Science in the Court

NHGRI Scientists Present Genomic Advances to Visiting Judges
By Raymond MacDougall

America’s state and federal courts experience constantly evolving developments in science and technology, resulting in a higher degree of case complexity, novel forms of evidence and entirely new areas of law. In June, 60 judges from across the country came to NIH to participate in a continuing education program about genomics, one area of science now affecting criminal and civil cases.

Titled “Genomics, Medicine and Discrimination,” the 4-day program was created by the National Human Genome Research Institute and the Advanced Science and Technology Adjudication Resource (ASTAR) Center, a judicial education entity affiliated with court systems, supported by the U.S. Department of Justice and headquartered in Washington, D.C.

The intensive lectures and tours at NIH spanned topics from genes and how they work...
Help Feed Hungry Families

NIH’ers are asked to contribute to the 2010 Feds Feed Families summer food drive. Many families in our community are going hungry and local food banks are in need of non-perishable food items and toiletries. The federal government-wide goal for 2010 is to collect 1.2 million pounds of donated items.

A list of needed items is displayed on the promotional poster next to the collection bins. All employees are encouraged to bring in canned goods, hygiene products and other non-perishable nutritional items. Below is a listing of the food drive locations.

On campus locations include cafeterias in Bldgs. 1, 10, 31, 38 and 45; Bldg. 31 parking office (B3 level) and Bldg. 50 lobby.

Off campus bins are at 301 N Stonestreet Ave. lobby, 6001 Executive Blvd. cafeteria, 6100 Executive Blvd. lobby, 6120 Executive Blvd. lobby, 6700B Rockledge lobby, 10401 Fernwood lobby, Bayview lobby, Gateway Bldg. 2nd floor, 701 Democracy lobby and 2115 East Jefferson.

The collection boxes will be picked up by the Capital Area Food Bank on July 30 and Aug. 31. For more information, visit www.fedsfeedfamilies.gov.

‘Focus on You’ Wellness Lectures Continue

The “Focus on You” Wellness Lecture Series continues at Rockledge II, Conf. Rm. 9112 on Thursday, July 15 from 1 to 1:45 p.m. when physical therapist Robert Gillanders will discuss more exercises for employees who spend a lot of time at their desks. Wellness lectures will move to various locations each month including on- and off-campus sites. Sign language interpreters will be provided. Individuals who need reasonable accommodation to participate should contact Chris Gaines, Division of Amenities and Transportation Services, at (301) 451-3631 and/or the Federal Relay (1-800-877-8339). For more information visit http://dat.s.ors.od.nih.gov/wellness/lecture.htm.

APAO Marks Heritage Month with Ethnic Food Fair

The Ethnic Food Fair organized by the NIH Asian and Pacific Islander American Organization on May 26 as part of the Asian & Pacific Islander American Heritage Month observance was the 38th APAO food festival held on the Bldg. 31A patio. Several local restaurants offered Chinese, Indian, Korean and Filipino dishes. Ten percent of the proceeds from food and jewelry sales will be donated to the Children’s Inn at NIH. This year, representatives from other groups such as the Asian Pacific American officers committee, Philippine Nurses Association, Asian American Health Initiative, Rockville Go (chess) Club and NIDCD’s A Noisy Planet education campaign also staffed tables and shared information. In addition, the NIH Bone Marrow Donor Registry had four people sign up as donors. A Filipino dance performance (with costumes and live music) and a line dance were further highlights. Some participants were eager to try the traditional bamboo dance.

Folks line up for Filipino food from a local restaurant.

APAO’s Wilson Wins Kissel Award

Capt. Deborah Wilson (r), director of the Division of Occupational Health and Safety, Office of Research Services, accepts the Stanley J. Kissel, Jr. Health Services Officer of the Year Award from Surgeon General Regina Benjamin. The annual award was instituted in 1990 to recognize a health services professional whose career accomplishments and work performance have resulted in outstanding contributions to the health of the nation and to the PHS mission. The award was established in memory of Kissel who, at the time of his death on active duty in 1989, served as chief of the social work department at the Clinical Center.

Members of the Philippine Nurses Association (from l) Lt. Leorey Saligan of the Asian Pacific American officer committee and Desiree Ferraris-Araneta and Elenita Rivera of the Clinical Center enjoy a lunchtime event celebrating Asian heritage.
Kington Receives 2010 FASEB Public Service Award

The Federation of American Societies for Experimental Biology (FASEB) honored NIH principal deputy director Dr. Raynard Kington with its annual Public Service Award in recognition of his distinguished career and many contributions to the overall policy direction of the agency. The award recognizes individuals who have made significant contributions to biological and medical research through their work in government, public affairs, journalism, science policy or related fields.

Presenting the award, FASEB president Dr. Mark Lively noted that Kington earned the profound gratitude of the research community for the leadership he provided during the development, initiation and implementation of the American Recovery and Reinvestment Act (ARRA) programs. "ARRA presented challenges of scale, speed and scope, unlike anything that NIH had done before," said Lively. "Raynard Kington explained the new and unprecedented program to the extramural community and mobilized the entire NIH staff, who worked heroically to respond to the new mandates, develop new programs, review tens of thousands of new applications, make thousands of awards and surmount new regulatory hurdles."

