**Peter Gruss To Deliver Khoury Lecture, Sept. 17**

Like all animals, we come from a single cell that develops into an embryo, which forms an adult. This progression presents us with a fundamental problem of biological organization. How can a complex organism arise out of a single cell? How can this multitude of cells be organized into the complex structures of human organs? Understanding the molecular details of the underlying genetic control processes, such as differentiation and development, is essential for our comprehension of the process.

Dr. Peter Gruss, president of Germany's Max Planck Society, will address the role of researchers in pioneering efforts to reduce cancer health disparities.

**Researchers Pioneer Efforts to Reduce Cancer Health Disparities**

By Neil Swan

The National Cancer Institute's goal of eliminating the burden of cancer by the year 2015 through a coordinated process of discovery, development and delivery is moving forward, said NCI director Dr. Andrew C. von Eschenbach, speaking recently to health disparity researchers. But achieving the goal requires continued commitment to the delivery of medical advances to minorities and underserved communities, he said.

“We need your help,” said von Eschenbach recently at NCI’s Special Populations Networks Cancer Health Disparities Summit 2003 in Washington, D.C. “You are the pioneers.”

**Lenfant Departs NHLBI Directorship After More Than 21 Years**

By Rich McManus

By switching just one letter, the Latin epitaph on the grave of William Harvey—discoverer of the human circulatory system—could be amended in a way appropriate to the departure, at the end of August, of longtime NHLBI director Dr. Claude Lenfant. A rubbing of Harvey’s epitaph is one of the principal works of art in Lenfant’s office in Bldg. 31; taken in England’s Greasley Cemetery, it was given to Lenfant by a former colleague and begins, “Farewell, vain world, I’ve had enough of thee...”

Far from having had enough of NIH, Lenfant says he’d have elected the exact same heart institute career if he had it to do all over again and describes his tenure here as “a very, very fulfilling experience.” And he’s not retiring either, just switching jobs. He is president of the World Health Organization.

**NIH To Launch AM Radio Station 1610**

By Rich McManus

By the end of this summer, NIH will join the Chesapeake Bay Bridge, the Ft. McHenry Tunnel, National Airport and Bolling Air Force Base in that pantheon of facilities so robust and expansive that they require their own slot on the AM radio dial. Motorists and residents within about a 4-mile radius of the Bethesda campus will be able to tune to 1610 and get updates on traffic, parking, instructions in the event of an emergency or evacuation and NOAA weather reports.

“I am not trying to take Lisa Baden’s job away from her,” jokes Tom Hayden, a transportation planner in the Office of Research Facilities, referring to the popular rush-hour radio personality heard on Washington’s WTOP.

A “WNIH”-type station has long been under consideration by
Welcome to the NIH Director’s Corner

At my most recent Town Hall Meeting in June, I mentioned that I would institute a column in the NIH Record to address issues important to you, the employees, on a regular basis. Since the Town Hall gatherings take place only twice a year, I wanted more frequent contact, which this column allows.

Prior to the first Town Hall Meeting in October 2002, I received more than 400 inquiries and comments from NIH’ers on a web site dedicated to that event. Last June, more than 260 additional questions and observations arrived on the town hall web site prior to the second meeting.

As those of you who attended the meetings, or read about them in this newsletter, know, there was scarcely time to address even a fraction of the concerns that you brought up.

The purpose of this column will be to provide answers to specific questions that employees bring to my attention. Each column will address three or four topics in brief, clear fashion. I invite new inquiries at Director@nih.gov.

This month, we observe the second anniversary of 9/11/2001, one of the most tragic occasions in this nation’s history. We are still feeling the shock waves of that infamous day. All of us at NIH continue to be affected by the terrorist events of fall 2001, from the need to prepare for potential recurrence of anthrax attacks, or other use of biological, chemical or radiological agents as instruments of terror, to the need to protect our enterprise on campus with a perimeter fence. These are steps none of us expected to take as few as 2 years ago. But we take them resolutely as the price we must pay for maintaining the world’s greatest medical research institution in the world’s freest country. We don’t enjoy having to defend our liberties—no era in American history ever has. Our thoughts will be with those who lost their lives.

I look forward to beginning our dialogue in this space.

Healthy Children Needed

Healthy children are needed for a volunteer study # 99-N-0045 at NIH. One visit required, and compensation is available. Call 1-800-411-1222 (TTY 1-866-411-1010).

NIAMS Hosts Conference, Sept. 22-23

The National Institute of Arthritis and Musculoskeletal and Skin Diseases is sponsoring “Immunomodulatory Drugs in the Treatment of Skin Diseases: What Can We Learn About Pathophysiology?,” a conference at the Natcher Conference Center on Sept. 22-23. The conference is cosponsored by the NIH Office of Rare Diseases.

Four sessions will examine current and future therapies and will focus on Immune Regulation as it Relates to Skin Diseases and Their Therapies; Immune Pathophysiology and Therapy of Atopic Dermatitis and Psoriasis; Immune Abnormalities and Their Regulation in Cutaneous T-Cell Lymphoma, Graft vs. Host Disease, and Rheumatic Skin Diseases; and Other Diseases with Potential for Immunomodulatory Drug Therapy.

