

THE NIH RECORD

Still The Second Best Thing About Payday

Sieving Named NEI Director

Dr. Paul A. Sieving has been named the second director of the National Eye Institute. He is currently the Paul R. Lichter professor of ophthalmic genetics and



director, Center for Retinal and Macular Degeneration, at the department of ophthalmology and visual sciences, University of Michigan Kellogg Eye Center, Ann Arbor. He will join NEI in late spring.

Dr. Paul A. Sieving

"I am delighted that

Dr. Sieving will be assuming the directorship of the NEI," said NIH acting director Dr. Ruth Kirschstein, who made the appointment. "As the nation's population ages, blinding eye diseases will reach epidemic

SEE **SIEVING**, PAGE 2

A Conversation with New OBSSR Director Raynard Kington

By Susan M. Persons

Dr. Raynard S. Kington joined NIH 3 months ago to direct the Office of Behavioral and Social Sciences Research (OBSSR). He succeeds Dr. Norman B. Anderson, who led the office since its inception in 1995. Kington received his M.D. from the University of Michigan, and his Ph.D. in health policy and economics from the Wharton School of the University of Pennsylvania. Prior to his NIH appointment, he served as director of the division of health examination statistics in the Centers for Disease Control and Prevention's National Center for Health Statistics, where he led the National Health and Nutrition Examination Survey.

SEE **KINGTON**, PAGE 4

HIGHLIGHTS

1 King Speaker Calls For New Entity

New Directors at NEI, OBSSR, NCMHD

2 Parking Lot 10K To Close

3 NIAMS Outlines New Research Directions



5 New Genome Lecture Series

7 Anti-HIV Topical Microbicides Hard To Develop

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

February 6, 2001
Vol. LIII, No. 3

'Achieving the Dream'

Health Parity Is Theme of 30th Martin Luther King Observance

By Carla Garnett

Inspiring words and song characterized NIH's 30th annual observance of the life and legacy of Martin Luther King Jr. Featuring a provocative address by keynote speaker Dr.

Rodney Hood, president of the National Medical Association (NMA), and stirring musical tributes—first by the Morgan State University Choir, then by the NIH Day Care Song and Dance Troupe—the Jan. 12 program, themed "Achieving the Dream: Health Parity in the 21st Century," was a fitting commemoration for a national hero.

"Dr. King serves as a symbol to each of us that progress can be made even with the testing of our own courage and strength, if we

SEE **KING OBSERVANCE**, PAGE 6



Keynote speaker Dr. Rodney Hood addresses the annual King assembly.

Ruffin Formally Sworn In as New Center Director

By Carla Garnett

Dr. John Ruffin was formally sworn in as director of NIH's new National Center on Minority Health and Health Disparities by then-DHHS Deputy Secretary Kevin Thurm on Jan. 9. The ceremony was held in NIH acting director Dr. Ruth Kirschstein's office and was attended by Congressman Jesse Jackson Jr. (D-IL), former Congressman Louis Stokes, several top NIH staff as well as Ruffin's wife and two daughters.

"I congratulate you, Dr. Ruffin, on behalf of all Americans but particularly on behalf of victims of these health disparities," Jackson said. "The charge before you is



Dr. John Ruffin, director of NIH's newest center, takes the oath of office as his wife, Dr. Angela Ruffin of NLM, holds the Bible.

SEE **RUFFIN**, PAGE 8



Dr. Christopher Portier, acting director of the Environmental Toxicology Program and the National Toxicology Program, has received the Society for Risk Analysis's 2000 Outstanding Risk Practitioner Award. The award, which was made at the society's recent annual meeting, honors individuals who have made substantial contributions to the field of risk analysis through work in the public or private sector. The award cites Portier's achievements at NIEHS for nearly 20 years that have appeared in more than 100 peer-reviewed articles in risk assessment and risk-related areas.

SIEVING, CONTINUED FROM PAGE 1

proportions. Dr. Sieving, as an internationally recognized researcher and clinician, will provide dynamic leadership in our efforts to prevent blindness and visual loss."

Sieving (pronounced SEE-ving) will oversee a budget of \$510.6 million, a staff of 300 scientists and administrators on campus and approximately 1,600 research grants and training awards made to scientists at more than 250 institutions across the country and around the world.

"I am honored to be joining the NEI at this important moment when scientific opportunities have never been greater," said Sieving. "I look forward to working with the NEI staff, the vision research community, and the public to improve eye health for all and quality of life for those with vision impairments."

Sieving's research at Michigan investigates the genetic basis for retinal and macular degenerations and the basic biology of retinal cells that degenerate and lead to vision loss. He also conducts clinical investigations with individuals who have these conditions and their families, and studies treatments that might slow the degeneration.

An honors graduate of Valparaiso University in history and physics, he completed an M.S. in physics at Yale University and a year at Yale Law School. He went on to receive an M.D. from the University of Illinois Medical School and a Ph.D. in biomedical engineering at the University of Illinois Graduate School. He did his postdoctoral fellowship in retinal physiology at the University of California, San Francisco, with the late Dr. Roy H. Steinberg, and his medical fellowship in inherited retinal degenerations at the Massachusetts Eye and Ear Infirmary, Harvard Medical School, with Dr. Eliot L. Berson.

Sieving has received many awards and honors, including the Senior Scientific Investigator Award from Research to Prevent Blindness, the Alcon Award from the Alcon Research Institute, and he is listed as one of the "Best Doctors in America." He has served on several NIH study sections to review grant applications, and on numerous editorial and advisory boards. He has received grant support from NIH and various foundations since 1982 to further his research. ■

Renewal of NIH Parking Permits

NIH General Parking Permits for campus employees whose last names begin with C and D will expire on the last day of February 2001. In order to obtain a new permit, an employee must visit the NIH Parking Office in Bldg. 31, Rm. B3B04. Hours are 7:30 a.m. to 4:30 p.m., Monday through Friday. Remember to bring a valid NIH identification card, driver's license and vehicle registration certificate. For more information, call 496-6851. ■

Closure of Parking Lot 10K

This spring, construction on the new NIH Fire Station will begin. Unfortunately, the new facility will require closure of parking lot 10K at the northwest corner of the campus.

