

nih record



ABOVE • A dedicated cadre of NIH'ers play pickup games of soccer at lunch time. See story, more photos on p. 12.

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Kiecolt-Glaser Offers New Paradigm on How Stress Kills

By Belle Waring

The idea that the mind affects health and illness is thousands of years old, but only in recent decades have scientists tracked down the data.

Now Ohio State University's Dr. Janice Kiecolt-Glaser is adding to the growing evidence on the health consequences of stress. In her talk "How Stress Kills: New Perspectives on Stress and Inflammation," she offered recent findings to a packed house in Lipsett Amphitheater.

"She has done seminal work in a field with a long name," said NIDCR's Dr. Nadya Lumelsky in her introduction. That field is psychoneuroimmunology, the interdisciplinary study of brain, mind and immune system. "There was lots of anecdotal evidence, but Dr. Kiecolt-Glaser has shown a causal relationship between stress and other diseases."

A clinical psychologist, Kiecolt-Glaser collaborates with her husband, virologist Dr. Ronald Glaser, at OSU's Mind/Body Center, and has received support for 3 clinical



Dr. Janice Kiecolt-Glaser

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Guests fill Stone House entryway for party.

Fogarty Center Celebrates 40th Birthday

By Ira Allen

The Fogarty International Center celebrated its 40th anniversary with an open-house birthday party at Stone House for more than 500 NIH staff, featuring a blue Earth-shaped chocolate

cake—a global favorite—and memories of the man for whom the center was named.

In his 20 years as chairman of the House subcommittee that funded what is now HHS, Rep. John E. Fogarty (D-RI) had a vision to create a more peaceful world by sharing biomedical research discoveries with other nations. But he died in office before the dream of a "Health for Peace" institute could be realized.

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Determined Woman Finds NIH 'Colossus' Conquerable

By George Strait Jr.

A recent conference on diabetes and obesity health disparities held at Natcher Conference Center was notable on a number of fronts. It had a unique scientific focus and was co-chaired by a remarkable young African-American researcher.

The focus was on understanding a health care systems approach—epidemiology, adults, children, adolescents and organizations—to find ways to eliminate health disparities. The cochair was Dr. Giselle Corbie-Smith, an associate professor at the University of North Carolina School of Medicine.

Corbie-Smith is a determined risk-taker. Eliminating health disparities is both a passion and her career. She says it began with a series of anecdotal observations. "In 1995, when I was a resident at Yale, I was struck by the differing levels of care patients received in my hospital. It seemed to occur because many of the

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briefs

NCI Cohosts Meeting on Biomedical Informatics, Sept. 2-3

Biomedical Informatics Without Borders, a joint conference of the National Cancer Institute and the U.K. National Cancer Research Institute, will be held Sept. 2-3. Organized by the NCI cancer Biomedical Informatics Grid (caBIG) initiative and the NCRI Informatics Initiative, the meeting will highlight global grid initiatives and tools that are changing the biomedical research landscape through shared data, technologies and collaboration. There will be sessions for both technical and scientific audiences. Whether your focus is biomedical informatics development or the use of these tools for basic and clinical research problems, you will find resources and potential collaborators to help you work more effectively. The meeting will be held at the Hyatt Regency Bethesda. For more information and to register, visit <https://cabig.nci.nih.gov/nci-ncri-2008conference>. Registration is free and open to the public.

Principles of Clinical Pharmacology Course

The Principles of Clinical Pharmacology course, sponsored by the Clinical Center, will begin in Lipsett Amphitheater, Bldg. 10 on Sept. 4. The course will be held Thursday evenings from 6:30 to approximately 7:45 and will run through Apr. 23, 2009.

The course, now in its 11th year, covers topics such as pharmacokinetics, drug metabolism and transport, assessment of drug effects, drug therapy in special populations and drug discovery and development.

Registration is open to all interested individuals at no cost unless the course is being taken for graduate credit. The course may be taken for credit through FAES as PHAR 500 I and PHAR 500 II; contact FAES directly at (301) 496-7976. Deadline for registration is Aug. 22. Certificates of participation will be awarded at the end to all students who attend 75 percent of the lectures. More information is available at www.cc.nih.gov/training/training/principles.html or by calling Donna Shields, (301) 435-6618.

Online Privacy Awareness Course Is Mandatory

Let's say you're asked to travel to a conference to give a speech. While hailing a cab at the airport, you lose sight of your luggage and realize your government-issued laptop has been stolen. A dozen thoughts race through your mind about whether you safeguarded the property you were entrusted to protect and whether you have now

exposed yourself to legal liability with the potential loss of data stored on the laptop. To help educate you on protecting privacy, NIH has begun online privacy awareness training. The required course provides valuable knowledge of your responsibilities to protect all forms of personally identifiable information. You will also learn what you can do to lessen harm in the event of a breach. Visit <http://irtsectraining.nih.gov>. If you have questions about the requirement, contact your privacy coordinator at http://oma.od.nih.gov/about/contact/browse.asp?fa_id=3.



