

THE NIH RECORD

Still The Second Best Thing About Payday

Team Effort Minimizes Isabel's Damage to NIH

By Brad Moss

A little bit of luck, a lot of preparation, and a dedicated group of employees helped to minimize the damage and disruption of services to NIH during Hurricane Isabel.

Even though federal agencies in the metro area were closed, a coordinated group of employees stayed behind on Sept. 18-19, and many remained throughout the weekend to ensure critical operations were maintained before, during and after the storm.

Key personnel from the Office of Research Facilities, Office of Research Services, Clinical Center and the Center for Information Technology participated in emergency preparedness meetings held throughout the week leading up to Isabel's arrival.

SEE HURRICANE ISABEL, PAGE 4

RNA Interference Is Focus of Stetten Lecture, Oct. 22

By Alison Davis

It all started when scientists trying to genetically engineer purple petunias ended up with plain white ones instead. By trying to supply a color gene, the researchers had unexpectedly erased a trait instead of adding one.

Getting to the bottom of this mystery took a little luck and the careful eyes of a team of basic researchers working on something completely different. Dr. Andrew Fire of the Carnegie Institution of Washington in Baltimore and his colleague Dr. Craig Mello of the University of Massachusetts Medical School in Worcester were the ones to explain the curious finding. In so doing, the team christened a new technology, a powerful gene-silencing tool called RNA

SEE STETTEN LECTURE, PAGE 12

HIGHLIGHTS

1

The Biodefense Bldg. Goes Up

Relay Race Draws Spirited Crowd

3

CDC's Gerberding To Speak, Oct. 24

Biker Armstrong Visits, Oct. 17

5

Farnsworth To Give NCCAM Lecture

13

Tribal Leaders Thank NIH'ers

16

Redskins Host Young Visitors



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Biodefense Research Program Fast-Tracker

New Bldg. 33 Complex To Focus on Infectious Diseases

By Carla Garnett

If all goes as planned over the course of the next 2 years, by November 2005 the northeastern corner of NIH's Bethesda campus will be the site of a new 150,000 gross-square-foot lab facility, 1,230-space multilevel parking garage, underground storm water management system and a plaza/courtyard. Currently dubbed the Bldg. 33 Complex, the project will be completed in



An artist's rendering of how the new Bldg. 33 complex will look once complete in 2005.

several stages with the first stage set in motion in late September.

The lab facility, Bldg. 33, will be occupied by scientists working at the National Institute of Allergy and Infectious Diseases, which

SEE BLDG. 33 COMPLEX, PAGE 8

Institute Relay Draws Another Creative Crowd

By Rich McManus

In its 20th year, the NIH Institute Relay Challenge race has taken on some new cultural aspects, adopting the costume of such farcical runs as San Francisco's Bay to Breakers Race, and being better documented, via digital camera and videotape, than a World Trade Organization street protest. But it was all in good fun as more than 70 5-member coed teams ran circles around Bldg. 1 as several hundred friends, family and coworkers cheered them on.

The innate human desire to encourage one's colleagues found frank expression on Sept. 27 as participants—some in team tie dye, others



Ibn Alston of the DEA Express, an NIAID team, grimaces as he approaches the finish line.

SEE RELAY RACE, PAGE 6

LETTERS TO THE EDITOR

Parklawn Classic Set, Oct. 17

The 28th annual Parklawn Classic will be held on Friday, Oct. 17, after having been postponed last April due to security concerns; the event will again be held in April in 2004. The Classic is the oldest and largest continuously run government-sponsored race in the country.

Included as part of the event is a 5-mile run and 2.5-mile health walk. The walk is free, and can be entered the day of the event, but the run requires a fee of \$10 if paid by Oct. 15 and \$20 if paid on the 16th; no race-day registration is available for the run. The footrace will start at 10 a.m. at the Parklawn complex and the walk begins at 11 a.m.

For more information and to register, call the race hotline at 443-5350 (TTY 443-0530) or visit <http://classic.dhhs.gov>. NIH'ers can register at the R&W activities desk in Bldg. 31, Rm. B1W30.

Dear Editor,

Reporting on the Mid-Pike Plaza shuttle: I arrived at Mid-Pike Plaza this morning at 6:17 and the 6:15 van was still there. The driver helped me into the van where two women were already seated in the very nicely upholstered seats. We left at 6:18 and arrived at Medical Center Metro at 6:30. Again, the driver helped two of us off the van. It felt like we had a chauffeur.

One of the women walked to Mid-Pike from the high rise across the street. She then took another shuttle to Rockledge. She does not own a car and was taking a cab to campus before the extended hours of the Mid-Pike shuttle were implemented (by the way, she did not know about Transshare.). The other woman works in Bldg. 31 and started using Mid-Pike some time ago as parking near Bldg. 31 became more and more difficult. She lives in Rockville, not convenient to the Metro. She really likes how the shuttle drops her right in front of 31.

I walked to Bldg. 41, which took about 8 minutes, and was quite lovely in the mild weather and little traffic.

I really do think that if people knew how comfortable and efficient this route is, they would come aboard. Perhaps there is some token—like a coupon to the cafeteria—NIH can offer people to just try Mid-Pike.

Dawn Walker, NCI

Meeting of Systems Biology Group

The newly formed Systems Biology Interest Group (SysBioSIG) is holding an educational and training retreat at Airlie House in Warrenton, Va., Nov. 7-9. More than a dozen leading extramural scientists active in this emerging field will speak, including Leroy Hood, Alex Mogilner, Bernard Palsson, Roger Brent, Leslie Lowe and others, giving their views of what the term "systems biology" means, what the major questions in the field are, how these questions can be approached experimentally and computationally, and what training and support infrastructure are needed to allow the field to develop its full potential.

Members of the NIH extramural staff will also address the group and SysBioSIG members attending the meeting will discuss future activities of the group.

If you are interested in attending, and especially if you wish to present a poster, contact Victor Pollara at 402-1620, email pollarav@mail.nih.gov or Kevin Lauderdale, 451-6446, email lauderdk@nigms.nih.gov. Preference will be given to those who register early and who contribute posters to the meeting. To learn more about the retreat and to join SysBioSIG, visit http://tango01.cit.nih.gov/sig/home.taf?_function=main&SIGInfo_SIGID=124. ■



White men over 65 committed suicide eight times more frequently than white women the same age in 2000, Dr. Thomas Insel (l), director of the National Institute on Mental Health told the National Institute on Aging's national advisory council on Sept. 24. His presentation was part of a dialogue with Dr. Richard Hodes (r), NIA director, who has spoken to NIMH staff about areas of mutual interest. Reducing suicide is of particular importance to NIA because older men have the highest suicide rates compared to all other groups and are least likely to use mental health care services. Recently, NIA, NIMH, the National Institute on Alcohol Abuse and Alcoholism, the National Institute on Drug Abuse and the National Cancer Institute invited grant applications for interdisciplinary research that will help develop strategies to reduce suicide (<http://grants1.nih.gov/grants/guide/pa-files/PA-03-161.html>). The program announcement is in line with the "Roadmap for Medical Research" set out by NIH director Dr. Elias Zerhouni.

Have Uterine Fibroids?

Call NIH at 1-800-411-1222 for information on a study using a new medication for 3 months before hysterectomy. Study-related treatment provided at no cost. Compensation is provided. TTY: 1-866-411-1010, or email prpl@cc.nih.gov. ■

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Gerberding To Speak on Today's Health Threats

Dr. Julie Gerberding, director of the Centers for Disease Control and Prevention, will deliver the 2003 Kinyoun Lecture on Friday, Oct. 24. Her lecture, titled "21st-Century Health Threats: The New Normal," will begin at 3 p.m. in Masur Auditorium, Bldg. 10. The Kinyoun Lecture is sponsored by NIAID.

