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Very Good Services, More Needed

NIH Child Care Program Assessed

By Sarah Schmelling

A new assessment shows the NIH Child Care Services Program is successful in several ways, but could greatly benefit from more slots for kids in child care centers to alleviate an unusually long waiting list. To stay competitive, NIH should also have more family-friendly benefits like backup child care and paid time off or short-term disability for maternity leave, the research suggested.

Dr. Michael Kirsch, vice president of the company that conducted the assessment, IMPAQ International, offered these and other findings at a recent NIH child care board meeting here.

The study's objectives, he explained, were to determine the return on investment for NIH child care services, to benchmark NIH's program against 12 other organizations, to determine future needs and to develop recommendations for improvements. The firm reviewed surveys, interviewed NIH stakeholders, administered a web-based survey to members of the NIH parenting listserv, analyzed postings on that email list and compared NIH's program to those of outside organizations.

The stakeholders believe that child care services "are crucial in promoting the overall mission of NIH," Kirsch said. They think additional child care programs would help

SEE CHILD CARE, PAGE 6



History Office Welcomes New Director

By Belle Waring

In Dr. Robert Martensen's life there are rivers within rivers, a confluence of the humanities—art, philosophy, history—with the practice of medicine.

Now far from triage and trauma resuscitation, he's reflecting on the experience of illness and his years in the ER, which is where, he says, "the rubber meets the road."

By the time Martensen came to Bethesda to head the Office of NIH History in October 2007, he had not only earned degrees from Harvard (B.A.), Dartmouth (M.D.), and the University of California, San Francisco (Ph.D.), but also he had practiced emergency medicine for 25 years; held several university appointments, including chair of medical humanities

SEE MARTENSEN, PAGE 4



Administrative Fellow Bridget Meggett

Program Trains Next Generation of Administrators

By Jassé Tucker

The hall is filled with the sounds of shuffling feet and papers being passed. It is the end of another new employee orientation session at NIH. But this is not just any group of first-time employees; there is a special feeling of excitement and prestige among these newcomers.

SEE ADMIN FELLOWS, PAGE 8



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briefs

STEP Forum on Introvert/Extrovert Mix

The staff training in extramural programs (STEP) committee will present a Workplace Strategies forum on the topic, "Introverts/Extroverts: Some Assembly Required—Workplace Strategies for Maximizing Individual and Team Performance," on Thursday, Mar. 13 from 8:30 a.m. to 12:30 p.m. in Natcher Bldg., Rms. E1/E2.

Are we pre-wired? How do biological differences and environment explain how we behave and how we interact with others? Find out what current research tells us about introverted and extroverted personality types. Experts will present techniques for improving communication between introverts and extroverts that draw out the strengths of people of both types to enhance individual performance and capitalize on the diversity of personalities we encounter in group activities.

NIH Golf Association Seeks New Members

The NIH Golf Association (18-hole competitive coed league) is looking for new members for the 2008 season. It currently has 7 teams of up to 25+ players each and schedules 8 stroke-play outings in the spring and summer. Stroke play is followed by up to 5 match-play outings. All outings are mid-week at local courses in Virginia and Maryland and play is optional. The NIHGA caps the year off in October with an end-of-year outing with golf/cart and dinner for all members and their guests. Prizes and trophies are awarded and handicaps are maintained from 0-40, so all golfers are welcome. For more information contact Howard Somers at somersh@mail.nlm.nih.gov, Visit www.recgov.org/nihga/ for details on the upcoming schedule and other news.

Symposia on Targeted Anticancer Therapies

The International Symposia on Targeted Anticancer Therapies (TAT) is being held in Bethesda, Mar. 20-22; register by Mar. 8 at www.nddo.org/page_include_tat2008.shtml. If you wish to submit a late-breaking abstract, contact Dr. Marinus Lobbezoo at lobbezoo@mccm.nl and attach your complete abstract in Word format. All accepted abstracts will be published in a supplement to *Annals of Oncology*, the official journal of the European Society for Medical Oncology. The scientific program of TAT 2008 will cover many types of targets and new drugs in early-phase clinical development and will focus on clinical and translational research. The program will also cover clinical trials of combinations of targeted agents that are being

conducted in increasing numbers. TAT 2008 will provide a glimpse of the future of cancer therapy.

R&W Has Tickets to Circus

Ringling Bros. and Barnum & Bailey and R&W invite children of all ages to see the 137th edition of The Greatest Show on Earth! This is the 11th year R&W has hosted "premiere night" as a fundraiser for the NIH Charities. It takes place Wednesday, Mar. 26 at 7 p.m., with a pre-show starting at 6 p.m. Tickets are on sale now at the R&W activities desk in Bldg. 31, Rm. B1W30 or by calling (301) 496-4600. Ticket orders can also be placed at any R&W store. Tickets are \$70 (reg. \$95) Circus Celebrity—front row interactive seats; \$45 (reg. \$65) front row seats; \$35 (reg. \$50) first 5-10 rows; and \$20 (reg. \$28) 100 level.



