National Conference Explores CVD Trends

Despite dramatic progress against cardiovascular disease (CVD) in the past half century, challenges remain and new strategies are necessary to overcome such problems as increases in obesity and physical inactivity among Americans.

That was the story that unfolded at a recent conference held to explore trends in CVD and its risk factors. The trans-agency “National Conference on Cardiovascular Disease Prevention: Meeting Healthy People 2010 Objectives for Cardiovascular Health” was held at the request of Congress and drew more than 100 participants to Bethesda for a packed 3-day agenda. Even more participants tuned in to the conference via NIH Webcasting.

NIH Releases New Materials For Classroom Use

NIH is launching a major new curriculum supplement series for grades kindergarten through 12 that will be distributed to teachers around the country to improve science literacy and to foster students’ interest in science. The curriculum supplements will contain the latest information about medical discoveries made at NIH and their effects on public health.

The first three supplements (listed below) were developed by the Office of Science Education in cooperation with NIH institutes and curriculum developers from Biological Sciences Curriculum Study (BSCS) of Colorado Springs and Videodiscovery, Inc. of Seattle.

- Cell Biology and Cancer (with NCI)
- Emerging and Re-Emerging Infectious

NLM History Lecture Examines ‘Death in the Cannibal Islands’

By Carla Garnett

“The great sickness sits at the masthead... We have fallen upon a new age Infectious disease is spreading among us.” —English translation of a Fijian meke (chant)

It was supposed to be a good thing. In fall 1874, King Cakobau, the most powerful ruler of the Cannibal Islands (now known as Fiji), signed a deed of cession giving Great Britain control of the archipelago and securing naval protection for the dozens of tiny islands located in a then fairly remote part of the western Pacific Ocean. The Fijians would maintain their lands, according to the agreement, but would become a British Crown colony. England took the nation under its wing and, by all accounts, the Cannibal Islands were glad to go. Mutual satisfaction.

But, by spring 1875, the story had changed...

Extramural Associates Program: Gaining Momentum for Y2K

When the Extramural Associates Program was conceived 21 years ago, Dr. Robert Stone was director of NIH, Dr. William Raub was deputy director of the Office of Extramural Research (OER), Dr. Carl Douglass was director of the Division of Research Grants and Dr. Matthew Kinnard was a health scientist administrator in the extramural program of NIDR.

Kinnard, currently EA Program director Dr. Matthew Kinnard (l) meets with NIH deputy director Dr. Ruth Kirschstein and Dr. Raul Armstrong of Ponce School of Medicine, Ponce, Puerto Rico.
NEW CURRICULUM, CONTINUED FROM PAGE 1

Diseases (with NIAID)
- Human Genetic Variation (with NHGRI)

These units, designed for use in senior high school classrooms, contain extensive background information for teachers and use creative inquiry-based activities to promote active learning. Each comes with an interactive CD-ROM.

The new curricula are aligned with the National Science Education Standards released by the National Academy of Sciences in December 1995 to outline what all students should know by the time they graduate from high school. Teachers and students across the country participated in focus groups and field tests of the curricula during the development process.

OSE and BSCS are offering a series of workshops to train educators to use the new units in their classrooms; one was held in October at the National Association of Biology Teachers (NABT) annual convention in Ft. Worth, Tex. Also at the NABT convention, three NIH scientists (Dr. Karyl Sue Barron of NIAID, Dr. Alan E. Guttmacher of NHGRI and Dr. Dinah D. Singer of NCI) conducted a seminar on recent discoveries related to the supplement topics. Three of the teachers in attendance won trips to visit NIH and the institutes cosponsoring the first three units: Kathleen Gabric, biology teacher at Hinsdale Central High School, Ill.; Marjorie King, K-12 science consultant at Jefferson Parish Public School System, La.; and Paul C. King, science teacher at Randolph High School, Mass.

Additional supplements with accompanying CD-ROMs or Web-based activities are planned. The following are scheduled for release in the winter of 2000:
- The Mouth: A Window on Good Health (with NIDCR for first, second and third grades)
- The Neurobiology of Addiction (with NIDA for high school)
- Human Health and the Environment (with NIEHS for middle school)

And, these units are planned for release in the winter of 2001:
- The Ear: A Sensitive, Rapid but Fragile Sound Processor (with NICHD for middle school)
- Understanding Alcohol: Separating Fact from Fiction (with NIAAA for middle school)
- Sleep, Sleep Disorders and the Brain (with NHLBI for high school)

For more information, visit the OSE Web site at http://science-education.nih.gov/supplements.—Margaret Warker

Three teachers who attended a recent teacher-training seminar on the new NIH Curriculum Supplements won trips to NIH. Their names were drawn by three NIH scientists who spoke at the seminar and are from the institutes cosponsoring the supplements with OSE. Together they are (from l): Paul C. King of Randolph High School, Mass.; Dr. Dinah Singer of NCI; Dr. Alan Guttmacher of NHGRI; Marjorie King of Jefferson Parish Public School System, La.; Kathleen Gabric of Hinsdale Central High School, Ill.; and Dr. Karyl Sue Barron of NIAID.

