NHLBI, NLM Help Washington Celebrate World Asthma Day

By Louise Williams

“I never thought I would be able to lead a normal life,” popular rap artist Coolio told the group at D.C.’s Tyler Elementary School. But, he added, he can and so can others with asthma.

His appearance at Tyler was part of an international effort to draw attention to the global burden of asthma and to improve the condition’s care. Altogether, hundreds of diverse events were held across the United States and around the world on May 3, the second annual World Asthma Day. United by the theme, “Let Every Person Breathe,” the undertaking included press conferences, asthma screenings, children’s poster contests, discussion forums, kite festivals and much more. In South Africa, former president Nelson Mandela participated in his country’s observance.

Kapikian To Give Director’s Lecture, June 28

Many parents may not be aware that the rotavirus is the single most important cause of life-threatening diarrhea in infants and young children worldwide. Diarrheal illnesses in general are a major cause of illness and death in developing countries and are a significant cause of illness in developed countries.

In the NIH

Director’s Lecture on June 28, Dr. Albert Z. Kapikian, head of the epidemiology section of NIAID’s Laboratory of Infectious Dis-

Campus’ NW Quadrant Most Affected

Child Care Center Leads New Round of Construction

By Rich McManus

Ground will soon be broken for a new campus Child Care Center, located just east of the Natcher Bldg. near Rockville Pike. This project, scheduled to last about a year, will accommodate 100 children (most hailing from the current day care facility in Bldg. 35). The project leads a fresh round of construction that includes the new North Electrical Substation, a low-rise structure tucked into woods west of the Children’s Inn, which breaks

Inn Marks 10 Years of Healing, Love and Family

By Andrea Walker Gehrke

This year marks the 10th anniversary of the Children’s Inn at NIH. Its anniversary theme, “10 Years of Healing, Love and Family,” represents what the inn has provided to thousands of children and their families over its decade of existence.

In the early 1980’s, families of sick children at the Clinical Center envisioned a place where they could stay after a long day of treatment, free of the seclusion and expense
KAPIKIAN. CONTINUED FROM PAGE 1

eases, will present his talk, “Etiology, Epidemiology and Prevention of Viral Gastroenteritis.” This Wednesday Afternoon Lecture will be held in Masur Auditorium, Bldg. 10 at 3 p.m.

Until 1972, the cause of most cases of diarrheal illness was unknown. Bacteria and parasites could be identified as the cause in only a small proportion of cases. In the 1950’s and 1960’s, the “golden age” of virology, scientists developed a technology that enabled them to detect more than 100 different viruses in tissue culture. However, researchers could not identify the viruses that cause gastrointestinal disease.

Enter Kapikian. In 1957, he joined NIAID as a commissioned officer in the Public Health Service. In 1967, he was appointed to his current position. In the early 1970’s, he adapted a new technique, immune electron microscopy, to visualize and characterize viruses in stool samples. But Kapikian still had to find out which of these viruses was causing which disease. To do this, he used epidemiologic techniques to study blood samples from people recovering from diarrheal disease. Once sick people reach the convalescent stage of an illness, their immune system has produced huge numbers of antibodies engaged in fighting off the virus. Kapikian found that by identifying the specific antibodies in the patients’ blood, he could accurately identify the associated virus. Thus, using a combination of scientific methodologies in 1972, Kapikian discovered, identified and visualized the Norwalk virus, the first human virus to be associated with acute epidemic gastroenteritis. This work ushered in a new era in the study of the cause of viral gastroenteritis. In addition, in 1973, using immune electron microscopy, Kapikian and two colleagues were the first to visualize and identify the virus that causes hepatitis A. One year later, in studies in infants and young children hospitalized with diarrhea, he detected and visualized human rotavirus. This was the first reported detection in the U.S. of human rotavirus, which was discovered in Australia in 1973.

Since that time, prevention of rotavirus infection has been the focus of Kapikian’s work. He has single-mindedly kept his sights on the development of a rotavirus vaccine for more than 25 years. The oral, four-strain vaccine that resulted, and is now being refined, has the potential to prevent innumerable cases of severe diarrheal illnesses throughout the world and the approximately 870,000 deaths annually in infants and young children in developing countries.

Kapikian’s achievements have been heralded with numerous awards, including the 1998 Pasteur Award from the Children’s Vaccine Initiative. Earlier in his career, he received the Public Health Service Meritorious Service Medal (twice) and Distinguished Service Medal; the Queens College Distinguished Alumnus of the Year (1974) award and its honorary D.Sc. (1999); the 1974 Sntt Award of the U.S. Association of Military Surgeons; the 1987 Behring Diagnostica Award of the American Society for Microbiology; and the 1993 Diagnostic Virology (Murex) Award of the Pan American Society for Clinical Virology.

Dr. Ruth Kirschstein, NIH acting director, will introduce Kapikian. All are welcome. For more information call Hilda Madine, 394-5593.

Dr. Paul Plotz, chief of NIAMS’ intramural Arthritis and Rheumatism Branch, recently received a mastership from the American College of Physicians-American Society of Internal Medicine. The mastership is awarded to those who “have achieved recognition in medicine by exhibiting pre-eminence in practice or medical research, holding positions of high honor, or making significant contributions to medical science or the art of medicine.” Plotz’s research has involved autoimmune phenomena, particularly regarding myositis, and he has contributed significantly to discussions on health care reform and medical education.

NIH RECORD

Published biweekly at Bethesda, Md., by the Editorial Operations Branch, Division of Public Information, for the information of employees of the National Institutes of Health, Department of Health and Human Services. The content is reportable without permission. Pictures may be available on request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through Sept. 30, 2000.

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Fly Model of Parkinson's Offers Hope of Simpler, Faster Research

By Michael Vatalaro

The solution to Parkinson's disease may lie in the brain of a fruit fly. Two NIH-funded researchers announced in March that they had created a strain of transgenic fruit flies that exhibit the signs and symptoms of Parkinson's disease. The new fly model of the disease holds the promise of simpler and more rapid research into a disabling disease that affects half a million Americans.

