



ABOVE • NIH provides new administrators with warm welcome. See story on p. 7

## features

- 1
- Two Popular New Vaccines Discussed at Grand Rounds**
- 3
- Symposium on Mood Disorders, Apr. 18**
- 5
- Special Guests Visit on St. Patrick's Day**
- 12
- Take Your Child to Work on Earth Day, Apr. 24**

## departments

- 2
- Briefs
- 10
- Digest
- 11
- Volunteers

# nih record

*Virus Smart, Science Smarter*

## New Viral Vaccines in 'Great Teachers' Spotlight

By Belle Waring

**I**n 1796, when Edward Jenner scratched cowpox vaccine into the arm of a human subject, he changed the history of public health. Cowpox boosted immunity to smallpox, one of the world's most deadly and horrific contagions. Thanks to Jenner's work, continued by Pasteur, vaccines would become an essential part of modern medicine. By 1980, smallpox was eradicated worldwide.

NIH furthers that heritage by supporting vaccine research and medical education, as in the recent Great Teachers lecture "New Viral Vaccines: The Shingles and the Human Papillomavirus Vaccines."

"Tell us what it felt like [to suffer from shingles]," said Dr. Anne Gershon, professor of pediatrics, Columbia University College of Physicians and Surgeons. She was speaking to Dennis Morrissey, whom she welcomed as an NIH vaccine trial volunteer. Then, in the classic tradition of Grand Rounds, she seated Morrissey alongside her at the



Dr. Anne Gershon discusses shingles, HPV vaccines.

SEE VIRAL VACCINES, PAGE 6

*Telling NIH's Stories*

## Professional Yarn Spinner To Offer 'How To' at Plain Language Awards

By Carla Garnett

On first meeting, Jon Spelman might be a monster, just awkwardly and somewhat sadly coming to terms with his ogreness. Or, he might be a dad, matter-of-factly relaying humorous details about his daughter's self-imposed potty-training policy. Or maybe he's Yancy Register, the old Florida crab and clam fisherman offering his insights on southern waterways. In fact, in the space of 20 minutes or so, Spelman—a professional storyteller—can get all three different characters to deliver valuable lessons via the same unique messenger.

On Tuesday, Apr. 15, he will bring his talent to NIH as guest speaker for the 2008 Plain Language Awards Ceremony. The Office of Communications and Public Liaison (OCPL), the new home for the Plain Language Initiative, will host the event.

Turns out Spelman is accurately named. With-in moments, he can put most people in a

SEE YARN SPINNER, PAGE 4

## Alexander Offers Hospitality, NIH Style

By Belle Waring

Michael Alexander reads people. As the Clinical Center's hospitality services coordinator, he greets folks in the lobby of the Hatfield Bldg., but there's much more to the job than that.



"You can read certain people when they come in. You watch patients and families getting off the shuttle," says Alexander. "A lot of people, their towns aren't as big as NIH. You can look in their eyes and see that they feel intimidated or uncertain.

We try to reassure them that if there's anything they need, our staff is glad to help."

Alexander and his hospitality team staff three strategic sites in the Clinical Center: main entrance, B1 level and near diagnos-

SEE HOSPITALITY, PAGE 8



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## briefs

### STEP Forum on Global Warming

The staff training in extramural programs (STEP) committee will present a Science in the Public Health forum on the topic, "Global Warming: More Than Just Hot Air!" on Thursday, Apr. 17 from 8:30 a.m. to 12:30 p.m. in Natcher Bldg., Rms. E1/E2.

Scientists predict that global warming will have wide-ranging and mostly adverse effects on human health. Model projections suggest that weather changes will impact the water we drink, the air we breathe and the animals around us. These environmental changes may lead to the spread of infections and adverse health conditions to new populations. How will the diseases that you worry about today be different from those you will encounter tomorrow? Where is the latest research heading and what can be done to face upcoming challenges?

### National Day of Prayer, May 1

This year's National Day of Prayer will be observed Thursday, May 1 from 11:30 a.m. to 1 p.m. on the lawn in front of Bldg. 1. All are welcome. "Come out and join fellow NIH'ers, patients and friends as we celebrate this day Congress has set aside for our country," said NCI's Renee Gamborg. "Federal and military compounds all over the country will have their National Day of Prayer program on this same day with guest speakers, music and prayer. Bring your friends and family."

### NIH 9-Hole Golf League Recruits

The NIH 9-Hole Golf League is seeking members for the 2008 season. The league features two flights of mildly competitive, handicapped-match play and one non-competitive flight. The season starts the first week of May and continues through September. Play is after work on Tuesdays and/or Thursdays. The league has a block of reserved tee times (generally 4:15-6 p.m.) at Needwood Golf Course in Rockville (Tuesdays) and at Northwest Park Golf Course in Silver Spring (Thursdays). The league is open only to R&W members (who may be non-employees). Membership is limited to the first 84 registrants. For more information, visit [www.recgov.org/golf](http://www.recgov.org/golf) or email John Hamill at [jhamill@mail.nih.gov](mailto:jhamill@mail.nih.gov).

