Diverse Panel Celebrates Women’s Achievement at NIH

By Sarah Schmelling

It seemed only fitting that Dr. Ruth Kirschstein, senior advisor to the NIH director and acting director of NCCAM, recently introduced a panel of successful NIH women to commemorate Women’s History Month. This year’s theme was “Generations of Women Moving History Forward,” and as the first woman to serve as director of an NIH institute—the National Institute of General Medical Sciences, from 1974 to 1993—Kirschstein has certainly influenced generations of women here.

“Talk about women moving history forward,” said Dr. Yvonne Maddox, deputy director of NICHD and moderator of the discussion. “There’s a woman who has moved history forward.”

No Longer ‘Acting’

Zerhouni Taps Leaders for NCRR, NIDDK

Dr. Barbara Alving is the new director of the National Center for Research Resources. As acting director of NCRR, she oversaw launch of the Clinical and Translational Science Awards (CTSA) program—a new national consortium of academic health centers that will transform the conduct of clinical and translational research to ensure that biomedical discoveries are rapidly translated into prevention strategies and clinical treatments for rare and common diseases.

“Dr. Alving has demonstrated exceptional leadership in the recent efforts of the NIH to energize the discipline of clinical and translational research across the nation,” said NIH director Dr. Elias Zerhouni. “The

Installation of Shatter-Resistant Window Film Nears Completion

By Belle Waring

As part of an ongoing safety effort, the Office of Research Facilities is almost finished installing shatter-resistant window film inside buildings at the perimeter of NIH’s Bethesda campus.

“When it’s all done, we are looking at a total of 160,000 square feet of film,” reckons ORF Project Officer Johnny Madlangbayan.

The rationale is part of our working world post 9/11: “There was a study conducted a couple of years ago,” explains Madlangbayan, “and they determined an area called a blast zone—and [identified] the perimeter buildings in that zone. Although we do have new vehicle inspection facilities, the theory is that, in some kind of explosion outside the

Rodgers Named NIDDK Director

Dr. Griffin P. Rodgers has been named director of the National Institute of Diabetes and Digestive and Kidney Diseases, effective Apr. 1.

“Griff Rodgers is an outstanding physician-scientist and molecular hematologist,” said NIH director Dr. Elias Zerhouni. “He has made singular contributions to the study of globin disorders and is internationally recognized for his contributions to the development of effective therapy for sickle cell anemia and other genetic diseases of hemoglobin. In addition to his research experience, Dr. Rodgers is a dedicated and knowledgeable clinician and a first-rate research administrator. He has all the qualities

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The NIH Record is recyclable as office white paper.
NIH Juried Art Show

NIH will hold a juried art show open to all scientists at NIH—including postdocs, post-bac IRTA, visiting fellows and medical students. Pieces must be framed no wider than 30 inches across. Artwork can contain any medium except sculpture, due to lack of space.

The show will have 20 spaces available near the hospital center in the Clinical Research Center. The goal is to feature the talents of scientists currently working at NIH. Art pieces will be chosen by Lillian Fitzgerald, curator of the CC Art Program, and Deanne Alpert of NHLBI’s Laboratory of Developmental Biology.

Deadline for submitting is Friday, Apr. 27. Participants will be notified in the middle of May. The show will take place at the beginning of June.

Submit slides or a CD of your artwork to Alpert in Bldg. 10, Rm. 6N240, MSC 1622. Include your name, contact information and a brief description of the materials used in each piece. For more information email alpertd@mail.nih.gov.

National Day of Prayer, May 3

This year’s National Day of Prayer will be observed Thursday, May 3 from 11:30 a.m. to 1 p.m. on the lawn in front of Bldg. 1. All are welcome.

Career Fair for Grant Managers

Grants management professionals at NIH can explore career advancement and work enrichment opportunities at the first annual professional development Career Fair. Titled “Breaking Ground,” it will be held Wednesday, Apr. 25 from 10 a.m. to noon in the Natcher Bldg. atrium. For more information visit http://odoerdb2-1.od.nih.gov/gmac/gmac/profdev_main_2.html#events.

Save the Date for NIH’s National Women’s Health Week Events, May 14-18

National Women’s Health Week is May 14-18. The theme is “It’s Your Time! Pamper Your Mind, Body and Spirit.” Each weekday, an exhibit and free women’s health literature will be available in Bldg. 31, A-wing lobby from 8 a.m. to 4 p.m. On Monday, Wednesday and Friday, attend “Midday for Me” in Bldg. 31, Conf. Rm. 2 from 12:30 to 1:30 p.m. for information from experts on campus safety, wellness, nutrition and stress relief. Conference room space is limited. For more information visit http://orwh.od.nih.gov.

Earth Day Celebration To Be ‘Zero-Waste’ Event

The NIH Division of Environmental Protection will encourage composting at NIH’s Earth Day observance on Thursday, Apr. 26, by officially making it a “zero-waste” event.

What is zero waste? It’s the use of products such as plates, utensils and cups that are biodegradable. These products are sent to a composting facility along with food waste generated during the event. The items are then degraded into mulch or compost.

