

"Still
The Second
Best Thing
About Payday"

The NIH Record

From 'Watermelon to Plum'

NIH Edges Closer to Next 20-Year Master Plan

By Rich McManus

Toward the end of NIH's recent employee meeting on drafting a new 20-year master plan for the Bethesda campus, Steve Ficca, NIH associate director for research services, coined a metaphor that may well have explained the modest turnout for the event. The master plan, he said, could be thought of as a watermelon that, once pared away by budget realities, shifts in science, and vagaries of staffing and planning needs over the next two decades, could shrink to the size of a plum; NIH'ers, it seems, are really more interested in plums than watermelons.

But it was a pretty succulent watermelon that was on view May 16 in Lipsett Amphitheater as planning consultants and NIH authorities unveiled details—collected since the last draft was introduced in 1993—of the Big Picture for year 2015.

Reflecting largely what is hoped for rather than what may actually come to pass, the new draft—premised on 10 percent growth in employee population by 2015, mainly intramural researchers (18,000 workers, total)—includes:

• A new, smaller inpatient hospital facility (600,000 square feet) and associated labs (250,000 square feet) to be appended to the current Bldg. 10 complex within a zone that encompasses the north and west faces of the existing building, which will be retained and could be renewed in phases.

• One new office site and 11 new laboratory buildings, including the Consolidated Laboratory Facility (Bldg. 50), which is envisioned at the site of the present parking lot at the corner of South and Center Drives. This would house workers from Bldgs. 3 and 7, as well as other temporary spaces on campus.

• Relocation of some intramural research programs from off-campus back to NIH; no specific program is currently targeted.

• Abandonment of Phase II of the Natcher Bldg. (which was to have been finished by 1997 as new quarters for approximately 3,000 NIH'ers currently occupying rental buildings in the area.)

• Stay the current course with the campus Infrastructure Modernization Program, which

(See NIH MASTER PLAN, Page 4)

'House Call' Is Alive

NICHD Delivers Health Education to Classroom

To most people, physician house calls are a thing of the past. To students in a Silver Spring elementary school, however, the house call is alive and well.

For the third consecutive year, physicians from NICHD visited students at Highland Elementary School to discuss various health-related topics of interest to children. This year, topics included nutrition, the safe use of prescription drugs, and which medical specialists treat which human ailments.

These visits are part of the Adopt-a-School Program, an education-enrichment plan initiated and sponsored by NICHD's Equal Employment Opportunity Office, as part of the Public Health Service's Partnerships in Education Program. The program also is cosponsored by the Montgomery County Chamber of Commerce and the Montgomery County board of education. NICHD staff members who choose to participate can either tutor a child who needs individualized help in certain subjects such as reading and writing, visit classrooms to teach about science or health, or write to a student as part of a pen pal program.

On June 12, student pen pals will meet

(See, ADOPT-A-SCHOOL, Page 6)



Undaunted by rainfall that soaked the 18th annual NIH Institute Relay on May 17 are runners (from l) Deirdre Davis, Char-Dell Skinner and Caroline Fukuda, who display their impromptu hatwear. See race coverage on pp. 8-9 inside.

Attention Readers, Nonreaders!

It has recently come to our attention at the NIH Record that there are employees who have a hard time reading the newsletter—or don't even bother trying—because the type size is too small. If you are having problems reading our typeface, please contact Rich or Carla at the Record office as soon as possible in Bldg. 31, Rm. 2B10, phone 6-2125, fax 2-1485, email: rm26q@nih.gov (Rich) or cg9s@nih.gov (Carla).

Scientists Urged To Push Science Education Reform

By Ellen Orjala

K-12 education is in desperate shape," said Dr. Leroy Hood, one of the nation's leading research scientists, at a recent talk at NIH. "Scientists," he added, "can be the key to catalyzing educational reform."

Hood, a strong advocate of scientists taking time to be educators, spoke last month at the first talk in the Office of Science Education's lecture series. "The most important issue in American society is the education of our children," he said. "We should all spend time in educational initiatives."

Hood has devoted a great deal of his time and effort to science education from his high school days through college, medical school, graduate school, and as a faculty member at Cal Tech. Today, he runs the University of Washington's department of molecular biotechnology.

When he came to the University of Washington to start the department, Hood said his goal was "to bring science to society." He noted, "Systemic change is critical, and it is absolutely essential that we start at the elementary school level."

(See SCIENCE EDUCATION, Page 2)

Education, Income Immaterial

Babies of Youngest Moms Face Increased Risk

By Robert Bock

Physicians have long known that pregnant teenagers are more likely to have babies at increased risk for such life-threatening conditions as premature birth and low birth weight. It was not known, however, whether these risks stemmed from the mothers' age alone or the fact that most teenage mothers are surrounded by a variety of adverse social and behavioral factors that increase the risk of giving birth to a premature or low birth weight infant.

Now, a study funded in part by NICHD has found that, independently of other risk factors, young maternal age alone increases the risk of such adverse pregnancy outcomes. The study is the lead article in the Apr. 27 issue of the *New England Journal of Medicine*.

The study was conducted by researchers at the Institute of Human Genetics at the University of Utah and the Bureau of Vital Records at the Utah department of health, both in Salt Lake City.

"Our study adds a new dimension to the problem of teen pregnancy," said the study's senior investigator, Dr. R.H. Ward of the University of Utah. "Even if you take care of

(See YOUNG MOMS, Page 10)

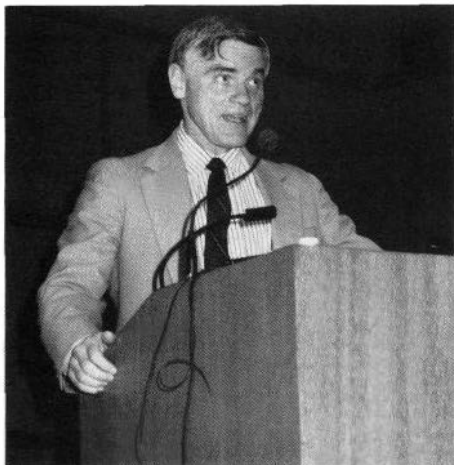
SCIENCE EDUCATION (Continued from Page 1)

Change will require the help of many people, he added, and he thus has been advocating that every scientist spend 5 to 10 percent of his or her time on science education. His enthusiasm and commitment have rubbed off on his colleagues. In his department, 80 percent of the faculty participate in outreach programs.

Hood shared some of his personal experiences with science outreach. He said his "most powerful experience" in outreach to date has been the Seattle Local Systemic Initiative.

The program is a hands-on, textbook-free, inquiry-based training program for all Seattle elementary school teachers. For such a large-scale, revolutionary program to work, according to Hood, many groups must work together, including teachers, teachers' unions, principals, school administrations, parents, the business community, industry, civic leaders, and the university.

Hood cited several lessons he has learned over the years, saying the most important one



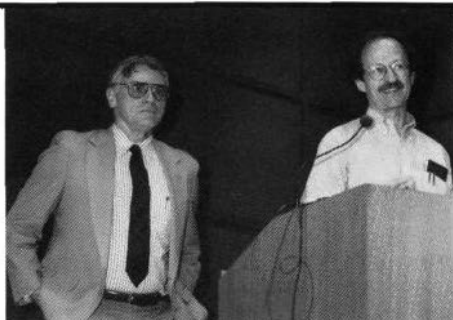
Dr. Leroy Hood shares his enthusiasm for science education outreach programs with an NIH audience.

is that "you must have the leadership say education is an important thing to do. You need a vision and you need the resources."

Dr. Irene Eckstrand, acting director of the newly formed Office of Science Education, which sponsors the lecture series, said, "I think we are fortunate at NIH to have that leadership and support for our educational initiatives from the very top."

The lecture series, according to Eckstrand, is "designed to make science education part of the dialogue at NIH and to raise the visibility of science education." She added, "Our hope is to bring a variety of speakers to talk about different topics in science education."

Eckstrand said the office asked Hood to give this first lecture "because he is one of the world's outstanding scientists, because he has had a long-term commitment to science education, and because he can be a model for



Hood and NIH director Dr. Harold Varmus (r) field questions from the audience

us in putting science education and scientific research together."

In addition to being department chair, Hood is the William Gates III professor of molecular biotechnology at the University of Washington, and is director of the NSF Science and Technology Center for Molecular Biotechnology. He has been a leader not only in educational initiatives, but also in the laboratory, developing large-scale DNA mapping and sequencing techniques that have been applied to the analysis of human and mouse T-cell receptor loci.

In introducing Hood, NIH director Dr. Harold Varmus said, "Lee is the perfect person to give this lecture because he has been so involved in science education." He added, "Lee thinks in large scale, and the educational problems we face are large-scale problems."

Varmus will give the second lecture in the series on July 6. □

Camera Club Meets, June 13

The monthly meeting of the NIH R&W Camera Club is scheduled for Tuesday, June 13 at 7:30 p.m. at the FAES House, corner of Old Georgetown Rd. and Cedar Ln.

The guest speaker of the evening will give a brief presentation about how to make prints from slides.

This meeting, the last of the season, features a pot luck party. There will be no competition, but everybody is welcome to bring four images per category (color slide, color and black/white print) that were submitted during the year—but not necessarily awarded—to the party to show them at the club's "Image of the Year."

The camera club is open to all; anyone interested in photography is welcome to join. It meets every second Tuesday of the month from September through June. For more information, call Dr. Yuan Liu, 6-8318. □

Study Needs Women

An NIMH study of postpartum depression needs women—who are ages 18-45, medication-free (including vitamins and birth control pills), have regular menstrual cycles, have had a previous normal pregnancy with or without a postpartum mood disturbance—to participate in a study of the mood and behavioral effects of ovarian hormones. Volunteers will be paid. For information call Dr. Miki Bloch, 6-9675. □

NIH Preschool Hosts Book Fair

Mark your calendars for Tuesday and Wednesday, June 13 and 14. The NIH Preschool will be hosting a book fair at Bldg. 35. The fair will be open from 11 a.m. to 2 p.m. on both days, and from 5 to 7 p.m. on Wednesday. Featured will be educational books for preschoolers and young and intermediate readers, classroom materials, fun activities, games, reference books and much more. All proceeds benefit school programs. For more information, call 6-5144. □

PC Topic Session, June 8

DCRT's Distributed Systems Branch holds regular PC Topic Sessions designed to keep NIH'ers up to date on rapidly advancing PC technology. Featured on Thursday, June 8, 10-11:30 a.m. in Bldg. 10's Lipsett Amphitheater will be Microsoft Windows NT Workstation 3.5, a state-of-the-art 32-bit operating system and high-end member of the Windows family.