### DDM Seminar Series Continues, Apr. 17

Don't miss the third seminar of the 2007-2008 DDM Seminar Series, "Management & Science:

Partnering for Excellence" on Thursday, Apr. 17 from 11 a.m. to noon in Masur Auditorium, Bldg. 10. Speaker Jim Sorenson will lecture on "The Power of Fierce Accountability," which will address how personal accountability can be improved in the workplace. Sorenson has 23 years of experience speaking to audiences and currently works as director of training at Fierce, Inc. He has dedicated his career to work that provides people, teams and organizational cultures with the tools to improve results and increase their level of effectiveness and satisfaction.

The Office of Management invites you to attend this seminar, which will be followed by a light reception. Videocasting and sign language are provided for each event. For more information and the complete schedule for the series, visit [www.ddmseries.od.nih.gov/](http://www.ddmseries.od.nih.gov/) or call (301) 496-3271.

### 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 outing including 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](mailto:somersh@mail.nlm.nih.gov). Visit [www.recgov.org/nihga/](http://www.recgov.org/nihga/) for information on the upcoming schedule and other news.

### First Annual NIH Career Symposium

The Office of Intramural Training and Education announces the first annual NIH Career Symposium on Wednesday, Apr. 9 from 7:30 a.m. to 3:30 p.m. in the Natcher Conference Center. It is designed for NIH graduate students and postdocs and provides a chance to learn about careers in science and medicine. It will also allow participants to network with established professionals in these fields.

The symposium brings together professionals from around the country to discuss their career experiences during panel sessions organized by topic. These include academic medicine, scientific writing, consulting and work in industry and government. The symposium will also feature workshops on job-related skills such as interviewing and networking. Approximately 80 speakers from more than 15 fields will participate in interactive panel sessions. There will also be a networking lunch and a reception following the event. For more information or to register visit [www.training.nih.gov/symposium](http://www.training.nih.gov/symposium).

nih record



## Symposium To Show What We've Learned About Mood Disorders

With almost 21 million adults in the United States suffering from mood disorders each year, the indirect effects reach far beyond the individual sufferer—to spouses, children, other family members and friends, as well as to the workplace, schools, health care systems and local and global economies.

In a symposium on Friday, Apr. 18 from noon to 3:30 p.m. in Masur Auditorium, Bldg. 10, a panel of five National Institute of Mental Health researchers will discuss mood disorders. Topics include what scientific investments are yielding in efforts to understand the causes of these often disabling conditions; new medical and non-pharmaceutical approaches to addressing symptoms and prevention; how to distinguish normal behavioral fluctuations in children and teens from symptoms of depression or bipolar disorder; and how to identify signs of suicide risk and best ways to intervene.

Speakers and topics include:

“The Global Effects of Mood Disorders—An Overview,” by Dr. Hussein Manji, director, Mood & Anxiety Disorders Program.

“Help in the Now, Help in the Wings: Medical, Non-pharmacologic and Complementary Treatments,” by Dr. Carlos Zarate, chief, Experimental Therapeutics, Mood & Anxiety Disorders Program.

“No Ordinary Childhood: Mood Disorders in Our Way,” by Dr. Ellen Leibenluft, chief, section on bipolar spectrum disorders, Mood & Anxiety Disorders Program.

“Fatal Despair and the Reason to Care,” by Dr. Jane Pearson, chair, NIMH suicide research consortium, Division of Services and Intervention Research.

“Getting Better, Staying Well: The People Involved,” by Dr. David I. Sommers, scientific review officer, Division of Extramural Activities.

The event—also broadcast live at <http://videocast.nih.gov>—is aimed at updating NIH staff on research and clinical issues related to mood disorders. Guests, volunteers and patients are also welcome, with seating on a first-come, first-served basis.

Sign language interpreters will be available. For more information or to request other reasonable accommodation, contact Sophia Glezos Voit at [sglezos@mail.nih.gov](mailto:sglezos@mail.nih.gov) or phone (301) 443-4533. 📞



*Winners of the 2007 World AIDS Day Awards are (from l) Dr. Daniel Douek, Dr. Richard Koup and Dr. Kenneth Bridbord.*

## NIH World AIDS Day Honors Awarded

Although the recipients of the second annual NIH World AIDS Day Awards were announced on Dec. 1, 2007, the awardees each gave a presentation and received their awards, which included a \$5,000 prize, at a meeting of the NIH institute and center directors on Mar. 12.

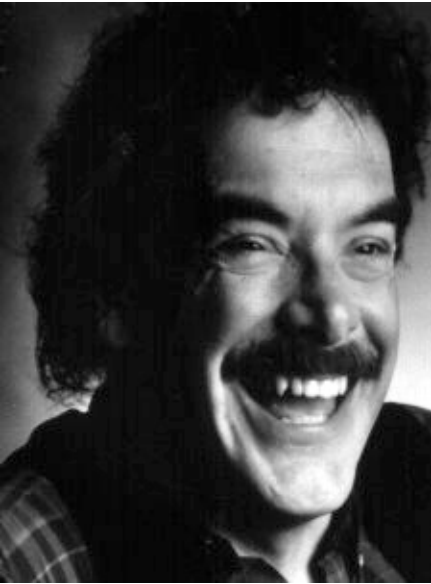
The Office of AIDS Research and NIAID initiated this award to recognize the exceptional contributions of NIH scientists and managers in the battle against the AIDS pandemic—both for original research and for support for research programs.

