

THE NIH RECORD

Still The Second Best Thing About Payday

Nobel Laureate Günter Blobel Visits NIH

By Dr. Harrison Wein

Dr. Günter Blobel, the 1999 Nobel Laureate in Physiology or Medicine, began his talk in the NIH Director's Wednesday Afternoon Lecture Series on Mar. 1 with a history lesson. By way of explanation, he said that much of the work that led to his Nobel Prize is not on the Internet and may be hard for younger people to trace. "I thought some people in the audience may say, 'Well, what the hell did he get the Nobel Prize for?'"

It is doubtful that many in the packed house were asking that question. Blobel's discoveries opened the door for a flurry of research that biologists and biomedical researchers now make use of every day. The biotechnology industry owes a great debt to him as well, routinely using his discoveries to enable medicines to be manufactured within cells. Blobel and his

SEE **BLOBEL**, PAGE 2

Clinical Trials Web Site Debuts

By Melanie Modlin

When 49-year-old Margaret, a Maryland attorney and mother of two, was diagnosed with thyroid cancer, she was interested in investigating the potential of clinical trials.

But after doing some sleuthing, she couldn't find a central location where information on such studies was available. She finally called a friend who worked at NIH, who made inquiries and found a new study evaluating thyroid cancer treatments. Margaret enrolled in the trial and, 3 years later, remains cancer-free. But without her friend's "inside scoop," she admits she would never have known of the trial's existence.

Now, everyone can get the "inside scoop," as NIH has just launched a consumer-

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U.S. Department of Health and Human Services National Institutes of Health

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'A Place of Respite'

NIH Family Lodge To Be Built Near Lasker Center on Campus

By Carla Garnett

For many years, Clinical Center caregivers have known of at least one thing almost all patients have in common: When a person is seriously ill, his or her family is also seriously affected. When treating the patient, a good caregiver has to think about treating the patient's family too.

What happens when visiting hours are over for the day and the patient's family leaves the hospital? Often the family has traveled many miles to be with the mom, dad, or brother undergoing treatment. Repairing to a local motel quickly loses its appeal when all anyone wants is the normalcy and comfort of home. Developers of the Children's Inn realized this long ago; the inn's success since it was built in 1990 to help pediatric patients regain a sense of home is well documented. What about families of adult patients, though? Shouldn't there be a warm, homey place for them, too? CC director Dr. John Gallin thought so, and so did members of the Foundation for NIH (FNIH), which has under-

SEE **FAMILY LODGE**, PAGE 6

African American History Program Urges Greater Attention to Health Disparities

By Sharon Ricks

Today two healthy babies were born in the most affluent, technologically advanced country on the globe. One is a white female; the other is a black male. They were born in the same city, in the same hospital, and they both have proud, happy parents. But they are different. One will live to see her grandchildren grow up, the other will not.



Dr. Louis Sullivan speaks at African American program.

"Black Americans born today have a life expectancy significantly shorter than that of white Americans," said Dr. Louis W. Sullivan, president of Morehouse School of Medicine, addressing a group of 200 employees at the African American History Program on Feb. 24. "For white females, life expectancy is 79.6 years compared to 74.1 years for black females. That's a

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BLOBEL, CONTINUED FROM PAGE 1

team were able to answer one of the fundamental questions of cell biology: how are proteins in the cell delivered to their final destinations?

Back in 1971, he first proposed the "signal hypothesis" to explain how the cell directs its proteins across the membranes of its various internal compartments (the endoplasmic reticulum, the nucleus, mitochondria, etc.). He explained his hypothesis, "In the protein, there is a discrete sequence, an intrinsic signal built into the protein which directs the protein across these various membranes." Blobel's hypothesis turned out to be correct, and he has now spent almost 30 years studying signaling sequences, along with the mol-

ecules that recognize them and that help the proteins containing them to reach their destinations.

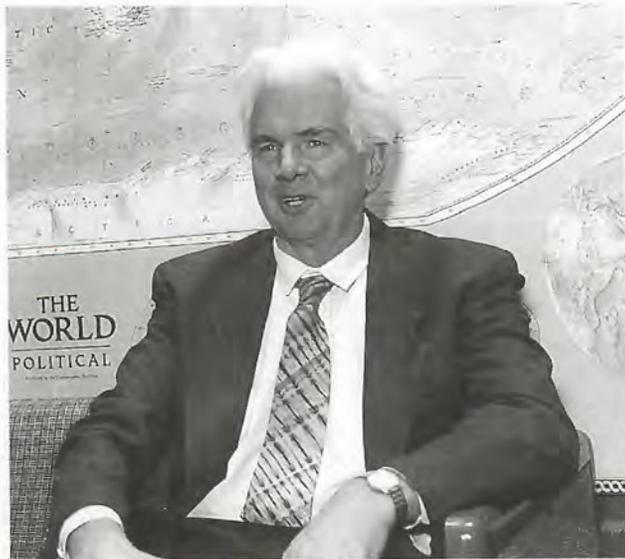
His laboratory began by studying how proteins cross the membrane of the endoplasmic reticulum. The first protein discovered in this process was the signal recognition particle (SRP). The SRP

molecules that assist in nuclear transport and recognize its signal sequences have been identified as well. While many scientists refer to these molecules as "importins" and "exportins" depending on their function, Blobel prefers the more general term "karyopherins," since some of these molecules seem to be involved in both nuclear import and export.