All collected compostable items will be delivered to the USDA composting facility in Beltsville. USDA Beltsville is interested in receiving and processing such material from local federal facilities. The mulch created from this process will be available for use by participating agencies. The zero-waste concept also includes recycling all beverage containers, paper and cardboard used during the event. DEP hopes promotion of the concept during Earth Day will encourage others to follow suit for their events.

The zero-waste strategy is an increasing trend in the waste management industry as it promotes the use of biodegradable materials and contributes to landfill avoidance. These renewable products also reduce our dependence on natural resources such as oil, land and timber by eliminating rather than managing waste.

Some of the biodegradable products used in this process are innovative. The forks, for example, are made from bio-based resins and potato starch. These products are sent to a composting facility along with food waste generated during the event. The items are then degraded into mulch or compost.

For more information, email NIH recycling coordinator Gareth Buckland at bucklandg@mail.nih.gov.
Social forces shape not only disease burden but also access to diagnosis and effective health care. Inequalities of access worsen, in turn, the burden of disease in many parts of the world. HIV/AIDS has crystallized these inequalities and poses substantial challenges to health systems worldwide.

Addressing inequalities in health-care access is the mission of Partners In Health, whose cofounder, Dr. Paul Farmer, will talk about “Community-based Care for Chronic Infectious Disease: The Partners In Health Experience from Haiti to Rwanda” in this year’s NIAID James C. Hill Memorial Lecture on Thursday, Apr. 26 at 2 p.m. in Lipsett Amphitheater, Bldg. 10.

Farmer is the Maude and Lillian Presley professor of medical anthropology in the department of social medicine at Harvard Medical School and associate chief of the division of social medicine and health inequalities at Brigham and Women’s Hospital, Boston.

The Hill lecture is dedicated to the memory of the former NIAID deputy director who helped build the institute’s HIV/AIDS research program during the early years of the epidemic. A reception outside of Lipsett Amphitheater will be held after the talk.

In advance of his lecture, Farmer discussed several issues:

**How do you combine the perspective of a physician, focusing on the individual patient, with that of an anthropologist, looking at how cultural and social forces influence whole populations?**

“Clinical and population-based approaches can and should be complementary; the idea that they are at odds with each other has created a false dichotomy. In the AIDS epidemic, this dichotomy has played out as a struggle between experts and activists over whether scarce resources should be spent on prevention or care. Our experience in Haiti suggests the two can be mutually reinforcing.

“When we introduced free voluntary HIV testing and counseling in rural Haiti in 1986, we knew it was going to be central to prevention. Yet when we were building the women’s health center there in 1990, we discovered that only a third of all women receiving prenatal care opted for a free HIV test when it was offered to them. In those days, effective therapy for AIDS was unavailable. But after we began offering three-drug regimens for people with HIV, the rate of women taking the test jumped to more than 95 percent and now it routinely stands at close to 100 percent. The same thing happened in Rwanda.

“Obviously we have not eradicated poverty or inequality or changed the forces that engender and sustain them, but we have reinvigorated primary health care in settings long bereft of even basic health services. Simply by doing a good job as doctors and health workers, we have strengthened prevention efforts and integrated treatment for this one disease into a broad public health approach that seeks to address all diseases of poverty.”

**What lessons from your work in impoverished rural areas are applicable in the United States?**

“The lack of community-based health care is a grave problem in many parts of the United States. Chronic diseases are still largely managed by doctors in their offices, which may be hard for people to reach. People are largely expected to make their own way to their appointments, which may occur only once every few months. They are given prescriptions and advice, but there may be no follow-up after that to make sure they are obtaining and adhering to their drug regimens. Home visits are long out of fashion.

“This model of care isn’t very effective for AIDS, diabetes or other chronic diseases. And the more people’s lives are affected by social problems in this country, the less effective this system becomes.

“Community health-care workers are really the best way to address this problem, as we have shown in Haiti and later in Peru, Boston and Rwanda. People sometimes misunderstand this to mean that community health-care workers should fill the gap in areas that lack enough doctors and nurses. What we are saying is even if there are doctors and nurses aplenty, community health workers are still a major asset.

“In our practice in Boston, we are training community health workers to visit patients in their own neighborhoods. The patients I see in a U.S. teaching hospital have benefited enormously from such supervised community care.”

**How is the increasing influx of private foundation funds changing health care in impoverished rural areas?**

“The real story is that things are a lot better now. There has been a major influx of money into international health-care initiatives—from private foundations, U.S. government programs and grants, from the Global Fund to Fight AIDS, Tuberculosis and Malaria and other sources. This is enabling us to do things we couldn’t have attempted a few years ago. In Rwanda, we went into an abandoned hospital and rebuilt it. In an area with more than 400,000 people, there wasn’t a single doctor. Now there are lots of doctors, lots of nurses...and hundreds of health-care workers. That really got rolling with private foundation money, including the Clinton Foundation, and within the public-sector institutions.