When originally released almost 2 years ago, NT's hardware requirements put it out of the reach of most NIH users; today, the average new PC is NT-capable. Although Microsoft is currently recommending the forthcoming Windows 95 over NT for most users, delays and press reports of problems in Windows 95 have many users reevaluating NT. At this meeting, two DSB staff members who are longtime NT users will demonstrate NT's main features. Decide for yourself whether NT's strengths make sense for you. □

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NIAID Scientists Enjoy Fruits of Vaccine Success

Recently, three NIAID scientists gathered with Dr. Anthony S. Fauci, NIAID director, and Dr. Jane Biddle, NIAID senior technology transfer manager, to celebrate receiving royalty checks from their four patents that led to an effective vaccine to prevent hepatitis A, an acute liver disease. The FDA licensed the vaccine in March 1995.

NIAID's Drs. Robert H. Purcell, Suzanne U. Emerson and Jeffrey I. Cohen, and the FDA's Drs. Stephen Feinstone and Richard Daemer, of the Center for Biologics Evaluation and Research, developed and patented a hepatitis A virus (HAV) and related technology used to develop the vaccine. Purcell is chief of the NIAID Laboratory of Infectious Diseases hepatitis viruses section, in which Emerson works. Cohen works in the NIAID Laboratory of Clinical Investigation. Dr. John Ticehurst of Johns Hopkins School of Medicine and Dr. Ian Gust of Commonwealth Serum Laboratories of Melbourne, Australia, also collaborated on the patents.

"The hepatitis A vaccine is a wonderful example of how basic research from NIAID laboratories is applied to improve public health," noted Fauci.

The patents cover a strain of human HAV, HM175, an attenuated form of HM175 and the methods developed to isolate and grow the viruses in cultures of kidney cells derived from African green monkeys.

In 1985, based on the scientific and commercial potentials of the NIAID inventions, SmithKline Beecham took a nonexclusive license on the patents and, in



Celebrating the arrival of royalty checks at NIAID are (from l) Drs. Suzanne U. Emerson, Jeffrey I. Cohen, Robert H. Purcell, Anthony S. Fauci and Jane Biddle.

1986, established a cooperative research and development agreement to develop HAVRIX, the world's first commercially available HAV vaccine. HAVRIX uses an inactivated HM175 strain of HAV.

In 1994, SmithKline received the European Prix Gallien award for HAVRIX in honor of its overall contribution to medicine in terms of safety, efficacy and innovation. Currently, HAVRIX is registered in more than 40 countries.

Prior to the availability of this vaccine, only passive immunization with blood-derived immunoglobulin could offer protection

against HAV, and then only for 2 to 5 months. The vaccine offers protection after one dose. With a booster in 6 to 12 months, the vaccine is predicted to protect for up to 10 years.

With more than 10 million cases each year worldwide, hepatitis A is the most widespread of the viral hepatitis infections. HAV is transmitted commonly by person-to-person contact and by contaminated food and water. The resulting liver disease usually is mild and does not become chronic. Occasionally, HAV infection leads to liver failure and death.—

Marion E. Glick □

NIDR Hosts 63 Dental Students at 3-Day Conference

Student representatives from virtually every dental school in the U.S. and Canada gathered recently in Bethesda for the 31st annual American Dental Association Dental Students Conference on Research. The conference was sponsored by the American Dental Association (ADA), the Warner-Lambert Co., the National Institute of Dental Research, and the participating dental schools.

The 63 dental students who attended the conference were chosen by their dental school deans based on their involvement or interest in oral health research. The annual conference provides selected students with a unique opportunity to learn about research advances in oral health sciences and training options at some of the nation's leading oral health research institutions.

During the 3 days that the students were in town, they learned about ongoing research at NIDR and the National Institute of Standards and Technology (NIST) in Gaithersburg, Md. The students visited NIDR laboratories on the NIH campus and heard a presentation by NIDR director-designate Dr. Harold Slavkin. NIDR intramural, extramu-

ral, and epidemiology staff spoke to the students about ongoing oral health research, training opportunities such as the NIDR Dentist-Scientist Award, and extramural funding mechanisms. The students also attended an ADA-sponsored dinner at the Capitol Hill Club in Washington, D.C., where the guest speaker was Rep. John Porter (R-Ill.), chairman of the House appropriations subcommittee on labor, health and human services, education, and related agencies. Following the dinner, the students were treated to an evening bus tour of Washington, D.C. On their last day,

they visited ADA's Paffenbarger Research Center at NIST.

The students returned to their schools armed with new insight into NIH, NIDR, and oral health research and training opportunities, which they were asked to share with their fellow students.

For information about next year's student dental research conference, students and faculty should contact: Marcia Greenberg, staff coordinator, Dental Students Conference on Research, American Dental Association, 211 E. Chicago Avenue, Chicago, IL 60611. Phone: (312) 440-2535.



Dental students gather in front of Bldg. 1 with representatives from NIDR, the American Dental Association and the Warner-Lambert Co.

MASTER PLAN GOVERNING NEXT 20 YEARS AT NIH UNVEILED TO EMPLOYEES

(Continued from Page 1)

restores, renovates and replaces mechanical and electrical utility systems.

- Redevelop the Bldg. 14/28 site as a lab quad for up to four buildings. A replacement animal facility would be built into a hillside near Bldg. 41.

- Bldg. 12/13 complex to be replaced; area is redeveloped for more intense lab development near Clinical Center complex and Metro. A new office for relocated employees would be constructed adjacent to the Natcher Bldg.'s east side.

- Central core of campus to be redeveloped as Central Mall connecting north and south ends of campus through open space and pedestrian paths. Bldgs. 29 and 30 to be replaced (they, along with Bldgs. 7 and 9, were deemed "beyond redemption as lab buildings"). Campus Center/Fitness Center replaces Bldg. 34 at mall's south end.

- Loop road to be created for improvement of campus circulation and organization. Roadway is pushed north of CC expansion (eliminating Apartment Bldg. 20, incidentally).

- Stormwater control pond created near corner of Cedar Lane and Rockville Pike.

- A new fire station and two new day care sites are needed, as are expansions to the present Power Plant.

"It's important to realize that we are not talking about a budget or program plan," cautioned Ficca. "This is simply a concept, a way to move forward in an organized fashion. It doesn't necessarily mean that all of this will come to fruition."

Ficca said several key elements contributed to the need to redraft the master plan—originally designed along themes dubbed "The Park," and "The Quad"—presented to employees on May 27, 1993.

"The desire to reflect the reality of budget and other resource constraints initially prompted by the President's 1995 budget was one of the things that made us rethink our plan," he said. Until that time, the plan was developed without resource constraints and based purely on research opportunities, which resulted in a 40 percent growth over 20 years; that figure has since been trimmed to 10 percent by such emerging realities as streamlining, downsizing and reinventing government phases I and II. Also contributing to the belt-tightening has been community input through local commissions and neighborhood groups. The concerns of the latter prompted NIH to add an Office of Community Liaison, headed by Jan Hedetniemi, to manage NIH's relations with its neighbors.

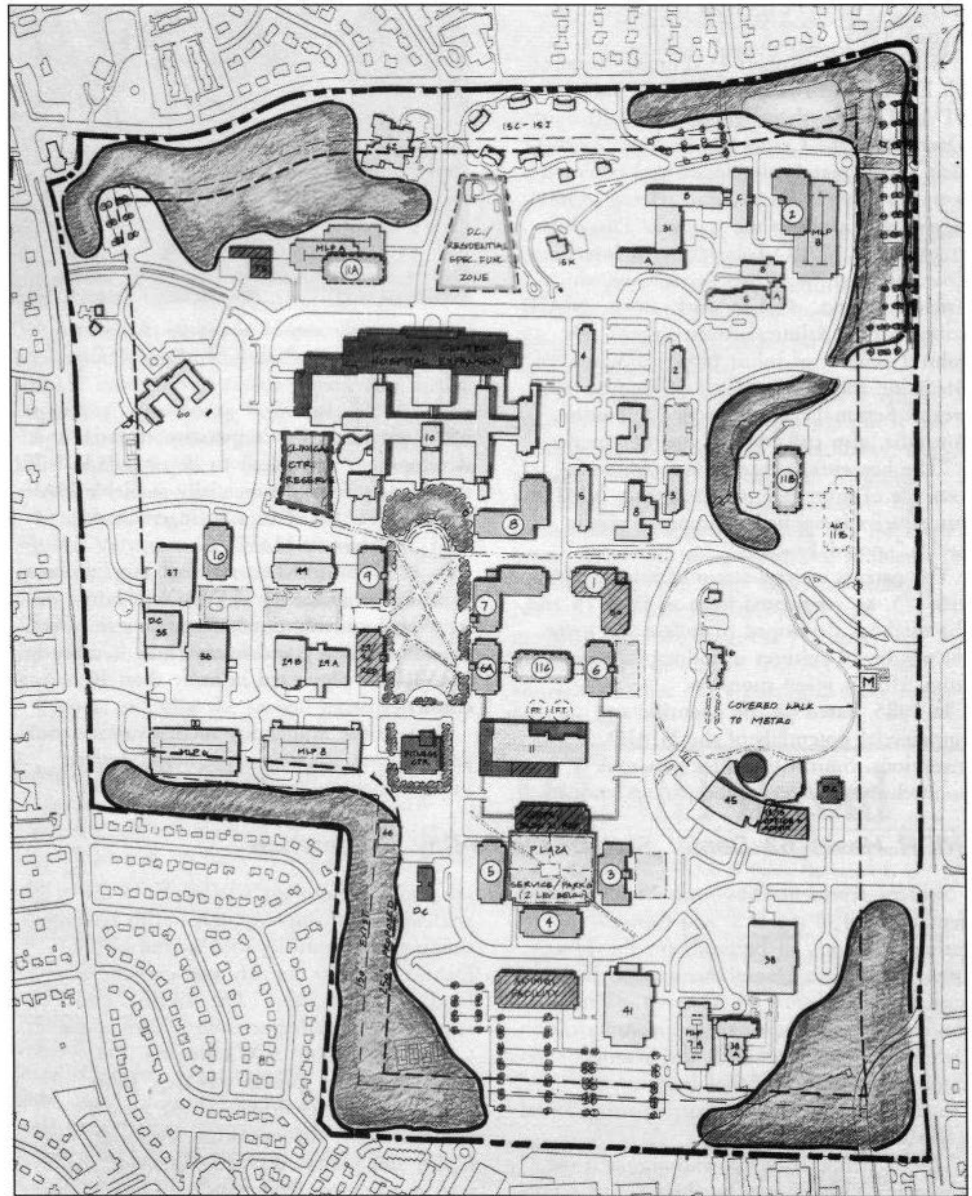
According to Stella Serras-Fiotes, master planner with the Facilities Planning and Programming Branch, Division of Engineering Services, NIH's draft plan goes next to Congress on June 30 for review. On July 15, NIH expects to submit the draft plan to both the "ultimate reviewer," the National Capital

Planning Commission, and the public, along with an associated Environmental Impact Statement.