Blobel concluded his talk by describing how he is using his \$960,000 in Nobel Prize money. "I've devoted my Nobel prize to the reconstruction of two monuments in Dresden," he explained. Only 4 days after Blobel's mother had shown him the architectural beauty of Dresden, he watched from afar as Allied forces bombed the city in 1945. He was only 8½ years old, and the sight made a deep impression on him. Now, in addition to his scientific contributions to the world, he is finally helping, he said, to "restore the grandeur of the Dresden skyline." ■

AMP To Honor Kirschstein

NIH acting director Dr. Ruth Kirschstein is one of six individuals who will receive Albert B. Sabin Heroes of Science awards for the year 2000 from Americans for Medical Progress at a ceremony in downtown Washington on Apr. 6. The awardees are being honored for their tremendous contributions in support of biomedical research. The other honorees include a member of NIH's Council of Public Representatives, Dr. David Frohnmayer, president of the University of Oregon, and Rep. John Porter (R-Ill.), a champion of NIH in Congress. Frohnmayer and his wife Lynn are founders of Fanconi Anemia Research Fund, Inc. ■



Nobel laureate Dr. Günter Blobel relaxes in the Clinical Center's special events office prior to his lecture on Mar. 1.

recognizes a unique signal sequence in a protein and then brings it to the surface of the endoplasmic reticulum, where it binds a protein called the signal recognition particle receptor. There the protein then moves through a protein-conducting channel into the endoplasmic reticulum.

"The endoplasmic reticulum work has sort of been the catalyst for all the other organelles," Blobel said. Signal sequences were subsequently found for entering into mitochondria and into peroxisomes. Now, Blobel explained, "there is a whole group of signal sequences that have been discovered which address the proteins to these various membranes."

He is now focusing his efforts on examining how proteins are transported into and out of the nucleus, and he spent much of his talk describing this process. Small proteins can diffuse into and out of the nucleus without a signal sequence, but larger proteins need help getting through what is called the nuclear "pore." Yeast serves as a good model system for these studies and many, if not all, of the proteins that make up the yeast nuclear pore complex have now been identified. A host of

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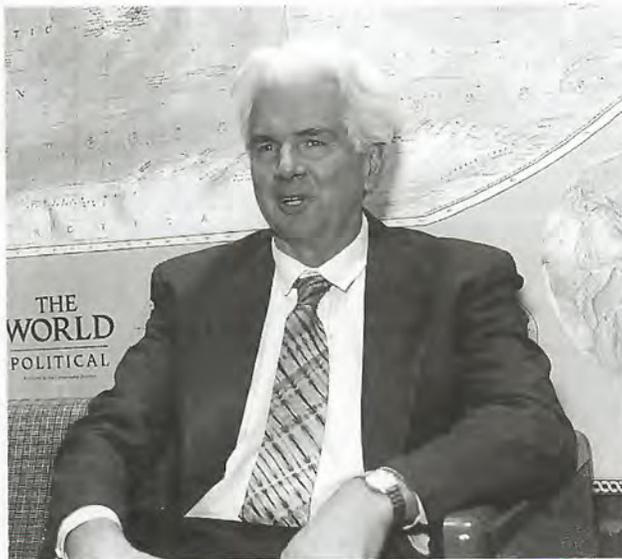
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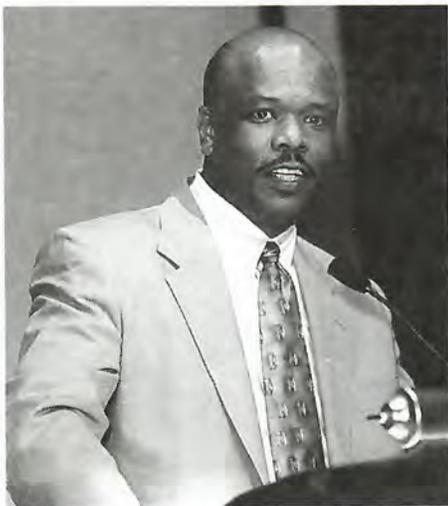
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DISPARITIES, CONTINUED FROM PAGE 1

5-year difference. For white males average life expectancy is 73.8 years; for black males it is 66.4 years, a difference of 7.4 years." Sullivan, former secretary of the U.S. Department of Health and Human Services, said the 13-year gap in life expectancy between white females and black males is



Dr. Alfred Johnson, NCI scientific investigator and director of the Undergraduate Scholarship Program, serves on a panel at NIH's African American History Month program.

astonishing. The program, "Continuing the Journey: Biomedical Research and Education," was presented in memory of Dr. Geraldine Pittman Woods for her lifetime achievements in initiating and developing NIH-supported minority research and training programs. Woods was instrumental in the development of the Minority Access to Research Careers and the Minority Biomedical Research Support programs at NIH. She also helped Dr. Ciriaco Gonzales, one of the former directors of MARC and MBRS, to establish the Society for the Advancement

of Chicanos and Native Americans in Science.

Panelists included Dr. Lafayette Frederick of Howard University, Dr. Alfred Johnson of NCI, Dr. Patrice Desvigne-Nickens of NHLBI and Nia Banks, an M.D.-Ph.D. candidate at Johns Hopkins University School of Medicine.