Dr. Mel Feany and Dr. Welcome Bender, who work at Harvard Medical School with support from the National Institute of General Medical Sciences and the National Institute on Aging, developed a strain of flies that produce the human protein alpha-synuclein. Synuclein has been associated with Parkinson's disease and causes damage to nerve cells in mice. When synuclein is expressed in the fly brain, structures appear there that are very similar to Lewy bodies, the dense, fibrillary clumps of protein that are a pathological hallmark of Parkinson's disease.

"[The fly model] turns out to be surprisingly similar to the human disease," said Feany.

The flies also display other symptoms of Parkinson's, including the progressive loss of dopamine neurons and difficulty climbing, which is reminiscent of the loss of motor control in humans with the disease.

Parkinson's disease is a chronic, neurodegenerative disorder marked by tremors in the limbs, a characteristic gait, stiffness and difficulty controlling movements. Parkinson's typically appears in 50 to 60-year-olds, with around 50,000 new cases being diagnosed in the United States each year. Although several drugs help treat the symptoms, there is no cure.

The symptoms of the disease are caused by the death of dopamine nerve cells in a region of the brain known as the substantia nigra. It is estimated that 60 to 80 percent of the dopamine nerve cells in the substantia nigra have already died before symptoms begin to occur. The cause of the nerve cell death is unknown, but synuclein is a leading suspect.

Synuclein has been the subject of Parkinson's research since geneticists studying a group of people with a rare, inherited form of the illness discovered mutations in the synuclein gene. Synuclein is present in healthy brains, but it is also the major component of Lewy bodies. It is unclear whether the Lewy bodies are defensive, a sort of cellular hazardous waste barrel that the body uses to contain synuclein, or if they are part of the disease process and will ultimately be responsible for the death of the neuron.

The distinction is important and previously could not be tested. Now with the news of a fly model and a new mouse model of Parkinson's, both published within weeks of one another, researchers can begin to design experiments to answer that question.

However, the fly model offers distinct advantages over the mouse model. First, the Lewy bodies in the flies' brains contain thin fibrils of aggregated proteins, just like those in humans. The Lewy bodies in mice lack these filaments, which may affect how the Lewy bodies function within the cell.

Second, the dopamine neurons in the fly brain die, as they do in humans, while in the mouse model they are only damaged. Finally, fruit flies are just more convenient to work with. They have a much shorter life span than mice—one on the order of 2 months rather than 2 years—and are less expensive to raise and maintain.

The simplicity of the fly model also gives it the potential to be used in a variety of ways. "The fly model is a more convenient way to screen for drugs than any mammal," said Bender. Feany and Dr. Peter Lansbury, an associate professor of neurology at Harvard whose work in this area is funded by the National Institute of Neurological Disorders and Stroke, are collaborating to begin rapid drug screening using the fly model. The fly model is ideal for testing new pharmaceutical compounds because thousands of flies can be raised and tested in a short time and in a limited amount of space.

In addition to providing an inexpensive way to test new drugs to combat Parkinson's, the fly model can be used by researchers to examine more carefully the formation of Lewy bodies and synuclein's role in that process. Feany also plans to continue to probe into the genetics behind the production of synuclein by studying the flies to look for proteins that enhance or suppress the toxicity of synuclein. Such studies could help determine whether Lewy bodies are benevolent or not.

Feany and Lansbury, a chemist who studies the structures of proteins and how they aggregate, are interested in studying Lewy body formation. There are some indications that the damage to the neurons occurs before or during, rather than after, the formation of the Lewy bodies.

But if fully formed Lewy bodies are indeed harmful, then finding the mechanism by which they form is critical. Once the mechanism is understood, it may provide drug makers with a target for developing new therapies aimed at preventing Parkinson's.

Until then, the fly model will provide some of the best means to continue basic research, concludes Feany. "We know so little about Parkinson's—we know so little about why [the neurons] die. We are excited about the fly system because we hope it will provide many new facets for other researchers to explore."
World Asthma Day was coordinated by the Global Initiative for Asthma, a collaborative effort of the National Heart, Lung, and Blood Institute and the World Health Organization. NHLBI's National Asthma Education and Prevention Program coordinated the day's U.S. events, which included the federal government's release of its new "Action Against Asthma," a report that outlines its plans to decrease asthma prevalence and mortality among Americans.

The global challenge is huge: Worldwide, more than 150 million persons have been diagnosed with asthma. In the U.S., about 14.9 million persons have asthma. The condition has been increasing in prevalence—it rose by a whopping 102 percent between 1979-1980 and 1993-1994. Prevalence is rising fastest among preschool-aged children. In the U.S., about 5 million children have asthma.

The Washington-area event at Tyler was cosponsored by NHLBI, NLM, the Office of the Mayor of the District of Columbia, and the D.C. Asthma Coalition, a partnership that includes civic and government organizations, universities, business leaders and asthma patients and caretakers.

Besides Coolio, presenters included NHLBI director Dr. Claude Lenfant, NLM director Dr. Donald Lindberg, D.C. department of health director Dr. Ivan C. A. Walks, American Lung Association of D.C. President Inez Smith Reid, Howard University College of Medicine dean Dr. Floyd Malveaux, and D.C. public school system Assistant Superintendent for School Support Programs Joyce S. Jamison. U.S. Surgeon General David Satcher made a video appearance.

Eleven of Tyler's students performed a skit that illustrated the need for those with asthma to work with health professionals to manage their condition. And Lenfant presented awards to winners of a student poster contest about asthma.

Lenfant kicked off the D.C. event by giving an overview of asthma's toll, especially for those hit hardest—the inner cities, and low-income and minority groups. He pointed to two maps of metropolitan Washington that showed far fewer asthma deaths among whites than blacks. "Not all people are enjoying the same benefits of control," he said. "We need to be more aggressive in treating asthma. Asthma can be controlled and no one should die from it. We need to work more closely with the health care providers and residents of high-risk communities like Washington, D.C.,” he continued. “They know the local issues and can bring our information directly to the people who need it in ways that will make a difference.”

Lindberg told of NLM's development of a unique interactive asthma exhibit that uses a digital video disk. The disk provides asthma information in an entertaining format to every school and library in the United States.

Singer, composer and film star Coolio gave a personal account of his struggle with asthma. "I had asthma so bad," he told the gathering, "that I feel lucky to be alive." He said that the last 5 years have changed his outlook on the condition.

