NIAID Celebrates 20th Anniversary Of Student Program

By Ann London

The student from Southern California complained about the "cold" weather, while NIAID staff marveled at how warm the 50 degree temperature was for February. The staff who welcomed students to the institute's annual Introduction to Biomedical Research Program (IBRP) were bemused by the student's comments, recalling horror stories of blizzards and ice storms during the past 20 years of the February program.

In February 1979, the first group of students came to the NIH campus to attend a 2-day Introduction to Biomedical Research seminar, part of the NIAID Minority Biomedical Sciences Program. For the past 20 years, the IBRP has hosted more than 1,000 students from colleges and universities all over the United States and its territories.

Most participants have been college undergraduates, a few have been first- or second-year medical or graduate school students. Most have been "traditional" students—they are single and have completed high school, college and

Civil Rights Take Center Stage

By Carla Garnett

A little girl, call her Audre, has her first experience with medical care at the age of 3 or 4. During an eye exam, her eyes are probed coldly by an apathetic physician. Without explanation, she is exposed to medical instruments and procedures that are uncomfortable and painful. Before she leaves the office, a frightened and miserable Audre overhears the doctor and his associates discussing her "peculiar eyes" and otherwise ridiculing her, "From the looks of her, she's probably simple, too." Would her first impressions of medical care be lasting? Further, what impact would the experience have on Audre as she seeks medical care throughout the rest of her life?

The above recollection was written in Sister Outsider, the autobiography of African-American poet Audre Lorde, but the sentiments could be held by any one of the millions of Blacks reared during the pre-civil rights era, according to former NLM visiting scholar Dr. David McBride, who heads the African/African-American studies department at Penn State University. For about 30 minutes on Feb. 11, he discussed similar Black culture medical encounter issues dating back to the 1960's in his Black history lecture, "The African American Medical Experience:"

Stress—It Might Be Even Worse Than You Think

By Alison Davis

The dashboard clock reads 7:55 a.m. and you're trapped in traffic, miles from your office. Despite leaving earlier than usual, there is absolutely no chance you'll arrive on time for that important 8 a.m. meeting. In addition to coping with such routine annoyances of our busy lives, 9 out of 10 of us will experience a much more serious stressor—a life-threatening event such as a car accident or an act of personal violence such as a rape or mugging. Fifty percent of us will encounter two such events.

In all these instances, our brain snaps to attention, preparing the rest of the body for the potential consequences of the insult at hand. Blood pressure climbs. The heart pumps more blood, chock full of surging levels of stress hormones. The so-called "fight-or-flight" response has commenced.

And while such compensatory mechanisms help us (or any organism) cope with an immediate crisis, scientists are discovering
APAIO Seeks Award Nominations by Apr. 23

The NIH Asian/Pacific American Organization (APAIO) seeks nominations from NIH employees for its 1999 Outstanding Achievements and Scholarship Awards. Recipients will be honored in the evening program of the NIH Annual Asian/Pacific Americans Heritage Program on May 28. The award categories are as follows:

I: For significant accomplishments in advancing NIH/IC's EEO goals;
II: For significant accomplishments in scientific research or administrative work;
III: A scholarship of $1,000 to an outstanding college-bound student. Total family yearly income will be considered.

Nominations for categories I and II should be in the form of letters of recommendation citing the nominee's records and accomplishments. Nominations are open to all NIH employees; one nomination for each letter of recommendation. Nominations can be made by anyone in the NIH community. Nominations for category III can be made by either the parent(s) of a student or by the student. The scholarship award is for a student of AP origin or for children of APAIO members.

For instructions on how to apply, contact Dr. Rashmi Gopal-Srivastava, Executive Plaza North, Rm. 609, 496-2378. Nominations for the awards should be sent to her as well; closing date is Apr. 23. Recipients will be notified in mid-May.

Orioles Tickets Go on Sale, Mar. 25

The R&W has season tickets to the Baltimore Orioles baseball games that go on sale Thursday, Mar. 25 at 8 a.m. in Bldg. 31, outside the R&W gift shop at Rm. B1W30. They are sold in three different sets for each game. Field boxes are $58 for two, and $88 for four. Terrace boxes are $44 for two. All prices include a service charge. If you have a particular game in mind, arrive early. You may purchase one set of tickets the first time through the line; after 1 p.m. you may come back through for additional sets. You must have your R&W card with you. There are Orioles special ticket prices of $14.50 for the following series: June 25, 26, 27 (New York Yankees); Apr. 8 (Tampa), July 18 (NY Mets); Sept. 4 (Cleveland) and Oct. 3 (Boston).

The annual Orioles Bullpen Party is Saturday, July 24 at 4 p.m. vs. the Anaheim Angels. Tickets include getting into the game early, a picnic in the bullpen area, food and drink. Ticket prices are yet to be determined, but mark your calendar now.

See the Wizards vs. Magic, Mar. 31

R&W has tickets to the basketball game between the Washington Wizards and the Orlando Magic on Wednesday, Mar. 31 at 7 p.m. Tickets are only $11 each, and there is a limited supply. You must be an R&W member to buy tickets. Call 496-4600.

