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NIHAA Update

Varmus Presides Over His Final ACD Meeting

By Carla Garnett

With the ink not yet dry on NIH's fourth-straight large budget increase, Dr. Harold Varmus presided over his 13th and final meeting of the advisory committee to the NIH director (ACD) on Dec. 2, 1999.

President Clinton had signed just a week earlier the FY 2000 omnibus spending bill that represented another step closer to the goal of some advocates to double the agency's appropriation by 2004. The ACD meeting agenda was chock-full of presentations and discussions about concrete ways—particularly construction projects both intramural and extramural—to spend the latest and any future largesse.

As is customary, Varmus spent the opening minutes of the meeting giving his advisors a summary of events since their last gathering. He welcomed several new official ACD members including Phillip Williams, retired vice chair of the Times Mirror Co., who had served previously as an ad hoc ACD member; and Dr. Don Wilson, vice president for medical affairs and dean of the University of Maryland School of Medicine.

Varmus also announced a few appointments within NIH: Dr. Stephen Straus as director of the National Center for Complementary and Alternative Medicine, Dr. Allen Spiegel as NIDDK director and Sue Quantius as NIH associate director for budget.

Finally, upcoming departures were acknowledged: NIDCR director Dr. Harold Slavkin will leave NIH in July to head the University of Southern

*(See **ACD Meeting**, p. 14)*

Dr. June E. Osborn

Annual Meeting on June 17

Osborn Is NIHAA's 2000 Public Service Awardee

The NIH Alumni Association is pleased to announce that it will present the eighth NIHAA Public Service Award to Dr. June E. Osborn at the next annual meeting, Saturday, June 17, 2000, at the Mary Woodard Lasker Center (the Cloister), on the NIH campus.

She is president of the Josiah Macy, Jr. Foundation in New York City and has been an exemplary reviewer and advisor for NIH, serving on 17 study sections or special review committees.

Osborn attended Oberlin College, obtained her M.D. at Case Western Reserve in 1961, and took her post-M.D. training at Boston Children's Hospital, and the Massachusetts General Hospital.

At both Johns Hopkins University and University of Pittsburgh, she served as a research fellow. At the University of Wisconsin-Madison and Michigan, she concentrated on

*(See **Annual Meeting**, p. 2)*

NIH Budgets

NIH Receives Major Budget Boost in Y2K

President Clinton signed an omnibus budget bill on Nov. 29 that gives NIH its second record-breaking budget increase in a row. The FY 2000 appropriation for NIH is $17,913,470,000, an increase of more than $2.3 billion from FY 1999, and about $1.98 billion more than the President's budget, which called for a 2 percent increase for the agency. The 14.9 percent boost for FY 2000 matches the 14.9 increase realized in FY 1999, which represented NIH's biggest dollar increase ever.

However, the bill includes $3 billion in delayed obligations, not available until Sept. 29, 2000, and an across-the-

*(see **Budget**, p. 13)*

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pediatrics and infectious disease. Osborn is also widely respected for her basic research on cytomegalovirus. She was associate dean of the graduate school (for biological sciences) at the University of Wisconsin (1974-1984) and then dean of the school of public health at the University of Michigan (1984-1993). She assumed her present position in 1993 and has received numerous honorary awards, degrees and lectureships. She is a member of the National Academy of Sciences and the Institute of Medicine.

In recent years Osborn has been both a major reviewer and advisor on public policy for AIDS and the safety of the blood supply. She has served on 11 NIH review/advisory groups on AIDS. Her most widely known AIDS service was as chair, U.S. National Commission on AIDS (1989-1993). In 1995, she also chaired the WHO Task Force on Global Blood Safety.

Her service at NIH has been particularly prominent in dealing with AIDS. Early in the epidemic (1988), she served as chair of the special NIH study section on HIV inactivation, and the NIMH AIDS research advisory committee (1987-1988). In 1993 and 1994, she was a member of the clinical trials advisory committee, NIAID, and the AIDS Action Foundation. She also served as chair of the data safety monitoring board for AIDS, prevention studies for NIAID (1995-1997).