Rare Sparrow Visits NIH Animal Center

A rare Henslow's sparrow was recently detected at the NIH Animal Center in Poolesville. "It was first heard sometime in early June and may be a single male looking to attract a mate," said Lonnie Darr of the Office of Research Facilities. "I visited the site on June 18 and heard the call several times (it calls constantly) but I did not see the bird. This is quite a rare bird to have here during mating/ breeding season. It depends on tall grass fields and those are at a premium in this area. Its range is now long grass fields from Ohio west to the Mississippi. It is believed that the species may only have 50,000 individuals in North America." NIH halted all pasture mowing in the area to protect the rare bird, whose presence was confirmed by others. "We will continue to monitor the bird(s) and will not resume pasture mowing in those fields until we are sure the nesting season has passed and any young have fledged," said Lynn Mueller, NIH grounds maintenance chief.

PHOTOS: BILL HUBICK





The Center for Scientific Review has shortened the review cycle for new investigators submitting R01 applications. The schedule change benefited both Dr. Paul Thompson of the University of South Carolina and Dr. Megan McEvoy of the University of Arizona.

Shorter Review Cycles at CSR Help Some New Researchers

By Don Luckett

“I was virtually broke, so I had to have the money,” said Dr. Paul Thompson, describing the pressures he felt having to resubmit his first R01 grant application. Dr. Megan McEvoy felt different pressures. “My tenure clock was ticking,” she explained.

The Center for Scientific Review has shortened the review cycle for new investigators submitting R01 applications. Since 2006, these applicants receive their scores and critiques within 10 days of the review meeting. And since September 2007, CSR has accelerated these reviews so new R01 applicants can resubmit their applications in the next review round instead of being forced to wait out a round.

Both McEvoy, from the University of Arizona, and Thompson, from the University of South Carolina, were in tight spots: Their previous applications were unscored and they were running out of time. But they both had reasons to be optimistic and resubmitted in the next round.

“My main problem was making it clear why what I wanted to do was important and a good way to approach it...That’s something that can be addressed on a short time scale,” said McEvoy. Thompson explained his situation: “The reviews overall were quite positive...and my chair and my mentor both said, ‘I think you should just try to turn it around.’”

Both Thompson and McEvoy did well in the following reviews and are now funded.

“I don’t think everybody should do it,” cautioned Thompson. “You have to look at your reviews and make sure that the comments are addressable and not just go in just to go in.” NIH encourages applicants who have questions

to discuss them with their program officer. Of the new investigators given the opportunity, between 10 percent and 13 percent resubmit their R01 applications in the next round.

NIH is currently finalizing a qualitative and quantitative evaluation of these shorter review cycles; the results of this study will guide efforts to shorten review cycles for other applicants.

Some established applicants, however, haven’t waited. CSR now holds its review meetings and posts summary statements earlier than before. Thus, many applicants can resubmit in the next round, and about 100 take advantage of this opportunity each round. “It makes a huge difference,” said McEvoy. “I go up for tenure this summer.”



NIAID, China Ink Collaboration Plan

On June 19, Dr. Anthony Fauci (l), director of the National Institute of Allergy and Infectious Diseases, and Prof. Hongguang Wang, director general of the China National Center for Biotechnology Development, signed an implementation plan to expand research collaboration on infectious diseases and immunology. After the signing, Wang presented Fauci with a toy giant panda, which is the national animal of China.

ANNIVERSARY

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Helping cut the cake at FIC's 40th birthday party are Amy Porter, executive director of the Foundation for NIH, and Dr. Roger Glass, FIC director.

OPEN HOUSE PHOTOS: MICHAEL SPENCER

Back in Fogarty's heyday, Congress was much less partisan than today, and he won the admiration and cooperation of many Republicans concerned with health issues. The power of appropriators was so great and Fogarty's likeability so wide that he single-handedly raised the NIH budget from \$37 million to \$1.24 billion during his chairmanship.

That he was such an ardent health research advocate might not be expected from his background. Born in Providence, R.I., Mar. 23, 1913, Fogarty finished high school and, like his father, became a bricklayer. Within 10 years he was president of the statewide union.

Elected to Congress in 1940 at age 27, he won appointment 7 years later to the House appropriations committee and its subcommittee that controlled spending for NIH and other agencies in the old Department of Health, Education and Welfare.

Two years later he became the subcommittee's youngest chairman and devoted himself to the task of dismantling the brick wall of congressional resistance to spending on health research.

Unusual for this day, or any day, he would badger friendly witnesses from NIH at budget time about why they were not asking for more money. The answer was that they were dutifully defending the request of the President, their ultimate boss. The result? A lot of money. Usually a lot more than the President had requested.

In addition to promoting research throughout his congressional career, Fogarty consistently urged funding for people with disabilities, both mental and physical, as well as for medical libraries.

By 1963, he was dreaming of "a great international center for research...dedicated to international cooperation."