To accommodate the parking needs of NIH employees, the Office of Research Services is expanding attendant-assisted parking to lot 41A in the early spring. As at the other managed parking facilities on campus, first arriving employees will self-park and lock their cars in the existing striped spaces as they do currently. Once the facility is full, attendants will direct employees to established parking locations (i.e., aisles), where parkers will leave their car and ignition key, and receive a claim ticket. Vehicle keys will be secured by attendants using key security locks. As self-park spaces open, stacked cars will be moved into available spaces. Departing employees whose cars are stack-parked will present their ticket, and attendants will unsecure the key and move any blocking vehicles. Attendant operating hours are 8 a.m. - 8 p.m., Monday - Thursday. The attendant booth located near Bldg. 41 will remain open and hold remaining keys for parkers until 2 a.m. Any keys not picked up by then will be kept in a safe until the next business day.

Shuttle buses are available at lot 41A/B to transport employees around campus every 10 minutes. Shuttle bus services run from 6:30 a.m. until 6:30 p.m. For more information on parking and the shuttle schedules, visit the ORS web site at <http://www.nih.gov/od/ors/> or call the Office of Facilities Planning at 496-5037. ■

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 reprintable without permission. Pictures may be available on request. Use of funds for printing this periodical has been approved by the director of the Office of Management and Budget through Sept. 30, 2001.

NIH Record Office
Bldg. 31, Rm. 2B03

Phone 496-2125
Fax 402-1485

Web address
<http://www.nih.gov/news/NIH-Record/archives.htm>

Editor
Richard McManus
rm26q@nih.gov

Assistant Editor
Carla Garnett
cg9s@nih.gov

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

♻️ *The Record is recyclable as office white paper.*

Addressing Health Disparities

Research Directions Outlined at NIAMS Conference

Arthritis and musculoskeletal and skin conditions are among the most frequent chronic health problems in the United States, but not all population groups are equally affected. There are marked differences in the prevalence, morbidity and disability associated with specific diseases in African American, Hispanic, Native American and Caucasian populations.

Recognizing these disparities, NIAMS recently convened experts in many disciplines from around the country for a health disparities conference. The goals were threefold: to highlight current knowledge about genetic, environmental, social and behavioral factors that play a role in health disparities; to identify intervention strategies that could provide models to reduce disparities; and to define challenges and emerging opportunities for research.

In his opening remarks, Dr. David Satcher, assistant secretary for health and surgeon general, commented that he had not been to a conference that dealt so well with both major goals of Healthy People 2010 (DHHS' national health blueprint): to increase quality and years of life and to eliminate health disparities. He said that NIAMS topics were some of the best examples of challenges to one's quality of life, in that millions suffer from arthritis, back pain, osteoporosis, skin diseases and other disorders within the institute's mandate.

Conference speakers raised a number of issues, including the following:

- Race and ethnicity are not defined consistently and are sometimes used interchangeably, when they are two different constructs. Given the strong association between some "racial" groups and socioeconomic status (SES), the contribution of race and SES to disease outcome is difficult to sort out. However, the use of SES as a variable may be justified in research if we are to eliminate health disparities and improve the overall health of the population.

- There is a need for basic descriptive data on the structure and function of hair and skin in people of color, along with studies of the epidemiology, clinical

presentation, natural history, complications and other aspects of common skin diseases. Valid measurement tools for diseases in skin of all hues are needed as well.

- Studies have found that osteoarthritis (OA) of the hip and knee occurs more often in African American men than in Caucasian men. Systemic lupus erythematosus (SLE), another autoimmune disease, occurs more often and more severely in African Americans and Hispanics than in Caucasians. Keloids (an overgrowth of scar tissue after a skin injury) and vitiligo (formation of white patches on the skin) occur more often in African Americans.

- Some populations experience disparities in treatments received; the reasons for this should be studied. For example, although acne vulgaris is a common skin condition in African Americans and isotretinoin is considered an effective therapy, the drug is prescribed less often for African American acne patients than for others. African Americans are less likely than Caucasians to undergo total joint replacement surgery, and they also receive less intense diagnostic and treatment courses for low back pain when compared with Caucasians.

- Researchers are studying gene expression and biomarkers in scleroderma, SLE and OA. They are also studying modifiable behaviors and environmental exposures to determine their links to disease. It was suggested that researchers collect data of a broad nature from behavioral, psychosocial, clinical and genetic studies.

Examples of interventions in Hispanic and African American communities that have yielded positive results in arthritis care also were presented.

Some broad questions posed by the conference included: What research initiatives would have the widest impact across the range of diseases and conditions where disparities exist? Where should the research focus be: Genetic pathways? Behavioral interventions? Gene/environment interactions? What are barriers to getting this research done?

Conference cosponsors included several components of NIH: the National Center on Minority Health and Health Disparities, the Office of Research on Women's Health, the Office of Disease Prevention and the Office of Behavioral and Social Sciences Research. Other cosponsors were the Centers for Disease Control and Prevention, Arthritis Foundation, American College of Rheumatology, American Academy of Orthopaedic Surgeons and American Academy of Dermatology.—Connie Raab



Attendees at the NIAMS conference included (from l) Dr. David Satcher, assistant secretary for health and surgeon general; Reva Lawrence, conference organizer; Dr. Ruth Kirschstein, NIH acting director; and Dr. Stephen Katz, NIAMS director.



Dr. Susan Taylor, director of the Skin of Color Center at St. Luke's-Roosevelt Hospital Center in New York City, speaks about the differences in skin and hair structure between ethnic groups.



Jose Cordero, an NIH Academy trainee from the University of Tampa, Florida, who is now with NIAMS, questions a speaker.

KINGTON, CONTINUED FROM PAGE 1

In the following interview, Kington shares his thoughts about the role of OBSSR at NIH and summarizes his experience as NIH associate director for behavioral and social sciences research since his arrival.

Getting acclimated to the world of NIH is no small endeavor. What has been your entry strategy and what have you learned?



Dr. Raynard Kington joined NIH as director of the Office of Behavioral and Social Sciences Research last fall.