In addition, NIHAA members will hear a talk by Dr. Allen M. Spiegel, newly appointed NIDDK director (see p. 23), entitled "Three decades of research on signal transduction at NIH: a broad overview." Spiegel is an internationally recognized endocrinologist whose research on signal transduction has helped define the genetic basis of several endocrine diseases.

As part of the program there will be a short business meeting conducted by NIHAA president Dr. William I. Gay.

Newly elected members of the NIHAA's board of directors will be announced. A reception with light refreshments will be part of the program. Invitations with details of the meeting will be mailed to local members in May.

SAVE THE DATE!

Saturday, June 17, 2000

The Year 2000 Annual Meeting
of the NIH Alumni Association
and the Public Service Award

10 a.m. - 1 p.m.
at the Mary Woodard Lasker Center
(the Cloister) Bldg. 60, NIH
Bethesda, Md.

Watch for invitation with details of the program.

Update

The NIHAA Update *is the newsletter of the NIH Alumni Association. The NIHAA office is at 9101 Old Georgetown Rd., Bethesda, MD 20814-1522; 301-530-0567; nihalumni@yahoo.com.*

Editor's Note

The NIHAA Update *welcomes letters and news from its readers. We wish to provide news about NIH to its alumni and to report alumni concerns and information—appointments, honors, publications and other interesting developments—to their colleagues. If you have news about yourself or other alumni or comments/suggestions for the* NIHAA Update, *please drop a note to the editor. We reserve the right to edit materials.*

Editor: Harriet R. Greenwald

In Third James A. Shannon Lecture, Choppin Asserts Role for Private Support of Biomedicine

By Rich McManus

The billionaire down the block—the Howard Hughes Medical Institute, barely a mile down Jones Bridge Rd. from NIH—sent an emissary Nov. 17 for the third annual James A. Shannon Lecture sponsored by the NIHAA. Dr. Purnell Choppin, a virologist who had been president of HHMI since 1987 and who stepped down from that post at the end of December, assured an audience in Masur Auditorium that HHMI's work "can only be complementary (to NIH's role) and incremental. We are not a substitute."

The $11.8 billion medical research organization currently supplies about 22 percent of all nonprofit research support in biomedicine, funding some 331 investigators at 71 institutions, said Choppin. It has spent more than $5 billion since 1985 on its five areas of specialty: cell biology and regulation, genetics, immunology, neuroscience and structural biology; a new field—computational biology—is just emerging. Spending per year has risen from about $100 million in 1985—the year after HHMI sold its main asset, Hughes Aircraft, to General Motors for about $4 billion—to more than $600 million in 1999.

"This is small compared to the NIH budget, but substantial in terms of private support," he said. While he juggled some lofty numbers—there were 170 billionaires in 1998, compared to only 13 in 1982, and private philanthropists, depending on which economists you believe, are poised to contribute anywhere from teens of trillions to many dozens of trillions to various good causes in the coming half century, he reported—Choppin leavened the dazzlement of sums with colorful tales of the institute's benefactor, Howard Hughes Jr., who set himself four goals in life: to be the world's richest man, the world's most famous aviator, the best filmmaker and best golfer. In pursuit of the latter goal, Choppin reported, he hired helicopters to film his golf swing.

Choppin began his lecture on a light note, first thanking NIH profusely for its support of his career (he left multiple roles at Rockefeller University to take the leadership of HHMI, abandoning a grant from NIAID that was in its 23rd year) then exhibiting a tabloid headline from the Dec. 21, 1993, issue of *Weekly World News* announcing that Howard Hughes had been brought back to life. He then read a witty letter from the IRS, which had taken note of the headline and wanted Choppin to be aware of the tax consequences of such a resurrection.

"The IRS does have a sense of humor," he observed in an accent giving away his roots in Louisiana.

While NIH is far and away the world's largest supporter of biomedical research, with a just-won FY 2000 budget of almost $18 billion, the government has not always been the principal funder of basic science. Choppin noted that in 1930, half of the financial support for medical research came from the private sector. By 1940, the private sector contributed only 27 percent of the total, a figure that dwindled to around 4 percent in 1980 and has remained in that vicinity ever since, he said.