Thanking FASEB, Kington said, "I accept this award on behalf of all of the National Institutes of Health staff." About ARRA, he added that it was "incredibly confident that there will be advances in knowledge directly related to the new investment in research." Kington encouraged scientists and institutions who received ARRA funds to educate the public about the projects that were funded and explain why they are important for improving the health of the American people. He also urged greater efforts to promote diversity of the scientific workforce and encouraged FASEB societies to begin a conversation about changing the fundamental business model of the biomedical research enterprise.

More than 100,000 members in 23 societies comprise FASEB, making it the largest coalition of biomedical research associations in the U.S.

Herpesvirus Expert Cohen To Lead NIAID Lab

Dr. Jeffrey I. Cohen has been appointed chief of the Laboratory of Infectious Diseases (LID) in NIAID's Division of Intramural Research. He has been an investigator in NIAID's Laboratory of Clinical Infectious Diseases since 1990. He earned tenure in 1994 and became chief of the lab's molecular virology section in 1997.

His recent work focuses on investigations of the molecular genetics, pathogenesis and clinical aspects of human herpesviruses, particularly Epstein-Barr virus, varicella-zoster virus and herpes simplex virus. He and his research group identify genes important for viral latency and infection, search for novel treatment compounds and develop candidate vaccines for herpesvirus infections.

Cohen earned his M.D. in 1981 from Johns Hopkins University and was an intern and resident in medicine at Duke University. He first came to NIAID in 1984, when he was a medical staff fellow in LID. After a clinical fellowship at Beth Israel and Brigham and Women's Hospitals in Boston, he served as an instructor at Harvard Medical School before returning to NIH.

As chief of LID, Cohen will lead one of NIAID's premier laboratories. LID was established in 1942 and has a distinguished history of viral pathogen discovery and vaccine development. Cohen takes over the position from co-chiefs Dr. Brian R. Murphy, who retired in April after 40 years at NIH, and Dr. Robert H. Purcell, who will remain as a section chief in LID.

Grantee Bertozzi Wins Lemelson-MIT Prize

NIGMS grantee and advisory council member Dr. Carolyn Bertozzi is the 2010 winner of the $500,000 Lemelson-MIT Prize. The award recognizes outstanding innovators and inspires young people to pursue creative lives and careers. According to the prize announcement, Bertozzi's work in chemical biology has advanced the biotechnology industry and revealed new ways to diagnose and treat a wide range of diseases. Her research, which is also supported by NIAID, focuses on understanding carbohydrates (glycans) on the surface of cells. The applications of this work range from cancer detection to tailor-making proteins for research or therapeutic purposes. To further develop some of these applications, she co-founded a company in 2008, which received an ARRA Challenge Grant. Among her many inventions are a cell nanoinjector, artificial bone materials, targets for tuberculosis therapy and cell microarray platforms. She is a professor at the University of California, Berkeley, and director of a nanoscience institute at Lawrence Berkeley National Laboratory. Bertozzi is the first woman to win the Lemelson-MIT Prize, which she received at MIT on June 18. She has won many other honors and awards including the MacArthur “genius” award, the Presidential Early Career Award in Science and Engineering and election to the National Academy of Sciences.

NIH Sailing Association Open House

The NIH Sailing Association will hold an open house on Sunday, Aug. 1 from 10 a.m. to 3 p.m. at the Selby Bay Sailing Center in Mayo, Md. Explore your interest in learning to sail and discover opportunities for sailing with NIHSA. There will be demonstration sails for adults in the club’s 19-ft. Flying Scot sailboats. Fall sailing classes begin Aug. 26; this is a good chance to preview the boats and meet the members. At the open house you can: join NIHSA, sign up for the 6-week Adult Sailing Class, find out about club sailboat racing and check out the social schedule of NIHSA. Directions can be found at www.recgov.org/sail. The open house includes food, drinks and beer for $10 per person. Look for posters and flyers around campus for more information.
HAITI
CONTINUED FROM PAGE 1
next generations of scientists in GHESKIO labs.
Most notably, he and his colleagues have helped to lower the prevalence of HIV in the population by more than half, from 6.2 to 2.2 percent. With support from NIH and other funders, GHESKIO has pursued a three-pronged approach, focusing equally on training, research and service delivery.

"Capacity building has been essential and research has been the cornerstone of that," Pape said. "Clearly, without this there is no way we could have coped with the earthquake."

Though still facing rebuilding efforts and spending some resources on post-earthquake health recovery, GHESKIO has been able to resume nearly all of its pre-earthquake offerings and is looking forward to even more growth.