He then showed the group his inhaler and told how, as a child, he'd been afraid of leaving it behind. He recalled one terrifying night when it took repeated visits to the doctor and the hospital to bring an asthma attack under control.

To help the Tyler students understand what it's like during an attack, he asked them to squeeze a hand into a fist and try to breathe through it.

He also urged parents to take an active role in their children's treatment and then told the children to take their medicine as needed.

He thanked those present for participating in the day's event. "I never thought I would see a World Asthma Day," he said. "When I was young, people didn't know much about asthma," and now those who might not be directly affected by it are trying to make everyone aware.
Dr. Thressa Campbell Stadtman, chief of the section on intermediary metabolism and bioenergetics in NHLBI's Laboratory of Biochemistry, has received the first Lifetime Achievement Award presented by UNESCO-L'Oreal at a special ceremony in Paris earlier this year.

The award is part of a “For Women in Science” Program, which was created in 1998 by UNESCO and L'Oreal. The purpose of the program is to encourage the participation of women in science worldwide. The L'Oreal-Helena Rubinstein Awards highlight the achievements of women scientists.

Stadtman was one of about 100 candidates considered by the award committee, which was composed of 14 distinguished scientists from around the world and chaired by Christian de Duve, 1974 Nobel laureate in physiology or medicine. During its deliberations, the committee determined that Stadtman's scientific achievements were so outstanding that they required a special award. Therefore, UNESCO and L'Oreal presented her with the first L'Oreal Lifetime Achievement Award, which carries a prize of $300,000. Stadtman has donated the prize to the NHLBI Gift Fund.

In presenting the award at UNESCO's Paris headquarters, de Duve said, "Thressa Stadtman represents the kind of intelligence, determination and commitment which have made her a preeminent figure in world science. She is an example for students everywhere and a role model for all women scientists."

Her career is highlighted on a special Web page created by L'Oreal. The address is www.forwomeninscience.com/awards/stadtman.asp.

Stadtman has made many major contributions to biomedical research on topics ranging from vitamin B12 metabolism to selenium biochemistry. Now in her 50th year of work at NIH, she said, "I hope never to have to retire. It would be giving up something that I've always found exciting."

She was born on Feb. 12, 1920, in Sterling, N.Y. She earned a B.S. in bacteriology at Cornell University in 1940 and an M.S. in 1942. From there, she went to the University of California in Berkeley, where she met and married Earl Stadtman in 1943. They both completed their Ph.D.s at Berkeley in 1949 and went on to Harvard Medical School for postdoctoral studies.

At Harvard, Thressa Stadtman worked in the laboratory of Christian B. Anfinsen. In 1950, when Anfinsen moved to NIH, he invited both Stadtman to join his laboratory in the then-National Heart Institute.


Initially, Stadtman studied the mechanisms of amino acid fermentation and methane production from carbon dioxide. Her work added significantly to the understanding of anaerobic electron transport and vitamin B12 metabolism—in fact, she and her coworkers discovered four of the 12 known vitamin B12-dependent enzyme systems.

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Stadtman's studies of selenium biochemistry include the first demonstration that selenium occurs in a selenocysteine residue in protein and plays an essential role in the catalytic activity of many selenoenzymes. She and her coworkers have discovered and characterized many of the known selenoenzymes. In addition, they discovered that 5-methylaminomethyl-2-selenouridine is a modified nucleoside in seleno-tRNA and that selenophosphate is the selenium donor for biosynthesis of these tRNAs and also for most of the known selenoenzymes. More recently, she and her colleagues have contributed significantly to the definition of the biochemical mechanisms by which selenium is inserted into nucleic acids and proteins.

Stadtman is the author of more than 180 publications. Among her many honors are the 1987 William C. Rose Award from the American Society of Biological Chemists and election in 1981 to the American Academy of Sciences and in 1982 to the American Academy of Arts and Sciences. She has even had an organism named after her—Methanothermae stadtmaniae. She and her husband, both azalea and rhododendron lovers, also were honored by colleagues who arranged to have a newly developed deciduous azalea named after them—it's called Stadtman's azalea.
of a motel room. Persistent in making such a place reality, they joined with others who shared their vision—caregivers, community members and Dr. Philip Pizzo, former chief of the Pediatric Oncology Branch at the National Cancer Institute and current chairman of medicine at Boston Children's Hospital.

Their effort paid off. In 1987, NIH set aside 2 acres of land within walking distance of the Clinical Center for a Children's Inn. Shortly thereafter, Merck & Co., Inc. donated $3.7 million to build it.

Volunteers and congressional spouses formed the Friends of The Children's Inn and raised $2 million to furnish the facility.

The inn opened its doors in June 1990 in a ceremony attended by President George Bush, and has since provided a place like home for 4,000 sick children, the majority of whom have been cancer patients, and their families. Whitney Wyland, a 13-year-old bone cancer patient, has been coming to NIH for treatment during the past 18 months, staying at the inn up to 6 weeks at a time. He and his family rely on the inn when they travel to NIH for Whitney's treatments. “Without the Children's Inn for us to stay in, it would be very difficult to face our trips to NIH,” said Bryan Wyland, Whitney's father. “It is far better than having to face the isolation of a motel, especially when we stay here for weeks at a time.”

Supporting the concept of family-centered care, the Children’s Inn allows parents, grandparents, siblings and other extended family members to stay with the child, both to aid in the care and lift the spirits of the child.

“The comfort a family can bring a sick child can make all the difference in the child’s treatment process,” said Jan Bresch Mayes, director of development and public relations at the Children's Inn. In addition, the inn has freed up time for researchers. “Researchers no longer use their time looking for places for children to stay. Rather, they focus all of their time and energy on researching to advance the cure of the disease at hand,” said Mayes.

The inn provides families one of 37 private living quarters, complete with two double beds and a private bath. There are also a number of common rooms shared by families, including two communal kitchens and dining rooms where families prepare meals and socialize. “Sometimes you just want to get away from everything. Other times you need the mutual support other families can give you,” said Wyland. “The inn provides the children and parents with an opportunity to form friendships unrestricted by language, race, nationality or economic status,” said Mayes.