Fogarty Raises Banners for 40th Anniversary

Banners were recently hung across campus signaling the kickoff of the Fogarty International Center's 40th anniversary celebrations. Fogarty is planning a series of events throughout the year including presentations by a roster of visiting scholars, a symposium to examine how information, communication and technology can improve global health research, and birthday cake and tours of Stone House for NIH staff. Details will be announced soon.

PHOTO: JEFF GRAY

*New Stairwell Coming***Upgrades Under Way for Bldg. 31's C Wing**

If you've ever been in the conference rooms on the 6th floor of Bldg. 31 during a fire drill, you've probably noticed how congested an emergency evacuation can get and how long it takes to exit the building. Stairwells are clogged and elevators are off-limits. It's not a safe situation.

The congestion is due in part to a building outliving the rules that govern its safety.

The C wing, where the conference rooms are located, was completed in 1968. At the time, the building was well within the fire code. However, under today's life safety standards, the building does not have sufficient evacuation exits for the number of occupants it supports.

The problem stems mainly from the unique nature of the C wing. As NIH Fire Marshal J.P. McCabe explains, "Building conference facilities on the top floor of what is technically considered a high rise building is unique." Apparently, when the C wing was designed, there was a desire to build large conference rooms on the top floor at the north and south ends to accommodate expansive views and allow the sizable rooms to exist without the obstruction of support columns. Additional columns would have been necessary if the facilities were located on a lower level of the building.

To address this and other issues in 31C, NIH initiated a major Life Safety Improvement Project in two phases. In the late 1990s, phase I included: the addition of automatic sprinkler protection in the C wing; a continuous 2-hour fire barrier (fire doors) separating the C wing from the B wing; a decrease in the maximum allowable number of occupants in the conference rooms; and an additional circulating corridor for the large conference rooms to improve emergency egress.

In February, the Office of Research Facilities and the Office of Research Services began phase II. This includes an additional exterior but enclosed fire stairwell to improve emergency evacuation. The added stairwell is considered "mandatory for the continued use of the conference facilities," McCabe said.

Although noise from construction and other inconveniences might cause some to wish the project never started, there are other benefits in addition to improving safety and reducing fire hazard. For example, unlike other stairwells in the C wing, the new stairwell will exit directly to the outside. Adding the stairwell to the exterior of the building won't take away any existing office space that might have been claimed had the stairwell been built internally. In addition, all floors below the 6th will have another exit. In the long term, the potential exists to add two more elevators and increased



Panoramic images of the Bldg. 31C and B wings show area before construction (top) and after.



mechanical and electrical capacity to serve future needs. The A and B wings will not be left out; installation of a new, state-of-the-art fire alarm system is in the final stages for all of 31. Eventually, 31A and B will also have complete, automatic sprinkler protection.

Over the years, there have been discussions about tearing down Bldg. 31 instead of undertaking major improvements. However, in tight budgetary times, funds are not available to construct a new, replacement facility. A major study under way by the Office of Research Facilities will identify a long-term strategy for extending the use of the building.

Facts, Figures on 31C Fire Stairwell Extension

- Cost: \$3.6 million for phase II
- Completion Date: Fall 2008
- Size: Length of new extension will be 11 meters (approximately 36 feet).
- Location: North side of the C wing, close to the existing elevators servicing the B and C wing corridors.
- Elevators will remain in service throughout the construction.
- Noise will be most noticeable when pilings are driven into the ground in the initial weeks of excavation and during a later phase when the walls of the building will be opened up to allow for expansion.
- Regular updates will be provided to executive officers, administrative staff and events management/conference services in Bldg. 31, including proactive alerts when noise will be excessive.
- Events management staff are working with customers to minimize the disruption when booking conference space.
- For technical questions about the Bldg. 31C Life Safety Improvement Project, contact the ORS Division of the Fire Marshal at (301) 496-0487.
- For general questions about the project, contact the ORS Information Line at orsinfo@mail.nih.gov or (301) 594-6677.

MARTENSEN

CONTINUED FROM PAGE 1

and philosophy of medicine; and received a Guggenheim fellowship to support a book, *The Brain Takes Shape: An Early History* (Oxford; 2004).

His latest work, now in press, is *A Life Worth Living: A Doctor's Reflections on Illness in a High-Tech Era*. Aimed at general readers, the book “explores what it's like to be very ill in the United States today,” he says. “It draws on my experience as an emergency physician and also my experience as a historian of medicine and somebody who's taught bioethics...to try to illuminate some of the strengths and limitations of current approaches to serious disease.”

Martensen's first immersion in those approaches was during medical residencies in San Francisco: “ERs are inclusive. You're open to everybody, 24 hours a day...If there's a multiple trauma from people stabbing and shooting each other, you take care of the person who did the shooting and you take care of the person who got shot.”

This inclusiveness, he says, impressed him: “[The ER] gives one an experience, vertically, of a community in a way most people don't have any more. I've had patients who were fished out of dumpsters, alive, but in serious trouble. And then you have somebody brought in and their driver has double-parked the limo.”

While NIH has its share of M.D./Ph.D.s, Martensen's doctorate in the history of health sciences places him in the small cohort of physicians who are also medical historians. This is important, since history is more than a timeline: it's a way of thinking about how patterns connect and form us, and how we contribute to them, too.