This job is fundamentally about pushing the frontiers of the behavioral and social sciences related to health. My primary goal since coming to the office has been to learn as much as I can about both the directions the office has taken since it was created and how we can do an even better job in advancing the science in these areas in the future. I was fortunate to have followed Dr. Norman Anderson, who did an outstanding job in establishing the presence of the office at NIH. Although I had had some exposure to various parts of NIH in my previous job, I quickly realized how much I needed to learn. I am about halfway

through meeting with each of the IC directors and many of the senior OD staff to learn more about how our office can help them pursue their missions in the behavioral and social sciences. I have also met with most of the professional organizations that represent the major behavioral and social science disciplines so that I can have a better idea of how this office can help them as well. I call it my listening tour.

Now that you have a better understanding of how the NIH functions, what are your plans for increasing support for behavioral and social sciences research?

OBSSR must serve many different roles for different IC's and different disciplines. I like to think of NIH IC's as being divided into three groups. First, those that already have large and established research agendas in the behavioral and social sciences; second, those that are just at the cusp of significant investments in these fields; and finally, those IC's who are really just beginning to appreciate the importance of the behavioral sciences for achieving their missions.

On the other hand, some of the behavioral and social sciences have a large and important presence at NIH, while others have only just begun to demonstrate their value in helping NIH to address important health problems. I hope that OBSSR can tailor its activities so that we can be of help to IC's and disciplines at each of these stages and ultimately to serve as a strong resource on campus. Fortunately, I have come just as several reports from the

National Academy of Sciences and the Institute of Medicine have been or will soon be completed on future directions for research and training in the behavioral and social sciences. We will rely on these as well our own internal efforts such as last year's planning conference on social and cultural dimensions of health, to help us and the IC's in setting priorities for behavioral and social sciences research at NIH.

Our office also is very interested in significantly expanding the research addressing the relationship between education and health. Countless studies have demonstrated a strong relationship between educational attainment and health, yet we know relatively little about the causal pathways connecting the two. This is one area where I believe our office can help to jumpstart the research.

As you know, NIH has a strong interest in eliminating health disparities. Your own research has included investigating the role of socioeconomic status in explaining racial and ethnic differences in health status. What role will the OBSSR play in this research area?

Even before coming on board, I was impressed by NIH's commitment to expanding its support of research in the area of disparities. It is important that we see this as an effort to answer fundamental scientific questions about why some people enjoy long and healthy lives while others appear to be locked into life trajectories notable for their relative brevity and poor quality. By placing these questions at the top of NIH's scientific agenda, NIH is sending an important message to the research community.

Our office sees this as a great opportunity to demonstrate once again the value of behavioral and social sciences in answering important and complex scientific questions related to health. We plan to do everything we can to make sure that the best and the brightest behavioral and social scientists rise to this challenge. We also hope to work closely with the new National Center on Minority Health and Health Disparities.

Traditionally, NIH has been known as a biomedical research organization. What can behavioral and social sciences research add to the mission of NIH?

In many ways, this is a great time for behavioral and social sciences in health research. Thanks to research advances in genetics and molecular biology and behavioral and social sciences, the health research community at large is finally moving beyond simplistic notions by which diseases are categorized as primarily genetic or biologic in origin versus primarily behavioral or environmental. The science is beginning to demonstrate the multitude of pathways by which behavioral and social factors interact with genetic and biologic factors in ways that were not even considered seriously not too many years ago. The historic artificial boundaries

separating behavioral and social sciences from traditional biomedical sciences are falling. Many of the largest institutes have made substantial commitments to behavioral and social sciences, and the behavioral and social sciences are strongly supported in Congress and by the public at large as important disciplines that must be included when we think seriously about important health problems.

I have every confidence that when we look back decades from now, we will see this change—the welcoming of behavioral and social sciences as essential disciplines when applying science to solve health problems—as an important step toward improving the health of the public. ■



Congressman John Porter (R-IL, l), recently retired chair of the House appropriations subcommittee on labor, HHS, and education, and a major force behind the recent NIH budget growth, discusses plans for the new NIH National Neuroscience Research Center with Drs. Gerald Fischbach (second from l), Steven Hyman (second from r) and Alan Leshner, directors of NINDS, NIMH and NIDA, respectively. At a special event held at the Cloisters on Jan. 4, more than 150 principal investigators from nine institutes—the first gathering of its type—heard Fischbach and Hyman describe their vision of a new intellectual framework for joint efforts in neuroscience research. Architect Rafael Vinoly explained how the new building will support that vision through shared, flexible space, easy traffic flow and ample areas for interaction among scientists and with the public. In his remarks, Porter reflected on his longstanding interest in promoting collaboration among NIH institutes and his conviction that NIH must always strive to inform the public about its research efforts and advances. The building will be named in honor of Porter.

Hypertension Study Needs Vols

The Cardiology Branch, NHLBI, is recruiting patients with high blood pressure for a 3-day outpatient study. Volunteers should not have any other medical problems and should not have a cholesterol higher than 200 mg/dL. Participants will be paid. Call 496-8739. ■

Lecture Series on Human Genome

The National Human Genome Research Institute is sponsoring a look into the human genome sequence with a five-part lecture series, “Insights from the DNA Sequence of the Human Genome.” The series starts on Monday, Feb. 12 with a 3-hour kick-off symposium in Masur Auditorium, Bldg. 10 from 2:30 to 5:30 p.m. The preliminary schedule includes presentations from Dr. Robert Waterston of Washington University, Dr. Eric Lander of the Whitehead Institute, Dr. David Altshuler of Whitehead Institute/Massachusetts General Hospital, Dr. Barbara Trask of the Fred Hutchinson Cancer Research Center, Jim Kent of the University of California at Santa Cruz, a representative of Celera Genomics and other special guests.

The series continues in Lipsett Amphitheater in Bldg. 10 with the following lectures, all of which are from 10 a.m. until noon:

Mar. 13, Dr. Evan Eichler, Case Western University, “Recent duplication and dynamic mutation of the human genome” and Dr. Arian Smit, University of Washington, “Interspersed repeats and other keepsakes of selfish DNA in our genome.”

Apr. 10, Dr. Alex Bateman, Sanger Centre, “What’s in the human genome? Are we different from flies and worms?” and Dr. David Kulp, Affymetrix, Inc., “Gene hunting in the human genome: methods, results, and resources.”