This year, the award for original research was presented jointly to Drs. Daniel Douek and Richard Koup of the NIAID Vaccine Research Center. Their award reads: “In recognition of their original scientific research that significantly contributed to determining the mechanisms that control HIV pathogenesis and immune reconstitution. Their landmark research findings have led the field in understanding the role of HIV-specific T cells in the control of HIV infection and helped to establish the immunological basis for the future development of an AIDS vaccine.”

The award for contributions supporting AIDS research and programs was given to Dr. Kenneth Bridbord of the Fogarty International Center. The award citation for the AIDS International Training and Research Program reads: “In recognition of his efforts to develop innovative programs to build a cadre of international research scientists and clinicians trained to join the global fight against the AIDS pandemic. These programs have played a significant role in building research infrastructure and capacity for the conduct of basic and clinical biomedical and behavioral AIDS research in more than 100 nations around the world.” 📞

## YARN SPINNER

CONTINUED FROM PAGE 1



*Storyteller Jon Spelman will offer tips of the trade in a talk at 2 p.m. on Tuesday, Apr. 15 in Lipsett Amphitheater, Bldg. 10.*

trance. If he can't get you, then according to his own creed, he's not doing his job. In a way, he's part-magician, part-artist by trade.

"Stories are made up of mainly nouns and verbs, of course," he pointed out recently at one of two workshops OCPL held for NIH writers and communication offices, "but they're not so much about words as about the pictures and images your audience sees and hears while you're telling the story. Sometimes things in your environment can work against you. Anything that takes your audience out of the trance is working against you."

So how did Spelman start telling stories for a living?

About 27 years ago, he was in Florida running his own theater company when he decided to go solo.

"The theater was insufficient to tell all the stories I want to tell," he says now. His first big gig spinning yarns for money occurred on an 11-week tour of rural Florida trailer parks and fishing camps. That's when he became Yancy Register, a composite character Spelman created of several personalities he'd met in his travels. Yancy was so believable that audiences sometimes forgot he was made up.

"People used to make my checks out to him," Spelman says, laughing. "I'd just sign them over to myself."

The ability to fictionalize is one mark of great storytelling, he suggests, and one that NIH communicators should consider adapting.

"When you're telling a story you've got several parallel messages going on simultaneously," says Spelman. "The listener or reader is constantly being pulled into their own lives or pulled out of them. Stories are ultimately about emotions. What's the emotional context of what you're communicating? Your audience is not so much interested in the facts of it, but the truth of it."

Another lesson he wants to impart is the value of simplicity.

"If you've got a complicated message, you've got to break it down, piece by piece," Spelman stresses. "What you learn early on about storytelling is that your audience has only one chance to listen. Plain, simple language is critical. You want to get as many of their senses

involved in the story as possible. Are you putting it into pictures so that people can see it? That's what makes stories vivid. That's what makes them work."

Born in Missouri, raised in Ohio and well-traveled around the country, the fabulist finds few ethnic or cultural disconnects in his line of work. Everyone can appreciate a decent anecdote. Geographically, though, varying perceptions of Spelman's profession have been duly noted.

"People in really rural areas seem to have a more natural understanding of storytelling," he acknowledges. "Southerners seem more used to gabbing and talking among themselves, so some audiences wonder, 'Hey, why am I paying you to do what we've always done anyway?'"

Spelman is now focusing on telling tales in his adopted home region along the I-95 corridor. Last month he moved from Silver Spring to downtown Baltimore. He's currently at work on material for the local speakeasy circuit. His theme will be "After the Game. Death, dying, and whatever else there is."

That good stories are often sobering, humorous and everything in between—all at once—is another lesson Spelman wants to get across to NIH'ers, who might have trouble seeing their work through the eyes of a storyteller. Adding a dose of creativity to even serious topics can help almost every audience, insists the character who is neither Frankenstein nor fisherman, but is a father whose kid once had a funny idea about using the facilities.

"At its simplest and most complex," Spelman points out, "a story has to be as engrossing for the teller as it is for the listener. One of the great things about a good story is you want to see how it's going to end. My favorite story is always the one I'm telling at the moment." 🗨️



Rear Admiral Carol Romano (front, c) welcomes chief nursing officers of Northern Ireland and Ireland Martin Bradley (front, l) and Sheila O'Malley (front, r). At rear are (from l) All-Ireland NCI Cancer Consortium Program Manager Isabel Otero, nurse advisor to chief nursing officer of Ireland Mary Day, nursing research advisor Sarah Condel and nursing officer for Northern Ireland Margaret O'Hagan.

### All-Ireland Nurses Celebrate St. Patrick's Day at NIH

From Mar. 10 to 17, the chief nursing officers of Ireland and Northern Ireland, Sheila O'Malley and Martin Bradley, visited NIH under the auspices of the All-Ireland NCI Cancer Consortium. The consortium is a multi-lateral partnership among the ministries of health of Ireland and Northern Ireland and the National Cancer Institute to enhance the infrastructure for cancer research and cancer care on the island of Ireland and the U.S.

The All-Ireland delegation had several objectives for their visit, including raising the profile of the profession in their homeland and engaging with NIH on potential research collaborations in cancer, nursing informatics and palliative care.