Five NIH'ers Elected to IOM

Five NIH employees were among the 55 people newly elected to the Institute of Medicine of the National Academy of Sciences. Members are chosen for their major contributions to health and medicine or to related fields such as social and behavioral sciences, law, administration and economics. Election to the institute is both an honor and an obligation to work on behalf of the organization in its governance and studies. With their election, members make a commitment to devote a significant amount of volunteer time as members of committees engaged in a broad range of studies on health policy issues. The newly elected NIH'ers are Dr. Kenneth Fischer, chief of NINDS's Neurogenetics Branch; Dr. Patricia Grady, NINR director; Dr. Richard Hodes, NIA director; Betsy Humphreys, assistant director for health services research information, and deputy associate director for library operations, NLM; and Dr. Daniel Weinberger, chief of the Clinical Brain Disorders Branch in NIMH's intramural research program.

NIAAA's Keller Lecture, Nov. 18

The fourth annual Mark Keller Honorary Lecture Series will be held Thursday, Nov. 18 from 1:30 to 3:30 p.m. in Masur Auditorium, Bldg. 10. Dr. Henri Begleiter, professor of psychiatry and neuroscience, department of psychiatry, SUNY Health Service Center at Brooklyn, is this year's award recipient and lecturer. His speech is entitled "The Search for Genes for Alcoholism." For more information, visit the NIAAA Web site at: http://silk.nih.gov/silk/niaaa1/conference/MKeller.htm.
NICHD Celebrates Accomplishments Of Minority Scientists

NICHD recently recognized the recipients of its Supplement Program for Underrepresented Minorities and their accomplishments at a 2-day conference. The gathering highlighted research opportunities for minority scientists, both under the guidance of established principal investigators and as principal investigators themselves. The conference also included a poster session featuring research projects supported by this initiative.

The NICHD program was introduced in April 1997 to increase the number of underrepresented minority scientists in biomedical and biobehavioral research. To date, NICHD has made nearly 250 Supplement Program awards, 25 of them in 1999. The program supports investigators who sponsor a minority individual to participate in an ongoing research project, be that person a high school student, undergraduate student, graduate research assistant, postdoctoral candidate, or staff or faculty member. Principal investigators mentor minority researchers for 3 months to 2 years, encouraging them to pursue their own careers in biomedical research. To qualify for the award, the minority individual must illustrate that his or her experience and that of established principal investigators themselves. The experience must also require interaction with individuals on the student, undergraduate student, graduate research assistant, postdoctoral candidate, or staff or faculty member. Principal investigators mentor minority researchers for 3 months to 2 years, encouraging them to pursue their own careers in biomedical research. To qualify for the award, the minority individual must illustrate that his or her experience is an integral part of the ongoing research as outlined in the parent grant. The experience must also require interaction with individuals on the parent grant and an intellectual contribution to the progress of the project.

Award levels are tailored to the minority applicant’s education level and range from a one-time, $3,000 stipend for a researcher at the high school level, to $50,000 salary expenses for a faculty or staff member. Principal investigators receive these funds as administrative supplements to their parent grants in return for their mentoring efforts. Some applicants also qualify for awards to cover travel and supply costs. In this way, the NICHD Supplement Program for Underrepresented Minorities supports products and projects at some of the best labs in the country.

“These NICHD supplements are unique,” said institute deputy director Dr. Yvonne Maddox. “This program has not only fostered numerous careers in research, but it has also established a foundation to launch the beginning investigator into the research arena.”

Maddox recognized the efforts of the late Dr. Gordon Guroff in establishing the program. Guroff, the deputy scientific director of NICHD, was killed in an automobile accident on July 9; Maddox dedicated the conference to his memory.

Keynote speaker Dr. J. Tyson Tildon suggested that researchers include mentoring as a “major methodology” in their practices.—Christina Stile

Dr. Kenneth Bridbord (c), director of the FIC Division of International Training and Research, received a Special Recognition Award at the recent International Conference on Global Strategies for the Prevention of HIV Transmission from Mothers to Infants. Citing his dedication, perseverance and innovation in recognizing the importance of international education and training in HIV/AIDS, the awards committee honored his role in the expansion of scientific and clinical efforts in HIV/AIDS prevention. Bridbord has been instrumental in developing the FIC AIDS International Training and Research Program, which enables U.S. schools of medicine and public health to provide HIV/AIDS-related training to scientists and health professionals from developing countries and to forge collaborative ties with research institutions in countries of strategic importance in HIV/AIDS research. Under his stewardship, the program has trained over 1,600 individuals at the Ph.D. or postdoctoral level and thousands more through advanced in-country training. Presenting the award are Dr. Arthur Amman (l), president, and Natasha Martin of Global Strategies for HIV Prevention.

Pre-Menopausal Women Needed

Women between 23 and 47 years old who have an increased risk of breast cancer are needed for an NCI study designed to test a drug that may help reduce the risk of breast cancer. Participants will take the drug every day for 2 years, and also will be asked to visit the Clinical Center or National Naval Medical Center regularly for 3 years. They will receive care from NCI specialists and help researchers determine if the medication is safe for premenopausal women.