He died suddenly on Jan. 10, 1967, at his office desk while preparing to re-introduce such legislation; 18 months later President Johnson created the John E. Fogarty International Center.

After his death, the *New York Times* editorialized: "No one in the history of this country has done more to promote more and better health services, more and better health facilities and more and better health research than Representative Fogarty."

Fogarty was prescient in arguing the needs and rewards of global health research a half century ago. Today, the center is extending his vision in a world made smaller and more interdependent by international trade, travel and the Internet.

From a starting budget of \$500,000 to \$67 million today, the Fogarty Center supports more than 5,000 researchers in more than 100 countries.

It trains foreign scientists here and in their own countries with the aim of helping them strengthen their own national research capacity and trains American pre- and postdoctoral students here and abroad with the aim of learning from and with others.

NIH involvement is essential, Fogarty director Dr. Roger Glass told visitors. "It is one of the most effective means for our nation to help enable scientists in less developed countries create the knowledge, institutions and relationships required for health improvement and economic development."



Historic House Is Site of Fogarty Offices, Birthday Party

Stone House, the site of the Fogarty 40th birthday party, is known formally as the Lawton Childes International House, and by the facilities people as Bldg. 16.

That a building made of stone would house Fogarty conferences and offices would have given the center's namesake, Rep. John E. Fogarty, (D-RI) a laugh, as he began his career as a bricklayer.

The site was part of a land grant to Robert Peter, who came to America from Scotland in about 1745. The designer of the residence, Walter G. Peter, was a noted Washington architect, and it was built as a family residence in 1930 by his brother, the Rev. George Freeland Peter, a canon of the Washington Cathedral.

The government acquired the estate in 1949 to provide space for an expanding NIH.

With its locally quarried bluestone and two-story

Corinthian columns, the house exemplifies the Colonial Revival estates that once lined the road between Bethesda and Rockville.

The three levels encompass nearly 17,500 square feet. Over the years, various alterations have been made to accommodate the house's changing functions.

On the main floor, the former living room now extends the length of the South Wing, with French doors opening onto a spacious veranda and formal garden. Today, the room is used for conferences, seminars and receptions.

Leading from the main to the second level of offices is a freestanding, elliptical stairway with a mahogany railing. Also on the main level are a drawing room, dining room, library and kitchen.

From 1970 to 1978, scholars—including Margaret Mead, Albert Sabin, four Nobelists and several Lasker winners—lived on the second floor, which had 7 bedrooms and bathrooms, a maid's room, a morning room, a sitting room and a sewing room. ❶

Bakos Named Chief of NCI Training Branch

Dr. Alexis D. Bakos has been named chief of the Diversity Training Branch (DTB), NCI Center to Reduce Cancer Health Disparities. She will coordinate DTB programs designed to improve the diversity of the cancer research workforce through training, career development, cancer education and community outreach. She previously was a program director at the National Institute of Nursing Research, where she worked on such issues as end-of-life/palliative care and informal care-giving and long-term care. She also chaired the end-of-life scientific interest group. Bakos received a B.S.N. and M.S.N. from Catholic University School of Nursing, an M.P.H. with a concentration in epidemiology from George Washington University and a Ph.D. in nursing from Johns Hopkins University. She also did 3 years of postdoctoral training as a cancer prevention fellow in NCI's Division of Cancer Prevention. She served on the U.S. House of Representatives select committee on aging as a Congressional Black Caucus Foundation fellow, is certified in gerontological nursing from the American Nurses' Association and is a member of Sigma Theta Tau International Nursing Honor Society.



Clinical Center Lab Dedicated to Memory of Technologist Carter

The Clinical Center's department of transfusion medicine (DTM) on June 18 dedicated the Charles S. Carter Cellular Therapy Laboratory within its cell processing section.

Carter, who died in 2006, co-founded the cell processing laboratory and worked as a biologist, technologist and supervisor in DTM for 24 years. The words engraved on his plaque describe him as "a wizard in the laboratory with an uncanny ability to grow cells in culture and a special affinity for medical instrumentation. His career was marked by energetic, innovative practical thinking," as well as a devotion to CC patients.

Only a handful of NIH laboratories or conference rooms are dedicated to individuals, according to DTM chief Dr. Harvey Klein. "A lab is more than just the walls, benches and equipment within it. A lab is also the people who work there and their spirit," said Klein. "Even those working in this lab today who never knew Charley are imbued with his spirit of creativity."