"It is my extreme pleasure and honor to know Bill," said NIAID director Dr. Anthony Fauci, who introduced Pape’s talk along with Fogarty director Dr. Roger Glass. Fauci and Pape are alumni of the same medical school. "Even while [Pape] was at Cornell, we all knew he would be a star." Pape’s appearance was sponsored by Fogarty, NIAID and the Office of AIDS Research.

Early in his work in Haiti, Pape’s first task was bringing down the infant mortality rate, which had hovered between 40 and 45 percent due to diarrheal dehydration. In a year’s time, Pape and his team dropped that percentage to 1 with targeted interventions.

"Babies should not die of neglect, of [health care workers] not knowing how to correct mild to severe dehydration," he said. "The importance of nurses and mothers and education is critical."

His next move was to tackle a number of pervasive infectious illnesses that seem to plague the Caribbean country—tuberculosis, syphilis, HIV, AIDS and other sexually transmitted diseases that were spreading unchecked. While HIV/AIDS became the main focus, Pape and his team discovered they could cover additional ground by testing and treating patients who presented with these complicating factors.

The concept of complicating factors of all kinds has for centuries been the name of the game in Haiti. After a torrid history that involved conquests and occupations by the Spanish and the French, the country today still has problems maintaining a stable government and providing for its people. By Pape’s count, the country has had 22 governments since 1986. Its most recent one collapsed following the earthquake, leaving the country’s disaster relief and medical response to the international community and to organizations such as GHESKIO.

Pape explained that, just after the earthquake, the grounds beside GHESKIO became a tent city. While this situation gave staff access to patients, treating injuries was still a challenge. GHESKIO facilities sustained massive damage, buildings were unusable and an acute care field hospital had to be erected in order to cope with the influx of sick and injured. The field hospital, built by HHS and the 82nd Airborne, "saved thousands of lives," Pape said. "The U.S. Navy evacuations to the [USS] Comfort were also a tremendous resource."

But in order to respond to the immediate crisis, all other programs had to stop. All research projects ceased enrollment, training ground to a halt and every person available traded in lab coats for medical scrubs and headed out to help. GHESKIO lost four staffers in the quake and many more lost family members.

Now, several months out from the initial devastation, GHESKIO is getting back to normal. Research programs exploring when to start HIV antiretroviral therapies are recruiting again and nearly at pre-quake levels, the organization’s biosafety level 3 lab is back up and running and the tent city has been moved to higher ground. Even without tents outside its front doors, GHESKIO has a unique opportunity to work with those who live in these makeshift towns, Pape said.

“Our new focus is to transform these tent cities into model global health villages with an emphasis on health and nutrition, microcredits and job creation, vocational school and primary school and overall better habitats for the community.”

Instituting this type of transformation may be a challenge, particularly in a country where the literacy rate barely breaks 50 percent, but it’s one Pape feels is achievable.

“When you explain and take the time to teach them, they understand,” Pape said of Haitians. “They are smart people.”

And unquestionably resilient. ☾
‘Lost Person Finder’

**NLM Offers Technology to Locate Loved Ones During Disaster**

When a natural disaster strikes, friends and family frantically search for information on the whereabouts and health of missing persons. The National Library of Medicine has come up with a tool to help in these situations.

NLM is a partner in the Bethesda Hospitals’ Emergency Preparedness Partnership (BHEPP), a consortium of four medical institutions (NLM, Clinical Center, National Naval Medical Center and Suburban Hospital) created to improve response to man-made or natural disasters. The partnership conducts regular drills and, during a recent one, NLM engineers demonstrated a method of identifying casualties and a system to help relatives and friends obtain information about them.

Here’s how the Lost Person Finder (LPF) works. A casualty is rushed to the hospital and triaged. A colored bracelet is placed on the person’s wrist (colors indicating the seriousness of injury) and a staff member or volunteer takes a picture of the victim. That intake person also makes a report regarding the seriousness of injury. This information and the victim’s photo is dispatched to a web site as well as to a notification wall display in the family reunification area of the hospital, so that visiting friends and family can instantly find out their loved ones’ status.

**NLM Develops ‘ReUnite’ iPhone Application**

NLM recently released the first version of ReUnite, an iPhone app in the Apple iTunes App Store. Apple honored the app in its “New and Noteworthy” iPhone Apps category. As a result, the software was downloaded by more than 1,000 users in the first week of its release.

ReUnite improves on the capabilities of the iPhone app Found in Haiti that was developed in response to the earthquake in Haiti in January. Both apps have been developed as part of ongoing research in NLM’s Lost Person Finder project that seeks to improve post-disaster family reunification technologies.

ReUnite is primarily intended for medical aid and relief workers assisting in family reunification efforts after a disaster, but may also be used by the public to report missing and/or found people to the People Locator interactive Notification Wall (http://pl.nlm.nih.gov) offered by NLM.

Users of the app can choose to take a new photo of a found person seeking reunification using the iPhone’s camera or use an existing image from their camera roll/library to report a missing person.

