

THE NIH RECORD

Still The Second Best Thing About Payday

'First Order' Wisdom Meets
'Second Order' World

Once Declared Meaningless, Race Still Influences, Says Duster

By Rich McManus

If race lost its biological significance 6 years ago (when UNESCO issued a Statement on Race declaring that the concept has "no legitimate place in biological science")—at least among so-called "first order" society (the cognoscenti whose code languages are known chiefly within certain professions)—

then someone better alert the rest of the world, which is comprised largely of "second-order" folks; those who aren't yet hip to first-order doings.

That's putting rather simply an argument that New York

Dr. Troy Duster

University sociologist Dr. Troy Duster warned was "complex, serious and contentious" in a talk given May 9 as part of the NIH Director's Wednesday Afternoon Lectures. Titled, "Buried Alive! The Concept of Race in Science," Duster's lecture cautioned that, although molecular biology and genomics inform us that race is trivial at the level of base-pairs of DNA, that same science is being used—almost diabolically—to recategorize people into identifiable groups, especially by forensic crime laboratories. Thus, while race has been officially pronounced dead, it is nonetheless sneaking back into the picture in ways that are perhaps culturally programmed, not necessarily scientific.

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Starting from Scratch

Dean Charts New Institute's First Course

By Carla Garnett

Charles Campbell designs plastic hinges. Not just any hinges, though. Campbell's hinges are delicate, yet durable. They're so flexible that they move like human joints, so supple they look like human skin. He wonders if there may be a way to use the hinges for something besides the toys and dolls he makes. Would the hinges even be safe or effective in people?

Enter NIH's new National Institute of Biomedical Imaging and Bioengineering (NIBIB), established by Congress last December and officially announced in April. According to acting NIBIB director Dr. Donna Dean, the hypothetical Campbell's invention—and the thousands more innovative engineering and imaging ideas with potential medical applications—will be just the sort of research NIBIB will seek and support.

"NIBIB will fill in niches and open opportunities that don't currently exist at NIH," said Dean, who has served as a senior scientific advisor in the Office of the Director for the last 3 years. "The institute is a chance to develop such sciences as physics,

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Power of Celebrity

'Today's' Couric Praised as Great Communicator

By Rich McManus

Katie Couric is an unusually beautiful woman—several degrees more attractive in person than she appears on television's hard, flat screen—and she brought out an unusually warm and enthusiastic response from a turn-away crowd that came to Masur Auditorium May 18 to see her accept the National Cancer Institute's second annual Extraordinary Communicators Award.

Couric's "aw shucks" self-regard, her sense of humor, and her warmth toward those around her—she even remembered a stairway encounter with an individual who rose to question her at the end



Katie Couric playfully pinches cheek of NCI deputy director Dr. Alan Rabson.

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NIH Observes Employee Fitness Day

More than 600 health-conscious employees attended the first-ever observance at NIH of National Employee Fitness Day, sponsored by the Recreation & Welfare Association, the National Institute on Aging, and the OD EEO office.

"It was a delightful day of food, festivities and learning about fitness and recreational activities," said Randy Schools, president of R&W.

Held on the lawn in front of Bldg. 1, the event included judo demonstrations, country line dancing and salsa instruction, yoga exercises, video analysis of one's golf swing, and special guest appearances by professional bodybuilder Yaz Boyum, and by Margaret Richard, host of the PBS show *Body Electric*; she is also the star of NIA's videotape *Exercise with the National Institute on Aging 50 Plus*.

Visitors also learned about safe bike routes to NIH from members of the Bicycle Commuter Club, found out how to select the proper tennis racket, got tips on film and cameras for holiday photo-taking, and were advised about about skiing and sailing opportunities from club members here.

As music provided by deejays from Hot 99.5 FM played in the background, guests could sample vegetarian chili provided by Hard Times Café and items from Eurest Catering.

Schools says he is already building fresh concepts for next year's observance of Employee Fitness Day. "I've already had a request to offer a flyfishing demonstration," he said.

PHOTOS: BILL BRANSON



NIDDK's Dr. Kenneth Kirk (l) gets instruction on his golf swing from pro Mark Diley, who teaches the R&W-sponsored golf class in the 14th floor assembly hall in Bldg. 10.



Helen Branson (l) of NHLBI shares a laugh with Yaz Boyum, a professional trainer, fitness instructor and 24th-ranked bodybuilder in the International Federation of Body Builders' female rankings.



Margaret Richard, host of the popular PBS aerobic show *Body Electric*, looks like she may be saying, "You...are the weakest link!" to a prone employee, who in reality is learning how to exercise appropriately.



Dr. Thomas E. Malone (l), 75, who was NIH deputy director from March 1977 to August 1986, demonstrates judo. Olivia Fitzpatrick (r), an intern in the Clinical Center's nutrition department, offers diet advice.



Kevin Fox (l) instructs fellow NIH'ers in salsa dance steps at Employee Fitness Day. They include (from l) Karen Leighty, O.H. Laster and Dennis Askwith (in cowboy hat—he is a country line dance instructor, too).



Dr. Paul Wagner has joined the Center for Scientific Review as scientific review administrator for the new skeletal and muscle biology study section. He comes to CSR from NCI's Laboratory of Biochemistry, where he began his NIH career 17 years ago. His first 4 years at NCI were spent conducting basic research on proteins (myosins, actins, etc.) related to muscle contraction and cell motility as an established investigator for the American Heart Association. He then directed NCI research on the mechanisms of cell motility, tumor metastasis and neurotransmitter secretion. Before coming to NIH, he was an assistant research biochemist at the Cardiovascular Research Institute at the University of California, San Francisco. He has published more than 50 articles in scientific journals.