Volunteers will be screened over the phone to determine if they have an increased breast cancer risk. Factors that influence risk include a family history of breast cancer, previous breast biopsies, age at first menstrual period and age at first live birth. To be eligible, women must not be pregnant or lactating, must not have had a hysterectomy, and must be willing to use nonhormonal methods of contraception. If interested, call 1-888-624-1937 and ask about the “Capital Area SERM Study.”

Healthy Women Needed for Reproductive Health Study

NICHD scientists seek healthy women to take part in a research study of normal female reproduction. You may be eligible if you are under 35, use no birth control pills or other hormones, have normal menstrual cycles and have no history of fibroids, infertility or endometriosis. The research team will explain all study details, risks and benefits. Requires two short visits. Compensation is provided. Call 1-800-411-1222.
transcription remodeling and NIA's Laboratory in Aging Award.
The Ellison of Genetics, award provides support to
Medical Foundation New Scholar
4 years. Wang is conduct basic
complex involved characterizing a
field of aging over premature aging
disease Werner syndrome (WS) at
NIA's Gerontology Research
usually becomes apparent after the
a model that disease that rare genetic
scientists can Baltimore. A
teen years, WS is compare to
aging.

The conference was sponsored by NHLBI, in cooperation with NIA, the Centers for Disease Control and Prevention, and the Agency for Health Care Policy and Research. The goal of the conference was to assess the magnitude and trends of America's CVD threat and to start the task of developing strategies to meet the health targets in Healthy People 2010, the government's blueprint for improving Americans' health. The Healthy People 2010 report will be issued in January. The CVD conference began with a stage-setting introduction from U.S. surgeon general Dr. David Satcher. He told the group that big gains in life expectancy had been made over the past century, but much more needed to be done.

Satcher said that 15-20 percent of the current Healthy People 2000 objectives had been met and another 60 percent were headed in the right direction. But, he noted that left 20 percent unimproved.

National Center for Health Statistics director Dr. Edward Sondik gave an overview of the rates for CVD and its risk factors. Some rates have slowed their decline. For example, from 1970-1980, deaths for stroke dropped by 20.3 percent and for coronary heart disease (CHD) by 26.1 percent. However, from 1990-1997, deaths for stroke declined by only 2.1 percent and for CHD by only 11.4 percent.

Dr. Shiriki Kumanyika of the University of Pennsylvania School of Medicine illustrated the problem of overweight and obesity. About 15 percent of children age 6-12 years and about 12 percent of those age 12-17 years are obese. Among adults, 39 percent of men and 25 percent of women are overweight, while another 20 percent of men and 25 percent of women are obese.

Speakers also warned that physical inactivity was increasing in prevalence among Americans, while smoking may no longer be declining. About 25 percent of American adults now smoke.

But Dr. Christopher Sembros of the NIH Office of Research on Minority Health reported some good news. He said that "considerable success had been made toward achieving the Healthy People 2000 goal" for total cholesterol.

Other heartening news was that public health education efforts have made many Americans aware of CVD risk factors, particularly those related to diet.

But Dr. George Mensah of the VA Medical Center in Atlanta pointed to the increase in congestive heart failure (CHF), calling it the "final frontier." It is the only CVD diagnosis that has been increasing in deaths since about 1970, he said.

He added that, although the causes of CHF are better known today, doctors are not prescribing the right drugs. For instance, studies show that angiotensin converting enzyme (ACE) inhibitors improve quality of life and reduce CHF deaths by as much as 40 percent, but are not being widely used.

Dr. Gerald O'Connor of the Center for the Evaluative Clinical Sciences at Dartmouth Medical School spoke of the need for better use of existing information. He said this had contributed to geographic disparities in how CVD treatments were utilized. Participants offered many suggestions for improving CVD trends. Key among these were creating CVD prevention programs to target high risk groups, delivering better practical information to physicians, providing training in CVD prevention to practitioners, reimbursing for preventive services, and forming community and other partnerships to facilitate research and public health promotion efforts.

Presenters also spoke of the need for more comprehensive data in order to better track CVD and its risk factors, especially to improve the health of minorities and to understand geographic differences in both CVD and its treatment. Speakers also said more research was needed on the role of socioeconomic status in cardiovascular health, and on approaches to end health disparities based on race, ethnicity and gender.

Conference chair Dr. Thomas Pearson of the University of Rochester School of Medicine said both a summary article for a journal and a monograph of the proceedings would be published.—Louise Williams

NIAID's Ana Martinez has been appointed chief of the newly established Pharmaceutical Affairs Branch in the Division of AIDS. She came to NIH in 1991 as chief of the pharmaceutical affairs section in DAIDS. She received a Public Health Service Recognition Award for her efforts in the implementation of ACTG 076, a study in which the drug AZT reduced the rate of maternal-infant transmission by two-thirds, and an NIH Merit Award for her contributions to the design and conduct of clinical trials. She served as chief of the department of pharmacy at Rockefeller University, and later as director of pharmaceutical service and clinic operations at the Medican Research Foundation.