In an ER, changes are tracked minute to minute, yet in that narrow timescale, the context—life/death, rich/poor, shooter/shootee—doesn't get much larger. Questions that occurred to Martensen during emergency room shifts are ones he carried into his study of history.

“We saw lots of people from East Asia, South Asia, as well as people from all over the world... That got me interested in people's ideas about how their minds and bodies operated. That's a subject I explored in graduate school.”

Other interests include the origins of neuroscience, the development of nuclear medicine and the scientific transformation of medicine during the Progressive Era (a period of reform from the 1890s through the 1920s).

Why should scientists and physicians worry about history? Take a look at the history of research pol-

icy, he says, or at how “findings in one area of science move around; they don't observe institute walls, they don't stay in silos...I don't know how better to do that kind of illumination than through historical analysis.”

Because Martensen is a vivid storyteller, when he describes how the biomedical-industrial complex affects research, or how mathematical algorithms are transforming biology, history comes alive. As for education, he recalls how the great William Osler taught his medical students that “the patient is the text.” Now, medical education has changed so much that “we spend relatively little time with the patient...relying instead on lab profiles, imaging studies and decision trees.”

After World War II, “many, many accomplished physician-investigators were developed out of NIH programs, [people who] led the NIH and medical schools...So there's a great concern: how do we, American society, replicate physician-investigators?” Martensen hopes to develop a conference on the topic. Other possibilities include a conference on science and the public imagination; a Darwin centenary; and a symposium on genes, behavior and history.

The history office might not be as busy as an ER, but it promises to be lively under its new director. 



NIGMS Employees Collaborate on Artwork

Scientific collaboration is hot these days. But a collaboration of a different sort—an artistic one—recently took shape between two NIGMS staff members. Dr. Clifton Poodry, director of the Division of Minority Opportunities in Research, and Dr. Laurie Tompkins, a program director in the Division of Genetics and Developmental Biology, combined their artistic talents in a wood and glass piece called “Dark Energy.” The piece appeared in a show in St. Paul, Minn., sponsored by the American Association of Woodturners and the International Society of Glass Beadmakers. Poodry is a woodturner and Tompkins works in fused glass. Both scientists have displayed their art at craft fairs and other venues, but this is the first time they have created a piece together.



By day, Melvin Carter is a committee management specialist at NIAAA; by night he is a well-respected whistleblower in D.C.

NIH'er Scores Big with D.C. Basketball

To his colleagues, Melvin Carter is the friendly, down-to-earth committee management specialist at NIAAA. To insiders in D.C.'s middle-school athletic community, he is a respected up-and-coming coach, part of an extended network that makes up the city's legendary hoops scene. And to his players on St. Gabriel's seventh and eighth grade boys' basketball team, he's their play-calling, whistle-blowing, eyes-in-the-back-of-his-head, sees-everything Coach Carter.

That's a good thing, because Carter represents their first taste of the competitive Metro area basketball scene. Each week, he prepares the team to go up against the region's best competition. A recent highlight was the first annual Gonzaga College High School Holiday Invitational Basketball Tournament. Attracting teams from D.C., Maryland and Virginia, the event is one of the largest for this age group held in the mid-Atlantic.

Participating in such tourneys, Carter knows that he is watching the superstars of the future. "The competition is intense," he says. "Most of the players on these teams go on to play high school basketball—and many will become college stars."

A District native himself, Carter has helped many aspiring players. Following high school, he went on to play for the U.S. Air Force team based in Sardinia, which competes in the professional league in Italy. He understands the dedication required to reach the upper echelons of the sport. Upon returning to Washington, he brought his skills and experience to coaching, with stints at St. Anthony's middle school and the Metropolitan Police Boys Club.

"It's a privilege for me to work with these talented young athletes," he says, "and to remind them of the right way to conduct themselves, both on and off the court."

Carter shares his dedication and passion for the game beyond his own team. Each spring, he runs a basketball clinic for middle-school youth from all over the region. The program combines basketball fundamentals, guest speakers and league play. The clinic is held on four consecutive Saturday afternoons at a downtown gym.

Participants receive T-shirts, gold medals and best of all, instruction and advice from such basketball luminaries as DeMatha's Mike Jones, O'Connell's Joe Wootten and Gonzaga's Steve Turner. For more information about the Mel Carter Basketball Clinic, call (202) 635-8082. 📞

Seeds for Earth Day 2008 Sown

There are only 9 months of shopping left until Christmas 2008. The NIH Environmental Management System (NEMS) hopes the gifts you buy for the next holiday season will be energy-efficient; free of lead, phthalates and polybrominated diphenyl ethers; contain 100 percent post-consumer recycled materials and be made locally—in other words, sustainable.

That brings to mind another date on the calendar—NIH's annual Earth Day Celebration, which will be held this year on Thursday, Apr. 24 in conjunction with Take Your Child to Work Day. NEMS would like to make that event even bigger and better (greener) than last year's celebration, which broke previous attendance records. Help ensure success by volunteering your green ideas, time and talents to the Earth Day planning committee. Sign up at the NIH Greener web site: www.nems.nih.gov.