May 7, Dr. Deanna Church, National Center for Biotechnology Information, “Comparative genomics: using mice to understand ourselves” and Dr. Jean Weissenbach, Genoscope, “Gene finding in mammals using the pufferfish genome sequence.”

June 5, Dr. Gene Myers, Celera Genomics, “Assembling and comparing whole genomes” and Dr. Mark Adams, Celera Genomics, “Interpreting the code, stories from the genome.”

If you require special aids or services, or for more information, contact Jane Peterson or Kris Wetterstrand at 496-7531 or visit <http://www.nhgri.nih.gov/CONF/>. ■

Sailing Club Open House

Do you think you might like sailing? Have you thought: someday I’ll learn to sail? Have you longed to be sailing on the Chesapeake Bay? Do you need to refresh or check out your sailing skills? Can you imagine being with a group of fun, skilled sailing instructors, enthusiasts and boat owners? All of this and more are open to you through the NIH Sailing Club at low cost. Check it out over pizza and beer on Thursday, Mar. 1 from 5 to 9 p.m. at the FAES House at the corner of Old Georgetown Rd. and Cedar Ln. Admission is \$5 at the door, soda free, beer/wine \$2. ■



Dr. Henry McFarland, chief of the NINDS Neuroimmunology Branch, recently received the Society Builder Award from the National Multiple Sclerosis (MS) Society during the organization’s national leadership conference held in Washington, D.C. He was recognized for his contributions in the field of MS research. Lee Stillwell, chairman of the board of trustees of the society, presented McFarland with a silver Tiffany pen emblazoned with the caduceus, the symbol of the medical profession, at a Library of Congress dinner attended by 300 people. McFarland came to NIH in 1975 and since then has worked to identify potential immune-related therapies for MS, a chronic nervous system disease.

KING OBSERVANCE, CONTINUED FROM PAGE 1

but dedicate our own advantage, wisdom and efforts to ensure that all Americans have equal opportunity," said Dr. Vivian Pinn, NIH associate director for research on women's health and emcee for the celebration.

"We can accomplish so much on Dr. King's behalf," added Dr. Yvonne Maddox, NIH acting deputy director. "Dr. King once said, 'Of all forms of inequity, injustice in health is the most inhumane.' Dr. King was not only a brilliant man, but he was a diverse man. He was a proud man and a man of vision. I think he would be very pleased today that NIH also has a vision, a vision that has led us to examine the health status of all people...Through our individual efforts, his work and his dream can continue even though he is not here with us."



The Morgan State University Choir led the audience in "We Shall Overcome."

PHOTOS: ERNIE BRANSON

Keynote speaker Hood (second from r) is welcomed to NIH by (from l) Dr. John Ruffin, director of the National Center on Minority Health and Health Disparities, NIH acting deputy director Dr. Yvonne Maddox and Dr. Vivian Pinn, NIH associate director for research on women's health and Hood's cousin.



Hood, who was installed to lead the NMA—the largest professional and scientific organization of black physicians in the U.S.—last August, and who was recently appointed to the Surgeon General's steering committee to eliminate racial and ethnic health disparities, shared a historical perspective of such health gaps. He linked them to slavery and wondered aloud whether significant progress has been made.

"Dr. King was a revolutionary of the first order," said Hood. "He fought on the front lines of the civil rights battle with commitment and compassion for freedom, justice and equality for all Americans, a battle for which he gave his life."

Hood said he believed if King were alive today, the visionary would give a mixed review of the current state of the nation's civil rights.

"Certainly over the past three decades, some blacks have achieved a higher social economic status, a higher level of education, better work advancement or an improvement in health," he continued. "But, has there been substantial improvement for the masses? I will not attempt to answer that question today, but everything we know about Dr. King—this man, this revolutionary—suggests he would be appalled and incredibly saddened."

Citing statistics from as far back as 1980,



Show Stealers: Back by popular demand, the NIH Preschool Song & Dance Troupe performed several selections to rave reviews.

Hood said blacks' overall health has deteriorated in almost every category since that decade. "Blacks suffer excessive morbidity and mortality and have the highest death rates in 14 of the 16 leading causes of death in this country," he said. "Many of these deaths are preventable with known, basic, cost-effective medical treatment."

Asserting a correlation between the poorer health status of minorities and the lingering effects of racism in the nation, Hood concluded his remarks by proposing establishment of a \$15 billion international, multicultural health policy and research institute—to be named in honor of King—that would conduct social scientific research on ways "to lessen disease from all forms of racism."



Program participants Dr. Richard Harrison of NIDA and Elizabeth Chao of the Clinical Center read parts in the King litany.

Before the keynote address, the tone of the program was set by performances of traditional gospel music by an NIH perennial favorite, the Morgan State University Choir, under the direction of Dr. Nathan Carter. Also making a command return appearance was the culturally diverse NIH preschool troupe, directed by Lucretia Watkins-Diaby. In a unique interpretation of the King commemorative litany, NIH'ers read the lead parts in several different languages including Chinese, English, Ghanaian, Hindi, Osage, Spanish, Tagalog and Vietnamese. The program concluded with the audience linked arm in arm, singing a standard from King's nonviolent protests, "We Shall Overcome." ■

Those Elusive Magic Bullets

Topical Microbicides To Prevent HIV Hard to Develop

By Harrison Wein

When Dr. Sharon Hillier first turned 10 years ago to the challenge of developing a gel or cream that could prevent sexually transmitted diseases like HIV, scientists thought the path to success looked like this: they would find an agent that killed HIV in a test tube, put it in a gel or cream, and it would work just fine. But as work progressed, Hillier explained, "It became clear that that pathway was not so clear."

Hillier, who is a professor in the department of obstetrics, gynecology, and reproductive sciences at the University of Pittsburgh, said the key lies in the complicated ecosystem in what she calls the Secret Garden, a woman's vagina. "I've spent most of my academic life thinking about what grows in the garden and how to keep the garden healthy," she told the audience for a Wednesday afternoon lecture in Masur Auditorium on Jan. 10.

Hillier's search for something that could be used topically to prevent sexually transmitted infections like HIV has been complicated immensely by the complexity of the garden. "The ecosystem, the garden," she said, "differs over a woman's life. The inference from that is that what we'll need in microbicides will also differ over a woman's life." Characteristics like the pH, the types of microbes and the amount of lubrication are among the many things that need to be taken into consideration when designing a topical microbicide.