Garden Club Meets, Dec. 2

The NIH Garden Club will meet on Thursday, Dec. 2, in the Natcher Bldg., Rm. A at noon. The topic and speaker will be posted on the club Web page: www.nigb.gov/SCwgarden/. All interested gardeners are welcome.
Nabel To Direct NHLBI Clinical Research

Dr. Elizabeth Nabel recently joined NHLBI as director of the Clinical Research Program in the Division of Intramural Research. She is a leading researcher in vascular biology and genetic therapies for cardiovascular disease.

Nabel becomes one of two directors for NHLBI's intramural research program. Over the summer, NHLBI reorganized the division into clinical and laboratory research programs. The reorganization allowed creation of several new units including a Vascular Biology Branch, which also will be headed by Nabel.

She grew up in Minneapolis and earned a B.A. summa cum laude in 1974 from St. Olaf College and in 1981 earned an M.D. from Cornell University Medical College. She did an internship and residency in internal medicine and a fellowship in cardiology at Harvard Medical School's Brigham and Women's Hospital. Then, in 1987, she became assistant professor of internal medicine at the University of Michigan. While there, she became director of the university's Cardiovascular Research Center in 1992, professor of medicine in 1994, and professor of physiology in 1995. Since 1997, she also served as chief of its division of cardiology.

Nabel's research at the university encompassed both basic science and clinical investigations into the regulation of smooth muscle cell growth, a major contributor to both atherosclerotic lesions and closure of blood vessels after such procedures as coronary bypass graft surgery and angioplasty.

"My laboratory is interested in understanding growth regulatory signals in vascular cells," she said. "Smooth muscle cells respond to mitogens by phenotypic modulation from a contractile to a synthetic cell. However, when the reparative process is complete, smooth muscle cells cease proliferating. The mechanisms by which cells revert to a quiescent phenotype are not completely known," she continued. "Understanding these signals is important for dissecting the pathogenesis of vascular diseases and ultimately treating them."

Nabel also has had a long-standing interest in developing novel genetic treatments for cardiovascular diseases. Her laboratory at Michigan is completing the test of an antiproliferative gene in animal models of vascular disease and, with collaborators, Nabel plans to bring this research forward to do phase I human studies at Michigan.

While at NHLBI, she will continue both her basic and clinical studies. "The research opportunities at the NHLBI are tremendous," she said. "This is an exciting time in biomedical research. Basic discoveries can now be rapidly translated into new therapies for heart, lung and blood diseases. The intramural program at the NHLBI is an ideal environment in which to carry out these studies."

Nabel has participated in various NIH study sections and been a member of NHLBI's SPARKS advisory committee, which helps the institute identify special research funding opportunities.

Her research has led to more than 150 professional articles and publications. Among her many honors are such research prizes as the David Drusin Memorial Prize in Medicine from Cornell University Medical College, an Established Investigatorship Award from the American Heart Association, an American Society for Biochemistry and Molecular Biology-Angel Scientific Achievement Award, and the Gwendolyn J. Steward Memorial Award from Temple University in Philadelphia.

In 1998, Nabel was elected to the Institute of Medicine of the National Academy of Sciences. She also is a member of other elected professional societies such as the Association of American Physicians and the American Society of Clinical Investigation.

Nabel has three children and her husband, Dr. Gary Nabel, recently became director of NIH's new Vaccine Research Center.

NIAMS Grant Targets Osteoporosis in Men

Osteoporosis, the major bone-weakening and fracture-causing disease that has long been studied in women, will now undergo major scrutiny in men with the award of a seven-center, $23.8 million grant by the National Institute of Arthritis and Musculoskeletal and Skin Diseases in partnership with the National Institute on Aging and the National Cancer Institute.

The 7-year study, which will enroll and then follow some 5,700 men age 65 and older for an average of 4.5 years, will determine the extent to which the risk of fracture in men is related to bone mass and structure, biochemistry, lifestyle, tendency to fall and other factors. The study will also try to determine if bone mass is associated with an increased risk of prostate cancer. Such a relationship already exists between high bone mass and breast cancer, another hormonally sensitive condition.

"Although the lifetime risk of older men for fractures of the hip, spine or wrist is considerable, the cause and pathology of osteoporosis in men hasn't received the research attention we'd like," said NIAMS director Dr. Stephen Katz. "We're excited about this major study in men that will plow the same kind of fertile ground that has yielded so much for the health of women."
dramatically. The islands were in the grip of a devastating epidemic. By the end of that year, nearly one-third of the 150,000 Fijian people were missing and presumed dead. According to Dr. David Morens, medical epidemiologist in the Virology Branch of NIAID’s Division of Microbiology and Infectious Diseases and medical historian, things began to go downhill just after—of all things—a diplomatic pleasure cruise. Morens told the fascinating story, “Death in the Cannibal Islands: History of an Emerging Infectious Disease,” at a recent seminar offered by the National Library of Medicine’s History of Medicine Division.