For an agenda and registration form, visit http://www.niams.nih.gov and click on News and Events and then Upcoming Meetings. Or, request by email or phone: Immuno@courtesyassoc.com, (202) 973-8724.

NIH Library Offers New EMBASE Class

You may use PubMed consistently, but have you also learned to use EMBASE? NIH’ers have access to this database of medical and drug-related bibliographic citations. Let NIH Library staff teach you to efficiently search EMBASE or any other library resource covered in 14 topic areas. Free, hands-on classes are held in the Library Training Rm., Bldg. 10. For more information, call 496-1080 or visit http://nihlibrary.nih.gov/training.htm.

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The Record is recyclable as office white paper.
Women's Health Program Builds Strong Researchers

Launched in the fall of 2000, the Building Interdisciplinary Research Careers in Women's Health (BIRCWH) program is designed to increase the number of researchers working on women's health issues by pairing junior researchers with senior investigators, who mentor them in interdisciplinary scientific settings. For 2 days recently, 39 BIRCWH scholars, called interdisciplinary women's health research scholars, their mentors, and directors from the 24 BIRCWH centers gathered at NIH to present the first fruits of their research.

The scholars, who have already published more than 62 papers in peer-reviewed journals, have the opportunity to expand their research skills by being mentored in the interdisciplinary research setting for a period of 2 to 3 years. They learn not only research techniques, but also the skills to become independent investigators. The mentors at each site are well-established investigators who have a commitment to fostering interdisciplinary approaches in women's health research. Mentors from collaborating disciplines are encouraged to provide needed expertise and resources, as long as the emphasis of each scholar's project is on research relevant to women's health or to studies of sex and gender factors in health or disease.

"The BIRCWH program provides career development support in three areas of emphasis: mentoring, interdisciplinary scientific collaboration, and career advancement for young investigators in women's health research," said Dr. Vivian Pinn, NIH associate director for research on women's health. "By fostering interdisciplinary approaches to research, the BIRCWH program can also serve as a model for trans-disciplinary approaches to diverse fields of research and for integrated health care."

A unique feature of the BIRCWH program is the combination of support from the Office of Research on Women's Health, which leads the initiative, a number of NIH institutes and offices, including NICHD, which administers the majority of the programs, along with NIDA, NIAMS and from the Agency for Healthcare Research and Quality, representing interagency collaboration. The BIRCWH initiative allows cosponsors to support interdisciplinary efforts that may not fit neatly within each of their research domains. By uniting cosponsors from a breadth of scientific areas, the program encourages researchers from different disciplines to apply their knowledge in new ways to study important topics in women's health, including sex (biologically based) and gender (socially based) factors in biomedical investigation.

The success of the original BIRCWH program funding of 12 centers in FY 2000 resulted in the RFA being reissued in FY 2002, with 12 additional institutions becoming BIRCWH centers. The recent meeting provided an opportunity for BIRCWH scholars, mentors and center directors from the program's two cycles to share their experiences, discuss their research and meet others who share their research and career development interests.

Presentations and poster sessions explored such topics as: mouse models of premature ovarian failure; identifying low-penetration breast cancer susceptibility genes; importance of gender and social supports in the nursing home setting; ethnic differences in insulin sensitivity and B cell function; knowledge of risk for heart disease among people with diabetes; relationships to gender, ethnicity and diabetes treatment regimen; improving health outcomes for women with chronic illness; utilization of services and patterns of specialty care for women with rheumatoid arthritis; exercise, amenorrhea, stress and bone health; gender-specific pathways linking stress and cocaine relapse; sex differences in the etiology of substance abuse; sex differences in vulnerability to cocaine addiction; and incidence and risk factors for sexually transmitted infections among women in an Alabama HIV clinic.

For more information on the BIRCWH program, contact Dr. Joan Davis, 496-6515.
transcription factors in setting up specific cellular programs when he delivers this year’s George Khoury Lecture on Wednesday, Sept. 17 at 3 p.m. in Masur Auditorium, Bldg. 10. Gruss will present “From Transcription to Regenerative Medicine,” which will discuss the functional significance of a class of transcription factors, Pax4 and Pax6, of the islets of Langerhans and the possibility of using these factors in the regeneration of insulin-producing β-cells. The study of transcription factors is important since their activities can switch or modulate entire genetic programs. This understanding can help explain organogenesis and lead to the development of new therapeutic routes for tissue repair.

Gruss is an internationally distinguished researcher and lecturer. His research concentrates on the molecular mechanisms of vertebrate development. He investigates how a fertilized egg develops into a whole organism and the “choreography” necessary for embryonic development. Further, he examines which cells develop when and where, and how these cells grow into a functioning organ.

Gruss and his colleagues were able to identify genes responsible for the development of specific organs in mice. This discovery led to an increased interest in the study of eye development and pancreas development and regeneration, which are current focuses of his research.

Gruss earned his Ph.D. in biology from the University of Heidelberg. From 1978 to 1982, he worked as a postdoctoral fellow and expert consultant in the NCI Laboratory of Molecular Virology. During this time in George Khoury’s laboratory, Gruss studied animal viruses and discovered critical sequences that are both required for transcriptional control and involved in the differential expressions from the origin of their cells.