Besides the support and hope provided by the people at the inn, the setting is warm and inviting—surrounded by woodlands and beautiful gardens on the outside and drenched with sunlight from the skylights and numerous windows on the inside. “The first thing you see when you enter the inn is the open entrance with the large fireplace and overstuffed animals welcoming you,” Wyland said. “It makes the children feel comfortable.”

“The home-like environment, friendly atmosphere and self-help policy are the keystones supporting the philosophy at the inn,” said Gil Brown, inn executive director. “We do not have plaques reminding us of the children who have not conquered their illness; rather the inn is decorated with comforting colors and natural sunlight, enhancing the warmth of the inn,” said Mayes. “Additionally, doctors and social workers don’t practice here. The inn is a safe haven for families.”

When the children come home from a long, hard day of doctors, IV-drips and medical procedures, they are looking to have some fun. The inn provides them this chance. Younger children can play in the large playroom filled with toys and things to do while older children and adults hang out in the game room, shooting pool. There are also a number of activities that go on throughout the week, including bingo, arts and crafts, as well as visits from local groups that keep the children entertained.

Families have many opportunities to keep themselves occupied at the inn. The library and computer room offer children a quiet place to do homework or chat with their friends online. There are TV rooms to relax in as well as the 2 1/2-story fireplace in the midst of the living room where families enjoy each other's company or some quiet time alone. “Being away from home can be hard, but the inn makes it a lot easier,” says Wyland.

Unlike hundreds of other hospital hospitality houses throughout the country, the Children's Inn does not charge families a fee to stay. Families purchase and cook their own meals and clean up after themselves. “We want families to be able to maintain some sense of normalcy,” said Brown.

Operating as a nonprofit corporation, the inn works within a public-private partnership. NIH provides 18 percent of its annual $1.2 million operating budget; individuals, businesses, foundations and community organizations supply the rest. More than 35,000 people have contributed to the
inn. "We are building an endowment to be self-sustaining someday," said Brown.

There is more to the generosity of the community than simply writing checks—community members contribute thousands of hours each year volunteering at the inn. The volunteer list exceeds 300. Complementing the 8-member paid staff, the volunteers are involved in everything from greeting guests at the front desk to shuttling families to the grocery store.

Presently, NIH has plans to build a Family Lodge for adult patients and their families. "We would like to see many other communities adopt a similar concept," said Brown. The Children's Inn has been a model for other new hospitality houses such as the one at St. Jude's Hospital in Memphis. Supporters of the inn have many aspirations for the future. "We are currently conducting a feasibility study on the possibility of expanding the facility to house additional children and their families," said Brown. Thus far, the inn has had only minor structural improvements. Two years ago, there was an upgrade of handicap accessibility. Plans are currently under way to switch the game room and library, and to improve the children's playroom.

If you would like to learn more about the Children's Inn, visit its web site at http://www.childrensinn.org or call 496-5672.

NAS Elects Two NIH Scientists

The National Academy of Sciences recently announced the election of 60 new members, including two NIH employees, in recognition of their distinguished and continuing achievements in original research. Election is considered one of the highest honors that can be accorded a U.S. scientist or engineer. Those elected this year bring the total number of active members to 1,843.

Newly elected members from NIH are Dr. Leslie G. Ungerleider, chief, Laboratory of Brain and Cognition, National Institute of Mental Health, and Dr. Reed B. Wickner, chief, Laboratory of Biochemistry and Genetics, National Institute of Diabetes and Digestive and Kidney Diseases.

The National Academy of Sciences is a private organization of scientists and engineers dedicated to the furtherance of science and its use for the general welfare. It was established in 1863 by a congressional act of incorporation, signed by Abraham Lincoln, that calls on the academy to act as an official adviser to the federal government, upon request, in any matter of science or technology.

Two NIH'ers Win Flemming Awards

Of the dozen honorees in the 51st annual Arthur S. Flemming Awards, which honor outstanding federal employees with less than 15 years of service, two hail from NIH: Dr. Maria C. Freire, director of the Office of Technology Transfer, and Dr. Griffin P. Rodgers, chief, molecular hematology section, NIDDK.

The award winners were honored at a reception and black tie dinner at the Cosmos Club on June 8. More than 400 individuals—including a good number of NIH'ers—have won the award, established by the Downtown Jaycees in 1948. For the past two years, the award has been presented by George Washington University.

Free Skin Cancer Screening for Employees

Did you know that skin cancer affects more than 1 million people every year, including men and women of all ages and skin colors? The National Cancer Institute and the National Institute of Arthritis and Musculoskeletal and Skin Diseases are offering free skin cancer screenings to all NIH employees. People of color are encouraged to participate. The screenings are part of a research study to test photography as a way to diagnose skin disease.

The 15-minute screening will take place on Thursday, June 22, Friday, June 23, and Monday, June 26 at the Clinical Center. During the screening, staff will ask to take pictures of your arms, legs and back. It will not be possible to identify you in any photograph. Photographs and all other study-related information will remain confidential. To make an appointment, call the Clinical Studies Support Center at 1-888-NCI-1937.
The biggest relief from the parking crunch has come from a contract NIH has had with Colonial Parking since 1997, which established several managed lots on campus where attendants “stack” cars by using aisle space for parking.

“What started out as a real culture shock at NIH has become very acceptable,” reports Serras Fiotes. “Because of stacked parking, capacity has been the best we’ve seen since 1993, yielding almost 1,000 new spaces.”

The six parking facilities on campus currently managed by Colonial represent about 5,000 spaces. NIH initially thought that conversion of visitor lots to paid parking would pay for the Colonial contract. “But the visitor parking demand dwindled,” said Serras Fiotes. The 1,000 spaces originally dedicated to visitor parking have since been scaled back to about 600. Revenue from those spots covers 30 percent of the Colonial contract. NIH has paid the difference, explained Serras Fiotes, because “management has come to see this system as a benefit. It has provided a solution to our lack of spaces, it has made our workforce more mobile—people can leave and come back during the day without fear of getting shut out—and employees can arrive later and still have a shot at a space. Also, there are side benefits such as security; with attendants at the lots, people feel more secure. And the attendants are good about jump-starting cars, fixing flats and helping people find their cars.”