TROY DUSTER, CONTINUED FROM PAGE 1

Duster put the contradiction this way: If race is no longer relevant, why the spate of scientific papers linking certain characteristics of DNA to specific races? "You have science and race divorced on one hand, and the ethnic and racial implications of DNA gaining importance on the other, to the point that certain drugs are being targeted to specific DNAs," he said, citing the FDA's recent approval of NitroMed Inc.'s plan for a drug trial that will exclusively recruit blacks.

Duster invited the audience to share in his confusion over apparent contradictions. He observes that there is a "remarkable consensus developing across the political spectrum...all clamoring for an end to race as a concept." To those on the left, the race-is-dead argument reinforces that class, not race, is the core issue; to the right, it justifies attacks on affirmative action; and to the center, it reinforces the idealization of color blindness. But like some sort of resilient pathogen, race resists the grave; Duster says society tends to find "new proxies for race, or a way of putting old wine in new bottles."

Back when molecular biology was just developing as a field, there was an easily reached consensus on public health issues, particularly regarding infectious diseases, he said. Everyone agreed that smallpox, cholera, typhoid fever and the like needed to be eradicated. But the new science began undermining

Duster says society tends to find "new proxies for race, or a way of putting old wine in new bottles."

assumptions as gene disorders underlying some diseases became better understood. Suddenly, the question, "What is the general public interest?"—so easy to answer in the past—began to fracture the consensus. Duster used as an example comparatively recent work on genetic markers for cystic fibrosis. "Of some 230 markers for CF, which ones do we screen for?" he asked. "The markers aren't the same in different populations." His slide showed that one marker—delta F 508—catches more than 90 percent of the cases in Caucasians and Jews, but is far less reliable in Hispanics, blacks, Asians and Zuni Indians. He also conceded that CF is comparatively rarer in those populations, as well. But he was analyzing trends and tendencies, not pointing fingers.

It is troubling to Duster that SNPs—single nucleotide polymorphisms—are gaining use on chip technology as a way of ascertaining racial or ethnic membership. He hinted that just as a one-letter change can be life-altering in the case of some illnesses, so too can such apparent triviality alter the way humans deal with one another. It is ominous to Duster that in the United Kingdom, law enforcement authorities boast that a check of only 7 or 8 genetic loci can predict with 85 percent accuracy whether a

suspect is from Caucasian or Caribbean ancestry. He is troubled that in Louisiana, where only sex offenders were subject to DNA recordkeeping 15 years ago, DNA samples are now routinely collected from all arrestees.

"SNP profiling of all sex offenders is coming," he predicted. "Already, 29 states require tissue samples be retained from convicted felons. The significance of this is as follows: Most law enforcement people provide the rationale for collecting DNA samples as being only for identification. So, all they need are the non-coding regions of the DNA. But tissue samples contain coding regions, and so have information about possible gene disorders or susceptibility, and a whole host of other factors/uses that go far beyond simple identification."

Duster thinks DNA profiling "will eventually extend to rapists, then murderers. Patterns will emerge with a spurious link to race...This is the moral equivalent of phrenology for the 21st century."

He cautioned, "I'm not trying to rescue an old concept called race; I'm just warning about proxies that stand in for race...There are serious matters of social stratification that are simply not on scientists' radar. And I don't have any final answers."

Even NIH's effort to probe health disparities in different populations can be a dangerous undertaking, he warned; an effort will be made, under the guise of good intentions, to create SNP profiles of black males eventually, he forecast.

"We can't just say no to race because it reemerges in subtle ways," Duster said. "I'm arguing for a tightrope walk, a balancing act. Race is there—often buried—but I assure you it's alive." □

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NIAID Researchers Develop Crohn's Treatment

By Jeff Minerd

Crohn's disease didn't slow Jane down at first. Prescribed drugs subdued her symptoms. A bright and energetic teenager, she excelled in high school and was accepted to Cornell. But during her college career the medication stopped working. Her pain grew worse. Her weight dropped to 89 pounds. Lacking the energy to study, she contemplated quitting school.

Jane's story is typical of many people with Crohn's disease, an autoimmune disorder of the bowels that affects about 500,000 Americans. "This condition frequently strikes people in their 20s who are just beginning their lives and careers," says Dr. Warren Strober, an immunologist at the National Institute of Allergy and Infectious Diseases.

Strober and his colleagues Drs. Ivan Fuss and Peter Mannon are working on a treatment for Crohn's disease. A partnership with the company Genetics Institute is moving this treatment from the lab to the bedside: It is being tested in patients at the Clinical Center and at other medical centers nationwide.

In Crohn's disease, the immune system appears to attack the digestive tract as if it were foreign tissue, causing abdominal pain, cramping, diarrhea and rectal bleeding. The beleaguered digestive tract doesn't absorb food properly, and disease-sufferers can lose weight and lack energy. In the worst cases, the immune system's overly aggressive T cells bore holes in the digestive tract, necessitating surgery.

Although the roots of Crohn's disease are likely genetic and environmental, the exact cause is unknown, so conventional drugs aim to curb symptoms rather than fix the underlying problem. Experiences with patients like Jane motivated the NIAID researchers to search for a better treatment. When Jane sought their help, Strober and Fuss didn't have many options at their disposal. None of the usual steroids or immunosuppressive drugs worked.