As president of the Planck Society, Gruss sets guidelines for the research policy of 80 research institutes and facilities in various fields of basic science. Currently, he is also the vice-chairman of the European Developmental Biology Organization and chairman of the Council of the European Molecular Biology Laboratory. Gruss is also active in the federal genome research network steering committee of the German Federal Ministry for Education and Research.

The annual Khoury Lecture is part of the NIH Director’s Wednesday Afternoon Lecture Series. For more information or for reasonable accommodation, call Hilda Madine, 594-5593.

**KHOURY LECTURE, CONTINUED FROM PAGE 1**

**Howell Takes Board of Governors’ Helm**

When Ed Howell entered the realm of hospital management he knew he’d found his niche. In a field, he says, “where no two days are alike” he finds himself challenged daily.

Ed Howell

Howell takes board of governors’ helm

Howell, vice president and CEO at the University of Virginia Medical Center in Charlottesville since 2002, assumes his duties this month as chair of the board of governors for the Clinical Center. He brings more than 25 years of hospital leadership to the role, having served in executive- and director-level capacities at the University of Iowa Hospitals and Clinics, the Medical College of Georgia Hospital and Clinics and the University of Minnesota Hospitals.

The board is a 15-member group begun in 1996 to make recommendations on CC operations, including budget and strategic and operational planning.

“Ed Howell has vast experience in all aspects of hospital management that he will contribute to the board of governors,” said NIH director Dr. Elias Zerhouni. “He has great insight into strategic planning and implementation of strategic plans as they relate to hospitals.” Howell also has experience overseeing the design and implementation of hospital information systems and in the construction and move into new hospitals. “In these areas he will provide invaluable assistance to the Clinical Center as we prepare to open the Mark O. Hatfield Clinical Research Center next year,” said CC director Dr. John Gallin.

Howell sees the transition to the new clinical research facility at the top of the board’s list of priorities. Long-term, he sees the legacy of NIH’s intramural research program and how that program may bridge to the extramural world as major topics for the board.

“I have a basic belief that over the next decade we will enter the second golden age of medicine as we transition to the cellular and subcellular levels of disease diagnosis and treatment,” he said. “NIH’s intramural research program will clearly be part of this push.”

**Men Needed for Arousal Study**

University study seeks healthy men, 18-60, for a 3-hour laboratory assessment. The purpose of the study is to gain a better understanding of factors that affect sexual functioning. Volunteers are needed who are experiencing erection problems. Participants will be compensated. If interested, call Nate Galbreath at (301) 295-1788 for more information.
Dr. Robert T. Croyle has been appointed the new director of NCI’s Division of Cancer Control and Population Sciences. He had been the acting division director since November 2002, and is the division’s former associate director for behavioral research. He succeeds DCCPS’ first director, Dr. Barbara K. Rimer, who left the post in 2002.

Croyle brings to the position a wealth of experience in cancer control research, including work ranging from prevention to survivorship. He has been an advocate for and collaborator on many cross-cutting issues such as transdisciplinary science, genetic testing, genetic epidemiology, health promotion, measurement and dissemination. Croyle is responsible for building DCCPS’ Behavioral Research Program, where he spent 4 years contributing to some of NCI’s highest priority areas.

The division’s major initiatives include cancer communications, health disparities, quality of care, genes and the environment, treatment outcomes and quality of life for cancer survivors and tobacco control. Croyle is responsible for 170 employees, almost 800 extramural grants valued at more than $365 million, over $22 million in contracts, and an additional $75 million in operating budgets for programs and branches.

Before joining NCI in 1998, Croyle worked at three academic institutions and two cancer centers. He spent 9 years as a professor of psychology, member of the Huntsman Cancer Institute, and member of the Genetic Science in Society Program at the University of Utah in Salt Lake City. Prior to that, he was a visiting investigator at the Fred Hutchinson Cancer Research Center in Seattle, visiting assistant professor of psychology at the University of Washington and assistant professor of psychology at Williams College in Massachusetts.

Croyle’s recent research has examined how individuals process, evaluate and respond to disease risk information, including medical diagnoses, risk factor screening and tests for BRCA1 and BRCA2 mutations. His research has been published in professional journals in behavioral science, public health, and cancer, and he has edited two volumes, Mental Representation in Health and Illness (1991) and Psychosocial Effects of Screening for Disease Prevention and Detection (1995). As an academic investigator, Croyle was funded by NCI, the Agency for Healthcare Research and Quality and the National Institute of Mental Health.

He is a member of the Academy of Behavioral Medicine Research and a fellow of the Society of Behavioral Medicine. His service on journal editorial boards includes positions as an associate editor for Cancer Epidemiology, Biomarkers and Prevention, and a consulting editor for Health Psychology and the British Journal of Health Psychology.

Class Offered on Clinical Research

Registration for the 2003-2004 “Introduction to the Principles and Practice of Clinical Research” is now open. The course will run from Oct. 20, 2003, to Feb. 24, 2004. Classes will be held on campus on Monday and Tuesday evenings from 5 to approximately 6:30. There is no charge for the course; however, the purchase of a textbook is required. A certificate will be awarded upon successful completion of the course, including a final exam.