After a summer of review and comment, September will feature more meetings with the public, she said, followed by finalization

of documents in October. On Dec. 7, an approved master plan for the next 20 years is anticipated by NIH.

When the final plan emerges, it will be subject to review by NIH every 5 years, said Serras-Fiotes.



This is a drawing of the preliminary master plan for the Bethesda campus of NIH. Sketched by consultants to the Office of Research Services, it represents a vision of what the campus could look like in 2015. A final, approved version of the plan is expected by the end of 1995.

BEAC Awards Program, June 21

The NIH Black employees advisory committee (BEAC) invites the NIH community to its Anniversary and Awards Program on June 21 at 2 p.m. in Wilson Hall, Bldg. 1. Awardees will include the mentors in the NIH Metcon Program for minority students, as well as former and outgoing members of BEAC. Speakers will include Zita Givens, president of the NIH chapter of Blacks in Government; Carlton Coleman, Black Employment Program manager; and Dr. Don Buckner, acting chair of BEAC. □

NIH Holds Annual Asian/Pacific American Heritage Program

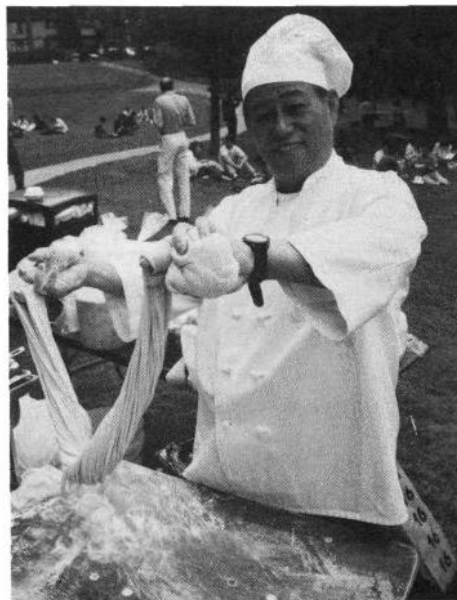


A crowd forms May 12 on Bldg. 31's patio for the noontime program of "Strength of Character," NIH's 23rd annual Asian Pacific American Heritage Program, which featured foods from China, India, Japan, Korea, the Philippines, Thailand and Vietnam.



Dr. Don Murphy of the NIH R&W Aikido Club demonstrates martial arts techniques.

Photos: Bill Branson



A Thai chef prepares fresh noodles.



The evening program featured an awards presentation. Dr. Rita Liu, chair of the education and awards subcommittee, congratulates Dr. Abubakar A. Shaikh (l) on receiving a certificate of recognition, while newly appointed Asian/Pacific Program Manager John Medina III reads citation.



Pianist Yako Janja Yokoyama (l) accompanies Soprano Yoshiko Yoshikawa, who sang Japanese songs and an aria at the evening program.



Picnickers sample Asian fare.



The Sushi vendor is always popular.



The Thai Traditional Classical Dance is performed by a member of the Darawan Thai Dance Group.



Members of the Arts and Culture Center of Indonesia render several Javanese Court Dances (above and below) to the accompaniment of Gamelan music (below, background) at "An Evening of Music and Dance Performed by Asian Artists."



NHLBI's Paul Didisheim Receives Biomaterials Award

Dr. Paul Didisheim, medical officer in NHLBI's Division of Heart and Vascular Diseases, has received the first C. William Hall Award from the Society for Biomaterials. The award, given recently at the society's annual meeting in San Francisco, honors Didisheim's outstanding contributions in advancing the field of biomaterials and the society's scientific goals.

The award was established to honor the memory of Hall, a pioneering cardiac surgeon and biomaterials researcher who died in 1992. While at the Southwest Research Institute in San Antonio, Hall conducted research that led to such innovations as textured biomaterials for use in prosthetic vascular grafts, a bioadherent dressing now widely used as artificial skin for burn victims, and solutions to preserve artificial organs for transplantation. He also worked with Dr. Michael DeBakey and others to create the first implantable blood pump.

Hall held many prestigious posts during his career, including director of the Artificial Heart Research Program at Baylor Medical Center in Houston, and first president of the Society for Biomaterials. He was the first project officer of the Artificial Heart Program at the then-National Heart Institute, now NHLBI.

Like Hall, Didisheim has been a leader in the development and evaluation of new biomaterials, particularly for use in vascular grafts and stents. He joined NHLBI in 1986, after serving as professor of laboratory medicine and director of the Thrombosis Research Laboratory at Mayo Medical School in Rochester, Minn.

At NHLBI, he has managed the Biomaterials Program in the bioengineering research group (formerly the Devices and Technology Branch) and has been instrumental in the development of major initiatives in this area. A recent initiative on "Genetically



Dr. Paul Didisheim (c) receives the C. William Hall Award from Hall's widow, Sheila Hall. Dr. Samuel F. Hulbert, chairman of the awards committee of the Society for Biomaterials, reads the citation.

Enhanced Cardiovascular Implants," for example, supports projects that bring together the expertise of genetic engineers and materials scientists. The initiative should lead to novel, hybrid cell-coated surfaces with an improved biocompatibility for use in implanted cardiovascular devices such as stents and ventricular assist systems.

Didisheim also has received the NIH Award of Merit and is a founding fellow of the American Institute for Medical and Biological Engineering. □

Southpaw Study Recruits

Is human hand utilization specified genetically or culturally? To answer this question, scientists need to know the hand utilization of children and grandchildren of biological grandparents, where both members of the grandparental couple are left-handed. You can help this study by providing the address and phone number of any couples (grandparents) that you know of who are both left-handed. Respond by mail, phone or by email to: Dr. A. Klar, P.O. Box B, Bldg. 539, Frederick, MD 21702-1201, (301) 846-5916 or -1638, klar@fcrfv2.ncifcrd.gov. □

NEI's Robert Wurtz Honored

Dr. Robert Wurtz, chief of NEI's Laboratory of Sensorimotor Research, was recently honored with the Karl Spencer Lashley Award by the American Philosophical Society. The society was founded in the 18th century by Benjamin Franklin "for promoting useful knowledge." Each year the award is presented to a neuroscientist, and this year's citation read, "For brilliant technical innovations in recording the activity of single visual neurons of alert behaviorally trained monkeys that made possible salient scientific discoveries relating individual nerve cells to visual perception and the generation of eye movement."

For more than 25 years, Wurtz has studied vision and oculomotor control in rhesus monkeys—animals whose visual system is similar to humans. He and his colleagues have developed a technique of isolating the brain



Dr. Robert Wurtz

cells that allow investigation of rapid or "saccadic" eye movement. He was the first scientist to record the activity of single cells in the primary visual cortex in monkeys who were awake and actively responding to stimuli in the environment. His techniques, developed at NIH, are now widely used in laboratories throughout the world to study the functioning visual system.

Among other neuroscientists who have received the Lashley Award are Drs. Roger Sperry, Curt Richter, David Hubel, Eric Kandel, and Edward Evarts. □

ADOPT-A-SCHOOL (Continued from Page 1)

their NICHD correspondents for the first time at a picnic at the elementary school. "The response to the Adopt-a-School program has been overwhelmingly enthusiastic," said NICHD deputy director Dr. Yvonne Maddox. "These two organizations have joined hands in a unique alliance to pursue a mutually enriching relationship, to work together to promote school-community relations, and to improve the education of the community's youth."

NICHD is distinctive in that it is one of the few institutes at NIH to adopt an elementary school rather than a high school. This is in compliance with the NICHD mission, which "seeks to assure that every child has the opportunity to fulfill his or her potential for a healthy and productive adult life," explained Anne Baur, the NICHD Adopt-a-School coordinator. "The elementary school level was chosen because these students are still in the age of wonderment," she said. "They are easily enchanted by the magic of science." —Anne Blank □



High blood pressure can be prevented.

Call 800-575-Well

National Heart, Lung, and Blood Institute.

National Institutes of Health; Public Health Service; U.S. Department of Health and Human Services.

As part of its collaboration with the Outdoor Advertising Association of America, NHLBI placed this message on more than 200 billboards in Memphis, Charlotte, and Atlanta. The billboards are one element in a health communication campaign that has a dual strategy: to increase awareness that high blood pressure can be prevented, and to encourage people to seek information about preventing high blood pressure by calling the 800 number.

High Stress During Pregnancy Increases Prematurity Risk

The stress an expectant mother feels during pregnancy may cause her to deliver a premature or low birth weight baby. Moreover, fetuses carried by mothers with high levels of a hormone produced in response to stress tend to be unusually active. Conversely, fetuses carried by mothers with low levels of the hormone tend to be inactive.

These are the findings of a research team funded by NICHD and composed of investigators from the University of California, Irvine, and the University of California, Los Angeles.

The stress a woman feels during her pregnancy has long been of concern to physicians. The study is among the first to address the question in a comprehensive manner.

For one study, the researchers recruited 90 married, upper middle-class women with single pregnancies. The women were asked to complete a questionnaire seeking information on their economic status, health habits, medical history, and perceived level of stress. The stress portion of the questionnaire consisted of a 14.7-unit scale of life event stress.