One of the most popular Earth Day traditions is the "Name IT Contest" to identify a mystery plant that has something to do with NIH's mission and the environment. Each year, the winners have received great prizes—like tickets to Strathmore or a catered lunch for the whole office. Seeds for this year's mystery plant were sown in early January and are now sprouting. Photos of IT's seeds and one-week-old seedling are below. Keep your eyes on the *NIH Record* for more clues, photos and contest entry instructions.



Above:
The seeds of the mystery plant in this year's Name IT Contest.



Right:
A seedling of this year's mystery plant erupts from its potting place. Plants chosen for the contest contribute in some way to the NIH mission.

CHILD CARE

CONTINUED FROM PAGE 1

attract new talent and retain employees and that the current program keeps NIH competitive with universities and other organizations vying for the same workers. Stakeholders believe challenges include the high cost of services, a limited number of facilities, the long waiting list for child care slots and a lack of employee awareness of programs and services available to them.

Parents added more to the assessment. Kirsch and his colleagues learned that parents with children at NIH centers say the program, to a great extent, helps them accrue fewer absences and experience less stress. Most respondents also rated the quality of NIH programs as “better or much better than other organizations.”

What areas do they find lacking? According to the survey, 76 percent of the parents wanted to see additional child care centers with more slots for children. Meanwhile, 64 percent of parents surveyed want to see opportunities for more flexible work schedules.

The benchmarking study compared NIH’s child care services to those of six federal agencies, four universities and two companies in the private sector. Areas in which NIH ranks higher than average include its number of child care centers: only one other organization had more than NIH’s three. NIH also has a higher number of slots and serves a broader age-range of children than many others. NIH’s programs rank about the same as the other organizations in several areas, such as the cost of services.

In what ways does NIH rank lower? First and foremost with the number of people on the waitlist. NIH has 1,105 employees waiting for a slot, while the next highest organization, the CDC, has 400. These employees also have longer to wait: the current average time on the NIH list is more than 1.5 years; most others were less than a year. Five of the other organizations offer backup child care while NIH does not. Unlike NIH, five of them also allow employees to use short-term disability for maternity leave. Two of the benchmarked organizations, Duke University and Fannie Mae, also provide paid time off after childbirth.

Kirsch said the assessment shows that child care services here clearly support the NIH mission and play a key role in the recruitment and retention of staff. NIH appears to be among the better child care programs being offered by the benchmarked organizations, especially in terms

of the number of child care centers and the quality of care.

But NIH, one of the first agencies to offer child care in the 1970s, is no longer “leading edge” in its child care programs, he said, noting that most of the competing organizations offer a similar set of programs, services and resources and are offering expanded benefits to their employees that NIH doesn’t.

Addressing these issues, Kirsch noted, could help NIH stay competitive in recruiting—and keeping—talented employees as quality child care, family-friendly benefits and flexible work schedules become bigger priorities, even requisites, for the modern workforce. ●

Stinchcomb To Lead NCI’s Cancer Statistics Branch

David Stinchcomb is the new chief of the Cancer Statistics Branch in the Surveillance Research Program (SRP) of NCI’s Division of Cancer Control and Population Sciences.

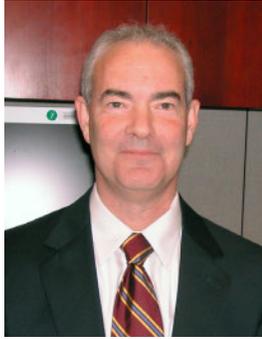


He joined SRP in 2004 as a geographer with extensive experience in computer science. During his tenure here, he has become scientific coordinator and technical lead for the nationally recognized State Cancer Profiles interactive web site. He is the senior surveillance expert on geocoding technology and information systems as well as an expert on issues involving geography, population estimates and socioeconomic data for SEER and other scientific databases.

“Integrating complex data systems from diverse sources is essential for cancer surveillance,” said Dr. Brenda Edwards, associate director of SRP. “Dave’s experience and interest in this area are real assets.”

Before coming to NCI, Stinchcomb worked as a geographer for the Texas department of health. This was a bit of a career change for him, having recently achieved a second master’s degree in geography with emphasis on medical and population geography in order to follow a life-long interest. Previously he held several senior management positions in software development for the computer industry, notably Compaq and Amdahl (Fujitsu). An avid cyclist who pedals to work daily in any kind of weather, he is a member of the Rockville bicycle advisory committee.

Cullen Named NIH Security Chief



William Cullen has joined NIH as the new associate director for security and emergency response in the Office of Research Services. He is responsible for development, coordination and implementation of an NIH-wide security and life-safety program and will oversee six divisions: Police; Personnel Security and Access Control; Emergency Preparedness and Coordination; Physical Security Management; Fire & Rescue Services; and Fire Marshal. Cullen will also be deputy chief security officer for NIH (ORS director Dr. Alfred Johnson is chief security officer).

“We appreciate the expertise Bill brings to the ORS and the NIH,” said Johnson. “We look forward to his valuable insight as the security and life safety programs at the NIH continue to evolve.”

Cullen comes to ORS from the Navy Installations Command, having served as director of operations with responsibility for force protection, security, fire and emergency services and air and port operations for the Navy’s 97 installations worldwide.