Speakers spotlighted the need to recruit and retain culturally competent and sensitive biomedical researchers; increase major grant support among minority institutions and investigators; boost minority participation in clinical trials; enhance NIH projects that address minority health issues; and ensure that bench technologies reach the bedsides of the most needy areas.

"In minority populations," said Desvigne-Nickens, who studies the effects of cardiovascular diseases on women and minorities, "where there are so many competing issues and just putting food on the table can be such a problem, health is not given the type of priority that it is given in populations that have more flexibility in terms of their economic choices. You can't help others, and you can't help yourself without good health."

She said patients must educate themselves. Myths, beliefs and cultural expectations all affect how you view yourself and your health, but more important is knowledge of the information that is available, having the thirst for information about a disease, and being demanding of your physician. She also

stressed the need for participation in clinical trials.

Banks offered some issues for doctors to consider. She said there is a "disconnect" between physicians and patients and cited the need for making cultural competence a mandatory part of the curriculum for medical students and physicians-in-training. "Hopkins is the number one hospital in the country, according to *U.S. News and World Report*," said Banks. "Now I'm not sure of the criteria they used, but if they were to use the disease indices of the East Baltimore community, Hopkins would rapidly lose that position. East Baltimore is a majority black neighborhood. It's a low socioeconomic area. It's an inner city, basically. We have the highest rates of syphilis in the country...an outbreak of chlamydia and gonorrhea...an epidemic of tuberculosis and one of the five highest rates of HIV. This is a neighborhood that I work in every day and that has the number one hospital in the country. That's a travesty, and we need to do something about it."

Panelists discussed a role for NIH in addressing disparities in several areas. With regard to NIH training programs, Dr. Alfred Johnson, a participant in the MBRS program, offered some advice: "Let me break it down. It's simple. I am a product of the MBRS. I was an investment by NIH, and from my point of view, NIH is receiving a much larger give-



NIH acting director Dr. Ruth Kirschstein (r) and acting deputy director Dr. Yvonne Maddox (l) welcome Jan Rooks, daughter of the late Dr. Geraldine Pittman Woods. This year's African American history observance was dedicated to Woods.

back than what they put into it to get me, so I think that program works." Johnson said NIH needs to create new programs and initiatives.

Sullivan noted that according to a 1989 article in the *Chronicle of Higher Education*, only 0.4 percent of all NIH grants went to African American investigators. He said during his medical student years in

PHOTOS: ERNIE BRANSON



Gathering for the program are (from l) Kay Johnson Graham of NIDCD, former HHS Secretary Sullivan, Dr. Marian Johnson-Thompson of NIEHS and Maddox.

Boston in the mid-1950's, faculty members who retired from Harvard, Tufts and Boston University often headed west to California and to other states to assist emerging young institutions in the development of their educational and research programs. With faculty additions and sustained grant support



Maddox presents an award to Dr. John Ruffin, NIH associate director for research on minority health, for his superb leadership and resourcefulness in minority research and research training.

health disparity are such that virtually every institute at NIH has a significant contribution to make, and he envisions an NIH-wide effort, not confined to one office or one center.

"With the efforts of Congress to double the NIH budget over a 5-year period, now is the time for NIH to renew attention and commit greater resources to the issue of health disparities," said Sullivan. "It is not only the right thing to do, it is the smart thing to do."

The program was sponsored by 15 institutes and centers. ■

from NIH, those fledgling schools have become major contributors to the nation's biomedical research enterprise. Sullivan said he anticipates a similar valuable return to the nation from sustained support for minority health profession schools and minority investigators.

On the issue of health status, Sullivan noted that the areas of

Custom Web Site Design Offered

The NIH Library is now offering fee-based web development services to the NIH community. This service provides easy access to web-based research tools and resources that have been evaluated and indexed by NIH librarians to meet the research needs of your group. A customized web site might be the one-stop solution for your information needs.

To view a customized web site developed by the NIH Library for the NIAID extramural divisions, go to NIAID Rockledge Library Online at <http://nihlibrary.nih.gov/niaid/niaid.html>. This site serves as a portal to frequently used research tools, including genome databases and online journals, as well as Internet sites with breaking news, listservs and statistical resources that are particularly relevant to the work of NIAID extramural staff.

"It really organizes a lot of resources I use all the time and had scattered around in 'favorites,' etc. It also contains many resources I didn't even know existed," said NIAID's Maureen Power. An NIH librarian trained in web site design and construction worked with the NIAID group to design and program their site. The librarian also maintains it so it will remain relevant, and provides training so it will be used effectively.

If you are interested in learning more about fee-based web development services, contact Susan Whitmore at 496-1157, or by email at susan_whitmore@nih.gov. ■

Dr. Richard A. Anderson recently joined the National Institute of General Medical Sciences as a program director in the Division of Genetics and Developmental Biology, where he will manage research grants in the



areas of DNA recombination and cell growth and differentiation. He will also serve as alternate project officer for the NIGMS Human Genetic Cell Repository. He comes to NIGMS from Wake Forest University School of Medicine, where he worked as an associate professor in the departments of internal medicine and pathology with research affiliations in the departments of biochemistry and surgical sciences. Before joining Wake Forest, he worked at the University of Iowa College of Medicine and Johns Hopkins University. Anderson also was a clinical associate at the National Institute of Diabetes and Digestive and Kidney Diseases.