As leader of CDC, Gerberding guides the national response to bioterrorism threats and emerging diseases such as SARS and West Nile virus. During the anthrax attacks of 2001, while she was acting deputy director of CDC's National Center for

Infectious Diseases, she demonstrated her effectiveness in responding to the simultaneous needs of the news media, senior government officials and the public.

On July 3, 2002, Health and Human Services Secretary Tommy Thompson appointed her director of CDC, an agency that promotes health and quality of life by preventing and control-



Dr. Julie Gerberding

ling disease, injury and disability.

Gerberding first joined CDC as director of the Division of Health Care Quality Promotion (formerly the Hospital Infections Program) in 1998. Previously, she was director of the infection prevention center at the University of California, San Francisco, and had held various teaching and professional appointments at UCSF since 1984. She continues to hold an associate professorship at the University of California and is also an associate clinical professor of medicine at Emory University.

Both a teacher and physician, Gerberding has worked on public health issues, primarily HIV and AIDS, for more than 20 years. Her consulting work for national and international public health agencies shaped guidelines for preventing the occupational spread of HIV in hospitals and other health care settings. She has written or co-written more than 120 peer-reviewed publications and textbook chapters.

National and international public health agencies, including NIH, CDC and the World Health Organization have frequently sought her advice on HIV and AIDS. At UCSF in the early 1980s, Gerberding treated patients with a mysterious illness now known to be AIDS. She served on the San Francisco mayor's AIDS task force from 1985 to 1987. Between 1985 and 1989, she also advised the

American Medical Association on HIV risk among health care providers, CDC on HIV/AIDS infection control guidelines and NIH on ethical responsibilities of AIDS caregivers.

Reared in Brookings, S. Dak., Gerberding earned her B.A. degree *magna cum laude* in chemistry/biology and her M.D. degree from Case Western Reserve University. After her internship and residency at UCSF, she became chief medical resident. She completed a fellowship in clinical pharmacology and infectious diseases there in 1988. She earned a master's degree in public health from the University of California, Berkeley, in 1990.

Gerberding has received several honors and awards. She is a member of Phi Beta Kappa honor society and Alpha Omega Alpha medical honor society. In 2001, she received the HHS Distinguished Service Award, and in 1997, she was named a fellow of the Infectious Diseases Society of America.

The Kinyoun Lecture is dedicated to the memory of Dr. Joseph J. Kinyoun who founded the Laboratory of Hygiene in 1887. The present-day NIH evolved from Kinyoun's original one-room laboratory on Staten Island. ■

Lance Armstrong To Visit NIH

Lance Armstrong and members of the Tour of Hope—a monumental week-long, 3,200 mile cycling journey across the country—will make a special stop at NIH on Friday, Oct. 17, from 11:30 a.m. to 12:15 p.m., in Masur Auditorium, Bldg. 10. The goal of the tour, sponsored by Bristol-Myers Squibb, is to raise awareness of the importance of cancer research and participation in clinical trials. During the ride, the team of cyclists will be encouraging Americans to sign the cancer promise, a personal commitment to learn more about cancer and to recognize the value of research on the disease.

Speakers at the NIH event will include NCI director Dr. Andrew von Eschenbach, Clinical Center director Dr. John Gallin, Armstrong, and Peter Scacheri, an NHGRI scientist who is participating in memory of a friend.

Other cyclists participating in the Tour of Hope's 26-member squad are cancer survivors, caregivers, physicians, nurses and researchers. Armstrong will join the team along parts of the tour, which began in Los Angeles on Oct. 11 and concludes in Washington, D.C., the day after its visit at NIH. The Oct. 17 event is open to all staff and patients in the NIH community.

To learn more about the tour, go to www.tourofhopec.org.



Dr. Eun Ah Cho has been named scientific review administrator for the new tumor microenvironment study section at the Center for Scientific Review. She recently participated in CSR's Review Internship Program. Cho received her Ph.D. in immunology from the University of Pennsylvania, where she studied the mechanisms of T-cell tolerance. In postdoctoral research at the University of Michigan, she studied the molecular mechanism of embryonic kidney development. Before coming to CSR, she was a staff research fellow at the NCI Laboratory of Cell Regulation and Carcinogenesis, where she worked for Dr. Seong-Jin Kim, studying the role of transforming growth factor beta-1 in cellular transformation.



Dr. Delia Tang has moved from NIDDK to the Center for Scientific Review to be the new scientific review administrator for the erythrocyte and leukocyte biology study section. She earned her M.D. from Beijing Medical University in China before beginning her research career at the Uniformed Services University of Health Sciences. Tang obtained an M.S. in pharmacology there. She subsequently joined NIDDK, where she developed methods to diagnose alpha-thalassemia, which is an inherited form of anemia. She became a senior fellow, conducting research on gene regulation for sickle cell anemia and hemoglobin pathology. Tang later became a staff scientist and managed research on gene regulation and expression related to hematological diseases.

HURRICANE ISABEL, CONTINUED FROM PAGE 1

Each component also held its own meetings to prepare the campus for everything from a glancing blow to a direct hit from the hurricane. The entities either activated their command centers or placed them on stand-by. Even NIH director Dr. Elias Zerhouni had his own Director's Command Center operating on stand-by status. Each center serves a different function: "The Clinical Center deals principally with clinical issues, facilities deals with facilities issues and supports the Clinical Center," explained Arturo Giron, NIH deputy chief security officer. "The COOP (Continuity of Operations Program)—the NIH corporate command center—brings all the people and elements that we need to bring into the fore." Zerhouni's Senior Management Command Center is "strictly for senior management" to be activated in the event "we had major losses where we needed managers to congregate to make some very serious decisions," Giron added.

When the storm hit, some power lines went down, numerous trees were lost and certain on-campus and off-campus facilities experienced short-term power outages requiring backup generator power, including the Cloisters (Bldg. 60), Bldgs. 61, 82 and Twinbrook I & II. However, there was only minimal damage to facilities, including a few leaks and a tree falling on a trailer. "The ORF staff, the grounds people in particular, were real champs during the storm...they were out during the storm ensuring that fallen trees were dealt with so we wouldn't have major problems down the road," said Giron. "We got lucky in two ways, the most important being that the storm didn't hit us head on, we only got a glancing blow. Number two, we lucked out in that the majority of damage that we had, particularly fallen trees, didn't fall on structures."

How does NIH plan for a hurricane? At the Clinical Center, staff made preparations to keep the hospital operating through the storm, including feeding, housing and keeping patients, employees and visitors safe. During the height of the storm, the CC had 165 inpatients, 3 outpatients and approximately 160 employees who spent the night in the hospital. Critical clinical and operational departments assessed their readiness and added to inventories to ensure adequate supplies would be available beyond any potential emergency. CIT ensured radio and other telecommunications antennas were secure, maintained full operations of all data service centers and web servers including email for NIH, the Office of the Secretary, HHS, and HRSA. Extra telephone operations staff was added to handle any additional emergency-related calls.

The ORF staff secured construction sites and any freestanding or loose objects (for example, metal picnic tables were chained together upside down and tethered to trees), particularly on rooftops, cleared storm drains and placed more than 3,000 sandbags

in areas subject to flooding. During the storm, they cleared downed trees, repaired downed power lines, restored power outages, laid more sandbags and installed emergency generators in buildings with temporary power outages. The NIH Police and security personnel maintained security for all NIH facilities including continuous patrols and surveillance, and placed guards in buildings without power. The Fire and Rescue services responded to 13 emergency calls including one minor electrical fire in Bldg. 45. Veterinary staff ensured the well-being of all animals on campus and at the Animal Center in Poolsville.

When employees returned to campus on Monday, except for a few missing trees and some minor roof damage, the buildings, roads and grounds were substantially back to normal.

All of the preparation paid off. "I think, at least in part, the reason we suffered as little damage as we did was because of the planning that we did," Giron emphasized. "Everybody made sure that everything was battened down; the ORF in particular, did a real good job in tightening all the bolts...The community needs to feel comfortable that these things just don't happen and we react, but that we were proactive in planning, that with all of these organizations, there was a corporate planning effort."