The doctors finally tried Remicade, a drug used only in the most difficult cases. Remicade reduced Jane's symptoms enough for the other drugs to handle them. Her pain lessened. She regained her lost energy and weight. She finished college and went on to graduate school. Despite her ordeal, Jane was lucky. Remicade works in only about two-thirds of patients.

"For some patients, there is no satisfactory way to deal with the condition," says Strober. "They simply have to suffer with it."

"Clearly, there is room for something better," says Fuss.

That "something better" may be anti-interleukin-12 therapy, an approach developed by Strober, Fuss and Mannon. Based on decades of basic research into the immunological characteristics of Crohn's disease, this treatment comes closer to eliminating

the cause, rather than suppressing symptoms.

Studying mouse models of the disease, Strober and Fuss turned up a key piece of information: in the animal's digestive tract, the immune system overproduced a cytokine, or "messenger molecule," called interleukin-12 (IL-12). Establishing a connection between IL-12 and Crohn's disease was important because IL-12 is known to help stimulate inactive T cells to become aggressive Th1 cells. In Crohn's disease, these Th1 cells damage the digestive tract. Strober and Fuss went on to show elevated IL-12 levels in humans with Crohn's disease.

The researchers reasoned that blocking the IL-12 signal might reduce the number of Th1 cells and prevent the harmful effects of Crohn's disease. To that end, they experimented with a synthetic antibody called anti-IL-12, a molecule that binds to and inactivates IL-12. The researchers treated mice with anti-IL-12 and found that not only did it prevent the disease from occurring, it also healed active disease.

"It completely healed the mice within days," says Strober. "It was an amazing breakthrough."

Anti-IL-12 didn't just prevent inactive T cells from converting to Th1, it also eliminated the active Th1 cells already wreaking havoc in the digestive tract. The researchers discovered that once a Th1 cell is activated by IL-12, it needs a continuous supply of the chemical to survive. With natural IL-12 blocked, these cells die off. "This extra benefit of anti-IL-12 therapy, which strikes closer to the root of the disease, is what makes it especially promising," says Fuss.

NIH licensed a patent for anti-IL-12 therapy to the pharmaceutical company Genetics Institute. NIAID researchers have teamed with the company to investigate whether anti-IL-12 therapy will work in humans. In late 2000, the company began a phase I/II safety and efficacy trial with the goal of enrolling 80 patients at 12 centers nationwide, including the Clinical Center. The trial will measure the effect of two doses of anti-IL-12 on patients with severe-to-moderate Crohn's disease.

The biggest challenge will be observing whether or not anti-IL-12 affects individuals differently, says Mannon, who is conducting the NIH trial. Laboratory mice are biologically and genetically similar to one another, but the people enrolled in the clinical trial will be much more diverse. "In animal models, the therapy looked extremely effective, almost like a magic bullet," he says. "But in human beings, the results may vary. The challenge will be to identify any biological factors that predict a person's response."

This trial is still open. Those interested in participating can call the NIH patient recruitment line at 1-800-411-1222 for more information. ■



Dr. Robert Freund has joined the Center for Scientific Review as scientific review administrator of the experimental virology study section. He was at Harvard Medical School for 9 years, completing a postdoctoral fellowship and serving as an instructor and then an assistant professor of pathology. He studied molecular virology and tumor induction using polyomavirus in mice. Freund spent another 8 years at the University of Maryland at Baltimore, where he was an assistant professor in the department of microbiology and immunology. Continuing his polyomavirus research, he studied signal transduction and cell cycle control. He published numerous journal articles and completed a term on the editorial board of the Journal of Virology before coming to NIH.

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engineering and math in biomedical research supported by NIH. We see tremendous potential in areas such as materials and device development. There are a lot of intriguing research questions scientists can ask with the establishment of this new institute."

Uncharted Territory

When the President signed the legislation on the last business day of 2000, NIBIB became the 27th independent component of NIH. Immediately it gained a unique place in NIH history: NIBIB is the first modern IC created at NIH without a pre-existing infrastructure. For example, when the National Center on Minority Health and Health Disparities was launched at about the same time last year, its foundation already had been laid by the Office of Research on Minority Health. Similarly, when the National Institute on Deafness and Other Communication Disorders and the National Institute of Arthritis and Musculoskeletal and Skin Diseases were born, major components of the new entities were drawn from veteran institutes NINDS and NIDDK, respectively.

In contrast, NIBIB gained instant institute stature, beginning essentially with a blank slate—and several years of expectations from the radiology imaging and bioengineering scientists' groups that petitioned Congress for the addition to NIH's family.

"For many, many years—20, at least—radiology societies had been interested in establishing an institute on imaging," recalls Dean, who helped implement the recent legislation creating NIBIB. "In the last 5 years or so, they expressed renewed interest."

In fact, in 1995 the Academy of Radiology Research—a group of more than 20 imaging professional societies—was formed specifically to work towards establishing an NIH institute devoted to the imaging discipline. A similar organization for medical engineers, the American Institute for Medical and Biomedical Engineering, joined the quest.