Less than 3 weeks after that January catastrophe, NLM computer engineers had modified the LPF software to create a system that enabled the public to post photos of missing loved ones on an interactive, multilingual web site. With this modified version, a search could be conducted using all or a portion of the missing person’s name and/or the person’s presumed status (such as missing, found, injured and deceased). Loved ones could submit photos via an iPhone application or email them to a specific address at NLM.

For the earthquake in Haiti, most photos for the lost person wall were taken from the web sites of Google and CNN, organizations that had collected thousands of photos of persons lost during the quake. NLM computer scientists then created special search software.

“In the future, we’d like to improve the software so that searchers can find someone by physical characteristics such as hair and eye color, birthmarks and tattoos,” said Dr. Glenn Pearson, a computer scientist working on the project. The software could also be configured to let users post photos directly to the Lost Person Finder web site rather than only using email.

“We hope that by effectively using digital technology, we can take some of the pain out of not knowing what’s happened to a loved one during a disaster,” said Dr. George Thoma, chief of the Communications Engineering Branch, which developed this system.

**Rivera Named NIAMS Deputy Scientific Director**

Dr. Juan Rivera, chief, Laboratory of Molecular Immunogenetics, has been appointed as NIAMS deputy scientific director. He is well-known as an outstanding mast cell biologist. He currently serves as an associate editor of the Journal of Immunology and is on the editorial board of Current Immunology Reviews. Rivera previously served as director of the NIAMS Office of Science and Technology and was also appointed by former NIH director Dr. Elias Zerhouni as leader of the task force that evaluated trans-NIH initiatives, which led to the creation of the Center for Human Immunology. In addition to his other responsibilities, Rivera will assist with the creation of the NIH iPS (induced Pluripotent Stem) Cell Center and will lead NIAMS in the generation of a new strategic plan for its Intramural Research Program.
ACD MEETING
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Above, l:
NINDS director Dr. Story Landis reports on stem cell policy at the recent ACD meeting.

Above, r:
ACD member Dr. Maria Freire (r), president of the Albert and Mary Lasker Foundation and an NIH alumnus, said that “finding a way to finance the Clinical Center is absolutely essential.” Looking on is Dr. Keith Yamamoto, executive vice dean at the University of California, San Francisco, School of Medicine.

personnel comings (including four new ACD members, and incoming NCI director Dr. Harold Varmus, who used to chair these sessions during his 6 years as NIH director) and goings (most notably, NIH principal deputy director Dr. Raynard Kington, who leaves this month to become president of Iowa’s Grinnell College), an enhanced relationship with the Food and Drug Administration, a new Genetic Testing Registry to be situated in the National Center for Biotechnology Information, a sobering FY 2011 budget prospect and Big Thoughts on how to maximize the effectiveness of the Common Fund.

The challenge of internal restructuring (chiefly, a potential merger between NIDA and NIAAA—see sidebar) and CC utilization and budgeting falls to a separate body advising the NIH director, the Scientific Management Review Board (SMRB), which was created by the NIH Reform Act of 2006. ACD member Dr. Thomas J. Kelly, director of the Sloan-Kettering Institute in New York, summarized SMRB working group findings so far: the merger group is split, with five members in favor of “functional merger” (something akin to the Neuroscience Blueprint, a cooperative undertaking among 12 institutes that would leave the two institutes largely intact) and three touting outright structural merger into a single entity.

“There is quite broad agreement that the status quo is not optimum,” Kelly reported.

Merger Prospect Yields Debate, Pro and Con

At the most recent meeting of the Scientific Management Review Board on May 18, the directors of the two institutes being considered for merger offered defenses of their points of view. Both made reference to the amount of time spent on deliberations.

Dr. Nora Volkow, director of the National Institute on Drug Abuse, admitted upfront, “I am biased in favor of structural [as opposed to functional] merger.” Having headed NIDA for the past 7 years, she argued that “all psychiatric disorders have similar roots involving combinations of genes and environment…it is a serious problem, a devastating problem, whether you are talking about alcohol or drugs.

“Yes, I am impatient,” she told the SMRB, which has considered the possibility of merger since its creation by the NIH Reform Act of 2006. “Why put roadblocks in the way of treatment and prevention?” she said, noting that a merged institute would offer more resources than separate entities. Volkow said NIDA is constrained by limited resources and that separation is resulting in missed opportunities.

Acting NIAAA director Dr. Kenneth Warren said the merger debate has been “seemingly interminable” and that his institute, now celebrating its 40th year, is at the forefront of research on alcoholism. He said NIAAA has “a strong history of collaboration with other institutes,” including addiction studies with NIDA, studies of mental health comorbidities with NIMH, and work with NICHD and NIDDK.

“The best way forward is a structure that increases collaboration all across NIH,” he said. “What strikes me most...is that nothing is gained by structural merger. Enhanced institutionalized cooperation is preferable.”