Symposium on Membrane Transporters, Drug Therapy

In concert with the American Association of Pharmaceutical Scientists, NIGMS, NCI and NIDDK are cosponsoring a meeting, “Membrane Transporters and Drug Therapy,” to be held Apr. 8-10 in Masur Auditorium, Bldg. 10. Participants will discuss structural, physiologic, genetic/genomic and pharmaceutical aspects of membrane transporters, as well as the role of these proteins in drug discovery, development and therapy. The lead-off speaker is former NIH’er Dr. H. Ronald Kaback; other presenters include current NIH researchers Dr. Suresh Ambudkar, Dr. Susan Bates and Dr. Robert Guy, along with other leaders in the field from academia and the pharmaceutical and biotechnology industries. The program chairs are Dr. Wolfgang Sadee (UCSF), Dr. Gordon Amidon (University of Michigan) and Dr. Peter Preusch (NIGMS). The meeting is free to all NIH employees. Visit the Web page at http://www.aaps.org/edumee/t.nih/index.html for registration information and more details.

Garden Club Discusses Orchids

Dan Paterak will present an “Introduction to the Orchid World” at the next NIH Garden Club meeting, Thursday, Apr. 1 from noon to 1 p.m. in Bldg. 31, Conf. Rm. 7. He is an orchid curator at Hillwood Museum and Gardens in Washington, D.C. (Hillwood is the former estate of Marjorie Merriweather Post) and has been growing orchids for 45 years. The meeting is open to all. Check the Garden Club Web site: http://www.recgov.org/r&w/garden/.
Improving the health of Americans takes cooperation among federal, state and local health care professionals, educators and researchers. To increase that cooperation, the National Heart, Lung, and Blood Institute, the U.S. surgeon general and the Centers for Disease Control and Prevention used the latest communications technology to bring together health care professionals from across the country to discuss progress in Americans' battle against heart disease and stroke.

The event, which transformed the third floor of Bldg. 1's Wilson Hall into a high-tech command center, was a review of “Healthy People 2000 in Heart Disease and Stroke.” The document consists of 318 objectives in 22 key areas. It serves as a blueprint for improving the nation's health.

The review was broadcast by satellite to 200 sites across the United States mainland, and Puerto Rico and the U.S. Virgin Islands. In addition to participating in the national review, many of the sites also hosted their own community health conferences, which were attended by a variety of health care professionals. The event was also available via the Internet. At NIH, the session was shown on NIH videocasting.

The high-tech approach allowed the far-flung audience to pose many questions, both live by phone and in writing by fax, to assistant secretary for health and U.S. surgeon general Dr. David Satcher, NHLBI director Dr. Claude Lenfant, Dr. Edward Sondik, director of CDC's National Center for Health Statistics, and others on the 24-member panel of top policymakers and experts. The panel included representatives from the American Heart Association and other national organizations, minority health groups, community health agencies, universities and medical facilities.

The session was opened by journalist Doris McMillon, who served as moderator. Next came a welcome from Satcher, followed by highlights of progress made and challenges remaining from Lenfant and Sondik. After that, discussion turned to three key issues affecting Americans' health—how knowledge gained can be more fully applied to improving health care; how disparities in the burden of cardiovascular disease can be ended; and how the increasing prevalence of overweight and obesity can be reversed.

Among the achievements and challenges noted were: The Healthy People 2000 target for reducing coronary heart disease deaths was almost reached; Healthy People 2000 goals have been met for reducing the prevalence of both high blood cholesterol and high blood pressure; Healthy People 2000 goals were met for reducing Americans' total and saturated fat consumption; smoking decreases among American adults has stalled and, after decades of decline, begun to increase among American teenagers; coronary heart disease and stroke deaths for African Americans are double those for any other population group; the incidence of end stage renal disease has doubled in the past decade.

Lenfant noted that progress against heart disease and stroke had accelerated in the past 2 to 3 decades, resulting in a 59 percent drop in cardiovascular disease deaths between 1950 and 1996. But, he added that dangerous trends now overshadow that progress, including increasing rates among Americans of heart failure, physical inactivity and overweight and obesity.

Sondik used a statistic to illustrate the huge impact heart disease has on Americans' lives: U.S. life expectancy at birth would increase by almost 5 years if heart disease were eliminated. He also described heart disease's burden on the health care system. It accounts for 23 percent of hospice care, 28 percent of home health care, 29 percent of all hospitalizations, and over a third of nursing home care.

Session participants then discussed the three key issues of application of knowledge, health disparity, and increasing overweight and obesity. Solutions suggested included: For the first issue, creating more community alliances, increasing the number of continuing medical education activities, and giving physicians clearer health messages; for the second issue, forging more community alliances, increasing the delivery of health information and programs through schools, and improving cultural knowledge among health care providers and educators; and for the third issue, changing how food is marketed and increasing environmental supports for physical activity, especially at the workplace.

IBRP ANNIVERSARY, CONTINUED FROM PAGE 1

graduate or medical school without any breaks. More recently, however, several have been "nontraditional" students. Some are married and have children. Some entered or re-entered college in their 30's or 40's. Whether traditional or nontraditional, all have had several things in common: they are highly motivated, academically successful students with an interest in science. Of the people who "graduated" during the first 8 years of the program for whom followup data are available, 64 percent have gone on to receive advanced degrees, most often an M.D. or Ph.D.

