

# nih record



ABOVE • Masked NIH'er steals onto campus? See p. 10 for details.

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### Documenting Social Change

## NIH Seminar Details History of ACT UP

By Sarah Schmelling

In 2001, Sarah Schulman was driving a rental car in Los Angeles when she heard a radio story recognizing the 20th anniversary of AIDS. “They said, ‘At first, America had trouble with people with AIDS, but then they came around,’” Schulman explained in an NIH History of Medicine seminar. “And I just knew I could not continue my life without making sure that no one would ever say something like that again.”

The words hit her because, as a writer and activist long involved with the AIDS Coalition to Unleash Power, or ACT UP, she had memories of “all of my good friends, and all of the thousands of people who spent their lives—some of them to their deaths—forcing this country to change its policies toward AIDS and people with AIDS,” she said. “And to have that naturalized, as though the dominant



ACT UP demonstrators march at NIH in 1990.

SEE ACT UP, PAGE 8



Dr. Laurie Tompkins, a scientist and an artist (that's her fused glass at left), helped design EUREKA.

### EUREKA Grant Program Kicks Off

By Belle Waring

Got a trail-blazing idea? A controversial hypothesis? NIH wants you! In concert with four other ICs, NIGMS has launched EUREKA, a new funding initiative to help researchers with original ideas. Program director Dr. Laurie Tompkins, who helped create EUREKA (Exceptional, Unconventional Research Enabling Knowledge Acceleration), says it will carve out space for the “paradigm-shifters” that might otherwise get triaged.

SEE EUREKA, PAGE 4

### New Class To Be Announced

## Pioneer Award Winners To Report Progress, Sept. 19

Some of the most innovative researchers in the NIH portfolio will be gathering on Wednesday, Sept. 19, to report their progress since receiving the NIH Director's Pioneer Award. The third annual Pioneer Award Symposium, held this year in Natcher Conference Center, will showcase a wide range of research—from biophysics to neuroscience—that is pushing the frontiers of biomedical knowledge.

The Pioneer Award is a key component of the NIH Roadmap for Medical Research, a series of far-reaching initiatives designed to transform the nation's medical research capabilities and speed the movement of research discoveries from the bench to the bedside. It provides a framework of the priorities that NIH must address in order to optimize its entire research portfolio and lay out a vision for a more efficient and productive system of medical research.

“The Pioneer Award is the flagship for NIH

SEE PIONEER, PAGE 6



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**NIH Record Office**  
Bldg. 31, Rm. 5B41  
Phone (301) 496-2125  
Fax (301) 402-1485

**Web address**  
<http://nihrecord.od.nih.gov>

**Editor**  
Richard McManus  
[rm26q@nih.gov](mailto:rm26q@nih.gov)

**Assistant Editor**  
Carla Garnett  
[cg9s@nih.gov](mailto:cg9s@nih.gov)

**Staff Writers**  
Jan Ehrman  
[je48b@nih.gov](mailto:je48b@nih.gov)

Sarah Schmelling  
[ss1116y@nih.gov](mailto:ss1116y@nih.gov)

Belle Waring  
[bw174w@nih.gov](mailto:bw174w@nih.gov)

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

## briefs

### Correction

The lead story in the Aug. 10 issue of the *NIH Record* stated incorrectly that the new Gateway Center at NIH has Montgomery County's first "green" roof. The county school system actually installed a retro-fitted green roof on Northwood High School in 2005. NIH's green roof is still believed to be among the first original green roofs installed in the county.

### Medicine for the Public Lectures Begin Oct. 2

The Clinical Center will present its annual series of lectures on health topics on four Tuesdays at 7 p.m. in Masur Auditorium, Bldg. 10. The talks are free and open to the public.

- Oct. 2—Alcohol Use Disorders: Old Insights, New Treatments, Dr. Markus Heilig, clinical director, NIAAA
- Oct. 9—The Prevention of Cervical Cancer by Vaccination and Other Means, Dr. Douglas Lowy, chief, Laboratory of Cellular Oncology, NCI
- Oct. 16—From Childhood Blindness to Age-related Macular Degeneration: Genes, Eye Disease, and Prospects for Therapy, Dr. Paul Sieving, director, NEI
- Oct. 30—Good Pain, Bad Pain: New Advances in Pain Mechanisms and Treatments, Dr. Michael J. Iadarola, chief, neuronal gene expression section, NIDCR.

The Medicine for the Public series was established in 1978. For more information call (301) 496-2563 or visit [clinicalcenter.nih.gov/about/news/mfp.shtml](http://clinicalcenter.nih.gov/about/news/mfp.shtml).

### Photography Competition Set, Oct. 9

All are invited to enter the NIH Camera Club's annual open photography competition on Tuesday, Oct. 9 at 6:15 p.m. The competition will be held in the community room at the Classic Hyatt Residence, 8100 Connecticut Ave., Chevy Chase. The entry fee is \$2 per image and up to 4 images can be submitted per category. Categories are black-and-white prints, color prints and color slides. Prizes will be awarded to top winners.

The Camera Club meets on the second Tuesday of each month (September-June) at 7 p.m. at the Classic Hyatt Residence. A guest speaker shares photographic expertise and images and judges club members' photos on topics such as travel, architecture or experimental photography. Joining the Camera Club is a great way to improve your photography and meet friendly people. The club is an R&W-spon-

sored organization. For more information contact Margaret at [mbodurka@gmail.com](mailto:mbodurka@gmail.com) or visit [www.recgov.org/r&w/camera.html](http://www.recgov.org/r&w/camera.html).

### Symposium on HIV/AIDS Research, Nov. 1-2

The Center for Cancer Research is sponsoring a symposium Nov. 1-2 titled HIV/AIDS Research at the National Cancer Institute: A Record of Sustained Excellence, in Masur Auditorium, Bldg. 10. It will celebrate the achievements in HIV/AIDS research by former and current NCI scientists, as well as future developments in the effort to combat HIV/AIDS. Sessions will include AIDS malignancies, HIV virology and molecular pathogenesis, immunology/immunopathology, vaccines/immunotherapy, epidemiology, and drug development/resistance. A poster session will also highlight NCI intramural research. Registration is free and can be completed online at [web.ncifcrf.gov/events/hivaidsresearch2007/](http://web.ncifcrf.gov/events/hivaidsresearch2007/). For more information, contact Karen Kochersberger at [kkochersberger@ncifcrf.gov](mailto:kkochersberger@ncifcrf.gov) or (301) 228-4027.

### Meeting on Cancer and Inflammation, Oct. 9-10

The National Cancer Institute will hold a meeting on Cancer & Inflammation Oct. 9-10 in Masur Auditorium, Bldg. 10. Topics include innate resistance and cancer, colon and prostate cancers, skin cancers, cancers with an infectious pathogenesis and the inflammatory tumor microenvironment. Registration is free and can be completed at [web.ncifcrf.gov/events/cancerandinflammation/](http://web.ncifcrf.gov/events/cancerandinflammation/). For more information contact Karen Kochersberger at [kkochersberger@ncifcrf.gov](mailto:kkochersberger@ncifcrf.gov) or (301) 228-4027.