To address immediate parking losses due to construction of the East Child Care Center and the new Fire Station, stacking will be introduced at MLP-7 (the multi-level garage adjacent to the Lister Hill Center), the Natcher garage and possibly lot 41, said Serras Fiotes. “That would put 80 percent of our parking capacity under stacked parking.” In general, stacking yields about 20 percent more parking, she observed.

At the moment, parking lot 41 has, on any given day (surveys are conducted weekly) some 200-250 vacant spaces. This isn’t much of a margin given the total number of spots, cautions Serras Fiotes.

She noted that restoration of Bldg. 10’s ACRF garage recently returned about 1,200 spaces to the mix. But in another year or so, lot 31C near Cedar Lane and its 300 spaces will be permanently removed in favor of a stormwater management pond required by the new Clinical Research Center project.

So NIH parking comes and goes—the best way to stay abreast is to watch signs, read the Record and visit the ORS parking web site at [http://www.nih.gov/od/ors/parking/parking.htm](http://www.nih.gov/od/ors/parking/parking.htm).
of campus. Construction is expected to take a little less than a year.

• A new electrical substation will go on a wooded site west of the Children's Inn, starting very soon. “It will be low-rise, and fairly well tucked away,” noted Serras Fiotes. “Its scale is similar to Bldg. 46, the west substation.” The north substation will support increased electrical loads from the CRC and other new campus buildings.

• The new Fire Station should start in Fall 2000. It will permanently remove about 160 spaces from parking lot 10K. The 21,300-square-foot facility will take about 18 months to build and will replace an antiquated fire station currently housed behind Bldg. 12. Its new site along Center Drive, near the county fire house, will give firefighters quicker access to campus facilities than the current fire station allows. According to plans by DES' Design, Construction and Alteration Branch, the Fire Station will have six apparatus bays, training facilities and quarters for up to 24 firefighters.

• The new NIH Family Lodge, a sort of adult Children's Inn (see story in Mar. 21, 2000 issue), will soon enter the design phase, and is intended to open “as close to the finish of the CRC as possible,” said Serras Fiotes. “Construction won't start for at least a year, but I understand that fund-raising for the project is progressing nicely.” The lodge will sit along Center Drive, near Bldg. 60 (the Cloister). Some 100 parking spaces will be lost once construction starts (see sidebar).

Looking ahead, the master plan amendment for the NW Quad proposes a Northwest Parking Structure, a 6½-level garage with space for 850 cars. Taking up space currently occupied by parking lots 10D and 10C, it would result in a net gain of 650 spaces for the northwest quadrant of campus affected by most of the projects mentioned above. Also part of the vision for the NW Quad, after the CRC opens, is a North Child Care Center (the master plan anticipates four on-campus centers, located on the four points of the compass), which would accommodate 100 youngsters including the infant center currently in Trailer TR-46. Like the East center, it would take about a year to build. It would be located on a site now crowded with CRC construction trailers.

The campus master planning process itself is in the midst of a year-long review that began in April, Serras Fiotes said. “We've embarked on a Y2K update for the entire campus.” Planners will conduct interviews at all levels of the organization in a process that will review the 1995 master plan in light of the realities of the past 5 years and will speak to the space and infrastructure needs of the future. The effort is expected to wrap up next spring.

Beyond that, in the time window of 2002-2010, Serras Fiotes shed light on some major projects now on the drafting table. A National Neuroscience Research Center (NNRC) is planned for the west side of the campus. The NNRC will be designed as an integrated complex linked by a shared public space and will be constructed in phases. The initial phase of construction will be approximately 200,000 square feet of research space located on the site of the existing Bldg. 35.

Another major project will be the 4 to 5-story Central Vivarium, or animal holding facility, encompassing some 300,000 square feet on a site that is currently a mulch pit for the grounds maintenance and landscaping section just south of the Bldg. 14/28 complex.

Eventually, this outdated, low-rise animal building complex will be razed to make room for the proposed South Quad. Three new lab buildings of roughly the same size as Bldg. 50 would be located in this area, along with a service building.

In the nearer term, Bldg. 3, now a veteran lab facility, will be renovated like its carbon copy—Bldg. 2—and be reserved for administrative offices like the recently reopened 2. The scientists from Bldg. 3 will fill Bldg. 50 once that project wraps up late this year and early in 2001.
NIH opened its campus to dozens of future scientists, physicians, science administrators and research support staff on Apr. 27, Take Your Child to Work Day 2000. The event was an opportunity to introduce school children ages 8 to 15 to the world of biomedical research and to the wide array of skills and services needed to support it. The day offered hands-on labs, workshops and demonstrations.

"A day at work will help your child discover the link between what they do in school and success in the real world," according to event organizers. "We hope that this event will inspire your child, open their eyes to new possibilities, and encourage future careers in science."

Activities included "Tour of the Brain"; display of mouse/rat housing and food; "How do you make teeth and bones?"; an oral bacteria collection demonstration; face painting; "A Brainy Adventure," hands-on interactive events illustrating how nerve cells and the brain work; "What blood type are you?"; "Kids TV—See yourself on television"; and "Introduction to Transplant Organs." Artwork of some of the day's activities, produced by the young people, will be posted on the web site at http://www.cc.nih.gov/ccc/work/2000.html.
Workshop To Take PULSE of CPR Research

For more than one-quarter million Americans each year, rapid administration of cardiopulmonary resuscitation (CPR) is critical to surviving sudden death. What does the latest research tell us about what happens during these episodes? What are the best life-saving practices, and how can research help us improve these efforts?

Taking a multidisciplinary approach to explore these issues, the National Heart, Lung, and Blood Institute is coordinating the PULSE (Post-Resuscitation and Initial Utility in Life Saving Efforts) Workshop, June 29 and 30 at the Lansdowne Conference Center in Leesburg, Va. Applied and basic scientists, including clinicians and bioengineers, are invited to attend.

"The mechanisms involved in sudden death are quite complex and varied," said Dr. George Sopko of NHLBI's Division of Heart and Vascular Diseases. "This is an opportunity for researchers and clinicians from a variety of scientific disciplines to share their knowledge and ideas for future research."

Participants will discuss CPR-related research across the spectrum of adult, pediatric and trauma issues through discussion groups on: acute myocardial rescue; neurologic preservation; pharmacology and molecular mechanisms; pulmonary and ventilatory failure; mechanics of CPR; bioengineering; and epidemiology.