"The rapid descent (in private support of science) that began in the

*(See **Choppin**, p. 4)*

***Choppin** (comtinued from p. 3)*

forties corresponds with the flowering of the NIH," he said. "The sense was that the government was doing such an effective job that foundations directed their resources elsewhere."

The Hughes fortune was built on an innovative drill bit that combined three drill heads on one stem, and proved ideal in smashing through rock to get at oil. Howard Hughes Sr., who raced autos as a hobby, invented the tool and, rather than sell it to drillers, he leased it, assuring maximum profitability. His son Howard Jr. took over Hughes Tool Co. at age 18, and launched a Hollywood career while pursuing an interest in aviation. Two years later, he was prescient enough to dedicate his estate to medical research.

At age 25, he made an award-winning film about World War II flying aces called *Hell's Angels*. He later designed and built the H-1, a jet that introduced flush-rivet construction, and which broke both short course and trans-Atlantic speed records. It was only relatively late in life that the reclusive and mentally ill Hughes gained a darker public reputation among many Americans; Choppin asserts that 50 years from now, history will not recall him as a pitiful victim of "what was almost certainly obsessive-compulsive disorder," but as the hero who founded HHMI in 1953.

Choppin touched on achievements HHMI is most proud of, including a grants program that debuted in 1987 and which was budgeted in 1999 at $100 million,with programs reaching elementary schools, high schools, colleges and postdoctoral studies. "We have spent more than $430 million in grants for undergraduate education, which is the largest private nonprofit initiative in support of education in the history of the United States," he said. HHMI support of international scientists is particularly rewarding when the Hughes cachet around a given scientist prompts his or her government to commit additional research money to the work, Choppin noted.

Gathering before the Shannon Lecture, four NIHAA presidents meet with speaker Dr. Purnell Choppin (r). They are (from l) Dr. William I. Gay, Dr. Thomas J. Kennedy, Jr., Dr. William S. Jordan, Jr., and Dr. Gordon Wallace.

Choppin said HHMI "will continue to play an important role in private support of biomedicine. But pluralism of support is important in making this country the envy of the world in graduate education and biomedical research."

He said HHMI's flexibility allows it to move more rapidly than the government can in newly emerging fields such as structural biology. In 1985-1986, "within 11 months we got an advisory committee together on structural biology, solicited applications, identified leading laboratories, and funded beamline studies. It's very difficult for any government to move that rapidly."

He said Hughes has staying power in fields that are particularly intransient, and mentioned 9 years of work on the leptin gene by an HHMI scientist as evidence of the institute's ability "to support people rather than projects."

HHMI also has spent $270 million since 1984 on new laboratory construction, and $85 million in renovations. "About 7 percent of the HHMI budget is devoted to equipment now," Choppin added.

He recalled a frightening visit by staff from the U.S. Office of Technology Assessment not long after he assumed presidency of HHMI. "They asked me, 'What is it the federal government can stop doing now that you're here?' I assured them that we were no substitute."

Choppin said he is especially pleased when his institute can work directly with NIH, as in the Cloister program here on campus, or in a program that trains Montgomery County science teachers on campus, or when Hughes money filled a gap in an NIH mouse genome sequencing project at Washington University.

The lecture ended with a brief question session, during which it emerged that more than 70 percent of HHMI investigators also hold NIH grants. The fourth James A. Shannon Lecture is scheduled for Wednesday, Nov. 15, 2000, in Masur Auditorium, Bldg. 10, at 3:00 p.m.

Calendar of Exhibits and Upcoming Events

Exhibits

National Library of Medicine

Extended through **March 2001** in the NLM Rotunda, (Bldg. 38, 8600 Rockville Pike), "Breath of Life," an exhibit that examines the history of asthma, the experiences of people with asthma and contemporary efforts to understand the disease. For more information call 301-594-7170.

Continuing until **May 31,** an exhibit entitled "Classics of Traditional Chinese Medicine" from the History of Medicine Division collection, which is on view in the NLM lobby. For more information call Young Rhee at 301-402-8917.