### Women's Health Scientific Exchange Set, Sept. 14

The women's health special interest group will host a scientific exchange on Friday, Sept. 14 in Wilson Hall, Bldg. 1. The guest speaker is Dr. William F. Crowley, Jr., professor of medicine at Harvard Medical School and chief of the reproductive endocrine unit at Massachusetts General Hospital. The event features a History of Medicine Lecture, "Changing Models of Biomedical Medical Research or Interregnums are Tough for Young Investigators," cosponsored by the Office of NIH History, from 11 a.m. to noon. A networking break/lunch follows from noon to 1:15. From 1:15 to 2:15 p.m., the Griff Ross Memorial Lecture, "New Genes that Control Reproduction in the Human," will be presented, cosponsored by the NICHD Reproductive Biology and Medicine Branch. For sign language interpretation, contact Vicki Malick at [malickv@mail.nih.gov](mailto:malickv@mail.nih.gov).

### EXTRA! Get *NIH Record* Email Updates

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nih record



*Dr. Cathy Cantilena of the Clinical Center's department of transfusion medicine*

## Organ Transplant Brings Hope, Gratitude To CC Physician

By Jenny Haliski

Dr. Cathy Cantilena, staff physician in the Clinical Center's department of transfusion medicine and an NIH employee since 1989, doesn't wear an iPod when she exercises outside. She doesn't want anything to block out the sound of birds singing. For her, listening to them is part of appreciating the gift of life; their songs bring her hope for another day. When she's inside at her office, a statue of an angel with a bird perched on its arm lifts her spirits. It's saying, "Hope is like a little bird that sings."

Cantilena began her tenure at NIH in NHLBI, working with patients diagnosed with rare or new diseases. Later, she worked under the mentorship of Dr. Harvey Alter, chief of DTM's infectious disease section, when he and his colleagues first identified the hepatitis C virus. But Cantilena didn't suspect that she would be diagnosed with a rare disease—lymphangiomyomatosis (LAM). In this disease an unusual type of muscle cell invades the tissue of the lungs, including the airways, blood and lymph vessels. Over time, these muscle cells grow into the structures' walls, causing them to become obstructed. Eventually, the muscle cells block circulation to and from the lungs, preventing them from providing oxygen to the rest of the body.

Unique to women of child-bearing age, LAM has no known treatment aside from transplantation; only about 800-900 women in the U.S. have it. In the past, physicians often gave LAM patients antihormonal agents, which didn't work. NHLBI's LAM protocol involves observing the disease processes to identify the proteins and genes that contribute to lung destruction and then to develop more effective therapies.

Cantilena admits she was adept at ignoring symptoms that something might be wrong. One day, while playing with her children in the ocean, she could no longer breathe and couldn't jump the waves. She couldn't walk



*Cantilena talks with Scott Kaufman, who recently made his 100<sup>th</sup> donation to the NIH blood bank. Cantilena tells donors, "You're the celebrity here because you're giving people like me life." Kaufman and his brother, Lloyd—who is about to make his 100<sup>th</sup> donation—contribute regularly in memory of two family members who died of cancer.*

PHOTOS: ERNIE BRANSON

and get enough air to have a conversation at the same time. She also started to lose weight rapidly.

NHLBI physicians diagnosed her LAM in 2000 but she didn't begin her search for a lung transplant program until 2005. According to United Network for Organ Sharing guidelines, patients who receive lung transplants at programs performing more than 21 procedures annually have the best chance of surviving. Cantilena selected the Duke Lung Transplant Center and passed the pre-operative evaluation in January 2006. She soon knew she had made a good choice: Duke places transplant patients in small groups so they can journey together through the process. "The camaraderie was wonderful," Cantilena said.

In early March, her condition deteriorated rapidly after she caught a virus that weakened her lungs. She experienced a code blue lasting 6-8 minutes—long enough for physicians to worry about brain death—and went into a coma for 4 days. Though still on a ventilator, she awoke from the coma and found that her name had been moved to the top of the UNOS waiting list for lungs.

She received her transplant on Mar. 8, 2006, and the next day was awake and breathing the air in her hospital room. Although she had a long road ahead of her, Cantilena returned home and to work at NIH by early June, less than 3 months after her transplant.

DTM chief Dr. Harvey Klein remarked on Cantilena's "amazing ability to contribute to the CC clinical care effort right up to the time of transplant, as well as her remarkable return. This is a physician who carried her oxygen tank to work and to the clinic up until days before she left for Durham for her lung transplant. We considered it a miracle that she recovered so quickly and a blessing that she returned so quickly to our hospital. She is an inspiration to the physicians whom she trains in transfusion medicine and an example of the difference that organ and blood donors can make."

"It's a miracle I'm here," Cantilena said. "I'm alive. The sky is blue. I attended my daughter's first Holy Communion, watched my middle schooler's soccer games and saw my son graduate from high school. I am here to contribute to their lives. That's the ripple effect of organ donations. You get life back."

At the 1-year anniversary of her transplant, Cantilena is proud to have survived and knows that she will need to stay vigilant for infections that could compromise her ability to reach the 5-year mark. Her immunosuppressed state requires some lifestyle changes such as avoiding classrooms, large crowds and uncooked vegetables—all of which could harbor bacteria and viruses. "But you can't live in fear of setbacks," she said. "I just like to listen to the birds singing and smell the fresh air. It's so nice not to have to worry about every breath!"

Cantilena has an enormous sense of gratitude, especially to her family, friends and colleagues. She wants to spread awareness of the importance of organ and blood donation. Because she needed 15 blood donors, including three platelet donors, she encourages everyone who is healthy to donate blood regularly, to consider becoming an organ donor and to discuss those decisions with family members. "Make that contribution and live life to the fullest every day," she said. ●

## EUREKA

CONTINUED FROM PAGE 1



*EUREKA (Exceptional, Unconventional Research Enabling Knowledge Acceleration) takes its name from an exclamation by Archimedes, ancient mathematician, physicist and engineer.*

IMAGE COURTESY OF THE NATIONAL LIBRARY OF MEDICINE

Such a novel program requires a new set of instructions: “We make it explicit to ask candidates not how *likely* it is to succeed,” Tompkins says, “but is there any likelihood *at all* to succeed. Don’t worry if it’s risky.”

NIGMS will also have its own EUREKA-dedicated review staff, says Tompkins, so they can focus “on these applications alone and compare them with each other, not other kinds,” such as more conventional funding mechanisms like the R01. “That’s the only way to have a fair review.”

Tompkins’s own scientific specialty is neurogenetics, and at Temple University she ran a research lab for 18 years before coming to NIH as a reviewer. She’s received grants, reviewed grants and now she’s designing them. Along with colleague Dr. Ravi Basavappa, she began brainstorming EUREKA back in 2005, when NIGMS’s IC-specific R21 came up for renewal.

“Just revising it wasn’t going to solve it,” she said. “We could make it better, but we couldn’t make it good. I wasn’t trying to be dramatic, but I said, we have to have something new. So we let the R21 expire; it died a natural death.”