The researchers found that women who had experienced major stresses in their lives were more likely to deliver low birth weight infants. On average, each unit increase on the stress scale was associated with a 55.03 gram decrease in infant birth weight. Similarly, women who were overly concerned or anxious about their pregnancies were more likely to give birth prematurely. In fact, each unit increase on the scale was associated with a 3-day decrease in the gestational, or developmental, age of the child at birth.

Both low birth weight and prematurity increase the risk for such conditions as mental retardation, cerebral palsy, blindness, and life-threatening infections.

Of particular concern to the researchers was the fact that the women's access to good medical care did not counteract the effects of the stress they felt.

Fortunately, physicians who treat pregnant women can help their patients overcome the effects of such stresses, said the study's principal investigator, Dr. Curt A. Sandman of the department of psychiatry at UC, Irvine. For example, physicians can teach their patients various strategies for coping with life's stresses. In addition, doctors are uniquely positioned to help a woman overcome anxieties about her pregnancy.

"Physicians can help by providing accurate, clear, digestible information about pregnancy that may relieve some of the beliefs and fears that may lead to prematurity," Sandman speculated.

In another study, the researchers recruited 95 pregnant women and collected blood samples from them during the 30th week of pregnancy. The researchers next held a sound-producing device to the mother's

abdomens and simultaneously recorded the infants' heart rates. Usually, an infant's heart will beat more rapidly in response to an unfamiliar sound.

The researchers found that fetuses whose mothers had high blood levels of a substance known as beta endorphin had unusually heightened responses to sounds they hadn't heard before. Conversely, fetuses whose mothers had low levels of the hormone had diminished responses to the new sounds.

Sandman explained that beta endorphin is produced in response to stress. Beta endorphin and similar compounds tend to

have euphoric effects and are useful for killing pain.

Sandman could not yet say what long-term effects, if any, the mothers' altered endorphin levels would have on their children later in life. He hopes to be able to observe the children as they develop.

Sandman and his coworkers reported that earlier studies had found that primates whose mothers were stressed during pregnancy exhibited heightened responses to stresses later in life. These animals also tended to have short attention spans and irritable temperaments.—Robert Bock □

NIH Observes National Police Day



Ofc. Donald Watson sits astride colleague Ofc. Eulalio "Leo" Tordil during a lesson he gave on women's self-defense during Police Day. Held on an exercise mat outside the police Mobile Command Center, his tips and pointers drew an interested crowd. Watson is the instructor in a popular women's self-defense class sponsored after work hours in the Police Branch.



Above, Sgt. Gerald Watson and his dog Nicky meet NIH'ers. Below, Ofc. Patricia Pozar and Turbo, a dog trained to sniff out bombs and explosives, prepare to demonstrate their skill searching a van for bombs.



Runners Snub Rainfall

Institute Relay Gives NIH'ers Chance to Show Heart

So what if it was raining throughout the entire 18th annual NIH Institute Relay? So what if all were guaranteed a bad hair day as a result of the muggy, dim weather? NIH'ers with heart came out in throngs May 17 both to race and encourage colleagues; their smiles and cheers utterly cast aside some of the worst conditions in the history of the never-canceled race.

"We had a chance to call off the race due to the weather at 10:30 in the morning, and since it was nice out then, we decided not to postpone it," said Dr. Peter Pentchev, race coordinator for NIH's Health's Angels Running Club, as beads of rain rolled down the face of his glasses.

Just before race time, from all quarters of campus, runners loped onto the race site—the lawn in front of Bldg. 1. Hardly a word was spoken about the weather as joggers

collected under a large oak on the lawn to stretch and mingle. Laughs and encouragement far outpaced complaints about the gloomy conditions, humid enough, nearly, to wilt flagpoles.

Two heats accommodated 35 teams divided into five racing divisions (see results below) in the hour-long contest. Despite steady showers, few runners abandoned either the course or their colleagues as the event—an annual rite of spring at NIH—unfolded. Many either gathered under umbrellas or turned lightweight running gear into makeshift 'do-rags in order to stay and cheer.

An after-work party at the FAES House topped off the day's competition. In addition to enjoying snacks, racers and friends watched a videotape of the race festivities directed by Randy Schools, R&W general manager, who was this year's honorary starter of the first heat.



Medicine Runners, the Open Male winner, included (from l) Susan Ortega, John Graves, Dan Fowler, Wayne Saville, Doug Hageman.



The Open Mixed winner was Team Peggus, featuring (front, from l) Patricia Day, Alison Wichman. At rear are (from l) Phil Snoy, Sean Donevan, Jerry Moore.



AND THEY'RE OFF—Runners in the first heat of the NIH Institute Relay charge out of the starting area on Center Dr. in front of Bldg. 1.



The Jakson Five went to the trouble of ordering tie-dye shirts from a vendor in Rhode Island in order to look resplendent on race day. Adding much color to the gloomy day, the team finished fourth overall and third in its division.



Open Female winner Stratifies included (from l) Julie Baltz, Janet Dale, Mary Paulsen, Robin McKenzie and Jessica Swartz.



Race coordinator Dr. Peter Pentchev peers out through rain-soaked glasses at the event's closing moments.



Winning the Mixed Master division were (from l) Bill Rizzo, Nelli Markova, Laura Russell, Virginia Kimonis and Sherri Bale.

Order of Finish—18th Institute Challenge Relay

1.	Medicine Runners	13:26 (Open Male Winner)
2.	Team Peggus	13:34 (Open Mixed Winner)
3.	Primordial Ooze	14:44 (Open Mixed)
4.	Jakson Five	14:46 (Open Mixed)
5.	Bill Klein	14:48 (Open Mixed)
6.	Transferases	15:00 (Open Male)
7.	Gene Striders	15:03 (Open Mixed)
8.	Blue Bombers	15:11 (Open Male)
9.	Room 235	15:16 (Open Male)
10.	Wurtz Runners	15:17 (Open Male)
11.	Fitness Center	15:18 (Open Mixed)
12.	Adagio	15:33 (Open Mixed)
13.	Smooth Pursuers	15:39 (Open Male)
14.	Trusty Steed	15:49 (Open Male)
15.	Personnel Posse	16:04 (Open Mixed)
16.	Rockies	16:06 (Open Mixed)
17.	Stratifies	16:10 (Open Female Winner)
18.	Papillofers	16:11 (Open Mixed)
19.	Bandits	16:13 (Open Mixed)
20.	OT Cuties	16:25 (Open Mixed)
21.	Lost Card	16:25 (Open Mixed)
22.	Ice Cold Peppers	16:41 (Open Mixed)
23.	Vamp II	17:37 (Open Mixed)
24.	Mutant Skin	18:07 (Open Mixed)
25.	Last Place	18:31 (Open Mixed)
26.	Cloning Around	19:20 (Open Mixed)
27.	Trackers	19:25 (Open Mixed)
28.	Extrinsic Factors	19:42 (Open Mixed)
29.	Intrinsic Factors	19:42 (Open Mixed)
30.	Clinical Pacers	19:58 (Open Mixed)
31.	Champions	20:13 (Male Master Winner)
32.	High Affinity	20:14 (Open Mixed)
33.	Extra Skin	20:21 (Open Mixed)
34.	Dream Team	20:52 (Open Mixed)
35.	Wrinkled Skins	22:38 (Master Mixed Winner)



NIH Upward Mobility Programs Recognize Graduates, June 14

NIH's Office of Human Resource Management and Montgomery College will host a recognition ceremony for graduates of the STRIDE, Career Curricula and Training and Development Services Program (TDSP) on June 14 from 11:30 a.m. to 1 p.m. in Lister Hill Auditorium, Bldg. 38A.

Each program is designed to provide NIH employees in nonprofessional support or technical positions with an opportunity for career change and advancement in the administrative fields. STRIDE graduates have completed on-the-job and academic training and have been reassigned to an ICD in a professional position. Graduates of the Career Curricula Program have prepared themselves academically and worked closely with a mentor to compete successfully for their current professional positions.

On their own time, TDSP graduates have completed courses at Montgomery College. Each program is a 3-year process.

This year's ceremony will be dedicated to Edith Pruden, who died on Apr. 15. As program manager for the upward mobility programs for her entire NIH career, she helped hundreds of employees achieve their career goals.

Paul Berry, news anchor for Channel 7 and community activist, will be the keynote speaker. This event is open to all NIH employees. □

The NIH Life Sciences Education Connection

If you would like to learn more about topics such as AIDS, genetics, or cancer, the Summer Seminar Series for Students may be just what you are looking for.

The program is designed for students from high school to medical school who are working at NIH this summer, but anyone who wants to play student for awhile is welcome to attend. Students will hear of the latest developments in biomedical research from people who are at the cutting edge in their fields.

The seminar series, held in Masur Auditorium, Bldg. 10, from noon to 1 p.m., begins June 22 with Dr. Anthony Fauci, director of NIAID, who will speak on "AIDS: Considerations As We Approach the 21st Century." The program continues June 27 and July 6, then every Tuesday from July 11 through Aug. 8.

Other topics will include the treatment of sickle cell disease, rehabilitation medicine, and translating basic research to the bedside. Speakers for the series include Drs. Michael Gottesman, Hynda Kleinman, Griffin Rodgers, and Richard Klausner.

For a complete list of speakers and topics, or if sign language interpretation or other accommodations are needed, call the Office of Education, 6-2427. □



Race for Cure, June 17

Sign up now for the sixth annual Race for the Cure, which includes a 5K run, 5K walk and 1-mile fun walk. The date is Saturday, June 17, 8:30 a.m. at the corner of 12th and Constitution Ave. NW, in Washington, D.C. There will be refreshments, celebrity guests (including actresses Sharon Stone, Linda Carter [TV's "Wonder Woman"] and former Redskins kicker Mark Moseley), prizes and commemorative T-shirts. Race benefits breast cancer research, education, screening and treatment. Pick up registration at the NIH Visitor Information Center (VIC), Bldg. 10, Rm. B1C218, or the R&W Activities Desk, Bldg. 31, Rm. B1W30. For more information, contact the NIH team coordinator, Peggy Brandenburg, 6-1776, at the VIC, which is also site of race packet pickup the week preceding the race. □



The Champions, winners of the Master Male division, included Steve Furlong (r) and Sandy Orloff.