“Anyone who’s ever gone to medical school will have heard of this epidemic,” he began. “It’s in hundreds of textbooks, an obligatory paragraph that introduces the concept of a ‘virgin soil epidemic.’ The term was coined earlier than 1875, but this is the epidemic that popularized it. Though the details have never been known to a larger audience, the fact that there was an epidemic and the impact and the implications of it have changed the way we think about infectious diseases.”

Settling a Wild Frontier

Morens set the scene: At the time, around the mid-1800’s, the Pacific was being opened to western colonization. The Fijian islands were being overrun by colonists from various nations, including America. Although communication and transportation were difficult issues for this distant nation, there was an advantage to the region’s relative isolation. Because of the long distances and slow travel, infectious diseases that were spread person to person—particularly by the airborne route—were kept out of the islands. As a result, the population in Fiji had no exposure to the disease that would so dramatically diminish their number, a disease later identified as measles.

“It was kind of like a wild, crazy frontier era,” Morens said, describing the presence of the Ku Klux Klan (which had invaded Fiji decades earlier), and the practices of cannibalism, and kidnapping and involuntary servitude of the Fijian and Polynesian residents. As the leader of the largest of the islands, King Cakobau—who had accepted the lotu (converted to Christianity) a couple of decades earlier and wanted his nation to settle down—had petitioned the British government several times over the years to adopt Fiji. His request had always been denied until 1874, when a more conservative government took over in Britain and agreed to assume the nation. The deed of cession was officially signed on Oct. 10, 1874, by 13 Fijian leaders, including Cakobau.

In December 1874, Cakobau was invited for a state visit to Sydney, Australia, the closest seat of the British government at the time. It was only fair, it was thought, that the former king—who had traveled all over the Pacific, but never to a western city—be honored with a trip to a city most like his new government. A British ship, the H.M.S. Dido, was sent for Cakobau and his party of 50 to 100 people, which included his wife, two grown sons and a chaplain. The trip would take 19 days. The Fijians were to be feted, the former king and his wife put up in the finest hotel. The sons, however, were to stay aboard the ship, which was docked in the Sydney harbor. The visit went well. Cakobau was said to be fascinated with western culture, particularly with such devices as magnets and elevators. The group departed after a week’s sojourn.

En route back to Fiji, two passengers—Cakobau’s firstborn, Ratu Timoci and the chaplain, Mesako—became ill. Dr. W.C. Chapman, the ship’s surgeon, diagnosed the disorder as measles. In fact, according to Morens’ research, the city of Sydney had been battling a measles epidemic at the time. “Nobody thought what kind of a threat this might pose,” Morens said, pointing out that the incubation period for measles was 14 days and the trip back to Fiji took 19 days. The sick men were immediately isolated in a hut aboard ship. In theory, he continued, given that the quarantine laws [no ship was allowed into port with a quarantinable disease; and if there was such a disease on board, the ship had to fly the international symbol of quarantine, a yellow flag] were in place, there should have been no problem. The ill folks and presumably any other passengers who might have been exposed would be quarantined and treated until the measles ran its course.

“What happened next is a terrible and ironic story of mistakes and missed opportunities,” said Morens. “Somebody forgot to put the yellow flag up. The ship sailed back into Levuka harbor without a yellow flag.”

The Plot Thickens

In addition, an embarrassing complication had
Suspected, Distrust Grow

An armed rebellion by the island tribal chiefs ensued. The Fijians, who had never experienced an illness like this before, drew the conclusion that the British were trying to destroy them through genocide and take over their lands. Distrust of the Crown government grew. Islanders abandoned the lotu, and returned to traditional practices of murder and cannibalism. Although King Cakobau did not succumb to the disease, his brother Savanaca, a prominent politician in his own right, was the first famous Fijian to die in the epidemic.

"There appears to be only one reason for the decrease of the natives," said Josefa Sokvagone, a Fijian who gave remarks in public testimony for an 1893 report on the epidemic. "It's the white chiefs who live among us. They are blighting us, the natives, and we are withering away. They are great and we are insignificant." Western response to the devastation varied, dividing between the political and the medical, observed Morens. Queen Victoria, when finally notified, was enraged that her new subjects were dying at such an alarming rate, and launched an investigation. She also sent in armed Fijians led by British soldiers to quell the rebellion. Prominent physicians and health officials in the western medical community by and large concluded publicly that the Fijians were an inferior, "degenerate" people, left vulnerable to measles and other infectious diseases by their own inbreeding and faulty genetics.

"Here in 1876 the lesson being learned by the western world is that uncivilized people are not prepared to face the modern world," explained Morens, noting the burgeoning eugenics movement's influence at the time. This ill-conceived notion persisted, he continued, until at least as late as 1922, when Dr. Victor Vaughn—one of the fathers of pediatrics and of epidemiology—was quoted in a discussion about the Fijian epidemic: "Fortunately, these children die," Vaughn reportedly said, "but they do not die from infectious diseases, they die because they are unfit to live."