He began his Navy career commissioned as an ensign in Newport, R.I., in September 1980. He reported to the *USS Guadalcanal*, where he earned his surface warfare qualification in September 1982 while deployed in the North Atlantic. His naval career spans 27 years.

Prior to his position as director of operations, Cullen reported to the chief of naval operations staff, air warfare division in Washington, D.C.

A native of Northport, N.Y., he received a bachelor of science degree from Manhattan College and a master of science degree from Wake Forest University. His awards include the Legion of Merit, three Meritorious Service Medals and the Navy and Marine Corps Achievement Medal.

Cullen is a designated sub specialist, a European political/military affairs specialist and a Navy strike/interdiction mission commander. During his Navy career, he accumulated 3,000 hours in various aircraft and made 860 landings on aircraft carriers. He is also a graduate of the Navy War College and Armed Forces Staff College.

NIH Recycling Program Updates

NIH has rolled out several new recycling initiatives that will help meet new requirements, increase the recycling rate and reduce solid waste disposal.

There is now a single paper collection container, which replaces the old white office paper and mixed paper boxes. The new container is labeled “All Paper Products.” Acceptable items for recycling include white paper (any color ink), office stationery, copier paper, white and green/white computer paper, newspaper, shredded paper, magazines, envelopes, colored paper, manila folders, Post-it notes, telephone books, kraft paper and all other clean, dry paper. According to new county regulations, no paper products are allowed in regular trash. Look for your closest recycling container.

Plastic recycling at NIH has consisted mainly of beverage containers placed into commingled collection bins. Plastic recycling is now greatly expanded. Products and empty containers labeled with resin codes 1, 2, 3, 4, 5 and 7 are now acceptable. Resin codes can be found on the bottom of plastic containers.

Besides plastic beverage containers, you can now recycle empty plastic food product containers of any shape and size, detergent bottles, food storage containers, plastic food utensils, grocery and retail plastic bags, blister packs, shrink wrap, bubble wrap, trash can liners, produce/newspaper/bread/frozen food bags and food-storage containers. Polystyrene products, resin code 6, are not acceptable. All items must be free of food residue and contamination from hazardous chemicals, radioactive materials or infectious substances—no empty containers that previously contained such substances are accepted. Items must fit into the commingled recycling collection containers.

The separate aluminum can containers are being phased out. Aluminum cans are now to be placed into the commingled containers for recycling.

Paperboard is a recyclable item that is often disposed of as trash. Examples include microwave dinner boxes, Kleenex boxes, paper towel and file folder boxes. Paperboard must be recycled with cardboard. Paperboard and cardboard are collected from building corridors and loading docks.

Want to learn more about how and what to recycle at NIH? The NIH Environmental Management System (NEMS) web site is the best source for information: www.nems.nih.gov.

Do you have ideas on how to improve the recycling program or comments on any environmental issue? Join the NIH Greenserve where employees can post environmental ideas and questions. Visit <https://list.nih.gov/archives/greenserve-l.html> to join.

If you have questions about recycling issues or need recycling containers for your work area, call the ORF Division of Environmental Protection at (301) 496-7990.



ADMIN FELLOWS

CONTINUED FROM PAGE 1

Administrative Fellow Justin Hentges (l) and NIDCR's Tom Murphy look over budget numbers.

PHOTOS: JASSÉ TUCKER

As the crowd shifts into the waiting elevator, a smiling face shines through the human traffic. “Hello, my name is Bridget. I’m an intern in the Administrative Fellows Program [AFP].”

Bridget Meggett, who has a background in human resources from the University of Maryland’s University College, will be serving as a human resource specialist in the NIH Office of the Director. During the course of her 2-year fellowship, she will receive training in all areas of human resources under the guidance of a senior-level mentor.

Meggett is not alone. There are more than 50 administrative fellows spread across NIH—each of them living proof that NIH has started looking for tomorrow’s administrative leaders today.

Over the next 10 years, it is estimated that more than 9,700 employees will qualify for retirement from NIH. To prepare for this “retirement tsunami” and to preserve its strong tradition of administrative excellence, NIH recently created the AFP to help recruit and train the next generation of administrators.

AFP was launched on a pilot basis in spring 2007 under the guidance of Timothy Tosten, executive officer of the Fogarty International Center. “The AFP is a great opportunity for professionals to explore different administrative career fields while gaining invaluable insight into the NIH,” said Tosten, who as AFP chair assists in recruiting talented candidates for internship openings and encouraging experienced NIH employees to serve as mentors.

Specifically, the AFP internship provides on-the-job training, mentoring, rotations and individualized career development plans in several administrative areas. It also identifies an institute or center in which fellows can find a permanent position.

Administrative fellows hail from many different educational and cultural backgrounds, but, according to Tosten, all are united by their thirst to learn and their dedication to the NIH mission.

Justin Hentges, the first administrative fellow for the National Institute of Dental and Craniofacial Research, said, “Overall, I am very pleased with the program. The AFP invites professionals to ensure scientists are able to do their research and help the NIH fulfill its mission.”

