15

Office Operations and Administrative Systems Training 496-6211
Proofreading and Editing 2/16
Telephone Communication 2/17
Delegated Acquisition Tmg. Program 2/18
Property Management Information System 2/19

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:
Mon. - 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

Vols Needed for Herpes Study

NIH is looking for healthy men and women, ages 18-55, with confirmed genital herpes for more than 1 year for a placebo-controlled study. For more information call 496-1836.

Parasitologist Olivier Dies

Dr. Louis J. Olivier, known for his early schistosomiasis research at NIAID, died in Chapel Hill, N.C., on Nov. 16, 1990. A parasitologist with broad interests in the field of helminthology, Olivier served as president of the American Society of Parasitologists in 1967.

Olivier received his doctorate from New York University in 1940 and worked in the Division of Zoology, U.S. Department of Agriculture from 1941 to 1943. In 1946, after completing service in the Army's malaria survey unit during World War II, he joined the U.S. Public Health Service, where he headed the host-parasite relations section of the lab that was later to evolve into NIAID's Laboratory of Parasitic Diseases. Beyond his lab bench in Bethesda, Olivier's schistosomiasis studies took him to Brazil, where he conducted a 2-year field research project in Recife.

Although Olivier retired from the Commissioned Corps in 1966, he continued in the parasitology field, working for 5 years as regional advisor on parasitic diseases for the

DRG Offers Training Course

The Division of Research Grants' IMPAC Inquiry and Reporting System course will be offered on Jan. 31, Feb. 1, 8, 12 and 14 in Bldg. 12A, Rm. B45 from 9:30 a.m. to noon. Students will learn what files are included in the IMPAC database; publications produced from IMPAC; and how to use DRG reporting concepts when querying IMPAC. A knowledge of how to use WYLBUR is a prerequisite. For registration, contact Carol Bleakley, 496-7711.

Pan American Health Organization. He then spent 2 years in Geneva, Switzerland, as a consultant to the World Health Organization. Olivier is survived by his wife Margaret Cort and their three sons.

Judo Club Holds Open House

The NIH R&W Judo Club is sponsoring an open house Thursday, Jan. 24 from 6:30 to 8:30 p.m. Demonstrations and hands-on mat activity will be offered to the adventurous. A beginner's class starting Feb. 5 will meet every Tuesday and Thursday from 6:15 to 7:30 p.m. The cost is $35 for 10 weeks. Both activities will take place in the Malone Judo Center located in Bldg. 31. For more information contact Stephanie Harrison, 496-9490.

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1991 African American History Observance Planned

February is set aside for the nation's annual observance of African American History. The 1991 national theme is "Educating America: Black Universities and Colleges—Strengths and Crises." The Division of Equal Opportunity and the NIH Black employees advisory committee have planned several activities that will give all NIH employees an opportunity to explore the heritage and recognize the contributions of African Americans.

The opening program will be held on Tuesday, Feb. 5, from 11:30 a.m. to 1 p.m. in Masur Auditorium, Bldg. 10. Patricia Russell-McCloud, president of Russell-McCloud and Associates, will be the keynote speaker. A graduate of Howard University School of Law and Kentucky State University, Russell-McCloud will focus her remarks on the NIH theme, "Knowledge is Power." Musical selections will be provided by Dr. James C. Story, dean of admissions and student affairs, Meharry Medical College.

Please consult your 1991 African American History Observance Program schedule (or see box on this page) for the date, time and place of all activities.

Special shuttle service will be provided for employees at the Executive Plaza, Federal, and Westwood Bldgs. A schedule of departure times will be posted in these buildings. Sign language interpretation will also be provided.

For additional information and other reasonable accommodations, contact DEO, 496-6301.

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<tr>
<th>Date</th>
<th>Location</th>
<th>Time</th>
<th>Description</th>
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<tr>
<td>Tuesday, Feb. 5</td>
<td>Masur Auditorium</td>
<td>11:30 a.m. to 1 p.m.</td>
<td>Opening Program. Speaker: Patricia Russell-McCloud, president, Russell-McCloud &amp; Associates.</td>
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<tr>
<td>Tuesday, Feb. 19</td>
<td>Masur Auditorium</td>
<td>9 to 11:30 a.m.</td>
<td>The Endangered Black Male. Panelists: Dr. John W. Diggs, NIH deputy director for extramural research; Roscoe Nix, president, Montgomery County NAACP Branch; Dr. Claudia R. Baquet, associate director, Cancer Control Science Program, NCI; Wayne E. Butcher, director of employee services, Urban League, Washington, D.C.; and William Lucas, director of liaison services, Department of Justice.</td>
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<tr>
<td>Tuesday, Feb. 26</td>
<td>Masur Auditorium</td>
<td>11:30 a.m. to 1:30 p.m.</td>
<td>NIH African American Scientists Observance and Reception. Speaker: Dr. Howard D. McCurdy, member of Parliament, House of Commons, Ottawa, Ontario, Canada.</td>
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<tr>
<td>Thursday, Feb. 21</td>
<td>Lipsett Amphitheater</td>
<td>11:30 a.m. to 1:30 p.m.</td>
<td>The Philosophical Aspects of Cultural Differences. Speaker: Dr. Edwin J. Nichols, director, Nichols and Associates.</td>
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<tr>
<td>Wednesday, Feb. 27</td>
<td>Howard Inn</td>
<td>11:30 a.m. to 2:30 p.m.</td>
<td>African American History Month Luncheon. Speaker: Yusuf Saleem, educator. Poetry by Mychal Wynn. Music by the Howard University Jazz Ensemble.</td>
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NIH's African American History Observance Program Schedule

February 1-28, 1991