The delegation met with various nursing leaders including Dr. Patricia Grady, director of the National Institute of Nursing Research, Dr. Clare Hastings, chief nursing officer at the Clinical Research Center, and Rear Admiral Carol Romano, Commissioned Corps assistant surgeon general and chief nurse officer, who gave the delegation a demonstration of NIH's Clinical Research Information System and an overview of the role of informatics in clinical research.

The delegation also had the opportunity to visit NCI-designated cancer centers in the Maryland-Washington, D.C., metropolitan area, including Lombardi Cancer Center at Georgetown University and Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins University. The delegation met with various nurse leaders at Hopkins School of Nursing as well

as with Paula Rieger, CEO of the Oncology Nursing Society.

The All-Ireland NCI Cancer Consortium has been at work since 1999. During this time, it has developed a number of joint programs and working groups. One example is the nursing working group, which focuses on expanding educational opportunities for nurses from Ireland and promoting nursing and palliative care activities. For more information about the consortium, go to [www.allirelandnci.org](http://www.allirelandnci.org).

### FARE Abstract Competition for Fellows

The 15th annual Fellows Award for Research Excellence (FARE) 2009 competition will again provide recognition for outstanding scientific research performed by intramural postdoctoral fellows. FARE winners will each receive a \$1,000 travel award to use for attending and presenting their work at a scientific meeting. Twenty-five percent of the fellows who apply will win an award.

FARE applicants must submit an abstract of their research, which will be evaluated anonymously on scientific merit, originality, experimental design and overall quality/presentation. The travel award must be used between Oct. 1, 2008, and Sept. 30, 2009.

The FARE 2009 competition is open to postdoctoral IRTAs, visiting fellows and other fellows with fewer than 5 years total postdoctoral experience in the NIH intramural research program. In addition, pre-IRTAs performing their doctoral dissertation research at NIH are also eligible to compete. Visiting fellows/scientists must not have been tenured at their home institute. Questions about eligibility should be addressed to your institute's scientific director. Fellows should submit their application, including abstract, electronically from now through Apr. 14 via <http://felcom.od.nih.gov/subcommittee/fare.aspx>. Winners will be announced by the end of September 2008. More information is available on the web site above. For more information, contact one of your institute's FelCom representatives at <http://felcom.od.nih.gov/members.aspx>.



**Right:**  
Gershon provided explanations of two new vaccines gaining attention: one for shingles and the other for HPV.

PHOTOS: BILL BRANSON



## VIRAL VACCINES

CONTINUED FROM PAGE 1

base of Lipsett Amphitheater.

Shingles is a sequela—that is, a secondary, subsequent disease—of chickenpox. Shingles presents as an exquisitely painful, blistering rash, typically on one side of the body.

“My eye was involved, so it was upsetting,” said Morrissey, a retiree. “It felt like having a severe sunburn, then walking into a spider web.” A mild breeze against his face was so painful he abandoned hobbies such as bird-watching as well as exercising at the gym; even drawing became impossible. “I couldn’t concentrate,” he said.

The culprit was a virus that causes two diseases. First, the childhood illness chickenpox (known as varicella). Even after chickenpox resolves, the virus doesn’t leave the body; it becomes latent in nerve tissue. At some point, it can escape from latency and reactivate as disease 2: shingles (known as zoster). Outbreaks of shingles can occur many years, even decades, after the childhood bout of chickenpox has resolved.

There are 1 million zoster cases annually in the United States, said Gershon. It tends to affect adults over 50. While not every case of chickenpox results in shingles, up to half of adults who live to age 85 will get it.

“Acute zoster affects activities of daily living,” Gershon added. Those afflicted report pain, depression, reduced social functioning and psychological impairment. Complications include scarring, reduced sensation and even paralysis.

“I got the vaccine,” said Morrissey, “and eventually I got zoster anyway.” No vaccine is 100 percent protective, said Gershon. In the Shingles Prevention Study, about 35 percent of vaccinees in Morrissey’s age group developed zoster with resultant pain, despite the vaccination. It is still possible that Morrissey was at least partially protected by the vaccine from the effects of shingles.

Some, like Morrissey, suffer from post-herpetic neuralgia (PHN)—pain persisting after the shingles lesions have healed. Both incidence and persistence of PHN increase with age. Morrissey’s PHN lasted for 2 years, he said.

In the Shingles Prevention Study, “the vaccine prevented zoster in the elderly,” she said. Its effectiveness varies depending on age, but it’s almost 65 percent effective in adults ages 60–69. For those in their seventies, it’s 55 percent effective.

The vaccine also reduces PHN. Composed of a live, attenuated (disabled) virus, the vaccine is safe, Gershon noted. It can be given to prevent chickenpox, and, since it increases “cell-mediated immunity,” it can also be used therapeutically to prevent zoster in persons with latent infection with the varicella-zoster virus. It’s recommended for use in those over 60, who are not immunocompromised.

In the second portion of the hour, Gershon lectured solo, without featuring a study volunteer.

The human papillomavirus (HPV), she said, is the most commonly transmitted of sexually transmitted diseases (STDs) in the U.S. By age 50, more than 80 percent of American women test positive for at least one strain of HPV.