While a power outage at home might mean spoiled food or an unplanned candlelight dinner, a power outage at NIH can mean essential hospital equipment could fail, animal care could be compromised or important research interrupted. "The commitment and dedication of the front-line workers in all of the service organizations involved was outstanding," Giron concluded. "These men and women deserve a great deal of credit and gratitude for ensuring the ongoing operations of the NIH."

From now on, NIH will also be conducting "after incident" exercises to take the lessons learned from this experience to help emergency response staff prepare for similar situations in the future.

"If there is a moral to the story of Hurricane Isabel," said Giron, "it would be, 'The dedication, preparation and perseverance of the NIH employees pays off yet again!'" ■

Stopping Your HRT? Worried About Mood?

The Behavioral Endocrinology Branch, NIMH, is investigating whether mood, anxiety and irritability accompany hormone replacement therapy (HRT) withdrawal. Participants should be ages 45-60, with a past history of perimenopausal mood symptoms responsive to estrogen therapy (ET) or HRT, who are currently on ET or HRT and in good physical health. For information call Linda Simpson-St. Clair, 496-9576. ■

Farnsworth To Give NCCAM Lecture

Throughout human history, plants and plant-derived chemicals have been used for medicinal purposes—an early example being morphine and more recently taxol, camptothecin, vinblastine and vincristine. Yet relatively little scientific research, in industry, has been conducted to discover new drugs and to evaluate the efficacy of drugs and dietary supplements derived from natural sources. Only in the last 10 years, as public interest in herbal medicines and dietary supplements has skyrocketed, has the United States begun to invest in scientifically rigorous natural product research.



Dr. Norman Farnsworth

On Wednesday, Oct. 22, members of the NIH community and the public will have an opportunity to hear Dr. Norman R. Farnsworth, an internationally renowned scholar and pioneer in the field of pharmacognosy—medicinal plant research and herbal medicines. He will speak on “Herbal Medicine: Ancient Practice Meets Modern Science,” as the second lecturer hosted by the National Center for Complementary and Alternative Medicine in 2003 for its Distinguished Lectures in the Science of Complementary and Alternative Medicine. Farnsworth is director of the Program for Collaborative Research in the Pharmaceutical Sciences, College of Pharmacy, University of Illinois at Chicago, and is director of the UIC/NIH Center for Botanical Dietary Supplements Research. The talk will take place at noon in Masur Auditorium, Bldg. 10.

Author of more than 500 original research papers and review articles in the field of natural products, Farnsworth has assembled the largest and most active academic pharmacognosy research group in the U.S. In 1975, he established NAPRALERT, the world's largest relational database on natural products that provides information on the chemistry, pharmacology and traditional uses of medicinal plants, fungi, microorganisms and marine organisms. This system is available online and is a valued resource for research institutions, the pharmaceutical and supplement industries and conservation groups. Recipient of three honorary doctorates and three honorary professorships, he received his B.S. and M.S. degrees from the Massachusetts College of Pharmacy and his Ph.D. from the University of Pittsburgh. He has been a member of the World Health Organization expert advisory panel on

traditional medicine since 1983. He recently served on the Presidential Commission on Dietary Supplement Labels and has been named senior research scholar and university distinguished professor at UIC.

Farnsworth will discuss basic and clinical research now being conducted on many of the most important botanical drugs and dietary supplements, as well as continuing opportunities for developing new drugs and dietary supplements from botanical sources. He will provide evidence of progress in developing chemically and biologically standardized plant extracts. The lecture will cover plant collection, identification, isolation of active ingredients by bioassay-directed fractionation, and the study of metabolism and safety through phase I and the beginning of phase II clinical trials using plant extracts.

All are invited to attend. The lecture will also be webcast on <http://videocast.nih.gov>. For reasonable accommodation, contact Eugene Marquis at 402-9686, or the Federal Relay at 1-800-877-8339. For lecture information, contact nccamlecture@matthewsgroup.com or visit <http://www.nccam.nih.gov/>.

'Foil the Flu' 2003 Coming Soon

The annual “Foil the Flu” influenza vaccine program sponsored by the Occupational Medical Service, Office of Research Services, will start Thursday, Nov. 6. A full schedule will appear in the next issue of the *Record* and is currently available on the web site <http://www.nih.gov/od/ors/ds/flu/>.

David Whitmer has been appointed executive officer at the Center for Scientific Review. “He brings 10 years of NIH management experience to this important position,” said Dr. Ellie Ehrenfeld, then CSR director. “He will be a tremendous asset as CSR works to manage its increasing workload and completes its reorganization.” Whitmer holds a master's degree in public administration and political science from the University of South Florida. He started his NIH career as a presidential management intern, spending his first year as an administrative officer for the NCI Division of Cancer Etiology. He then moved to NCI's Office of the Director, where he was a management analyst coordinating management surveys and quantitative studies, producing NCI procedure and policy manuals, and developing automated systems for disseminating information on these new procedures and policies. Before coming to CSR, he was chief of the NHLBI Management Policy and Administrative Services Branch. He formulated and implemented NHLBI's administrative policies and procedures, and coordinated the delivery of administrative support services.



RELAY RACE, CONTINUED FROM PAGE 1

in camouflage—gathered on Center Drive for the start of a race sponsored by NIH's R&W Association, assisted by alumni of NIH's long-time running club, Health's Angels.

Toeing the starting line before the first heat—which was sent off at high noon by a whistle blast from Dr.

Richard G. Wyatt, executive director of the Office of Intramural Research—was Jesus Vazquez, a guest researcher with the Howard Hughes Medical Institute, who wore a gold



Stretching their muscles prior to the relay race were Team Yuspa members including (from l) Katie Decicco, Jessica Holly, Christophe Cataisson, Lisa Nolan, Andrea Pearson and Rebecca Dumont.

paper crown, courtesy of Burger King, a bath towel cape and carried a yellow helium balloon on which his team name—Huge (Hughes) Heads—was inscribed. Next to him was a woman wearing deely-bobber antennae. Then came a gentleman dressed all in black, presumably in tribute to recently deceased country singer Johnny Cash. And, like last year, a number of runners ran in street clothes, including long pants and brown brogans.

At least some of the participants took the event seriously. Finishing first in a time of 14:20 was Parasites on the Run, from NIAID's Laboratory of Parasitic Diseases, which improved on last year's

race-winning time by 7 seconds. "We get better as we get older," joked team member Marcelo Ramalho-Ortigao. Joining him on the first-place team were Karl Seydel, Nanda Gudderra, Ana B.G. Veiga and Deirdre Joy. Team captain Gudderra had an especially strong reason for wanting to do well: "I was running this relay for my dad, who has not been feeling well recently but is doing better now. He used to be an athlete. I wanted to win this race to cheer him up and bring back that smile on his face."

On a recent trip to visit his family in India, Gudderra bought special T-shirts at Goa Beach for all his teammates. "Goa is a beautiful place on the southeastern coast of India, with a dozen or so beaches," he explained. "While in Goa I used

to run on the beach, it was just great! While on the run, I decided to dedicate this race to my dad. T-shirts were a little souvenir to my team members."

The NIH relay was no run on the shore, however. The campus used to be a tranquil enough place that the race route didn't include competition with cars, trucks and other motorized vehicles, which coughed by in a steady stream. It is a tribute to NIH Police

officers Udon Cheek, Robert Drummond, Marco Kittrell and their colleagues that no one got hurt during the hour-long event.

Other notably enthusiastic participants included Team Yuspa (finished



Getting loose are Ansalan Stewart (c), Tabitha Davol (r), with Ed Wilgus (pointing finger) and Anthony Revenis (tying shoes), all of whom raced for The OD/OA Creeping Bureaucracy.

