

"Still
The Second
Best Thing
About Payday"

The NIH Record

Mother, Scientist, Athlete, Coach

NIA's Eleanor Simonsick Sets Sights on 1992 Olympic Team

By Rich McManus

This morning at about 5, Dr. Eleanor Simonsick arose to begin her day with a 5½ mile run in the predawn darkness of her Baltimore neighborhood. A good mile and a half shorter than her normal weekday runs, today's effort nonetheless put her another few miles closer to the 1992 Summer Olympics in Barcelona, Spain.

An epidemiologist in NIA's intramural Epidemiology, Demography and Biometry Program since October 1990, Simonsick is also a world-class runner. She holds the school records for women at Johns Hopkins University in the 1,500, 3,000 and 5,000-meter runs. In 1983, she posted the fastest times for any woman in the United States at 15,000 meters and 10 miles.

Hampered by leg and back injuries in the past decade, she is currently training for her third appearance in the U.S. Olympic trials, scheduled for June in New Orleans. The times by which she missed making the Olympics in 1984 and 1988 wouldn't add up to the time it takes to read this story.

"I'm improving every week," she said during an interview Feb. 24. "I can feel I'm getting better."

Tall, lean and sinewy at 33, Simonsick, a behavioral scientist, looks like a prime candidate for her own research into factors relating

(See **SIMONSICK**, Page 8)

Unexpected Finding

Optic Nerve Treatment Found Ineffective Alone

Although commonly used, oral corticosteroids alone are ineffective in treating optic neuritis, a debilitating inflammation of the optic nerve, and actually increase a person's risk for future attacks, according to a large National Eye Institute-supported clinical trial published recently in the *New England Journal of Medicine*.

This unexpected finding calls into question the benefit of treating related demyelinating neurological diseases such as multiple sclerosis with oral corticosteroids. Demyelinating diseases are characterized by progressive damage to the lipid sheaths that insulate nerve fibers.

Most neurologists and ophthalmologists now treat optic neuritis with oral corticosteroids, based on anecdotal reports that these anti-inflammatory agents improve patient recovery.

The optic neuritis treatment trial, which involved more than 450 patients at 15 clinical centers nationwide, is the first randomized clinical trial to evaluate corticosteroid therapy

(See **OPTIC NERVE**, Page 2)



Dr. Eleanor Simonsick, an NIA epidemiologist, is also a world-class runner. She is training now to compete for a spot on the United States team in the Summer Olympics in Barcelona, Spain. On the wall at rear is a photo of her son, Andrew.

Dream Came True, May Recur

Hike Memories Remain with Officer Freeman

By Anne Barber

Before Officer Gary Freeman became a member of NIH's Police Branch, he did what many people dream of doing—he hiked the Appalachian Trail. "All 2,136 miles," he says proudly. "I had wanted to do it for a long time. After my retirement from the Maryland Correctional Institution (where he worked for 20 years) and before starting a new job, it seemed like the ideal time.

"I had gotten into serious hiking a couple of years earlier by doing bits and pieces of the trail in Maryland, Virginia, and Pennsylvania. It took me approximately 6 months to prepare, longer than it took to hike the entire trail—4½ months."

Freeman started out from Springer Mountain, Ga., taking the northern route to Maine. During the first month of the hike, "It seemed to snow or rain every day."

You literally "carry your house on your back," he continues. "Everything you need—food, first-aid kit, personal necessities, stove and tent." While his backpack weighed approximately 45 pounds, supplemental food and supplies were mailed and waiting for him at towns along the way.

Freeman started out hiking the trail alone. "You meet all kinds of people along the trail," he says. "Sometimes you hike with others but mostly everyone does their own hike."

The most miles Freeman covered in a day

was 36. He also took time out along the way to rest or stay in towns along the trail such as Damascus, Va. "The Skyline Drive area (Shenandoah National Park) takes several days

(See **FREEMAN**, Page 6)

March Is Nutrition Month; An NCC Tradition

Now entering its second decade of Nutrition Month activities during March 1992, NIH's nutrition coordinating committee (NCC) continues to encourage all employees to renew a personal commitment to promote health and prevent disease by eating right and being active.

Initial commemoration of National Nutrition Month began back in 1980 by the American Dietetic Association. Since 1981 NCC has conducted its own nutrition month activities.

Eat Right, Be Active

Every year, nutrition month couldn't come at a better time. Too often the December and January holiday parties, combined with winter inactivity, take their toll on the healthful momentum many people establish and nurture during the summer and fall months. As March approaches most people are ready to "spring"

(See **NUTRITION**, Page 4)

OPTIC NERVE

(Continued from Page 1)

for optic neuritis.

Optic neuritis affects more than 25,000 Americans each year, primarily women between ages 18 and 45. People with the disease have rapid vision loss and usually have ocular pain. If left untreated, some patients regain normal vision after several months of gradual improvement, but most are left with at least some visual deficit. Because a significant number of people who have an initial attack of optic neuritis later develop multiple sclerosis, many physicians consider optic neuritis a precursor or manifestation of the disease.

The treatment trial randomly assigned patients to one of three treatment groups: oral corticosteroids (prednisone), intravenous (methylprednisolone) followed by oral corticosteroids (prednisone), and placebo. Trial patients had no previous history of optic neuritis in the eye being treated.

Trial investigators found that 27 percent of people taking oral prednisone had at least one new attack of optic neuritis during a followup period, which for some patients was as long as 2 years. In contrast, patients in the intravenous group had a 13 percent rate of new attacks, and those given a placebo had a 15 percent rate of subsequent optic neuritis. Few patients had immediate serious side effects from the treatments.

The researchers also reported no differences in how rapidly patients in the oral group regained their vision compared to the placebo group, or in either group's long-term visual recovery.

"We believe based on our results that there is no role for oral prednisone alone in the treatment of patients with initial episodes of optic neuritis," said Dr. Roy Beck, professor of ophthalmology at the University of South Florida and study chairman.

The researchers found, however, that patients in the group given both intravenous and oral corticosteroids recovered their vision about 2 weeks sooner than those receiving a placebo. At a 6-month followup examination, they also had slightly better contrast sensitivity, visual fields, and color vision than placebo patients. However, the patients receiving intravenous treatment did not have superior visual acuity to those given a placebo.

Because intravenous therapy proved marginally effective in the followup examination, trial investigators stated that physicians should weigh the therapy's potential benefits against the small risk of serious adverse effects, patient inconvenience, and the cost of treatment (particularly if hospitalization is required, as it was during this clinical trial). Since the intravenous regimen was generally well tolerated, outpatient therapy may be feasible.

Since the eye is such an excellent model for brain research, the trial's findings may have implications for corticosteroid treatment of other demyelinating neurological diseases.

"Nearly 40 percent of sensory input to the brain originates in the eye," said Dr. Carl Kupfer, NEI director. "Vision research not only reveals the dynamics of ocular disease, but its results may also be applied to many disorders that affect the brain."

Corticosteroids are currently used to treat multiple sclerosis. But according to Beck, their effects have not been properly studied in multiple sclerosis patients. "Since there is ample evidence that optic neuritis is often a first manifestation of multiple sclerosis," he said, "the results of our study indicate that oral corticosteroids may not be efficacious in treating patients with multiple sclerosis." □

Technology Transfer Briefing Set

For timely information on technology transfer, the NIH/ADAMHA/CDC Patent Policy Board training subcommittee has scheduled a briefing for scientists and administrators on Wednesday, Mar. 11. The session will be from 9 (registration at 8:45) until 11 a.m. in Masur Auditorium, Bldg. 10.

The 2-hour briefing is specifically tailored for the NIH/ADAMHA/CDC intramural community and is presented by NIH officials involved in the implementation of the invention development program for these agencies. Participants will receive an updated briefing notebook containing materials related to patent policy, relevant forms, and other information describing the patent and licensing process. Participants' names will be placed on a mailing list to receive future patent information as it is developed by the NIH/ADAMHA/CDC Patent Policy Board.

The Federal Technology Transfer Act of 1986 is designed to encourage government scientists to establish cooperative research and development agreements with industry and to share in any royalties that may result. Key topics that will be addressed in the briefing include overview of technology transfer, licensing and royalties, invention disclosure and patenting, cooperative research and development agreements, material transfer agreements, and roles and responsibilities of key players.

For more information, call the NIH Office of Technology Transfer, 496-0750. □

Ayrlawn Summer Program

The Nettie Ottenberg Memorial Child Care Center will be offering an all-day summer program at the Ayrlawn Building for children ages 3 through 12. The program begins Monday, June 22 and ends Friday, Aug. 21, 7:30 a.m. to 6 p.m.