DeWitt Stetten, Jr., Museum

The newest exhibit, "Researching Diseases: Dr. Roscoe Brady and Gaucher's Disease," opened on **Jan. 31, 2000.** The exhibit is on display in the hallway leading to Lipsett Amphitheater from the main ACRF lobby in Bldg. 10. For more information call the NIH Historical Office at 301-496-6610.

NIH Events
April—June 2000

The NIH Director's Wednesday Afternoon Lectures are at 3 p.m. in Masur Auditorium, Bldg. 10. Following is a sample of speakers and titles. For more information and confirmation of dates, times and changes call Hilda Madine at 301-594-5595.

Apr. 12—Robert S. Gordon Lecture: Dr. Steven Cummings, UCSF, hosted by Epidemiology and Clinical Trials Interest Groups.

Apr. 26—Margaret Pittman Lecture: Dr. Janet Rowley, University of Chicago

May 3—R. E. Dyer Lecture: Dr. Barry E. Bloom, Harvard School of Public Health -- "A View of Public Health and Biomedical Research"

May 17—NIH Director's Lecture: Dr. Cornelia Bargmann, UCSF, "Mechanisms of odor discrimination in *C. elegans*"

June 7—General Motors Cancer Research Foundation Annual Scientific Conference: Laureates lectures by winners of General Motors Prizes for Cancer Research. Introduction by Dr. Samuel A. Wells, Jr.

Frederick Event

On Wednesday, **May 17** and Thursday, **May 18** the fourth annual Fort Detrick-FCRDC Spring Research Festival will be held in Frederick, Md. Events of interest to scientists and the general public are planned from 11 a.m. to 5 p.m. each day. For information contact Dr. Howard Young at youngh@nciferf.gov.

NIHAA Events

The **NIHAA Annual Meeting and Public Service Award** will be held on Saturday, **June 17** at the Mary Woodard Lasker Center (the Cloister), Bldg. 60, 10 a.m.-1 p.m.

The fourth **James A. Shannon Lecture** Wednesday, **Nov. 15.** Speaker and title to be announced.

Barbara Rodbell, widow of the late Nobelist Dr. Martin Rodbell, cuts the ribbon to open an NIH exhibit featuring her husband's prize-winning research. The exhibit, located next to the Visitor Information Center in Bldg. 10, is a joint effort of Dr. Allen Spiegel (l), now NIDDK director; Dr. Victoria Harden (second from l), NIH historian; and Dr. Constantine Londos (r) of NIDDK's Laboratory of Cellular and Developmental Biology, who was a colleague and close friend of Rodbell's. While working at NIH in the 1960's and 1970's, Rodbell identified the process of G protein signal transduction, which won him and NIH grantee Dr. Alfred Gilman the Nobel Prize in physiology or medicine in 1994. Rodbell died on Dec. 7, 1998, shortly after retiring as scientific director of NIEHS. Spiegel and Londos sponsored the permanent exhibit as a way to explain to the visiting public the significance of Rodbell's long and productive career at NIH. A symposium, "G Proteins and Transmembrane Signaling: A Tribute to Martin Rodbell" in Masur Auditorium, which preceded the Nov. 5, 1999, ribbon-cutting, drew a standing-room-only crowd.

News from and about NIHAA Members and Foreign Chapters

Capt. William H. Briner was a PHS Commissioned Officer in the CC pharmacy department who participated in research involving radioactive drugs (1955-1970), and then worked at Duke University Hospital. He died Nov. 6. 1998. His widow, Betty Briner, sent us the following note: "I thought you would be pleased to know that the award, formerly known as 'The American Pharmaceutical Association Academy of Pharmacy Practice and Management Distinguished Achievement Award in Nuclear Medicine,' has been renamed in honor of Bill and will now be known as 'The William H. Briner Nuclear Pharmacy Practice Distinguished Achievement Award.'"