Close to 500 students registered for the program held earlier this year, which was also broadcast to Children’s National Medical Center (Washington, D.C.), State University of New York (Syracuse), Tripler Army Medical Center (Honolulu), NIDDK (Phoenix), the University of Puerto Rico (San Juan) and MAT & Asociados (Buenos Aires).

For more information or to register, visit http://www. cc.nih.gov/introclinres/ or call 496-9425. The deadline for registering is Oct. 3. An email confirmation will be sent to those accepted into the program. If you require reasonable accommodation to participate, call 496-9425 at least 7 business days prior to the event.

Hispanic Heritage Month Celebration Part I Scheduled

NIH’s annual Hispanic Heritage Month observance part I, “Hispanic Contributions to Research in the United States - Novel Molecular Mechanisms Regulating Cell Activity,” will be held on Monday, Sept. 15 from 9 a.m. to 12:30 p.m. in the Clinical Center’s Lipsett Amphitheater.

Following remarks by Dr. Teresa Chapa, president of NIH’s Hispanic Employee Organization, and Dr. Cristina Beato, HHS acting assistant secretary of health, Dr. Nora Volkow, NIDA director, will discuss “Participation in the Science Enterprise.” Other speakers and topics include Dr. Ruben Adler of Johns Hopkins University, “Making Stem Cells Do What We Want: A Developmental Perspective”; Dr. Nicolas G. Bazan of Louisiana State University, “Synaptic Lipid Signaling in the Life and Death of Neurons”; and Dr. Silvio Gutkind, chief, Oral and Pharyngeal Cancer Branch, NIDCR, “AIDS Malignancies and Signaling Networks: A Case of Molecular Hijacking.” A reception follows in the Clinical Center B1 atrium.

For more information, contact Elsa Berenstein via email eberenstein@dir.nidcr.nih.gov or phone 496-2514.
Hypertension League and hopes to continue to contribute to public health, “especially in developing countries...The issue now is not to do new research, but to apply what we know.”

Born in Paris and educated in France, Lenfant was happily occupied in his post as professor of medicine at the University of Washington in Seattle when a letter arrived from then-director of the National Heart Institute Dr. Theodore “Ted” Cooper. Cooper had invited all of the nation’s leading specialists in pulmonary diseases, including Lenfant, to comment on the direction lung research should take at the newly renamed National Heart and Lung Institute.

“I worked very hard to provide my opinion on what the institute should do,” Lenfant recalls, “and I suppose he (Cooper) liked it.” Cooper asked Lenfant to come to Bethesda “for a few years,” so Lenfant took a leave of absence from the UW faculty and joined NHLI in 1970 as associate director for lung programs.

Little did Lenfant know that he would never return to his academic appointment. He rose, in 1972, to director, Division of Lung Diseases, where he spent 8 years, then had a brief stint as director of the Fogarty International Center in 1981-1982 before becoming the 10th NHLBI director in July 1982.

Until then, NHLBI directors usually held the position for 5-10 years; Lenfant was director for 21 years, 2 months. Why did he last so long? “One answer would be that no one fired me,” he says with a smile. “I think it’s a very exciting job. I like it. It met my expectations, and was a fantastic opportunity. I hope that I did a good job.”

Looking back over his leadership years, Lenfant sees “several things that I’m especially proud of. This institute has many communities, with many interests. I think we achieved a very nice equilibrium among them. They were not fighting each other, but supporting one another. I think that is quite nice. We also had a good balance of research among basic, clinical, preventive and applications of what we know.” Of this latter category he observes, “It is very important for NIH to be sure that what comes from all the research we are supporting is passed on to the practice of medicine. I feel very, very strongly about it.”

Were he to advise his successor, or any institute director, Lenfant—who’s tenure makes him the dean of the IC directors—says, “You’ve got to do lots of listening. Everybody wants something different. People need a chance to make their case. So it’s very important to listen, and be available, even if the decision doesn’t go their way.” He cautions, “People resent feeling that they didn’t have the chance to be heard.”

He also reemphasizes, “It’s a big thing to me, this issue of balance. All of us have our own passions about the things that are important to us. We have to be careful not to let that dominate what we have to do. After all, we’re here for public service. We’re here for everybody, not just for those who do what we like to do.”

Lenfant says NIH has changed enormously over the years, as has the culture that has supported it. “Where we are as a nation is very different from 30 years ago,” he says. “In 1970, NIH was a relatively small organization, and today it is a huge organization. Many cities in the United States aren’t as big as NIH. It’s a different world.”

Still, he maintains, “NIH remains a very unique and appealing and attractive place to be. I would do pretty much the same thing if I had it to do over. I have absolutely no regrets. I hope the institute is okay, but I’m not worried about it. It’s a very strong organization and the staff is absolutely fantastic.”