Hillier showed a slide of *Lactobacillus* bacteria, cousins of the bacteria that live in yogurt. "I call them the Xena warrior princesses of the vagina," she said, referring to the popular TV show featuring female super heroes, "because they're tall, they're dark, they're beautiful and they're really tough." These bacteria make peroxide and lactic acid, substances that keep the environment in the vagina unfriendly to harmful invaders. But the types of microflora in women's gardens can vary. And disruptions in the garden, like having intercourse or douching, can lead to a whole different set of microflora. Hillier said that "women with Xena" are less likely to acquire HIV or gonorrhea. So while a potential microbicide should kill HIV and other pathogens, it shouldn't kill lactobacilli.

"When we begin to talk about delivery of microbicide into the vagina," Hillier explained, "we need to understand how that microbicide will work in the vagina." To show how difficult it is to develop such a product, she talked about her experiences with nonoxynol-9 (N-9), which was the first topical microbicide they evaluated. N-9 had been shown to protect monkeys from infection by the simian equivalent of HIV, SIV, and seemed to protect monkeys against chlamydia as well. It worked against gonorrhea in the test tube, but then failed

against many strains that lived in the vagina. It also caused irritation to the cervix, which could lead to infection by other pathogens.

"It all became quite clear that it was all terribly unclear," Hillier said in describing the problems they encountered in the course of their studies. "Well, you can say it became startlingly clear in a negative sort of way." In the end, they saw no clinical benefit in using N-9 against HIV, gonorrhea or chlamydia. But perhaps more important was the lesson that the microbicidal effects of a compound were highly dependent on both its formulation and how it interacted with the unique ecology of the vagina it was being put into.

There are many things to consider in searching for an effective topical microbicide. A product will have to provide sufficient lubrication because having sex without lubrication can create small tears and increase susceptibility to infection. Aside from the microbicide itself, there are also gelling agents, emulsifiers, buffering agents, preservatives and chelating agents in any given formulation. All of these things could potentially enhance or decrease the activity of the microbicide. Indeed, Hillier found that much of the "other stuff" could be microbicidal too under the right conditions. So absolutely every aspect of a formulation counts when it comes to topical microbicides.

In light of this information, Hillier detailed the breadth of approaches scientists are now using to develop topical microbicides, ranging from agents that kill microbes to compounds that prevent them from attaching to tissue, to tweaking the ecosystem in the garden to help it better protect itself. Hillier said that NIH had funded all of her work in this area and that it plays a crucial role in leading the development of microbicides. But she would still like to see increased funding for the field. She stressed, "All of us need this technology." ■

Female Control Subjects Needed

Do you work at a computer at least 4 hours per day? Are you a female between the ages of 21 and 50 who is currently working full or part time? If so, you are invited to participate in a research study of job stress and computer use. The study includes a \$100 payment. For more information, call (301) 295-3672. ■

Overweight Children and Teens

Parents: Overweight children and teens are at risk for developing serious medical problems. Consider enrolling your overweight child age 6-17 in one of two new NICHD studies to test potential weight-loss medicine. No charge. Call for more information: 1-800-411-1222. ■



Dr. Carl E. Hunt has joined NHLBI as director of the National Center on Sleep Disorders Research (NCSDR). Previously, he served on the faculties of the University of Minnesota, Northwestern University and the Medical College of Ohio, where he chaired the department of pediatrics from 1988 to 1997. He is a leading researcher on sudden infant death syndrome. He has participated in numerous scientific committees including the SIDS global strategy task force and the NICHD committee on future directions for SIDS research. In 1994, he received the first annual Annenberg Center at Eisenhower Apnea of Infancy Award. NCSDR was established by legislation in 1993 to support sleep-related research and educational programs.

Maryland Prepaid College Trust Presentation

The NIH Office of Community Liaison, NIH Recreation and Welfare Association and NIH Federal Credit Union invite all staff to attend a presentation on the Maryland Prepaid College Trust Program. The Maryland Prepaid College Trust is a state program that allows you to save for a child's future education based on what Maryland's public colleges cost today. More detailed information about the trust is available online at www.prepaid.usmd.edu. The presentation will be held on Friday, Feb. 9 from noon to 1 p.m. in Bldg. 31, Conf. Rm. 6 (on the 6th floor of the C wing). A representative of the program will give an overview and be available to answer questions. Feel free to bring your lunch. If you have further questions about the presentation, contact the Office of Community Liaison, 496-3931.

RUFFIN, CONTINUED FROM PAGE 1

enormous. I have no doubt that your outstanding efforts and the good science that will come out of this new center will help close these gaps in health."

The new center was signed into law on Nov. 22, 2000. According to S. 1880, an amendment to the Public Health Service Act and the official document that created the center, NCMHD's mission is to "conduct and support research, training, dissemination of information, and other programs with respect to minority health conditions and other populations with health disparities." In its summary findings, the document noted: Congress found that "despite notable progress in the overall health of the Nation, there are continuing disparities in the burden of illness and death experienced by African Americans, Hispanics, Native Americans, Alaska Natives, and Asian Pacific Islanders, compared to the United States population as a whole."

With its new status as a center, the former Office of Research on Minority Health will now be able to award research grants independently, an administrative authority reserved solely for institutes and centers. Before now, ORMH could partner with other ICs to fund grants, but could not alone award research project funding.

Specific priorities for the center include helping to develop an integrated, cross-disciplinary national health research agenda on closing the health gaps and promoting and supporting research capacity-building activities in the minority and medically underserved communities. The center is a result of years of grass-roots efforts and prompting by Jackson, Congressmen John Lewis and William Frist, and Sen. Ted Kennedy—and several others in the House and Senate—and is a personal triumph for Stokes, a Democrat from Ohio and longtime supporter in Congress of health issues, especially those involving minorities.

"If anyone has deserved this appointment, it is John Ruffin," Stokes said at the ceremony. "He has earned his stripes. I took great pride in working with him from the moment Dr. Kirschstein brought him on at NIH. I also take great pride when I look back over my 30 years in Congress to now see those like Rep. Jackson, who followed in our footsteps. He is carrying on brilliantly on the appropriations committee and is taking the work to the next and



Thurm listens to remarks by Congressman Jesse Jackson Jr., who was instrumental in ushering through Congress the legislation creating the new center.