History Teaches

It is precisely these kinds of pseudo-scientific conclusions and erroneous judgments that Morens said he hopes medical history lessons—like the one

CONTINUED ON PAGE 8
CONTINUED FROM PAGE 7

he gave on the Cannibal Island measles epidemic—
can help current and future public health officials
avoid.

“One of the things that’s interesting about history
to me is to be able to see what we can find of
relevance to modern
times,” Morens con­
cluded. “Think about
what lessons this
epidemic story has for
modern times.”

Besides the instructions
in disease containment
and genetics left for
scientific posterity, the
epidemic also had at
least one tangible
positive outcome, he
said. It forced Britain to
establish Fiji’s first
medical school, which
graduated its first class
in 1888. A medical
historian by avocation as well as vocation, Morens
visited the facility several weeks ago, and found that
today’s Fijian medical students know virtually
nothing of the epidemic and its part in their history.
When he mentioned it and his research in passing,
he was invited back to share the whole story.

A newspaper
cropping shows
the first graduat­
ing class of the
Fiji School of
Medicine.

Y2K—A Major or Minor Disruption?

With fewer than 50 days to the last year of the
millennium, there are as many views about what will
happen on Jan. 1, 2000, as there are people. You
may wonder how the transition to the new date will
affect the building where you work.
The Office of Research Services created a Y2K
team to manage the process of making NIH facil­
ities, both on and off campus, Y2K ready. The
team’s efforts are being coordinated with the Center
for Information Technology, which is spearheading

NIH’s Y2K compliance initiative.

Two contract firms doing Y2K evaluations have
provided written certification that the more than
1,000 building system components (including fire
alarms, emergency generators, uninterrupted power
supply, elevators, heating, ventilation and air
conditioning, lighting, security, electrical distribu­
tion, plant equipment and freezer control systems)
tested on the Bethesda campus are Y2K compliant,
not counting the Clinical Center, which is still under
inspection.

The compliance status of each building on the NIH
Poolesville campus is also being determined. Y2K
compliance at the Frederick Cancer Research and
Development Center, Rocky Mountain Laboratories
and Research Triangle Park, N.C., is being certified
by facility managers at those locations.

NIH is developing contingency plans to cover
events outside its control. If on Day One power is
not provided by Pepco, water is not available from
the Washington Suburban Sanitary Commission or
other similar problems occur, NIH has a fall-back
position to continue essential work. Command
centers are being strategically located to permit
communication between satellite campuses and
response teams as a first line of defense against a
potential Y2K bug. Learn more at http://
des.od.nih.gov/Y2K/index_Y2K.htm.
director of the EA program, is the only remaining member of that quartet of 21 years ago. In addition, the program has long since been relocated from DRG, its original home, and is now a component of OER, OD. The EA program was conceived by the late Frank Cady of DRG as a mechanism to promote and facilitate the entry and participation of women and minority institutions in biomedical research and research training. Cady was the program's first director. The program was originally housed in the cramped quarters of the Westwood Bldg. annex and was closely associated with the Grants Associates (GA) Program, which was terminated when the last GA completed the program in 1996.

The GA and EA programs remained close associates throughout their coexistence, although their missions were substantially different. Unlike the early days, today’s EA program is housed within Suite 6095 of Rockledge II, which are plush surroundings compared to Westwood. In their present quarters, EA residents are provided personal computers, email addresses, laptop computers, phones equipped with voice mail capability and a dedicated facsimile machine. More importantly, throughout its 21-year existence, the EA program has trained more than 150 science faculty and administrators from minority and women’s institutions in the art of research development at their respective institutions, where they continue to have a significant effect. As a result of their experience, EA alumni have been elevated to positions of deans, vice presidents, provosts and presidents of EA as well as mainstream institutions. Others have become CEOs in mid-sized and Fortune 500 companies while others have accepted positions in mid- and upper-level federal service.

During the recent EA biennial update conference, Kinnard highlighted other notable achievements of the program, particularly the past 5 years. They included: addition of the Extramural Associates Research Development Award (EARDA), a 3-year grant to assist the EAs in achieving the goals of the program upon returning to their home campuses following NIH residency training; in response to the well-known “pipeline” issue concerning the dearth of women and minorities in mathematics, science and technology, selected community colleges have been added to the list of EA-eligible institutions; taken advantage of a streamlined procedure for acquiring surplus laboratory and office equipment; extended the EA residency training to most federal and nonfederal agencies that award extramural resources in mathematics, science and technology; instituted a 1-week mid-semester break for the EA residents to return to their home campuses to ease their permanent transition back on completion of the 5-month residency training; fully utilized the personnel and resources of several national organizations whose goals are similar to EA’s such as the Society of Research Administrators (SRA), the National Sponsored Programs Administrators Alliance and the Council of Undergraduate Research. During SRAs October 1998 national convention, the EA program officially became a special interest group of SRA under the auspices of the education subcommittee. During the 1999 SRA national meeting, Kinnard received the Hartford-Nicholson award for significant contributions to SRA that benefit its entire membership and for fostering the overall mission of the SRA.