Warren warned that “much could be lost by structural merger,” including the multiplicity of viewpoints that add value to research on alcoholism and drug addiction. He favors functional merger and “a separate, but equal” NIDA and NIAAA. “Alcoholism is a much broader issue than simply addiction,” he said.
The working group focusing on intramural NIH, including the CC, is considering five options. "The immediate problem," Kelly explained, "is that NIH has this fantastic new facility that is currently underutilized as a resource and has high fixed costs that are growing more rapidly than the total NIH budget."

The preferred option, he reported, would fund the CC out of a line item in the OD budget, rather than via the current "school tax" on IC intramural budgets. This option provides more stable funding and "may facilitate the use of the CC by the extramural community," said Kelly. It would also bolster NIH’s focus on clinical research, he added.

Collins opened his state-of-the-NIH remarks by welcoming new ACD members and lamenting the imminent departure of Kington. "Raynard has had a tremendous career at NIH," he said. "He took on a huge number of complex issues during his time here, including how to spend wisely the $10 billion in ARRA money that NIH received. I have depended on Raynard for all kinds of advice on all kinds of topics...I can’t tell you how many potholes he has kept me from stepping into." Expressing deep gratitude, Collins led the meeting in an ovation for Kington, concluding, "We wish you all the best."

Collins said that "NIH is engaged in significant ways in trying to assist" in the Gulf oil spill. "We are currently collecting information from all the ICs. NIEHS has been very much engaged since the beginning. The institute has trained 22,000 cleanup workers in the last few weeks," he said. Trainees complete a 4-hour course in safety and health awareness.

He said NIH has received cofunding with the National Science Foundation to study ecological impacts of the spill and is "also flocking out studies of exposure effects." Also under study are the potential toxicities of dispersants used at the spill site, which will utilize high-throughput chemical screening at NIH’s Twinbrook outpost.

"We are certainly doing what we can in what is obviously a very troubling circumstance," Collins said.

Allowing that partnership between NIH scientists and outside entities "is probably more essential now than ever," Collins warned that "at the same time, the NIH research enterprise must be free of any taint of suspicion and must maintain the public trust."

He described NIH’s proposed new conflict of interest guidelines—the first in 15 years—governing grants to extramural institutions and dwelled specifically on the case of a researcher who was able to avoid sanction by moving to a new institution, a loophole Collins hopes may now close as the proposed guidelines receive public comment.

"We can do nothing less than the maximum in assuring public trust," he said.

Turning to the budget, Collins said that FY 2011 "will be known as the 'Year After ARRA.'" While lauding the President’s proposed budget of $32 billion for NIH, Collins said "it’s going to be very stressful going from $36 billion (NIH’s ARRA-enhanced FY '10 budget) to $32 billion. Turning that cliff into a slope will be a challenge."

The Office of Management and Budget has asked all agencies to prepare for a possible 5 percent budget reduction in FY ’12, Collins reported. NIH’s best case for avoiding cuts "is based on our science and the promise of improving human health...NIH science is quite breathtaking in its sweep and accelerating pace," he argued. "We are not just cranking along."

Collins said the Common Fund—amounting to slightly more than half a billion dollars, most of which is already committed until FY 2012—was recently the subject of a "Big Think" meeting at which the IC directors, assisted by 54 outside "thought leaders," spent a day brainstorming about best uses for the money. Several fields, including metabolomics (especially in cancer), single-cell measurement technology and the need for more mouse models of disease, seem ripe for funding, Collins said. He met again July 8 with IC directors to revisit Big Think topics.

Turning finally to personnel issues, Collins said he was greatly pleased with the President’s intent to name Varmus as NCI director. "This is an enormous recruitment for NIH and an enormous moment of personal pleasure for me," he said.

Collins said searches are either under way or nearing completion for directors of the Office of Behavioral and Social Sciences Research, the Division of Program Coordination, Planning, and Strategic Initiatives, NICHD, NHLBI, the Office of Extramural Research and the Office of Budget. Two new searches just began—for the director of the Office of Science Policy and for NIH’s principal deputy director. "We are looking for extensive NIH experience," said Collins of the latter post.

On the stem cell front, the ACD working group for human embryonic stem cell (hESC) review presented its findings for 53 lines from four institutions. The group, supported by unanimous consent of the full ACD, recommended to Collins approval of submissions from three of the four institutions, covering a total of 8 lines; a submission from Chicago’s Reproductive Genetics Institute, covering 47 cell lines, was turned down.

NINDS director Dr. Story Landis, who chairs NIH’s stem cell task force, said 67 hESC lines have been approved since last July; 108 lines are currently under review and 234 more are in the pipeline. 📝
to the Genetic Information Nondiscrimination Act of 2008, which protects Americans against health insurance and employment discrimination based on their genetic information.

Intramural researchers and staff from NHGRI as well as the National Cancer Institute, National Institute on Alcohol Abuse and Alcoholism, National Heart, Lung and Blood Institute and National Institute of Mental Health shared the lectern with an array of legal and medical experts from around the country.