Presenting the certificate to Ruffin are (from l) then-Deputy HHS Secretary Kevin Thurm and NIH acting director Dr. Ruth Kirschstein. Ruffin's wife and daughters, Meeka and Beverly, joined him for the swearing-in.

PHOTOS: BILL BRANSON

higher levels." Stokes was recently appointed to chair the DHHS secretary's new advisory committee on minority health.

For Ruffin, the appointment to center director caps more than a decade at NIH on the front lines of medical research involving minorities. He came to NIH in 1990 as the first associate director for research on minority health, who was to lead the then newly established ORMH. He has more than 25 years of experience in developing and administering programs to enhance minority health.



Former Congressman Louis Stokes, a longtime supporter of minority health research, was also on hand for the ceremony.

"I have always viewed myself as the drum major for one hell of a band," Ruffin said, following the oath of office administered by Thurm. "You all

are the players and my responsibility is to keep everybody fine-tuned. I'm deeply honored to accept the confidence you have bestowed on me." ■

Female Smokers Needed

Female volunteers ages 18 to 23 who smoke a minimum of one cigarette per day are needed to participate in a study being conducted at American University. You will be asked to complete 5 questionnaires and be weighed on a scale. The study lasts approximately 30-40 minutes and your name will be entered in a drawing to win two \$50 prizes. If interested call (240) 994-0268. ■

Training Plan Redeveloped for Extramural Administrators

A training program for all staff serving as extramural scientist administrators (ESA) has recently been redeveloped. ESA training consists of coursework for those who have been performing ESA duties for less than 2 years, and continuing education activities (a minimum of two per year) for those who are more experienced. All staff performing extramural scientist administrator duties are expected to participate in one or both aspects of the program. In addition, a program of advanced instruction in NIH extramural activities will be available to a limited number of extramural administrators. Finally, a mentored leadership program open to ESAs and contract and grants management staff is being established.

The program includes:

- ◆ **Orientation to NIH Extramural Activities**—The Office of Extramural Programs offers this course in February. It provides a broad introduction to NIH extramural activities for employees at all grade levels who are new to the NIH extramural community. This course is required of all new ESAs.

- ◆ **Core Curriculum Training**—Completes the orientation course with half-day sessions on Tuesdays in February. Experienced staff members, including ESAs, grants management, contracts management and support staff, are also invited to attend to broaden their knowledge and refresh their skills. The objective is to provide a more in-depth foundation for the performance of ESA duties with an opportunity to discuss aspects of more complex issues that must be considered in managing extramural program or review activities. Outlines of this year's core curriculum may be viewed online at http://odoerdb2.od.nih.gov/oer/training/esa/esa_cores.htm.

- ◆ **Continuing Education**—Individuals who perform ESA activities are required to participate in the Continuing Education Program in order to maintain a current knowledge of extramural policies and procedures. Each year, ESAs will be expected to participate in a minimum of two training activities, either special issues training offered by the Office of Extramural Programs, attendance at a creditable STEP forum or module and/or other training offered by their institute or center, or by the NIH Human Resource Development Division.

- ◆ **ESA Seminar Series**—Annually, the Extramural Staff Training Office has offered, on a limited and competitive enrollment basis, a series of weekly seminars on Fridays. The series is designed primarily for ESAs with 2 or more years of experience. Because of the current backlog of applicants, the course will be shortened to 4 months and offered twice a year, beginning in September 2001. The series will be held from September to January and repeated from February to June. Announcement of the series is made in the spring with dates and details for applying.

- ◆ **Mentoring for NIH Leadership Development**—This program is for extramural staff with 5 or more years of experience. Grants management and contracts management staff will be included with ESAs for this program. Participants must have a strong desire and demonstrated potential to become a leader at NIH. Selection will be based on supervisory recommendation and examination by OEP staff of the applicant's CV and a written statement by the applicant. Completion of all other required ESA training is mandatory.

For more information, contact extramural staff training officer Dr. Chuck Selden on 435-8685. ■



Signs were recently installed at the David P. Rall Bldg. on the campus of NIEHS to designate the building as such. Rall was a scientist at the National Cancer Institute before joining NIEHS as its second director in 1971. NIEHS is located in Research Triangle Park, N.C.

New Law May Affect Your Retirement Benefits

On Sept. 19, 2000, the President signed legislation that may affect you. The Federal Erroneous Retirement Coverage Correction Act (FERCCA) provides relief to employees who were in the wrong retirement plan for at least 3 years of service after Dec. 31, 1986.

If you have never been told that you were in the wrong retirement plan, you may be in the wrong plan and not know it. Despite agencies' extensive efforts to find and correct retirement coverage errors, there are still some employees in the wrong retirement plan. If this is you, or if you think this law may apply to you, you need to contact your personnel office to get more information. Your personnel office can look through your official personnel folder and make a determination as to whether or not you are in the right retirement plan.

If you want to find out more information about FERCCA, you may go to OPM's FERCCA web site at www.opm.gov/benefits/correction. ■

Volunteers Needed for Diabetes Study

The Cardiology Branch, NHLBI, is recruiting persons with non-insulin dependent diabetes for a 2-day outpatient study. Volunteers should be otherwise healthy. Participants will be paid. Call 496-8739.



NIDCR's Dr. Alice Horowitz received the John W. Knutson Distinguished Service Award in Dental Public Health at the American Public Health Association (APHA) meeting held recently in Boston. The Knutson award is given to those who "have made an outstanding contribution to improve oral health in the United States." Horowitz received a commemorative silver plate and a check from Colgate Oral Pharmaceuticals, a sponsor of the award. A health promotion researcher in the NIDCR Office of Science Policy and Analysis, Horowitz has served as a teacher and mentor to many in public health dentistry. Known for her work on dental caries prevention in schools and communities, she is the institute coordinator for the upcoming NIH consensus development conference on dental caries.

OER's Kelley Retires After More than 28 Years

Gary Kelley, who served NIH in senior contracts positions for more than 28 years, retired from the federal government on Jan. 12.