YOUNG MOMS

(Continued from Page 1)

all the other major social and behavioral factors associated with poor birth outcomes in teenage mothers, you're still going to be left with a problem."

For the study, researchers analyzed the birth records of 134,088 white, single pregnancy, first-born infants in Utah between 1970 and 1990. The researchers limited their analysis to white, largely middle-class girls and women, as this group tends to have the lowest risk for poor birth outcomes.

The researchers also checked for various other risk factors for poor birth outcomes. These included a low level of education, being unmarried at the time of the baby's birth, and not having received adequate prenatal care.

The study was conducted in Utah because mothers in that state are more likely to be white and married and to have received adequate prenatal care. Young women in Utah are also less likely to smoke, drink, or use illegal drugs—all risk factors for poor

birth outcomes—than are women in many other areas of the country.

The researchers found that, in general, mothers younger than 17 years of age tended to have higher rates of birth complications than mothers aged 18 to 19 or between 20 and 24. This held true even when the younger mothers were married, had received adequate prenatal care, and had achieved an educational level commensurate with their age.

For example, mothers under age 17 were twice as likely to give birth prematurely as were mothers between 20 and 24. The youngest teens also were nearly twice as likely to have low birth weight infants than were the women over 20. Mothers in the 18 to 19 age group had less risk for having premature or low birth weight infants than those under age 17, but still had a greater risk than the over-20 mothers.

"This finding is a major contribution to our understanding of a serious public health problem," said the project officer for the study, Dr. Charlotte Catz, chief of the NICHD Pregnancy and Perinatology Branch.

"Low birth weight and prematurity increase the risk for such conditions as mental retardation, cerebral palsy, blindness, and life-threatening infections."

The researchers do not know why the youngest mothers have an increased risk for poor birth outcomes, but speculate that in teenage girls the uterus and cervix may not yet have developed an adequate blood supply for the fetus. Another possible explanation is that because the girls are still growing, their bodies are competing with the fetus for nutrients.

"Becoming pregnant as a young teenager can result in an intrinsic increase in the risk of adverse outcomes of pregnancy, quite apart from the increased risk due to the adverse social and behavioral factors that are frequently associated with teenage pregnancy," the investigators wrote.

The authors also called for additional research to identify and explain the as yet unknown factors that place the youngest mothers at increased risk for poor birth outcomes. □

'Framework' Outlined

OEO Holds First in Series of Open Forums

NIH's Office of Equal Opportunity recently sponsored the first in a series of open forums for NIH employees titled, "Everything You Ever Wanted To Know About OEO But Didn't Know Who To Ask" in the Natcher Auditorium. The forum was moderated "Oprah-style" by Doris Campos-Infantino and Maria Mone, DHHS. NIEHS and the Baltimore staff attended via audio/video telecasts. In welcoming remarks, Levon Parker, NINDS EEO officer, said NIH has the unique opportunity to serve as the "flagship of the EEO arena" within DHHS and invited the NIH community to join OEO's Framework for Change to achieve equal opportunity and diversity in the NIH workplace.

OEO Director Naomi Churchill opened the forum by saying that changes at NIH are not occurring capriciously, but are a part of OEO's streamlining and reengineering process; the Framework for Change is OEO's outline for implementing long-range objectives over the next 3 to 5 years.

Sharrell Butler, chief, OEO Program Planning and Evaluation Branch, highlighted the new pilot NIH Affirmative Action Planning Process, which will focus on ICD progress in hiring and promoting a diverse workforce, and give managers more flexibility and accountability for achieving diversity goals.

Linda Morris, chief, Complaints Management and Adjudication Branch, OEO, presented future changes planned in the EEO complaints process, including delegation for informal complaints processing to the ICD level beginning with the complaints filed after Oct. 1, 1995, and the use of an alternative dispute resolution process and



Forum panelists include (from l) OEO branch chiefs Joan Brogan, Linda Morris and Sharrell Butler, OEO director Naomi Churchill and NINDS EEO Officer Levon Parker.

other forms of mediation that will address problems sooner and be less disruptive to the work environment.

The NIH Workplace Diversity Initiative was presented by Joan Brogan, chief of the office's Affirmative Employment and Programs Branch. She said OEO is in the process of evaluating the current groups and committees within the NIH community. To assist in this evaluation and to plan for an NIH-wide diversity congress, OEO has established a working group of representatives who are concerned with EEO and diversity issues. Working group members were introduced, along with the invitation to provide them with views, suggestions and information that may be helpful as they begin to plan for the diversity congress. A goal of the congress will be to examine the feasibility of establishing a diversity council to advise the OEO director.

Following the presentations, the audience was invited to ask questions.

Several questions were raised about maintaining a voice for employee groups

under the proposed formation of the diversity council. Churchill responded by stating that many issues, including fairness and respect, cross all race and gender lines, and that OEO is completely committed to creating a process that will include employee representation. She explained that the Workplace Diversity Initiative is a three-tiered process: (1) the working group, which was formed in April; (2) the diversity congress, which is proposed for October; and (3) the diversity council, whose representation will be discussed and formulated at the congress. Morris added that by combining the various groups and committees into a single council, each will strengthen its own position as well as becoming an advocate on cross-cutting issues.

In response to questions on changes in the complaints process, Morris said ICD EEO officers will receive intensive training before receiving the delegations, the new process will be supervised by OEO, and that the current 35 percent resolution rate is expected to improve for informal complaints filed.

Pedro Morales, director of PHS's Office of Equal Employment Opportunity and a guest at the forum, also responded to issues raised concerning the complaints process, affirming the need to incorporate the complaints processing changes into the overall NIH Framework for Change.

OEO will sponsor brown bag luncheon sessions around campus to continue the open dialogue concerning changes in the NIH EEO complaints process. Also, OEO will sponsor the next open forum on Wednesday, Jan. 24, 1996, in the Natcher Auditorium, 10:30 a.m. to noon. For more information, call Shirley Everest, OEO, 6-4627. □

250+ Volunteers

CC Family Friend Program Gives Parents a Break

By Sara Byars

They tease and laugh like big brother and little sister while picking off each other's chessmen balanced on a board.

"Check!" exclaims Brandy Horner. She's 14.

"Every game you get better and better," answers Peter Swarr. "Now you're gonna start picking off the backfield." Swarr's a volunteer with the Clinical Center's Family Friend Program.

"I'm working on it," Brandy says, breaking into a slow, sly grin. "Checkmate."

Brandy and Peter have known each other for just a few days. They met when Peter stopped by the nurses' station on 13 West to see which family might like to have a volunteer visit for a couple of hours.

"He's nice," Brandy says. "I like the company, playing games."

Think of volunteers like Swarr as true family friends, explains Andrea Rander, volunteer services director. Nurses on 13 West recognized the need for volunteers to come in and help young patients enjoy some play time while offering parents a respite from their often-demanding hospital routine. That was the genesis for the Family Friend Program.

"Parents need a bit of free time," Rander says. "They may want some quiet time in the chapel, or to make a hair appointment, or see a movie. It helps relieve some of the stress they're going through."

Finding a pool of volunteers to draw on wasn't a problem. "Many of the calls I get are from people who would like to work with pediatric patients," Rander continues. "Until this program was developed 3 years ago, there really weren't that many opportunities for that." Volunteers now work on both 13 West and 11 East.

An intensive, multidisciplinary orientation structured for the group is offered twice a year. A core of 20 volunteers are regulars. "Many are on call," Rander points out.



"The kids are the ones who break the ice," says Peter Swarr, a volunteer with the CC Family Friend Program. Patient Brandy Horner says she likes the company.

"Others come in regularly. Some can't volunteer weekdays, and are here evenings and weekends. It's working out nicely."

Dana Newberry, a nurse on 13 West, has coordinated the Family Friend Program for nearly a year. "Parents are asked to carry a lot of responsibility. The volunteers give them a break."

Volunteers sign in at the nurses' station each time they visit. A posted board lets nurses know at a glance when volunteers are scheduled to be on the unit. Nurses coordinate with patients' families to explain the program. Participation is strictly up to the parents.

"We consider the volunteers a normal part of our staff," Newberry points out. "It takes initiative for kids to interact with each other, and we'll see them sitting all alone in their rooms sometimes. The volunteers will draw them out."

"It's hard for parents of really sick children to break away," Newberry continues. "But they all come to the point of 'I need a couple of minutes.'" It's a comfort to know that a dedicated volunteer is there, even if the child is sleeping.

It's seeing a really sick child progress from listlessness to "raising a ruckus" that gives Margaret Ershler a lift. A family friend volunteer since December, she explains, "I like working with children and I wanted to do something worthwhile with some extra time I have. I'd known people in the Seattle area who are involved in a similar program."

The scheduling flexibility built into the program suits Ershler, a freelance documentary producer for television. "I'd never before been in a job situation where I really had time to

do this. It's fine if I come in during the day or I can do an evening shift."

One of the first patients she worked with was a little boy. "My staying with him gave his mother the opportunity to get away for a couple of hours. He was a very sick child, but each week I watched him get stronger and healthier. The last time I saw him he was running around and laughing."

Ershler smiles. "To see the improvement and to know that you're making a child laugh. That mom's getting a couple of hours she needed. It's wonderful. In the busy lives we all have, there's too little time in everybody's day to do things we want to do. I'm really glad I'm doing this."

Swarr, a data manager working under contract for NCI, is headed for medical school at the University of Vermont in the fall. He's considering a career in pediatrics. His experiences as a volunteer dovetail with those plans.

"I was a little nervous at first," he admits, recalling his first involvement as a volunteer, "but the kids are the ones who break the ice. We are the neutral people in their lives. Parents have to discipline. Clinicians have to do procedures. We're here to play."

During the intensive orientation sessions provided volunteers, the message was, Swarr explains, "trust your instincts. A kid's job is to play. They may be sick, but they're still kids." □



Dr. Jack Yanovski, an NICHD pediatric endocrinologist since 1989, has been named ward chief of 11 East, the Clinical Center's first multi-institute unit designed and staffed especially for children. He had served as acting chief of the 13-bed unit since it opened last spring. "Dr. Yanovski has provided outstanding leadership during 11 East's first year of operation. The success of 11 East is a result of a collaborative effort by the entire care team," said Dr. David Henderson, CC deputy director for clinical care. "His commitment to providing comprehensive and collaborative pediatric care is a model for the Clinical Center."