There are many different kinds of HPV, said Gershon, calling them “very clever viruses” that can cause cervical cancer, genital warts and laryngeal papillomas (warts in the larynx, or voice box) in infants. Scientists have identified 19 high-risk HPV strains.

“The HPV vaccine is preventive, not therapeutic,” said Gershon. That’s still excellent news. The virus causes cervical dysplasia, a precursor to cervical cancer. And once cervical cancer becomes invasive, it’s a killer of women. Prevention is key.

“Young girls are susceptible” to HPV, said Gershon, “because of the immaturity of the cervix...the infection is [typically] acquired soon after sexual debut and many girls and young women become persistently infected.”

The licensed vaccine targets the two most common HPV types, strains 16 and 18, which cause around 70 percent of all cervical cancer. Both the safety and efficacy of the HPV vaccine, Gershon said, have been proven in clinical trials.

“The virus is smart,” she explained, “but virologists here at NIH turn out to be smarter, because they figured out a way to vaccinate against an oncogenic [cancer-causing] virus.”

The vaccine is composed of virus-like particles containing the HPV “capsid proteins” from its viral shell. An aluminum adjuvant (preservative) adds to the vaccine’s safety by inhibiting bacterial contaminants. And this point is important: “The antibody titers [post-vaccination] were much higher than after natural infection,” Gershon said.

In a landmark study, there was 100 percent efficacy in preventing external lesions and adenoma *in situ* (invasive cervical cancer).

“There are still questions,” Gershon noted. While the vaccine is currently deemed safe, there are no long-term safety data yet.

“Who should be immunized? Here is the controversy,” said Gershon. Vaccine administration should occur before individuals become sexually active, she said, and that includes both males and females. Both can carry the virus.

If we wait until after young people become sexually active, said Gershon, “we can screen [female patients] with Pap smears [Papanicolaou smears—tests to detect cervical changes]

but we will still have women die from cervical cancer...The vaccine has no effect if people are already infected—unlike the zoster vaccine, the HPV vaccine is only preventive, not therapeutic.

“When I was a young pediatrician,” she continued, “we didn’t learn about STDs in kids because we didn’t think they had them.” She said that 11- and 12-year-olds should be immunized for HPV when they get their routine Hep-B, meningitis and booster DPT injections. “Just give them all together,” she said. This is what the American Academy of Pediatrics has recommended.

“My granddaughter, at 11, she’ll get [the shot],” said Gershon. “It isn’t a big deal for these girls, in spite of what you read. We need to protect everybody.”

And, she added, most people think that, eventually, boys should get the vaccine too. The safety of the vaccine is currently being studied in boys in clinical trials. ●

## AFP Holds Recruitment Session

The NIH Administrative Fellows Program (AFP) organized its first on-site recruitment event Mar. 12 at Natcher and invited students from 50 universities and colleges. The session gave applicants an opportunity to learn more about NIH and the Administrative Fellows Program. The AFP was established to replenish the administrative pipeline by recruiting new talent to administrative careers. Approximately 100 prospective applicants attended the event.



Administrative Fellow Ayodeji Larmie (r) explains the AFP to a hopeful applicant.



Administrative Fellows Program Chair Tim Tosten and Vice Chair Cheryl Stevens are all smiles after a successful event to recruit new fellows to the program, which was held at Natcher on Mar. 12.

PHOTOS: KRISTI PORTER



## HOSPITALITY

CONTINUED FROM PAGE 1

tic services. They also assist at the West Drive patient entrance “to get them started off on the good foot.”

A crucial part of the job is weaving lines of communication: “We involve parking, transportation, nurses; we don’t hesitate to reach out... We deal with a lot of different personalities,” he says, which requires tact.



*Mike Alexander says of his job, “When I go home, I’m gratified. I’m happy. I don’t want to work anywhere else.”*

PHOTOS: MIKE SPENCER

“I never ask patients why they’re here, what their disease is,” he explains. “You can’t get too close, but they can’t be ignored either.”

Staff too have questions. The Bethesda campus is wide; the Clinical Center is intricate.

“We even get Bethesda Naval medical people,” Alexander says, “because their hospital is [also called] Bldg. 10... We have Special Forces guys, Rangers, who are lost; they get to the [NIH] gate and say they’re going to Bldg. 10 for an 8 o’clock appointment...and now they’re completely frazzled. You gotta comfort them.” Alexander keeps a list of National Naval Medical Center clinic phone numbers, then shepherds folks onto shuttles, if needed.

Work has its lighter moments: “I was so glad about meeting [the late journalist] Ed Bradley,” here at NIH to cover a story.

“Patients and families can be facing tough situations; we’re sensitive to that,” Alexander says. “This is also a place of hope. This is a mirror for us. We go down the same road one day; if not us, then someone we love. When I go home, I’m gratified. I’m happy. I don’t want to work anywhere else.”

Many patient care facilities use volunteers as greeters, but NIH is different. While the social work department’s Volunteer Service Program does provide backup, hospitality services has dedicated resources for five full-time employees. Developed by the patient advisory group and CC director Dr. John Gallin, it began in 1999, when Alexander transferred from personnel to be program coordinator.