“Everybody can gripe about the structure and funding of different programs, but the fact is, it’s great to finally be able to argue about how best to spend the money when 5 years ago, the argument was, ‘How can we get any resources at all?’ Or worse, ‘Is it even worth trying to do?’”

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Harvard Medical School's Dr. Paul Farmer will discuss community-based care from Haiti to Rwanda in the Apr. 26 Hill Memorial Lecture.

**Farmer To Deliver NIAID’s Hill Memorial Lecture, Apr. 26**

By Jason Socrates Bardi
Kirschstein said she was happy to celebrate women, and “pleased that we have in our moderator and panelists individuals who exemplify two important aspects of NIH: the science side, and the administrative side, without which science could not be done.” Simply reading the bios of the women on the panel is a lesson in female achievement at NIH, Maddox said:

- Camille Hoover, NCCAM’s first executive officer, partnered with NCCAM’s first director to develop the organization and create the center’s infrastructure.

- Dr. Ann Hsing, senior investigator at the Division of Cancer Epidemiology and Genetics, NCI, has won awards for her research in prostate and biliary tract cancers, for promoting research quality and for serving as an outstanding mentor.

- Dr. Migdalia Rivera-Goba, senior nurse specialist for health disparities and community outreach for the Clinical Center’s Office of Research, Outcomes and Practice Development, was the first postdoctoral fellow of the NIH and the National Association of Hispanic Nurses and has contributed much to the Hispanic community.

- India Robinson, who received her bachelor’s degree in 2002, began her career at NASA while still in high school and has worked her way up to serving as administrative officer at the Center for Scientific Review.

Maddox herself, in addition to serving in her current position at NICHD since 1995, was also acting deputy director of NIH from January 2000 to June 2002. She asked each of the panelists what they consider to be their biggest accomplishments. Hoover discussed the “rare opportunity” she had to build a new research enterprise for the study of complementary and alternative medicine amid “widespread skepticism and under the watchful eye of Congress.”

Hsing was able to bring scientific collaboration to both China and Africa to enhance opportunities for scientific discovery and help train the next generation of researchers in these countries. Rivera-Goba said she’s been able to break down barriers for minorities, including being the first Hispanic to graduate from both her undergraduate and graduate schools. And because Robinson began her career so young, she was recognized for 10 years of federal service at the age of 27.

In a discussion of the role family and community play in the women’s careers, Robinson said she learned from her mother and grandmother the principle that “you can do anything you set your mind to.”

“For women, it’s especially important to have family and community support,” said Hsing, adding she has two very supportive children who, if she’s debating whether to attend a scientific conference far away, ask if it’s important to her. If she says yes, they urge her to go.

As for how these women found their “callings,” Rivera-Goba knew she wanted to take care of others since childhood, when her sister was often in the hospital. Any job she chose “had to involve people, and it had to make a difference in people’s lives.”

Hoover started her NIH career as a social worker in the CC and never aspired to be an executive officer, she said. But she always knew that whatever career she chose, she wanted to be passionate about its mission, to be able to build partnerships and to make a difference. Her executive officer position allows her to do all three.
Despite their achievements, however, all panellists had hurdles along the way. Rivera-Goba was a teen mother, but never saw it as a stumbling block. “The more challenges that were put in my way, the more I felt determined,” she explained. And though it wasn’t always easy, she kept in mind that what she was doing could help other people face similar adversity.

Hsing, who is Chinese, didn’t speak English well when she first came to the U.S. and found substantial cultural differences between the two countries. Science itself was also a challenge, but if you identify what your problems are and determine ways of conquering them, she said, “in the end it works out.”

“You have to know what obstacles lie ahead of you and prepare to overcome them,” agreed Robinson, noting she’s faced the challenges of being young, female and a minority. “People may judge you before they know who you are... but if you go in with confidence and have a good work ethic, people will see you for the person that you are.”

When an audience member asked them for advice on becoming an NIH leader, the panelists were effusive. “Don’t limit yourself,” said Robinson. “Look at where you want to go and ask yourself, ‘What can I do to learn more?’”

“Become a sponge” and soak up information, added Rivera-Goba. “Surround yourself with people who have gone in the direction you’re going.”

Finally, remember that “personal accomplishment doesn’t know race or gender,” said Colleen Barros, NIH deputy director for management, at the event’s conclusion. She added that NIH employs 10,600 women—or 58 percent of employees—so mentors are clearly out there. “Go find one,” she said. “Or serve as one to someone who needs it.”

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**Earth Day Celebration Set, Apr. 26**

Join us on Thursday, Apr. 26 from 10 a.m. to 2 p.m. in front of Bldg. 1 to celebrate Earth Day at NIH. This event is for NIH employees, contractors and visitors and for children here for Take Your Child to Work Day. Lunch may be purchased from vendors and there will be plenty of seating. At 1 p.m., NIH director Dr. Elias Zerhouni will discuss the importance of our environment and how employees can help “NIH Go Greener!” He will also present awards to the winners of the IT contest (see article, p. 7).