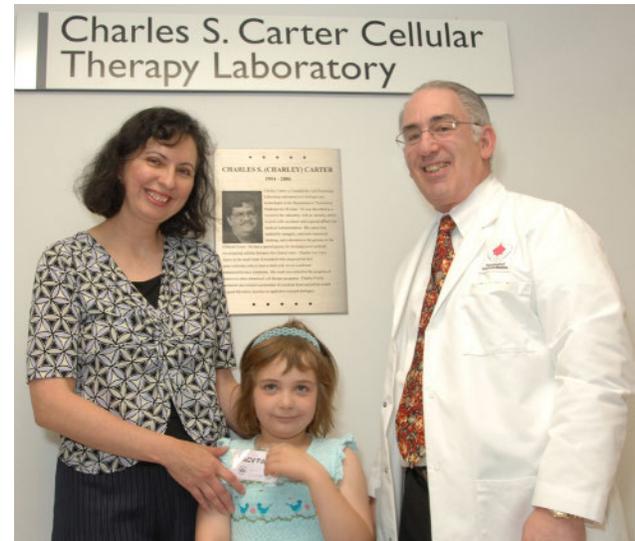
DTM hired Carter as a lab technician in 1982. According to a former staffer, he was "recognized early on as one of the most skilled and innovative developmental technologists in our field" who usually chose to develop a new procedure rather than rely on one previously used by a colleague.

Carter had a special genius for devising novel methods for preparing cellular therapies for clinical trials. He was a key figure in a small team of scientists who prepared the first gene-corrected cells to treat a child with severe combined immunodeficiency syndrome.

His work was critical to the progress of numerous other intramural cell therapy programs such as gene marking and gene therapy trials with investigators from several ICs.

In his lifetime, Carter authored or coauthored more than 75 publications on investigative methods for cell collection, *ex vivo* processing and preservation and characterization and testing of cell therapy products. He received both the Clinical Center Director's Award and the NIH Director's Award.

Several members of the Carter family attended the dedication, including Carter's widow Laura, a medical technologist in FDA's Laboratory of Cellular Hematology; his daughter Kate, his mother Marjorie May Carter and two brothers. ❷



Top:

On hand at the unveiling of the plaque dedicating the new Charles S. Carter Cellular Therapy Laboratory are (from l) Laura Carter, Charley's widow; Kate Carter, his daughter; and DTM chief Dr. Harvey Klein.

Bottom:

Carter's colleagues and friends line the hallway around the lab to be present at the dedication.

STRESS

CONTINUED FROM PAGE 1

trials from NCI, NCCAM and NIA. She was invited to speak by NIDCR as part of its translational seminar series.

How do scientists prove the effects of stress on health? One path is to follow the cytokines, among the most crucial proteins in the body. Cytokines, including the interleukins, carry messages vital to immune response. Part of that response is inflammation. As one of the body's normal defenses against infection, injury, irritation or surgery, inflammation is not the same as infection. And acute inflammation is not the same as chronic.

"We need good inflammation," said Kiecolt-Glaser, "because cytokines attract immune cells. With acute inflammation, good things happen. With chronic inflammation, you have troubles, because of its association with tumor cell survival" and other harms.

It's an intricate process. Imagine tumbling down a ladder in a cascade of negative effects:

- Chronic stress can cause immune dysregulation.
- This dysregulation causes increased risk of disease.
- And that risk in turn increases the proinflammatory cytokines, including interleukin-6 (IL-6).

Kiecolt-Glaser's studies show that "you can skip all the steps and go directly from stress to cytokines."

Some highlights on how chronic stress affects health:

- Chronic stress substantially accelerates age-related changes in IL-6, a cytokine linked to some cancers, cardiovascular disease, type II diabetes, osteoporosis, arthritis, frailty and function decline. "It's a new paradigm," Kiecolt-Glaser said. "Cholesterol and the immune system work together to cause heart disease and stroke."
- At 71 or older, age interacts with stress, and "the older you are, the more stress really matters." It impairs vaccine responses in older adults.
- Turning to the young: When dental students on vacation were compared to those taking "a particularly dreaded exam—immunology," no student healed as rapidly during exams. Oral wound-healing took them 40 percent longer.
- Personal relationships influence immune/



endocrine function and health. Hostile couples' wounds healed more slowly after conflict.

- Women show larger response to interpersonal stress.
- In caregivers (for example, spouses caring for their aging/ailing mates) the average rate of increase for IL-6 was about 4 times larger than that of non-caregivers.

"What happens when caregiving ends?" an audience member queried.

"Normal bereavement decreases after 2 years," said Kiecolt-Glaser. "It doesn't create a change in mood, long term."

But for those exhausted by extended caregiving, "they lose part of their social networks, becoming increasingly depressed. You lose part of your life."

A vicious cycle takes hold. "Patients with major depression will have even more depressive symptoms. The stressed get more stressed, serving as substrate for more inflammation. They are primed to respond more strongly to subsequent challenges."

And although we know we're supposed to take care of ourselves, "what we tend to do is to turn to high-fat diet, less exercise, poor sleep and smoking," she said. "Stress promotes poor health behaviors...and sleep is one of the first things to go. If you didn't sleep well last night, your IL-6 is higher today."

Meanwhile, "Adipose belly fat secretes as much as three times the level of IL-6. Those fat cells act like little IL-6 factories."

Right:

Chronic stress increases proinflammatory cytokines, says OSU's Kiecolt-Glaser.