For further information call Anne Schmitz or Ann Anthan, 530-5550. □

Orioles Tickets Available

The Baltimore Orioles open their 1992 season in a brand new stadium at Camden Yards on Apr. 6. Tickets to this big event are hard to come by, but not impossible. R&W has eight prime seats for opening day, and in the interest of giving everyone an equal chance to obtain these tickets has decided to hold a raffle. Four lucky winners will each receive a pair of tickets.

Raffle tickets to opening day are on sale at all R&W locations now through Mar. 25 for \$5 each. Winners will be drawn on Mar. 26 at 12 noon in the R&W gift shop in Bldg. 31.

R&W also has prime tickets to all Orioles home games in 1992. These tickets go on sale to R&W members on Tuesday, Mar. 17 at 8 a.m. in the R&W gift shop in Bldg. 31. Three sets of tickets will be available for each game except opening day—two lower box tickets, two terrace box tickets, and four terrace box tickets. Lower box tickets are \$14 each (\$28 a pair), and terrace box seats are \$13 each (\$26 a pair, \$52 for set of four).

Because of the large demand for these tickets, each member will be able to purchase only one set of tickets on the morning of Mar. 17. After 12 noon, members will be able to purchase additional tickets.

For more information call the R&W activities desk, 496-4600. □

The NIH Record

Published biweekly at Bethesda, Md., by the Editorial Operations Branch, Division of Public Information, for the information of employees of the National Institutes of Health, Department of Health and Human Services, and circulated to nonemployees by subscription only through the Government Printing Office. The content is reprintable without permission. Pictures may be available on request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through September 30, 1992.

NIH Record Office
Bldg. 31, Room 2B-03
Phone 496-2125
FAX 402-1485

Editor
Richard McManus

Assistant Editor
Anne Barber

Staff Writer
Carla Garnett

Editorial Assistant
Marilyn Berman

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

Correspondents:

CC, Karen Riedel
DCRT, Anne P. Enright
DRG, N. Sue Meadows
FIC, Jim Bryant
NCI, Patricia A. Newman
NCHGR, Leslie Fink
NCNR, Karen Myers
NCRR, Polly Onderak
NEI, Linda Huss
NHLBI, Louise Williams
NIA, Carolyn Shanoff
NIAID, James Hadley
NIAMS, Amy Iadarola
NICHD, Carol Florance
NIDCD, Gail Blatt
NIDDK, Eileen Corrigan
NIDR, Mary Daum
NIEHS, Hugh J. Lee
NIGMS, Wanda Warddell
NINDS, Carol Rowan
NLM, Roger L. Gilkeson

Quincentenary Observance

Geriatric Research Is Focus of International Meeting

By Jim Bryant

An international conference on "Aging—The Quality of Life" brought about 500 geriatric researchers in biomedical and behavioral science, policy makers, and health care practitioners from around the world to Washington Feb. 10-12.

The event, part of the Quincentenary marking Christopher Columbus' epic first voyage to the Americas, brought together world renowned experts to discuss the state of geriatric research and address mankind's current understanding of aging and age-related changes. It was organized by the Christopher Columbus medical sciences committee of NIH and sponsored by several NIH institutes, the Food and Drug Administration, and the Italian National Research Council.

Opening the conference, Dr. James O. Mason, HHS assistant secretary for health, called the graying of the world's population "the most significant event of the coming millennium" that "will challenge our determination to explore anew biomedical ethics, quality of life, and the use of resources, both human and technological."

Plenary speakers discussed various aspects of aging problems and research. Setting the tone for the conference, Dr. Robert N. Butler, the first director of the National Institute on Aging, said that among today's "new unimaginable frontiers of discovery" is the dimension of time.

Butler pointed out that in just the 20th century, "we have seen a virtual revolution in longevity . . . which is a striking social achievement, not a consequence of biological evolution. We have gained in this century nearly 25 years of average life expectancy in the industrialized world . . . nearly equal to the gain in life expectancy obtained during the preceding 5,000 years of human history."

Man's great challenge now, said Butler and subsequent speakers, is not only extending life but enhancing it. Such ills of the elderly as Alzheimer's disease, arthritis, and osteoporosis are being studied with the eventual goal of their elimination or control.

Following Monday's plenary meetings, dozens of speakers held six concurrent sessions on Tuesday and Wednesday morning dealing with cardiovascular, brain, cancer, musculoskeletal system, healthy aging, and nutrition, obesity and urogenital research. Summary reports and future challenges were discussed at the final plenary sessions.

A highlight of the conference was the award at Tuesday evening's banquet of special Christopher Columbus Discovery Awards for Excellence in Biomedical Research to 10 outstanding U.S. scientists. The winners were selected by a panel of internationally renowned



Secretary Sullivan presents the Discovery Award for Excellence in Biomedical Research to Dr. Willem J. Kolff (r) of the University of Utah. Looking on is Dr. George J. Galasso, chairman of the NIH Christopher Columbus medical sciences committee.

scientists and received their awards from Dr. Louis W. Sullivan, HHS secretary. Dr. Bernadine Healy, NIH director, congratulated the winners at the ceremony, which was also attended by Mason and Dr. Antonia Novello, surgeon general of the U.S. Public Health Service.

"By their excellence in research, these scientists have personified the boldness of exploration shown by Columbus' venture into the unknown," said Dr. George J. Galasso, chairman of the Christopher Columbus committee and NIH associate director for extramural affairs. The chairman of the awards subcommittee was Dr. James C. Hill, NIAID deputy director. Cosponsoring the awards was the Christopher Columbus medical sciences committee of Genoa, Italy.

Each U.S. award consisted of a medal cast especially for this one-time event, a cash prize of \$3,000, and a certificate. Five European scientists will be similarly honored at an inter-



Also receiving a Columbus Discovery Award from Sullivan is Dr. Joan A. Steitz of Yale University and the Howard Hughes Medical Institute for her studies defining the "roles of small nuclear ribonucleoprotein particles in RNA processing in mammals."

national conference, "Biotechnologies," in Genoa, Oct. 27-30.

U.S. award winners included Britton Chance, University of Pennsylvania and University City Science Center, Philadelphia; John A. Clements, University of California, San Francisco; Judah Folkman, Harvard University; Yuet Wai Kan, Howard Hughes Medical Institute, UC San Francisco; Willem J. Kolff, University of Utah; Philippa Marrack, Howard Hughes Medical Institute, National Jewish Center, Denver; Elizabeth Neufeld, UCLA; Stanley B. Prusiner, UC San Francisco; Joan A. Steitz, Yale University and Howard Hughes Medical Institute; and Robert A. Weinberg, Whitehead Institute for Biomedical Research, MIT.

The NIH and Italian committees have planned several events in observance of the Columbus quincentennial. They include the international scientific meetings in Washington and Genoa, a commemorative book with chapters written by eminent American and European scientists, an exhibit on the history of neurological research at the Smithsonian Institution in Washington, and the 15 Discovery Awards. □

Genome Lectures Continue

The Human Genome Lecture Series continues this month with a talk on Mar. 19 by Dorothy Nelkin of New York University's department of sociology; "Social Implications: Genetics and Popular Culture" will be given at 11:30 a.m. in Lipsett Amphitheater, Bldg. 10.

Nelkin holds a university professorship at NYU and is a professor of sociology and affiliated professor in the school of law. Her research focuses on controversial areas of science, technology and medicine as a means to understand their social and political implications. Her work includes studies on institutional uses of diagnostic tests emerging from research in genetics and the neurosciences and hereditarian themes in popular culture.

Nelkin has served on the board of the American Association for the Advancement of Science and the National Academy of Sciences committee on a national strategy for AIDS, and is currently on the NIH National Advisory Council for Human Genome Research.

For information about the lecture, call Ruth Bennett, (301) 907-3844. □

Judo Classes Available

The NIH Judo Club will hold its spring beginners class on Tuesday and Thursday from 6:15 to 7:30 p.m. starting Tuesday, Mar. 10 at the Malone Judo Center in Bldg. 31. Cost for 8 weeks is \$35. For more information, call Stephanie Harrison, 496-9490. □

NUTRITION

(Continued from Page 1)

into action. It's a natural time to dust off and renew those nutrition and life-style activities that team up to play an important role in helping achieve an optimal quality of life.