When the office moved to the Clinical Research Center in 2004, “they brought us on tours,” he says. “I’ve probably been lost more than any-



*Says Alexander, “We’re as much a part of the healing process as doctors, nurses, technicians.”*

one.” The CRC has about 241 beds, “but the bulk of work is outpatients, or healthy volunteers; that’s what makes the place so busy.”

If patients and families need help navigating the building, Alexander or a coworker accompanies them and leaves a business card; for help returning, they are welcome to call. If they need to check email, he offers the key to the CC’s Business Center, “a godsend—they can work from there.” For short-term child care, valet parking or any routine question on where to eat or shop, Alexander has answers.

“I’ve been asked: How many acres in this place? What’s the population of Bethesda? What kind of tree is over by Bldg. 35? I had to call buildings and grounds for that one.”

Things he doesn’t mention: How his office received the 2000 NIH Director’s Award. Alexander was honored for customer service excellence in 2002. And then there’s his Jesse Ferguson Customer Service Award in 2006.

“I really want this to be about my staff,” Alexander says, “because without them, I couldn’t be me.” Letitia Johnson, Elsa Mendoza, Eddie Pettway, Anthony Staton and Crystal Thomas are his team; he also works closely with Celeste Perry of Priority Transport Services.

“You can imagine how many times people miss their buses,” he says. “Celeste can get one to turn around and get them to the airport...Small things are so important.”

A Washingtonian, Alexander entered NIH’s Stay-in-School program in 1979 while studying at Montgomery College; he worked as an elevator operator, as well as in phlebotomy and sterile central supply. Eventually he was hired full time in personnel.

He left once, to work at Interpol: “For 9



months. Not my cup of tea. After my daughter was born, I came back to NIH." That was in 1989, and he's been here ever since.

"His memory is amazing," coworker Mendoza says, out of earshot. "Mike is like a book for me, with everything in it about this place."

He credits his grandmother for his values: "She instilled a lot of things and empathy was one of them," he says. "She would always want me to do good."

What keeps him going? "The patients. We're as much a part of the healing process as doctors, nurses, technicians; this is patients' first impression, and if they say, 'They make us feel comfortable'—well, in order to get better, you have to have that attitude."

And the inspiration is mutual: "What we do—it has a profound effect on you. I don't care what kind of background you come from or what you do, it makes you understand what's really important." 🗨️

### Workshop on Clinical Research, May 9

NCCR is jointly sponsoring Accelerating the Dissemination and Translation of Clinical Research into Practice, a workshop on Friday, May 9 from 8 a.m. to 4:35 p.m. in Natcher Auditorium. This is the first in a series of workshops to discuss and share best practices and ways researchers can partner with community health care providers to translate clinical research into practice.

The workshop will help identify key enablers of successful academic-community provider partnerships, plan effective strategies for dissemination, diffusion and adoption of research and encourage public- and private-sector partnerships for collaborative translational research. Speakers include NCCR director Dr. Barbara Alving, NIDDK director Dr. Griffin Rodgers and others.

The workshop is free and open to the public. Registration is requested by Apr. 28. To register, visit [www.aptrweb.org/workshops](http://www.aptrweb.org/workshops). Individuals who need sign language interpreters and/or reasonable accommodation to participate should contact the Federal Relay Service at 1-800-877-8339 at least 5 days before the event.

### NIAID Mourns Pharmacist Greene

By Veda Charrow and Claudia Wair

Dr. Eva Laverne Greene (also known as Eva Purcelle), a clinical researcher in the Division of AIDS, NIAID, died on Dec. 1, 2007. She was 34.

She graduated from Howard University School of Pharmacy, Nursing and Allied Health Services with a doctor of pharmacy degree in 1997. She soon became involved in domestic and international HIV/AIDS clinical trials. Highly regarded in her field, she was particularly drawn to children affected by the disease and initially focused on the effect of HIV/AIDS on this population.

Wanting to understand the patient as much as the science, she volunteered as a counselor for a children's camp for families affected by HIV/AIDS, which turned out to be a life-changing experience. Although she did not continue her focus on pediatrics, her career track remained in HIV/AIDS care.

Greene had worked at NIAID since 2003, providing pharmaceutical oversight for studies on HIV/AIDS in Africa. "She was poised to become one of the leading lights in clinical research," said DAIDS director Dr. Carl Dieffenbach. According to Janet Nicotera, research and networks coordinator of the NIAID-supported HIV clinical trials unit at Vanderbilt University, "The world of HIV researchers was touched by Eva as evidenced by the global response to her death. We had emails from Brazil, Botswana, Kenya, Zambia, the United Kingdom, Zimbabwe, South Africa, India, Thailand and Malawi," among other countries. One note from Kenya read: "Tonight, from far away Kenya, we shed tears for Eva Purcelle...She was one, and a great one at that, of a team of dedicated researchers who devoted their time and energy towards the welfare of poverty-stricken, HIV/AIDS-infected people from this part of the world."

Greene demonstrated her dedication to the fight against HIV/AIDS in more than her career. In October 2004, she ran the Marine Corps Marathon to raise money for Whitman-Walker Clinic in Washington, D.C.

Said NIAID coworker Paul Tran, "It has been such an honor, a blessing and a privilege to have known Eva, even though it was for just a very short while. Eva never chose the road of least resistance and she was never afraid to take on any difficult challenges at work and in her daily life. Eva often volunteered for the most difficult tasks without hesitation, and she never failed to complete them."