PHOTOS: ERNIE BRANSON

Moderate physical activity can help attenuate inflammation, she said. “Of course, when you’re stressed, that’s the last thing you want to do.”

Kiecolt-Glaser is also investigating the ability of omega-3 fatty acid supplementation to alter mood and inflammation.

There is, of course, good fat and bad fat. The history of dietary changes, along with epidemiological evidence, shows that “countries that eat more fish are better off,” she said. Also healthful are fish oil, walnuts, wheat germ and flax seed.

There is also the correct ratio of different types of fatty acids—in this case, omega-3 and omega-6. That ratio is implicated in depression, cardiovascular disease and inflammation.

“This is nutritional neuroscience and psychoneuroimmunology: interdisciplinary science at the crossroads,” she said. Depressive symptoms interact with diet to enhance inflammation. During Q&A, an audience member asked: When it comes to the stress of caregiving, does the individual have any control?

A big theme is the lack of control, she said. Changes in a spouse’s health status can be unpredictable and are some of the worst stressors, since treatments can be “hard to implement in real life.”

Her ongoing work includes how mind-body interventions such as yoga may modulate endocrine and immune responses. 📌

NIDDK’s Gallivan Honored by Dietetic Association

Joanne Gallivan, director of NIH’s National Diabetes Education Program, has been named the sole recipient of the 2008 Excellence in Practice Award in Community Dietetics from the American Dietetic Association. The award is one of the highest given by the 65,000-member organization and recognizes Gallivan for demonstrating innovation, creativity, leadership and significant contributions to the advancement of practice and leadership in nutrition-related organizations. Gallivan is a registered dietitian and member of NIDDK’s Office of Communications and Public Liaison. She will accept the award in October during the session, “The Diabetes Pandemic: The Role of the Dietitian,” at the association’s annual conference in Chicago.



ORWH Hosts National Women’s Health Week at NIH

National Women’s Health Week at NIH, sponsored by the Office of Research on Women’s Health, was a big success. New, convenient locations for publication distribution and special events contributed to attracting large crowds of NIH staff. The ORWH exhibit—centrally located in the Clinical Center 3rd-fl. bridge—included materials from all institutes and centers. More than 15,000 publications were given out and many people came back two or three times not only to pick up more materials, but also to ask ORWH staff questions about women’s health research.

ORWH also joined the NIH Division of Police for a “Safety Celebration” in recognition of National Police Week and Women’s Health Week. Hundreds of hungry NIH’ers lined up for BBQ and visited the ORWH booth to ask questions and gather health materials.

Also unique to this year’s events, ORWH and the coordinating committee on research on women’s health sponsored an NIH Community Forum, “Seeking New Dimensions and Strategies for Women’s Health Research: Recognizing the Contributions of Our Bodies, Ourselves,” in Lipsett Amphitheater.

Forum attendees were welcomed by a written statement of continued support from U.S. Sen. Barbara Mikulski (D-MD). The guest speaker was Dr. Anne S. Kasper, contributing author of the groundbreaking book *Our Bodies, Ourselves*, founding member of the U.S. Women’s Health Movement and organizer and chair of the Maryland Women’s Coalition for Health Care Reform. NIH staff and visitors from women’s health advocacy organizations discussed past, present and future roles of advocacy organizations in setting priorities for women’s health research.—Marsha Love



Top 1: NIH’ers peruse health materials offered at a CC exhibit sponsored by ORWH.

Above: ORWH director Dr. Vivian W. Pinn (l) and guest speaker Dr. Anne S. Kasper meet at an NIH Community Forum.

CORBIE-SMITH

CONTINUED FROM PAGE 1

Right:

For Dr. Giselle Corbie-Smith, an associate professor at the University of North Carolina Medical School, eliminating health disparities is both a passion and her career.

doctors did not know how to communicate or relate to poor patients.

“Most of the literature blamed the victims,” she said. “The reason many [patients] had inferior outcomes was because they didn’t do what their doctors told them to do. And the major reason why more African Americans and other minorities were not in clinical trials was that they refused to participate.”

In Brooklyn, where Corbie-Smith grew up, more kids seemed to go to prison than to college. With support from her family and teachers, she ended up at Cornell University and later Yale School of Medicine. Her professors called her a rising star, but when she told them she wanted to do health disparities research many were not especially encouraging.

“She was a good doctor and effective teacher,” said Dr. Ralph Horowitz, her chief of medicine at the time, “but she was not prepared to pursue research. She didn’t have the background to be competitive, but she was driven and persistent.”

Horowitz, now at Stanford University, took a chance on her. NIH had begun a program to diversify its cadre of funded researchers. Horowitz advised Corbie-Smith to apply for the new diversity supplement grant and to study the recruitment patterns in a trial he was conducting on how estrogen affects the stroke risk of menopausal women.

“The process helped her understand the rigor and creativity needed to be a good researcher,” said Horowitz. “In addition, it helped her understand how to distill information and frame a research question to capture the attention of reviewers.”