Dr. George Canellos, who was at NCI as a clinical associate (1963-1965), a senior investigator (1967-1974), and acting clinical director (1974-1975), received the 1999 Key to the Cure Award from the Cure for Lymphoma Foundation. Canellos is the William Rosenberg professor of medicine at Harvard Medical School. He is also a senior staff member at Dana-Farber Cancer Institute, Brigham and Women's Hospital and Massachusetts General Hospital and also editor-in-chief of the *Journal of Clinical Oncology.*

Dr. Vincent T. DeVita, Jr., former NCI director (1980-1988), is now head of the Yale Cancer Center. He was selected by U.S. Sen. Dianne Feinstein (D-Calif.) to co-chair an advisory committee that will make recommendations for revising and modernizing the National Cancer Act of 1971. The committee, which comprises national leaders in the field, will seek opinions throughout the cancer community about new legislation to be introduced in Congress this year. DeVita also received the 1999 Mary Waterman Award from the Breast Cancer Alliance of Greenwich, Conn. for "outstanding achievements in the fight against cancer." Specifically, he was cited for his role in developing combination chemotherapy programs that led to effective treatments for Hodgkin's disease, diffuse large-cell lymphoma and breast cancer. He has also been selected by the Leukemia Society of America to receive a 50th Anniversary Commemorative Award, recognizing his role in helping to find the cure for leukemia and blood-related cancers. He has also been elected to the board of directors of the Association of American Cancer Institutes for a three-year term.

Dr. Howard B. Dickler, who was at NIAID (1972-1999), lastly as chief of the Clinical Immunology Branch, has been chosen associate dean for research and graduate studies at the University of Maryland School of Medicine. He will oversee the school's $130 million research program that encompasses 23 medical specialties.

Dr. Charles A. Dinarello, a former NIH clinical associate and senior investigator (1971-1977), is now professor of medicine at the University of Colorado School of Medicine in Denver. In April, he presented the R. E. Dyer Lecture, "Anti-Cytokine Therapies for Inflammatory Diseases." Last year, he was also inducted into the National Academy of Sciences.

Dr. Sara Fuchs, who is at NEI as a visiting scientist, received the following note from Dr. Michael Sela: "On Oct. 26, the third C.B. Anfinsen Memorial Lecture took place at the Weizmann Institute of Science in Rehovot, Israel. The speaker was Chris Anfinsen's old friend, Nobel laureate Prof. Edmond H. Fischer, (above) of the University of Washington, Seattle, and his topic was 'Reversible Protein Phosphorylation—Today and Tomorrow.' He was introduced by Prof. Shmuel Shaltiel, who spent several years in Prof. Fischer's laboratory as a post-doctoral fellow. Fischer began with reminiscences of Chris Anfinsen and continued his lecture, which was of great interest and masterfully delivered, before a big and enthusiastic audience. Mrs. Libby Anfinsen, the widow of Chris, honored us with her presence." Sela, chair of the event, added that the Weizmann Institute has taken responsibility for the Anfinsen Lecture, which began at the initiative of NIH alumni in Israel. Prof. Haim Garty, head of the department of biological chemistry, is in charge.

Dr. Timothy Eberlein, who was at NCI (1979-1982) as a clinical associate in the Surgery Branch, has been named director of the Alvin J. Siteman Cancer Center, which is operated jointly by Washington University School of Medicine and Barnes-Jewish Hospital. He has been interim director for the past 22 months. He is also Bixby professor and head of the department of surgery at Washington University School of Medicine and surgeon-in-chief at Barnes-Jewish Hospital.

Dr. Michael A. Friedman, who was at NCI in the Division of Cancer Treatment (1970-1993) and then at the FDA as deputy director for operations, and acting commissioner for 21 months, is now senior vice president, clinical affairs, for G.D. Searle & Co. Searle is the pharmaceutical part of Monsanto Co. He is responsible for directing strategy and implementation of clinical research, and also advising on the development of nutritional product candidates within the Monsanto Life Sciences program.

Dr. Ronald B. Herberman, at NCI (1966-1985), is now director of the University of Pittsburgh Cancer Institute. He was elected president of the Association of American Cancer Institutes. He plans to emphasize the role of cancer centers as leaders in the cancer field. He said, "It is at the nation's cancer centers where cures for cancer are being developed, and where patients can participate in the most up-to-date cutting-edge cancer therapies."