Greene loved to cook and was known as a coffee connoisseur. Reading, music and her family—especially her children—were her passions. She is remembered as "a loving and wonderful mom."

She is survived by her parents, Frances Leach Greene and Dr. Robert Thomas Greene, Jr.; her maternal grandparent Ideatt Leach; her son Isaac Purcelle and daughter Gabrielle Smith; sister Roberta Greene Jackson; brother-in-law Tareik Jackson; niece Saadiya Jackson; nephew Tareik Jackson, II; and stepchildren, godchildren and extended family.



### Strategies for Keeping Pounds Off

A new NHLBI study shows that adults who lost weight in a 6-month program were able to keep at least some of the weight off for 2.5 years thanks to brief monthly personal counseling, while an online intervention helped participants keep the weight off for 2 years. This Weight Loss Maintenance Trial is the largest and longest-duration trial to test different weight-loss maintenance strategies. Of 1,685 enrollees, 1,032 lost an average of 18.7 pounds during the first 6-month weight loss intervention involving weekly group counseling sessions. Participants were then assigned to one of three strategies for weight loss maintenance: personal counseling, a web-based intervention and self-direction. At the end of the study, those who received personal counseling best maintained their weight loss. Researchers said the findings, published in the Mar. 12 issue of the *Journal of the American Medical Association*,

provide insight into best practices for ways to keep weight off and thereby lower risks for heart disease and other conditions.

### A New Look at Drinking Frequency And Quantity

It's not just the average amount of alcohol you drink over time that can influence your mortality risk, but how much and how often you drink it. Researchers from NIAAA and NCI came to this finding after studying nationwide survey data and comparing causes of death with alcohol consumption patterns. They found the greater amount of alcohol men consumed on drinking days, the greater their risk for death from cardiovascular disease and cancer, though alcohol frequency in men was actually associated with decreased risk of death from cardiovascular disease. Among women, frequent drinking was associated with an increased risk of cancer and increased quantity was associated with mortality from all causes. The research, published in the March issue of *Alcoholism: Clinical and Experimental Research*, points to the importance of looking at drinking patterns—as opposed to just averages—when studying alco-

hol-related health issues. It also reinforces the importance of drinking in moderation.

### Genes, Environment and PTSD

According to a new study funded in part by NIMH, adults who experienced trauma in childhood are much more likely to have post-traumatic stress disorder (PTSD) after a traumatic event; certain gene variations raise the risk if the childhood trauma involved physical or sexual abuse. Reported Mar. 19 in the *Journal of the American Medical Association*, the findings support the hypothesis that combinations of genes and environmental factors affect the risk of stress-related disorders. Researchers surveyed 900 people ages 18 to 81 from poor, urban neighborhoods and examined the genetic make-up of 765 of the participants. They found that having a history of child abuse led to more than twice the number of PTSD symptoms in adults who later experienced other traumas, compared to traumatized adults who weren't abused. But the abuse alone wasn't enough to lead to the symptom increase: it also appeared to depend on whether certain variations in the stress-related gene were present. Likewise, the gene variations by themselves didn't appear to affect the risk. Getting a better understanding of the interactions between genetic variations and environment could help more accurately predict who's at risk for disorders like PTSD, researchers said.

### Artificial Butter Chemical Harmful to Mice

A study conducted by NIEHS shows that exposure to the chemical diacetyl, a component of artificial butter flavoring, can be harmful to noses and airways of mice. The research, published online in *Toxicological Sciences*, was conducted because diacetyl has been implicated in causing obliterative bronchiolitis (OB), a debilitating and rare lung disease, in humans. However, though mice that inhaled diacetyl vapors for 3 months developed lymphocytic bronchiolitis, a potential precursor of OB, none of them were diagnosed with OB itself. The disease has been detected recently in workers who inhale significant concentrations of artificial butter flavoring in microwave popcorn packaging plants. The study's authors said the findings suggest workplace exposure to the chemical contributes to the development of OB in humans, but that more research is needed.—compiled by Sarah Schmelling



*A new NHLBI study shows that adults who lost weight in a 6-month program were able to keep at least some of the weight off for 2.5 years with the help of personal counseling.*





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

#### 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 06-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.

#### Blood Count Study Needs African Americans

Healthy African Americans or Africans 18 years and older are needed for blood count study. Compensation is available.

#### Asthma Clinical Research Study

Patients with asthma who are taking inhaled corticosteroids may be eligible to participate in a study at the Clinical Research Center. The purpose of this study is to determine if a widely used agent for diabetes can improve asthma. Eligible patients will receive a comprehensive evaluation. There is no cost for participating in the study. For more information, call toll free 1-877-NIH-LUNG (1-877-644-5864), extension 2 or send email to LungStudy@nhlbi.nih.gov. You may also contact the NIH Patient Recruitment and Public Liaison Office via TTY 1-866-411-1010.

#### Volunteers Needed for USUHS Study at Navy

Are you between 18 and 30 years of age? In good health? You may be eligible to participate in a study of attention. It requires one 3-hour visit and you will be paid for your time. Visit takes place on the campus of the Naval Medical Center. Parking is available. Call (301) 295-2288.