His supervisor, NIDCR Executive Officer Tom Murphy, also is positive about the AFP experience. “Everyone who was interviewed was stellar. We would have been happy to pick up any one of the interviewees, but the program allowed us to choose the best fit for what we do.”

Currently, the AFP is planning to take part in recruitment fairs at several local colleges to seek candidates for its next fellowship class. Possible positions for this upcoming round include administrative officer, budget analyst, contract specialist, ethics specialist, grants management specialist, human resources specialist and management analyst. Qualified candidates should have earned at least a master’s degree in an area related to the position being sought or have one year of qualified experience.

For the first time, potential AFP candidates will be offered the chance to tour NIH prior to the interview process. These invited candidates will have the opportunity to attend sessions that will address how the AFP fits within NIH while getting a chance to speak with current members of the first two AFP classes about becoming an administrative leader. To learn more about the AFP, send an email to adminfellows@mail.nih.gov. 

Computer Training Spring 2008 Term Now in Session

The CIT Computer Training Program has begun its spring semester. In order to meet the needs of a diverse scientific community, it offers sessions dealing with Image Processing I & II, Microarray Data, AFNI, MIPAV, "Effective Utilization of the Biowulf Cluster for Bioinformatics," "Bioinformatics Resources for Functional Categorization and Splice Variation Analysis," "Mathematica 6," SPSS topics and many more.

In addition to scientific topics, extramural staff will find a series of grants courses, including a new topic—"Grants Management Spreadsheet." This seminar will cover the Grants Management Standardized Categorical Excel Spreadsheet and its use. The always popular, "Understanding the Grants Process," QVR (Introduction, Intermediate, and Advanced) and QVR Training Profile sessions explain the workings of the system here at NIH. Sessions in ECB Data Administration (Basic and Advanced) and "ECB Early Concurrence Workshop" round out the sessions for grants.

NIH has a diverse user community, so CIT offerings cover many areas. Come see what all the hype is about in Microsoft Office 2007 and Windows Vista. Two new offerings are "Office 2007—What's New" and "Getting to Know Windows Vista." In addition, topics to be given this term include "Basic PC Skills for NIH," "Demystifying the Mac," and "Microsoft Visio Professional 2003 Introduction." There are also sessions of returning favorites including Excel and "BlackBerry Tips and Tricks."

You can obtain full course information, register for spring 2008 classes, join the CIT Training mailing list and check out your transcript or current application status at training.cit.nih.gov. CIT also welcomes the expertise of those willing to teach courses in emerging fields of interest.

Most CIT training courses are free to NIH staff. While employees get first priority for classes, contractors are welcome to attend when space is available, the class is related to their work and they have approval from their NIH supervisor.

If you have questions about the CIT Training Program, call (301) 594-6248 ext. 2 or send email to CITTraining@mail.nih.gov.



Biochemist Dr. Dario Ramirez

PHOTO: STEVE MCCAWE

NIEHS Trainee Gains National Honor, Own Lab

On Mar. 3, NIEHS research fellow Dr. Dario Ramirez began setting up his own lab in the free radical biology and aging department at the Oklahoma Medical Research Foundation (OMRF). Named a "Rising Research Star" by the Presbyterian Health Foundation last December, he is using the \$500,000 that was part of his award to pay for laboratory equipment and other start-up costs as he continues what the foundation described as "ground-breaking research into antioxidant medications."

During his 7 years as a postdoctoral fellow and research fellow, Ramirez honed his skills in the basic chemistry of free radicals under the direction of award-winning NIEHS research chemist Dr. Ron Mason. In his research there, Ramirez expanded the applications of a novel technique for detecting biomolecule-centered radicals, particularly with regard to DNA radicals, that he named immuno-spin trapping. He also published 15 papers, won an impressive list of awards, took full advantage of opportunities to network and kept several lines of research going simultaneously.

Ramirez thinks the production of biomolecule-centered free radicals during the organic response to redox changes and inflammation induced by metabolic and environmental stressors is key to characterizing the molecular mechanisms of a host of conditions, including obesity, asthma, cancer, diabetes and aging. "If we can understand how redox biochemistry is related to inflammation," he reasons, "then we can understand more completely how these diseases progress, find new diagnostic tools and establish new therapies."

Ramirez now lives and works in Oklahoma City, which is home to OMRF. As part of his duties with the foundation, he also holds an adjunct appointment at the University of Oklahoma Health Sciences Center.—Eddy Ball



NIGMS Grantee Honored by Thai Princess

NIGMS grantee Dr. Ram Sasisekharan was among four recipients of the 2007 Princess Chulabhorn Gold Medal Award, bestowed at a ceremony in Bangkok. The award, established in 1987 by the Thai princess, honors "world-renowned" individuals or organizations that have advanced science in developing countries. Sasisekharan, a professor of biological engineering at the Massachusetts Institute of Technology, studies carbohydrates to develop new therapeutic drugs.

Smoking and Gene Expression

It's well known that smoking plays a role in lung cancer development. Now, NCI scientists have shown that smoking also affects the way genes

are expressed—leading to alterations in cell division and regulation of immune response. In fact, according to the study, published in the Feb. 20 issue of *PLoS One*, some of the changes in gene expression persisted in people who had quit smoking many years earlier. These findings are significant, researchers said, because even though we're well aware that smoking is a leading cause of lung cancer worldwide, scientists still don't have a full mechanistic understanding of the effects

of smoking on the cells of the lung. Gaining a better understanding of the genetic alterations that occur with smoking could provide insight into the development of cellular targets for treating—and even preventing—lung cancer.