22nd), which, according to a colorful poster its adherents displayed, seemed to consist of two sub-squads: Differentiating Keratinocytes (finished 23rd) and Running Gels (51st). Some members of the 50-Sixers (30th) competed in those Cat in the Hat tall hats. And Action Potential (59th) had race-day T-shirts reading "Speed Kills" on the back; lack of speed is evidently harmful as well.

Participants also ranged in age from gray beards to peach fuzz. And the race wasn't restricted to the lean physique of the career runner (of whom there were several, including Marjan Huizing of MGB Blastest, which placed sixth)—the event welcomes first-timers as well as veterans.

Last year's second-place finisher, Hughes Your Daddy, slipped to seventh this year; perhaps the



Cheering on Kevin Taylor of A Man and the P-Funk Allstars are (from l) Eldad Elnekave, Jesus Vazquez (in Burger King crown) and Prasanna Jagannathan.

Top Ten Finishers

1. Parasites on the Run	14:20
2. Rapid Relaxation	14:29
3. A Man and the P-Funk Allstars	14:55
4. The BSL-5	15:13
5. The Turtles	15:16
6. MGB Blastest	15:17
7. Hughes Your Daddy	15:30
8. Wurtz Possible Runners	15:33
9. Autoimmunity Annihilators	15:34
10. Gene Racers	15:58

Notable Team Names

Move Your Fatty Acids
The OD/OA Creeping Bureaucracy
Cells R Us
OARistocrats
MGB Blast (finished second from last)
MGB Blasters (48th)
MGB Blastest (6th)

coefficient of drag induced by the helium balloons that team members wore slowed them down.

Following the race, runners and their friends enjoyed a picnic with food provided by Hard Times Café and water courtesy of DrinkMore Water Co. If current trends continue, look for more weirdness at the starting line in 2004, when the race enters its 21st year.



Executing a nifty baton-pass are Joe Callicott (l) and Peter Bandettini of NIMH, who ran for second-place finisher Rapid Relaxation.



Relaxing after the race are members of the 50-Sixers, who are (from l) Margaret Mentink, Carl Feng, Felix Yarovinsky, Svenja Steinfelder and Damien Chaussabel.

Straining for the finish line are Iris Bowman of A Run for Your Money and Dr. Barry Hoffer, scientific director at NIDA, who competed for Munchkins.



Nanda Gudderra dedicated his performance in the race to his dad, who had been ailing recently. He also bought his team special race-day T-shirts from India's Goa Beach.



PHOTOS: LEW BASS



Waving triumphantly after a race they won for the second straight year are Parasites on the Run team members (from l) Marcelo Ramalho-Ortigao, Karl Seydel, Deirdre Joy, Nanda Gudderra and Ana B.G. Veiga.

BIG Hosts Dietitian Davis, Oct. 15

The NIH chapter of Blacks In Government will present a special lecturer, Brenda Davis, registered dietitian/nutritionist, from 11:30 a.m. to 1:30 p.m. on Wednesday, Oct. 15 in Bldg. 50, Rm. 1227. Davis is a leader in her field and an internationally acclaimed speaker. She is a past chair of the vegetarian nutrition dietetic practice group of the American Dietetic Association, and is the author of five books, including the newly released *Defeating Diabetes*. She will speak about how to defeat diabetes, constructing the optimal diet, vegetarian nutrition, "big fat lies," dairy-free diets, and nutrition myths. For more information, contact Alfreda Layne at 435-6262 or Jacque Ballard, 435-3795.

OSIA Lodge Marks 20th Year

The Order Sons of Italy in America's NIH Lodge # 2547 will celebrate its 20th anniversary on Friday, Oct. 24 from 8 p.m. to midnight at the Knights of Columbus Hall, 9707 Rosensteel Ave., Silver Spring. Price is \$25 for an evening of music, hors d'oeuvres and open bar. Playing dance music will be Kirt Vener's "Dixieland Express Band." To reserve a ticket, contact Nina Baccanari, (301) 869-4045 or Carol Humphreys-O'Keefe, (301) 353-0742. **R**

BLDG. 33 COMPLEX, CONTINUED FROM PAGE 1

has taken the lead in NIH's implementation of President Bush's initiative to develop countermeasures to protect the public from the threat of bioterrorism.

"During the past year, the NIAID research mission has been expanded and accelerated by the possibility that disease-causing agents may be intentionally introduced into our communities by those seeking to

terrorize our civilian populations," explained NIAID scientific director Dr. Tom Kindt. "While the basic mission of NIAID to combat emerging infectious disease has not changed, it must now include and give some priority to possible agents of bioterrorism. In addition, the nature

of the threat has truncated the time scale for development of diagnostics, vaccines and therapies to combat infectious agents. NIAID's expanded mission and the need for a rapid response component as part of that mission have made critical the need for additional laboratory facilities, including access to biocontainment labs to handle infectious agents, and require the construction of additional

facilities in a time frame that will allow reasonable fulfillment of the mission."

Design of the complex is proceeding and site work and construction of the parking garage are already under way, since erection of the building will require relocation of several hundred parking spaces.

"The 1995 [NIH] Master Plan shows a laboratory building at this site," acknowledged Kyung Kim, an engineer in NIH's Office of Research Facilities who is the complex's project officer. "After 9/11, the research and construction of this



Project Officer Kyung Kim

complex were put in an accelerated mode."

Gaining local approvals and community support for building this new laboratory complex on the Bethesda campus has not been easy, Kim said. Thoughtful criticism of the planned location has come from both internal and external sources. [See "Why Build It in Bethesda?" sidebar] The complex will add another modern lab facility on NIH's main property, he explained, and the high-level science planned for it is central to the agency's mission and goals.



Another view of the biodefense facility now under construction

Why Build It in Bethesda?

Nearly a decade before the first design concept for Bldg. 33 was suggested, and many years even before 9/11 accelerated the need for an expanded biodefense research program, there was the 1995 NIH Campus Master Plan. In that plan, several new research facilities were slated for construction, including a lab building located at the site for Bldg. 33. So the prospect of a new building project is not what has some NIH'ers—and others in the local region—questioning the location of the new infectious disease research facility. Concern expressed by neighbors, a local congressman and even a group of NIH scientists over the last several months all generally boils down to one query: Given the increased security measures of the past 2 years, why locate a building whose main research program is both critical and sensitive in Bethesda, a heavily populated area that is also widely traveled every day?

NIAID scientific director Dr. Tom Kindt offered the answer.

"Simply put, scientific research can be a remarkably painstaking and time-consuming endeavor, but such research invariably flourishes and yields the best results most rapidly in a diverse, collegial

environment," he noted. "Research scientists can accomplish the most when they have support services, specialized laboratories and both proximity and access to a cadre of other world-class scientists working in a multitude of diverse disciplines. The shorthand word for this process is 'synergy.' Over and over again, it is this cross-pollination and weaving together of ideas—the synergy of NIH—that has led to historic biomedical breakthroughs."

Citing historic examples of the importance of NIH synergy—such as the development of AZT as the first drug to fight AIDS—Kindt said many of the agency's past intramural successes were due to the campus atmosphere already in place here.

"The craft of research science has time and time again been dramatically accelerated by the collaboration of many scientists working closely together, looking simultaneously at similar problems from multiple perspectives," Kindt pointed out. "The case has been overwhelmingly made that what can be accomplished by working in isolation can most generally be accomplished more rapidly by working collaboratively. A major part of the genius of the NIH is the growing collaboration and the emerging interdisciplinary focus on disease."

"This is a building where biocontainment research can be conducted on every floor," said Kim. Bldg. 33 will be equipped for BSL-2 and -3 research (See BSL sidebar, p. 10), with a vivarium, administrative offices and conference and break rooms. The office of the NIAID scientific director will relocate to Bldg. 33.

"This will be a state-of-the-art research facility whose main purpose is to handle infectious agents, disease vectors and animal models for studying transmission, pathogenesis and prevention of infectious diseases," Kim pointed out. "New and re-emerging diseases at the national and international levels will be studied, as will agents that could be used for bioterrorism purposes."