In his welcoming remarks at this year's IBRP reception, NIAID director Dr. Anthony Fauci told the students, "I am immensely proud of the IBRP and of the many successful biomedical scientists and physician researchers who have attended the program during the past 20 years."

The idea for the IBRP was conceived in 1978, when NIAID had only one Black scientist on its staff. The NIAID EEO advisory committee and the NIAID Black caucus advised Dr. Richard M. Krause, then NIAID director, that the institute needed to address the serious issue of the lack of Black scientists. Krause, now senior scientific advisor at the Fogarty International Center, appointed an outside advisory committee to recommend ways to accomplish that task and also advised Krause to develop a program to interest science students from historically Black colleges and universities in biomedical research. As envisioned, the latter effort would create a continuing pool of African-American scientists qualified to do research at NIAID.

During that time, Vincent A. Thomas, assistant director for SBIR programs and division operations in NIAID's Division of Extramural Activities, was an institute's EEO manager. He helped get the program started with the full support of Krause and NIAID's scientific director, the late Dr. Kenneth W. Sell. Thomas continued to manage the program throughout its early years.

Sell strongly supported the program and encouraged lab chiefs and other NIAID scientists to participate as mentors to the students. He was joined in this endeavor most notably by Drs. Richard Asofsky, associate director for special emphasis programs in the NIAID Division of Intramural Research, who continues to work with the program, and Katherine Cook Jaouni, who is retired. Dr. Milton J. Hernandez, director of NIAID's Office of Special Populations and Research Training, and Joyce Hunter Woodford of that office now direct the program.

Over the years, the IBRP has grown from a 2-day seminar to the present 4-day program. The annual number of students has increased from 50 to 60. Participants attend seminars on topics such as the immune system, allergic diseases, antiviral drugs, prions, vaccines and AIDS. They also talk one-on-one with scientists about their research in NIAID labs, and receive information about intramural research training and opportunities at NIH.

Since becoming institute director, Fauci has given the program his wholehearted support, and praises Krause as being "a visionary for instituting a program that is one of the most successful at NIAID."

This year's banquet speaker was Dr. Roland A. Owens, senior investigator in NIDDK's Laboratory of Molecular and Cellular Biology. He shared his experiences on his way to becoming one of the few tenured African-American scientists at NIH, offering invaluable first-hand advice.

Lorna Graham is the student from Southern California who was not enjoying the cool temperatures. At "thirty-something" and with a 10-year-old daughter, Graham is a nontraditional student. She attends California State University at Dominguez Hills full time, works two jobs, and cares for her daughter. Graham plans to attend medical school
and is as full of fresh excitement and enthusiasm as the younger students in the program. She says that her visit to NIH opened up new areas of biomedical research for her to explore. She hopes to return to NIH as a summer intern, a step that will help her achieve her ultimate goal of becoming an NIH clinical researcher.

To celebrate the 20th anniversary of the program, the institute invited IBRP graduates to attend and share their experiences with this year's participants. Dr. Anna Ramsey-Ewing, a graduate of the 1985 program, returned to NIH as a student volunteer with Dr. David Margulies in the Laboratory of Immunology. In 1991, she accepted a position as a research fellow with Dr. Bernard Moss in the Laboratory of Viral Diseases. She recently traded her lab bench for a desk in the institute's extramural division, where she is a microbiologist/health science administrator. Although she misses the excitement of doing laboratory experiments, Ramsey-Ewing prefers administration because of the "global view and awareness of policy and procedures" that it affords.

Dr. Oto Martinez-Maza, a member of the class of '79 and current grantee, is soon to be elevated to a full faculty position in the department of obstetrics and gynecology at the University of California at Los Angeles Medical School. In addressing the students, Ramsey-Ewing and Martinez-Maza stressed the important role IBRP played in helping them focus on a career in research and its contribution to the success they have found in their careers. Both volunteered to be resources to the students as they map out their post-baccalaureate education plans.

Given the length of time needed to carve out a career in the sciences, NIAID is hopeful that it has a potential Nobel laureate waiting in the wings.

NIH Smoking Policy Enters Next Phase

You may notice that some new "Smoke-Free Area" signs are posted around campus. These signs are part of the next phase in NIH's smoking policy, which was updated and signed by NIH director Dr. Harold Varmus. Using lighted tobacco products is not permitted in or near smoke-free areas. Eventually, all NIH buildings will have designated smoke-free areas, including all building entrances and exits, air intake ducts, loading docks, covered parking garages and courtyards.

The updated policy, which can be found on the Web at http://www.od.nih.gov/ohrm/qwl/smokepol.htm, is a result of Executive Order 13058 mandating that all federal employees and their visitors be protected from the health risks of environmental tobacco smoke. A group of smoking and non-smoking NIH employees worked to establish the NIH policy, which applies to all federal workers and members of the public who are working in or visiting facilities owned, leased or controlled by NIH.