'Volunteers Are Valuable Assets'

They are receptionists, patient advocates, interpreters, shoppers for patients, errand runners, flower deliverers. They work in labs, offices, patient care units. They are the Clinical Center's volunteer corps and they number more than 250.

Their gifts are time, concern, and care. Their contributions and commitment to the Clinical Center were honored recently with an awards ceremony and luncheon.

"Our volunteers are valuable assets," notes Andrea Rander, volunteer services director. "They are being called upon more and more to complement our staff and take on responsibility willingly. Their depth of talent and expertise is enormous."

NIDDK's Benjamin Burton Named Scientist Emeritus

By Jane DeMouy

Dr. Benjamin Burton, NIDDK associate director for disease prevention and technology transfer, has been named NIH scientist emeritus after retiring recently.

"We will miss Ben and the many contributions he has made to NIDDK," said NIDDK director Dr. Phillip Gordon. During his 34-year career, Burton helped develop protein supplements to fight malnutrition in developing countries, and helped develop new technology for kidney dialysis. Burton's textbook, *Human Nutrition*, now in its 4th edition, has been translated into Spanish, Portuguese, and Arabic.

"He is a world expert in nutrition and nutrition research, and his knowledge of science of all kinds is encyclopedic," said Dr. G. Donald Whedon, who directed the institute from 1962 to 1981, when it was known as the National Institute of Arthritis and Metabolic Diseases, and then the National Institute of Arthritis, Metabolism and Digestive Diseases.

Burton recognizes his work on kwashiorkor, or protein-deficiency malnutrition, as one of the two highlights of his career. He began studying kwashiorkor after joining NIH in 1960. Many children in underdeveloped countries, especially in India, died of the disease due to a lack of growth-supporting protein in their diets.

"I got NIH into the orphanage business because we needed a controlled setting in which to conduct clinical trials on children with this disease," he says.

Burton and his coworkers found that if they provided protein supplements to a family to feed their children, the mother gave the supplements to the father, the family's breadwinner. To solve the problem, Burton set up orphanages for children with the disease to test the experimental food. These clinical trials helped India develop a native-grown peanut protein as a diet supplement.

Burton's research on kwashiorkor also took him to the Philippines, where his team successfully developed a rice with twice the usual protein. This enriched rice made it possible for undernourished children to grow fairly normally even without the addition of expensive animal proteins that most families could not afford.

Burton also is proud of his role in the development of workable and clinically effective artificial kidneys and methods for treating end-stage renal disease. He began working with kidney dialysis in 1965, when he was appointed chief of NIH's Artificial Kidney Chronic Uremia Program, established because of a congressional directive to improve artificial kidney technology. Kidney dialysis, first developed during World War II

by a Dutch physician in the German-occupied Netherlands, was still experimental, and only available to a few selected patients. At that time, each patient could only be dialyzed two or three times because artificial kidneys had to be surgically connected to the vascular system.

"We succeeded in carrying out our congressional marching orders," Burton said.

"Now, in the United States alone, there are more than 185,000 kidney dialysis patients who are living because of dialysis." In addition to hemodialysis as we know it now, Burton's program also developed new types of peritoneal dialysis (detoxification by lavage of the abdominal cavity), including "suitcase kidneys," an ambulatory method of self-dialysis that does not require three visits a week to a dialysis center or hospital.

During its early years, this technology's impact on people's lives was vividly demonstrated at the State University of New York, Brooklyn, Burton recalls.

Watching a dog whose kidney was tied off go through the dialysis, Burton noticed a woman also watching the process carefully. She turned out to be a staff member who would be taking the portable kidney dialysis unit with her on her honeymoon.

According to Dr. William Foster, senior staff physician of NIDDK's Office of Program Planning and Evaluation and a longtime friend and colleague, Burton leaves a legacy of excellence behind him. "He inspires imitation and has always encouraged

"He inspires imitation and has always encouraged others to reach their full potential."

others to reach their full potential," he said. "He always has a practical comment that cuts to the solution of whatever problem you're discussing."

Born in Germany, Burton spent his childhood in what is now Israel but came to the United States to study at the University of California, Berkeley. After receiving his Ph.D. in 1947, he briefly

attended medical school, but left to join Pacific States Laboratories, Inc., as a vice president and technical director in 1952. Three years later, he moved on to the H. J. Heinz Co. as staff consultant.

To Burton, "living" means learning something new, a philosophy he practiced when he became a pilot at age 55. At 75, he plans a fifth edition of *Human Nutrition* and will continue his research.

"I retired because it's decent to leave at 75, but I don't intend to stop what I've been doing," he said. "My goal is to continue doing something useful." □



Dr. Benjamin Burton

BIG Fundraiser Set, June 17

The Blacks in Government NIH chapter is presenting its annual Scholarship Dinner Dance Fundraiser, Saturday, June 17, 8-midnight. The event will be held at La Fontaine Bleu, 7963 Annapolis Rd., Lanham, Md. The donation to attend is \$40. There are no sales at the door. For information or tickets, call Albert Harris, 6-3706, or Roosevelt Ingram, 6-5371. □



NIGMS Grantee McCammon Wins Cray Research Award

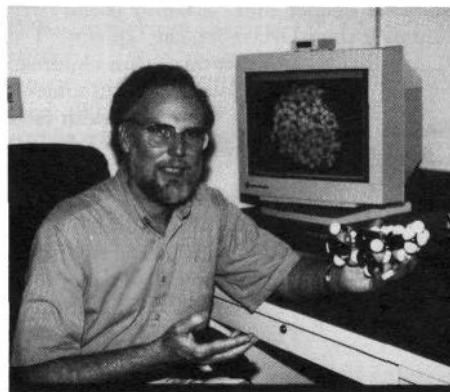
Dr. J. Andrew McCammon, an NIGMS grantee at the University of California, San Diego (UCSD), has been named the winner of this year's Computerworld/Smithsonian Breakthrough Computational Science Award sponsored by Cray Research. The award is given annually for the most outstanding

contribution to computational science. The award recognizes McCammon's work on enzyme action, in particular his studies on how the enzyme acetylcholinesterase works so quickly to break down the neurotransmitter acetylcholine.

A native of Indiana, he received a B.A. in chemistry from Pomona College in Claremont, Calif., and an M.A. in physics and a Ph.D. in chemical physics from Harvard University.

McCammon, who holds the Joseph E. Mayer chair in theoretical chemistry at UCSD, is also a senior fellow at the San Diego Supercomputer Center and a professor of pharmacology at the UCSD Medical School.

He received the award on June 5 at a ceremony in Washington, D.C. His name and work now become part of the permanent Information Age display at the Smithsonian's National Museum of American History. □



Dr. J. Andrew McCammon

Jerome Green Retires as DRG Director

Dr. Jerome G. Green recently retired from NIH, where he was director of the Division of Research Grants for the past 9 years. Prior to becoming the DRG director, he spent 31 years with the National Heart, Lung, and Blood Institute, where he occupied several positions. Most recently, he was director of the Division of Extramural Affairs in that institute.

During his years at NIH, Green made significant contributions that enhanced the NIH extramural research programs. Most prominently, he helped initiate and establish the First Independent Research Support and Transition (FIRST) award, support for newly independent biomedical investigators, and the Method to Extend Research in Time (MERIT) award, long-term support to investigators who have demonstrated superior research competence and productivity. Throughout his tenure, he was prolific in advancing new approaches to the extramural programs.

A native of Brooklyn, N.Y., Green received his B.S. degree from Brooklyn College, *magna cum laude* and Phi Beta Kappa, and his M.D. degree from Albany Medical College.

After serving his internship at Albany Hospital Medical Center, he came to NIH in 1955 as a health scientist administrator in what was then the National Heart Institute, with program and review responsibilities in research and training. He also joined the PHS Commissioned Corps at that time.

From 1957 to 1965, Green was a resident in internal medicine, PHS Hospital, San Francisco, a special research fellow, Cardiovascular Research Institute, University of



Dr. Jerome G. Green (l), DRG director, enjoys a light moment while discussing peer review issues with Dr. Sooja Kim, nutrition study section's scientific review administrator.

California School of Medicine at San Francisco, and a senior research fellow and clinical investigator, Cleveland Clinic, Ohio. In 1965, he returned to NHLBI as deputy chief, Extramural Programs, becoming the associate director for extramural research and training in 1966 and director of the Division of Extramural Affairs in 1972.

Green has received numerous awards and honors. These include the Distinguished Service Award from the American College of Cardiology; the PHS Meritorious Service Medal for "excellence and achievement in the administration of the extramural activities of the National Heart, Lung, and Blood Institute"; and the Assistant Secretary of Health's Award for Exceptional Achievement "for outstanding leadership in effecting

changes in NIH extramural program activities." Since 1989, he has had the rank of rear admiral (assistant surgeon general) in the commissioned corps.

When Green announced his retirement to the DRG advisory committee (which he instituted in 1989) and to the division staff, he noted how much he had enjoyed working with his colleagues and friends at DRG and throughout NIH and the biomedical community.

Concerning the division, he said, "There may be other work at NIH that is just as important as ours but, certainly, there is nothing more important." He urged DRG staff "to keep standards high for this organization—it is crucial for NIH and this country." As Green remarked elsewhere, DRG peer review is "absolutely essential...to the operation of NIH...the keystone in the arch of institutes, centers, and divisions."

His future plans include travel as well as "many things I wish to do before I reach middle age."

He will be deeply missed both at the division and throughout NIH. Dr. Thomas Braciale, chairperson of the DRG advisory committee, praised Green's management skills and his willingness to open DRG to scrutiny, and noted that his retirement would be "a loss to the DRG family and the NIH community." These sentiments have been echoed in numerous letters and phone calls from other advisory committee members, from DRG staff, from other NIH colleagues, and from individuals in the biomedical community. □

Commissioned Corps Promotes DRG's Donald Luecke

DRG deputy director Dr. Donald H. Luecke was recently promoted to the rank of rear admiral in the Public Health Service's Commissioned Corps. One of 15 corps flag officers at NIH, he has been engaged in many important activities related to improving peer review and the extramural programs at NIH.