Microorganisms to be examined in the building include such recent worldwide newsmakers as anthrax, drug-resistant tuberculosis, hantavirus and dengue and West Nile fever virus. Bacterial vaccine development, and food- and water-borne pathogens are also among research areas that have been assigned space in the new facility.

The new building will contain three stories above grade and a basement, with an interstitial floor at each level. The height of the building will be along the lines of the Clinical Research Center and other contemporary laboratory facilities. Bldg. 33 is designed with interstitial floors that will allow the facility's utilities and other mechanical and engineering functions to be maintained without interruption

to lab and animal work. An unoccupied penthouse for mechanical equipment and maintenance support will top off the facility.

"The building is designed so that research can be conducted upstairs and then scientists can conduct animal studies in the vivarium in the basement," Kim explained. "Every stage of the research can be handled within the building."

The vivarium is scheduled to house rodents including rats, mice, guinea

pigs and hamsters; holding space for rabbits and non-human primates is also being provided. Construction management is being handled by Spaulding & Slye, the firm that also developed another NIH infectious disease research facility, the Dale and Betty Bumpers Vaccine Research Center, Bldg. 40.

Twelve principal investigators are slated to bring research projects into the new complex, which will allow a number of scientists with similar research interests who are currently conducting studies in disparate labs around campus to be united in one

STORY CONTINUES ON NEXT PAGE



This view shows how the new complex will look from Rockville Pike.

Some NIH employees have asked whether building and maintaining a research complex along Rockville Pike might prove to be a distraction to area motorists and other passersby.

"Bldg. 33 will be more than 400 feet from the closest lanes of Rockville Pike, well within the campus, behind the perimeter fence, and screened by existing and planned landscaping," noted Stella Serras-Fiotes, director of the Division of Facilities Planning in the NIH Office of Research Facilities. "While the upper levels of the building may be visible from some portions of Rockville Pike, the building will not serve as any more of a distraction than any other development currently located along this busy roadway."

Other people have questioned the placement on campus of Bldg. 33, and whether a more interior site—nearer to the center of the campus and farther away from main thoroughfares—might make a more secure site.

"In regard to whether other alternative locations on campus for Bldg. 33 were considered," Serras-Fiotes responded, "the critical consideration in determining an appropriate location for Bldg. 33 was conformity with the NIH Campus Master Plan. This plan, as approved by the National Capital

Planning Commission, the federal review agency, in 1996, identifies appropriate land uses for every area of the campus. The location of Bldg. 33 is consistent with the approved master plan for a lab facility along with a multi-level parking garage at this site. There are no other immediately available sites for lab construction. Relocating it to the center of the campus, as some have suggested, would require the removal of existing serviceable buildings, and funds are not currently available to replace these structures and accommodate the activities that would be displaced. Moving the new lab to Lot 41 would require eliminating valuable parking spaces. We do not believe it's feasible from a planning perspective to move the building to another campus location or, more importantly, necessary from a safety or security standpoint."

Summing up the decision, Kindt cited other practical reasons, and reiterated NIH's critical part in helping to keep the nation safe.

"Having Bldg. 33 at Bethesda allows NIAID to take full advantage of the physical and intellectual research infrastructure that is already available on campus and minimize replication of costly support services as NIH carries out the President's mandate to expand NIAID biodefense research capabilities."

CONTINUED FROM PAGE 9

location with a common infrastructure. About 242 employees, including scientific, administrative, support and animal care staff, will work in the facility.

"Locating Bldg. 33 on the Bethesda campus is not being done simply for convenience reasons," Kindt noted. "It enhances NIAID's intramural research program, which is directed at the study of a variety of emerging infectious diseases, including organisms that can be used for bioterrorist purposes. The new building will provide additional lab space that will enable NIH to pursue research that has been delayed or deferred because of the lack of adequate containment laboratory facilities on campus."

What Do the BSLs Mean?

The four categories describing laboratory environments—called the biosafety level (BSL) system—are defined by federally established requirements for conducting research and are used worldwide. Below are brief descriptions of each level. For a chart of federal biosafety requirements, visit the online document at <http://bmbi.od.nih.gov/sect3tab1.htm>.



The new lab sits compatibly amid other NIH buildings.

According to "1, 2, 3's of Biosafety Levels" by Dr. Jonathan Richmond of the CDC, BSL-1 is "appropriate for working with microorganisms that are not known

to cause disease in healthy humans. This type of lab can be found in municipal water-testing laboratories, in high schools, and in some community colleges teaching introductory microbiology classes, where the agents are not considered hazardous." Standard microbiological practices are required, using routine safety measures.

"The facility, containment devices, administrative controls, and practices and procedures that constitute BSL-2 are designed to maximize safe working conditions for people working with agents of moderate risk to personnel and the environment," Richmond noted. "The agents manipulated at BSL-2 are often ones to which workers have had exposure in the community—often as children—and to which they have already experienced an immune response."

A BSL-3 lab "is suitable for work with infectious agents that may cause serious or potentially lethal diseases as a result of exposure by the inhalation route," according to Richmond. In addition to all BSL-2 requirements and conditions, a BSL-3 labora-

tory would need—among other considerations—specific secondary barriers to set labs apart from one another, and special attention to air-flow, since BSL-3 agents can be transmissible through aerosol methods.

In the NIH-CDC publication *Biosafety in Biomedical and Microbiological Laboratories*, BSL-4 is used for work with "dangerous/exotic agents that pose high risk of life-threatening disease, aerosol-transmitted lab infections; or related agents with unknown risk of transmission." Recommended conditions for BSL-4 labs include all level-3 measures in addition to a "separate building or isolated zone, and dedicated supply and exhaust, vacuum, and decontamination systems." Bldg. 33 will not include BSL-4 capacity. ■

Studies for Wide Age Ranges

All of the studies below are seeking healthy volunteers from a broader than usual age range. The contact information for each study is the same: phone 1-800-411-1212 or TTY 1-866-411-1010. Use the study number to reference a particular protocol.

Volunteers age 21-75: Mood and Thinking Study # 02-M-0251 (age 18-75); Effect of Stimulus on Motor Activity Study # 02-N-0024 (age 21-75).

Volunteers age 18-80: MRI Study # 97-H-0026; Cognition Study # 03-N-0017; Restless Legs Study # 03-N-0075; Somatosensory Studies # 92-D-0243; Motor Movement Study # 03-N-0266; MRI Tongue Study # 01-CC-0044; Investigations in Discourse Processing Study # 00-C-0096.

Volunteers age 70, 80, 90, 100: Oral-Motor Functions Study # 79-CC-0101 (age 6-85); Balance and Leaning Study # 03-N-0165 (age 20-90); Balance Study # 03-N-0183 (age 20-90); Motor Learning: Healthy Volunteers/Stroke Patients Study # 01-N-0220 (age 18-100); M2 Receptor Measurements in Aging Study # 99-M-0073 (age 20-100).

Volunteers 18 and over: NIDCD Taste and Taste Deficit Study # 01-DC-0230 (age 18 and over); Tongue and Swallow Study # 01-CC-0135 (age 21 and over).

Volunteers age 50 and older: MRI Evaluation Study # 02-M-0095; Evaluation of Eyes and Genetics Study # 03-EI-0155; Evaluation/Follow-Up Normal Controls/Memory Study # 95-M-0096; age 40 and older for Brain Function Study # 03-N-0224.

Volunteers up to age 70: Measures in Normal Controls/COS Study # 84-M-0050 (age 6-70); DLS Study # 01-E-0051 (age 18-70); Normal Salivary Function Study # 94-D-0018 (age 20-70); Larynx, Voice Box Study # 03-N-0260 (age 20-70); Sequential Finger Movement Study # 02-N-0216 (age 21-70).