Earth Day events will highlight the natural environment at NIH and the importance of biodiversity for humanity. These include:

- Displays of diverse plants from Africa that are used to help human health.
- Interactive demonstration of how NIH scientists collect sap and screen plants for medicinal value.
- Virginia Raptors will display several of the hawks and owls that they are rehabilitating and discuss the importance of habitat preservation for wildlife.
- Nature walk to learn about what NIH is doing to revitalize our forest and the NIH stream. Learn what role we play in the Chesapeake Bay watershed and about some of the native plants and animals found on our campus.
- Examination of the many aquatic invertebrates found in our local streams.
- Interactive model that demonstrates the importance of protecting our streams and groundwater.

Also on hand will be Roco the Montgomery County recycling dog; the NIH Mad Hatter; Ben Franklin; and clowns doing face-painting and balloon animals. Children will have a chance to take environmental quizzes for prizes and participate in the Frisbee toss at 11:30 a.m. and 1:30 p.m.

This will be the first NIH zero-waste event (see article, p. 2). All waste from the event will be composted or recycled. In the spirit of zero waste we will be collecting the following for reuse:

- Clean, usable clothing
- Used bicycles for Bikes for the World
- Used eyeglasses and old, personal cell phones.

Local car dealerships will display hybrid vehicles and Pepco and Washington Gas will be on hand to discuss green energy. USDA will have a composting demonstration. Montgomery County will have a display and information on recycling. NIH employees will have tables and displays on greener transportation options; NIH-owned green vehicles; proper chemical disposal; radiation safety; bicycle commuting options; energy conservation; and the NIH Environmental Management System.

To see a complete list of activities and specifics for donations, visit [http://www.nems.nih.gov](http://www.nems.nih.gov) and click on Earth Day. To volunteer, email green@mail.nih.gov.
CTSA program marks the first systemic change in clinical research in 50 years and is a critical component of how we will effectively re-engineer the clinical research enterprise, including training the next generation of researchers. It will be with Dr. Alving’s vision, creativity and leadership that we will be able to maximize our investment in the CTSA consortium, ensure that benefits extend to the greater research community and that new medical advances are delivered to the people who need them.”

“I am honored to lead NCRR at such a critical time and welcome the opportunity to work with my very talented and dedicated colleagues in NCRR as we capitalize on NCRR’s long-standing investment in clinical and translational science to enrich the CTSA program,” Alving said. “I have been impressed by the variety and depth of the research that NCRR-funded investigators are conducting and the contributions NCRR makes to the entire biomedical research community. These investigators are fueling advances in clinical care by developing pre-clinical models, new technologies in imaging and new informatics systems, which are critical to transforming clinical and translational research.”

The NCRR budget of more than $1 billion will enable investigators throughout the country to conduct research that ranges from basic and clinical projects to community outreach and education. NCRR funding provides training and research opportunities at minority institutions and colleges, as well as in academic centers located in predominantly rural and low-population states.

A native of Indiana and a graduate of Purdue University, Alving earned her medical degree—cum laude—from Georgetown University School of Medicine, where she also served as an intern in internal medicine. She completed her residency training, followed by a research fellowship in hematology at Johns Hopkins Hospital.

She began her research career as a public health officer in the Division of Blood and Blood Products at the Food and Drug Administration. Alving then joined Walter Reed Army Institute of Research, where she served at the rank of colonel as chief of the department of hematology and vascular biology. In 1997, she became chief of the section of hematology and oncology at Washington Hospital Center in Washington, D.C. In 1999, she joined the National Heart, Lung, and Blood Institute as director of the Division of Blood Diseases and Resources. She then became the NHLBI deputy director and acting director while also serving as director of the Women’s Health Initiative (2002-2006). In 2005, Zerhouni tapped her to be acting director of NCRR.

A professor of medicine at the Uniformed Services University of the Health Sciences, Alving is also a master in the American College of Physicians, a former member of the subcommittee on hematology of the American Board of Internal Medicine and a previous member of the FDA blood products advisory committee. Before joining NIH, she served on the hematology study section for NIH and was a member of the NHLBI clinical trials review committee. She currently serves the NIH director as the official NIH liaison for the Centers for Medicare and Medicaid Services and is a member of the advisory board for clinical research at the Clinical Center.

Alving is a recipient of the American Society of Hematology award for outstanding service and also received a Commendable Service Award from the FDA for her work on hypotensive agents in albumin products. Her military honors include the U.S. Legion of Merit, awarded by the U.S. Army, for work that improved the care of soldiers in combat.

She is a co-inventor on two patents, has edited three books and has published more than 100 papers in the areas of thrombosis and hemostasis.
we search for in an institute director.”

Rodgers has served as NIDDK acting director since March 2006 and as NIDDK deputy director from January 2001 until his appointment as NIDDK director. He also is chief of NIDDK’s Clinical and Molecular Hematology Branch, which he has headed since 1998.