The theme of the 2-day EA update conference was “The Spirit of the EA Program: Let Each One Teach One.” This theme was echoed through constant networking both by design and spontaneously by all participants. Other features of the conference were: participation by 12 presidents of EARDA-recipient institutions; description of a model sponsored programs office that included the institution’s president and two former EAs who currently head the sponsored programs office; a recent update of new policies and programs at NIH; a keynote address by NIH deputy director Dr. Ruth Kirschstein; an overview of the mission and activities of five national organizations whose goals are consistent with goals of the EA program, and an awards ceremony. Approximately 70 EA alumni attended the conference. Six of the first 12 EA participants—four of whom are still actively serving at the same institution as they did 21 years ago—also attended. Since 1994, the program has made 44 EARDA phase I 3-year grant awards and has awarded 14 phase II EARDA’s totaling $5.5 million.

So in spite of its inauspicious and rather uncertain beginning, the EA program’s future appears bright. This perception is supported by the level of optimism exhibited by EA alumni throughout the conference. Given a prediction of what the U.S. workforce will look like 25 years into the next millennium, the EA program appears to be right on target.

Healthy Women Sought

Healthy postmenopausal women are needed to participate in a study of normal blood. To be eligible, you must have had no abnormal bleeding or clotting in the past. Participants must be willing to stay off any hormone treatment for 9 months and to give a small blood sample; some women will be asked to give additional small samples once a month for 3 months. The study involves no hormones or medications. Compensation ($50) is provided for each blood draw. For more information, call 496-5150.
NINDS's Salas Retires After 34 Years of Government Service

By Shannon E. Garnett

Alfred “Larry” Salas, NINDS assistant executive officer, recently retired after more than 34 years of government service—27 years with NIH.

“NINDS has been a great experience for me. I have made a lot of good friends and worked with a lot of outstanding people,” said Salas. “In my years at NIH and NINDS I have been very impressed with the dedication and hard work of its employees and in particular the physicians and nurses who care for the people afflicted with the diseases and disorders that we study.”

Salas was born in Albuquerque, N.M. After serving 4 years in the U.S. Navy, he received his bachelor's degree in business administration from the University of New Mexico in 1969. He earned his master’s degree in business administration from George Washington University in 1977.

Salas began his NIH career in 1969 as a hospital administrative assistant in the Clinical Center. His principal responsibility was serving as the administrative officer of the day—a 24-hour position that required him and several of his coworkers to work on rotating shifts, providing administrative services and support to special ambulatory care patients.

“We got to know the patients and their families very well,” said Salas. “It was there that I realized what a wonderful place NIH was and what a fine thing the employees did for our country. I was sold on the NIH.”

Two years later he became a personnel management specialist in the Division of Research Services (now ORS) where he worked with veterinarians, librarians, photographers and artists. In 1974, he left DRS and became a personnel management specialist in a personnel office that provided services to the Office of the Director, the Office of Administration and the Fogarty International Center.

“I guess I have as much knowledge about what goes on in all the various types of organizations at NIH as just about anyone and much more than most,” he said.

Salas left NIH in 1977 for a supervisory position at the National Oceanic and Atmospheric Administration. He returned in November 1980 as chief of the NINDS Personnel Management Branch—a position he held for 17 years. In 1988, he spent nearly 9 months with the government affairs committee in the U.S. Senate as an OPM LEGIS fellow. He says that experience gave him “a great appreciation for the complexities of the legislative process.” Salas became the assistant executive officer, NINDS, in 1997.

In 1998, he served as president of the NIH Hispanic Employee Organization and was active in efforts to improve Hispanic representation at NIH. Salas, an avid golfer, also served as president of the NIH Golf League in 1999. Throughout his career, he has received many honors including a Public Health Service Special Recognition Award in 1990 and the NIH Director's Award in 1987.

“NIH is considered the shining star of the federal government and I think NINDS is the brightest spot within that star,” said Salas. In retirement, he plans to move back to New Mexico, which he fondly calls “the land of enchantment.”

NIH Black Scientists Association Establishes Memorial Scholarship

The NIH Black Scientists Association has established the Cheryl Torrence-Campbell Scholarship. The scholarships will be awarded annually to minority students in the Washington, D.C., area who are entering their freshman year at a college or university and who will be pursuing a science-related major. The first two scholarships of $1,000 each will be awarded on Saturday, Nov. 20 at the annual NIHBSA Scholarship Dinner Dance fundraiser at Andrews Air Force Base, 8 p.m. to midnight.

The scholarship was established in honor of Dr. Cheryl Torrence-Campbell, an IRTA fellow from 1993 to 1996 in the research group of Dr. Wayne Bowen, NIDDK Laboratory of Medicinal Chemistry, where she carried out research on sigma receptors. In 1996, she took a position as assistant professor of biology in the department of biology at Morgan State University, one of the nation’s historically Black universities. There she taught biology and physiology and continued her sigma receptor work in her own laboratory as well as in the capacity of special volunteer at NIDDK.