On its own, NIH had recognized the potential for an expanded, cross-cutting component on bioinformatics, imaging and engineering. In 1997, then-NIH director Dr. Harold Varmus formally created the Bioengineering Consortium (BECON), which consists of senior-level representatives from each IC, in addition to staff from other federal agencies concerned with biomedical research and development. NIH acting director Dr. Ruth Kirschstein sought to expand such efforts and intended to elevate the work to a component of the



As acting director of the brand new National Institute of Biomedical Imaging and Bioengineering, Dr. Donna Dean says her days now include "a lot of enthusiasm and brainstorming, and a lot of deadlines."

Office of the Director that was to be called the Office of Bioimaging, Bioengineering and Bioinformatics ("OB-cubed," familiarly). Establishment of the entity had been a topic of discussion at biennial meetings of the advisory committee to the NIH director for several years, and was already written into NIH's budget request for fiscal year 2001.

Building an Institute

So, how does one build an institute from the ground up?

"You've got to be careful if you don't know where you're going, because you might not get there," Dean quips, lifting a Yogi Berra-ism. "That's my planning quote. We have to have a vision—even if it's only a preliminary one—to guide us in these early stages. I don't want to fall into having no view or vision of what we're going to do. Right now, we have several parallel activities under way—establishing an advisory council and writing a charter for it, recruiting a permanent director, and setting up such internal administrative functions as hiring executive and administrative officers, staff to handle disbursing the budget and health scientist administrators to work with the grants portfolio."

For the past 2 months, Dean says she has been giving talks and briefings on the new institute.

"There's considerable interest in having NIBIB representatives speak at professional meetings," she says. And while the groups have eagerly anticipated the creation of NIBIB, she notes, they haven't been applying a great deal of pressure for quick results. "They understand the complexities of getting something new up and running."

A current priority is developing the justification for the fiscal year 2002 budget request that all ICs present to the congressional appropriations committee every spring, and then responding to the resulting questions. The President asked Congress to appropriate \$40.2 million of new money for NIBIB in fiscal year 2002. At the moment, NIBIB has just 3.5 full-time employees to handle the multitasking.

One building block for the new institute is BECON, which has developed critical new grants mechanisms such as the bioengineering research partnership grants.

"Creating an intramural research entity is not on the front burner at the moment," acknowledges Dean, who came to NIH as a research chemist in biochemical endocrinology following postdoctoral work at Princeton University. In addition, she stresses, disease-specific bioimaging and bioengineering research will stay where it is, among the individual ICs. A task force of IC directors has been appointed to identify existing grants that should be moved to the new institute.

Dr. Dick Swaja and Mollie Sourwein, who operate BECON under the Office of Extramural Research,

now manage the consortium for NIBIB. NIDDK's Dr. Joan Harmon is on a part-time detail assignment to the new institute.

In Her Element

Although it's clear her hands are full, what's also clear is that Dean seems to be enjoying every hectic, action-packed minute.

"My days are unpredictable," concludes Dean, who says she relies heavily on her recent experience as NIH's liaison to the Congressional Commission on the Advancement of Women and Minorities in Science, Engineering and Technology Development. "There's a lot of enthusiasm and brainstorming, and a lot of deadlines. The institute has been received very well so far and I've enjoyed a lot of support both inside and outside NIH."

"Dealing with the entire breadth of NIH gives you an appreciation for what NIH does and all the areas of science it covers," she continues, recalling her 15 years of experience in the scientific and administrative management of the agency's initial peer review process. "It has enabled me to see patterns and witness the cross-cutting interaction among the institutes. I think that's where NIBIB's place will be in 5 years or so, when everything's running smoothly and it's generating new and varied research opportunities and initiatives. I have found myself quoting something Dr. Kirschstein has often said, 'We do not think that we can differentiate between science that is relevant to health and science that is not.' We need all the disciplines to help us move toward better health for everyone." ■

Two Named to Philosophical Society

NIAID director Dr. Anthony Fauci and NHLBI Nobel laureate Dr. Marshall Nirenberg, chief of the Laboratory of Biochemical Genetics, have been elected to the American Philosophical Society, the oldest learned society in the United States, having been founded by Benjamin Franklin and his associates more than 250 years ago.

Today it is an international organization that promotes excellence and useful knowledge in the sciences and humanities through scholarly research, professional meetings, publications, library resources and community outreach.

Thirty-eight American members were elected to APS, as well as nine foreign members at the society's recent annual meeting in Philadelphia. The society now has 868 elected members, 728 from the U.S. and 140 from more than two dozen foreign countries. Early members included George Washington, John Adams, Thomas Jefferson and James Madison.

NEI Hosts Conference on Ocular Toxoplasmosis

NEI recently hosted a conference on ocular toxoplasmosis at the Lawton Chiles International House. Scientific and clinical experts from the United States, Europe, Africa and South America assembled to discuss research activities and disseminate information on ocular toxoplasmosis, and to build a framework for future research and therapeutic development.

Chairing the workshop was NEI's Dr. Charles E. Egwuagu, chief of the molecular immunology section, Laboratory of Immunology. The workshop was cosponsored by the NIH Office of Rare Diseases.

Ocular toxoplasmosis is a potentially blinding inflammatory eye disease that occurs in approximately 1-3 percent of individuals infected by the parasite *Toxoplasma gondii*. Transplant patients, patients with AIDS and those undergoing cancer chemotherapy are at increased risk of developing ocular toxoplasmosis. The disease is characterized by damage to optical tissues. Resolution of the infection may require several weeks or months, and unfortunately is followed by a sight-impairing scarring.