As new director of NIDDK, Rodgers will oversee an annual budget of $1.8 billion and a staff of 650 scientists, physician-scientists and administrators. The institute conducts and supports research on many of the most serious diseases affecting public health including diabetes, endocrinology and metabolic diseases; digestive diseases and nutrition, including obesity; and kidney, urologic and hematologic diseases.

NIDDK conducts and supports much of the clinical research on the diseases of internal medicine and related subspecialty fields as well as many basic science disciplines at its research facilities in Bethesda and Phoenix and at research institutions and medical centers throughout the U.S. In addition, NIDDK supports education programs to translate the results of research to health professionals, patients and the public.

“It is truly an honor to be given the opportunity to lead an organization with a mission as far-reaching and varied as the NIDDK,” said Rodgers. “While NIDDK has a long and distinguished history of accomplishment as an institute, we must look to the future to capitalize on the opportunities for disease prevention that new technologies and discoveries are giving us. The health problems we face as a nation are real and the results of research offer substantive promise for solving the difficult questions faced by millions of Americans every day and the health professionals who treat them.”

Rodgers received his undergraduate, graduate and medical degrees from Brown University. He performed his residency and chief residency in internal medicine at Barnes Hospital and the Washington University School of Medicine in St. Louis. His fellowship training in hematology/oncology was in a joint program of NIH, George Washington University and the Washington, D.C., Veterans Administration Medical Center. In addition to his medical and research training, he earned a master’s degree in business administration, with a focus on the business of medicine, from Johns Hopkins University in 2005.

As a research investigator, Rodgers is widely recognized for his contributions to the development of the first effective—and now FDA-approved—therapy for sickle cell anemia. He was a principal investigator in clinical trials to develop therapy for patients with sickle cell disease and also performed basic research that focused on understanding the molecular basis of how certain drugs induce gamma-globin gene expression. He was honored for his research with numerous awards including the 1998 Richard and Hinda Rosenthal Foundation Award, the 2000 Arthur S. Fleming Award, the Legacy of Leadership Award in 2002 and a mastership from the American College of Physicians in 2005.

Rodgers has been an invited professor at medical schools and hospitals in Brazil, the Caribbean, France, Italy, China, Japan and Korea. He has been honored with many named lectureships at American medical centers and has published more than 150 original research articles, reviews and book chapters and has edited four books and monographs. He also holds three patents for his work in molecular diagnostics.

Rodgers served as governor to the American College of Physicians for the Department of Health and Human Services from 1994 to 1997. He is a member of the American Society of Hematology, the American Society of Clinical Investigation and the Association of American Physicians, among others. He chairs the hematology subspecialty board and is a member of the American Board of Internal Medicine board of directors. He is board-certified in internal medicine, in emergency medicine and in hematology.

What Was IT?

The mystery flower in the Division of Environmental Protection’s 2007 Earth Day Contest photo was Sceletium tortuosum, a succulent plant belonging to the ice plant family or Aizoaceae (Mesembryanthemaceae) that is endemic to the Great Karoo region of South Africa. Sceletium comes from the Latin sceletus, referring to the prominent leaf veins that persist as the skeleton-like structure of the dry leaves. Sceletium is known by several common names including kanna, kougoed and canna.

For thousands of years, IT has been used by the Khoisan people as a sedative, mood enhancer, analgesic for toothache and stomach pains and for other medicinal purposes. They developed crushing and fermenting processes to increase the stability, palatability and pharmacological activity of preparations made from the plant. The fermented, dried preparation was most commonly used in the form of a plug that was chewed or used to make infusions or decoctions. Later, the Hottentot settlers learned of these products and valued them so highly that they were used as a currency for barter.

The plant contains several active alkaloids including mesembrine that are responsible for its medicinal properties.

Most Sceletium is obtained from wild populations that are becoming increasingly scarce, probably as a result of overcollecting. More sustainable methods of cultivation are needed to protect the plant. Methods have also been developed to synthesize mesembrine by artificial methods.

The grand prize winners are Rajaram Shantadurga and Keith Ball. Runner-up winners are: Maria Aronova, Tom Mercer, Teresa Church, Danielle Needle, Robert Fariss, Antonia Thomas, Martin Hohmann-Marriott and Jeff Forbes. Winners will receive their prizes at 1 p.m. Apr. 26 during Earth Day ceremonies.
security fence, windows [in perimeter buildings] would break on impact—would become missiles and hurt occupants."

The film, a 3M product called SCLARL400, acts as a tensile skin; for conditions such as a hurricane or bomb blast, it is designed to elongate 140 percent, resist tearing and adhere to glass shards so that they fall harmlessly. "Blast-resistant film will keep glass in one piece," says Madlangbayan. "Glass will be broken, but kept together and drop onto the floor." The film is not designed to stop bullets, bombs or burglars; it's to increase shatter-resistance.

ORF has already completed installation in Bldgs. 6A & B, 14 A & E, 21, 37, 38 & 38A, 40, 41, 45, 51, 62, 64 and 65.

"Bldg. 31 is the last one on our list," says Madlangbayan. "We just did the B wing's B2 level and we will do the first floor next week [Apr. 2-6]."