Even long, successful careers have their frustrations, and Lenfant says he wishes NHLBI under his rein could have been more successful in the public health arena. “It was not because we didn’t try hard enough,” he explains. “We have to compete with many other activities and public health efforts.” He is also passionate about the need to apply the knowledge that science has accumulated inside journals, books and libraries. “It sounds very simple, but is in fact very difficult,” he says. “Discoveries are happening all the time, but how do we apply them?” Part of the problem is cultural, he observes: Getting the word out to practitioners and affecting patient care “is not as spectacular as making a big discovery.”

It was the chance to be involved in Big Science that lured Lenfant away from Europe when he was
Brining To Direct NCRR Office of Review

Dr. Sheryl K. Brining has been named director of the Office of Review at the National Center for Research Resources. She has served as the acting director, deputy director, and a scientific review administrator prior to her new appointment.

Brining will direct and coordinate the initial scientific and technical review—conducted at NCRR—of applications for research grants and contracts. OR identifies qualified experts to serve on the three NCRR review committees (initial review group, scientific and technical review board on biomedical and behavioral research facilities, and special emphasis panel).

“This position ensures the integrity of the peer-review process at NCRR,” said Dr. Judith Vaitukaitis, NCRR director. “The SRAs and review committee members thoroughly and impartially assess the scientific merit of grant applications submitted by investigators. The high quality of this review process contributes to the immeasurable value of NCRR’s biomedical research programs. Dr. Brining has been an outstanding member of the OR in her various capacities, and she is extremely capable of managing the NCRR grant programs that support our nation’s health goals.”

Brining has served NIH in various capacities since 1991. Before coming to NCRR, she worked as an SRA at the National Center for Complementary and Alternative Medicine, health scientist administrator with the Office of Research on Women’s Health, and SRA at NIA. She has also served as a consultant to the Grants and Special Programs, International Program at the Howard Hughes Medical Institute.

Brining earned her Ph.D. in anatomy/cell biology from the University of Cincinnati. She has published extensively in peer-reviewed journals, and has received numerous awards and honors.—Robert Schneider

Do You Enjoy Singing?

The NIH Chamber Singers need men and women in all voice ranges to round out its merry band of troubadours. In September, the group will begin rehearsing for its fall/winter concert for NIH employees and patients. If you are interested in joining the Singers, contact Susan Hauser at hauser@nlm.nih.gov for details.

NIH at Black Family Reunion

The National Institutes of Health will be represented at the 18th annual Black Family Reunion celebration Sept. 6-7 on the Washington Monument grounds. The event is one of the oldest and best-known gatherings of African American families, attracting more than 500,000 people. NIH will disseminate health care information, provide health screenings and publicize research protocols. All are welcome to attend, and admission is free. For more information, contact Joan Lee, 496-8990, Levon Parker, 496-5332 or Michael Chew, 402-3681.
NIH's parking committee, Hayden said, noting that the FCC is unlikely to issue those call letters for the campus's new 10-watt station. But the coming burst of new construction projects—including Bldg. 33 and its associated garage, not to mention the perimeter fence and other projects—will soon make it necessary to better manage the flow of traffic into and out of campus, as well as to direct employees to available parking areas throughout the campus.

Launching a radio station turns out to require surprisingly little in the way of hardware, Hayden explains. The primary "studio" will be a PC to which a microphone has been attached in the Division of Public Safety's Emergency Communication Center (ECC), backed up by a second unit, along with some special software.

A 49-foot antenna has already been installed on a hillside near the corner of Wilson Dr. and Rockville Pike. This location offers a maximum effective broadcast range of 4-6 miles. "That gets us to the major traffic corridors around campus," Hayden observes. There are plans to add "repeater" towers to the area near Rockledge Dr. and Executive Blvd., where NIH rents large office buildings. "These additional transmitters will give us access to the largest concentrations of employees off-campus," Hayden said. "We'll go ahead on that portion of the project after the first system is up and operating, and most of the bugs have been worked out."

Feeding information into the system will be a network already in place with the ECC, which is on duty 24 hours a day. Standard messages will be pre-recorded. After using the system and developing these standards, messages can be professionally recorded by a member of the Office of Communications and Public Liaison. The system is also capable of handling input from microphones in the two "studios" (Hayden's PC, and the main PC in the campus's ECC) as well as live feeds using phones. During "down time" when there are no special traffic advisories, the system will then switch automatically to the nonstop regional weather feed from the National Oceanic and Atmospheric Administration. There will not be any advertisements or sports talk, however, because the law restricts the station from those types of commercial uses.

However, campus events or even messages requesting blood donations could be included.

Working in concert with the NIH radio station is an array of three "variable message signs," which are portable traffic advisory billboards designed to be arranged strategically around the campus. "We can put those up in the bottleneck areas," said Hayden. There are also portable flashing beacon light units to attract the attention of drivers in case of emergency.

"Our goal is coordination, and to avoid giving conflicting messages," Hayden explained. "We also want to keep the system updated and current."

"We are also working closely with the Maryland State Highway Administration, which fully supports our program," said Hayden, noting that NIH will be working with the Maryland Chesapeake Highways Advisory Routing Traffic, or CHART, network that would coordinate major region-wide evacuations in the event of disaster. "The same North Carolina company (Highway Information Systems, Inc.) that's installing our system is also installing the District of Columbia's emergency evacuation system," which involves six radio towers around the city.