He began his federal career at NASA, where he was cited by President Richard Nixon as one of the individuals who contributed to America landing men on the moon and returning them safely to Earth. When the Apollo program ended in 1972, Kelley left NASA to work with the Division of Technological Applications in the heart institute at NIH. After heading the contracts office in NIDR, he moved to the cancer institute where he headed the contracts sections supporting NCI's Division of Cancer Control and then NCI's Division of Cancer Treatment.



Gary Kelley

In 1984, he was selected director, Division of Procurement in OD where he implemented what was one of the first decentralized and automated procurement initiatives in the federal government, DELPRO. Kelley then served as assistant director, associate director, deputy director and then acting director of the Office of Contracts and Grants in OD. He was cited by then Vice President Gore as one who made government work better and cost less.

Last year, he moved to the Office of Extramural Research, where he worked with Staff Training in Extramural Programs (STEP) and extramural scientist administrator training programs.

Kelley worked extensively with kids through youth sports programs in Montgomery County. Along with his many coaching and leadership activities, he was commissioner of the Rockville Football League, and was cofounder and first president of the Montgomery Youth Lacrosse Association. ■

Postpartum Depression Study

The Behavioral Endocrinology Branch, NIMH, is seeking female volunteer mothers ages 18-40 who: have had one or more past episodes of postpartum depression following a full-term pregnancy, have no current symptoms of depression, must be 6 months post-delivery and not lactating, must be medically healthy and medication-free. Volunteers may be asked to participate in a 6-month protocol investigating the effects of ovarian and stress hormones on brain and behavior. Payment is provided for those who complete the study. For more information call Linda Simpson-St. Clair, 496-9576. ■

Intern Program Seeks Applicants

Consider becoming a leader for the 21st century! Looking for an opportunity to change jobs or career paths, meet new people, enhance your career potential, learn new skills? That's what the NIH Management Intern Program is all about.

Recruitment is open from Feb. 12 through Mar. 12. The application process will be online at <http://internships.info.nih.gov>.

The program—now lasting 2 years instead of 1—uses entry-level career development training designed for talented men and women who have a clear interest in and commitment to a career in public service. Via rotational assignments, interns learn about potential administrative career tracks, i.e., grants and contracts management, general administration, human resources management, budget, legislation, information technology, EEO, human resource management, public affairs, legislative analysis and program/management analysis. Recently graduated interns include VerLyn Francisco, Allyson Browne, Wendy Hadfield, Julie Townshend, James Washington, Jason Donaldson and Presidential Management Interns Kelly Green Kahn, Tamara Oyola, Cynthia Vinson and Matt Longabaugh.

Detailed program information will be provided at the sessions listed below.

MI Information Session Schedule

(All times are 11:30 a.m. to 1 p.m.)

Date	Location
Feb. 7	Rockledge II, Rm. 9104/9100 6701 Rockledge Dr.
Feb. 8	Neuroscience Center, Conf. Rm. D 6001 Executive Blvd.
Feb. 13	Executive Plaza North, Conf. Rm. C 6130 Executive Blvd.
Feb. 14	Natcher Bldg., Rm. F1/F2
Feb. 15	Bldg. 10, Rm. 2C116 (Medical Board Rm.)

For more information call 496-2403.

Adults Needed for Study

College-educated, middle-aged adults are needed for a 2-day outpatient study at NIMH. Involves blood draw and routine clinical, neurological and cognitive procedures. A stipend is available. Inquire at 435-8970. ■

Randall Robinson To Speak at NIH, Feb. 23

TransAfrica President Randall Robinson will be the keynote speaker at NIH's annual Black History Month Observance on Friday, Feb. 23 at 11:30 a.m. in Masur Auditorium, Bldg. 10. ■

NINDS Retiree Lansdell Is Mourned

By Shannon E. Garnett

Dr. Herbert "Herb" Charles Lansdell, psychologist and former health scientist administrator in the Division of Fundamental Neurosciences, NINDS, died on Oct. 3 in Montreal, Canada, of ongoing complications from multiple system atrophy (Shy-Drager disease).

Lansdell joined NINDS in 1958 as chief of the section on clinical psychology in the Surgical Neurology Branch. In 1970, he moved from NINDS's intramural division to serve in the extramural community, becoming an HSA. His many contributions to the institute include identifying the brain areas that should not be removed during surgery for epilepsy.

According to Dr. F. Terry Hambrecht, special consultant to NIDCD on implantable auditory prostheses and former director of the NINDS Neural Prosthesis Program, Lansdell worked with Dr. John Van Buren, a former NINDS neurosurgeon, during epilepsy surgery in humans. Lansdell developed a series of tests that he administered to the patients while Van Buren probed the brain's cortex with electrodes prior to removing epileptic areas in the brain.

"The surgery was done while the patients were awake and under local anesthesia so the patients could provide verbal responses to Herb's questions," said Hambrecht, who worked with Lansdell at NINDS for many years. "When Dr. Van Buren probed the speech area of the brain, the tests revealed an area that is generally avoided for fear of causing permanent damage to the patients' ability to speak. Many people owe their ability to speak to Herb's tests."

Lansdell was born Dec. 22, 1922, in Montreal. He earned his bachelor of science degree in 1944 from the Sir George Williams Evening College (now Concordia University), and his Ph.D. in 1950 from McGill University, both in Montreal. From 1944 to 1945, he served in the Royal Canadian Navy.

He began his career in 1949 as a lecturer at Sir George Williams Evening College and as an assistant professor at McGill. A year later he became a defense research scientific officer at the Defense Research Medical Laboratories in Toronto. Before coming to NIH, Lansdell served as an assistant professor at the University of Buffalo from 1954 to 1958. He became a U.S. citizen in 1961.

"Herb was one of the first persons at NINDS to tap into the big computers in the NIH Computer Center (now CIT) via telephone lines," said Hambrecht. "He had great patience and would do anything for you. These traits soon led to his becoming an 'unofficial' resource for other NINDS employees who wanted to learn how to use Wylbur and other early services offered by the center."

Lansdell retired in 1996 after 38 years of service



Dr. Herbert Charles Lansdell, with his wife Franga Stinson-Lansdell

with NINDS, but remained with the institute as a guest researcher until 1998, when he moved back to his home town of Montreal to serve as a visiting scientist in the department of psychology at McGill.