Leaders at the conference discussed recent molecular, epidemiologic and basic biological studies that suggest a paradigm shift in our understanding of the natural history of the disease. The conference concluded with the development of guidelines for diagnosis and clinical management of ocular toxoplasmosis. An international working group was also established to study the epidemiology of the disease in sub-Saharan Africa and Brazil and to genotype *T. gondii* strains endemic to these regions.

"Overall, the conference was a remarkable success," said Egwuagu. "It fostered a spirit of international scientific collaboration among the participants and brought needed clinical and scientific attention to this potentially blinding disease." ■

Tear Study Needs Healthy Women

NICHD and NEI are seeking healthy women, ages 30-42, to participate in a study determining the function of the eye in tear production. You may be eligible if you are not taking drugs including birth control pills, have no eye conditions, no irregular menstrual cycles, and do not wear contact lenses. Only one 2-hour outpatient visit is required and compensation is provided. Call Shirley Grieshaber at 435-1833. ■

Healthy Overweight Women Needed

The Uniformed Services University weight management program is looking for healthy nonsmoking overweight 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. In addition, applicants should not be pregnant, have problems with thyroid, kidney or heart disease, diabetes or uncontrolled hypertension. If interested call (301) 295-9664.



Dr. Charles E. Egwuagu

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of her talk—produced ample good feelings in the hall, elevating the occasion beyond mere acceptance of a professional honor. Her playfulness with her hosts—at one point she pinched NCI deputy director Dr. Alan Rabson's cheek while both posed for a photographer—bespoke the ease that makes Couric such an appealing and successful television journalist: she brings out the people in people.

It wasn't an altogether easy occasion, either. Three years ago, Couric endured the wrenching trial of losing her husband to colorectal cancer, a battle during which she had to appear on television morning after morning, "pretending that everything was okay at my house." In the aftermath of that ordeal, she helped launch the National Colorectal Cancer Research Alliance (NCCRA), and has become a public spokesperson for the need to be screened for the disease. She even underwent the procedure herself on the *Today* show, and helped

PHOTOS: BILL BRANSON

"Colorectal cancer is the number two killer of men and women in this country. Granted, it might not be first-date conversation, but there's no reason that (screening) can't be discussed openly and candidly."

Couric cracks up listening to an extended introduction by NCI deputy director Dr. Alan Rabson, who said Couric "has probably saved more patients than I have, and she's only just getting started." Looking on is NIH acting director Dr. Ruth Kirschstein.

launch a 5-part series on "Confronting Cancer."

"I'm so happy to be here at the National Cancer Institute," she opened. "Cancer takes far too many lives every year." She honored the memory of Eleanor Nealon, after whom the NCI award is named, calling her "gutsy, smart, passionate and compassionate...I am honored to be given an award that bears her name." Couric's cancer advocacy, she stated, "is professionally the most gratifying thing I've ever done." But it's had an unforeseen cost.

"People can't resist sharing intimate information with me about their colons," she deadpanned. "I've even gotten photos detailing all the nooks and crannies—that's always a treat. I've become the pinup girl for gastroenterology... sometimes it gets to be TMI—too much information."

She gets many letters from the public, and read one from a man who self-diagnosed his own colon cancer after reading the Couric family's story in *Time* magazine. The author had con-



NCI director Dr. Richard Klausner presents Couric with a globe-shaped crystal bowl, suggesting the breadth of her influence as a communicator.

cluded, "I feel I owe my life to you." Couric said, "It doesn't get much better than that in the fan mail department."

She briefly recounted the swift course of her husband's disease, which struck without much warning in April 1997 and was fatal within 9 months. Couric made herself a quick expert on colorectal cancer, consulting a variety of cancer centers and medical journals. "Al Rabson was one of my very best worker bees," she said. "His caring and compassion were very valuable to me...His wife (NIH acting director Dr. Ruth Kirschstein) is way cool, too. I hope she doesn't mind that his office is covered with photos of me."

Couric's tragedy launched her on a mission: "I set out to save the colons. Colorectal cancer is the number two killer of men and women in this country. Granted, it might not be first-date conversation, but there's no reason that (screening) can't be discussed openly and candidly. After all, there's a 92 percent cure rate if it's detected early enough."

To alleviate public fears of the screening—accomplished by a small flexible scope—Couric volunteered for the procedure "despite the fact that I'm under 50. I drank my Golightly (a colon-clearing aperitif)," she said mock-grimacing, then asked, "Who came up with that name?"

Through TV, magazine stories and NCCRA, Couric has succeeded in creating a nationwide buzz about colorectal cancer, spreading the word "much more effectively than what the medical profession can muster," marveled NCI director Dr. Richard Klausner.

"People are talking, screenings are up dramatically, but we have to go beyond screening now," Couric said. "There are still more than 130,000 cases of colorectal cancer diagnosed annually. I hope more young lives can be saved...Perhaps one day everyone can be screened. I am very pleased to hear that Medicare recipients now get a screening reminder...this is a big step in the right direction."

NCCRA's approach is "educating primary care physicians to tell their patients about the need for screening," Couric explained. The high-risk cate-

nes for screening are those age 50 and older, African-Americans, and those with a family history of the disease. But an NCCRA survey found that many doctors failed to mention the need for colorectal screening in 56 percent of respondents over age 50, and in 78 percent of black respondents. "Three out of four adults say their physician never mentioned the importance of screening in an NCCRA survey," she said. The alliance also promotes "peer-to-peer communication" among general practitioners and internists, she added. "All of our talk about colon cancer won't mean a thing if the docs aren't listening."