Insights into Cognitive Decline in Diabetes

Why does diabetes impair cognitive health in humans? A new study conducted by NIA and published in the Feb. 17 issue of *Nature Neuroscience* has identified one potential mechanism underlying this problem. Researchers found that in diabetic rodents, increased levels of a stress hormone produced by the adrenal gland disrupted the healthy functioning of the hippocampus—the region of the brain responsible for learning and short-term memory. In addition, when levels of the hormone corticosterone—also known as cortisol in humans—returned to normal, the hippocampus recovered its ability to build new cells and regained the plasticity needed to compensate for injury and disease and adjust to change. Studies like this could provide a better understanding of the complex interplay between the nervous system, hormones and cognitive health and could eventually point to approaches for preventing and treating cognitive decline in diabetes, scientists said.

Deciphering How Memories Last

More about mice and memory: NIMH-supported researchers have developed a way to pinpoint the cellular components that sustain a specific memory in genetically engineered mice. For a memory to last long-term, the neural connections holding it have to be strengthened by incorporating new proteins triggered by learning. Until now, however, it's been a mystery as to how these new proteins end up becoming part of the specific connections in neuronal extensions that encode the memory. Researchers followed such migrating proteins and found the neural connections, or synapses, that hold a specific fear memory; in the process they found that these synapses have molecular tags that help them capture the proteins. This newfound ability to link a learning experience in a mouse to consequent changes in the inner workings of its neurons—reported in the Feb. 22 issue of *Science*—will help scientists gain a better overall understanding of how memory works.

Stopping Staph Virulence

An international team of researchers supported by NIGMS, NIAID and NICHD has blocked staph infections in mice using a drug previously tested in clinical trials as a cholesterol-lowering agent. The finding, reported in the Feb. 15 online edition of *Science*, could provide a new direction for therapies to fight against a bacterium that's becoming increasingly resistant to antibiotics. The key to the research? Color. *Staphylococcus aureus*, or staph, has a golden pigment that acts as an antioxidant to block the reactive oxygen molecules the immune system uses to kill bacteria. Researchers speculated that blocking pigment formation in staph could restore the immune system's ability to impede infection. Thanks to the work of several researchers, one drug compound that blocked pigment production was found to reduce the bacterial population in mice with staph by 98 percent. Researchers said the next step will be to explore whether this could work in humans.—compiled by Sarah Schmelling



NCI scientists have shown that smoking affects the way genes are expressed—leading to alterations in cell division and regulation of immune response.



The phone numbers for more information about the studies below are 1-866-444-2214 (TTY 1-866-411-1010) unless otherwise noted.

Gingival Overgrowth

Do you have enlarged gums and are you taking dilantin, cyclosporine or calcium-channel blockers? Take part in an NIH study.

Allergy Clinic

Does your child have allergies? The NIH Pediatric Allergy and Asthma Clinic is for children 3 months to 18 years of age. All study-related tests and treatments will be provided at no cost. Parental permission and child agreement are required.

Study of Fibroids Needs Women

Women ages 33-50 suffering with fibroids are invited to participate in an NIH study. Compensation is provided. Refer to study o6-CH-0090.

Dry Mouth

Do you have dry mouth after radiation therapy for head and neck cancer? Are you currently cancer-free? If so, you may be eligible to participate in a clinical research study that will test a new gene therapy to try to increase saliva production. All study-related tests and medications are provided at no cost.

Kidney Disease

Do you have diabetes and early kidney disease (microalbuminuria)? If so, you may be eligible to participate in a research study to try and identify biomarkers that may lead to better treatments. All study-related tests and medications are provided at no cost. Study is for patients 18 or older.

Coronary Artery Disease

Have you had a heart attack, angioplasty or bypass surgery? If so, you may be eligible to participate in a clinical research study that will test an investigational medication that may lower C-reactive protein. C-reactive protein may indicate that you are at risk for sudden heart problems such as a heart attack. All study-related tests and medications are provided at no cost. Compensation is provided.

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.

One-Day Outpatient Study

Healthy volunteers, ages 19 to 55, are needed to participate in research studying genes and brain function. Testing procedures involve a blood draw, non-invasive neuroimaging, interviews and cognitive testing. No overnight stay. No medication trial. Compensation is provided. Call the Clinical Brain Disorders Branch at (301) 435-8970 or email Danielef@mail.nih.gov. Refer to protocol 95-M-0150.

Five Named to NIAID Advisory Council

The National Advisory Allergy and Infectious Diseases Council recently welcomed five new members: Dr. Ann Arvin of Stanford University School of Medicine; Dr. Carol Carter of the State University of New York at Stony Brook; Dr. Louis Picker of Oregon Health and Science University; Dr. Regina Rabinovich of the Global Health Program at the Bill and Melinda Gates Foundation; and Dr. Christel Uittenbogaart of the University of California, Los Angeles.