Long, Short Sleepers Needed

To complete a sleep study, NIMH is looking for male and female volunteers ages 20-35 who routinely sleep 9 hours or more nightly, or who sleep 6 or fewer hours nightly. Volunteers must have no sleep disturbances or insomnia, plus no history of mental illness. Volunteers must be in good general health and not taking any medications or birth control pills. The study requires living on the research unit for 4 consecutive days. Compensation is available. For more information call 496-5831.

FAMILY LODGE, CONTINUED FROM PAGE 1

taken a project to build an NIH Family Lodge on campus.

"Having a chronic illness places an incredible burden on the family as a whole—on marriages, as well as on healthy children of an ill parent," Gallin explained. "The NIH Family Lodge will provide housing for the families and loved ones of Clinical Research Center adult patients. The lodge will also provide transitional housing for patients and their family caregivers after hospital discharge, while they are learning the skills needed to sustain care at home. If space is available, patients who are being treated at the CRC and travel to NIH from long distances, but do not require hospitalization, may use the facility."

The new lodge will replace what had been called the NIH Guest House, before that structure—actually several units in Bldg. 20, the apartment that sat at the corner of Center and West Drives—was razed in October 1997 to make way for CRC construction. Since then, CC logistics officials have arranged for families of adult patients to use off-campus housing—mainly local hotels, motels or short-term apartments. These arrangements work well, but they are far from convenient, inexpensive or homey.

"We need a comfortable place that will provide respite and lodging for families and caregivers of our patients," explained Jan Weymouth, CC space management officer. "Often families come to support their loved ones and must find lodging either in local hotels—at great cost—or by utilizing the current guest house, neither of which is convenient to the CC."

The current "guest house" is located in eight apartments on Battery Lane about 1.5 miles from the hospital, Weymouth said. Although this is a successful program, and the families who use it are

grateful to stay there rather than at hotels, it is not convenient to the CC.

"It cannot accommodate many families," she continued, "and it does not meet their emotional needs like the Family Lodge will do when it provides a comfortable, private environment that will be shared by others who can provide support, if needed."

With an idea of pooling resources with the Children's Inn, Gallin, who sits on the inn's board of directors as a clinical advisor, broached the possibility of adding an adult facility onto the inn. Not wanting to dilute the pediatric focus of the inn's mission, however, board members declined to pursue

"We plan to create a comfortable, convenient and supportive setting that will enhance the research experience for patients and their families and encourage patient participation in research trials."—Dr. Constance Battle

adding on to that facility. Several on the board later came to Gallin to offer their help in getting another inn-like place built on campus, this one for families of adult patients. How could such a project be financed? That was just about the time the newly invigorated FNIH emerged. FNIH provides donors in the private sector the opportunity to collaborate with NIH in projects that bolster the agency's research and training activities. The Family Lodge building effort fit the bill.

"This whole lodge concept promotes what is called in the medical community 'family centered care,'" remarked Dr. Constance Battle, FNIH executive director. "The idea is that in addition to providing the very best physical medical care, we also need to address a patient's emotional, psychological and spiritual needs. They are concerned about their condition and prognosis, they're undergoing uncomfortable and perhaps painful procedures, they're separated from family and they're often lonely. We plan to create a comfortable, convenient and supportive setting that will enhance the research experience for patients and their families and encourage patient participation in research trials."

The lodge is tentatively being planned as a 35-unit facility, erected near the Lasker Center—walking distance to the new hospital—where Convent Dr. meets Center Dr. Each unit will be like a small apartment with a bathroom and kitchenette. Each kitchenette will include a sink and a microwave. There will be common gathering and recreation rooms. In addition, Battle noted, a telecommuting center will be installed so residents can keep in touch back home, and perhaps even maintain their jobs by working remotely via computer.

"My experience with the Children's Inn has taught

Lodge planners don't know yet what the new facility will look like. The illustration below was offered in 1998, when even the idea for a respite for patient families was tentative; at that time, the project was being pitched as "The NIH Guest House."



NIH Guest House, May 26 1998

me over and over that families need privacy, but also need support," remarked Weymouth, who also serves as lodge program manager. "The lodge will provide both housing for families here for long periods and who travel great distances, as well as opportunities for those who live close by but need a rest or a shower or just a place to get away from the hospital for a few hours. When space allows, outpatients will have the opportunity to use it on a daily basis while in treatment, rather than waiting in the halls or public spaces of the CRC. We can do so much more to provide comfort to our patients, their families and caregivers in a place so close to the CRC that it will just take minutes to reach their loved ones. In this way they will always feel connected both to their loved ones and the CRC."

So excited are Gallin and his wife, Dr. Elaine Gallin, at the prospect of a lodge that this year they have donated half of his retirement pay from the Commissioned Corps to the effort.

"With NIH's new clinical treatment programs—particularly solid organ transplants and bone marrow transplants—a greater number of patients with higher acuity illnesses are now staying longer at the Clinical Center than before," Gallin said. "I have seen in my own patients the tremendous benefit of having family members nearby while they participate in the studies here."

Soon, the project will begin seeking architectural design firms and others to develop the physical aspects of the building. The Office of Research Services will handle that portion of the project, Battle said. But like the other stages of lodge planning, people involved already have an idea of what they want in the architect as well as in the final product.