“The program provided an important forum for NIH scientists to convey basic genetic and genomic information to the judges and offer a perspective on how their research may impact the courts and society,” said program co-organizer Vence Bonham, chief of NHGRI’s Education and Community Involvement Branch. “We presented a range of information to enhance the judges’ confidence to properly interpret the terms of reference when genomics-related issues arise in court and expert witnesses testify.”

NIH is just one stop in a network of ASTAR programs for judges around the country that expose them to advances in science and technology, new terminology and the researchers themselves. ASTAR has collaborated previously with NIAAA and the National Institute on Drug Abuse and plans future collaborations with NICHD.

ASTAR offers the science and technology resource judge program to all U.S. jurisdictions. Since 2006, the center has held regional science and technology boot camps and has offered training to several hundred judges. In turn, the judges become a resource for their colleagues. A judge who earns 120 hours of ASTAR education can become an ASTAR fellow.

Court leaders attended from across the country—Hawaii on the west and Virginia in the east; Virgin Islands in the south and Minnesota in the north. Six chief justices of state supreme courts joined 20 associate justices and appellate court colleagues to learn about genomics. Additional participants included 30 ASTAR fellows, who are trial and appellate judges tapped for science and technology information leadership in their home court systems. While predominantly an offering for state courts, two federal court leaders and two District of Columbia judges also attended.

“Our mission is to develop portals between court systems and science centers so that judges can be properly prepared case managers at trial and on appeal,” said ASTAR director Dr. Franklin M. Zweig. “ASTAR attempts to narrow the gap between explosive scientific discovery with associated rapid technology commercialization and the judicial branch’s traditional, slower-moving, fair trial commitment to every citizen.”

Hon. Lawton R. Nuss, Supreme Court of Kansas, particularly valued the presentation by employment lawyer Douglas Mishkin, who spoke about applications of the Genetic Information Nondiscrimination Act, and by two fellow judges about admissibility of evidence and expert witness qualifications. “These are some principles we can take and apply in our field,” he said.

Hon. Laura Denvir Stith, Supreme Court of Missouri, remarked that by the end of training, she and her colleagues became much more comfortable with scientific concepts. “It was the most informative continuing learning education program I’ve been to since I became a judge,” she said.

“State and federal judges make decisions that apply science to the law that are important to all of us,” said NHGRI’s Bonham. “For them to learn more about science is valuable for courts across the country.”

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**Top:** Alice Young (r), deputy director of the sequencing group at the NIH Intramural Sequencing Center, leads judges on a tour of the facility.

**Above:** Sequencing group director Dr. Robert Blakesley shows judges the science.

PHOTOS: MAGGIE BARTLETT
Could certainly use it.

The budget for such services all the time, but we don't have a shred of day? At least I haven't identifiable information) on them. How come and some of the documents have PII (personally identifiable information) on them. How come

There have been no reported deer/vehicle collisions on campus. NIH has already taken the proactive step of placing wildlife crossing signs around the campus where needed and will periodically provide educational information to alert employees of the presence of wildlife on campus and what precautions to use as needed throughout the year.

The low number of deer present on campus does not warrant either lethal or reproductive management in relation to the pressure on vegetation and the likelihood of the transmission of Lyme disease or vehicle collision. Physically moving the deer off the campus, by either immobilization and relocation or herding out of the gates was not recommended by HWS, as the expense far outweighs any longstanding benefit. In addition, these techniques would pose a safety hazard to the public as well as the deer.

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Feedback: Our campus uses a lot of paper— and some of the documents have PII (personally identifiable information) on them. How come NIH doesn't have a shred day? At least I haven't heard of one. The office I work in doesn't have the budget for such services all the time, but we could certainly use it.

Response from the Office of Research Facilities: A campus-wide shredding service was offered several years ago, but it was discontinued because commercial services and individual shredders have reduced demand tremendously. There was a Paper Shredding Day associated with the Earth Day event in 2009. Unfortunately, it was not utilized by many people and there was a decision not to include it this year. Depending on how much you shred, you may find a cost savings to purchase a shredder. NIH will pick up the shredded paper and send it to be recycled. Another recommendation is to look at reducing the amount of paper with PII that needs to be shredded. Can forms be filled out and saved on the computer? Do you have to print out all the documents? Can you change policies so electronic copies can be kept instead of hard copies?

Feedback: When the flag in front of Bldg. 1 is at half mast, how can we find out why? Yesterday (5/19), once again, I saw it at half mast and quickly checked the Washington Post web site trying to determine who had passed away, but the reason for lowering the flag was not evident. This has happened many times now. If the occasion warrants lowering the flag, it would seem to warrant letting us know why.

Response from ORS: The lowering of a flag to half staff at NIH is handled by the NIH Police. This is based on a federal law that empowers governors of states, territories and United States possessions to lower the flag upon the death of an active member of the armed forces from their jurisdiction.

The NIH Police uses two systems to determine when the governor has ordered the lowering of a flag in Maryland—the Maryland Interstate Law Enforcement System and the National Law Enforcement Teletype System. Neither system is in the public domain. The public can determine whether an order has been given by the governor of Maryland by going to www.maryland.gov/ and selecting "Flag Status."