This year the theme "Join the Better Health Team—Eat Right, Be Active" has been adopted in the spirit of an Olympic year. Like the Olympians, motivated people can achieve a desired degree of fitness through proper nutrition and physical activity.

Nutrition and Exercise

Together, eating right and being active team up to become a good health habit with lifelong benefits. Nutrition is essential for sustenance, health, and well-being. But dietary factors also contribute substantially to the burden of preventable illness and premature death in the United States. Dietary factors are associated with 5 of the 10 leading causes of death: coronary heart disease, some types of cancer, stroke, noninsulin-dependent diabetes, and atherosclerosis. Three other major killers—cirrhosis of the liver, unintentional injuries, and suicides—have been associated with excessive alcohol intake. Many dietary components are involved in diet and health relationships. Chief among them is the disproportionate consumption of foods high in fats, especially saturated fats, often at the expense of foods high in complex carbohydrates and dietary fiber that may be more conducive to health.

The best approach to a beneficial eating pattern involves one that is balanced, providing all the vitamins, minerals, dietary fiber, and energy you need to maintain good health. Healthful eating patterns avoid emphasis on one or a few categories of food while restricting or eliminating others. Eating a variety of foods from each of the major food groups is the best approach to providing the body with its required levels of essential nutrients.

Evidence of the multiple health benefits of regular physical activity continues to mount. On average, physically active people outlive those who are inactive. Regular physical activity can also help maintain the functional independence of older adults and enhance the quality of life for people of all ages. Increasing evidence suggests that light to moderate physical activity, even below the level recommended for cardiorespiratory fitness, can have significant health benefits, including a decreased risk of coronary heart disease. For the inactive, even relatively small increases in activity are associated with measurable health benefits. Besides the benefits of toning muscle, improving cardiovascular fitness, keeping joints limber and helping people better cope with stress, regular exercise also helps to shed extra pounds, to control blood pressure, to



somewhat decrease the need for insulin by diabetics, and may somewhat increase levels of HDL—"good" cholesterol. Physical activity can be a part of your life, whatever your age.

Interested in teaming up with good nutrition and more physical activity, but don't know where to turn? If you have or suspect any health problems, are over the age of 40, or have not been physically active on a regular basis, check with your doctor about physical activity programs for you. Then, your options are unlimited:

- How about reading a copy of *Nutrition and Your Health: Dietary Guidelines for Americans*, a set of food selection recommendations published by the Departments of Health and Human Services and Agriculture. Copies of it and other nutrition and health materials produced by the ICDs will be available at the "Nutrition Research at the NIH" exhibit in Bldg. 31 during March.

- Look into the NIH Fitness Centers in Bldg. 31, Rm. B4C18, 496-8746, and Bldg. T-39, 496-8701. There are staff and facilities available to help you energize and slenderize. Members have an opportunity to get involved in a total health maintenance program focused on cardiovascular endurance, muscular strength, and flexibility. The central theme is prevention of health problems by improving employee physical fitness.

- Try being more physically active on your own or with friends at home, at the YM/YWCA, or other local facilities. Participate in the Presidential Sports Award program, sponsored by the President's Council on Physical Fitness and Sports, being promoted by the Fitness Center starting in March.

Nutrition Month '92 Activities

Attend the NIH NCC Scientific Seminar, Mar. 5, 3-4 p.m. in Wilson Hall, Bldg. 1. Dr. Matthew Guidry, deputy executive director of the President's Council on Physical

Fitness and Sports, will speak about "Physical Activity and Lifestyle for Better Health."

Attend the NIH Technology Assessment Conference on methods for voluntary weight loss and control, Mar. 30-Apr. 1 in Masur Auditorium, Bldg. 10.

Enjoy the "Join the Better Health Team — Eat Right, Be Active" posters displayed on bulletin boards around campus.

Select a nutrition month food special each day from all the Guest Services cafeterias, particularly its new eatery in Bldg. 10, lower level.

Walk down the Nutrition Month History Hall exhibit just outside the NIH Library in the Clinical Center, Bldg. 10, Rm. 1L125. The themes and recurring messages on display there show NCC's long-term investment and commitment to providing scientifically based information on nutrition and health promotion, disease prevention, and human development throughout the life cycle to the nation at large, but particularly to NIH employees. Each year a poster portrays one important message as its nutrition month theme, such as weight control, exercise, the dietary guidelines for Americans, and dietary fat. But together, over time, the posters provide a broad picture of some basic health promotion and disease prevention habits.

View some NIH nutrition and health video clips being shown at the Visitor Information Center in Bldg. 10 (B1-level of the Clinical Center) and 31 (A-wing entrance).

If you need more information about NCC's nutrition month activities, contact Nancy Gaston in the Division of Nutrition Research Coordination, 496-2324. □

NLM Film Wins Prize

Pathways—the film shown regularly to introduce visitors to the National Library of Medicine—has been awarded a "magna cum laude certificate" in the fifth Medicine and Scientific Film Festival "Medikinale Internazionale," held recently in Parma, Italy.

The 17-minute film was among 28 American entries in this year's festival, and had been selected earlier for submission to the festival by the United States Information Agency's Office of International Film and TV Festivals. The festival included 245 films from 25 countries.

Pathways describes current NLM services using vignettes from actual case histories involving the library's online and other services. It is featured as part of a daily program for visitors that also includes a demonstration of Grateful Med and a tour (1-2 p.m., NLM Visitors Center, Bldg. 38A). No advance reservations are required.

Pathways was produced in 1989 by the library's Audiovisual Program Development Branch, Lister Hill National Center for Biomedical Communications. □

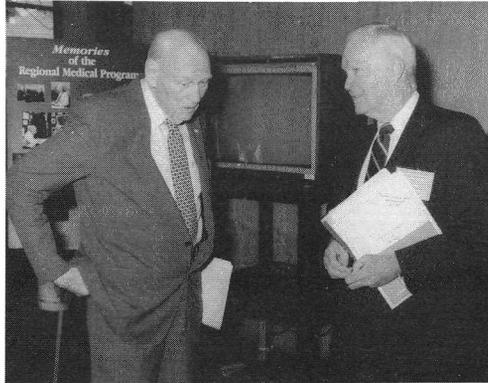
NLM Holds Conference on Regional Medical Programs

The National Library of Medicine recently sponsored a conference on "Regional Medical Programs: Legislation and Activities in the U.S. (1965-1976)." Held in Lister Hill Auditorium, the meeting marked the 25th anniversary of the establishment of the Division of Regional Medical Programs at NIH in 1966.

Created by congressional legislation in the previous year, the Regional Medical Programs (RMP) initiative was designed to transfer the results of medical research more quickly into practice through cooperative regional efforts. This innovative program was transferred from NIH to the newly created Health Services and Mental Health Administration in 1968, and continued to function until 1976. At the height of the program, 56 individual Regional Medical Programs were in operation across the nation.

The conference brought together many individuals who had been involved in RMP in various ways. Participants included Dr. Michael DeBakey, who served as chairman of the President's commission whose 1964 report led to the creation of the program; former directors of the national RMP office, Drs. Robert Marston, Stanley Olson, and Herbert Pahl; former officials of the Department of Health, Education, and Welfare such as Dr. Roger Egeberg, Vernon Wilson, and Merlin DuVal; and several directors of individual RMPs.

Rather than formal lectures, the conference program consisted of background videos prepared by staff of NLM's Lister Hill National Center for Biomedical Communications and



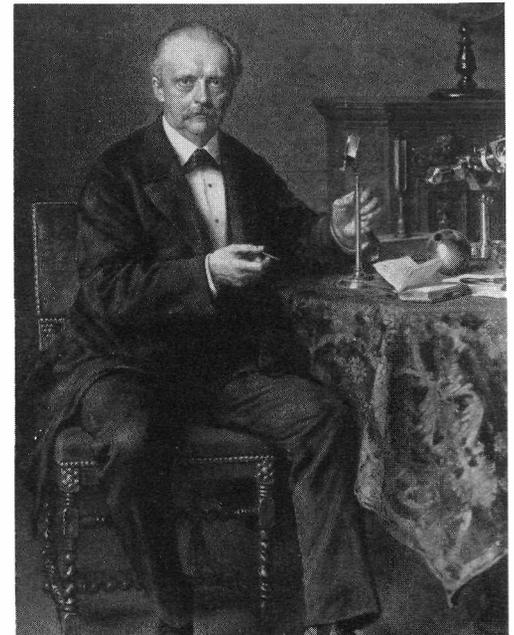
Drs. Roger Egeberg (l) and Robert Marston discuss a point at a break in the RMP conference in Lister Hill Auditorium.

panel discussions. The conference provided an opportunity to review the history of RMP and to examine the lessons that can be learned from the RMP experience.