NIH Mourns Death of Visiting Scientist Nam

Dr. Kiebang Nam, a visiting scientist at NICHD in the Laboratory of Gene Regulation and Development, died Sept. 1 of liver cancer. He would have turned age 47 on Sept. 25. At the time of his death, Nam had been nominated for a promotion to permanent staff scientist at NICHD.

"All of us at NICHD are shocked and saddened by Dr. Nam's sudden and unexpected passing," said Dr. Duane Alexander, NICHD director. "Dr. Nam was a kind, generous and warm-hearted person, devoted to his family, his friends and his church. He was equally devoted to his colleagues, his institute and his research."

Alexander added that, before his untimely death, Nam made many important contributions to the



Dr. Kiebang Nam in 2002, just after he ran the NIH relay race as a member of his lab's team, "The Mobile Elements."

study of the metabolism of messenger RNA (mRNA) and the function of retrotransposons, retrovirus-like entities that convert mRNA into DNA.

"He was an outstanding scientist and colleague and a true partner in research," Alexander said. "We will miss him greatly."

Born and raised in Seoul, Korea, Nam earned a B.S. from Seoul National University. In 1984, he came to the United States for graduate school, earning an M.S. from North Texas State University and a Ph.D. in biology from Texas A&M University, where he trained with one of the

leading scientists in the study of the genetics of viruses that infect bacteria.

As a postdoctoral fellow in the department of molecular biology and genetics at Johns Hopkins University School of Medicine, he pursued his interest in the relationship between viruses and host cells through the study of retrotransposons. While there, he completed work on studies published in five different peer-reviewed journals.

After 3 years at Johns Hopkins, Nam was recruited by the Samsung Biomedical Research Institute and returned to Seoul to start his own laboratory of molecular biology. He then decided to continue his research career in the U.S., and in March 2000, left Korea with his family and came to NICHD.

While at the institute, Nam continued to pursue his

research interest in retrotransposons. Transposons are close relatives of retroviruses such as HIV and, therefore, serve as important model systems. By using powerful genetic techniques, Nam studied transposons to gain an understanding of the processes underlying retrovirus replication in yeast. He also devised unique experiments to study the yeast genes required for transporting retrotransposons into the yeast nucleus, where they replicate. Nam initiated an ambitious project and identified a gene (called *psy1*) involved in this function. He also began a new project to study how a virus selects which sites in the yeast genome to insert its DNA. At the time of his death, he had made an exciting discovery into the nature of the mechanism that the retrotransposon uses to bind to the DNA at the site where it inserts itself into the yeast genome.

"In science, it takes great courage to start out on a new direction with new techniques, and Kiebang did that many times," said Dr. Henry Levin, head, section of eukaryotic transposable elements at NICHD and Nam's supervisor. "Not only was he a lot of fun to work with—teasing that he could do calculations in his head faster than I could do them with a calculator, and he was right—but he was dedicated to his research and committed to teaching students. He was a great influence on the lab with his steady hand and steady head. We have lost a good colleague and a very decent person."

Nam is survived by his wife, Jongmin, and three children. ■



The Bethesda Little Theater, an R&W-sponsored program, recently gave a donation from their performances to Camp Funshine. On hand at the check presentation were (from l) Leslie McIntire; Mary L. Graham; camp representative Dave Smith; NCI's Dr. Lauren Wood, who assists at the camp for children undergoing treatment for AIDS; Alice Smyth; and Teddie Pensinger.

WRAIR Needs Volunteers

Volunteers ages 18-45 are needed for a 7-month dengue vaccine research study at Walter Reed. The purpose is to study the safety and effectiveness of a new investigational vaccine. Health screening and financial compensation provided. Call 1-866-856-3259 or (301) 319-9335/9320 or visit www.wrairclinicaltrials.com. ■

Meeting on Biological Therapy of Cancer

The International Society for Biological Therapy of Cancer will hold its 18th annual meeting Oct. 30-Nov. 2 at the Hyatt Regency in Bethesda, with a special cancer biometrics workshop to be held in Bldg. 10's Masur Auditorium on Oct. 30.

Meeting topics include natural killer cells and innate immunity, dendritic cells and vaccines, adoptive immunotherapy and others. The society was founded in 1984 and now has more than 475 members. For more information, visit www.iSBTc.org.

Study Needs New Moms

The Behavioral Endocrinology Branch, NIMH, is seeking new moms who are experiencing low mood, sadness or crying spells; anxiety or excessive worrying; difficulty bonding with your baby. NIMH is conducting studies to understand the role of hormones in the treatment of postpartum depression. Study includes medical and psychiatric evaluations and study medication at no cost. Participants should be medically healthy and not currently taking any medications. Call Linda Simpson-St. Clair, 496-9576.

STETTEN LECTURE, CONTINUED FROM PAGE 1

interference, or RNAi.

Fire will tell the story of RNAi at this year's DeWitt Stetten, Jr. Lecture, entitled "RNA-Triggered Genetic Silencing Mechanisms." The talk, which is part of the NIH Director's Wednesday Afternoon Lecture Series and is sponsored by NIGMS, will be held on Wednesday, Oct. 22 at 3 p.m. in Masur Auditorium, Bldg. 10.

Fire and Mello had been using a genetic approach called antisense RNA technology to find genetic factors involved in cell growth and development. In this technique, researchers use the anti-, or opposite, strand of RNA to zip up single-stranded RNA and keep it from being made into a protein. Eliminating a gene in an otherwise intact experimental organism can point researchers to the gene's function.

The experiments weren't working, but a little perseverance led Fire and Mello to find a contaminant in their test-tube preps. The contaminant, it turns out, was double-stranded RNA, and somehow it was turning off specific genes. In time, researchers learned that double-stranded RNA is a vital intermediate in the RNAi gene-silencing process.

What's helping out, scientists have discovered, is an enzyme called Dicer. This enzyme, aptly named, chops up the double-stranded RNA into little bits called short interfering RNAs, or siRNAs. These snippets of genetic material act like guided missiles. They team up with cell machinery that can destroy a specific messenger RNA with a precisely matched sequence to the siRNA and restrict the message from being expressed into a protein.

Although RNAi is a relative newcomer to molecular biologists, scientists know the process has deep evolutionary roots. Researchers believe this biological trick endows organisms with the ability to mute genes for the purposes of growth, as well as for self-defense against viruses.

Ten years after the initial lab discovery of RNAi, researchers across the globe have latched onto the technique as an extraordinarily useful tool for probing functional genomics, the science of discerning the biological function of genes and their products. Scientists are also excited about including RNAi in the toolkit for producing new kinds of molecule-based therapies. As a first step toward achieving that goal, several researchers have developed methods in which cells can be prodded to produce specific siRNAs on demand. In recent lab tests with lab-grown cells, for instance, researchers used an RNAi weapon to kill HIV.

Fire is a member of the scientific staff of the department of embryology at the Carnegie Institution of Washington in Baltimore and an adjunct professor of biology at Johns Hopkins University. After receiving a bachelor's degree in mathematics in 1978 from the University of California, Berkeley, he earned a doctorate in biology in 1983 from the

Massachusetts Institute of Technology, working with Nobel laureate Dr. Phillip Sharp. He then worked as a postdoctoral fellow with Nobel laureate Dr. Sydney Brenner at the Medical Research Council Laboratory of Molecular Biology in Cambridge, U.K. Fire's many honors include winning the Genetics Society of America Medal and sharing the National Academy of Sciences Award in Molecular Biology and the Wiley Prize in the Biomedical Sciences.

NIGMS has supported Fire's research since he became an independent investigator in 1986.