"The site is important for its beauty and its proximity to the hospital," Battle concluded. "We want an architect who can design in the spirit of the lodge—a comfortable, convenient place of respite for regrouping and refortifying during the high stress of being ill." ■

Funding the New Lodge

Families of patients participating in studies at the Clinical Center need a home away from home convenient to NIH's campus. "Because government funding is not available for this purpose," explained Dr. Constance Battle, executive director of the Foundation for the National Institutes of Health, "the foundation is soliciting private support to build this facility."

Project planners estimate that \$9 million is needed—\$7.5 million to build the lodge and \$1.5 million to endow family support programs. The foundation has already raised more than \$3 million for construction, and \$1.5 million in endowment to help sustain the lodge's programs. FNIH board of directors chair Dr. Charles Sanders, retired CEO at Glaxo Inc., enthusiastically embraced the lodge project at its outset and has been instrumental in acquiring leadership gifts, Battle noted. Three major pharmaceutical companies have contributed \$1.5 million each to the project. Another \$4.5 million for construction costs is being solicited through a 2000 campaign plan developed by the foundation.

Other maintenance costs for the lodge would be borne by the institutes and centers that will be treating the patients whose families stay at the

facility. Planners hope that once the \$9 million goal has been reached, the lodge—unlike the Children's Inn—will be self-sustaining without ongoing fundraising.

"The Family Lodge project is the foundation's fundraising priority in 2000," said Battle. "We will seek gifts at every level—from \$1 million plus to general giving levels of \$25, \$50 and \$100. The foundation hopes to receive contributions from anyone interested—corporations, foundations and individuals, including members of the NIH family and the patient community."



Dr. Charles Sanders

To learn more about the NIH Family Lodge or how to contribute to it, contact the Foundation for the NIH, One Cloister Court, Suite 152, Bethesda, MD 20815, 402-5311 or visit online at <http://www.fnih.org>.



NIAMS genetic section chief Dr. Daniel Kastner was the recipient of the metropolitan Washington chapter of the Arthritis Foundation's first Breakthroughs in Arthritis Research Award. The award was presented to Kastner for successfully identifying the genes that are respon-

sible for types of arthritis associated with two inflammatory disorders known as TRAPS (tumor necrosis factor receptor-associated periodic syndrome) and FMF (familial Mediterranean fever). Both genetic disorders carry the risk of developing amyloidosis, a potentially fatal disease that deposits a blood protein in vital organs. Kastner was honored recently at a presentation at the Arena Stage in Washington, D.C.

TRIALS DATABASE, CONTINUED FROM PAGE 1

friendly resource, ClinicalTrials.gov. This vast online database contains information on more than 4,000 federal and private scientific studies involving human subjects at more than 47,000 locations nationwide. You can access the database at <http://clinicaltrials.gov/>.

"Through this new database, NIH offers up-to-date information on promising patient-oriented research on hundreds of diseases and conditions," noted acting NIH director Dr. Ruth Kirschstein.

"Most of the trials in the database are funded by NIH institutes and centers, and result from a long, fruitful partnership between NIH and the American people, who support and participate in our work."

ClinicalTrials.gov provides patients, families and members of the public easy access to information about the location of clinical trials, their design and purpose, criteria for participation and, in many cases, further information about the disease and treatment under study. There are also links to individuals responsible for recruiting participants for each study.

"If we are to continue making the giant strides in diagnosis, treatment, and cure of illness that marked the last century, we must have active participation in clinical trials by well-informed volunteers," said Dr. Donald Lindberg, director of the National Library of Medicine, which developed and administered the new database. "ClinicalTrials.gov will benefit trial participants, researchers, health care professionals and, over time, the general public."

Dr. Monica Skarulis, senior clinical investigator at NIDDK, is the principal investigator for the thyroid cancer trial Margaret took part in. She, too, recognizes the potential of ClinicalTrials.gov.

"After 3 years, only two participants enrolled in our trial, despite recruitment efforts to find more patients aimed primarily at referring physicians," she explained. "The new publicity given to our study and others by ClinicalTrials.gov will help investigators recruit greater numbers of qualified patients."

ClinicalTrials.gov grew out of 1997 legislation requiring the Department of Health and Human Services, through NIH, to establish a registry for both federally and privately funded trials "of experimental treatments for serious or life-threatening diseases and conditions," thereby broadening the public's access to information about clinical trials to a wide range of diseases.

Dr. Alexa McCray, who directs the ClinicalTrials.gov project at NLM, commented, "The project is proceeding in several major phases.

In the first phase, we were interested in collecting information primarily about the studies that are being funded by NIH, or that are being conducted right here on the NIH campus. With the release of ClinicalTrials.gov, the first phase of the project is well under way. In the next phase we will include non-NIH sponsored trials from other federal agencies and private industry."

ClinicalTrials.gov is a completely confidential Web site. No registration or personal identification of any kind is required. People who search the site will not be contacted by the sponsors of clinical trials or by anyone else.

More information about ClinicalTrials.gov, in the form of a "Q&A" document, is available from publicinfo@nlm.nih.gov or by calling 496-6308. It is also linked to a press release about the new database, available on the Web at <http://www.nlm.nih.gov/nn.html/>. 