In conjunction with the conference, the library has begun to build an archival collection of documents on the history of RMP. Videotaped interviews were carried out with some 25 individuals connected with RMP, and transcripts of the interviews have been prepared. In addition, NLM is making arrangements to have a history of Regional Medical Programs written. The library has also issued a bibliography on RMP as part of its *Current Bibliographies in Medicine* series; single copies are available on request from NLM's Office of Public Information, Bldg. 38, Rm. 2S-08, Attn: Roger Gilkeson. □

History of Ophthalmology Exhibit Opens at NLM

An exhibit on "Highlights in the History of Ophthalmology" will be on display in the lobby of the National Library of Medicine through May 15. The exhibit was prepared by NLM's History of Medicine Division with assistance from the American Ophthalmic History Society, in conjunction with the 75th anniversary of the founding of the American Board of Ophthalmology. Themes featured in



Hermann von Helmholtz (1821-1894), who developed the ophthalmoscope in 1851, is shown here with the instrument.

the exhibit include early printed books on ophthalmology, the optic chiasm, the ophthalmoscope, glaucoma, trachoma and eye surgery.

The exhibit is located in the library's main lobby, Bldg. 38. The hours are 8:30 a.m. to 9 p.m., Monday-Thursday, and 8:30 a.m. to 5 p.m., Friday-Saturday. □

FAES To Award Grants

The FAES will award grants of \$600-\$1,050 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 496-7975. Completed applications, including a description of the research to be performed and a supporting statement from the NIH sponsor, must be received by Apr. 3. Notification of the awards will be made to the NIH sponsors by the end of April. □



Dr. Mary K. Estes (second from l) of Baylor College of Medicine received the Wallace P. Rowe Award for Excellence in Virologic Research during NIAID's 8th annual Wallace P. Rowe Symposium on Animal Virology. The award was presented by symposium cochairs (from l) Dr. Malcolm A. Martin, chief of the Laboratory of Molecular Microbiology; Dr. Janet W. Hartley, head of the viral oncology section, Laboratory of Immunopathology; and Dr. Robert M. Chanock, chief of the Laboratory of Infectious Diseases. Estes was cited for her seminal contributions to the understanding of the molecular biology of the two major gastrointestinal viral pathogens, rotavirus and Norwalk virus.

FREEMAN

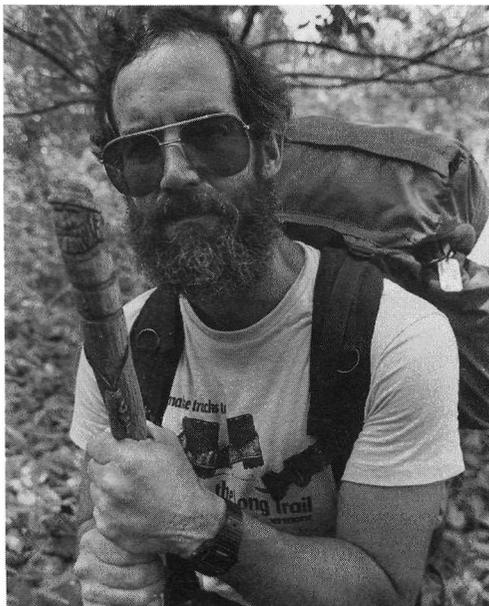
(Continued from Page 1)

to hike and is just beautiful," he says. "But, because of its popularity, it was crowded with hikers.

"You are hungry all the time," he comments about his trip. "When I left, my weight was 196 pounds. When I arrived in Maine, I weighed 167. I ate as much as I could carry and still lost 29 pounds.

"You make your own meals with the equipment and food you carry on your back," he said. For instance, breakfast was mostly instant cereal; lunch, several peanut butter and jelly sandwiches; and dinner, a box of macaroni and cheese and a cup of tea. "You don't carry canned goods because of the weight. You also carry your trash with you. There is an old saying, 'You pack out what you pack in.'"

Shelters are provided along the trail. "If they were full or not close by when you stopped for the night," he said, "you used the tent.



Gary Freeman clutches his trusty walking stick at the end of his 2,136 mile journey.

blister the entire trip but I did wear out a couple of pairs of hiking boots."

Freeman's favorite scenes from the trail include the Smoky Mountains covered with snow and the White Mountains in New Hampshire, portions of which are above tree-line. "The White Mountains are so unpredictable that people have died there because of extreme weather changes," he adds.

"When I reached Baxter State Park in Maine, I realized I had accomplished 2,136 miles. I was only 100 feet away from the end of the trail (atop Mt. Katahdin) when I had to sit down and compose myself. I realized that there would be no hike tomorrow.

"Not a day goes by when you don't reflect upon that experience," he says. "While I enjoy working at NIH, when I retire from here, I'll do the trail again."

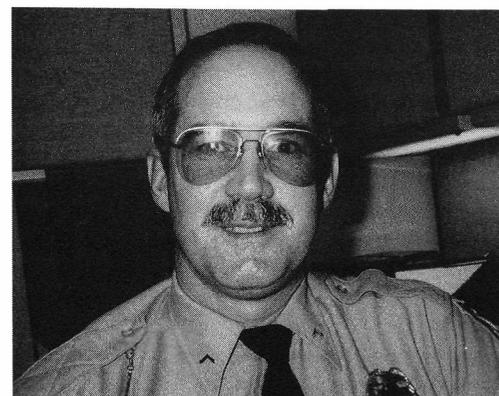
In the meantime, Freeman goes on day hikes and plans to return to the White Mountains for the third time this spring for another go at it and perhaps the Smokies in the near future.



Standing atop high elevation of Mt. Washington in New Hampshire, Freeman surveys the terrain.

life's environment and I'm a guest. One night I heard this terrible noise—it was a raccoon pulling my backpack. He was looking for food. My equipment was scattered all around. In Georgia, three skunks stayed in the same shelter with me. They didn't bother me, and I certainly didn't bother them."

Were you ever afraid or really concerned for your health? "In Virginia during the month of April, I was in snow up to my waist and I had lost the trail. It was very cold and I was cautious of getting hypothermia. Other than that, I considered myself to be the healthiest I had ever been in my life. I did not have a



Officer Gary Freeman as he looks today

"What was nice about the shelters," he recalls, "were the notes left behind by previous hikers. This was really helpful because you got information on the trail conditions, as well as restaurants in the next towns. Reading these notes, especially from the hikers coming from the north, helped prepare me for the next morning."

Freeman says the most satisfying parts of the journey were the people he met, the scenery, and the experience of just hiking. "You felt as though you blended in with the environment." Did he see any bears? "I didn't see any bears but I did see plenty of deer and moose.

"It was in Maine," he recalls, "I was hiking northbound when I met a southbound moose. He was about 10 feet from me. When he saw me, he ran off into the woods. I don't know who was scared the most, me or the moose.

"I consider the wilderness to be the wild-



Freeman hikes along the trail near Maboosuc Notch in Maine.

Jackson Brown To Head NIDR Program

Dr. L. Jackson Brown has been appointed director of the Epidemiology and Oral Disease Prevention Program at the National Institute of Dental Research. He came to NIDR in 1984, serving first as the evaluation officer and, most recently, as chief of the Analytical Studies Branch.

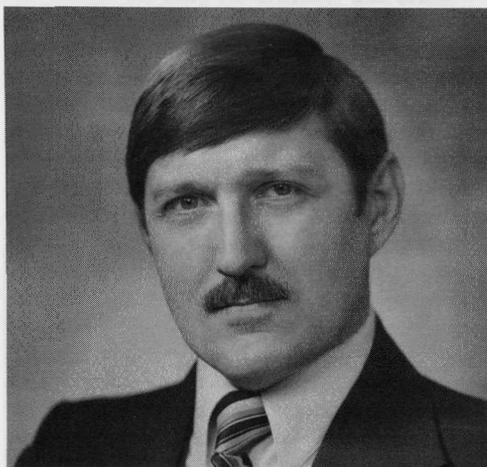
"The epidemiology program is expanding its activities," said Brown. "In addition to studying the prevalence of dental and oral diseases, we will research the social and economic factors as well as the basic biological processes that contribute to orofacial diseases and conditions."

Brown is an epidemiologist who has published extensively on the patterns and causes of tooth loss. Recently he and Dr. Harald Loe provided the first prevalence estimates of juvenile periodontitis—a rare but devastating form of gum disease that often results in tooth loss before age 20.