Torrence-Campbell was a dedicated teacher, mentor and role model to minority students. She was involved in increasing the number of minorities, particularly African Americans, entering careers in the biological sciences. She will also be remembered as a servant to the community outside the world of science, particularly for founding a Girl Scout troop at Union Temple Baptist Church in southeast Washington, D.C., along with her close friend, Nancy Blunt. Torrence-Campbell and Blunt were both killed in an automobile accident on Nov. 14, 1998, when trying to avoid a deer on the Baltimore-Washington Parkway. For more information regarding the scholarships or the fundraiser on Nov. 20, contact Thelma Guitter at tg3y@nih.gov. For information on the NIHBSA, visit the Web site at http://www.nih.gov/science/blacksci/index.html.
HRDD Training Tips

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

Administrative Skills Development
Medical Terminology I

Online Training Comes to NIH

OHRM also announces the FASTRAC Web-based training program, which will provide more than 600 online training courses. These free courses cover a wide range of IT and professional effectiveness subjects. The ability to take training online enables anytime, anywhere learning. These courses offer opportunities to pursue education (earn college credit), gain certification (official study guides for Microsoft, Netscape, Novell and Oracle exams) or refresh skills. These courses will be available early next year. For details, visit the Web site above or call Marvin Lee or Sally Murray at 496-6211.

New Communication Course Offered

Learn how to write clear and concise memos, letters and reports that communicate effectively. The Human Resource Development Division offers a program specifically designed to help you develop a structured approach to your writing. The program consists of specialized workshops that are sequential and use a "building block approach." Each class is tailored to your skill level and builds on the skills you developed in the previous class. HRDD can customize any of the writing courses to meet your office objectives, and location and time constraints. For more information, visit the Web site above or call Sally Murray at 496-6211.

Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—held (usually) on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—takes the day off on Nov. 24 for Thanksgiving break, but returns on Dec. 1 when Dr. Shirley M. Tilghman lectures on "The Mechanism and Function of Genomic Imprinting in Mammals." She is Howard A. Prior professor of life sciences, professor of molecular biology, HHMI investigator, director, Institute for Genomic Analysis and chair of the Council on Science and Technology at Princeton University.

For more information or for reasonable accommodation, call Hilda Madine, 594-5595.

CIT Computer Classes

All courses are on the NIH campus and are given without charge. For more information call 594-6248 or consult the training program's home page at http://training.cit.nih.gov.

Cold Fusion - Using Databases to Create Web Pages
Getting Started with Knowledge Management
DWQuery: Procurement & Market Requisitions Mini
Introduction to HTML
PC Viruses
Upgrading and Improving the Performance of Your Mac
DWAnalyse: Budget & Finance
Cost-Benefit Analysis
Advanced Presentations with PowerPoint 2000
Disaster Recovery
Expediting Your Request for Telephone Services at the NIH
DWQuery: HR Workforce Demographics & Personnel Actions Mini
Advanced Oracle PL/SQL for Application Developers

Randy Schools (in photo at right), president of the NIH R&W Association, greets Michael Scott of Empowerment Unlimited, Inc., before Scott's recent presentation, "Enough Is Enough! Practical Tools for Regaining Control of Your Life in Today's Fast Paced World." In the talk—one in the fall seminar series "Faces and Phases of Life" cosponsored by the R&W, the NIH Work and Family Life Center, the NIH Employee Assistance Program and the NIH Federal Credit Union—he discussed his book, Catch Your Balance and Run. He also challenged attendees to release stress during the program, urging them up out of their seats. Three seminars remain in the series, "Where Will My Older Relative Live" on Nov. 17, "Navigating the Course of Your Career: Setting Career Goals" on Nov. 30 and "Survival Tactics for Managing the Holidays" on Dec. 1. Call WFLC at 433-1619 or visit the What's New section of its Web site at http://wflc.od.nih.gov for times and rooms.
Fire Week Activities Involve Youngsters, Adults

Fireman Sam L. Barnett gives a youngster a peek inside the Fire Safety House, which was donated for the occasion by the Patuxent River Naval Air Station's fire department.

Photos: Ernie Branson

NIH fire fighter Rych N. Pullen is hoisted aloft during a demonstration of high-angle rescue.

Children from the Executive Child Development Center visit the residential sprinkler trailer on loan from the University of Maryland's Fire and Rescue Institute.

Sparky the Fire Dog (a.k.a. NIH fire fighter Lori A. Padgett) passes out helium balloons to schoolchildren wearing souvenir fire helmets.

Fireman John M. Bede IV distributes balloons to the kids, assisting Sparky.

The adults got fire helmets, too, courtesy of Paul E. Davis, NIH fire protection inspector.

NIDDK's Ellen C. Vaughn, winner of the 1998 poster slogan contest, is congratulated by (from l) O.W. "Jim" Sweat, director, Division of Public Safety; Richard E. Shaff, chief, Emergency Management Branch; Gary C. Hess, chief, NIH Fire Department; and J.P. McCabe, chief, fire prevention section.

Use or Lose Reminder

Don't forget to schedule your "use or lose" annual leave in writing no later than Saturday, Nov. 20, 1999. Questions concerning use or lose leave should be directed to one's human resource office or other program official designated by your institute or center.