NIGMS contributions to each EUREKA award would fund direct costs of up to \$800,000 over 4 years, bringing the institute’s portion to \$5 million. In addition, NINDS, NIMH, NIDA and NIAID will collectively contribute \$3.4 million, bringing the program total to \$8.4 million. NIGMS hopes to award 13-17 EUREKAs in FY 2008.

“The application questions ask: how important is the problem they’re trying to solve, will it have a higher-than-average significance and what portion of the scientific community will be affected,” Tompkins explains. “Of course, if it could have clinical significance, we want to know that, too.”

Applicants should also focus on these elements: the logic of the experimental plan, their own history—whether they’ve ever solved tough problems using innovative methods, and preliminary data (if any). But keep this in mind: EUREKA is not all about preliminary research.

“Any combination of these, or even one of them, can convince us that this [application] is not totally impossible,” says Tompkins. “Now, even if they violate the six laws of physics, we can advise the applicant to revise, or to call someone at the NSF.”

How does EUREKA differ from the Pioneer Award? “The Pioneer is trans-NIH; it’s more money and more time. The emphasis there is on the person, not the project,” Tompkins explains. “The EUREKA is for ICs who wish to participate. This is about the size of a modest R01.” A Pioneer awardee could also apply to EUREKA if he or she had a single idea, especially if it involves “a central hypothesis about a given field.”

EUREKA takes its name from Archimedes, ancient Greek mathematician, physicist and engineer. The story is that one day, when he stepped into his bath, Archimedes observed how the water rose as his body displaced it. In a flash, he realized that by submerging an object in water, he could calculate its volume and density. He was so elated by his discovery that supposedly he leaped out of the tub and dashed outside without clothes on. “*Eureka!*” he cried. “I have found it!”

Archimedes may have seemed hare-brained, but he made history. For her part, Tompkins is all for the wild creativity of science.

“I know the impact of this personally,” she says, recalling the national meeting where a scientific discovery was announced. “It was standing-room-only,” she says, and for good reason: the scientist reported how one gene could be replaced by another form of the gene—even a gene from another species.

“It opened up a lot of doors in molecular biology and gene therapy,” Tompkins recalls. “Before, everybody had thought, well, you can do this with fungi, but he overcame technical obstacles and showed what we can do with higher organisms with many cells.” The discovery revolutionized the field of genetics.

The application deadline for the EUREKA program is Oct. 24. To view the full funding opportunity announcement, see [grants1.nih.gov/grants/guide/rfa-files/RFA-GM-08-002.html](http://grants1.nih.gov/grants/guide/rfa-files/RFA-GM-08-002.html). 



Then-U.S. Assistant Secretary for Health John Agwunobi (in photo at right) encourages the 2007 Fogarty International Clinical Research Scholars to remain humble as they form critical relationships with foreign scientists, who share the common goal of improving global health.



### Fogarty Scholars Urged to Establish Relationships to Advance Global Health

Relationships provide the single biggest contribution to the improvement of global health, according to Assistant Secretary for Health John Agwunobi. In remarks to the 2007 Fogarty International Clinical Research Scholars at the conclusion of their orientation, Agwunobi—who has since taken a senior post with Wal-Mart Stores, Inc.—urged them to remain humble in their dealings with their foreign peers.

“Your ability to sit with the less well-endowed as equals and to have honest conversations with them—that’s what’s going to change world health,” he added. “Never be arrogant that it’s about what we can do for them. It’s about what we can do together.”

Agwunobi’s remarks concluded 3 weeks of intensive global health instruction on the NIH campus, designed to prepare the 49 awardees to assume their overseas research training posts.

Fogarty director Dr. Roger Glass is a firm believer that an early experience in global health can inspire a lifetime of accomplishments. “It hits right on that element of idealism that you can actually identify a problem that is underserved and use your medical training to change the world,” he said.

In its fourth year, the program pairs U.S. graduate students with low- and middle-income-country students or recent graduates in the health sciences. The paired awardees receive a 1-year mentored clinical research training experience at a Fogarty collaborator site, working on NIH-funded clinical research.

“The matching of Americans with host-nation scholars is a pillar of this program,” said FIC’s Dr. Aron Primack, who oversees the scholars training initiative. “We’re trying to develop a cadre of people who really understand global health from an overarching perspective.”

Many of the previously selected scholars have already published work related to their experi-

ence abroad in peer-reviewed journals and have presented competitive papers at international meetings. The program is open to students in medicine, public health, nursing, dentistry, pharmacy, veterinary medicine and other doctoral-level programs in the health sciences from which someone might aspire to a career in global health research.

The scholars program is funded by eight NIH components including Fogarty, NIAID, NIDA, NCI, NCMHD, NIDCR, NINR and NICHD. In addition, support for recruitment and review is provided by the Association of American Medical Colleges and the Association of Schools of Public Health.

For more information about the scholars program, visit [www.fic.nih.gov/programs/training\\_grants/fic\\_ellison.htm](http://www.fic.nih.gov/programs/training_grants/fic_ellison.htm). 

### R&W Honors Three

The Recreation and Welfare Association recently honored three individuals for their efforts for the NIH community and the NIH charities.

For more than 25 years, Charles Butler, a Clinical Center retiree, has donated 1 week a year to Camp Fantastic. He was given an award for outstanding service and leadership to R&W and the camp.

Linda Doty of NIAAA was recognized for assisting R&W with its nomination process and governance structure.

Karen “Janie” Robak of NLM has volunteered for numerous events, including the NIH Film Festival, where she worked every evening; the Camp Fantastic Barbecue; the NIH Ski Club; and the food tent at the NIH Research Festival. She received the R&W Have a Heart Award.



R&W honorees include (from l) Karen “Janie” Robak, Charles Butler and Linda Doty.

## PIONEER

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efforts to encourage applicants to submit their most innovative, out-of-the-box proposals, even if they carry a greater-than-usual risk," said NIH director Dr. Elias Zerhouni.

The program has been praised and emulated, most recently by the Department of Defense, which announced plans in July to launch its own effort modeled on the Pioneer Award.

"The Pioneer Award symposium is fast becoming an NIH tradition and is a wonderful opportunity to sample a great variety of cutting-edge science in a single day," added Zerhouni.

The event will start at 8:15 a.m. with introductory remarks by Zerhouni and Dr. Jeremy Berg, director of the National Institute of General Medical Sciences, which runs the Pioneer Award program for NIH. Zerhouni will announce the 2007 Pioneer Award recipients and then the 13 recipients of Pioneer Awards in 2006 will present their work. From 3:30 to 5:30 p.m., the 2004, 2005 and 2006 awardees will discuss their research during a poster session and concurrent reception.

The poster presenters will include:

- Dr. Stephen R. Quake of Stanford University, who is developing techniques for measuring individual molecules and for moving minuscule volumes of liquid for use in characterizing gene expression in individual cells and building chips for culturing cells
- Dr. Leda Cosmides of the University of California, Santa Barbara, who is using a computational approach for understanding motivation and kinship relationships
- Dr. Larry Abbott of Columbia University, who is using computer modeling and simulation to understand neural circuits
- Dr. Vicki L. Chandler of the University of Arizona, who studied mechanisms controlling gene expression in plants for many years and is now searching for similar mechanisms in humans.