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



Two and a half-year-old India Street, daughter of Candace Street from *Special Love, Inc.*, samples some goodies at a party before a screening of Willy Wonka and the Chocolate Factory at the recent 7th annual free Outdoor Film Festival. More than 55,000 people attended the 10-night event sponsored by Comcast, Oldies 100.3, and R&W. Below, Nick Newlin, better known as the "Strathmore Muse" enters

before a screening. At bottom, crowds assemble in lawn chairs and vendors man their booths as night falls on the Strathmore Hall grounds, where the film festival relocated from its pre-9/11 NIH site. This year's festival featured an impromptu wedding engagement held onstage prior to a movie as well as a contribution of \$5,000 to NIH charities by Dr. Ben Manesch, who made a presentation "just because he feels lucky to be in America," said R&W President Randy Schools. "He



came from Iran, entered Montgomery College, then went to the University of Maryland, then on to UM Dental School. He said this would never have occurred in his birthplace, and in honor of his success he made the gift."

NIDDK Brings Diabetes Prevention to Tribal Communities

NIDDK is helping to bring diabetes prevention to American Indians, who are at highest risk for the most prevalent form of the disease. Among some tribes, 50 percent of the adult population suffers from type 2 diabetes and its complications.

It has taken years of research. Fighting these statistics has been a life-long commitment for NIDDK scientists like Dr. William Knowler, principal investigator of the Southwest Indian Center for Diabetes Prevention and chief of the diabetes and arthritis epidemiology section of NIDDK. His work with Pima volunteers from the Gila River Indian Community in Phoenix, along with scientist emeritus Dr. Peter Bennett and other NIDDK researchers, has reshaped the world's understanding of diabetes.

"It's hard to believe," Knowler says, "but 30 years ago, diabetes among American Indians was thought to be some benign condition. We now recognize that diabetes in virtually every ethnic group in the world puts individuals at high risk of diabetic vascular, eye, kidney and heart disease."

Knowler's research with the Pimas, particularly the landmark multi-ethnic Diabetes Prevention Program (DPP), has shown that diet and exercise can prevent or delay the onset of type 2 diabetes. The study also found that the oral drug metformin (Glucophage) is effective in preventing diabetes, though to a lesser degree.

One early response to the good news was a landmark meeting in Denver of 1,000 American Indians and Alaskan Natives, the first ever held to focus on preventing diabetes in American Indian communities. Conferences of this kind are one way to get valuable medical information to health care providers, but Bill Knowler took no chances. He took these research findings directly to the communities, tribal leaders say, and that is what has earned him

their respect and trust.

"What Bill did has never been done before," says Dr. Kermit Smith, former chief medical officer for the

"Researchers are usually more concerned with publishing papers. He took it upon himself to work with all of the diabetes control officers, even individual providers.

It is truly a partnership. He helped so many people, and that kind of word gets around really fast in Indian country," Smith added.

When word got around, the tribal leaders unanimously decided to surprise Knowler and two of his NIDDK colleagues, Drs. Larry

Agodoa and Sandy Garfield, with an item highly sacred to Indian values. To recognize their contributions in bringing key diabetes issues to light and working with tribal leaders to build programs to prevent the disease that has run rampant among Native Americans, the leaders presented each man with a tribal blanket. They accepted on behalf of NIDDK.

"The blanket," says Alvin Windy Boy, Sr., chairman of the tribal leaders diabetes committee, "is the symbol of security, warmth and guidance in one's life, and it extends to these men's families as well." Windy Boy represents more than 550 American Indian and Alaskan Native tribes.

"Honoring people in our culture is very common, and blankets are the most sacred thing you can give," said Smith.

"It was quite unexpected," Knowler said. "I've had a lot of recognition from the scientific community, but this is special."

Agodoa, who is director of NIDDK's Office of Minority Health Research Coordination, says he was also taken aback when Windy Boy announced his name and Garfield's (Garfield is NIDDK program director of clinical trials in behavioral research). Researchers, after all, aren't usually recognized by grateful communities. Agodoa and Garfield were honored for their role in creating DETS, or Diabetes Education in Tribal Schools. Under the 5-year program, researchers from Tribal Colleges and Universities (TCUs) around the country were invited to apply for grants to develop diabetes-focused educational programs to be included in science curriculums in tribal elementary, middle and high schools.

"I was more than touched and felt honored to be allowed to have the door to American Indian culture



NIDDK's Dr. Lawrence Agodoa (l) and Dr. Sanford Garfield drape themselves in tribal blankets, given in gratitude for work on diabetes prevention.



Alvin Windy Boy (l), chair of the tribal leaders diabetes committee, meets with NIDDK's Dr. William Knowler (c) and Dr. Kermit Smith of IHS.

Indian Health Service (IHS). He is now special medical consultant to the IHS on his own Ft. Peck Assiniboine and Sioux reservation in Montana.

CONTINUED ON PAGE 14



Dr. Sally Amero has been named chief of the bioengineering sciences and technology integrated review group at the Center for Scientific Review. This is a new group slated to begin operations for the May 2004 council round. She currently serves as scientific review administrator for CSR's genome study section, and until recently served as a referral officer. Amero has been an assistant professor of molecular and cellular biochemistry at Loyola University of Chicago Stritch School of Medicine, where she studied RNA binding proteins with support from the American Cancer Society, the Potts Foundation and the National Science Foundation. She joined CSR in 1999 to coordinate the reviews for CSR's small business study section in genetics and genomics.

CONTINUED FROM PAGE 13

opened to me," says Garfield. Agodoa agrees. It was a tribal idea from the beginning—a program to educate Indian youth about diabetes prevention and to inspire them to health-related science vocations. Agodoa and Garfield solicited the idea, worked out the details with the tribal leaders, took it back to Washington, and then returned with funding from NIDDK, CDC and IHS. What they have achieved is "historic," said Dr. Kelly Acton, director of the IHS National Diabetes Program. "It's never happened before that the NIH, the IHS, the Centers for Disease Control and Prevention and tribal leaders have partnered in a way to get more Indian students into science education," she said.

"They did it the Indian way," says Smith. "They presented it over and over and over again to different groups of tribal leaders. They have earned the admiration and respect of all tribal people."

Participating in the grant process is the American Indian Higher Education Consortium, which oversees the tribal colleges. Grants were recently awarded to researchers at eight TCUs for programs to encourage young American Indians to enter biomedical professions and lead tribal communities to better health. "These kinds of programs for our youth are our only hope," says Smith. "Only they can turn it around for future generations."

The word seems to be getting through to those future generations. One group of high school students ran from the middle of Wyoming to Billings, Montana, to promote diabetes awareness. They have challenged other students to do likewise. Another group of students, from the Ft. Peck reservation, went on strike for a week against their high school cafeteria until the administration put out a salad bar and more healthy foods. These students have since advised the USDA on the matter of school lunches and are now speaking at Native American conferences.

"The attitude is totally changed," says Agodoa. "Originally, there was skepticism, but now we are accepted. And part of the appreciation is shown in the honor we've been paid." ■

Female Volunteers Needed

The Behavioral Endocrinology Branch, NIMH, is seeking female volunteers ages 18-55 to participate in studies of the effects of menstrual cycle hormones on brain and behavior. Volunteers must have regular menstrual cycles with no changes in mood in relationship to menses, be free of medical illnesses and not taking any hormones or medication on a regular basis. They will complete daily rating forms and be offered participation in one or more protocols. Payment will be in accordance with the duration of each visit and the type of protocol. For more information, call Linda Simpson-St. Clair, 496-9576. ■

Business Adviser, TV Host Gong Visits NIH

The Bethesda chapter of Federally Employed Women, supported by the Office of Equal Opportunity and Diversity Management, recently hosted a guest lecture by Ginny Gong, talk show host of a weekly public television show, *Ginny's...where East meets West*. Gong spoke about diversity in today's workplace.

Gong was 9 when she arrived in the United States. She lived in New York and worked for her mom and dad in the family laundry business. She recalled where she learned and lived what is now known as diversity. She said diversity is a focus, passion and commitment of time to anchor yourself in projects that interest you. She warned the lunchtime group to think and select committee choices carefully. Gong chose to get involved in county business and join select committees. After many years of working, networking and traveling, she says, "Now when I call and leave a message, my calls are returned."