On the day in question, May 19, U.S. flags were ordered lowered by Gov. Martin O’Malley to commemorate the death of Marine Cpl. Kurt S. Shea of Frederick, who died May 10 while supporting combat operations in Helmand Province, Afghanistan.

Feedback: Does NIH permit businesses to, in effect, post advertisements on campus? This morning there are two very large signs on the floor, leaning against the wall, near the C-wing entrance to Bldg. 31. One sign advertised a pharmacy that delivers (if I recall the name correctly, it was Village Pharmacy). The second sign advertised the Merry Maids housekeeping service. Both seemed inappropriate for federal property.

Response from ORS: The Recreation and Welfare Association has an authorized and established Merchant Program allowing vendors to go to authorized and dedicated locations for the purposes of selling goods and services. For example, the outside patio area of Bldg. 31 and at various tables near cafeterias located in Bldgs. 10 and 31 and approved R&W brochure stand locations are acceptable. These vendors are permitted to display their company sign and logo at their respective display table while they are physically on site. These vendors are not permitted to have signs at any other location than what is authorized.

Any other sign promoting a company's product or service (as described in the question) should be removed per the prohibition cited in the Code of Federal Regulations (45 CFR Section 3.44 Solicitation).
An experimental vaccine developed to prevent outbreaks of Marburg hemorrhagic fever continues to show promise in monkeys as an emergency treatment for accidental exposures to the virus that causes the disease. There is no licensed treatment for Marburg infection, which has a high fatality rate. In a study of rhesus macaques, 5 of 6 monkeys survived a lethal dose of Marburg virus when treated 24 hours after infection and 2 of 6 survived when treated 48 hours after infection. Because rhesus macaques typically succumb to Marburg infection faster than humans, the post-exposure treatment window might be extended even further in humans, study authors say.

The study, overseen by a scientific team from NIH and three other groups with expertise in viral hemorrhagic fevers, was posted online June 16 by the journal Emerging Infectious Diseases. Marburg and Ebola are the only members of the filovirus family. They are hemorrhagic fever pathogens, meaning the infection may lead to shock, bleeding and multi-organ failure. According to the World Health Organization, Marburg hemorrhagic fever has a fatality rate of up to 80 percent, while Ebola fever has a fatality rate of up to 90 percent.

**Vitamin D Status Not Associated with Risk for Less Common Cancers**

Despite hopes that higher blood levels of vitamin D might reduce cancer risk, a large study finds no protective effect against non-Hodgkin’s lymphoma or cancer of the endometrium, esophagus, stomach, kidney, ovary or pancreas. In this study, conducted by scientists from NCI and many other research institutions, data based on blood samples originally drawn for 10 individual studies were combined to investigate whether people with high levels of vitamin D were less likely to develop these rarer cancers. Details of these analyses appeared as a set of papers in the June 18 online issue of the American Journal of Epidemiology, and in print in the July issue.

“We did not see lower cancer risk in persons with high vitamin D blood concentrations compared to normal concentrations for any of these cancers,” said NCI’s Dr. Demetrius Albanes, one of the study investigators. “And, at the other end of the vitamin D spectrum, we did not see higher cancer risk for participants with low levels.”

Vitamin D is made naturally by the body when the skin is exposed to sunlight; it can also be obtained from a few foods in which it occurs naturally, from fortified foods and from nutritional supplements. Vitamin D is essential for healthy bones, calcium absorption and immune function.

**Study Finds Novel Pathway May Open Doors for New Blood Pressure Treatments**

Researchers have found that increasing certain proteins in the blood vessels of mice relaxed the vessels, lowering the animals’ blood pressure. The study provides new avenues for research that may lead to new treatments for hypertension.

“The paper demonstrates that cytochrome P450 plays an important role in the management of high blood pressure, a disease of enormous public health concern,” said the paper’s senior author, Dr. Darryl Zeldin of NIEHS. The study was published online in the FASEB Journal.

**Researchers Discover How Folate Promotes Healing in Spinal Cord Injuries**

The vitamin folate appears to promote healing in damaged rat spinal cord tissue by triggering a change in DNA, according to a laboratory study funded by NIH. Researchers showed that the healing effects of the vitamin increased with the dosage, until regrowth of the damaged tissue reached a maximum level. After this threshold was reached, regrowth declined progressively with increasing doses until it reached the level seen in the absence of the vitamin.

Specifically, folate stimulated a process known as DNA methylation, a natural biochemical process in which chemical compounds known as methyl groups are attached to DNA. The study results suggest that a greater understanding of the chemical sequences associated with folate metabolism and DNA methylation may lead to new techniques to promote healing of damaged spinal cords and other nervous system injuries. More studies are needed to determine what role folate might play in treating human beings with spinal cord injury. The study was supported by NICHD, NIDDK, NIDCR and NINDS. Findings were published in the Journal of Clinical Investigation.—

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

**Januvia Study**

Volunteers are needed for a study examining the immune function in healthy volunteers given short-term treatment of sitagliptin. Investigators wish to determine if and how sitagliptin alters immune function. If you are 18 years or older and healthy, consider participating in this study. All study-related tests are provided at no cost. Compensation is provided. Refer to study 09-DK-0055.