Dr. Alexa McCray, director of NLM's Lister Hill National Center for Biomedical Communications, also directs the ClinicalTrials.gov project.



Rep. Connie A. Morella (R-Md.), representing the 8th congressional district, which includes Montgomery County, was the guest of the Federal Physicians Association at a meeting at NIH on Mar. 3 attended by numerous NIH physicians. Morella, a past recipient of the FPA Health Care Leadership Award, discussed her current initiatives concerning health and federal employee legislation, including a bill to help NIH and other federal agencies recruit and retain physicians. Her bill, H.R. 207, would include the physicians comparability allowance in base salary for retirement purposes. The FPA is a professional association that has been representing the interests of federal physicians for more than 20 years. Outgoing FPA president is NLM's Dr. Charles Sneiderman (l), who is joined by his successor Dr. Richard Granville of the Armed Forces Institute of Pathology.

Alcohol Screening Day Set

NIAAA is sponsoring the second National Alcohol Screening Day on Thursday, Apr. 6 between the hours of 6:30 and 9 a.m. and noon and 5 p.m. in Bldg. 10, Rm. 1C254 (behind the admissions desk). For information call 496-1992. Free confidential evaluations provided. Open to the public. For more screening locations call toll-free 1-800-405-9200. 

Weinrich Named New NCMRR Director

By Christina Stile

Neurologist Dr. Michael Weinrich recently joined the National Center for Medical Rehabilitation Research as its new director. The NCMRR, part of the National Institute of Child Health and Human Development, emphasizes the rehabilitation and life-long care of people with physical disabilities resulting from injury, disease or disorder. Weinrich is an expert in clinical rehabilitation and a pioneer in computer-assisted rehabilitation.

He is known for making advances in computer-assisted rehabilitation. He developed the computerized visual communication (C-VIC)



Dr. Michael Weinrich

program to treat patients with aphasia, an inability to speak or understand language. This condition is associated with brain damage from stroke or head trauma and affects nearly 80,000 Americans every year. C-VIC allows patients to rebuild their language skills by selecting and arranging pictures and short phrases on a computer. Patients who use C-VIC have shown "impressive improvement" in their communication abilities. "It's important to build on our successes and to further develop rehabilitation technology," said Weinrich. "One of the goals of NCMRR is to maximize peoples' abilities to function in their homes, workplaces and communities."

In addition to C-VIC, Weinrich has studied different ways of simulating brain function. Specifically, he used neural net modeling to identify the brain's response to focal injuries, or injuries limited in area. By modeling the effects of focal injuries, he can explore how the brain responds to small strokes, in contrast to its response to major strokes or more distributed brain injury. Such modeling might help doctors predict how effective different treatments will be.

While he appreciates the advances made possible by technology, Weinrich also knows the importance of research.

"Investigator-initiated research is the bedrock of the NIH research program," he said. "The major role for the NCMRR is to guide this research by focusing attention on issues that need more investigation. The center seeks to fund excellent science to improve the health and well being of individuals with disabilities."

Weinrich also hopes to improve treatment for patients whose conditions require life-long or high-cost care. He has formed successful relationships with many consumer and advocacy groups through his work in this area.

Before coming to NCMRR, Weinrich was a professor of neurology at the University of Maryland Medical School and acting chief of physical medicine and rehabilitation at the Baltimore Veterans Administration Hospital. He also served as medical director of Montebello Rehabilitation Hospital and medical director for rehabilitation at Kernan Hospital, both in Baltimore. ■

Five Join NIAID Advisory Council

Five new members have been appointed to the National Advisory Allergy and Infectious Diseases Council. They are: Dr. William R. Jacobs, Jr., an investigator with the Howard Hughes Medical Institute at Albert Einstein College of Medicine; Dr. Richard A. Koup, a professor in the department of internal medicine at the University of Texas in Dallas; Dr. John C. Martin, president and chief executive officer at Gilead Sciences, Inc., in Foster City, Calif.; Dr. Magdalene Y. H. So, professor and chair of the department of molecular microbiology and immunology at Oregon Health Sciences University in Portland; and Thelma K. Thiel, founder, chairman and chief executive officer of Hepatitis Foundation International in Cedar Grove, N.J.

Jacobs is a professor in the departments of microbiology and immunology and molecular genetics at Albert Einstein College of Medicine where he has made significant contributions by identifying the mechanisms of action of the anti-mycobacterial drugs isoniazid and ethionamide, as well as novel factors of *M. tuberculosis* required for growth and persistence *in vivo*.

Koup is the Jay P. Sanford professor of infectious diseases and chief, division of infectious diseases at the University of Texas Southwestern Medical Center.

Martin was previously employed at Bristol-Myers Squibb and at Syntex Corp., where he was the co-inventor of the antiviral drug ganciclovir.

So has served on the NIH bacteriology and mycology 1 study section and a number of other panels. She is presently serving on the editorial boards of several scientific journals and as vice chair of the committee on conferences of the American Society for Microbiology.

Thiel has served on the National Commission on Digestive Diseases, the National Digestive Diseases Advisory Board, as president and chief operating officer of the American Liver Foundation, and as chair of the Digestive Diseases National Coalition. ■



NIAID director Dr. Anthony Fauci (r) welcomes new advisory council members (from l) Dr. John C. Martin, Dr. Magdalene Y.H. So, Dr. William R. Jacobs, Jr., Thelma K. Thiel and Dr. Richard A. Koup.