### NIAID's Cooper Retires After 42 Years

Coworkers, present and past, and friends and family gathered recently to celebrate with Norman Cooper on his retirement as a biologist from the Laboratory of Viral Diseases (LVD), NIAID, after a 42-year career at NIH. Thirty-nine of those years were spent working with Dr. Bernard Moss, chief of LVD.

Cooper began his time at NIH in the Division of Biologics Standards (now CBER, FDA) in 1965. He moved to the Laboratory of Biology of Viruses, NIAID, in 1967 under the late Dr. Norman Salzman. Two years later, he began working with Moss. This association continued until his retirement.

Video messages to Cooper from many NIH'ers and former postdocs and trainees from around the world were highlights of the celebration. They extolled his willing helpfulness and cheerful attitude, his expertise and his professionalism. Cooper insists that he will continue to be available to the LVD to provide his vast knowledge of cell cultures as well as vaccinia virus growth and purification techniques. He plans to travel and to enjoy the new computer that he was given by colleagues at his retirement party.



*Norman Cooper (r) enjoys a retirement party in celebration of his 42 years at NIH, along with Dr. Bernard Moss, chief of the NIAID lab where Cooper worked.*

## Take Your Child to Work, Earth Day

NIH's annual Earth Day Celebration will be held Thursday, Apr. 24 in conjunction with Take Your Child to Work Day. The event will run from 10 a.m. to 2 p.m. in front of Bldg. 1 and is open to all employees, contractors and visitors. The Earth Day celebration will include activities for children and adults, information and demonstrations, lunch and fun. Bring your own lunch or purchase it from local vendors. Highlights include:

❖ Find out the top 10 ways you can go greener at home and at work. Take home a native tree seedling that you can plant as one greener step.

❖ Children and adults can participate in the environmental quiz to receive green items.

❖ Learn about the NIH Bicycle Commuter Club, Transshare and other commuting options and get information on Bike to Work Day, to be observed on Friday, May 16.

❖ Please touch—the aquatic insects, invertebrates and 3-D watershed model on display. Take a nature walk and learn about their role in a healthy stream.

❖ Participate in the Children's Seed Planting or Frisbee Throw contests.

❖ Learn about Bethesda Green, a living model that will sustain the current and future development of Bethesda by reducing the community's environmental footprint.

❖ Participate in the third annual IT Contest (see details in the Mar. 21 *NIH Record*) and view the display.

❖ Enjoy the NIH Mad Hatter, Ben Franklin and clowns.

❖ Learn about recycling and waste management.

❖ Bring any bikes, eyeglasses or personal cell phones that you might otherwise throw away. These materials will be reused or recycled instead of going to the landfill/incinerator.

Visit [nems.nih.gov](http://nems.nih.gov) for a full list of activities.

## Pizza Box Solar Oven Design Contest

*To help kids understand and practice the three R's (reduce, reuse and recycle), NIH will hold a Pizza Box Solar Oven Design Contest for children ages 8 to 15 on Apr. 24. Contestants will construct a solar oven at home by reusing one or two pizza boxes, along with recycled materials, to harness renewable pollution-free energy to melt an ice cube. The contest will be held in conjunction with other Earth Day activities on the lawn in front of Bldg. 1. The two children with the best ovens will be awarded \$25 gift certificates to Ledo Pizza. In addition, a manufactured solar oven and information about use of solar ovens around the world will be on display at the contest site. To register and review contest rules, visit <http://takeyourchildtowork.nih.gov/app/SchedEvents.aspx>.*



## First Kid to Get NIH 'Grant' Set to Speak

The first and only kid to receive an NIH "grant" will share his story at NIH's observance of Take Your Child to Work Day on Thursday, Apr. 24.

When Terence Boylan was 9 years old in 1957, he sent a request to NIH for \$10 to build a rocket ship. Members of an NIH review committee were moved by the youngster's request and they passed the hat for Boylan, hoping it would pay off one day.

Boylan will speak to children and adults attending the annual event in Masur Auditorium, Bldg. 10, from 11 a.m. to noon. He will discuss the trials and triumphs of his rocket research and describe the big impact the little grant had on his life.

This activity will be held for NIH staff and their children, but anyone will be able to see it at <http://videocast.nih.gov/>.

The Center for Scientific Review is sponsoring this presentation as a tribute to the passion and imagination of researchers—young and old—who seek to do something no one has done before and as a tribute to the amazing things that can happen when we invest in the best of them.

CSR will also host a workshop for children ages 8-15 to give them hands-on understanding of the NIH grant application and review process: "I Want to Build a Rocket! - How To Get Your Ideas Off the Ground at NIH."

Children will review fun, made-up research applications to understand and appreciate the peer review process, the central activity NIH uses to fund the best applications for advancing science and curing or preventing disease.

The workshop will be presented twice: 9 to 10 a.m. in the Clinical Center and 2 to 3 p.m. at CSR offices in Rockledge II.

Register your child to attend these events and others through the NIH Take Your Child to Work web site: <http://takeyourchildtowork.nih.gov/>.

The NIH rocket boy story is posted on a new CSR web page at [www.csr.nih.gov/history](http://www.csr.nih.gov/history). 