He played a key role in NIH's participation in the National Performance Review that identified NIH peer review as a "reinvention laboratory." He has also been involved in a number of reinvention activities such as the structuring of initial review groups, the streamlining of application review procedures, and the development of the relational database (IMPAC II), which is of fundamental importance to extramural research administration. Under his leadership, the time to review fellowship applications in DRG study sections was reduced from 8 to 4 months. In addition, he was heavily involved in initial efforts to establish the First Independent Research Support and Transition (FIRST) Award.

Born in St. Paul, Minn., Luecke received a B.A. degree from Macalester College, an M.S. degree from the University of Illinois and an

M.D. with honors from Michigan State University. He served as a clinical microbiologist at the North Dakota state health



Dr. Donald H. Luecke

department and on the faculty in the department of microbiology at the University of North Dakota School of Medicine.

From 1966 to 1973, his research on arthropod transmission of certain RNA and DNA tumor viruses was

supported by NCI. Following a postdoctoral fellowship at Michigan State University and the Michigan department of health, he came to NIH in 1975, joining NCI as a medical officer in the Division of Cancer Cause and Prevention.

In 1977, he served as acting head of the physiological sciences section, NIGMS, where he administered grants in trauma and burn

research and participated in the development of initial review capability within NIGMS, serving as executive secretary for the review of program projects and centers. He rejoined the Division of Cancer Cause and Prevention, NCI, serving from 1978 to 1981. In 1981, he was appointed deputy director, Stroke and Trauma Program, National Institute of Neurological and Communicative Disorders and Stroke, and in 1982, he became deputy director of its Extramural Activities Program, serving there until his appointment in 1987 as DRG deputy director.

Luecke has served on a number of NIH-wide committees and is currently a member of the NIH extramural program management committee and chair of its subcommittee on FIRST awards; cochair of the committee on improving peer review; and a member of the NIH evaluation policy oversight committee and the NIH cost management committee. He is a member of the American Medical Association and is a recipient of the PHS Commendation Medal and the Outstanding Service Medal.

Currently, he is serving as the DRG acting director. □

OAM Sponsors Second Methodology Conference

In a conference addressing issues of quality and evaluation for conducting research in complementary and alternative medicine (CAM), the Office of Alternative Medicine sponsored the second of two research methodology conferences recently. Dr. Wayne B. Jonas, director-designee of OAM presided at the conference, at which working groups convened to address eight principal topics: definitions; types of evidence; outcome measurement; qualitative research,

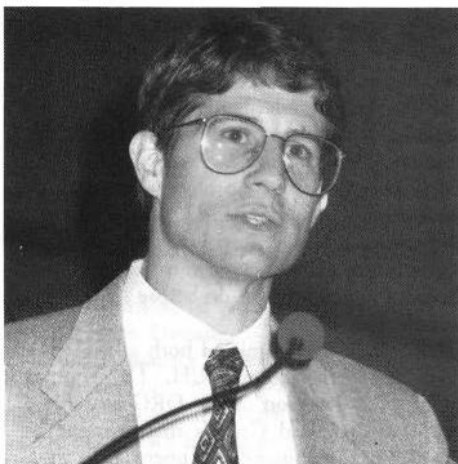
quantitative methods, placebo and non-specific effects; summarizing evidence, and practice guidelines. Working groups were charged with responding to several important questions affecting the future of CAM research such as:

- ▼ What is quality research in complementary and alternative medicine?
- ▼ What kind and how much evidence is enough to recommend a practice?
- ▼ Can current methods of medical investigation be applied across cultures?
- ▼ How can we use placebo and nonspecific effects productively?
- ▼ What outcomes measures are most necessary to alternative medicine and how are they best measured and analyzed?
- ▼ What are the issues in alternative medicine that challenge our normal scientific methods of investigation?

The conference attracted national and international experts in the fields of research design, practice, application, technology transfer, reimbursement, and policy guidelines. It included presentations by current and proposed CAM research centers, in addition to other investigators conducting research in CAM fields. Networking sessions were an important attribute of the conference—fostering linkages of independent researchers with their colleagues, who due of the limited amount of research currently

published in CAM, are not always aware of other investigators working in similar areas of research. The conference concluded with the working group chairs presenting summaries of their groups' discussions, which included both criteria and recommendations for conducting and evaluating research in CAM.

The first methodology conference sponsored by OAM in July 1994 articulated paradigmatic and procedural issues that exist for some disciplines in the CAM field. Because research issues discussed at both methodology conferences are not exclusive to CAM, it is expected that the results of this conference will benefit many areas of medical research. OAM anticipates publishing proceedings from these conferences in the fall. □



Dr. Wayne B. Jonas, director-designee of the Office of Alternative Medicine, presided at the 2nd methodology conference. He is currently director of the Medical Research Fellowship at Walter Reed Army Institute of Research, where he teaches research methodology and conducts laboratory research in immunology and toxicology. His appointment to OAM is effective July 1.



The importance of biomedical research to the nation's health, and OAM's mission to further and help validate CAM research, was commemorated in a special "tree of peace ceremony." The ceremony was performed on the grounds of the Natcher Bldg. by Eagle Cruz (l), a pipe carrier and sundancer from the Yaqui Tribe.

CC's Richard Davey Leaves NIH to Become Chief Medical Officer at American Red Cross

By Sue Kendall

Dr. Richard J. Davey, who served the Clinical Center's department of transfusion medicine (DTM) as chief of the laboratory services section, left recently to become chief medical officer of the American Red Cross. Although excited about this new chapter in his career, he said, "It's going to be very hard for me to leave the solid and rich professional and personal relationships I've had here at NIH. It's a great environment."

According to Dr. Harvey Klein, DTM chief and Davey's boss, his new job "might be the most challenging position today in blood transfusion delivery in the United States, and possibly the world." Davey will be a key player on an expert team assembled by Red Cross President Elizabeth Dole to lead the organization's response to increasing federal regulation of blood transfusion services. He will oversee the medical and scientific aspects of blood donation, processing, and transfusion, and the direction and quality of Red Cross research done at regional centers, including the Jerome Holland Laboratories in Rockville. Davey's new office will be in Rosslyn, Va., while the biomedical headquar-

ters in Washington, D.C., are being refurbished.

Looking back on nearly 20 years with the CC, Davey says he has seen DTM "grow immensely from essentially a traditional blood bank to a comprehensive department involved in a wide range of activities."

The laboratory services section, which he led, comprises two laboratories: the transfusion services lab and the histocompatibility, or HLA, lab. The former processes blood and blood components for CC patients, and handles unusual or difficult clinical problems in blood transfusion, here and throughout the mid-Atlantic region. The HLA lab handles tissue-typing for platelet transfusions and bone marrow matching programs. "This lab has won awards for the past 5 years for perfect performance of its tests," Davey says. "It is poised to be at the cutting edge of molecular-level typing of cells and cell lines."

He also coordinated DTM's accredited programs for training physicians and technologists in transfusion medicine. Says Klein, "So many leaders in the discipline today came out of this training program—it's

really very impressive." Davey also initiated the popular Annual Symposium in Transfusion Medicine, held in the fall.

His research interests are varied. He has studied blood storage and preservation; in vivo tracking of radiolabelled blood elements; high-efficiency blood filtration; blood irradiation; and the types of plastics used in blood bags. Some studies done under his leadership have resulted in changes in national standards of the way blood elements are stored and manipulated.

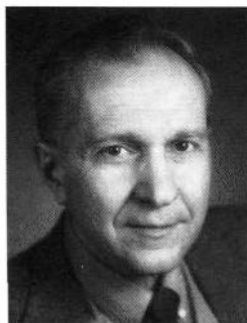
"It's certainly difficult to lose someone with his experience and knowledge, and who's been part of a team that's been in place for a long time," says Klein. Time permitting, Davey hopes to return a half day a week as a guest researcher to keep his finger on the pulse of DTM's research and activities. You might also catch him in the news occasionally, since one of his new responsibilities will be Red Cross spokesperson on matters of medicine and science.

Klein sums up: "I wish him much success, as we all do, in what's going to be a very challenging role. We'll miss him." □

Gerassimos Roussos Retires from NIDR

Dr. Gerassimos Roussos, a health scientist administrator at the National Institute of Dental Research, retired recently after 32 years of federal service. His government career included 21 years at NIH, 12 of which were with NIDR.

Roussos most recently served in NIDR's Division of Extramural Research as director of the Salivary Research and Research Centers in Oral Biology programs, as well as coordinator of the institute's research center activities. He was in charge of a diverse grant portfolio ranging from research focusing on salivary glands, their secretions and disorders, to broad-ranging basic research in oral biology.



Dr. Gerassimos Roussos

Born in Khartoum, in the Republic of Sudan, Roussos received his bachelor's degree from London University. He came to the U.S. in 1954 on a postdoctoral fellowship at Rutgers University and went on to receive a Ph.D. in biochemistry from Johns Hopkins University. He did his postdoctoral training at Stanford University, where he studied DNA metabolism. He later held faculty positions at the University of Kansas Medical Center and Roosevelt University in Chicago, and was director of the enzymology laboratory at the V.A. Hospital in Kansas City.

Roussos joined NIH in 1973 as a project

officer with NIDR's National Caries Program. There followed an 8-year break in his NIDR career, during which he was a program director with the National Institute of Arthritis, Metabolism, and Digestive Diseases, now NIDDK. He returned to NIDR in 1988 as chief of the Extramural Program's Caries, Restorative Materials, and Salivary Research Branch.

A recipient of the NIH Merit Award in 1993, Roussos was honored "for exceptional leadership and creativity in furthering research on salivary gland function and dysfunction by developing a portfolio of grants of the highest caliber."

He is credited with building the Salivary Research Program from a relatively small component to the third largest funding area in the extramural program. His style is best described as "dedicated, thorough, and comprehensive—he perseveres," said Dr. Lois Cohen, director of the Division of Extramural Research.

Roussos maintains his excitement about the promising future of saliva research. "We are just tapping into the storehouse of information contained in saliva," he said. "Research is continuing to show that the composition of saliva can mirror the body's state of health."

Roussos' retirement culminates a rewarding career in which his greatest pleasure was having the opportunity to promote research in a variety of scientific fields.