NCCRA disbursed \$2.1 million in its first year (2000) and expects to spend \$3 million this year; funds take the form of unrestricted block grants to researchers who can justify both their studies and their costs to a medical advisory board. A new effort this year is to enroll more patients in clinical trials. Already, a sibling-pair colon clinical trial, abetted by a web site and toll-free phone number, has generated 3,000 potential pairs. "We filled the trial in less than 1 month, and had expected it would take far longer," Couric reported. "Our goal is to fill 10 trials and get the research rolling as soon as possible."

Couric concluded, "Without people enrolled in trials, the science cannot move in the right direction...We will wipe out this disease, and it will happen in my lifetime, or at least we will turn it into a manageable, chronic disease."

"You really are my heroes," she told the NIH audience. "I wish I could quadruple the budget for NIH, but you have to go see 'W' about that. You are truly doing God's work here."

During a question session after her half-hour talk, Couric said that health and medical reporting is about to become more prominent, largely due to the aging of the baby boomers. "We might do a whole segment (on Today) about the importance of clinical trials—God knows we have time for it with our new 3-hour format."

To view clips of Couric's talk, visit <http://cancercontrol.cancer.gov/excl>. ■

Healthy Women Needed for Study

NICHD is seeking women, ages 18-32, to participate in a research study comparing bone density in healthy women. You may be eligible if you have no medical conditions, or an irregular menstrual cycle, are not pregnant, nursing or planning pregnancy over the next 3 years, do not use oral contraceptives or prescribed medications, smoke fewer than 2 cigarettes per day and drink fewer than 2 alcoholic drinks per day. Participation involves four visits over a 3-year period, blood test, bone density test, urine tests and cognitive testing. Compensation is provided. Call 435-7926 for more information. ■

Nakamura Wins APAO Achievement Award

NIMH deputy director Dr. Richard K. Nakamura won the 2001 NIH Asian/Pacific American Organization's Outstanding Achievement Award in Administrative Work. "With tough competition, the prize is a testimony to Dr. Nakamura's wide-ranging accomplishments," education and awards chairman Dr. Aftab Ansari said. The honor highlights the White House initiative to increase participation of Asian Americans and Pacific Islanders in federal programs.

Recognized for his ability to improve policy and build research programs, Nakamura is also credited with

reshaping the institute's Intramural Research Program, speeding the translation of scientific knowledge to basic, clinical and applied research, and transmitting these advances to Congress and the public.

Since joining NIH in 1976, he has earned a reputation as a leader who

keeps scientific research running smoothly while paying close attention to staff concerns and ideas for improvement. He has been working to reduce mental health disparities experienced by minorities and women and to promote diversity and equal opportunity principles for all employees.

Nakamura also played a key role in revamping the extramural research program by helping to direct resources to new areas, restructure top leadership, and consolidate four research divisions into three. He organized the NIMH Blue Ribbon Panel for the Intramural Research Program review.

He has served on a variety of NIH committees, been involved in several projects with the U.S. Surgeon General, and last year received the Department of Health and Human Services Secretary's Award for Distinguished Service.

He reads classic crime writers Raymond Chandler and Ross MacDonald for fun and allows that he has been influenced by "authors I disagree with but will not name." For relaxation, "I coach baseball and chase my children around," he says.

The award was presented during the 29th anniversary celebration of the NIH Asian/Pacific Islander American Heritage Program on May 25 in Masur Auditorium.—Constance Burr



Dr. Richard K. Nakamura

NTP To Study Chromium 6

The National Toxicology Program has announced its intention to study chromium 6, the chemical that polluted drinking water in the film *Erin Brockovich* starring Julia Roberts. The Roberts character becomes an environmental activist when she discovers a series of health crises resulting from chromium 6 contamination of groundwater.

The NTP will begin designating 2-year rodent studies and shorter-term toxicity studies to assist in long-term study design and interpretation. Results of the studies are expected in 2005.

NIEHS deputy director Dr. Sam Wilson and NTP associate director Dr. Christopher Portier made the study announcement at a recent press conference in Glendale, Calif.

Sick of 'Junk' Email? Hit the Delete Key

By Cheryl Seaman and Kevin Haney

It's beginning to be just like home; the mail arrives—three bills, two letters, tons of junk mail—and now it's happening at work. An increasing volume of unwanted emails, spam (mass mailings) and chain letters, a.k.a. junk email, is insidiously invading your electronic mailbox. NIH users are finding, commingled with the work-related messages, all sorts of unwanted mail, in particular, e-commerce solicitations (e.g., real estate services, computer sales, online publications), chain letters and virus hoaxes, and many of these 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 such messages is prohibited because it leads to a geometrical increase in their circulation, network congestion and may impede 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, do not post your NIH email address on a web site or to forums, chat rooms, mailing lists or newsgroups. Be aware that in most cases, your name and email address are available to any web site you visit.

Report to your information systems security officer (ISSO) only those messages where there is a perceived legitimate warning, suspected illegal activity or child pornography. The infamous "Love Bug" and "AnnaKournikova" email viruses taught NIH users a valuable lesson—it is wise not to open attachments from someone unless you know what the attachment is and that you requested it. In particular, be wary of any attachments with executable file names, e.g., "*.exe" or "*.vbs". Additional guidance is available through your ISSO and the CIT Security web site at <http://irm.cit.nih.gov/security/spam.html>.