Under his leadership, NIDR is pioneering the application of molecular epidemiology to oral diseases. Institute epidemiologists are identifying biological markers for the assessment of risk, diagnosis, and evaluation of treatments for oral conditions and systemic diseases with oral manifestations.

A native of Carrollton, Mo., Brown received a bachelor's degree in biology and a D.D.S. from the University of Missouri at Kansas City. He earned an M.Phil. and a Ph.D. in economics and epidemiology from Columbia University.

Brown holds the rank of dental director in the U.S. Public Health Service Commissioned Corps. After graduation from dental school, he served as a dental intern and then as a staff dentist for the Veterans Administration Hospital in Kansas City.



Dr. L. Jackson Brown

From 1972 to 1975 he studied at Columbia University, earning the first of two advanced degrees from that institution and then serving as a research assistant. During the 1975-1976 academic year, he was an assistant professor at the University of Kentucky School of Dentistry. He held various positions in the Division of Dentistry, Bureau of Health Professions, from 1977 until 1980. He then became involved in the bureau's health manpower analysis activities until 1984, when he left to join NIDR.

Brown is a member of several professional organizations, including the American Association for Dental Research, the American Dental Association, the American Association of Public Health Dentistry, the American Public Health Association and the American Economic Association. He and his family live in Rockville. He spends his spare time playing the piano or traveling. □

Women's History Month Observed, Mar. 12

March has been designated as National Women's History Month. Throughout history, women have made valuable contributions to the economic, cultural, and social welfare of our nation. Women constitute a significant portion of our work force, serving in clerical, technical, administrative and professional positions. In recognition of the numerous accomplishments of women, the Office of Equal Opportunity (OEO) will sponsor an observance of Women's History Month on Thursday, Mar. 12 from 11:30 a.m. to 1 p.m. in Masur Auditorium, Bldg. 10. The theme for this year's observance is "Women's History: A Patchwork of Many Lives."

Attorney Dorothy E. Nelms, director of organizational development and training at



Dorothy E. Nelms

Hubbard and Revo-Cohen, Inc., will be the keynote speaker for this event. As a practicing lawyer, she specializes in Title VII of the Civil Rights Act of 1964, as amended, and in criminal and family law. She also has been a human resources consultant and a professional public speaker for more than 15 years. The program will include depictions from the lives of historical women.

Sign language interpretation will be provided. For additional information and reasonable accommodation, contact the OEO, 496-6301. □

CC Marks Nutrition Month

The Clinical Center nutrition department will celebrate National Nutrition Month on Mar. 17, 18 and 19 from 11 a.m. to 1 p.m. in the second floor cafeteria entrance, Bldg. 10. Registered dietitians will be available to discuss this year's theme of "Eat Healthy America." Free taste tests, recipes, meal comparisons and a raffle will be featured. For more information call 496-3311. □



Visiting NIH recently was Dr. Irina M. Virganskaya (second from r), a medical demographer at the Cardiology Research Center in Moscow and daughter of former Soviet President Gorbachev. Dr. Bernadine Healy welcomed Virganskaya and Dr. V.I. Dmitriev (r), chief of the unit of medical demography, who came to NIH to discuss a proposed international conference on demographic aging, noncommunicable disease and modelling, and other collaborative projects involving the center, the National Institute on Aging, the World Health Organization, and others. Escorting the visitors was Dr. Philip E. Schambra (l), director of the Fogarty International Center.

SIMONSICK*(Continued from Page 1)*

to the maintenance of health in older adults. Since her youth, she has been an avid athlete, even when excellence in sports was considered a male preoccupation.

Her mother was a three-sport high school athlete and team captain; her dad, while not particularly athletic, supported her participation in sports and taught Eleanor that most dadly lesson of all: "How not to throw a ball like a sissy." An only child, Simonsick had the full backing of both parents for any sport she chose.

During high school in southern New Jersey, Simonsick played field hockey and swam, earning the honor of "most outstanding female athlete" in her senior year.

"There wasn't any track and field program for girls at my high school," she recalls. "Title 9 (federal sex discrimination law) was not yet fully implemented back then."

She entered MIT for freshman year in college and played field hockey and softball. But an unexciting social world led her to transfer to Hopkins, with which she has been affiliated as student-athlete and coach for the past 15 years.

Arriving in Baltimore for the start of sophomore year, Simonsick naturally took up field hockey again. When spring rolled around, she found herself hungry for a seasonal sport. Someone suggested lacrosse, so she played a semester of the sport that made Hopkins famous.

During junior year, she decided to drop athletics. "It was a weird feeling," she recalled, and it didn't last. At the advice of another friend, she took up track in the spring of 1979; she competed in sprints at 100, 200 and 400 meters.

"I really had a lot of fun," she remembers, "but I'm not known as a particularly quick starter."

The following fall, Simonsick played field hockey once again, but by this time had made enough friends on the track team to pursue both sports simultaneously. She ran cross-country and competed at 5,000 meters while playing field hockey.

During her senior year at Hopkins, Simonsick discovered that she wasn't a sprinter, but a distance runner.

"Because I did much better than anticipated at the longer distances, I moved to the 1,500 and 3,000 meters my senior year."

Simonsick qualified for the collegiate regional championships at those two distances, and at 5,000 meters in 1980. "I had pretty rapid success," she recalls.

"I only ran about 30 miles a week in those days," she said. "It was a pretty low-key program, kind of a 'come out and have fun' type of track program."

Simonsick moved to Washington, D.C.,

following graduation for a job in policy analysis, but continued to run informally.

"I started road racing," she recalls. "I did well and won a few," including a 10K at Hains Point sponsored by WETA-TV. "I wasn't real consistent, maybe because I was out of the protected environment of college. I was a little frustrated."

Unable to weave running and a career satisfactorily, Simonsick hit upon a startling piece of advice.

"Somebody said I should start running in the morning before work, which struck me as the most absurd suggestion."

Since March 1981, with a few exceptions for injury, childbirth (she has a son, Andrew, 20 months old), and marriage (to her Hopkins track coach, with whom she still co-coaches at the university), Simonsick has run every morning.

"We live very close to Johns Hopkins, and I can walk to the track," she said.

In 1982, Simonsick went back to school at Johns Hopkins School of Public Health and also went back to competitive running, training some 60 miles per week. Entering a 20K race sponsored by Avon in February 1982, she surprised herself by finishing second.

"It takes time to develop as a distance runner," she says, speculating on reasons for her "instant" success. "I had laid down the years."

She found that success in races bred more success. "When you find yourself beating the big name runners, running takes on a whole different dimension."

Simonsick finished third in the well-known Peach Tree Classic Road Race in Atlanta in July 1982. She also qualified for and competed in the National Track and Field Championships that summer in Knoxville.

"I didn't do all that well, but at least I made it there, which was my goal," she said.

The following year—1983—Simonsick calls her "golden year." It began in February with a competition in Florida at which she was the first U.S. finisher, behind Greta Waitz. Two months later she burned up the Hains Point course at the Cherry Blossom 10-Miler, setting a course record of 53:46. She was ranked number one at 10,000 meters on the track that year and held the top times among U.S. women at 15K and 10 miles.

Toward the end of 1983, the golden year turned to lead. Simonsick hurt her lower back while piling on miles of training in preparation for a marathon, then acquired a case of hamstring tendinitis. Prevented from running for several weeks, she took up swimming to maintain her conditioning and pedaled her beloved exercycle.

Before suffering these injuries, Simonsick had qualified for the 1984 Olympic trials.

"I had a tough spring getting in shape for the trials," she remembers. "They were held in July 1984 in the Los Angeles Coliseum,

just before the Olympics would be held there. It was a full dress rehearsal, and was very exciting."

In the course of 5 days, Simonsick ran in three time trials at 3,000 meters. The top finishers in the early trials were invited to the final trial; the top finishers there made the Olympics.

"In the second round, I had the most phenomenal race I can ever remember having," she said. Deliberately hanging back in a pack of 12 runners, she made her move on the last lap. "About 15 yards before the finish line, my body just stopped and wouldn't go any more. My momentum carried me over the finish line with five other women in a virtual tie for second." Winning that heat was eventual Olympian Mary Decker Slaney.

In the third and final trial, Simonsick finished last. "I was totally dead by then."

An Olympic appearance is not the be-all, end-all of a fine athlete's world, she assures. "It's just another experience, and you move on to the next goal."