Dr. Norman S. Braveman, assistant director for extramural program development in the Division of Extramural Research, has been appointed acting director of the Saliva Research Program and the Research Centers in Oral Biology.—Wayne Little □

ORS's Richard Kagan Retires After 29 Years at NIH

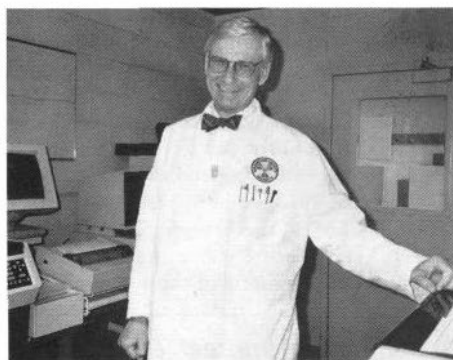
After 29 years working in the same lab, Richard J. Kagan, a health physicist with NIH's Office of Research Services, will trade his long tedious commute from the Ferndale, Md., area (near Baltimore) for long-awaited pleasure trips with his wife. He will retire on June 30, putting an end to the weekday routine he has followed since 1966.

"Back in '66 when I started, I used to breeze in on the BW Parkway," Kagan recalled. "That sure has changed over the years. Now I have to leave the house around 5 o'clock in the morning to get here at 6:30. And, even at that time, the road's not deserted. I certainly will not miss my commute."

In 1958, after graduating from x-ray technology school at Johns Hopkins Hospital, he accepted a position as a staff technician. He was promoted to a post with the hospital's radiation safety unit in 1960.

"It was a real small unit," Kagan said. "There were only three of us on staff—the radiation safety officer, the secretary and me. That enabled me to learn quite a bit, because everybody had to do a little of everything."

After rising through the ranks at Hopkins



Richard Kagan, who retires from NIH on June 30, stands beside a liquid scintillation counter, the latest model of one of his constant workday companions for 29 years here.

Kagan came to NIH's Bldg. 21 in 1966 as a health physicist in NIH's Radiation Safety Branch, which ensures that NIH is complying with the requirements of the agency's 25-page Nuclear Regulatory Commission license. Specifically, Kagan is responsible for sample analysis performed in the branch's environmental radioanalytical laboratory, and for overseeing the branch's special procedures



Dr. Sharon Gordon, a National Research Service Award intramural fellow in NIDR's Neurobiology and Anesthesiology Branch, is a winner in the postdoctoral division of the Edward H. Hatton competition, sponsored by the American Association for Dental Research (AADR). She was honored for an abstract she presented on blocking nervous system changes during surgery that contribute to postoperative pain. Announced at the recent AADR annual meeting in San Antonio, the award will allow Gordon to compete as a finalist in the international competition later this year in Singapore. A native of Dallas, Gordon earned a bachelor's degree in biology from the University of North Texas in Denton and a D.D.S. from the University of Texas Health Science Center at San Antonio Dental School. She completed a 2-year general practice residency in San Antonio prior to joining NIDR in 1993.

laboratories, the "hot labs."

"It's gotten pretty crowded around here," Kagan said, as he gestured around the rear corner of the lab to a small cubby hole he shares with coworker Virginia Sheldon.

"We're all certainly going to miss him," she remarked, smiling as she glanced up from her desk. "He's like a walking history book on NIH."

"I've seen a lot of changes," Kagan agreed. "The campus has grown. About 10 years ago, there used to be a wire fence around this building that sort of secluded it from the rest of campus. I remember when they finally took that fence down. You stay around a place for 29 years, you see a lot of people, make a lot of friends and witness a lot of changes. I'll miss the friends I made the most."—Carla Garnett □

DCRT Training Classes

PC<—>Mainframe Communications with Kermit	6/8
Introduction to the Networks	6/8
The Database Technology Seminar	6/16

All classes are on the NIH campus and are given without charge. □

Bicycles Added to Campus Police Patrol

The NIH Police unveiled a new brand of community policing tool at NIH's observance of Bike To Work Day on May 18 when four officers rolled up to the event in front of Bldg. 1 on special patrol bikes.

"These are regular patrol officers who will be conducting regular patrol functions," said Cpl. Patrick Y. Coajou, crime analyst for the NIH Police Branch and coordinator of the project to bring bicycles—already proven as effective anti-crime means, particularly in urban areas—to campus. "They provide more visibility, better access to all parts of campus, and better response for the community."

Officers on bikes, in addition to appearing more friendly to the community they serve, "are more aware of their environment than officers in patrol cars," Coajou observed. "They hear more and see more. Plus, there's an element of stealth. Bad guys don't look for policemen on bikes. There's an element of surprise as they cruise the parking lots."

The four officers will split into two daily shifts: two will ride the campus from 7 a.m. to 3:30 p.m., and the other pair will cruise the 3:30-11:30 p.m. beat.

The special bikes are made exclusively for police use by Raleigh, and feature 21-speed Shimano derailleurs, beefed-up frames for hard use such as curb hopping and stair climbing, shocks on the front forks, quartz-halogen headlights, and lightweight frames.

Male Subjects Needed

The USUHS department of medical and clinical psychology needs healthy male nonsmoking volunteers, ages 21-45, for a 2½-hour study of the effects of noise on performance. Payment is \$30. Call Laura or Martha, (301) 295-3263. □

NIH Family Care Fair, June 22

NIH will sponsor its third Family Care Fair on June 22 from 11 a.m. to 2 p.m. in Wilson Hall, Bldg. 1. Information will be available from child care and elder care resource and referral services, NIH onsite and offsite child care facilities, and other community resources for work/family issues. The fair is open to all NIH employees. □

FAES Chamber Music Series

The FAES has announced its 1995-96 Chamber Music Series:

- Sept. 17 Richard Goode, piano
- Oct. 8 Pamela & Claude Frank, violin and piano
- Oct. 22 Raphael Ensemble
- Nov. 19 Pamela & Claude Frank
- Dec. 3 Vermeer String Quartet
- Feb. 4 Radu Lupu, piano
- Mar. 3 Ysaye String Quartet
- Mar. 17 Pamela & Claude Frank

For information about tickets, call 6-7975.



The four new bike patrol policemen at NIH are (from l) Ofc. James E. Kowal, Ofc. John S. Hazelbaker, Ofc. Lawrence Brown Jr., and Ofc. Kurt F. Roepcke.

"Montgomery County and Gaithersburg police have used bike patrols very effectively," said Coajou. "They helped us select the uniforms and equipment for our officers."

All four officers recently trained for 3 days with the Montgomery County police department's bike patrol unit, which included a 40-mile ride featuring scrambles up and down steps.

"In the future, we expect to send our officers to police bike competitions, just as we send officers to events like the Police Olympics," forecast Coajou. □

Thomas Johnson To Give NIA's Nathan Shock Lecture

Dr. Thomas E. Johnson has been chosen to deliver the 1995 Nathan W. Shock Award lecture on Thursday, June 15 at 3 p.m. at the Johns Hopkins Asthma and Allergy Center auditorium in Baltimore.

Recognized for his contribution to our understanding of the genetics of aging—specifically the mapping of genes that govern the longevity of the nematode (roundworm)—Johnson will speak on "Identification and Function of Gerontogenes in *C. elegans*." He received his Ph.D. in genetics from the University of Washington in 1975 and is currently an associate professor of psychology and fellow of the Institute for Behavioral Genetics at the University of Colorado, Boulder. He has spent much of his career characterizing the genetics of aging in nematodes, identifying a gene, *age-1*, that lengthens life and reduces fertility.

In addition, Johnson has developed mutants that may provide valuable models to examine the genetic basis of aging and eventually be applicable to mammalian systems.

The Shock award has been presented annually since 1990 to honor the memory of Dr. Nathan W. Shock, the first scientific director of NIA and the "father of modern gerontological research." The lecture is free and open to the public. Light refreshments will be served after the lecture. The address of the auditorium is 5510 Hopkins Bayview Circle, Hopkins Bayview Research Campus, Baltimore. □

Epidemiology Interest Group Meets, June 21

The Epidemiology Interest Group will hold a meeting on June 21 in Bldg. 31C, 6th floor Conf. Rm. 9, from 3:30 to 5 p.m. The guest speaker will be Dr. Lewis K. Schrager, chief of the Epidemiology Branch, Division of AIDS, NIAID, who will address "Unique Outcomes of HIV Infection: Long-Term Non-Progression."

He will provide a review of recent publications with an overview on cohorts and subcohorts, how subjects were chosen, and cellular and humoral immune responses. He will also discuss biologic correlates and their integration into clinical epidemiologic studies as well as which theories and hypotheses are holding up and which are not.

The meeting and lecture is open to anyone with an interest in epidemiology or the lecture topic. The Epidemiology Interest Group is seeking new members, planning work groups, and seeking intramural research posters for the 1995 NIH Research Festival. For information, attend the meeting, or contact Martina Vogel (MartinaVogel@nih.gov) or Dick Havlik (HavlikR@gw.nia.nih.gov). □

Wednesday Afternoon Lectures

On June 14 at 3 p.m., Dr. Joan A. Steitz, Henry Ford II professor and investigator in the Howard Hughes Medical Institute at Yale University's department of molecular biology and biochemistry, will speak on "snRNPs: Building Blocks of the Cell Nucleus." Her talk, in Masur Auditorium, Bldg. 10, is hosted by the Molecular Biology Interest Group.

On June 21, from 2 to 4 p.m., the GM Cancer Research Foundation Laureates Lecture will be held in Masur. Introduced by Dr. Joseph G. Fortner, president of the General Motors Cancer Research Foundation, lectures will be given by: Dr. Edward Harlow, winner of GM's Sloan award; Dr. Norbert Brock, who has won the Kettering award; and Drs. Joseph F. Fraumeni, Jr., and Frederick P. Li, who will share the Mott prize for cancer research. The talk is hosted by the Office of the Director, NIH.

For more information, call Hilda Madine, 4-5595.

Postmenopausal VoIs Needed

The Cardiology Branch, NHLBI, needs postmenopausal volunteers for an outpatient study of estrogen/progesterone. Participants must not be taking any medications, hormone replacements or vitamins. Volunteers will be paid. Call Rita Mincemoyer, 6-3666. □