Dr. Skip Matthews, head of the chemistry section of the Laboratory of Pharmacology and Chemistry in the Environmental Toxicology Program at NIEHS, has been named Society of Toxicology Congressional Fellow for the year 2000. The fellowship provides experienced researchers the opportunity to focus on scientific issues that are currently being debated in Congress and to contribute scientific and technical expertise to the process of developing public policy. Matthews began his term in January and will be in Washington for 1 year. He is working primarily with the U.S. Department of Agriculture, in the Office of Pest Management Policy. He is also interacting with a number of Congressional offices and committees, other federal agencies and representatives from the private sector.

NIAID's Asofsky, Immunologist and Mentor, Leaves Legacy

Dr. Richard M. Asofsky, a scientist and administrator at the National Institute of Allergy and Infectious Diseases since 1963, died of cancer on Jan. 22 at age 66. He was known to colleagues as "an exceptional scientist, a remarkable human being and a loyal friend."

NIAID director Dr. Anthony Fauci said, "Dr. Asofsky's legacy includes not only his remarkable scientific accomplishments, but the many students, medical fellows and postdocs he has trained and mentored through the years."

Asofsky served NIH and NIAID with distinction and energy for 37 years beginning as a member of what was then called the Laboratory of Germfree Animal Research until his last position as associate director for special emphasis projects in NIAID's Division of Intramural Research.

Dr. Thomas J. Kindt, director of DIR, said, "Dick gave his heart and soul to improve research training programs and recruit underrepresented minorities into the biomedical sciences. Although we will miss his intense personal efforts in that area, he would be glad to know we remain committed to the programs he has initiated."

Asofsky was instrumental to NIAID's Introduction to Biomedical Research Program, which acquaints academically talented minority students from across the country with career opportunities in biomedical research at NIH.

Born in Brooklyn, Asofsky completed his premedical training at Cornell University in 1954 and earned his medical degree from the State University of New York, Downstate Medical Center in Brooklyn in 1958.

He joined the U.S. Public Health Service Commissioned Corps in 1963 as a senior assistant surgeon. After working in NIAID's Laboratory for Germfree Animal Research in 1966, he became head of the lab's experimental pathology section. In 1968, he was named medical officer and head of the experimental pathology section of the Laboratory of Microbial Immunity in NIAID. Later, he served as assistant chief and chief of that laboratory.

In a heartfelt eulogy at Asofsky's memorial service on Jan. 27 at Congregation Beth El in Bethesda, Dr. William E. Paul said Asofsky's important experiments "still reverberate in immunology."

According to Paul, those experiments explored the role of certain immune cells in the body's ability to distinguish its own cells from those of foreign

invaders such as infectious microbes or transplanted organs. For example, Asofsky showed that the group of immune cells known as T lymphocytes, or "T-cells," were actually a mixture of separate populations with distinct functions. Before any of the modern research tools were available, he utilized an ingenious system to demonstrate that two classes of T cells were required to launch a cellular response known as graft-versus-host disease. Those landmark studies, said Paul, laid the foundation for concepts that dominate contemporary immunology.

"Dick was cognizant of how valuable highly characterized cell lines were to the elucidation of basic cellular mechanisms in immunology," said Paul. As a trained pathologist, Asofsky developed several critical laboratory cultures of immune cells that allowed him and others to study the cells' properties and eventually to discover the basis of how the immune system recognizes and handles potentially threatening molecules. Descendants of those cell cultures are still widely used in immunology research today.

Asofsky also made important contributions to understanding how chemicals known as cytokines are produced.

He received the Arthur S. Flemming Award as one of the 10 outstanding young men and women in the federal government in 1971. He was cited for his "brilliant research career and significant contributions to the scientific literature." He also received the Department of Health, Education and Welfare Superior Service Award for his research in 1971.

In his spare time, Asofsky was an ardent fan of classical music and opera.

Survivors include wife Leah, children Rebecca and David, grandchildren Amanda and Elena, mother Pauline and sister Marjorie Zucker.

In his memory, contributions may be sent to Montgomery Hospice Society's Casey House, 6001 Muncaster Mill Rd., Rockville, MD 20855. **R**



Dr. Richard M. Asofsky

NIAID director Dr. Anthony S. Fauci recently received two honors. At the 37th annual meeting of the Infectious Diseases Society of America, he was presented

with the 1999 Bristol Award, "in recognition of a career reflecting major contributions to knowledge about infectious diseases." At Shippensburg University, Fauci received an honorary doctorate and, pictured above, spoke to new Shippensburg graduates on "Privilege and Responsibility in the New Millennium."