Arvin is Lucile Salter Packard professor of pediatrics and professor of microbiology and immunology at Stanford. Her principal research interests are the human herpes viruses and childhood viral diseases and vaccines.

Carter is professor of molecular genetics and microbiology and adjunct professor of physiology and biophysics at SUNY-Stony Brook. Her major research interest is replication of HIV with a focus on viral assembly and trafficking events required for virus release from infected cells.

Picker is associate director of the Vaccine and Gene Therapy Institute and professor of pathology, molecular microbiology and immunology at OHSU. His laboratory focuses on delineating the physiology of T-cell memory in primates, mechanisms of protection against persistent pathogens, AIDS vaccine development and the immunopathogenesis of AIDS-causing lentiviruses.

Rabinovich is director of the infectious diseases component of the Global Health Program at the Gates Foundation. She directs the development and implementation of drug and vaccine strategies to prevent, treat and control diseases relevant to global health such as malaria, pneumonia, diarrhea and human papillomavirus.

Uittenbogaart is professor of pediatrics and microbiology, immunology and molecular genetics at UCLA. Her research focuses on the impact of HIV on the developing immune system and the role of immune activation in HIV pathogenesis.



NIAID director Dr. Anthony Fauci (front, c) welcomes new council members (front, from l) including Dr. Ann Arvin, Dr. Regina Rabinovich, (back row, from l) Dr. Louis Picker and Dr. Carol Carter.

Mother, Daughter Donate Cells, Years Apart

By Jenny Haliski

Michelle Barsky Gins and her mother, Annie Barsky, recently spent a memorable day at NIH together. Barsky accompanied her daughter who donated blood stem cells by apheresis for the first time in the Clinical Center's department of transfusion medicine (DTM).

According to Sarah Pogue, senior coordinator of NIH's marrow donor program, Gins was their 377th donor and her mother the 40th. When Dr. Susan Leitman, chief of DTM's blood services section, walked into the clinic to chat with Gins, she recognized Barsky as one of NIH's earliest volunteer donors who gave bone marrow for a transplant to an unrelated recipient in 1992.

"Like mother, like daughter, they keep giving as a family tradition," Leitman said. "They have altruistically given the gift of life through a complicated, sometimes uncomfortable and time-consuming procedure to two people they do not know. What a family!"

Barsky joined the National Marrow Donor Program (NMDP) registry in 1989 through a drive at her synagogue to find a match for a Jewish woman in her twenties with Lithuanian relatives. According to Pogue, 6,000 patients search the registry at any given time for a match because they have only a 30 percent chance of finding a match within their own family and must also consider unrelated donors from similar locations or ethnicities.

For a successful transplant, the tissue type of an unrelated donor needs to match the patient's as closely as possible. Because tissue types are inherited, patients are more likely to match someone from their own race or ethnicity. Adding more donors and cord blood units from diverse racial and ethnic backgrounds to the NMDP registry increases the likelihood that all patients will find the match they need.

Barsky's family came from Russia and Poland and their family felt it was important for them to be tested so that even if they weren't a match or a transplant was not successful, they would be part of giving patients the best possible chance at a new or prolonged life.

"I knew when they took my blood that I would match someone. I wasn't a match for the young woman, but I wasn't surprised when months later, right before Michelle's bat mitzvah, I learned that I was a match for a 7-year-old boy," Barsky said. Her donation became a successful transplant, extending his life by a year and a half, and she was able to talk with her recipient before he died.



Gins joined the NMDP registry in 1997, when she turned 18, the minimum age for donation. "It wasn't even a question for me. I just knew that of course I was going to sign up on the registry," she said.

Gins matched a 53-year-old woman with leukemia, who received the cells hand-delivered the day after Gins' donation. For 4 days before her procedure, Gins took shots that prepared her cells for harvesting but also gave her flu-like aches and pains. The discomfort didn't dissuade her. "Not everyone is a match. Now that I am, this is the right thing to do."

According to Leitman, the generational difference between Gins and her mother is a reflection of the generational differences in how DTM collects hematopoietic, or blood-forming stem cells. In 1992, the first-generation process was to collect bone marrow using general anesthesia and a brief surgical procedure. Apheresis, which is similar to regular blood donation and requires no anesthesia, has now largely replaced marrow harvests. Around 60 percent of collections for NMDP-facilitated transplants are peripheral blood stem cells gathered this way. Only 20 percent of NMDP collections are bone marrow and the other 20 percent are umbilical cord blood collections, which are a rapidly growing proportion. "Maybe the next generation of donors after Michelle will be thought of as the 'cord blood' generation," Leitman speculated.

NMDP now facilitates about 300 unrelated-donor transplants every month and maintains a registry of about 4,500,000 U.S. residents willing to be donors. Those interested in joining the NIH chapter of the registry should contact Pogue via email (sp280i@nih.gov) or call (301) 496-0572. To learn more about becoming a donor, visit NMDP at www.marlow.org.

Michelle Barsky Gins (r) donates peripheral blood stem cells under the watchful eyes of (from l) DTM's Sarah Pogue and Dr. Susan Leitman and Michelle's mother, Annie Barsky.

PHOTO: MIKE SPENCER