In addition, unique to the Clinical Center, is a policy developed in accordance with the standards of the Joint Commission on Accreditation of Healthcare Organizations that takes into account not only employees of the CC, but also its patients and visitors. At the hospital, the health risks of smoking are coupled with another known risk: deaths due to fire. Data from the National Fire Protection Association show that most—75 percent—of fire fatalities in health care institutions occur among patients using smoking materials, compared to patient fatalities resulting from all known causes of fire. Therefore, at the CC, smoking has been banned in all patient-care units and throughout the building, including all stairwells and parking garages. Smoking is also prohibited within 100 feet of all entrances and CC smoke-free zones.

NIH strongly encourages and supports employees interested in smoking cessation. More information is available by contacting the NIH Employee Assistance Program at 496-3164.

Atlantic City Day Trip, Apr. 17

The R&W is sponsoring a day trip to Atlantic City on Saturday, Apr. 17, for $25 per person. Check-in time is 6:45 a.m. at the Bldg. 31 C-wing entrance. The bus leaves at 7 a.m. sharp and will arrive at the Resort Casino at 11 a.m. At 5 p.m., the bus leaves the casino, arriving back at NIH around 9 p.m.
Perspectives and Prospects.” His presentation was part of Black History Month activities sponsored by the National Library of Medicine.

“America has one of the largest and most scientifically advanced health care systems in the world,” he remarked, “yet throughout its development, this medical care system has been unable to eliminate serious gaps in the health status of America’s largest racial minority, African Americans.”

As proof, McBride said that in 1985 it was estimated that about 60,000 excess deaths occurred among Blacks compared to whites. By 1990, the figure had risen to at least 80,000. These discrepancies continue today, he said, due to higher rates of cancer, heart disease, stroke, diabetes, homicide and HIV that Blacks experience. The author of several books on health inequities among minorities, McBride has devoted much of his professional life to researching why so many Black Americans have been falling through cracks in the U.S. health care system and how improvements can be made for future generations. In 1987-1988, he served as a visiting scholar in NLM’s Division of History, where he conducted research on infectious disease history and the HIV/AIDS crisis among the urban poor.

By far the most comprehensive and influential federal health policy involving Blacks has been Medicare and Medicaid, he pointed out. “Compared to Medicaid and Medicare,” he said, “only the Civil Rights Act of 1964 has had greater impact on the health and welfare of Black Americans.” Part of what he called the economic access paradigm, such federal financial programs enabled the poor and other disadvantaged populations to pay for medical services. Since the policy’s passage, physician care and hospital utilization by low-income Blacks have increased markedly, he explained.

Ironically, however, as access to health care improved, glaring gaps between the health of African Americans and whites were thrown into sharper focus. Rates of diagnosed diabetes and hypertension among Blacks males, skyrocketed.

“The ability to pay did not lessen the social stigma attached to being Black,” McBride said, referring to

GO WHERE WE HAVE NOT DARED

Black History Speaker Urges Expansion of Traditional Narrative

Only by refuting the myths can African Americans realize their true contributions to history, according to keynote speaker Dr. Ibrahim Sundiata, chair of the Howard University history department, who dispelled several long-held misconceptions about the Black experience in America during NIH’s 1999 annual Black History observance on Feb. 26.

For example, he pointed out, 93 percent of African captives never came to the United States. Contrary to what he called the “Dixie narrative” that most North Americans grew up believing, most Africans who left Africa bound for slavery were brought to plantations in the Caribbean, Haiti and Brazil, and the crop that drove the slave trade was not cotton, but sugar. In addition, he contended, the abolition of slavery was tied far more closely to the era’s economic realities than concerns about human rights.

“We have to understand that [Black history discussions] should be an endeavor to understand the past and not just celebrate heroes and holidays,” Sundiata said. “We have to realize that African Americans’ narrative is part of a larger mega-narrative” that includes Jamaicans, Brazilians, Colombians, Haitians and so many more “brothers and sisters that somehow get left out of the

Dr. Ibrahim Sundiata

African American history does not begin at the plantation, Sundiata emphasized. “Let’s go where we have not dared to go before, look at the whole complexity of our Black culture and claim it. Then, into that complexity, put our heroes—our Dr. [Charles] Drews, our Sojourner Truths—in a narrative that is about ordinary human beings in a struggle. The need in African American history is for a new synthesis. We must avoid
the sense of victimization and discrimination described in young Audre's experience. "Reimbursement policies could not address the ways in which the attitudes and practices inside medical institutions affected the quality of the provider-patient interaction. There's a difference between getting to health care that is effective and compassionate as opposed to receiving medical treatment that is inappropriate, mistreatment or medical care in which the doctor controls the terms of the treatment and the patient sits in passive silence and complies."