At present, there is no magic 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 address frequently. As a result, messages blocked today may not be blocked tomorrow. For the time being, the delete key is quick, cheap and effective. Go ahead and use it.

And if you haven't been there yet, check out <http://securitynews.nih.gov>. It's the web site where general users go to find straight talk on computer security issues, including the latest news on serious virus alerts at NIH. ■

ORWH Offers Information During National Women's Health Week

Hundreds of people picked up informational materials on women's health during National Women's Health Week in mid-May. The NIH Office of Research on Women's Health set up two exhibits in the Clinical Center and distributed a wide variety of information on women's health from the NIH institutes and centers.



Police Awareness Day Luncheon Draws Crowd

NIH marked Police Awareness Day on May 17 with a cookout, police K-9 team demonstrations and other displays during National Police Week May 14-18. National Police Week is dedicated to law enforcement officers killed in the line of duty. The Police Branch, the Emergency Management Branch, the Crime Prevention Branch, the Employee Transportation Services Office and the Ridefinders Program staffed information booths and handed out giveaways on various aspects of public safety. Police officers and firefighters offered tours of the NIH Police Mobile Command Center and gave briefings on NIH fire apparatus. Members of the Police Branch served more than 325 lunches in front of Bldg. 1. Earnings of more than \$1,600 will be donated to NIH charities.



Preston Jackson (r) gets a pointer from a visitor to his Crime Prevention Branch table.



A police K-9 lays down on the job during the luncheon. Some 1,000 NIH'ers were on hand.



Serving on the chow line are NIH Police employees (from l) Cpl. Kendall Bey, Maj. Robert Fuller, Patricia Haynes and Scott Noullet.

PHOTOS: RICH MCMANUS



Chad Brooke has cash in hand as he waits in line for items grilled by the NIH Police. The grills fire up again Aug. 8 for a police-sponsored Cajun Cookout, 11 a.m. to 2 p.m., in connection with National Night Out.



Dan Walther (l) of the NIH Fire Department has handouts on prevention for passersby.

NIEHS Funds Mouse Breeding Centers

NIEHS will establish and fund five research centers to develop and breed mice with key genetic variations like those in humans. The mutant mice will be available for scientists throughout NIH and other research programs.

The following centers will receive \$5 million in each of the next 5 years: Albert Einstein College of Medicine; University of Washington; University of Cincinnati; University of Texas Health Science Center, San Antonio; University of Texas M.D. Anderson Cancer Center, Smithville.

"We can use these mouse models to understand human variabilities to environmental factors that may have a role in human diseases," said NIEHS director Dr. Ken Olden.

Section 508, Part 2

OSE Gets an Education on Access

By Cynthia Delgado

(Second of two-part series)

The Office of Science Education works with the institutes and centers of NIH to translate their cutting-edge medical science and research discoveries into exciting educational programs for the public. Its mission relies on the ability to target successfully the nation's diverse audience, including underserved groups such as women, minorities and people with disabilities. With these goals in mind, the office has gotten a jump-start on incorporating Section 508 accessibility standards into its programs.

OSE director Dr. Bruce Fuchs is devoting many resources to ensure that his office's new web-based programs are accessible. One such program is the NIH Curriculum Supplements, designed to help teachers nationwide facilitate learning and stimulate student interest. Fuchs has enlisted the aid of Science Applications International Corp. to make OSE's new online versions of its CD-ROM and video components compliant by September.

OSE also teams with the Office of Research on Women's Health to create the Women Are Scientists video and poster series, which also must comply with Section 508. Gloria Seelman, project coordinator, proposes to incorporate descriptive narration into the newest video. This service allows people with visual impairments to hear a description of the film's content. Since it cannot be turned off like closed captioning, Seelman says that "a separate video would be produced" and orders would need to specify the preferred format.

Debra Knorr, a health scientist administrator at OSE, has learned that selection of appropriate services, and allowance of time for the unexpected, are key elements for making large-scale public programs accessible. For example, OSE provides film captioning, ASL interpretation and CART for the popular program Science in the Cinema, which involves showing a feature film followed by audience discussion with a noted scientist about the science depicted in the film. Knorr learned from WGBH Caption Center that films previously not captioned can become captioned upon request to a film distributor, a process that can take several months. Similarly, the NIH Mini-Med School requires quality interpreting services, both ASL and CART, for its extensive lecture and discussion format. Knorr says OSE "learned the hard way" about requesting CART services for Natcher. "The Natcher facilities require equipment designed for a particular kind of encoding—which must be specified on the initial request—otherwise the captioner's equipment and software may not work with the building's hardware/architecture," she says. An-

other OSE lesson: provide ASL interpreters and captioners with a glossary of technical terms in advance. Scientific terms can be preprogrammed into their equipment, improving both the speed and accuracy with which dialogue is captured. Fuchs recalls an embarrassing moment when "a speaker was talking about pharmacology, and each time it came up on the screen as 'farm ecology.'"

Wendy Cheng is currently attending NIH Mini-Med School and gives high marks to Natcher facilities. "I wish all federal agencies had an auditorium like it," she says. While appreciating the assisted listening devices (ALDs), and the two panels for real-time captions, she would prefer a different captioning display. In Natcher the captions are displayed phrase-by-phrase instead of the typical word-by-word, resulting in a noticeable lag time that she finds "a bit annoying." Cheng also suggests relatively inexpensive patch cords for the auditorium. They allow the ALD to be connected to the speech processor of a cochlear implant, thereby improving sound quality.