Later that summer, Simonsick hurt herself in the most prosaic way possible—straining an arch while moving furniture during a change of residence. In 1985, she ran in several races and triathlons while in graduate school. The following year, she married her former coach, Gary Green, and settled down a little bit.

"It's hard to maintain the intensity day in and day out, year after year," she admitted. "I still ran every day, but at an easier pace." In the back of her mind was qualifying for the 1988 Olympics.

A particular boon to Simonsick throughout these quests for Olympic competition has been the inclusion among the women's track events of distances at which she excels. In 1984, the 3K run was added to the roster of women's events; in 1988, the 10K for women was introduced to the Olympics.

In 1988, Simonsick linked finishing her Ph.D. with qualifying for the Olympics.

"I wanted to complete my Ph.D. thesis prior to a qualifying race I entered in California," she said. "The trials helped me get my dissertation done, in a backward kind of way."

Smiling broadly, Simonsick recalls the plane trip back home from the race at which she qualified for the 1988 trials; she prefers to run important races in climates that are stable and predictable—definitely not the East Coast in spring.

The 1988 Olympic trials were held during July in Indianapolis—a murderous climate for a distance runner, despite the introduction of a water sprinkler to a portion of the track.

"We ran two heats in 4½ days," she remembers. "I did very well. I led the first race on and off, and made it to the final heat." Once again, she finished 12th in the final trial; the Olympic team took only the top three finishers.

"I was very pleased," says Simonsick. "I was less than 60 seconds away from making the team.

"You never expect to make the Olympics," she cautioned. "Just being there (at trials) is tremendous. It is probably the second most prestigious track event beside the Olympics themselves."

Though she didn't make the Olympics in 1988, she continued to enter road races, posting her best times ever. At the Great Race 10K in Pittsburgh, she ran a personal best 32:09. Two weeks later, though, during a race at George Mason University, she broke the second metatarsal bone in her right foot, which sidelined her for more than a month. In all, she has suffered three stress fractures in that foot.

When she is too injured to run, Simonsick dons water wings and enters the diving well at a Johns Hopkins pool, where she runs laps underwater. To return to form once an injury has healed, she works out twice a day. The first session is a run and the second involves a stationary cycle or ski machine. Loath to give up her conditioning, Simonsick ran through almost 8 months of her pregnancy, including runs every other day in the final 3 months.

"I walked 6 miles with arm weights on the in-between days," she recalls.

Six days after her son was born, Simonsick went for a run.

"I got about two houses away and had to stop. After about 4 more days I was okay to resume running."

While toting her son around last February, Simonsick hurt her lower back again and had to stop running for nearly 2 months.

"I couldn't do anything but a little pool running," she said.

As trials for the 1992 Olympics approach in June in New Orleans, Simonsick is over her back injury and running every day, hoping to compete at 3,000 meters. Training will involve her morning runs, then laps with the college girls that she coaches evenings after work at Johns Hopkins (and who form for her, on occasion, "a bright, responsible pool of babysitting talent").

Owing to her status as a runner and her extensive contacts in collegiate racing, Simonsick is permitted to enter races as a coach. She eagerly anticipates running in the Penn Relays next month.

"There's a friendly atmosphere around the races," she says. "If I get the permission of the coaches, they let me do it.

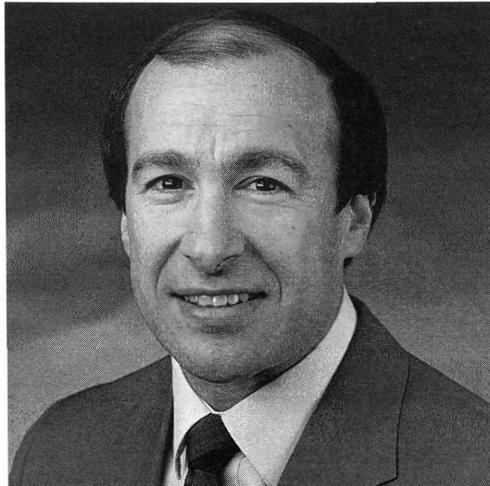
"I'm relatively confident that I'll qualify for the Olympic trials," she says, allowing that much of the readiness is mental, not physical. "In 1984 I couldn't have been any better prepared mentally and I ran a personal best at 3,000 meters."

Her peer Mary Decker Slaney may also try out for the '92 Olympics, as will the current

queens of the U.S. distance runners—Patty Sue Plummer, Judy St. Hillaire, and Shelly Steely—all of whom Simonsick knows.

If the Olympics don't pan out, Simonsick will continue to run for her health, for grace in aging, and for the good influence a parent's discipline has on a child.

"When I'm 50, my son will be 18," she calculates. "Maybe we can run a marathon together. That would be neat." □



Stephen A. Ficca has been named acting NIH associate director for research services. He replaces Norman Mansfield, who retired in early February. Ficca has spent 21 years in administrative management at NIH, most recently as executive officer of NHLBI. He has served on various NIH-wide research services-related task groups and advisory committees.



On Jan. 31, members of the Clinical Center's clinical pathology department honored Jane Kestner, who retired after 35 years of service. She joined the clinical laboratories in 1955, 2 years after the CC began admitting patients, and, with just two brief interruptions, continued to work there as a research technologist until her recent retirement. Some 80 current and previous colleagues, friends and family members attended her retirement luncheon in the Visitor Information Center. The celebration ended by honoring her long and dedicated service with gifts and NIH memorabilia.

Bioethics Lecture Series Set

The NIH Office of Education and members of the Bioethics Program in the Clinical Center have developed a series of bioethics lectures for residents, fellows, and other members of the NIH and local community.

The Bioethics Lecture Series for Clinical Associates and Postdoctoral Fellows will begin Mar. 6 with a dialogue between gene therapy pioneer Dr. French Anderson, chief of NHLBI's Molecular Hematology Branch, and Dr. LeRoy Walters, director of the Center for Bioethics at the Kennedy Institute of Ethics. This first session, entitled, "Issues in Genetics and Ethics: Signs of the Times," will be held from 12:30 to 1:30 p.m. in Masur Auditorium, Bldg. 10.

The series is an important part of the NIH training experience; clinical associates participating in accredited residency programs should make every effort to attend. The lectures, all of which last from 12:30 to 1:30 p.m., are scheduled as follows:

Thursday, Mar. 26, Masur Auditorium, "Codes of Clinical and Research Ethics," Dr. Robert Veatch, director, Kennedy Institute of Ethics.

Thursday, Apr. 9, Lipsett Amphitheater, "The Ethics of Human Experimentation: A Historical Perspective," Dr. Charles R. McCarthy, director, Office for Protection from Research Risks, OD.

Tuesday, Apr. 21, Masur Auditorium, "Ethical Limits to Clinical Research: Death, Where Is Thy Sting?" George A. Kanoti, director, department of ethics, Cleveland Clinic Foundation.

Friday, May 15, Masur Auditorium, "Integrity in Research: Individual and Institutional Responsibilities," Dr. Alan N. Schechter, chief, Laboratory of Chemical Biology, NIDDK.

Friday, May 29, Masur Auditorium, "Ethical Issues in Randomized Clinical Trials," Dr. Robert J. Levine, professor of medicine, department of internal medicine, Yale University School of Medicine.

Tuesday, June 9, Masur Auditorium, "Legal Issues in Clinical Research," Patricia A. Kvochak, NIH deputy legal advisor, Office of General Counsel, HHS.

Thursday, June 11, Lipsett Amphitheater, "Predictive Testing for Cancer Susceptibility: A Case Study of Ethical Issues," Dr. Frederick P. Li, head, division of cancer epidemiology and control, Dana-Farber Cancer Institute, Boston.

Friday, June 26, Masur Auditorium, "Tradition vs. Experience: Moral Tensions for Clinical and Research Physicians," Warren T. Reich, professor, department of community and family medicine, Georgetown University School of Medicine. □

Corine Layet, NIAID Visiting Associate, Is Mourned

Dr. Corine Layet, 31, visiting associate in NIAID's Laboratory of Immunology, died Jan. 30 after being struck by a car on Old Georgetown Rd. The accident occurred while Layet was walking home from work at about 6:20 p.m.

The immense shock of her death was evident at a memorial service held Feb. 3. Friends and associates from NIAID and throughout NIH overflowed the NIH Chapel as Drs. Ronald Germain, William Paul, Elizabeth Bonney, and Kurt Gunter recalled not only Layet's professional accomplishments, but even more so her remarkable warmth, good humor, and spirit that had touched so many. Gunter provided the most fitting tribute when he called for all "to celebrate Corine's life, just as she had celebrated living."