She got the grant and her research found that minority women in the estrogen trial participated at about the same rate as non-minority women. The reason was researchers were embedded in the community and had established a good rapport with local doctors.

“What the experience really did,” said Corbie-Smith, “was enable me to hone my research skills and broaden my relationships inside and outside medicine.”

She began asking questions such as: can you measure the degree to which trust and distrust affect participation in research among minorities? What are the methodological and ethical issues involved in the inclusion of minorities

in research? What approaches to alleviating health disparities work best in which communities?

However, as happens with many minority scientists, answering these questions—pursuing her dream—became problematic.

“My medical training left me with so much debt,” said Corbie-Smith, “that I faced the possibility of having to moonlight in hospital clinics which would mean abandoning my research just as I was beginning to get answers to some vexing questions.”

Two NIH programs kept her dream alive. The Loan Repayment Program at the National Center on Minority Health and Health Disparities relieved the pressure from her medical school debt and a K grant from the National Heart, Lung, and Blood Institute allowed her to spend 75 percent of her time conducting research.

“In NIH-supported research there is often a paradox,” said Dr. Nathaniel Stinson, acting director, Office of Scientific Programs, NCMHD. “In order to be most competitive to get a grant you have to have a history of obtaining such support. The LRP and K grants are great vehicles to begin that process.”

With those grants, Corbie-Smith moved to UNC where her research took off. New NCMHD grants helped her bring UNC and Shaw University, a small historically black school, together to create an NCMHD Center of Excellence. Among other things, the center is working with African-American churches to develop effective academic-community research partnerships.

In 2003, Corbie-Smith achieved the NIH gold standard, an R01 award that she won on her first try. With that she created Project LeARN, which examines the perceptions, mistrust and other concerns of African Americans about participating in genetic research. This is crucial information because a large and diverse group of research participants is important to the Human Genome Project’s next phase—developing tools for understanding genetic variation and disease expression.

In 2006, Corbie-Smith received her second R01 award to support a project that increases access to HIV trials for rural minorities. One strategy uses a mobile van to bring prevention materials and the latest treatment options to this popula-



tion. Use of a van in this context was a result of her earlier work that identified transportation as a barrier to care among the underserved in rural communities.

As that project moved forward, Corbie-Smith received an NCMHD grant to fund Project GRACE, an academic-community partnership addressing the social and behavioral factors contributing to the spread of HIV in poor rural communities.

“From her very first grant, Giselle has created a pathway that she has marched down with increasing success,” said Horowitz. “It is an investment that continues to pay dividends.”

“The NIH can seem like an impenetrable colossus,” said Corbie-Smith, “but if my career shows anything, it demonstrates that the hurdles you face are not as high as they seem if you are well prepared, willing to take risks and are diligent in seeking out those who can help you the most.”



NICHD Advises Surgeon General's Conference

NICHD served as the scientific lead for the Surgeon General's Conference on the Prevention of Preterm Birth. Shown are (from l) NICHD director Dr. Duane Alexander, acting Surgeon General Steven K. Galson, a rear admiral in the Public Health Service, and Dr. Jennifer L. Howse, president of the March of Dimes Birth Defects Foundation. Nearly half a million babies in the United States are born preterm and this number continues to rise. Preterm birth is a major cause of infant death and places infants at risk for serious lifelong disability. Under a congressional directive, experts convened by NICHD developed a research agenda to “speed the identification of, and treatments for, the causes of and risk factors for preterm labor and delivery.” The agenda calls for a national system to more closely track the occurrence of preterm birth and a national education program to help women reduce their chances of giving birth prematurely. Next, Galson will examine the conferees' findings to determine how to best move forward and will consider how these findings relate to ongoing efforts in the field.



Milford “Jiggs” Myers shows his daughter Karen Stakes and grandson Keith Stakes the sign he created in 1965.

Three Generations at NIH

Milford “Jiggs” Myers, worked at NIH as the landscape architect and chief of the grounds maintenance and landscaping section from 1956 to 1970. A World War II Army Air Corps pilot and Penn State graduate, Myers created the original “Your feet are killing me” sign to protect the NIH lawns. This sign appeared in newspapers across the country. He also planted the “Tree of Hippocrates,” which was a gift from the Greek ambassador, and is located on Center Drive, across from the National Library of Medicine.

Myers' daughter, Karen M. Stakes, a University of Maryland graduate, is a librarian and head of Information Services at the NIH Library. She said she feels extremely fortunate to work with such dedicated staff. Prior to coming to NIH in 2005, Stakes worked at the Parklawn Health Library, HHS, in Rockville for 32 years and was director from 1998 to 2004. She began her federal career in 1973 as a clerk typist at the National Library of Medicine.

Stakes' son Keith began working at NIH in the summer of 2007 as a high school student with the Division of the Fire Marshal. This is his second summer as a fire protection aide. Keith said the experience he is gaining will be a tremendous asset for his future studies. He will be entering the University of Maryland in the fall, majoring in fire protection engineering. He is also a volunteer firefighter and EMT with the Bethesda Chevy Chase Rescue Squad.