Although language barriers are often used to



Ginny Gong (c) is joined by Rudene Thomas (l), head of the FEW chapter, and Glenda Keen, OD.

separate people of various cultures, Gong said she believes that people should take time to understand and educate themselves about cultures. Most of what keeps Gong focused, she said, is her passion to educate and help others. A former teacher for 16 years, and with experience as a human resources administrator for Montgomery County, Gong has become an influence within the Asian community. She has served as a consultant on various boards at many levels.

The impact of her career was evident when she was asked to work on a committee that would influence the Asian community, which led to discussions with former President Clinton. Gong's new book, *From the Ironing Board to the Board Room*, is expected to be published by the end of the year. Currently she is director of the Montgomery County Interagency Coordinating Board, where she manages its multi-million dollar enterprise fund. ■

NIDCR Mourns Herschel Horowitz

By Mary Daum

Dr. Herschel S. Horowitz once said he was "mystified" as to how he ended up becoming a dentist. He had no family members who were dentists and said he had no particular affinity for dentistry. Moreover, he claimed he didn't excel at clinical practice. But he found a niche within the profession as a researcher and public health dentist, a career he loved and one that helped build the foundation for modern preventive dentistry.

Horowitz, a leader in public health dentistry and a dental caries researcher at NIDR (now NIDCR), died Aug. 10. He was 71.

"He was an accomplished researcher, public health advocate and a good friend," said Dr. Dushanka



Dr. Herschel S. Horowitz

Kleinman, NIDCR's deputy director and chief dental officer, Public Health Service. "Not many people have the opportunity to directly affect the health of the public. Hersch did. His research contributed greatly to the dramatic decline in dental caries rates over the past 40 years. We will miss him."

Horowitz's research focused on the effectiveness of fluoride mouth rinses, toothpastes and gels, dental sealants and water fluoridation. His work established the foundation for many caries prevention programs.

He was born in Detroit in 1932. In school he was asked what he wanted to study in college and he answered "dentistry" although he later said he really couldn't remember why. He attended Wayne State University in his native city where he pursued a pre-dental course of study. He then was accepted into the University of Michigan's School of Dentistry. "He claims he was miserable the entire four 'penitential' years—as he called them—of dental school," said his wife of almost 33 years, Dr. Alice Horowitz, a senior scientist at NIDCR. "He even told his mother that what he really wanted to do was drop out of school and become a singer." (She said okay, but he stayed in school.) After dental school he joined the Army as the post dentist at Camp Kure, Japan, then returned to Detroit where he worked as a dentist for the city.

Then he had a chance meeting with a student in Michigan's master's of public health program. He later said that the meeting "sealed his future." Here was an opportunity to participate in dentistry from a

different angle. In 1960, he earned his M.P.H. from the University of Michigan and also joined the Commissioned Corps as a public health dentist.

As he told it, his first assignments were less than thrilling. But then he heard about an opening for a field investigator. He later said he didn't really know what a field investigator did, but he told them he was interested. He got the job. His assignments with the PHS took him to Washington, D.C., and then to San Francisco. In 1971, the NIDR director recruited him to head the community programs section in the Caries Prevention and Research Branch. He then served as chief of the clinical trials section, Epidemiology and Oral Disease Prevention Program until his retirement in 1985.

"Hersch said he felt as if he made a silk purse out of a sow's ear," said Dr. Alice Horowitz. "He didn't feel suited to the traditional practice of dentistry, but discovered the public health and research aspects of the profession, which he loved."

He was the recipient of numerous awards, including the H. Trendley Dean Award from the International Association for Dental Research, the John W. Knutson Distinguished Service Award in Dental Public Health from the American Public Health Association, and the Distinguished Service Award from the American Association of Public Health Dentistry.

Horowitz was also a singer, composer and avid art collector, specializing in American prints of the first half of the 20th century. He was a member of the Washington Print Club and for several years served as its secretary-treasurer.

He is survived by his wife; a stepson, Robert Johnson; a stepdaughter, Jan Coulter; three step granddaughters; a niece and nephew; and three grandnieces and one grandnephew. ■



The Bethesda Little Theater, an R&W-sponsored program, recently donated \$4,000 in earnings from their performances to the Patient Emergency Fund (PEF). On hand at the presentation were (from l) Leslie McIntire; Mary L. Graham; Adrienne Farrar, chief of the Clinical Center's social work department, which manages the PEF; Alice Smyth; and Teddie Pensinger.

Wednesday Afternoon Lectures

The Wednesday Afternoon Lecture series—held on its namesake day at 3 p.m. in Masur Auditorium, Bldg. 10—features Dr. Andrew Z. Fire on Oct. 22, giving the DeWitt Stetten, Jr., Lecture on the topic, “RNA-Triggered Genetic Silencing Mechanisms.” See story on p. 1.

On Oct. 29, Dr. John R. McNeill will give the NIH Director’s Cultural Lecture on the topic, “Environment and Society Since 1900: A Global Perspective.” He is professor of history and faculty member of the Edmund A. Walsh School of Foreign Service, Georgetown University.

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



R&W recently joined forces with Channel 4’s Camp 4 Kids program and assisted with a day for patients and Special Love Inc. campers at Redskin Park. It was a private practice, complete with a pizza party and ice cream party for the players and children after the workout. Joining massive Redskins tackle Chris Samuels are (top, from l) a camper from Camp Jaycee, Larry Chloupek of NCI and Justin Horner a camper from Special Love. Above, Horner gets friendly with Redskins starting quarterback Patrick Ramsey. At left, Redskins backup quarterback Gibran Hamdan is shown with Matthew Scott of Special Love. NCI’s Chloupek, who serves



on the board of the R&W Foundation and Special Love, coached Hamdan in junior varsity baseball at Churchill High School in Potomac.

Normal Volunteers Needed

The Clinical Brain Disorders Branch, NIMH, is looking for normal volunteer college-educated men and women between the ages of 30 and 55 for a 2-day outpatient study of variables that might be related to the cause of schizophrenia. The study includes MRI, neurocognitive testing and a neurological exam, among other things. A stipend is available. Call 1-888-674-6464 for more information. ■

Stanfield Named Acting Director of CSR

Dr. Brent Stanfield has been named acting director of the Center for Scientific Review; he assumed his duties on Oct. 1, following the departure of Dr. Ellie Ehrenfeld. He has served as CSR’s deputy director since July 2000.

“Dr. Stanfield has worked closely with Dr. Ehrenfeld, planning, directing and coordinating CSR’s operations,” said NIH director Dr. Elias Zerhouni, who made the appointment. “He has also been instrumental in facilitating the reorganization of CSR’s peer review committees...I appreciate his willingness to lead CSR through this transition period.”

Before coming to CSR, Stanfield was director of the Office of Science Policy and Program Planning at the National Institute of Mental Health. He ran the NIMH unit on developmental neuroanatomy in the Laboratory of Neurophysiology between 1987 and 1996. While at NIMH, he spent several months at CSR, helping to implement the reorganization of the scientific review groups that review neuroscience grant applications.

Stanfield was reared in California and received his undergraduate degree in biological sciences from the University of California, Irvine. After receiving his Ph.D. in neurobiology from Washington University, St. Louis, in 1978 he returned to California, to faculty positions at the Salk Institute and the University of California, San Diego, School of Medicine before coming to NIH. He has published over 50 journal articles in his field, many of them focused on the development and plasticity of the brain’s cerebral cortex, especially the hippocampal formation. Stanfield also has served as a member of the editorial board of the *Journal of Comparative Neurology* and as an associate editor of the *Journal of Neuroscience*. ■



Dr. Brent Stanfield

Rheumatoid Arthritis Study

Tell us your rheumatoid arthritis story, by participating in a medical research study at NIH. You can participate in this study if you are 18 years old or older and diagnosed with rheumatoid arthritis. All study-related tests are provided at no cost, and you will be compensated. Call 1-800-411-1222 (TTY 1-866-411-1010). You can also email us at prpl@cc.nih.gov. ■