Point man for the Bldg. 31 complex is Rey Walker, ORF facilities operations specialist. Bldg. 31 has three wings—A, B and C. There are no plans to do A wing, Walker says, because it's considered outside the blast zone. "B wing will be done first, then C," he reports. He expects installation crews will work their way up to the 5th floor of the B wing by the last week of April or the first week of May, given that "it takes 2 to 3 days per floor."

There is nothing harmful about the film, he says. It imparts a minor tint, "like a car windshield," and will be somewhat reflective from the outside. "If you look at Bldg. 33, you can see what it will look like," or visit the B2 level of Bldg. 31 and check out the windows by the exit.

Walker advises folks in the scheduled installation areas to clear their window ledges of any personal items. In addition, "if your desk is close to the windows, or if it is blocking windows, [the installation crews] are not going to move furniture," he says. "They will bring in a ladder." In case crews need to stand on a desk to access the windows, he asks staff to be flexible. The workers are just doing their job, "which is really for the safety of employees. This installation can save lives."

Aside from clearing the work area, standard procedure also includes this preliminary step: installation crews will clean the inner aspect of the windows before applying film. Any bubbles under the film surface should go away within a few days, Walker says. Crews will not clean the window exteriors.

Since the dimensions of windows in Bldg. 31B vary (roughly, from 2 feet by 3 feet to 4 feet by 8 feet), the film, which comes in 100-foot rolls, will be cut to fit. Seams will be visible, but not obtrusive.

The film itself is an acrylate adhesive of micro-layered polyester only 0.0040 inches thick. When installed on ¼-inch clear glass, it offers visible light transmission of 86 percent; visible reflection of 11 percent; and ultraviolet transmission of less than 2 percent. This means it’s an optically clear film that lets in plenty of light but also reduces harmful rays, glare and heat. It is tough stuff, with a tensile strength of 30,000 pounds per square inch. Other attributes: the film is weatherable and abrasion-resistant. It is also a Class-A interior finish for both flame spread index and smoke development.
John Makulowich, communications director for the Fogarty International Center, died at home of a heart attack on Mar. 11. He was 63.

A journalist and communications professional for more than 20 years, he most recently managed the FIC communications office and served as both webmaster and public liaison officer. Prior to that, he was a speechwriter for NIH director Dr. Elias Zerhouni in the Office of Communications and Public Liaison, OD.

"John took great pride in his work as a communicator," Zerhouni said. "His writing talent was of great service to me personally when I first arrived at NIH and I will always remember his passion for and dedication to the NIH mission."

John Burklow, NIH associate director for communications and public liaison, said, "This was shocking, sad news for all of us. Our hearts go out to John's wife and his children. John had an incredible work ethic and contributed tremendously to the NIH director's office during his time here. I will miss him, both as a coworker and a friend."

Makulowich received a bachelor's degree in philosophy from Bethany College in Bethany, W.Va., and a master's degree in philosophy from Boston University. He was also a Ph.D. candidate in philosophy at the University of California, Berkeley.

Makulowich was well-known in the areas of publishing, teaching, public speaking and information dissemination. He published internationally on biomedicine, information technology, the Internet, corporate management and the environment. He was an expert on use of the Internet, traveling abroad throughout his career to discuss technological issues. He was also respected as both a mentor and for his skill in teaching how to navigate the World Wide Web.

Makulowich taught a number of classes focusing on the web and other computer topics both as an adjunct professor at George Washington University and at the Center for Information Technology.

"John was a great friend to CIT training," said Kristen Dunn-Thomason, chief of CIT's computer training section. "His fun personality, ability to take complex topics and make them understandable to a layperson and knowledge of IT made him one of the highest-rated instructors in the history of the program."

Makulowich wrote a biweekly column, "On the Ledge," from 2001-2002 for USA Today. The feature offered readers a "better grasp of the high-tech adventures that lie ahead," according to the publication.

He worked with more than 250 organizations, including the federal government, trade associations, universities and corporations. In 1998, he received the first annual Post-Newsweek Business Information, Inc., Editorial Excellence Award. He also appeared on television and radio.

He had also been affiliated over the years with Booz Allen Hamilton, the Electric Vehicle Council and the Writers Alliance.

Makulowich was a member of the National Association of Science Writers, Toastmasters International and the Washington Speechwriters Roundtable.

He was fond of music—in particular, jazz and Bob Dylan—reading and playing tennis.

Makulowich is survived by his wife Gail and two children, Sean and Ashley, of North Potomac.