For more information or to register for the workshop, visit http://www.nhlbi.nih.gov/meetings/pulse/index.htm. Or contact Carole Webb at webbca@nhlbi.nih.gov or 435-0515.

IntraMall Team Wins Hammer Award

NIH's IntraMall team was recently awarded Vice President Gore's Hammer Award for its innovative, full-service system that harnesses the power of Internet technology to streamline federal procurement. This pioneering e-commerce program provides product information, online ordering, and sophisticated accounting and budget functions, all customized for the federal procurement community.

Hammer Awards are presented to teams of federal employees who develop innovative programs to make government work better and achieve results important to the American public. The recipients are given a $6 hammer, which is symbolic of the $400 hammer that inspired Gore to create this award in 1994. With the IntraMall, NIH has been able to satisfy researchers' equipment and supply needs while saving time and money with each purchase.

"We are delighted that the IntraMall not only has been a success within the NIH, but that it also impresses Vice President Gore as a program worthy of recognition," said Mary Ann Guerra, deputy director for management of the National Cancer Institute and leader of the project.

The IntraMall was tested in January 1998 at NCI before it was adopted throughout NIH in June 1998. Now, all 18 institutes and six centers that comprise NIH have access to this growing e-commerce site. Growth of vendors and products has also been considerable, with projections of more than 1 million products available during the summer of 2000.

By using the IntraMall system in conjunction with the government credit card, NIH has decreased its processing cost per order from an average of about $50 per order to $5. Considering that NIH spends more than $1 billion each year for laboratory supplies and equipment, savings on this scale are substantial.

In addition to Guerra, members of the original IntraMall development team include: Karen Ortner, Jed Rifkin, Janice Romanoff, and Jeffrey Weiner, NCI; Alan Graeff and Don Preuss, then of the Clinical Center; Laura McNay and Alex Rosenthal, NIAID; Patrick Sullivan, NIDDK; Dennis George and Danielle Kaczensky, CIT; Gary Kelley and Donald Kemp, OPM; and Richard Nelson, OD.

NIH has joined with BioSpace.com to continue expanding the IntraMall program, making it a model for digital e-commerce.
Police Awareness Day Draws Crowd

The NIH Police were joined by colleagues from several local departments, as well as their coworkers from the NIH Fire Department, at the annual observance of NIH Police Awareness Day on May 16. The event, held during National Police Week (May 12-18) on the lawn in front of Bldg. 1, drew some 1,000 employees who enjoyed a picnic lunch and demonstrations of such police and public safety resources as an electronic robot, bomb-sniffing dogs, fire engines and a hazardous material truck.

The officers and firefighters served more than 400 meals at the 3-hour picnic, which resulted in earnings of more than $870, all of which was contributed to NIH charities. Also on hand were other components of NIH's Division of Public Safety, including the Emergency Management Branch, the Crime Prevention Branch, the Employee Transportation Services Office and the Ridefinders Program.

National Police Week is dedicated to law enforcement officers killed in the line of duty. On May 13, NIH Police representatives participated in ceremonies honoring fallen officers at the National Police Memorial in Washington, D.C.

PHOTOS: RICH MCMANUS

Fire Inspector Dan Walther (l) of the NIH Fire Department gives out information on chimney maintenance.

New Deputy Police Chief Robert Fulcher (r) grills up some hamburgers for the crowd.

Helping out behind the Employee Transportation Services Office desk are Marie Shupe (c) and Nicole Huntington (r).

On the clown line were (behind table, from l) Cpl. William Calp, Ivelisse Rodriguez and Cpl. Fred Boyle.

Crime Prevention Specialists (behind table, from l) Billy Vaughn, Harold Dawkins and Preston Jackson.
CIVIL Helps Manage Threat Of Workplace Violence

NIH is committed to providing a work environment free from violence, threats of violence, harassment, intimidation and other disruptive behavior. NIH is fortunate to have had relatively few reported violence problems. However, no workplace is immune.

The NIH director recently established CIVIL, a resource to help the NIH community prevent and respond to workplace threats and violence. CIVIL is a group of experts that addresses workplace violence through policy development, identification of educational tools, and assessment and resolution of violent, or potentially violent, incidents. A major component of CIVIL is the response team, which advises ICs regarding intimidating, harassing, disruptive or dangerous workplace behavior; investigates threats; intervenes in crisis situations; identifies resources to provide employee counseling in the aftermath of violence; and provides a coordinated response from staff including the NIH ombudsman, Employee Assistance Program consultants, employee relations specialists and the NIH Police.

When there is immediate danger, always call the police first (dial 911 if on campus, 9-911, if off-campus). Call CIVIL when: you need help assessing the potential seriousness of a threatening situation; you are experiencing a threatening situation at work and need intervention from trained staff; you become aware of a workplace situation involving intimidating, harassing, or other unproductive/disruptive behaviors and need consultation; you need help in addressing your own aggressive reactions to a workplace situation; or a situation involving threats or aggressive acts already has occurred and you need assistance managing the aftermath.

Call C-I-V-I-L (2-4845) if on-campus, and 9-301-402-4845 if off-campus. For more information, visit the CIVIL web site at http://civil.nih.gov.

Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—features Dr. Alan R. Fersht on June 21, discussing, “Stability and Activity of the Tumor Suppressor p53.” He is director, Cambridge Centre for Protein Engineering, and Herschel Smith professor of organic chemistry, Cambridge University.

On June 28, Dr. Albert Z. Kapikian, head of the epidemiology section in NIAID's Laboratory of Infectious Diseases, will give an NIH Director's Lecture on “Etiology, Epidemiology and Prevention of Viral Gastroenteritis” (see story on p. 1). This talk concludes the WAL series until next September.

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

NIDDK Deputy Director L. Earl Laurence congratulates Mary Thomas (c), former governor of the Gila River Indian Community, and Dr. Antonia C. Novello, New York State commissioner of health. Thomas accepted an award from NIDDK and NIH’s Office of Research on Minority Health recognizing the contribution of the Pima tribe to diabetes research. Novello was honored for her work as former assistant secretary of health and Surgeon General of the U.S. The awards were given at ORMH’s Washington, D.C., conference on challenges in health disparities in the new century. More than 50 percent of adult Pima Indians have diabetes, the highest rate in the world. They have responded to this health burden by cooperating with NIH in research studies since 1965.