Attendance at the symposium is free and registration is not required. For an agenda, see [nihroadmap.nih.gov/pioneer/symposium2007](http://nihroadmap.nih.gov/pioneer/symposium2007).

### Class of '06 Pioneer Awardees To Lecture

The 2006 Pioneer Award recipients who will speak at the Sept. 19 symposium and the titles of their talks are:

- Karla Kirkegaard, Stanford University School of Medicine – Dominant Drug Targets in RNA Viruses
- Evgeny A. Nudler, New York University School of Medicine – New Approaches to Fight Bacterial Infections
- David A. Relman, Stanford University – It's a Jungle in There: Explorations of the Human Microbiome
- Kwabena A. Boahen, Stanford University – Neurogrid: Emulating a Million Neurons in the Cortex
- Younan Xia, University of Washington – Putting Nanostructures to Work for Biomedical Research
- Arup K. Chakraborty, Massachusetts Institute of Technology – Understanding Adaptive Immunity and Its Aberrant Regulation: A Crossroad of the Physical, Life and Engineering Sciences
- Lila M. Gierasch, University of Massachusetts at Amherst – Moving the Protein Folding Problem from the Test Tube to the Cell
- Gary J. Pielak, University of North Carolina at Chapel Hill – Protein Biophysics Under Physiological Conditions
- Thomas J. Kodadek, University of Texas Southwestern Medical Center at Dallas – Monitoring the Immune System with Synthetic Molecule Microarrays: A New Route to Biomarker Discovery
- Rosalind A. Segal, Dana-Farber Cancer Institute – Proteoglycan Interactions with Sonic Hedgehog Are Selectively Required for Mitogenic Responses
- James L. Sherley, Boston Biomedical Research Institute – Making Human Adult Stem Cell Expansion Routine
- Rebecca W. Heald, University of California, Berkeley – Elucidating Mechanisms of Intracellular Scaling
- Cheng Chi Lee, University of Texas Health Science Center at Houston – Suspended Animation of Non-hibernating Mammals



*NCI director Dr. John Niederhuber and Dr. Sanya Springfield, director of NCI's Center to Reduce Cancer Health Disparities*

## NIH Hosts Cancer Health Disparities Summit

*By Francis X. Mahaney, Jr.*

They came from as far away as the Samoan Islands, from reservations in Oklahoma, inner city Philadelphia and research institutions across America with the goal of strengthening cancer health disparities research.

The second annual Cancer Health Disparities Summit—jointly sponsored by the National Cancer Institute, the National Center on Minority Health and Health Disparities and the National Center for Research Resources—brought together the nation's leading cancer health disparities researchers to discuss strategies and challenges for reducing cancer among minority and underserved communities. Among them were NIH staff, health professionals and community advocates.

"The Disparities Summit helps keep us all accountable," said Dr. Sanya Springfield, director of NCI's Center to Reduce Cancer Health Disparities. "By coming together once a year, we are able to better assess our progress and identify and prioritize the challenges that remain. It is also a time to review and assess the strategies we are employing—a time to take stock and consider what is working and what is not."

More than 23 speakers attended, including NCI director Dr. John Niederhuber and NCRR director Dr. Barbara Alving.

Addressing the closing session, Niederhuber talked about exciting scientific research being conducted and sponsored by NCI and the need to make advances available to all.

"Cancer is a disease of staggering complexity," he said. "Soon, however, cancer medicine will emerge into a highly personalized approach" where doctors will move away from "search and destroy" to "target and control." Genome scanning will soon allow physicians to map predictors of disease based on genetic information. "Using genomics and proteomics, oncologists will soon be able to detect cancer at its earliest stage and among those born at risk for cancer, enabling physicians to provide patients with individualized cancer treatment," Niederhuber said.

"Research is now under way to address the hypothesis that stem cells are responsible for tumor genesis, and determine whether these cells may be viable therapeutic targets," he continued. Already, NCI scientists have discovered a possible marker that may be used for detecting the earliest stages of cancer transformation. Using special agents to "paint chromosomes," researchers have revealed the location of chromosomes within the nucleus.

"To ensure that the latest scientific advances reach all patients, we need to improve access and expand our outreach programs and patient navigation," Niederhuber added. "A key part of the mission of the recently launched NCI Community Cancer Centers Program is to research new and enhanced ways to assist, educate and better treat the needs of underserved populations."

Nearly 900 people attended the event. "One of the biggest strengths of a conference like this is the opportunity to network with researchers and advocates from other regions of the country, meet junior researchers and collaborate on scientific papers and grants with people you have not previously worked with," said Dr. Claudia Baquet, associate dean for policy and planning at the University of Maryland Medical School. She is one of 25 principal investigators participating in NCI's \$95 million Community Networks Program.

Native Samoan Dr. Victor Tafaeono, a cancer surgeon and NCI grantee, observed, "The genomics, genetics and proteomics talks here were absolutely fantastic."

Difficulties accessing cancer care was a recurring theme. "I'm afraid it's true," said Dr. Linda Burhanasstipanov, a Cherokee Indian and public health researcher with Native American Cancer Research Corp. in Colorado. "Access to care is the most important problem facing Native American Indians today, but confusion about whether Native Americans are eligible for Medicaid/Medicare support, as well as Indian Health Service assistance, has seriously impacted the survival rates of Indians with cancer."

The summit also included a media panel—Health Disparities in the News: Getting the Word Out—moderated by George A. Strait, Jr., former ABC News correspondent who is now communications director at NCMHD. It included Hispanic, black, Asian and Native American panelists. 🗣️



## ACT UP

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### Above:

*Sarah Schulman (l) and Jim Hubbard (c) discuss the ACT UP Oral History Project. At right, demonstrators “Storm the NIH” in 1990.*

culture was so enlightened they just happened to ‘get it’ one day, we just couldn’t let that happen.”

Her solution was to get together with her friend Jim Hubbard, a filmmaker who also worked in ACT UP, and develop a way to document all that the group achieved. The result is the ACT UP Oral History Project, an archive of interviews with surviving members of the group that was formed in 1987 to raise public consciousness about AIDS and that, according to Schulman, “is probably the most recent successful social movement in American history.”

With the interviews, 80 of them now completed, and with a documentary film project under way called *United in Anger: A History of ACT UP*, Schulman and Hubbard hope not only to “present comprehensive, complex, human, collective and individual pictures of the people who have made up ACT UP/New York,” according to their web site, but also to “demystify the process of making social change, remind us that change can be made and help us understand how to do it.”

Schulman, a novelist, playwright, journalist and professor of English at the College of Staten Island, CUNY, provided an overview of the project for the NIH audience, noting that the last time she was on campus, she participated in the ACT UP “Storm the NIH” action, a demonstration of about 1,000 protesters here on May 21, 1990. She said the oral history project has been fascinating because, as they conduct and film interviews, they’re developing a cumulative knowledge of the movement.