Fauci Awarded Kober Medal

Immunologist and AIDS researcher Dr. Anthony Fauci, NIAID director, has been awarded the 2007 George M. Kober Medal of the Association of American Physicians (AAP) for his outstanding contributions to academic medicine. The Kober Medal is among the highest honors conferred upon physician-scientists in the U.S. Fauci, a long-time AAP member and former AAP president, was presented with the medal on Apr. 15 at the joint meeting of the American Society for Clinical Investigation and AAP in Chicago. "Tony Fauci epitomizes the term 'physician-scientist,'" says Clinical Center director Dr. John Gallin, an AAP member who presented the medal to Fauci. The medal is named for Dr. George M. Kober, a pioneer in public health reform in the late 19th century and early 20th century. The award recognizes physicians acknowledged as leaders in internal medicine. AAP is a non-profit professional organization founded in 1885 by seven physicians for "the advancement of scientific and practical medicine." The association currently has about 1,000 active members and approximately 550 emeritus and honorary members from the U.S., Canada and other countries.
Responding to an Outbreak

How important is speed in containing a pandemic? Extremely, according to two independent studies funded by NIH and published online this month in the journal *Proceedings of the National Academy of Sciences*. Researchers supported by NIAID and NIGMS looked specifically at the response rate to the influenza pandemic in 1918. They found that in American cities where multiple social containment measures were imposed within a few days after reports of the first local cases, weekly death rates were cut by up to half compared with cities that waited a few weeks to respond. This suggests that while producing vaccines remains very important for such events, nonpharmaceutical interventions could buy time at the beginning of a pandemic.

Non-Smoking Genes?

The power to quit tobacco may be in our genetic makeup. Scientists supported by NIDA have for the first time identified genes that might increase a person’s ability to abstain from smoking. Published in the journal *BMC Genetics*, the study’s data came from a genome-wide analysis of the DNA of two types of nicotine-dependent individuals: one who could successfully quit smoking cigarettes and one who could not. Researchers identified 221 genes that distinguished the successful quitters. This knowledge could help health care providers choose the most appropriate treatments in smoking-cessation programs, leading to a greater quitting success rate.

Targeting Lung Cancer in Mice

Meanwhile, researchers at NCI have found that rapamycin, an FDA-approved immunosuppressant drug, can be highly effective in preventing the development of tobacco-related lung tumors in mice. The study, published in the Apr. 1 issue of *Clinical Cancer Research*, found that mice that were administered rapamycin 1 week after exposure to a common, tobacco-specific carcinogen showed a 90 percent decrease in the number of tumors, a notable decrease in tumor size and fewer abnormalities within cancer cells. The work also showed that mTOR, a protein that rapamycin targets, plays a critical role in the early developmental stages of certain lung tumors caused by tobacco exposure.

News in the Treatment of Bipolar Disorder

For people with bipolar disorder who are depressed and taking a mood stabilizer, adding an antidepressant medication is no more effective than taking a placebo, or sugar pill. These findings, from a study published online in the *New England Journal of Medicine* in March, are part of a the large-scale Systematic Treatment Enhancement Program for Bipolar Disorder (STEP-BD) clinical trial funded by NIMH. Another STEP-BD study, published in the April issue of the *Archives of General Psychiatry*, showed that intensive psychotherapy is more effective than brief therapy for treating bipolar depression. If people who take medications for bipolar disorder receive intensive psychotherapy, the research showed, they are more likely to have a faster and lasting recovery. Both studies add to researchers’ knowledge of identifying the best treatment tools to use in the fight against symptoms of this illness.

Hormone Therapy, Heart Disease And Menopause

New findings suggest that the effect of hormone therapy on the risk of heart disease may vary in women by age and proximity to menopause. Secondary analyses of results from the NHLBI-funded Women’s Health Initiative suggest that if women begin hormone therapy within 10 years of menopause, they may have less risk of coronary heart disease due to the therapy than women farther away from the onset of menopause. These findings, published in the Apr. 4 issue of the *Journal of the American Medical Association*, did not meet statistical significance, but they do suggest that health consequences of hormone therapy may vary by the amount of time from menopause.

Small Dogs, Big Findings

And here’s proof we can learn something from man’s best friend. A team led by NHGRI recently identified a genetic variant that’s a major contributor to small size in dogs. The findings, published in the Apr. 6 issue of *Science*, are exciting, according to researchers, because the underlying gene, that’s present in all dogs, is also present in humans. This points to the great potential for research in understanding the inheritance of traits, including those that influence health and disease. — compiled by Sarah Schmelling
Sleep and Obesity Study Recruits
Sleep and weight study for obese adults ages 18 to 50 who sleep fewer than 6 hours at night. Compensation is provided. Call 1-866-444-2214 (TTY 1-866-411-1010).

Pulmonary Sarcoidosis Study
Do you have pulmonary sarcoidosis? Consider participating in an NIH study. For more information, call 1-866-444-2214 (TTY 1-866-411-1010).

Parents and Teenage Girls Ages 12–17 Needed
Consider a group therapy study (06-CH-0039) for healthy girls who are at risk of gaining excess weight. Call 1-866-444-2214 (TTY 1-866-411-1010). Compensation is provided.

Ovarian Function Study
Healthy women ages 18 through 25 are needed for ovarian function study. Compensation is provided. Call 1-866-444-2214 (TTY 1-866-411-1010). Refer to study 00-CH-0189.

Do You Have Ankylosing Spondylitis?
Consider volunteering for an NIH research study. Compensation is provided. For information call 1-866-444-2214 (TTY 1-866-411-1010).