As OSE continues to improve program access, Fuchs offers advice. "Get started thinking about [accessibility] because there are no standard solutions. You'll have to consider what works best for your programs." ■



Guest speaker Rev. Kevin Williams addresses employees gathered for the National Day of Prayer, which was observed May 3 on the lawn of Bldg. 1, sponsored by the Noontime Christian Fellowship. The annual event offers prayers for the nation and its leaders.

More than 150 NIH'ers participated in the occasion, according to organizers. The Noontime Christian Fellowship welcomes all to its meetings every Tuesday at 11:45 a.m. in the Natcher Bldg. Conf. Rm. 3AS10.

Healthy Families Needed for Studies

NIAAA is seeking healthy parents and their adolescent children, ages 12-17, to participate in a study involving an interview and a brain scan. No medication is involved. Compensation is provided. Call 594-9950.



HRDD Class Offerings

The Human Resource Development Division supports the development of NIH human resources through consultation and provides training, career development programs and other services designed to enhance organizational performance. For more information call 496-6211 or visit <http://LearningSource.od.nih.gov>.

Plain Language in Government Writing	6/20-21
Intermediate Filemaker Pro 4.0	6/21
Creating Results through Influence	6/26-28
Introduction to Windows	6/26
Valuing Differences	6/27
Enhancing Your Management Style	6/28-29
Speed Reading	7/10-24
Creating Distinctive Customer Service	7/10-11
Scientific and Technical Editing	7/10-11
NIH Retirement Seminar—CSRS (FCRDC)	7/10-12
IMPACT for Administrative & Profess. Staff	7/11
Scientific and Technical Writing	7/11-13
Emotionally Intelligent Leadership	7/12
Fellowship Payment System	7/12
Introduction to Web Page Design - HTML	7/12
NIH Retirement Seminar - CSRS	7/16-18
Adobe PageMaker Production 1 (Dual Platform)	7/18
IMPAC II Peer Review Module	7/18

Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—normally held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—switches to Tuesday on June 19 when Dr. Roy M. Anderson visits to speak on “The Population Biology of HIV Pathogenesis and the Evolution of Drug Resistance in Treated Patients.” This is the Fogarty International Lecture. Anderson is professor and head, Department of infectious disease epidemiology, Imperial College Medical School, University of London.

On June 20, Dr. Nigel Unwin will give a talk entitled, “Nicotinic Acetylcholine Receptor and the Structural Basis of Fast Synaptic Transmission.” He is head, neurobiology division, MRC Laboratory of Molecular Biology, Cambridge, U.K.

Former NIH scientist Dr. Philip Leder returns on June 27 to address “Cancer: An Unfortunate Genetic Collaboration.” He is Andrus professor and chairman, department of genetics, director, Harvard Institute of Human Genetics, and senior investigator, HHMI, Harvard Medical School. Leder’s is the final talk in the series before summer vacation; WALS resumes Sept. 12.

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

Botanical Notecards Available at R&W

Elizabeth Blackwell (c. 1700-1758), an 18th century English gentlewoman, had a problem. Her husband had fallen into debt and been thrown in jail. It was up to her to redeem the family's fortune and secure her husband's release. So she became a botanical artist out of necessity.

She learned that an illustrated book on medicinal plants was needed and, with the encouragement of London's leading physicians and apothecaries, set out to produce it. She drew the illustrations, engraved the copper plates and painted the prints herself.

Her two-volume work entitled *A Curious Herbal* was published in 1737 and 1739 and was widely praised; it received the official approval of the Royal College of Physicians.

She was also able to secure the release of her husband, who later traveled to Sweden where he was beheaded for treason; he had tried to alter succession to the Swedish throne. Elizabeth Blackwell's success in the botanical/artistic world seems not to have been matched by marital success. There are believed to be only 60 copies of these elegant volumes in existence and the National Library of Medicine is fortunate to have one set.

Six botanical notecards, printed on heavy card stock with matching envelopes, have been reproduced from the original book and are available for sale at NIH's R&W stores or for purchase online at <http://www.regov.org/cards/>. ■

Pharmacology Program Available to M.D.s

The Clinical Center, the National Institute of General Medical Sciences and the Office of Intramural Research, OD, offer a 3-year postdoctoral research fellowship training program emphasizing the application of laboratory pharmacology, biostatistics, pharmacokinetics and chemistry to the study of drug action in humans. Postdoctoral training will be available starting July 1, 2002 and subsequent years. Candidates must have an M.D. degree and, in general, have completed 3 years of residency training, and be board-eligible in a primary medical specialty. They must be U.S. citizens or permanent residents of the United States. Their qualifications are evaluated by the clinical pharmacology steering committee. Selection is highly competitive and preference will be given to applicants with outstanding potential. The stipend is determined by the candidate's educational and professional experience. For more information visit <http://www.cc.nih.gov/OD/clinprat/> or call Donna Shields at 435-6618. ■

Postpartum Depression Study

The Behavioral Endocrinology Branch, NIMH, is seeking volunteer mothers ages 18-40 who have had one or more past episodes of postpartum depression following a full-term pregnancy, but are not currently depressed. Participants must be free of medical illnesses, medication-free and currently not breastfeeding. Volunteers may be asked to participate in a 6-month protocol investigating the effects of hormones on brain and behavior. All participants who complete the study will be paid. For information call Linda Simpson-St. Clair, 496-9576. ■