This collaboration has defined diabetes and its risk factors such as obesity and hyperinsulinemia, and has shown that genetic, prenatal and environmental influences play a part in this epidemic. The research has also established that high blood pressure predicts the complications of diabetes and that end-stage renal disease endangers people with type 2 diabetes just as it does those with type 1.

Session on Yoga Meditation Offered

The founder of Sahaja Yoga—Shri Mataji Nirmala Devi, a 77-year-old female native of India—will speak on “Meditation and Health” on Monday, June 19 in Masur Auditorium, Bldg. 10 from 7 to 8:30 p.m. All are welcome to attend this free lecture, sponsored by the recreation therapy section of the rehabilitation medicine department.

Sahaja Yoga meditation focuses on raising kundalini (energy) to enhance health and is being practiced at the Clinical Center for staff at 6:30 p.m. on Fridays in the medical board room. Patients at the CC can receive instruction in this simple technique on Wednesday evenings. All Sahaja Yoga instruction and practice is free.

Female Paid Volunteers Needed

Are you female, 18 to 35 years old? In good health? You may qualify to participate in a study of commonly prescribed medications. The study involves multiple visits over a 3-month period. Earn up to $880 and get free medical tests. Call the Uniformed Services University at (301) 319-8204.
Workshop Held on Early Childhood Neurobehavioral Assessment

The interagency coordinating committee on Fetal Alcohol Syndrome recently sponsored a workshop that brought together experts from several areas of birth defects research and neurodevelopmental disorder exchange information about state-of-the-art research and assessment tools. The purpose was to work toward a better understanding and diagnosis of a condition known as alcohol-related neurodevelopmental disorder (ARND). This disorder, which results from significant prenatal alcohol exposure, is difficult to diagnose because affected children lack the characteristic facial traits and growth deficiency of fetal alcohol syndrome (FAS), but still have alcohol-induced mental impairments. These impairments include problems with learning, memory, attention, and higher order and integrative thinking processes as executive functions.

Because there is not yet a precise definition of ARND, this label tends to be applied to any developmental problem when there is reasonable evidence that the child was exposed to alcohol in utero. "This diagnostic category would be more meaningful clinically if it could be limited to a specific pattern of neurobehavioral deficit," said Dr. Faye Calhoun, NIAAA's associate director for collaborative research. Exposure during development to a number of agents besides alcohol can also cause neurobehavioral problems. Called behavioral teratogens, these agents include lead, methylmercury, and polychlorinated biphenyls. In addition, neurobehavioral deficits may arise from conditions such as iron deficiency, from genetic factors as in William's syndrome, or from disorders for which the exact cause is not known such as attention deficit hyperactivity disorder and autism.

Because they lack a specific identifier or biological marker, these disorders are currently diagnosed by signs or symptoms measured over time, with affected individuals scoring above a designated threshold. However, "in principle, each disorder might be expected to operate through a somewhat different neuronal pathway and present with somewhat different pattern of neurobehavioral deficit," said Dr. Kenneth R. Warren, director of NIAAA's Office of Scientific Affairs. "Until this workshop, there has been little systematic effort to determine the distinctive patterns of deficits among these disorders."

The workshop, entitled "Early Childhood Neurobehavioral Assessment for the Differential Diagnosis of Fetal Alcohol Syndrome and Alcohol-Related Neurodevelopmental Disorder," was sponsored by an interagency committee consisting of staff from NIAAA, NICHD, NIEHS and NINDS and coordinated by Dr. Megan Adamson of NIAAA's Office of Collaborative Research. Among the topics discussed were the effects of prenatal exposure to alcohol, lead, cocaine, polychlorinated biphenyls and methylmercury on neurodevelopment; recent studies on conditions including iron deficiency in infancy, ADHD and autism; and assessment tools and techniques including event-related potentials, eye-blink conditioning, imaging and behavioral and cognitive approaches. In addition, the mother of two adopted children with FAS spoke of her experiences and other parents have had in raising FAS children and of the difficulties in obtaining information, advice and treatment for these children.

During the final sessions, participants began work on the product that will emerge from the workshop—a set of profiles for the differential diagnosis of ARND and the other neurobehavioral disorders. Proceedings of this workshop will be available in the fall; for more information, contact Adamson at 443-4354.

Hoping to attract the "best and brightest" from a diverse cross-section of engineering disciplines and to recruit qualified technical talent to the federal sector, a group of CIT staff members attended the 26th annual National Society of Black Engineers (NSBE) meeting in Charlotte, N.C., recently. The theme, "NSBE 2000: Reflect, Rejuvenate, and Rise," set the tone for the career fair and convention. Representing CIT were (from l) Gloria Richardson, manager, Office of Diversity and Employee Concerns; Yvonne Brooks, head, switch services section; and Paul Hill, chief, Operations Branch. CIT was one of more than 325 participants, including private companies, government agencies, nonprofit organizations and universities supporting the NSBE convention and career fair.

NIMH, Rapoport Cited in Survey

NIMH scientist Dr. Judith Rapoport ranks sixth among her peers worldwide in publishing high-impact papers in her field, according to a story in the May 12 issue of Science. The Institute for Scientific Information in Philadelphia recently compiled a list of 1,800 highly cited papers from 16 psychiatry journals between 1990 and mid-1999. Leading the list was Ronald Kessler of Harvard University, with 31 high-impact papers; Rapoport had 23. According to Science, "Harvard and the National Institute of Mental Health churned out the greatest number of high-impact papers."
By Sue Kendall

Dr. John L. Doppman retired recently after 36 years of service to the Clinical Center’s diagnostic radiology department, including 26 as its head. Colleagues describe him as a world-class angiographer, a dedicated teacher, a generous friend and all-around good guy. He is a self-described workaholic who has authored or coauthored 516 scientific papers and 38 book chapters or books.

An interventional radiologist, Doppman developed, refined and performed numerous semi-surgical radiologic procedures during his lengthy career. According to longtime colleague Dr. Richard Chang, “His papers are constantly being cited, and the techniques he has developed are used throughout the world. I used one of his procedures earlier this week.”