Regardless of what the station is eventually named, Hayden urges NIHers to become familiar with 1610 on the radio dial. "I was hoping they'd call it WTOM, but I doubt that will happen," he says.

**Trauma Survivors Sought**

Volunteers are needed for research studies looking at how people respond to and cope with a traumatic experience. Studies for people over 18 years old may include brain imaging, measurement of stress hormones and a free trial of commonly used medications for eligible participants. Compensation available for select studies. Call 1-866-MAP-NIMH (1-866-627-6464) or TTY 1-866-411-1010.
Commissioned Corps Holds Promotion Ceremony

Promotion ceremonies in Wilson Hall recently honored 37 NIH Public Health Service Commissioned Corps officers. Rear Admiral Richard G. Wyatt, the NIH representative to the surgeon general’s policy advisory council, presided. Rear Admiral Kenneth P. Moritsugu, deputy surgeon general, gave the keynote remarks and officiated along with family members and coworkers in the placement of promotion boards for each officer.

Wyatt emphasized the partnership of commissioned officers and civil servants in carrying out the complementing missions of NIH and PHS. "The mission of the NIH and the mission of the Commissioned Corps are and have been linked together for decades. The importance of the corps at NIH and the commitment to officers here are unquestionable and not debatable," he said.

"We are witnessing presently at NIH the efforts of our director, Dr. Elias Zerhouni, in developing a roadmap to help guide research. Likewise, we are witnessing the unveiling of the Secretary’s plan to transform the Commissioned Corps to meet the public health and emergency preparedness challenges it faces," Wyatt told the audience of nearly 130 officers, family members and friends. "It is our responsibility to work together to find ways to fit both challenge and mission together meaningfully. To do that, you will be key participants in developing solutions to these issues."

Moritsugu added that the Commissioned Corps is facing a period of exciting transition. "Through the transformation, our Commissioned Corps will increase in size, capability and deployability, with an increased clinical focus. We will be part of that transformation, and through it, our corps will be stronger, more robust and more responsive to the public health needs of our nation for the 21st century."


Female Volunteers Needed

The Behavioral Endocrinology Branch, NIMH, seeks healthy female volunteers ages 40-50 to participate in longitudinal studies of the perimenopause. Volunteers must have regular menstrual cycles and be medication-free. Periodic hormonal evaluations, symptom rating completion and occasional interviews will be performed. Subjects will be paid. Call Linda Simpson-St. Clair, 496-9576.

Don’t Get ‘Stuck’ Without Your PIN

Use Employee Express to Manage Benefits

Effective Oct. 1, NIH employees will manage many of their benefits online. Employee Express is an automated system that provides access 24/7. Employees can make changes to their benefits information anywhere at anytime. Employee Express is efficient, reduces paperwork and gives employees control and flexibility. Beginning Oct. 1, Employee Express will be used exclusively for:

♦ tax withholding (federal & state exemptions/amount);
♦ direct deposit/financial allotment changes;
♦ home address changes;
♦ Federal Employee Health Benefit Plan enrollment/changes (during open season);
♦ TSP percentage of salary deductions (during open season).

You will need a personal identification number (PIN) to use the system. Don’t get “stuck” without your PIN. To get a PIN and to learn more about Employee Express, visit http://www3.od.nih.gov/ohrm/ee/nihbenefinfo.htm.
CANCER DISPARITIES, CONTINUED FROM PAGE 1

More than 300 investigators and staffers from SPN's 18 research coalitions in 15 states reported on their outreach advances and insights during the summit. The networks are funded and managed by NCI's Center to Reduce Cancer Health Disparities. The 3-day meeting spotlighted how various SPN research projects are functioning as community-based cancer control partnerships. SPNs are now actively engaging their communities in a range of pilot research activities and moving forward to become peer-reviewed and funded cancer control and cancer prevention research and demonstration projects. NCI research grants are issued to researchers for public health projects that may focus on many communities nationwide or on projects in a single county, tribal nation or specific population subgroup.

Von Eschenbach said NCI is seeking to address the problem of cancer health disparities by partnering and leveraging with other NIH institutes and HHS agencies, as well as the non-profit and for-profit sectors.

SPNs are already achieving success, according to Dr. Kenneth Chu, center program director. He said that SPN research projects have received some $11.5 million in funding from non-NCI sources. "That represents half of the money that NCI granted to start your projects," he said.

In his report to summit participants, Chu said SPNs have, in just 3 years:
- Conducted 480 cancer awareness activities using SPN materials written in 8 languages;
- Formed more than 300 signed partnerships with community-based organizations, national and local groups, state and local governments, and other entities in outreach efforts to reduce cancer health disparities;
- Created more than 20 SPN web sites and more than 20 newsletters to disseminate cancer control information in local communities;
- Trained more than 300 junior investigators who are from minority or underserved populations;
- Recruited more than 2,000 community-based volunteers for cancer control efforts using curricula developed by the SPN;
- Submitted 179 grant applications for funding to conduct a range of pilot projects to reduce cancer health disparities targeting groups including Asian Americans, Indians or Native Americans, Mississippi Delta residents and Native Hawaiians; and
- Submitted or published more than 90 research papers in peer-reviewed medical journals.