If you know of other three-generation families employed at NIH, contact the NIH Record staff.



Dr. Madeline R. Turkeltaub of NIAMS's Division of Extramural Research Activities died June 21, leaving behind considerable scientific and personal achievements.

NIAMS Mourns Extramural Director Turkeltaub

Dr. Madeline R. Turkeltaub, director of the Division of Extramural Research Activities at the National Institute of Arthritis and Musculoskeletal and Skin Diseases, died of cancer on June 21. Much beloved by her family, institute colleagues and many other professionals and friends, she leaves behind a considerable scientific and personal legacy.

"Maddy was a critical part of the institute's executive group and provided expert advice on so many things," said NIAMS director Dr. Stephen Katz. "It was her tremendous experience in many areas, good sense and great judgment that underlay her abilities. She was also an extraordinarily warm and bright person who loved life and loved work."

Turkeltaub joined NIAMS in 2004 as its clinical research project manager and in 2006 became deputy director of the Extramural Program. After a recent reorganization of the program, she was named director of the Division of Extramural Research Activities. In this position, she played a major role in managing activities between the extramural science divisions and the grants and scientific review branches. She also worked closely with the NIH Office of Research on Women's Health. Before coming to NIAMS, she held nurse consultant and public health analyst positions at the Health Resources and Services Administration.

A long-time nursing professional and mentor to many, Turkeltaub distinguished herself in academic, management and health care delivery positions. During the course of her career, she was assistant professor for adult primary care at the University of Maryland, director and professor of the nursing program at Montgomery College, assistant professor of nursing at Bowie State College, and professor of nursing at Prince George's Community College. She also held senior posts at Collingswood Nursing and Rehabilitation Center and Suburban Hospital and maintained a nursing practice since the 1980s.

Turkeltaub was a 9-year member of the Maryland board of nursing and its president for 2 years. She was also president of the Maryland Nurses Association from 1997 to 1999, chair-

man of the Montgomery County commission on health from 1996 to 2002, and a fellow of the American Academy of Nursing. In addition, she was familiar to many as the host and moderator of *Healthier Living*, a Washington-area cable TV show for which she won an award in 1996 from the Maryland Public Health Association.

An author of over 20 nursing and other publications, Turkeltaub was the recipient of several NIH Merit Awards and HRSA citations, and received the NIH Director's Award posthumously on July 21. She received her doctorate in higher education administration and curriculum development from the University of Maryland, a master's degree in nursing from the University of Pittsburgh and a bachelor's degree in nursing from Long Island University.

"Maddy's *joie de vivre*, positive attitude, commitment to others and love of people are a rare combination of attributes in any person," said Katz. "We will all miss her."

Turkeltaub leaves behind her husband of 42 years, Dr. Paul Turkeltaub; two children, Seth and Alyssa; her parents, George and Evelyn Katz; a sister; and five grandchildren.

Retired Veterinarian Lock Is Mourned

Veterinarian Dr. Allan Lock of Bethesda passed away on July 22. A memorial service will be held at St. Francis Episcopal Church, 10033 River Rd., Potomac, MD 20854 on Saturday, Aug. 9 at 11 a.m. He is survived by his wife Katherine of Bethesda; his daughters Cynthia Lock Tregillis of Manhattan Beach, Calif., and Diana Lock Yeo of Los Angeles; his son Christopher of Huntington Beach, Calif.; two sisters, Jennifer Lim of Port St. Lucie, Fla. and Jean Mar of Los Altos Hills, Calif.; one brother, Alexander, of Sunnyvale, Calif.; two grandchildren; three nephews and two nieces; and other relatives.

A native of San Francisco, he retired in 2005 after nearly 30 years at NIH. He was also a veteran of the U.S. Army and a commissioned officer in the Public Health Service for 30 years. The family suggests memorial donations to the Jeffrey Modell Foundation, 747 Third Ave., New York, NY 10017, (866) INFO-4-PI, <http://www.jmfworld.com>. ●





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

Dry Mouth

Do you have dry mouth after treatment for head and neck cancer? Participate in an NIH clinical research study.

Asthma Study

NIH is seeking adults 18-75 years old with asthma to participate in a research study. Compensation is provided.

Blood Count Study

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

Study of Fibroids

Women ages 25-50 suffering with fibroids are asked to consider participating in an NIH study. Compensation is provided.

Allergies in Children

NIH Pediatric Clinic offers allergy and asthma care (ages 6 months to 18 years) and is also conducting an allergy and asthma study.

Are You a Working Breast Cancer Survivor?