Lauding the government's recently announced $400 million effort to end disparities in health care by 2010, McBride said two critical tactics could go a long way toward filling in gaps in medical care: development of more and better preventive medicine models and increased involvement on the part of community and private industry leaders. Also speaking at NLM's program was Elena Temple, press secretary for Congressman Albert Wynn (D-Md.). Temple substituted for her boss, who had to remain on Capitol Hill for a special vote in the commerce committee. She discussed the importance of all Americans—but particularly Blacks—exercising their right to vote. The struggle by African Americans for equal voting rights was too long and too hard for their descendants now to take the right for granted or to shirk their civic responsibility altogether, she said. Temple also refuted an insidious, but completely untrue rumor that the 1965 Voting Rights Act and the 15th amendment to the Constitution will expire in 2007, leaving Blacks without the right to vote. Although the rumor is being passed in several media—most ubiquitously via online arenas and email chains—Temple assured the audience that the important battles ahead do not involve preserving access to the voting booth, but making use of the access already provided and guaranteed.

"Assess your values, assess your actions," she concluded. "Our enemy in the new millennium is apathy."

' R-E-S-P-E-C-T '

OD EEO Advisory Committee Sponsors 'Respect' Campaign

Using the slogan "Respect—Give It to Get It!," the Office of the Director equal employment opportunity advisory committee has initiated a campaign to promote the importance of respect in the workplace. This campaign includes prominent speakers, briefing sessions with OD managers, training on issues identified by OD employees and improved communications through the committee newsletter, Now Is the Hour.

The committee is composed of representatives from the various OD components. Each November, the group spends a day in a planning session to identify goals for the coming year. Formal approval of the plan is given by NIH deputy director Dr. Ruth L. Kirschstein. OD employees should contact their representative with any ideas or questions. Committee representatives include Marcia Doniger, OCPL; Tom Shib, OSP; Michael Chew, OEO; Michele Russell-Einhorn and Patricia Austin, OER; Suzanne Moore, OIR; Margaret Griffin-Young, OTT; Joyce Laplante, OHRM; Sylvia Bennett and Dexter Collins, OFM; Nelson Rodriguez, ex officio; Tammy Luke, OA/OMA; Shelley Mizzell, OA/OCM; Hannah Stachmus and David Rhoads, OA/OLM; Wanda Russell and Debbie Washington, OA/OPM; and Linda Payne, OPC.

Alling Memorial Service Planned

A memorial service in honor of the late Dr. David W. Alling, Clinical Center biostatistician is scheduled for Friday, April 16 at 3:30 p.m. in Lipsett Amphitheater, Bldg. 10. Alling died in January of respiratory failure. His service to NIH spanned 40 years. All are welcome to attend the service. For more information, contact Dee Koziol, 496-2209.
STRESS, CONTINUED FROM PAGE 1

that longer-term perturbations also occur—in the brain and elsewhere throughout the body—following a stressful and/or traumatic event. What's more, individuals may be significantly and inherently different in the ways they deal with stress, and may even be differentially vulnerable to its effects.

“We don't walk into trauma the same way...and we don't walk out of trauma the same way,” said Dr. Rachel Yehuda, a research psychologist at Mt. Sinai School of Medicine in New York City, at a recent NIH symposium on the biology of stress. Furthermore, she emphasized, not all stress is the same.

Yehuda was one of a dozen leading scientists studying the biological effects of stress on the body who presented talks at the all-day meeting held Feb. 4 and cosponsored by the National Institute of General Medical Sciences and NIH's Office of Behavioral and Social Sciences Research. A prominent theme that emerged from the day's presentations was that reactions to stress vary widely, and that—as appears to be the case for much of biology—both behavioral and physiological outcomes of stressful events arise from a complex interplay between genes and the environment. Selected highlights follow:

Hostility, Mental Stress May Aggravate Heart Disease

Hostility and anger may have far-reaching effects on cardiovascular health, just one of the body's systems known to be affected by stress. Nearly a quarter-century ago, Dr. Redford Williams of Duke University began studying the now-infamous “type-A” behavior as a risk for coronary disease. Williams and his colleagues tested 19-year-old men considered to have a “high hostility” personality profile. When evaluated years later, at age 42, the same individuals were more likely to consume more caffeine, alcohol and tobacco; to weigh more; and to have higher cholesterol levels than their “low-hostility” peers. Williams and others have pinpointed hostility in particular as being the most “toxic component” of type-A behavior; although not all type-A personalities are necessarily hostile. Nevertheless, according to Williams, hostility, especially in combination with other risk factors such as depression, job strain, and low socioeconomic status, can precipitate heart disease, cancer, and even death.

Social instability, improper diet, mental stress. A wealth of studies suggest that, in people with pre-existing heart disease, all of these can also provoke an already unhealthy cardiovascular system to fail. Dr. David Krantz of the Uniformed Services University of the Health Sciences presented data suggesting that ordinary activities—as innocuous as talking on the phone or as strenuous as climbing the stairs—can trigger episodes of impaired blood flow (called ischemia) in certain vulnerable people. Krantz discussed evidence for how everyday stressful events can “push” susceptible people over a certain threshold for developing heart disease, thus precipitating a heart attack.