**Asthma Study for Adults 18 to 65**

You may be eligible to participate in a clinical research study of the drug DAS 181. The investigational drug is currently being studied as a potential treatment for the flu. The goal of the study is to determine if DAS 181 can safely be given to individuals with well-controlled asthma. The study will last between 6-12 weeks and there are a total of 12 visits required. In order to participate, you must have had well-controlled asthma for at least the past 3 months, not be allergic to milk or milk products and not be taking oral corticosteroids. Compensation is provided. Refer to study 10-I-0085.

**Bronchiectasis Study for Adults 18 to 65**

You may be eligible to participate in a clinical research study of the drug DAS 181. The investigational drug is currently being studied as a potential treatment for the flu. The goal of the study is to determine if DAS 181 can safely be given to individuals with bronchiectasis. The study will last between 6-12 weeks and there are a total of 12 visits required. In order to participate, you must have had a chest CT within the last 12 months that establishes a diagnosis, not be allergic to milk or milk products and not be taking corticosteroids. Compensation is provided. Refer to study 10-I-0085.

**Loa Loa Study Seeks Patients**

Have you ever traveled to or lived in central or western Africa for longer than 1 month? Have you or someone you know experienced worms moving along the white part of the eye? Are you between 18 and 65 years old? You may be eligible to participate in a study at NIH. NIAID is seeking volunteers to participate in a study evaluating the effectiveness of Reslizumab in reducing the side effects of the standard drug therapy used to treat Loa loa. All participants will be required to travel to NIH for an overnight stay. All study-related tests or treatment are provided. Refer to study 10-I-0085.

**Have Staphylococcus Infection?**

Individuals diagnosed with community-acquired *Staphylococcus aureus* infection are wanted. NIAID is conducting a study on invasive and recurrent community-acquired *Staphylococcus aureus* infections often called staph infections. If you are older than 2 years of age and have had a staph infection, contact us to see if you can participate in this study. Participation involves up to two visits. Parents must give permission for a minor to participate. Studies are conducted at the Clinical Center. There is no cost for study-related tests. Refer to study 09-I-0157.

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UNCA Honors NIEHS’s Collman

The University of North Carolina at Chapel Hill recently conferred its distinguished alumni award on one of the top scientist administrators at NIEHS—Dr. Gwen Collman, acting director of the Division of Extramural Research and Training.

The UNC epidemiology chapter of the General Alumni Association formally presented Collman with the 2009 H.A. Tyroler Distinguished Alumni Award at her recent keynote presentation on “Community Engagement in Environmental Epidemiology” at the UNC School of Social Work.

The award is a memorial to the late Dr. Herman Alfred Tyroler, alumni distinguished professor emeritus of epidemiology at the UNC School of Public Health, who died in 2007. The award honors his dedication to teaching and mentoring over four decades at UNC.

The award is especially meaningful for Collman, who worked closely with Tyroler from 1979 to 1981 after she came to UNC as part of the Lipids Clinics Program coordinating center. Collman joined NIEHS as an epidemiologist in the Epidemiology Branch following completion of her doctorate in environmental epidemiology at the UNC School of Public Health in 1984 and moved to the extramural program in 1992.

CSR’s Olufokunbi Sam Wins Award

CSR’s Dr. Delia Olufokunbi Sam was honored with the King Davis Award for emerging leadership in promoting diversity and reducing disparities by the American College of Mental Health Administration College for Behavioral Health Leadership at its 2010 summit in Santa Fe. She was recognized for her “tireless leadership in bringing health and behavioral health advocates together in the Whole Health Campaign, a multi-disciplinary effort dedicated to ensuring that behavioral issues receive full consideration in national dialogues related to health care, health reform and health policy.” Olufokunbi Sam manages CSR’s health care delivery and methodologies small business innovation research study section and the health disparities and equity promotion study section. She joined CSR in 2009 and received her award based on earlier efforts as deputy director of the Center of Integrated Behavioral Health Policy at George Washington University, where she managed a diverse portfolio of behavioral health research and policy.
No Other Word for It—BBQ Is Fantastic

Top:
This year’s Camp Fantastic BBQ on June 15 sold more than 400 lunches and raised enough money to send 10 kids with cancer to summer camp. At right, Streetlife Band entertains the large crowd.

Middle, l:
Karen Leake of the NIH Federal Credit Union enjoys some fresh popcorn at the Camp Fantastic BBQ.

Middle, r:
Volunteer Debi Anderson (r) of NIDDK spoons up some delicious barbeque for diners under the serving tent.

Below:
Robert Proctor of the R&W’s special events crew keeps the popcorn machine running hot.

PHOTOS: VALERIE LAMBROS, DAVID BROWNE