Layet received her Ph.D. in 1987 from the Centre de Immunologie in Marseilles, France. Her thesis work concerned the structural polymorphism of human major histocompatibility complex class I molecules, and she played a significant role in the early development of this research area in the groups of Drs. Francois Lemonnier and Bertrand Jordan.

After completing her degree, she became a visiting fellow in what is now the lymphocyte biology section in the Laboratory of Immunology. Her work focused on the role of the invariant chain in the intracellular assembly, transport, and peptide antigen loading of class II major histocompatibility complex molecules.

"After investing several years in establishing a suitable system for analysis, Corine had made a number of very important findings in the past 18 months. We were both extremely excited about the implications of this work for understanding how antigen is presented by the class II molecule and how structural polymorphism in the class II-invariant chain interaction could modulate immune responses," said Germain, section chief with



Dr. Corine Layet

whom Layet had worked since her arrival on campus. "In addition, Dr. Layet had become a major resource for new fellows, always ready to help discuss an intellectual or technical problem. I had come to rely on her knowledge and expertise in evaluating other work being carried out in the laboratory in related areas. Corine's tragic death has been personally devastating to all who knew her well, and a tremendous loss to the research efforts of the section."

Layet was an avid skier and jogger. Her running had made her extremely aware of potential traffic dangers, and how she came to be struck by a car while crossing the street is still unclear. Police have the accident under investigation and are asking for anyone who might have witnessed the accident to contact them, 652-9200.

Layet's friends and family ask that donations in her memory be made to the Children's Inn at NIH, c/o Margo Bradford, 7 West Drive, Bethesda, MD 20814.

NIEHS Marks Black History Month

February was Black History Month and NIEHS celebrated it through a series of educational forums and presentations to create awareness among the employees of the contributions of Black Americans to science, government, politics and industry.

The first presentation was sponsored jointly by the Research Triangle chapter of Blacks in Government and NIEHS' Office of Equal Employment Opportunity. The speaker, Anthony T. Browder, director of the Karmic Institute of Washington, D.C., spoke on "African Americans and American History: The History of Africans in America from Slavery to the Present." Browder's talk, educational and inspiring, included a chronicle of facts and information related to the positive portrayal of the worldwide African experience from both a retrospective and prospective point of view.

On Feb. 19, Patricia Golden, special assistant to the director, Division of Epidemiology and Health Promotion, National Center for Health Statistics, DHHS, discussed disease prevention and health promotion including statistics on disease progression throughout the population.

Later in the month, a program was held at the Alfonso Elder Student Union of North Carolina Central University (NCCU) in Durham featuring the Hillside High School drama department with soloist Willie Jordan.

An art exhibit, "Pieces of a Dream," was on display for the entire month in the lobby and cafeteria areas of NIEHS' main building. The exhibit was the work of NCCU art students.

Dr. Kenneth Olden, NIEHS director, remarked that these planned events and displays during Black History Month served as excellent reminders of the contributions that Blacks have made to science, government and the arts. However, he added that recognition should be permanent and ongoing since the contributions affect the daily lives of all Americans. □

Fitness Center Holds Lectures

The NIH Fitness Center is introducing a series of health-related discussions featuring its new nutritionist, Sheila Gallagher. She will lead talks on health and nutrition, including vitamins, foods, nutrients and exercise. All seminars are \$2 for Fitness Center members and \$3 for nonmembers. Seating is limited; call 496-8746 for reservations. All sessions will be held from 6:30 to 7 p.m. in Bldg. 31C, Conf. Rm. B4BS25. Subjects and dates are as follows:

"Facts About Vitamins," Wednesday, Mar. 11; "Nutrition Nuts and Bolts," Wednesday, Mar. 18; "Nutrition and Exercise from 2 to 92," Wednesday, Mar. 25.

For more information call the Fitness Center. □

Management Intern Program Announces 1992 Recruitment

The NIH administrative training committee is announcing the 1992 Management Intern (MI) Program from Mar. 9 to Apr. 17. The program is designed to prepare individuals demonstrating high potential for careers in administrative management at NIH.

To be eligible for MI, you must be willing to work full-time, be a United States citizen, be at least a GS-5 level employee or reinstatement eligible.

Positions are offered at the GS-5, 7 and 9 levels. Some applicants, especially those above the GS-9 level, may be required to accept a

voluntary downgrade but may retain their salary. Nonfederal applicants with an undergraduate grade point average of 3.45 (on a 4.0 scale) or higher or who graduated in the upper 10 percent of their class are encouraged to apply.

Application packages are available from the NIH Training Center, Executive Plaza South, Suite 100. Applications will not be accepted later than close of business on Apr. 17.

For more information, contact Daryl Bible, 496-6211. □



TRAINING TIPS

The NIH Training Center, Division of Personnel Management, offers the following hands-on IBM and Macintosh computer training courses:

Course Titles	Starting Dates
<i>Personal Computing Training 496-6211</i>	
Welcome to Macintosh	3/23, 4/3, 4/20
Advanced Macintosh Techniques	3/19
Intro to WordPerfect 2.0 (Mac)	3/24
Transition to WordPerfect 2.0	(upon request)
Intro to Microsoft Word (Mac)	4/6
Advanced Microsoft Word	4/21
Excel Level 1	4/10
Excel Level 2	3/25, 4/22
FoxBASE-Level 1 (Mac)	(upon request)
FoxBASE-Level 2 (Mac)	(upon request)
3 Com PC Network-Level 1	3/20, 4/7
3Com PC Network-Level 2	3/30
Intro to Personal Computing for New Users	3/18, 4/23
Disaster Recovery and Data Retrieval for the PC	4/15
Introduction to DOS	3/30, 4/16
Introduction to Windows 3.0	4/7, 4/23
Introduction to WordPerfect 5.1	4/1, 4/22
Intro to Harvard Graphics, Rel. 3.0	4/29
Intro to Harvard Graphics, Rel. 2.3	4/13
Introduction to Paradox	4/13
Intermediate Paradox	4/14
Advanced Paradox	4/2
Introduction to dBASE III +	4/27
dBASE III + — Programming	3/23
Intro to Lotus 1-2-3, Rel. 2.2	4/6
Intro to Symphony	4/27
Intermediate Symphony	3/12
Advanced Symphony	4/2
IMPACT System for Personnel Staff	4/22
IMPACT System for Administrative Staff	3/19, 4/16
IMPACT System for Professional Staff	(upon request)
Introduction to CRISP	3/20, 4/24
Advanced CRISP	3/20
CRISP Thesaurus	4/24

Blood Bank Says Thanks

The Blood Bank in the Clinical Center's department of transfusion medicine thanks all of its donors for their support during the recent holiday season.

"We were able to maintain the blood supply at a very comfortable level," reports Keith Redmond, donor resources supervisor. "We went into the post-holiday time able to sustain the numerous surgeries that were on hold because of the holiday season."

Redmond reminds NIH'ers that Donor Appreciation Day 1992 will be held on Friday, June 12 from 11 a.m. to 2 p.m.

"Mark your calendars and come enjoy the festivities," he said.

He also reminds potential donors that they are warmly welcome at the Blood Bank and can call 496-1048 for an appointment to donate; just ask for Keith, Kathleen, Pam, Marguerite or Jackie. □

Forum on 'How To Thrive'

The Staff Training in Extramural Programs (STEP) committee Forum Series is presenting "Strategies for Thriving: A Forum for Extramural Staff in Grades 10 and Below" on Wednesday, Mar. 11 from 1 to 3 p.m. in Wilson Hall, Bldg. 1. The forum will examine the personal choices, resources, and opportunities that can help staff survive, thrive, or strive for change in their jobs.

This 2-hour program will be moderated by Lynne B. Chernin of Chernin Associates, Inc. She will discuss the personal choices that lead to job happiness and help determine whether one is in the right job, and will describe ways to enhance job skills. A panel including Sally A. Nichols, NCI; Janice C. Ramsden, NIGMS; Maria Roos, NEI; and Anna Smyth, NCI, will discuss their personal strategies for thriving.

The forum is open to all NIH personnel. No advance registration is required. Attendance will be on a first-come, first-served basis. Sign language interpretation will be provided. For more information call 496-1493. □

PEF Auction Set, May 1

Every spring for the past 7 years, NIH employees and volunteers have come together to raise thousands of dollars for the NIH patient community through the Patient Emergency Fund (PEF) Auction.

This year's auction is set for Friday, May 1 in the Clinical Center's Visitor Information Center; organizers are hoping for their best year ever.