Krantz and colleagues performed a study in which they asked patients wearing heart rhythm monitors to record “what they’re doing and feeling” every day, and then looked for ischemia in blood vessels that feed the heart. They discovered that many incidents of ischemia are silent—that is, producing no outright symptoms. Most events also occur in the morning, he found, and there was a detectable association between ischemia and mental and emotional activities. Importantly, Krantz noted that many such silent ischemia events go unnoticed via standard hospital tests. Yet by knowing about the events, he said, patients might be better able to predict their risk for trouble. Better yet, Krantz suggested, they might actually do something about it, such as try to keep a lid on the stress in their lives. To that end, he cited a recent study conducted at Duke showing that practicing stress management techniques can lessen the occurrence of heart problems in cardiac patients with inadequate blood flow to the heart.

A Mother's Special Touch

Against the backdrop of a slide of a nursing mother, Dr. Saul Schanberg of Duke told the audience about the profound effects a mother’s touch has on her developing child. His talk mostly focused on his research with rat pups, but Schanberg—a pediatrician—also supported the rodent data with results of human studies on the effect of physical contact on premature infants in neonatal wards.

Separation from the mother, he said in jest, “is what some people consider a stress.” So much so, Schanberg said in referring to the rat pup data, that when the pup realizes that “mother is not there,” the animal enters into a survivalist state, conserving energy by shifting to a nongrowing metabolic state. Through careful observation, he and his group narrowed down the particulars of the rat mothers’ influence to licking their pups during a critical developmental window: the first 20 days of life.

Interestingly, day 22 is when a mother usually leaves her rat pups to fend for themselves.

Schanberg also presented data with human babies, in which the gentle massage of “preemies” in neonatal hospital wards led to a 46 percent increase in growth rate, as well as a perceived decrease in stress-related behaviors (such as clenched fists and grimacing).

Later in the day, Dr. Michael Meaney of McGill University presented more data on the remarkable influence of a mother on the general health and well-being of rat pups as they age. His studies show that rat pups handled during the first 3 weeks of life, which also correlates with the sculpting of the
dentate gyrus (a brain region important for processing memory information), have a permanent increase in the number of glucocorticoid (a key stress hormone) receptors in the hippocampus, a neighboring brain region also important for memory.

Meaney's group has begun to analyze the molecular determinants of the "handling effect" (mothers extensively lick and groom their young pups), and so far has pinpointed the neurotransmitter serotonin as at least one key molecule in the process.

Perhaps most remarkable is the long-lasting nature of such handling effects. Meaney's results suggest that the primary means for cementing the handling effect is through the mothers themselves. His data show that mothers behave differently toward handled pups than they do toward their non-handled counterparts. In this way, the behavior is passed on to the next generation, Meaney said. What's more, he added, pups that received more licking and grooming during those critical early days were much more able to deal effectively with stress later in life.

Post-Traumatic Stress Disorder: Impact of Severe Stress

Behavioral researchers often employ mathematics tasks as a means to inflict (and thereby investigate the consequences of) short-term, minor stress on study subjects. One such common exercise, counting backwards by 13, may qualify as a stressful activity for many, but such mental gymnastics are merely an annoyance when compared to what researchers call "extreme" stress or trauma: being raped or assaulted, subjected to childhood sexual abuse, or involved in a motor vehicle crash. As a consequence of such a harrowing experience, one in four people will develop post-traumatic stress disorder (PTSD), according to Dr. Rachel Yehuda.

Typified by the occurrence of flashbacks, nightmares and other sleep problems, emotional outbursts or numbness, and memory and concentration difficulties, PTSD is indeed a disabling condition. The problem with PTSD, described Yehuda, is that "the stress doesn't go away."

Her research has shown that blood levels of certain stress hormones, especially one called cortisol, are markedly low in people with PTSD. And, she found, they are lowest in those people witnessing (or participating in) the most severely stressful events such as being in combat during the Vietnam War. A potentially utilitarian outcome of Yehuda's research is her observation that measuring a person's immediate (up to 1 hour after the traumatic event) response level can be predictive of how likely that person is to develop PTSD.

Time Heals Wounds

Dr. Janice Kiecolt-Glaser of OSU, of the impact of stress on wound healing. Employing second-year medical and dental students as research subjects, Kiecolt-Glaser and her colleagues inflicted minor ("not very painful") wounds before and after periods of stress. What signifies stress to a student? Exams, of course. Kiecolt-Glaser reported that exam stress negatively impacted various immune-related processes, ranging from a delay in the ability to produce antibodies to a flu shot, to a lengthening of the time it took to heal a minor mouth or arm wound.

Since wound healing is a primary factor determining hospital stay in post-surgery patients, Kiecolt-Glaser also mentioned studies conducted by others suggesting that a very moderate level of behavioral intervention aimed at reducing stress ("reading a pamphlet or watching a video about the procedure the night before surgery") has been shown to have a substantial impact on the outcome of surgery, leading in some cases to a shorter recovery period in the hospital.

### CSR's Currie Ends Federal Career After Almost 40 Years

Dr. Julius Currie recently retired from government service after almost 40 years. The last 27 years were spent at NIH, primarily in the Center for Scientific Review.

Before beginning his career at NIH, Currie was a research bacteriologist at the Walter Reed Army Institute of Research, as well as a lecturer and consultant at several nearby organizations. He then returned to graduate school and received a Ph.D. in environmental health sciences from the University of Michigan in 1971. His entry into NIH was through the Grants Associates Program, a training program for incoming health scientist administrators. He later served on the grants associates board and became its chairperson.