Panic Disorder Treatment Study
The anxiety disorders research lab at American University seeks individuals who experience panic attacks to participate in a 7-week psychotherapy treatment study. Participants must be 18 or older and have experienced panic symptoms for more than 1 month. The initial assessment to determine qualification may take 1-3 hours. Qualified volunteers may be eligible for compensation. For more information call (202) 885-1729.

Weight and Insulin Study
The Uniformed Services University of the Health Sciences is conducting a study examining stress responses of exercise and drinking a liquid meal in African-American and Caucasian men and women between the ages of 18 and 45. We are looking for all body types and fitness levels. Volunteers will be compensated for their participation. Study participants will perform a maximal exercise test, three submaximal exercise tests and will need to be available for morning testing. If interested, contact the Human Performance Laboratory at (301) 295-1371, humanperformancelab@usuhs.mil.

Billet Chosen to Head NIAID OCGR
Courtney Billet has been named director of NIAID’s Office of Communications and Government Relations. She will direct efforts to interpret and disseminate the goals and results of NIAID research programs and projects to all its constituents, including the biomedical community, Congress, the media, specialized groups, health care providers and the public at national and international levels. Before coming to NIAID, she worked for 18 years with USDA’s Animal and Plant Health Inspection Service (APHIS), where she served in various communication positions, including as the agency’s chief of staff. Most recently, she served as deputy administrator of legislative and public affairs at APHIS, leading all aspects of external communication activities on the front lines of some of the most significant issues facing agriculture today, including avian influenza, bovine spongiform encephalopathy, biotechnology and animal welfare.

CIT Computer Classes
All courses are given without charge. For more information call (301) 594-6248 or consult the training program’s home page at http://training.cit.nih.gov.

- Requesting Effective Telecommunications 5/1
- SAS Programming I: Essentials 5/1–3
- NCBI’s Correlation of Disease Genes 5/2
- Consolidated Network Monitoring System (CNMS) 5/4
- Remedy – NIH Central Service Ticket System 5/7
- SPSS: Regression 5/7–8
- Intermediate QVR – Search Strategies & Custom Download 5/8
- LISTSERV Electronic Mailing Lists: General Users 5/9
- Ingenuity Pathways Analysis, version 4.0 5/9
- Advanced QVR - Using Excel Pivot Tables 5/9
- LISTSERV Electronic Mailing Lists: List Owners 5/10
- Macintosh OS X Tips and Tricks 5/10
- QVR Training Profile 5/11
- Network Security and Firewalls 5/15
- SharePoint Services 2003 - Introduction 5/15

USUHS Offers Weight-Loss Program
Would you like to participate in a weight-loss program for you and your family? The Uniformed Services University of the Health Sciences’ Weight Management Program is sponsoring a weight-management study for women and their families. We are looking for African-American women between the ages of 18-60 and one or more of their family members to participate. Women only will attend a 13-week weight-loss program at USUHS focused on healthy eating and exercise for the entire family. Participation will be compensated. If you are interested or have any questions, contact Ayanna Shivers at (301) 295-1532 or ashivers@usuhs.mil.
R&W Treats Kids, Families to Night at Circus

For the 10th year, NIH’s Recreation and Welfare Association sponsored premiere night at the Ringling Brothers and Barnum & Bailey Circus, held Mar. 21 at the Verizon Center downtown. This year, R&W partnered with 50 nonprofits, including Easter Seals, and entertained thousands of children from area hospitals and their parents, including some 1,400 homeless or near-homeless people.

“From the NIH community, we had close to 1,000 and we were able to host the children from the Children’s Inn and Special Love,” said Randy Schools, R&W president. “We were also able to have a pizza party ahead of time at the Verizon Center.”

In the past decade, the sponsoring organizations provided 65,000 tickets that were distributed through social workers in the region. “For many families, this is the only time they receive free, family-oriented entertainment,” Schools said.

Eighty-four pediatric and adult patients and their family members from the Children’s Inn and the CC were able to go on the trip thanks to R&W. The patients and their families enjoyed a pizza dinner and then got to go down on the floor of the Verizon Center for a close-up encounter with circus entertainers.

For the last few years, circus members have made their youngest audience members smile not only at the show, but also during a special visit to the CC.

Holly Parker, recreation therapist with the CC recreation therapy department, said, “This circus trip is a highlight of the year for many of our patients and their families. The children and adults are always smiling at the end of the evening and talking about which circus act they enjoyed the most.”—Jenny Haliski

Top: Dancer Glenda Figuereido and clown Neal Skoy visited CC pediatric patients on Mar. 21 before a special private performance at the Verizon Center that night. Here they sign patient Quincy Wilson’s circus program.

Middle: At left, a youngster entertains Skoy as other circus performers (right) take time for a photo op with a tiny tot.

Bottom: From left, clown Skoy; Joshua Jeffes; dancer Figuereido; Bennett Hume; and Jarrod Jeffes (patient with face paint) share a look at the kids’ artwork.

PHOTOS: ERNIE BRANSON