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

- The Professional Office Manager II 4/4
- Time Management: Organizing Yourself 4/11

Administrative Skills

- Basic Time and Attendance Using ITAS 4/10

Communication Skills

- Fundamentals of English 4/4
- Plain Language in Government Writing 4/11
- Speed Reading 4/12

Computer Applications and Concepts

- Programming Basics for MS Access 97 4/3
- Introduction to Corel Word Perfect 8.0 4/5
- Intermediate Internet 4/6
- Introduction to the Internet 4/6
- Intermediate MS Excel 97 4/10
- Advanced Visual Basic 5.0 4/11
- Introduction to FileMaker Pro 4.0 4/11
- Intermediate MS Access 97 4/12
- Introduction to Web Page Design - HTML 4/14

Career Transition

- NIH Retirement Seminar 4/17

Financial & Procurement Management

- Professional Service Orders - a.m. & p.m sessions 4/6
- Federal Supply Schedules - a.m. & p.m sessions 4/11
- Consolidated Purchasing Through Contracts - a.m. & p.m sessions 4/12
- Buying from Businesses on the Open Market - a.m. & p.m sessions 4/13

Management, Supervision & Professional Development

- Direct Attention Thinking Tools 4/4
- Interacting with Difficult Employees 4/5
- How to Coach Your Employees 4/10
- Managing Change: A Leadership Challenge 4/17

Healthy Married Men and Women Needed

The Pediatrics and Developmental Neuropsychiatry Branch, NIMH, seeks men ages 56-73 and women ages 51-59, to participate in an fMRI study on the visual processing of faces. Participants must be right-handed and currently married. Volunteers should have no history of psychiatric disorders, and should not be taking prescription medications, with the exception of hormone replacement therapy, thyroid medication, and/or medications for high blood pressure (diuretics or ACE inhibitors). Volunteers must have normal vision or wear contacts. Participation requires a 2-hour screening interview, a followup visit, and a 3-hour visit for fMRI scan. Participants will be paid. For more information, call Lisa Kalik or Neil Santiago at 496-8381. **R**

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>.

- Windows 2000 Professional 3/27
- Getting Started with C 3/27-30
- XML Overview 3/28
- Introduction to TCP/IP 3/28
- Introduction to HTML 3/28
- BRMUG - Macintosh Users Group 3/28
- Hands-On PC Hardware 3/29
- Advanced Presentations with PowerPoint 2000 3/29
- Data Warehouse *Analyze*: Budget & Finance 3/30
- Hands-On PC Hardware 3/30
- Data Warehouse *Query*: Procurement & Market Requisitions 3/31
- MEDx - AIR and Shadow Transform /Image Fusion /Troubleshooting w/Spatial Normalization 3/31
- The NIH Contractor Performance System for New Users 4/3
- Introduction to Image Processing II 4/3-7
- Data Warehouse *Query*: Budget & Finance 4/4
- SAS Programming Fundamentals I 4/4-5
- Java Servlets 4/5
- Oracle SQL Plus 4/6
- Cold Fusion - Using Databases to Create Web Pages 4/7

Dr. George Barnas recently joined the Center for Scientific Review as scientific review administrator of the lung biology and pathology study section in the pathophysiological sciences integrated review group. Previously, he was an SRA in the Division of Extramural Activities, National Institute on Deafness and Other Communication Disorders. Before coming to NIH in 1997, he was an associate professor at the University of Maryland. Barnas has received considerable fellowship and grants support, including grant support from NHLBI and the American Lung Association. He has been a reviewer for numerous peer-reviewed journals, and has published widely.



Natcher Hosts County Women's Fair

The 2000 Montgomery County Women's Fair will be held on Saturday, Mar. 25, from 8 a.m. to 4:30 p.m. at the Natcher Conference Center. The day will include workshops, speakers, exhibits and networking. The keynote speaker will be Diane Rehm, award-winning talk show host on WAMU 88.5 FM. To register or for more information, visit the fair's web site (www.mcwomensfair.org). The fair is cosponsored by NIH's Office of Research on Women's Health and Office of Community Liaison.



Dr. Charles G. Hollingsworth has been selected as director of the Office of Review at the National Center for Research Resources. He will oversee NCCR grant review activities, which focus on the support and development of resources for biomedical technology, clinical research, comparative medicine and research infrastructure. He began his federal career with NIH in 1979 at the National Heart Lung and Blood Institute as both a review and program officer. In 1995, he came to NCCR as a review officer, and in the following year he was promoted to deputy director for review. Aside from his federal work experience, Hollingsworth's career has included research and teaching in both private industry and academia.

Construction Progress Evident as Major Projects March On



The Mark O. Hatfield Clinical Research Center is beginning to take real form as it rises (above). The Louis Stokes Laboratory Bldg. (below), by contrast, seems almost done; it is scheduled for completion sometime this fall.



The CRC site boasts its own concrete batch plant (l) so that the freshest, best-made product is readily available. The plant also reduces the number of truck trips onto campus at a time when multiple major construction projects are in some phase of completion. The CRC is slated to open in late 2002.



A view of the new Dale and Betty Bumpers Vaccine Research Center looking toward the northwest (above) shows that most of the major external features of the building are in place. The fast-track project is due to wrap up sometime in the fall. Below, the VRC as seen looking southwest. Neighboring Bldg. 37 (to the right of the VRC) is under floor-by-floor renovation at the moment, and shares certain architectural features with its new partner. The Bldg. 37 modernization project is supposed to be finished sometime around fall 2004.



Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—features Dr. Wolfgang Baumeister on Mar. 29. He is professor and head, department of structural biology, Max Planck Institute for Biochemistry, Martinsried, Germany. His topic is “The 26S Proteasome: A Molecular Machine Designed for Controlled Proteolysis.”

On Apr. 5, Dr. Lucy Shapiro, Ludwig professor of cancer research, Stanford University School of Medicine, will discuss “Protein Localization and Cell Differentiation During the Cell Cycle.”

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