His first NIH position was in CSR's precursor, the Division of Research Grants, in 1973, when he became a scientific evaluation officer. From 1980 to 1986, Currie returned to his home state of North Carolina to become chief of the program analysis and scientific review units of the extramural program at the National Institute of Environmental Health Sciences.

In 1986, he returned to DRG to become assistant chief of referral in the referral section. In this position, he was responsible for the scientifically based distribution of grant applications to about 15 referral officers, who in turn assigned the applications to the various review groups in DRG/CSR. For applications that were to be reviewed within the institutes, Currie determined the appropriate review groups. He also engaged in solving many of the problems related to assignment that came into the referral office.

In addition to his administrative experiences, Currie has published articles in the field of microbiology in both national and international peer reviewed journals. While his future plans are not yet firm, his outstanding career will undoubtedly continue into retirement.
NLM Associate Director Colaianni Retires

Lois Ann Colaianni, associate director for library operations at NLM since 1984, retired at the end of 1998. At the September meeting of the NLM board of regents, NLM director Dr. Donald Lindberg presented the NLM Director’s Award to Colaianni “for exceptional leadership and innovative contributions to the library’s programs and services during her highly successful tenure as associate director for library operations.” On the same occasion, the board passed by acclamation a resolution of appreciation acknowledging “…on behalf of the U.S. medical and health communities a debt of gratitude for 17 years of outstanding service to the National Library of Medicine and its users.”

Colaianni came to NLM in January 1981 as deputy associate director for library operations after serving as the director of libraries for Cedars-Sinai Medical Center in Los Angeles. She became acting associate director in 1982 and was named associate director 2 years later. Library operations, the oldest and largest of NLM’s components, is responsible for building and preserving the NLM collection, developing the medical subject headings and directing the National Network of Libraries of Medicine, among other duties.

During her tenure at NLM, Colaianni strengthened basic services and improved the flow of medical information to the user community, while also improving the working environment for NLM staff. Most recently she initiated the development of MEDLINEplus, NLM’s consumer health information Web pages. She also maintained a strong presence outside of NLM, representing the library on the advisory committee to the NIH Office of Research on Women’s Health and serving as a member of the Library of Congress network advisory committee, among other memberships.

Dr. Sherrilynne Fuller, a member of the board of regents and director of the Health Science Libraries, University of Washington, views her as “an inspiration to health sciences librarians through her entire career. Her outstanding achievements in a variety of settings from academic to hospital to NLM are a tribute to her breadth of knowledge, dedication and hard work. She will be remembered as a superb role model, mentor and valued friend to hundreds of health sciences librarians in the United States and the world.”

Colaianni’s contributions to biomedical librarianship have been recognized with the highest professional awards in her field.

Tony McSean of the British Medical Association called her “the most respected figure in the world of health librarianship, as her international honors testify... her contribution to the wider profession has been both broad and deep.” He called her “an incomparably dynamic and reliable collaborator.” Colaianni and her husband, Edmund, have returned to southern California.

Mfume To Speak on Respect, Mar. 30

On Tuesday, Mar. 30 at noon in Masur Auditorium, Bldg. 10, Kweisi Mfume will speak on gaining the respect of colleagues and coworkers. His message will include the responsibility of each employee to alter his/her paradigm and take advantages of opportunities for self-improvement. Mfume is the current president of the NAACP and former congressional representative from Baltimore. His appearance is sponsored by the Office of the Director equal employment opportunity advisory committee. Using the slogan “Respect—Give It to Get It!” the committee has initiated a campaign on the importance of respect in the workplace.

All NIH employees are invited. The event also will be video-conferenced to Executive Plaza North/Conf. Rm. G. For reasonable accommodation, contact the OD EEO office at 402-4157.

NIH, FDA Sponsor Conference, Apr. 15-16

A multidisciplinary international conference, “Biomarkers and Surrogate Endpoints: Advancing Clinical Research and Applications,” cosponsored by NIH and the Food and Drug Administration, will be held at the Natcher conference center Apr. 15-16. Keynote speakers will be NIH director Dr. Harold Varmus, FDA commissioner Dr. Jane Henney and Dr. John Niblack, executive vice president, Pfizer, Inc. For more information contact Sandra Bromberg, (301) 468-6004, ext. 406; or see http://www4.od.nih.gov/biomarkers; or email surrogate_endpoints@md.capconcorp.com.

Tae Kwon Do Beginner’s Class

The NIH Tae Kwon Do Club is offering a beginner’s class for adults starting Monday, Apr. 5. The class will meet in the Malone Center (Bldg. 31C, B4 level, next to the NIH Fitness Center) for 1 hour on Mondays and Wednesdays, 6-7 p.m., and continue for 2 or 3 months until participants can be integrated into the regular club training. Dues $40 (3 months), $30 uniform. Interested persons are welcome to watch regular training sessions. For information call Lawrence Prograis, Jr., 496-1886 or Andrew Schwartz, 402-5197.
DWD Training Tips

The Division of Workforce Development, OHRM, will offer the courses listed below. Hands-on, self-study, personal computer training courses are available through the DWD's User Resource Center at no cost to NIH employees. For details, visit DWD online at http://trainingcenter.od.nih.gov or call 496-6211.