It’s also interesting due to the “wide spectrum of people” in the interviews. “Let me tell you, it’s every kind of person. We go into the richest homes and the poorest. We talk to people who are very accredited and have accomplished a great deal and we go to people who really have not realized in their own lives what they thought their potential was,” she said. “We could find no cofactor [among them] except

for the fact that at the moment that history asked them to, they rose to the challenge.”

Hubbard, a filmmaker since 1974 and film preservationist for the last 15 years, said tapes of the interviews are available at the New York and San Francisco public libraries, but the main source of access is the web site [www.actuporalhistory.org](http://www.actuporalhistory.org), where 61 interviews can now be seen. So far this year, 23,000 people from around the world have downloaded transcripts of the interviews, he said.

Hubbard showed clips from interviews, then presented a sample reel from the film that included portraits of two activists who died, as well as pieces documenting two ACT UP actions: “Seize Control of the FDA” in 1988 and “Stop the Church,” a demonstration at St. Patrick’s Cathedral in New York in 1989. The film integrates footage from the time with recent interviews “so you can get a sense of continuity and how social change is made,” Schulman said.

She said one reason for the project is “we feel there are a lot of people in this country who want social change right now, but they don’t know how to do it.” When she was growing up, she said, images of the Civil Rights movement made her aware of social action, but now “those images aren’t as available.” She and Hubbard want younger generations to see that the lesson of ACT UP is “three people can make change if they’re persistent.” She added that the group operated in a way Martin Luther King, Jr., advocated, which was to “educate yourself so you really understand the issue, make a demand that’s reasonable and doable, present that demand to the powers that be who can enact it, and when they refuse, you do civil disobedience until they are forced by pressure to take that action.”

She also believes the project offers a view of people with AIDS much different from the way they are often portrayed in the media, as in the story she heard on the radio 6 years ago. “What we have uncovered is that this was a community...who joined together and forced this country—against its will—to change its policies, thereby saving each others’ lives,” she said. “That’s the story we want to tell.”



### NIH's Rice Receives Smissman Award

Dr. Kenner C. Rice—whose research has led to the development of compounds or medications that have the potential to treat or prevent drug addiction—has

received the 2007 Smissman Award presented by the American Chemical Society. Rice, chief of the Chemical Biology Research Branch, National Institute on Drug Abuse with a joint appointment in the National Institute on Alcohol Abuse and Alcoholism, was recognized at the ACS national meeting in August.

Among his contributions spanning a 35-year career are the development of the NIH Opiate Total Synthesis, which allows medical opiates to be produced synthetically in any quantity, offering opiate researchers independence from foreign sources of opium and providing insights for the development of new non-opioid drugs. Rice's work also led to the discovery of an imaging agent for positron emission tomography (PET)—a medical imaging technique for study of biochemistry in living humans—that is now being used to study how opioid drugs work in the brain; and the development of medications that prevent cocaine self-administration in rhesus monkeys. These agents may be useful in treating cocaine and methamphetamine abuse in humans as well. Currently, no effective medication therapies exist for addiction to these stimulant drugs.

“During his tenure at NIH, Dr. Rice has designed and directed the synthesis of many drugs and research tools that have helped identify and characterize different drug effects and drug receptor interactions,” said NIH director Dr. Elias Zerhouni. “His work has suggested new therapeutic applications of cannabinoids, for example, an area of expanding potential that NIH researchers continue to explore. In addition, his fellowship programs have helped to create a whole new generation of scientists producing exciting research in the fields of organic and medicinal chemistry.”

Since joining NIH in 1972, Rice has mentored more than 70 postdoctoral fellows from 20 countries, many of whom have gone on to prominent scientific positions in industry, government and academia. He has authored or coauthored more than 600 published papers and has over 40 patents.

Rice received his B.S. degree from Virginia Military Institute in 1961. He then received his doctorate in organic chemistry from Georgia Institute of Technology in 1966, where he also did postdoctoral work. He conducted antimalarial research at Walter Reed Army Medical Center as an active duty member of the Army and also was a senior scientist at Ciba-Geigy for 3 years before joining the National Institute of Arthritis, Metabolism, and Digestive Diseases (now NIDDK) as a senior staff fellow in 1972. Rice moved to NIDA and NIAAA in 2006—the research program that he currently directs there began in 1939 and is one of the oldest continuous programs at NIH.

The Bristol-Myers Squibb Smissman Award, established by the ACS in honor of Prof. Edward E. Smissman of the University of Kansas, is given to a living scientist whose research, teaching or service has had a substantial impact on the intellectual and theoretical development of the field of medicinal chemistry. 12

### Fogarty Director Receives Lifetime Scientific Achievement Award

Fogarty International Center director Dr. Roger Glass recently received the Charles C. Shepard Lifetime Scientific Achievement Award, in recognition of his 30-year career of scientific research application and leadership. The award was presented by Dr. Tanja Popovic, chief science officer, Centers for Disease Control and Prevention, during a ceremony at the CDC facility in Atlanta.

The award citation read, “Distinguished as one of the world's foremost experts in viral gastroenteritis, Dr. Roger I. Glass's accomplishments in rotavirus and norovirus research have made him an internationally recognized expert and have vastly increased recognition and prevention efforts for these viruses worldwide. He challenged the assumption that rotavirus diarrhea was not a major problem among U.S. children—which played a motivating role in development of rotavirus vaccines for children in developing countries and the U.S.”

Glass and his team developed molecular assays to detect and sequence the agent norovirus, which has been identified in more than 1,000 outbreaks since 1986. He has trained or mentored scientists from more than 30 countries, has authored over 500 publications and has been recognized by numerous professional societies. His work has involved field studies in India, Bangladesh, Brazil, Mexico, Israel, Russia, Vietnam, China and elsewhere and has shaped major public health interventions that continue to help prevent rotavirus deaths.

“I am honored and humbled to receive this wonderful recognition from my peers at CDC,” Glass said. “In reality, the award should go to the dozens of medical officers, visiting scientists, postdocs and colleagues who made our 20-year adventure an incredible success and [whose] collective efforts have helped the prevention of diarrhea at home and abroad through the use of vaccines. This effort is not yet over and will only be successful when we can measure the impact of these vaccines in terms of lives saved and hospitalizations averted. I am incredibly proud to be associated with this wonderful scientific effort. Along the way, the effort has been a joy—of science, of people, of mission and commitment.” 13





## feedback

You ask the questions. We root out the answers. Feedback lets NIH'ers post anonymous queries at [www.nih.gov/nihrecord/index.htm](http://www.nih.gov/nihrecord/index.htm) (click on the Feedback icon). The *Record* will make every effort to track down responses from those in the know.

**Feedback:** Are there plans to remove the vehicle inspection canopy on Center Drive in front of the Safra Family Lodge? Since the commercial vehicle inspection station has opened on Rockville Pike and Center Drive is now an employee entrance, the canopy is no longer needed. It is ugly and presents a hazard to pedestrians crossing Center Drive at Convent Drive, because it blocks incoming drivers' view of the pedestrian crossing to the right.