Donations in the form of items, services, gift certificates and baked goods are needed. Examples of past donations include craft items, household wares, art, cooking lessons, sailing lessons, tax preparation, closet remodeling, etc. The possibilities are endless. Departments and offices are encouraged to make a group effort—giving can be fun.

Last year's auction raised more than \$16,000 for the PEF, which helps NIH patients and their families in times of financial crisis. For more information, contact Kelly McManus in the R&W office, 496-6061. Donations can be dropped off at any R&W location. □

Dying Boy Wants Cards

Seven-year-old Craig Sherwood has a special ambition. He is trying to break the Guinness Book world record for the largest business card collection. However, Sherwood's time is limited as he has terminal cancer. You can help his dream come true by sending your business card to Judy Ireland, Federal Bldg., Rm. 512. □

Client-Server Database Demonstrations Planned

Client-server database management is developing as a valuable new computer technology, combining the "human friendly" capabilities of individual workstations (the client) with the powerful capabilities of mainframes and network-based servers. By linking clients and servers via the high-performance connectivity provided by NIHnet, an entirely new level of database services becomes possible.

On Mar. 9 and 10, DCRT will present seminars in which database management system and client-server concepts will be discussed and demonstrated. This demonstration will use products from the Oracle Corp. in the NIH network environment to share data with DB2.

Take advantage of this opportunity to learn about client-server database technology. Contact the DCRT Computer Training Program, 496-2339, to register. Additional group presentations on the Oracle-DB2 products can be arranged through the end of March via the Computer Training Program. For those who are unable to attend a presentation, a copy of the Oracle evaluation review is available from the Technical Information Office, 496-5431.

DCRT is continuing its evaluations of various vendor-supplied client-server products. Those who would like to keep abreast of developments in this area are encouraged to contact the Technical Information Office and have their names added to the mailing list for *Interface*, the computer center's technical newsletter. □

DCRT Computer Training Classes

Classes	Dates
Introduction to Mathematica	3/4, 6
Introduction to Image Processing	3/5, 10, 12
SAS Fundamentals II for Non-Programmers	3/4-6
LAN Concepts	3/4
Getting Started with C	3/9-12
Windows Sampler	3/9
Downloading Sequences from GenBank on the Convex	3/9
Inside Image	3/11
DCRT Support for Unix Workstations	3/11
Introduction to S-Plus	3/13
SPSS/PC + —Getting Started Under DOS	3/13
Running SAS Software in the PC-DOS Environment	3/16-18
Physical Forces Organizing Biomolecules	3/16-18
Introduction to SPSS at NIH	3/16-20
Intermediate PC-DOS	3/19, 20
SAS Fundamentals I for Programmers	3/23-25
Fundamentals of Unix	3/23, 24
ENTER MAIL	3/25
Macintosh System 7 Overview	3/25
BITNET	3/26
Managing Data Effectively	3/27
C Language Fundamentals	3/30-4/3
Topics in Flow Cytometry	3/30, 31
Convex Questions and Answers	3/31

Classes are offered by DCRT's Computer Center Training Unit, without charge. Call 496-2339 for more information.

Practice Safe Computing

Check Your PC for 'Michelangelo' Virus

By Gregory Wilson

It's that time of year again. Lincoln's birthday has come and gone, and so has Washington's, but Michelangelo's birthday Mar. 6 is just days away. This wouldn't be a big deal for most of us if it weren't for the Michelangelo computer virus. The virus, discovered in April of last year, is programmed to infect IBM PC's and compatibles, spreading from computer to computer all year long, and then on Mar. 6 to overwrite the system hard disks on infected machines with random characters, thus destroying all files stored on those disks with no possibility of recovery.

The Michelangelo virus has been found on a few off-campus machines, but isn't expected to be a major problem on campus. The advice from the Division of Computer Research and Technology, however, is be cautious and check your machines for the virus before Mar. 6.

Like some viruses that affect living creatures, computer viruses are spread by contact with contaminated materials: infected floppy disks or infected software down-loaded over the network. If you put a virus-contaminated disk in your machine, it will infect your machine first and every disk that you use in your machine after that.

If your IBM PC or clone is infected with the Michelangelo virus, it will be difficult to tell without the right diagnostic software. Because the virus itself takes up some memory space, your total available memory will decrease by 2,048 bytes. You would be able to detect that decrease with the DOS "CHKDSK" command only if you know how much available memory you are supposed to have. Luckily, excellent software is available that will scan your hard disks and floppies for viruses, and eliminate suspicious files.

DCRT's Personal Computing Branch (PCB) makes the IBM Virus Scanning software available at no cost to NIH users in several ways. PCB recommends that you download the software over the network from the NIH Pubnet or from PCBull, the PCB's electronic bulletin board service. NIH employees may access PCBull over their modems by calling 480-8400 with their communications parameters set to 8, N, 1. You can get a copy of the software from your network administrator or ICD security coordinator. You can also copy the software onto your own floppy disk at the User Resource Center (URC) in Bldg. 31, Rm. B2B47 (496-5025). The URC recommends 5.25" disks or double density 3.5" disks. If you are interested in purchasing commercial antivirus software, PCB virus expert Kevin Haney recommends the Norton Anti-Virus Program from Symantec.

You may read other articles that suggest alternative solutions to the Michelangelo virus (changing the date on your computer so that

it doesn't think it's Mar. 6, or not turning your computer on that day), but according to Haney, there is no substitute for scanning your hard disk and eliminating the virus if it's there. Leaving the virus on your machine only means that it will spread farther in the future.

Haney predicts that Michelangelo won't be a big problem on the NIH campus if people simply scan their hard disks. "I don't expect to see hundreds of cases. There will probably be a few, but I don't expect widespread disk crashes," he says.

To help promote a healthy computing environment for the NIH campus, the PCB offers classes in safe personal computing practices for both the IBM PC and Macintosh several times a year, and also scans network software for infections every week. PCB Chief Dave Songco wants to stress that, "Michelangelo is just one of many viruses and the user community should be taking preventive measures every day, just like brushing your teeth, not just when the local TV and newspapers decide to run a virus story."

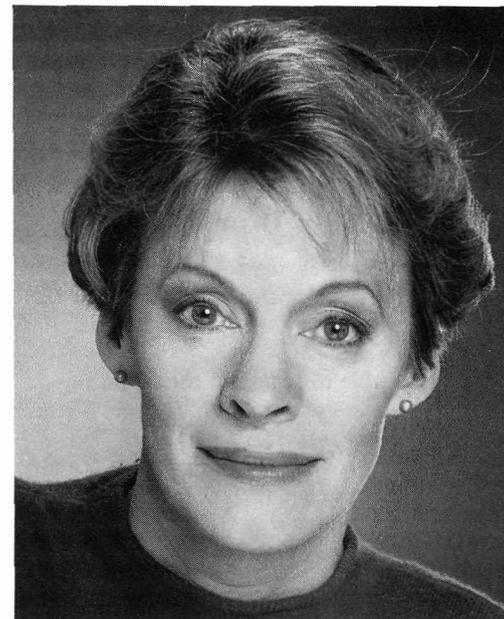
If you have any questions about the Michelangelo virus, virus protection, or how to down-load virus protection software from the network, call the Personal Computer Branch Help Desk, 496-2282. Any actual virus infections should be reported to this same number. □



On Thursday, Mar. 19, the Clinical Center's patient activities department will present "From Baroque to Broadway," a special musical performance featuring Deborah Kieffer (above), mezzo-soprano, and Betty Bullock (below), pianist. The concert begins at 7:30 p.m. in the 14th floor auditorium, Bldg. 10, and includes selections by Handel, Schubert, Bizet, Porter and Bernstein. Kieffer has soloed at Carnegie Hall and Lincoln Center in New York, and at the Corcoran Gallery and National Gallery of Art in Washington. Bullock is on the music staff of the Washington Opera and teaches piano at Levine School of Music. The concert is free and open to the public.



The Division of Computer Research and Technology welcomes Marlyn Harrison as its new chief administrative officer. She comes to DCRT from the Office of the Associate Administrator for Communications, Health Care Financing Administration, where she was executive officer. The NIH campus is not new to her, since she spent a number of years as administrative officer for the Division of Lung Diseases, NHLBI.



STEP Forum Postponed

The STEP Forum on "Creating Opportunities for Minority Students" scheduled for the afternoon of Mar. 12 in Wilson Hall has been postponed. For information about rescheduling, call the STEP program office, 496-1493. □