Management, Supervisory & Professional Development
Facilitation Skills for Effective Meetings 4/26
Creative Thinking and Innovation on the Team 4/27
How to Deal with Frustrating Situations 5/3

Administrative Systems
Domestic Travel 4/26
Basic Time and Attendance Using ITAS 4/28
Foreign Travel 4/29
Travel for NIH Travelers 5/11

Administrative Skills Development
Success Strategies for Support Staff 4/27
Time Management Techniques 5/3
Taking Minutes at Meetings 5/4
Managing Difficulties in the Workplace 5/6

Communication Skills
Effective Writing II 5/3
Ten Secrets to Powerful Writing 5/10

Computer Applications and Concepts
Introduction to Tango 5/3
Windows Intermediate: Customizing Your System 5/4
Introduction to MS Excel 97 - Office 97 5/10
Introduction to MS Word 7.0 - Office 95 5/11

NIDDDK Council Welcomes 7

Seven new members joined the NIDDDK Advisory Council at its Feb. 17 meeting. Joining the subcommittee on diabetes, endocrinology, and metabolic diseases are Dr. Ronald Kahn, director of the Joslin Diabetes Center in Boston and a professor of medicine at Harvard, and Dr. Ming Jer Tsai, the Charles C. Bell professor in the department of cell biology at Baylor College of Medicine.

The subcommittee on digestive diseases and nutrition gained two new voices. Dr. Rena Wing is a professor of psychiatry and human behavior at Brown University, a professor of psychiatry, psychology, and epidemiology at the medical school at the University of Pittsburgh, and director of the NIDDDK-funded Obesity and Nutrition Research Center in Pittsburgh. Also advising DDN is Dr. Jeffrey Gordon, head of the department of molecular biology and pharmacology at Washington University School of Medicine.

The council subcommittee on kidney, urology, and hematology has three newcomers: Dr. John McConnell, chair of the department of urology at Southwestern Medical Center at the University of Texas in Dallas; Dr. Robert Schrier, chair of the department of medicine at the University of Colorado School of Medicine in Denver; and Dr. Dana Weaver-Osterholtz, associate professor in the department of surgery at the University of Missouri Medical School.

NIH Marks Sleep Awareness Day

You probably know that eating right and getting regular physical activity is important to your health. But what about sleep? Getting enough restful sleep in each 24-hour period is essential to your health and well-being.

Find out more about sleep—how much you need, the consequences of not getting enough, and some of the common sleep disorders—at an open house sponsored by NHLBI's National Center on Sleep Disorders Research (NCSDR) on Wednesday, Mar. 31 from 11 a.m. to 1 p.m. in the Clinical Center lobby. The open house is part of the National Sleep Awareness Week observance, Mar. 29 - Apr. 2, when the National Sleep Foundation and more than 75 other organizations across the country join to promote greater understanding of sleep and sleep disorders. The NIH observance will feature representatives of NCSDR and other institutes who will answer your questions and provide literature on multiple aspects of sleep and sleep disorders.

For more information, call the NHLBI Communications Office, 496-4236.
Fellows Honored at Wednesday Poster Sessions

All of the excitement at the weekly Wednesday Afternoon Lecture Series is not confined to the lecture hall. Outside of Masur Auditorium, both before and after the distinguished talks by established investigators, a rising generation of sophisticated researchers gets to show their stuff.

Winners of the Fellows Award for Research Excellence (FARE), which recognizes outstanding scientific research performed by NIH fellows, are on hand to explain their posters not only to the guest lecturer, but also to attendees at the series. FARE is an annual event. Fellows submitted abstracts to the FARE 1999 competition during the summer of 1998. Abstracts were assigned to study sections and judged by panels of postdocs and senior scientists. This year, 130 of the 666 applicants were awarded with a $1,000 travel scholarship to attend a meeting within the United States during fiscal year 1999. The winners are asked to present their work during a poster session held Wednesdays in front of the Office of Special Events (Bldg. 10, Rm. 1C174). FARE winners get to choose, in most cases, which guest lecturer's talk they want to be a part of with their poster.

Ten FARE winners showed their work Mar. 3 in conjunction with a talk by Dr. Fred Alt of Harvard Medical School, who was at NIH to discuss “A Critical Role for DNA End-joining Proteins in Both Lymphogenesis and Neurogenesis.” Among those browsing the posters was Dr. Sharon Jackson, a FARE winner in 1995 who now works in NIAID's Laboratory of Host Defenses. She was there to greet Alt, who had been her mentor at Columbia University in the mid-eighties.

“He’s just a real person,” said Jackson. “If there's anyone responsible for me being in science, it's him.”

Alt made time for all the FARE posters, interacting amicably with the presenters prior to his lecture.

Applications for FARE 2000 will be accepted starting in the late spring of 1999. The fellows committee will soon provide details on its Web site at ftp://helix.nih.gov/felcom/index.html. FARE is sponsored by the scientific directors, the Office of Education and the Office of Research on Women's Health.