Recalling the early days of his specialty, Doppman said, “We started out doing angiograms,” a technique that uses injections of radio-opaque dye to visualize blood vessels and tumors. “Then we discovered we could dilate vessels with balloons, drain abscesses, biopsy lungs, and put in central lines. We now do a lot of things that surgeons used to do, all under CT or x-ray control.”

Later targeting his efforts at endocrinology—the study of glands and hormones—Doppman developed techniques for locating ectopic or elusive glandular tumors, which greatly improved patients’ chances for successful surgery.

He also became interested in vascular malformations of the spinal cord. He developed a fundamental understanding of these challenging lesions and devised ways to visualize and treat them. His research culminated in the publication of the first text on this subject in 1969.

Doppman has been a part of other innovations in radiology that have revolutionized clinical care—procedures we take for granted today and that save us from invasive exploratory surgery.

“While I’ve been here, ultrasound, CT scanning, interventional radiology, and magnetic resonance imaging have all developed,” he said. “In addition to running the department, a lot of my responsibility was making sure we were state of the art in diagnostic radiological equipment. We had one of the first CT scanners and the third or fourth MRI scanner in the country. It’s been a great pleasure to guide radiology through this period of immense innovation.”

Doppman earned his medical degree cum laude at Yale in 1953. He completed an internship at Mercy Hospital, in his hometown of Springfield, Mass., and planned a career in general practice. But after serving 3 years in the Navy, he decided that general medicine wasn’t for him, and began searching for a specialty.

“Radiology was ideal, because it presented diagnostic challenges and the chance to participate in therapies without being the primary care physician.” He returned to the East for a radiology residency at the Hospital of St. Raphael, in New Haven, Conn. He was also a Fulbright fellow in radiologic research at the Hammersmith Hospital, London, in 1959.

He joined the Clinical Center in 1964 as deputy chief of the diagnostic radiology department. Except for a 2-year stint as a radiology professor at the University of California, San Diego, he has been with the radiology department ever since.

He received many honors for his work, including the Gold Medal from the Society of Cardiovascular and Interventional Radiology (1997), an organization of which he was also a founding member and past president (1983); a Gold Medal from the American Roentgen Ray Society (1998); the Copeland Award from M.D. Anderson Cancer Center (1992); and the PHS Distinguished Service Medal (1982). His love of mentoring was recognized in his being the 1997 recipient of the NIH Distinguished Clinical Teacher Award. He also received the CC Director’s Award (1997) and the NIH Director’s Award (1999).

Reflecting on his years at the Clinical Center, he said, “It’s been a great place to work. All the CC directors have been very generous to radiology. It’s an expensive specialty, but it’s absolutely critical because the serious clinical problems end up in radiology. We can provide definitive answers, and sometimes we can even have a hand in correcting the problem itself.”

Clinical Center director Dr. John Gallin sums up the feelings of many: “For many years, John Doppman has been one of the pillars of the NIH clinical research community. In addition to being a very strong clinical scientist, he has been one of the most important clinicians the Clinical Center has had. His enthusiasm and skill helping with difficult clinical situations are unmatched. Any time of the day or night, he would lend assistance to solve difficult diagnostic or therapeutic problems. You always felt you had the very best when Dr. Doppman was working with one of your patients. We are all disappointed that his retirement has become a reality, and we wish him the very best.”

Healthy Twins Needed

The Child Psychiatry Branch, NIMH, seeks healthy identical and same-sex fraternal twins age 5-16 to participate in an MRI study of the effects of genes and environment on brain development. Volunteers must be free of medical and psychiatric illnesses. Parents will be asked to complete a 15-minute phone screen and some multiple-choice questionnaires. Twin participation requires a 3-hour visit for a neurological exam, cognitive testing and blood draw, and a 1-hour visit for the MRI scans. Participants will be paid. For information, contact Beth Molloy at 435-4515 or emolloy@codon.nih.gov.
Sick of Junk Email?
By Cheryl Seaman and Kevin Haney

Work is beginning to seem just like home when the mail arrives—three bills, two letters, tons of junk mail. Commingled with the work-related messages, NIH users are finding an increasing volume of spam (mass mailings) and chain letters, a.k.a. junk email, insidiously invading their electronic mailboxes. All sorts of unwanted mail is being received, e-commerce solicitations (e.g., real estate services, computer sales, online publications), chain letters and virus hoaxes in particular, and many of these messages urge recipients to forward multiple copies.

What can you do? Hit the delete key and get on with your life. Junk mail might be annoying, but don't respond to these messages and don't participate in disseminating them. Forwarding chain letters is prohibited because it leads to a geometrical increase in their circulation, congesting the network and impeding the routing of legitimate email messages. In addition, forwarding lends your name and the NIH reputation to a message, and gives it the appearance of authenticity. To avoid being a target for unwanted email, be aware that in most cases your name and email address are available to any web site, forums, chat rooms, mailing lists or newsgroups you visit. Report to your information systems security officer (ISSO) only those messages where you perceive a legitimate warning, or suspect illegal activity or child pornography. The recent inundation of ILOVEYOU email messages taught NIH users a valuable lesson—it is wise not to open attachments from someone unless you requested it and know what the attachment is. Also, resist the temptation to send virus warning notices to your entire address book—or any other large group of addresses—as this only adds to the flood of messages in an already clogged system. Additional guidance is available through your ISSO and the CIT security web site at http://oirm.cit.nih.gov/security/spam.htm.

At present, there is no silver bullet solution that will filter all unwanted email. Although CIT is exploring mechanisms that will block unwanted email centrally, those who send spam change their addresses frequently. As a result, messages blocked today may not be blocked tomorrow. For the time being, the delete key is quick, cheap and effective.

A Good Year for the Roses—Someone, years ago, was fond of planting rose bushes at NIH. They turn up alongside a variety of buildings, including 14G (r), 22 and behind Bldg. 4, where they grow flush against brick walls, whose plain faces they transform (and in some instances ravish). If you look carefully, metal guide wires are strung along these walls, forming trellises along which the roses can grow. Sometimes overlooked, these plants add a subtle beauty to the campus.