In April, SPN transitioned to the third and final phase (years 4 and 5) of their 5-year projects, said Center Project Director Frank Jackson. In Phase III, the various SPNs will use information gleaned from their pilot projects to develop investigator-initiated research grant applications, as well as to enhance the infrastructure developed in the earlier phases.

"I think that we are right on target for the next phase—applying for and obtaining major funding for the full-fledged research projects," said center director Dr. Harold P. Freeman. "I believe that we can and will be successful."

The center is examining re-competition of the Special Populations Networks to continue NCI's focus on reducing cancer disparities.

SIT Computer Classes

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

- Getting Started w/Medical Image Processing Analysis and Visualization (MIPAV) 9/11
- New Features of VirusScan 7.0 9/9
- ePolicy Orchestrator 3.0 for System Administrators 9/11
- Building a Home Network 9/12
- Partek Pro for Gene Expression Analysis 9/12
- Advanced Statistical Analysis of Microarray Data Using ANOVA Techniques w/Partek 9/12
- Building Diagnostic Models Using Microarray Data in Partek Pro 9/12
- NIH HUG - Handheld Users Group 9/15
- Multiple Sequence Alignment: Theory and Practice 9/16
- The Essentials of Adobe Acrobat 6.0 and Acrobat 5.05 (Windows) 9/16
- Statistical Analysis of Microarray Data Analysis of Kinetics Using a Hybrid Maximum-Entropy/Maximum-Likelihood Method 9/17
- DSG - Desktop Support 9/17
- The Essentials of Adobe Acrobat 6.0 and Acrobat 5.05 (Mac) 9/18

Type III Gaucher Disease?

People with type III Gaucher disease may be able to participate in a study at NIH. The study is evaluating the drug OGT 918. For more information call 1-800-411-1222 (TTY 1-866-411-1010).
OD's Ana Kennedy Retires

Amid a group of family and well-wishers, Ana Kennedy retired from NIH after 32 years of government service. At the time of her retirement, Kennedy served as a management analyst in the Office of the Director's Equal Employment Opportunity Office.

"Ana exemplifies the positive attributes we value in federal service—excellent communication skills and always helpful," noted Mary Okwaro, EEO specialist in OD and Kennedy's longtime friend and coworker.

Kennedy began her federal career in 1971 as a GS-3 clerk-typist in the National Institute of Mental Health (clearinghouse). "I came as a summer aide and just stayed," she said, summing it up simply. During her tenure at NIH she worked in several other capacities with ever-increasing responsibilities, including at the National Institute on Drug Abuse as an information clerk, at the Clinical Center as a management analyst, and in OD's Office of Management Policy as a management analyst. In 1995, she joined the OD EEO staff.

"Ana has given unselfishly to the NIH community in general and to the OD specifically," said Hilda Dixon, OD Diversity and Special Emphasis Program manager and head of OD EEO. "Her kindness, generosity, creativity, patience and her wealth of knowledge will be greatly missed."

In addition to her duties as a management analyst, Kennedy served as advisor to the OD EEO advisory committee for several years and gave her leadership to many outstanding initiatives, including the "RESPECT" campaign, "Wake Up and Walk," and the OD Mentoring and Training Program, which grew and flourished under her expert guidance.

Marcia Doniger, a writer-editor in the NIH Office of Communications and Public Liaison and chair of the OD EEO advisory committee, recalled Kennedy's contributions: "If I were asked to describe Ana's accomplishments at NIH in just a few words, they would be: 'Ana, you made a difference!' Whether you were functioning as Hilda Dixon's 'right arm,' or juggling your way through several different projects at once, you always made time for people—even when time was a short and a precious commodity."

Kennedy also served as coordinator for the NIH Gallaudet Intern Program, sponsored by OD EEO. Over a 5-year period, Ana placed more than 40 Gallaudet interns. She served on many NIH Special Emphasis Program committees, including 4 years on the "Take Your Child to Work Day" planning committee, and at least twice on the committee to plan NIH's Deaf Employees Awareness program.

"She was dedicated to giving some ideas on how to educate the NIH community about recruitment and trying to hire more deaf and hard of hearing people," remarked Blaise Delahoussaye, a former chair of NIH's Deaf Employees Awareness Forum who worked on several planning committees with Kennedy. "She understands the deaf community pretty well and always enjoyed communicating with me and other deaf employees independently. She likes to talk to me directly by signing. That has helped her refresh her memory of the sign language course she took at Montgomery College. She was fascinated with learning American Sign Language. Once a week, we chatted and she learned some new signing each time."

Sally MacDougall of OD's Office of Management worked next door to Kennedy. "She is one of the nicest persons I ever met and I always enjoy chatting with her," MacDougall noted. "She was very enthusiastic to learn sign language and I was impressed with her efforts, because she found the time to take sign language classes and keep practicing while she had a very busy schedule at work."

A retirement gathering, "Ana Kennedy Day," was held in Bldg. 1's Wilson Hall, where dozens of her family, colleagues and friends said goodbye and good luck.