Throughout his career, Lansdell's fascination with the brain led him to author or coauthor numerous scientific papers and book reviews. He also had a keen ability to interpret and create research studies in neuroanatomy and on the interrelationships of the brain.

He is survived by his wife Franga Stinson-Lansdell and his sons from a previous marriage, Grant Lansdell of Illinois and Bret Lansdell of Virginia. ■

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>.

Introduction to XML	2/13
Introduction to ISPF	2/13
Using Linux	2/13-15
Budget Tracking	2/14
Data Warehouse <i>Analyze</i> : Budget & Finance	2/14
Network Sniffer Workshop	2/14-16
Meet Your PC - What's Inside the Box	2/15
Creating Presentations with PowerPoint 2000	2/15
Installing Linux	2/16
Advanced Features of HTML	2/21
Macintosh Tips and Techniques	2/21
Remedy - Customer Service Tool	2/22
Advanced Presentations with PowerPoint 2000	2/22
Data Warehouse <i>Analyze</i> : Human Resources	2/22
Avoiding Pitfalls in Statistical Analysis I	2/23
Creating Presentations with PowerPoint 2000	2/23

Are You Overweight?

The Uniformed Services University weight management program is looking for healthy nonsmoking women ages 18-55 to participate in a weight management program as part of a research study examining factors affecting weight maintenance. The program meets weekly for 3 months with followup extending to 2 years. If interested, call Elena Fichera at (301) 295-9664. ■

Calling Computer Users

Do you work in an office environment full time? Do you work on a computer at least 4 hours a day? Are you between 20 and 67 years of age? If you answered yes, you are needed for a research survey study about computers, work and health. Volunteers with symptoms of pain, numbness or tingling in their fingers, hands, wrists, forearms, elbows, shoulders and/or neck and volunteers without any symptoms are needed for the study. You will be asked to complete 1-3 surveys online; questions are related to work and health. Participants will be compensated. For more information, go to www.work-health.net or call Stacey at (202) 687-2392.

Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—features Dr. Marcia Angell on Feb. 14, who will give the NIH Alumni Association's annual James A. Shannon Lecture on "The Ethics of Clinical Trials." She is a lecturer in social medicine, Harvard Medical School.

On Feb. 21, Dr. Laura L. Kiessling, professor, departments of biochemistry and chemistry, University of Wisconsin, will speak on "Tuning Signal Transduction with Synthetic Ligands."

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

NCI Staff Volunteer in Frederick Schools

The Elementary Outreach Program at the National Cancer Institute-Frederick is back in action for another school year. This program provides elementary school students supplemental, hands-on science training from NCI staff who work in Frederick.

Currently, 33 NCI volunteers are participating in the 2000-2001 program and have already completed several teaching assignments. Sessions run throughout the school year, with the last sessions usually given in late May or early June.

NCI volunteer teams provide science enrichment programs, sharing with students expertise and equipment that is not normally available to elementary schools. The lessons complement the school curriculum and are coordinated with the administrators of the school and the school system.

The opportunity for NCI to enlighten students about careers in scientific research is an important aspect of the program. NCI volunteers are from both administrative and scientific backgrounds, so the students learn that there are also careers in science for nonscientists.

The 1999-2000 school year was the first year a full program was presented at Hillcrest Elementary School, covering every class for grades 1 through 5. In addition, the volunteer teams presented their modules at several other Frederick County elementary schools. Although NCI's outreach staff are unable to make full presentations to all classes at every grade level, the 30 volunteers did spend more than 800 hours in service to the elementary schools last year.

Dr. Michael Dean, chief of the human genetics section, Laboratory of Genomic Diversity, NCI, started the Outreach Program as an informal partnership 10 years ago when his son was a student at Hillcrest Elementary. Because the children and teachers were so enthusiastic about the program, he continued to visit third-grade students year after year. During the 1997-1998 school year, NCI-Frederick became involved with the program at Dean's request. The program has since expanded and developed into a formal partnership with the Frederick County Public School system.

Dr. Marjorie Strobel, scientific operations manager of NCI-Frederick, fully supports the outreach. Besides providing funds, she teaches third-graders about marine algae and oceanography.

"The response of the NCI-Frederick community has been overwhelming," said Dean. "We have had dozens of volunteers, including scientists, librarians, engineers, security personnel and veterinarians. It is great for the students to see the variety of careers associated with science that are out there. Sometimes I am not sure who has more fun, the instructors or the students." ■

NIAMS' Kastner Receives Two Awards

Dr. Daniel L. Kastner, chief, genetics section, Arthritis and Rheumatism Branch, NIAMS, was recently awarded the Lee C. Howley, Sr. Prize for Arthritis Research; it was presented in Orlando by the Arthritis Foundation at its yearly national meeting. The award recognizes researchers whose contributions during the previous 5 years have represented a significant advance in the understanding, treatment or prevention of arthritis and rheumatic diseases.

Kastner has also been awarded the Paul Klemperer Award and Medal, and he gave the Paul Klemperer Memorial Lecture. These honors are presented annually by the New York Academy of Medicine to an individual for outstanding scientific achievements and contributions to the study of connective tissue and their diseases.

Kastner's achievements include cloning the gene



Joining Dr. Daniel Kastner (second from r) with the Howley prize are Don L. Riggan (l), president and CEO, Arthritis Foundation (AF); Dr. Margaret Beckwith, Kastner's wife; and William J. Mulvihill (r), chair, AF.

responsible for familial Mediterranean fever (FMF), an inherited condition (hallmarked by joint inflammation and episodic fever) that is seen commonly in people of Jewish, Arab, Armenian, Turkish and Italian ancestry. Kastner's group also identified the genetic basis of a dominantly inherited periodic fever. The disorder was originally designated as familial Hibernian fever, because it was first observed in people of Irish descent. It has been renamed TRAPS (tumor necrosis factor receptor-associated periodic syndrome) to reflect the common aspects of the disorder in families of diverse ethnic backgrounds.

Additionally, Kastner made important contributions to understanding the genetic basis of cystinuria, a rare, inherited disorder that can sometimes cause kidney stones. He has also contributed to the understanding of the underlying genetic structure of the human population. He is now continuing his studies of FMF and TRAPS. ■