Dr. Bernard W. Janicki, who was at NIAID, then at Dana-Farber for 11 years as director of research, left at the end of 1998. He has returned to NIH where he is at the National Institute for Dental and Craniofacial Research as a special assistant for planning analysis and administration management.

Dr. Charlene Drew Jarvis, who worked as a staff fellow (1971-1976) and a research psychologist (1976-1979) in the NIMH Laboratory of Neuropsychology, has served as D.C. councilmember (D-Ward 4) since 1979. She was honored as a "1999 Washingtonian of the Year" by *Washingtonian* magazine. In an article about the award, Jarvis talks about why she decided to leave the laboratory and start public service: "As a scientist, you are imbued by the public with higher motives. In politics, you have to work harder to prove your credibility. But there are on-the-ground successes I couldn't have had in the laboratory...My goal for the past 20 years has been the restoration and economic recovery of this city. It's happening."

Dr. Jack T. Kalberer, who worked in NCI and OD/NIH (1966-1997) and was NIH Coordinator for Disease Prevention and Health Promotion, has moved to Williamsburg, Va. He writes that he is a "volunteer on the orientation walks for the Colonial Williamsburg Foundation. I'm still playing tennis. In July 1999, I became the tennis doubles champion at the Two Rivers' Country Club, Governor's Land here in Williamsburg."

Charlotte Kenton, who was at NLM as chief of the Medlars search section (1953-1986), is president of Kenton Associates, a biomedical communications firm.

Dr. Mary-Claire King, who is at the University of Washington/Division of Medical Genetics, recently joined NIHAA. She writes: "I have been a member of study sections and councils—for NCI, NIEHS, NCHGR, NHGRI, OD, DRG, etc. I've never worked on campus at NIH. Does this make me a member or a friend? At present, I am American Cancer Society professor of medicine at University of Washington." She adds under dates at NIH "first year - beginning of time and last year - not yet." Recently she received from the Susan B. Komen Breast Cancer Foundation one of its 1999 Brinker International Awards for Breast Cancer Research. She received the Basic Research Award for genetic work in breast cancer.

Dr. Richard H. Knop who was an NCI fellow in Division of Cancer Treatment, (NIH Radiology), (1981-1984) is now at Swedish Covenant Hospital in Chicago. He is medical director in the medical oncology cancer program.

Dr. Mark C. Lakshmanan, who was a clinical research fellow, at NIDDK (1985-1988) writes, "In November, my family and I moved to Kobe, Japan, for Eli Lilly and Company. We will live here for 4 or 5 years. I am director of Japan Clinical Research for Lilly Research Laboratories in Japan."

Dr. Sewa S. Legha writes the following: "I was a clinical staff associate at the CTEP, DCI, NCI 1974-1976. After 20 years of faculty appointment as a clinical investigator and professor of medicine at the M.D. Anderson Cancer Center in Houston, I recently relocated to St. Luke's Episcopal Hospital in Houston where I was appointed as a clinical professor of medicine at Baylor College of Medicine continuing clinical investigations in the treatment of advanced melanoma."

Terry L. Lierman is an NIH management intern (1971-1974) who then served as staff director of the U.S. Senate appropriations subcommittee on labor, health and human services, and education, and also as staff director/chief clerk of the U.S. Senate committee on appropriations. After leaving Congress, Lierman founded four health and education related companies in the area, and for the past 15 years has devoted considerable time to charitable and community service. He recently announced his candidacy for the 8th district congressional seat in Maryland, and he ran successfully in the Democratic primary on Mar. 7 for the chance to challenge U.S. Rep. Constance Morella (R-Md.) in the November 2000 election. His campaign manager is Abe Pollin, a business, sports and community leader in the Washington metropolitan area for decades.

Dr. B. Robert Mozayeni, who was at NHLBI (1985-1987 and 1991-1994) is now in private practice with Potomac Physician Associates. He is also medical director at the Maplewood Park Place in Bethesda.