Tae Kwon Do Beginner's Class

The NIH Tae Kwon Do School is offering a beginner's class for adults and mature teens starting Sept. 15. The curriculum combines traditional striking arts, forms and sparring with emphasis on self-defense. No experience is necessary. Class will meet in the Malone Center (Bldg. 31C, B4 level, next to the NIH Fitness Center) from 6 to 8 p.m. on Mondays and Wednesdays, and will continue for about 2 months until participants can be integrated into the regular school training. Dues are $40 per quarter and a uniform costs $30. Interested persons are welcome to watch regular training sessions. For information call Andrew Schwartz, 402-5197 or visit http://www.recgov.org/r&cw/nihtaekwondo.html.
2003 Medicine for the Public Lectures Set

The 2003 Medicine for the Public lecture series, now in its 27th year, features NIH physician-researchers working on the forefront of medical discovery. The series helps people understand the latest developments in medicine with an emphasis on topics of current relevance. Sponsored by the Clinical Center, the lectures are held at 7 p.m. on Tuesdays in Masur Auditorium, Bldg. 10. All lectures are free and open to the public.

Sept. 16—“Alzheimer’s Disease: Advances and Hope,” Dr. Trey Sunderland, chief, Geriatric Psychiatry Branch, NIMH.

Despite many recent advances in the understanding of Alzheimer’s disease, its diagnosis is still based on vague clinical criteria and confirmed only by biopsy or autopsy. Sunderland will describe progress to date of a comprehensive study to examine the spinal fluid of Alzheimer’s patients during the course of their illness compared to healthy patients.

Sept. 23—“Preparing for SARS, or Smallpox, or Whatever Comes Next: Responding to Emerging Infectious Diseases and Bioterrorism Threats,” Dr. David Henderson, deputy director for clinical care, Clinical Center.

The world has recently seen an emergence or reemergence of infectious diseases such as smallpox, SARS, West Nile virus, and monkeypox. Henderson will discuss these and how the Clinical Center has responded to new diseases in the past.

Sept. 30—“Sickle Cell Anemia: Moving from Pain to Cure,” Dr. Mark Gladwin, senior investigator, section chief, sickle cell/nitric oxide therapeutics section, CC critical care medicine department.

Sickle cell disease is one of the most common inherited blood disorders in the U.S. Understanding the disease and its warning signs aids researchers working to unravel the mysteries of sickle cell.

Gladwin will cover those topics and related ongoing clinical research.

Oct. 7—“Stem Cell Transplantation: Promise in Cancer Treatments and Blood Disorders,” Dr. Michael Bishop, investigator and clinical head, Experimental Transplantation and Immunology Branch, NCI.

Bone marrow transplantation has been in clinical use for more than 30 years. Today, it is more commonly referred to as stem cell transplantation, as stem cells can be obtained from several sources other than bone marrow. Bishop will discuss research efforts that focus on increasing application of stem cell transplantation to a broader patient population.

Oct. 21—“When Too Much Iron Is Bad: Hemochromatosis, the Silent Blood Disease,” Dr. Susan Leitman, acting chief of transfusion medicine, CC.

Too much iron in the blood can cause health problems. Carrying potentially serious effects is a blood disorder called hemochromatosis. It can cause liver damage and premature arthritis. This easily detectable and treatable disorder, often called the silent blood disease, is the focus of Leitman’s presentation.


Arthritis, depression, menopause, cancer—for millions of Americans, these and other health concerns are not being adequately addressed through conventional medicine. Many are turning to other approaches. Straus will discuss research on which complementary and alternative medicine practices work and whether they are safe.

For more information on the MFP series, call 496-2563, or visit http://www.cc.nih.gov/cc/mfp/current/index.html.

Dr. George M. Whitesides, an NIGMS grantee since 1982, was among three recipients of this year’s Kyoto Prize. The international awards, which are presented annually, recognize groups and individuals “who have contributed greatly toward mankind’s scientific, cultural and spiritual betterment.”

Whitesides is a professor in the department of chemistry and chemical biology at Harvard University. According to the Kyoto Prize website, he is being honored for “developing technologies that combine organic, bio- and inorganic molecules using self-assembled organic monolayers.” By doing this, “Whitesides has succeeded in patterning and joining of organic materials, which is indispensable for organic nanotechnologies.” The awards were established in 1985 by the Inamori Foundation, an organization that was created by Dr. Kazuo Inamori, who is also the founder of the Kyocera Corp. Whitesides will receive a diploma, a 20-karat-gold Kyoto Prize Medal and approximately $400,000 at a Nov. 10 ceremony in Japan.

Wednesday Afternoon Lectures Return

The Wednesday Afternoon Lecture series—held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—features Dr. Kathryn V. Holmes on Sept. 10, speaking on the topic, “Coronavirus Receptor Recognition and Entry.” She is professor of microbiology, University of Colorado Health Sciences Center, Denver.

On Sept. 17, Dr. Peter Gruss will give the George Khoury Lecture on “The George Khoury Legacy: From Transcription to Regenerative Medicine.” Gruss is president, Max-Plank-Gesellschaft, Munich, Germany. See story on p. 1.

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