**Response from the Office of Research Services:** Contract negotiations are under way for the canopy to be taken down and for related road repairs to be made. Work will include removal of the canopy, two guard houses and light pole and fixtures as well as repair of the sidewalk and road, and re-asphalting the road. Most of the work is scheduled to be done over weekends to minimize closure and inconvenience to employees, but there may be times when the road or lanes may close while work is ongoing. As soon as we get a timetable, we will be notifying all employees.

**Feedback:** Bldg. 31 really seems to be showing its age. The windows don't work, the escalators are a joke, the heating and cooling is spotty at best. The exterior is dirty and simply ugly. Some halls look nice but others look horrid. Some bathrooms are spiffy while others [are not]. Are there any plans to refurbish "old faithful" from top to bottom? That would seem to make more sense than doing it ad hoc.

**Reply from the Division of Facilities Planning, Office of Research Facilities:** Bldg. 31 was constructed in phases over a 6-year period during the 1960s and completed in 1968. The 40-plus-year-old complex is an aged facility with most of its infrastructure systems having outlived their expected service life. The Division of Facilities Planning has recently initiated a comprehensive facility evaluation for Bldg. 31 that will provide a detailed assessment of the building's condition along with options for its renovation or replacement. This study is intend-

ed to provide NIH with background information needed to determine what to do with the facility in the future. In the meantime, ORF continues to invest in Bldg. 31 through ongoing maintenance, repairs to the aging systems and improvements to enhance safety and accessibility. Improvements can be recognized by the recent bathroom upgrades throughout the building, which improve accessibility for people with disabilities; the new fire alarm system for improved life safety; and the soon-to-be constructed C-wing stair tower that will be located next to the C-wing elevators, and which will improve fire egress from the 6th floor conference center and from B- and C-wing offices.

The Bldg. 31 Study is being jointly managed by Susan Cantilli of DFP and Eleanor Demasco of the Construction Management Branch, ORF Division of Property Management. Results from the study are expected in spring 2008. In the meantime, if you have any questions about the progress of the study, feel free to email Cantilli, [pfiffnes@mail.nih.gov](mailto:pfiffnes@mail.nih.gov), or Demasco, [demasco@mail.nih.gov](mailto:demasco@mail.nih.gov).



### Raccoon Family Gets Equal 'Billing'

*A couple of raccoons were spotted across from Bldg. 1 on a recent evening and a quick-thinking photographer suggested they "might deserve equal billing (ha ha) to the geese," whose pictures the Record has published in past issues. A brown fox has also been spotted patrolling the wooded buffer along Cedar Ln. If you chance across the fox and snap a photo of it, please forward to us.*

PHOTO: ELEANOR HOFF

# milestones

## ORS Mail Clerk Leon Retires

Fernando L. Leon, Jr., retired on Aug. 3 after 42 years of service at NIH. He was with the ORS Division of Mail and Courier Services during his entire career and spent all but 2 of those years working in the mailroom in Bldg. 31. During the 2 years away, he helped establish mail services for the Neuroscience Center when it opened.

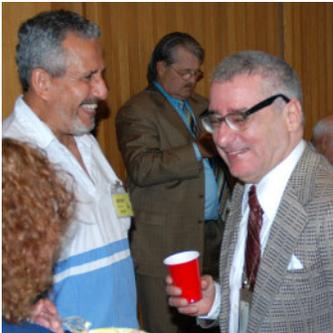
Leon—most people called him by his last name—came to NIH at age 18 in June 1965 as a high school graduate of the Kennedy Institute in Washington, D.C. He believed he had the best job in the world and every day he looked forward to working with the best people in the world. He was proud to serve the research community at NIH.

Leon can reflect on a time when there were no ZIP plus 4s, no mail stop codes, no computers and he located people the best way he could. With the technology now in place, he says it is much easier to locate any employee at NIH and get mail to him or her quickly.

He has been recognized numerous times for outstanding performance. His most notable awards include a Sustained High Quality of Work Performance Award in 1976, a Special Achievement Award in 1978, the Outstanding PHS Employee with a Disability Award in 1994, the NIH Director's Award in 2002 and the NIH Merit Award in 2007.

In retirement, Leon is looking forward to the Dallas Cowboys winning another Super Bowl, relaxation, spending more time with his family and generally enjoying life. He also plans to add to his already enormous music collection by visiting music stores and acquiring vintage vinyl records to burn onto CDs.

Everyone will miss Leon's patented greeting, which is a big smile, a wave and a loud, "Hey!"



*Fernando Leon (r) enjoys the company of coworkers at Aug. 10 retirement party.*



## NINDS Mourns Retired Scientist Klatzo

By Shannon E. Garnett

Dr. Igor Klatzo, a retired senior scientist in the NINDS Stroke Branch, died on May 5 of metastatic prostate cancer and congestive heart failure. He was 91.

Klatzo, who retired in 1994 with 38 years of service, began his NINDS career in 1956 as head of the clinical neuropathology section of the Surgical Neurology Branch. Throughout his tenure he held many

positions within the institute, including chief of the Laboratory of Neuropathology and Neuroanatomical Sciences, and senior scientist and head of the section of cerebrovascular pathophysiology in the Stroke Branch.

Klatzo gained international recognition for his extensive work in the areas of blood-brain barrier disruption, edema and other pathophysiological mechanisms associated with ischemic or traumatic brain injury. In fact, he was a pioneer in the field of brain edema, having defined two new classifications: vasogenic and cytotoxic.

In the early 1970s, Klatzo helped establish a basic neuroscience initiative within the NIH intramural program to study brain ischemia. He also developed animal models of brain ischemia and was the first person at NIH to conduct research in this area.

"He was one of the first to observe that short-term ischemia protects against later, more severe, ischemia, a phenomenon that underlies ischemic tolerance," said Dr. John Hallenbeck, chief of the Stroke Branch, NINDS.

Klatzo was born in St. Petersburg, Russia, in 1916. From age 1, he was raised and educated in eastern Poland. In 1939, before World War II, he completed medical studies at King Stefan Batory University in Vilnius, Lithuania (formerly part of Poland). During the war, he served as a physician in the Polish underground (Home Army) directed from London by the Polish government-in-exile. Shortly after the war, he spent a few years with Drs. Cecile and Oskar Vogt at the Brain Research Institute in Neustadt, Black Forest, Germany. Klatzo earned his medical degree from the University of Freiburg, Germany, in 1947, and his master of science degree (*summa cum laude*) from McGill University in Montreal, Canada, in 1952.

"He was a creative and intuitive researcher who had a great lust for life," said Hallenbeck.

Among his professional accomplishments are numerous publications dating back to 1952 and many awards and honors, including the Nicholas Copernicus Medal from the Polish Academy of Sciences in 1990, and an honorary doctorate degree from the University of Poznan, Poland, in 1993. He also served as co-editor of several books including *Brain Edema*, *Neurotransmitters in Cerebral Coma and Stroke*, and *Maturation Phenomenon in Cerebral Ischemia*.

In retirement, Klatzo continued his research by collaborating with scientists—both nationally and internationally—including Drs. Francesco Orzi of Italy, and Nicholas Bazan and Myron Ginsberg of the U.S. He also wrote a biography of the Vogts, the founders of neuroscience in Germany, titled *Cecile and Oskar Vogt: The Visionaries of Modern Neuroscience* (2004).