Women breast cancer survivors, 1 to 10 years after primary cancer treatment, whose breast cancer has not spread and women without cancer history are needed for online study on cognitive function and work. Must be currently working full-time, ages 18 through 65, and without a history of adult ADHD (prior to cancer), dementia, brain injury, epilepsy, drug or alcohol abuse. You will need Internet access with connection speed faster than dial-up. Study includes completing questionnaires and a short online test of memory. The study will take about 60-75 minutes to complete. To see if you are eligible for the study, go to <http://cim.usuhs.mil/cancerstudy>. For more information, call Lisseth Calvio at (301) 295-9660 or email cogworkstudy@gmail.com.

Postpartum Depression Study

NIMH is seeking moms who have given birth in the last 6 months and who are experiencing: low mood, sadness, or crying spells; anxiety or excessive worrying; difficulty bonding with your baby. We are conducting research studies to understand the role of your hormones in the treatment of postpartum depression. Study includes thorough evaluations and study medication at no cost. Participants should be medically healthy and not currently taking any medications. Call Linda Simpson-St. Clair, (301) 496-9576 (TTY 1-866-411-1010).

Ever Have Postpartum Depression?

If you have a history of postpartum depression (PPD) following the birth of any of your children, consider participating in a PPD study with NIMH. The study seeks to examine if your PPD was caused by hormonal changes during or after pregnancy. The study is recruiting female participants between the ages of 20-45 years old. Call Linda Simpson-St. Clair, (301) 496-9576 (TTY 1-866-411-1010).

Veteran NIEHS Researcher Dies Unexpectedly

By Eddy Ball

NIEHS chemist Dr. Colin Chignell died unexpectedly July 16 at age 70 in a drowning accident near North Myrtle Beach, S.C., while on a family vacation. An NIH employee for 42 years, he was a principal investigator in the



Dr. Colin Chignell

PHOTO: STEVE MCCAWE

photosensitization reactions group in the NIEHS Laboratory of Pharmacology at the time of his death. He is survived by his wife, two children and two grandchildren.

After receiving his Ph.D. in medicinal chemistry from the University of London in 1962, Chignell came to NIH as a visiting fellow. He served as one of the first National Institute of General Medical Sciences research associates in pharmacology and toxicology, a position he held from 1962 to 1965. Afterwards, he was a research pharmacologist in the molecular pharmacology section, Pulmonary Branch, National Heart, Lung, and Blood Institute prior to joining NIEHS in 1977.

Chignell published more than 220 peer-reviewed articles in leading biomedical journals, as well as more than 30 book chapters and reviews. Among his many honors, he was awarded the John J. Abel prize by the American Society for Pharmacology and Experimental Therapeutics. He was recently named an associate editor of the *Journal of Photochemistry and Photobiology*.

Chignell was respected and well-liked among his colleagues at NIEHS for his transformative research and collegial manner. NIEHS acting director Dr. Sam Wilson described the impact of Chignell's contributions to the institute's mission: "Throughout his long and productive career, Colin was committed to the pursuit of scientific excellence, and he was an important part of the extraordinary research team here at NIEHS. He will be missed by his many friends throughout the scientific community."

NIH'ers Use Lunch Hour for Soccer

By Ayo Fawibe

At about 11:45 a.m. each workday, Dr. Yun Ge hops on his bicycle to fulfill a daily routine, playing soccer during his lunch hour on a field adjacent to parking lot 41 on the southwest side of campus.

A postdoctoral fellow at the National Cancer Institute, Ge came to the United States from China several years ago. He has since discovered the lunchtime soccer game, which he has been playing for about 2 years now.

At about mid-day, Monday through Friday, a group of 10-20 men assemble from different corners of campus and split into two teams to engage in 30 minutes of competitive soccer. This scenario has repeated itself for about 8 years, as the pioneer members told Ge.

Ge discovered that lunchtime soccer began with about four players just kicking the ball around. Over the years, the game has attracted more participants, most of them from soccer-playing nations like China, Nigeria, Ethiopia, Russia, El Salvador, South Korea and Mexico. Players say at least seven languages can be heard on the pitch on any given afternoon.

Playing soccer 5 days a week is a lot of sacrifice, Ge admits, but he's quick to say that invaluable health benefits accrue from his daily workouts. He adds that playing lunchtime soccer is the best time to enjoy the game and overcome the temptations of the dining table.

At 35, Ge's commitment to lunch-hour soccer is evident in his physique—he looks fit enough to pass for someone playing Major League Soccer. Ge said that although he never played pro soccer, he did make the team during his school days, including his graduate program.

Ge also described the NIH games as a good way to meet new people and make new friends. According to him, the forum brings together people from different backgrounds whose overriding interest is to maintain good health.

Ge says the men play year-round, except in extreme conditions like heavy snow or rain. "We have found ourselves playing under light rain and snow showers. We play throughout winter and summer, even when it's over 100 degrees."



Top:

The action is nonstop during the noon-hour pick-up soccer matches near parking lot 41.

Above:

At left, NCI's Dr. Yun Ge gets ready to play. At right, players swarm the ball.

Below:

You can use your feet or your head in impromptu soccer games, but only goalies can use their hands.

PHOTOS: BELLE WARING