According to Dr. Maria Spatz—retired chief of the NINDS section of neurocytobiology and Klatzo's longtime friend and colleague—Klatzo was often invited to speak at international meetings and conferences after he retired, and he continued to enjoy his life-long hobbies of world travel, sports and photography.

Survivors include his children Marie Louisa "Masha" Treusch-Pelzer of Marine City, Mich., and Michael Klatzo of Mount Pleasant, S.C.

## Sullivan Retires From Cancer Imaging Program

Dr. Daniel C. Sullivan recently left NCI's Cancer Imaging Program and retired from the federal government to work with Duke University and the Radiological Society of North America.



Coincidentally, at the same time, NCI's Cancer Imaging Program (CIP) celebrated its 10<sup>th</sup> anniversary. Sullivan's move means that he and his wife can enjoy their grandchildren in North Carolina. Sullivan says it is about the only place to which his wife Cathy would move.

At a party given in his and CIP's honor, Sullivan said, "For these past 10 years I feel like we've had a wonderful journey together. And I am enormously grateful for all the help, support and collaboration I've received from my family, friends and colleagues here." He was honored with a retirement party June 12. Nancy Pursell, CIP administrative program assistant, summed it up when she said "I've had a great boss for all these years."

Sullivan reflected on the past 10 years at a retreat in May. The NCI leadership proposed a Diagnostic Imaging Program in 1995. It began with a series of imaging sciences working group meetings, including one plotting the future for *in vivo* molecular imaging development and chaired by Dr. Elias Zerhouni, then chair of the radiology department at Johns Hopkins and a member of the NCI board of scientific advisors.

With the realization that the program's mission was broader than diagnosis, the name was changed to the Biomedical Imaging Program in 1999. When the National Institute of Biomedical Imaging and Bioengineering was created, the confusion of names prompted another name change, this time to the Cancer Imaging Program.

Under Sullivan, the program grew to four branches; grant-funding managed by CIP went from under \$50 million per year in 1995 to about \$180 million in 2006. Research areas include nuclear medicine, optical imaging, magnetic resonance imaging, computed tomography and ultrasound imaging.

## Ray Named NCI Deputy Director

Lawrence J. Ray has joined the National Cancer Institute as deputy director for management and executive officer. Ray, who worked at NCI for 14 years earlier in his career, will serve as the institute's chief operating officer, overseeing administrative management of NCI programs.



Prior to joining NCI, he served for 4 years as vice president for research operations at Beth Israel Deaconess Medical Center in Boston. Previously, he was vice president of clinical program development at Dana-Farber/Partners CancerCare and program administrator for clinical sciences at Dana-Farber Harvard Cancer Center.

Earlier in his career, Ray spent 26 years in federal service. At NCI, he was chief administrative officer of the Division of Extramural Activities; coordinator of patent licensing and collaborative research and development agreements for the institute; chief administrative officer of the Division of Cancer Treatment and deputy associate NCI director, responsible for all aspects of administrative management.

Ray earned his B.A. and M.A. degrees from the University of Kentucky. He also earned a J.D. from Catholic University. He is a member of the Pennsylvania and District of Columbia bars.

## NICHD's O'Connor Retires

*NICHD's Catherine O'Connor, a senior biomedical research program assistant in the Office of the Scientific Director, recently retired after 24 years at NIH. During her career, she worked with three NICHD scientific directors: Dr. Arthur Levine (1987-1998), Dr. Igor Dawid (1998-2000) and Dr. Owen Rennert (2000-2007). O'Connor began working at NIH in NCI with Dr. Peter Greenwald in the Division of Cancer Prevention and Control, and Lawrence Ray, Division of Extramural Activities. In 1987, she joined NICHD in the Office of the Scientific Director. Before coming to NIH, she worked for the Department of State for 10 years, which included a Foreign Service assignment in Bonn, Germany, while serving as secretary to the American ambassador from 1966 to 1968.*



## Remington To Direct NIGMS Computational Biology

Dr. Karin Remington, a leader in genomics research and the development of computational tools, is new director of the NIGMS Center for Bioinformatics and Computational Biology (CBCB).



She will oversee more than 250 research and training grants totaling about \$92 million to support projects that join biology with computer sciences, engineering, mathematics and physics. Research activities range from software development to modeling and simulation, computational genomics, database design and high-throughput data.

“To take advantage of all the data being generated by today’s biological scientists, we need to develop the tools and methods that synthesize this information into new understanding of basic biology and, ultimately, human health,” said NIGMS director Dr. Jeremy Berg. “Karin Remington has the skills and vision to contribute greatly to these endeavors.”

Existing interdisciplinary programs under CBCB include the Models of Infectious Disease Agent Study, which builds computer models to improve the detection, control and prevention of emerging infectious diseases; the National Centers for Systems Biology, which focus on the systems-level analysis of biological phenomena; and the National Centers for Biomedical Computing, an NIH Roadmap for Medical Research initiative to develop and implement a universal computing infrastructure for the biomedical research community. CBCB also leads NIH’s Biomedical Information Science and Technology Initiative and partners with the National Science Foundation to support research and training in mathematical biology.

“Computational biology faces the challenge of bringing together different disciplines in effective and energizing ways,” said Remington. “With its cross-cutting nature, CBCB has the ability to coordinate and foster this interdisciplinary synergy.”

Before joining NIH, she served as project manager for a large-scale effort supported by NSF to construct ecological data collection facilities across the United States and Puerto Rico. Earlier, at Celera Genomics, she applied her training as a computational scientist to develop mathematical methods and computation leading to the completed sequences of the fruit fly, human

and mouse genomes. While working as vice president of bioinformatics research at the Venter Institute, Remington spearheaded a traveling laboratory-based educational program for public school students in Washington, D.C.

“The idea was to get middle school students, especially ones from underrepresented backgrounds, excited about the life sciences before they decided it wasn’t cool or that it was unobtainable,” she said.

With her interest in fostering the next generation of researchers, Remington said she hopes to contribute to ongoing NIGMS efforts that encourage students to pursue scientific careers. Her enthusiasm has already sparked interest in one youngster, her 9-year-old daughter Maria, who for a class project dressed up as genomics pioneer and former NIH scientist Dr. Craig Venter.

Remington graduated *magna cum laude* in 1985 from the College of St. Benedict/St. John’s University in her home state of Minnesota and in 1991 received a doctorate in mathematics from the University of Kentucky. She completed postdoctoral work at the University of Minnesota and Oak Ridge National Laboratory. She is a member of numerous professional societies including the American Association for the Advancement of Science and the American Association of University Women.

## NHLBI’s Ganguly Retires

After 20 years of federal service, Dr. Pan Ganguly is retiring as leader of NHLBI’s hemostasis and thrombosis extramural program in the Division of Blood Diseases and Resources.

Throughout his career, he has helped identify promising new research directions in thrombosis and hemostasis and was instrumental in building a strong investigator-initiated grant program. Research fostered under his leadership led to advances in such rare diseases as ITP (idiopathic thrombocytopenic purpura), HHT (hereditary hemorrhagic telangiectasia), APL (antiphospholipid syndrome) and TTP (thrombotic thrombocytopenic purpura).

Few researchers were working on the difficult rare disease of TTP until Ganguly organized a workshop to bring together basic and clinical researchers to tackle the problem. As a result of the workshop, the gene and protein for TTP were identified, a mouse model was developed and researchers have since cloned a recombinant protein. More recently, he was a member of the planning committee for the recent surgeon general’s workshop on deep vein thrombosis.

“From quantum physics to biochemistry, and from electron microscopy to coagulation, he always remained on the cutting edge of science, providing the highest level of expertise and guidance,” said Dr. Charles Peterson, director, Division of Blood Diseases and Resources. “His integrity, scientific knowledge, comprehension of the NIH system and dedication to service have earned the respect of his peers at NIH and in the wider scientific community.”



### What We Know (and Don't Know) About Vitamin D

A new report on vitamin D and bone health looks at current scientific evidence and identifies its strengths, as well as our gaps in knowledge. Sponsored by the NIH Office of Dietary Supplements, this independent, scientific review is timely, researchers said, because there have been mixed messages on the benefits and harms of vitamin D intake. Researchers have long known that the vitamin has an impact on bone health, but are uncertain as to how much of it is needed to achieve optimal bone health and whether there are differences in the relationship of vitamin D to bone health in people of all ages and life stages. For example, much evidence exists for the benefits of taking vitamin D supplements for postmenopausal women and men over 60, but less is known about the consequences of low vitamin D on pregnant and lactating women. The report served as a framework for the conference, Vitamin D and Health in the 21<sup>st</sup> Century: an Update, held on campus Sept. 5 and 6.

#### Reading Vaccines for Future Bird Flu Strains

How's this for proactive? According to NIAID researchers, it may be possible to prepare vaccines and therapeutics that target predicted mutant strains of H5N1 influenza virus before they evolve naturally. Reported in an August issue of *Science*, the advance was made possible by creating mutations in the region of the H5N1 hemagglutinin protein that directs the virus to bird or human cells and eliciting antibodies to it. Success of this finding hinges on anticipating and predicting the mutations that would help the virus spread from person to person, but the research will allow scientists to start considering the designs of new vaccines that could help contain a pandemic early on.

#### New Insights into UV Protection

Researchers in an NCI-led study have identified a protein that plays an important role in the increase of protective skin pigmentation after exposure to ultraviolet radiation. The protein, SOX9, is known to participate in embryo development and to be expressed in many adult tissues. The research confirms its importance to adult skin cells and is the first study to show that a protein in the SOX family can be regulat-

ed by UV radiation, which can cause many types of damage to the skin and has been associated with a process that leads to many types of skin cancers. These findings, published in *Proceedings of the National Academy of Sciences*, will give scientists insight into the mechanism the human body uses to protect itself from UV rays, as well as into the cellular pathways that might contribute to the origins and spread of melanoma.

#### Depression and Fighting Emotions

New research supported in part by NIMH shows that brain imaging can reveal a breakdown of normal emotional processing in people with clinical depression. In the study, published in the *Journal of Neuroscience*, researchers found that efforts by depressed patients to suppress their feelings when viewing emotionally negative images enhanced activity in several areas of the brain, including the amygdala, which is known to play a role in generating emotion. Such activity then impaired the ability of these individuals to suppress negative emotional states. Researchers said these findings underscore the importance of emotional regulation deficits in depression, while also suggesting targets for therapeutic intervention.

#### Quick Test for Oral Cancer

Finally, in the coming years it should be a lot easier to learn whether an unusual mouth sore is cancerous. NIDCR-supported scientists have engineered the first fully automated, all-in-one test—or “lab on a chip”—that can be programmed to probe cells brushed from the mouth for a common sign of oral cancer. The portable device can yield results in less than 10 minutes, a big improvement over the current testing method of a biopsy and a several-day wait. The report on the new test was published, fittingly, in the journal, *Lab on a Chip*.

—compiled by Sarah Schmelling

*There have been mixed messages on the benefits and harms of vitamin D intake.*



### 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.

### Volunteers Needed for Anthrax Vaccine Study

NICHD is seeking healthy men and women, ages 18-45, to participate in an investigational anthrax vaccine study conducted at NIH. The vaccine is expected to be as effective as the licensed anthrax vaccine (AVA) but is purer and should be safer. Medical tests will determine eligibility. Compensation will be provided. Call 1-877-444-9980 (TTY 1-866-411-1010). Refer to study 04-CH-0283.

### Neck Pain Study Needs Volunteers

The Clinical Center's rehabilitation medicine department is seeking individuals with neck pain and healthy volunteers between the ages of 18-65 to participate in a natural history study of neck pain (02-CC-0245). Participation involves 4 monthly visits (about 1 hour each) for a comprehensive cervical musculoskeletal examination. No compensation is provided. Contact neckpainstudy@gmail.com or (301) 451-7514.

### Female Volunteers Wanted in Study of Eating, Emotion

Women are needed for a study on eating and emotions. Volunteers must be ages 18 and up, non-smoking and without major medical or mental health problems. Participation requires a single 1½-hour visit to the Uniformed Services University of the Health Sciences in Bethesda. Participants will be asked to watch a film segment, eat and fill out questionnaires. Blood pressure, heart rate and body composition will be assessed. Participants will receive compensation and feedback on body composition. For more information, leave a message for Robyn Osborn at (301) 295-9664 or email eatingstudy@yahoo.com.



*NINR director Dr. Patricia Grady (second from r) greets new council members (from l) Dr. King Udall, Dr. Kevin Frick and Dr. Jean McSweeney.*

### Three Appointed to NINR Council

Three new members were recently appointed to the National Advisory Council for Nursing Research. They are:

Dr. Jean McSweeney, professor in the department of nursing science at the University of Arkansas for Medical Sciences. An active member of the American Heart Association, Southern Nursing Research Society and the American Academy of Nursing, McSweeney conducts a program of research that includes the study of myocardial infarction in women, prodromal symptoms of coronary heart disease and cardiac rehabilitation.

Dr. Kevin Frick, health economist and associate professor at Johns Hopkins Bloomberg School of Public Health. Using his knowledge of economic analysis, he is engaged in interdisciplinary collaborations to conduct cost-effectiveness studies that clarify economic decision-making and inform health policy-makers.

Dr. King Udall, assistant professor in family and community medicine at the University of Utah School of Medicine. A member of Intermountain Healthcare, he has been involved in family practice and preventive medicine in Salt Lake City for more than 31 years.

*Name That Spot, Part 2*  
**Where Have You Seen  
 These Campus Icons?**

PHOTOS: BELLE WARING

This is the second portion of our two-part contest (for part one, see *NIH Record*, Aug. 24, 2007). Tell us where on campus you find these spots and email your answers for both parts of the contest to [warinbg@od.nih.gov](mailto:warinbg@od.nih.gov) by Sept. 17. The entrant with the most correct answers wins a prize. In case of tie, first correct entry wins. Good luck!