Dr. Georges Peters, who was at NIH as a clinical associate (1966-1968), is now a professor of pediatrics at Brown University. He is chairman of the National Vaccine Advisory Committee. Recently in a *New York Times* article on polio, he was quoted: "It's one of the great triumphs of 20th century medicine. We hope that in the next 5 to 10 years, polio vaccine will no longer be necessary—similar to the situation with smallpox." Later in the article, he said, "The major reason for the reluctance to withdraw the oral vaccine sooner has been concern about the global village in which we live. We're just a few hours by plane from countries where polio is still circulating."

Dr. John Ruckdeschel, a staff associate at NCI (1972-1975) and a visiting scientist (1983-1985), is now chief executive officer and center director of the H. Lee Moffitt Cancer Center & Research Institute at the University of South Florida in Tampa. Recently he was elected to the board of directors of the National Coalition for Cancer Research. Ruckdeschel is also the medical vice president of the Florida division of the American Cancer Society.

Dr. Norman P. Salzman, an NIHAA member, a pioneer in the field of molecular virology, and a noted teacher and mentor died in December 1997. His family established a fund at

Dr. Harold R. Stanley, who was assistant chief (senior dental surgeon), Clinical Investigations Branch, NIDR in 1949 and 1953-1968, and is now professor emeritus, University of Florida College of Dentistry, has written the following letter that is another interesting footnote to medical history.

"In your summer 1999 (Vol. 11, No. 2) issue of the* NIHAA Update *on p. 25, you have a very interesting story under 'A Footnote to Medical History,' about Anne S. Miller being the first person in North America to be saved by penicillin. I have a similar story that might be of interest to you.

In the spring of 1949 I was a dental intern under Dr. Ralph Lloyd at the USPHS Hospital in Baltimore. All of a sudden I began with a cough and fever that continued to worsen in a very short period. I was admitted to the hospital and diagnosed as having 'Atypical pneumonia.' Nothing was working and my temperature rose to 104-105, one lung was completely non functional and the other was one-third shut down. In preparation for my dying my parents came down from Massachusetts, my wife and family were there and my minister.

In desperation, my doctors, Luther Terry (chief of medicine) and his senior resident Stuart Sessoms, asked if I would consider being treated with a new drug being investigated at NIH called tetracycline. My family and I decided we had nothing to lose. In a few hours a team appeared from NIH and began to take blood and throat smears followed by an oral dose of tetracycline. I ate applesauce to quench the bad taste and help to retain the medication. At that moment Dr. Sessoms said that I was probably the first human to receive this experimental drug.

In 48 hours my temperature had dropped to 101 and my lungs began to improve. Around the 10th day I was about to be discharged. Not having eaten much during the illness I was asked what I would like. I requested my mother-in-law's Baltimore crab cakes, which the hospital administration permitted.

At discharge, I returned to work but continued to have a bitter taste, orange stools and an itchy anus for at least 6 months.

There may be some discrepancies in this story since it occurred 50 years ago but they possibly could be verified if my medical records are preserved somewhere.

Many years later when Dr. Terry was president of the University of Pennsylvania, we passed in the Atlanta airport and he still remembered me and my illness."

the Foundation for the NIH to support the Norman P. Salzman Memorial Award in Virology. On Nov. 18, 1999, in a ceremony at the Cloister, Dr. Joanna Shisler, a postdoctoral fellow in the Laboratory of Viral Diseases, NIAID, received the first annual Norman P. Salzman Memorial Award in Virology, and a prize of $2,500. For more information about the fund, contact the Foundation for the NIH, 1 Cloister Court, Bethesda, MD 20814 or call 301-402-5311.

Dr. Richard Schilsky, a clinical associate in the NCI Medicine Branch and the Clinical Pharmacology Branch, Division of Cancer Treatment (1971-1977), is now professor of medicine and director of the University of Chicago Research Center. He is also associate dean for clinical research, biological sciences division, University of Chicago Pritzker School of Medicine. Recently he was appointed to the NCI board of scientific advisors. He was also elected to a second 5-year term as chairman of the cancer and leukemia group B.

Dr. Lawrence Shulman, NIH emissary for research and director emeritus of NIAMS, spoke at the 50th reunion of his class at the Yale University School of Medicine last June in New Haven. He discussed progress in recruiting young physicians to perform clinical research investigation.

Albert Siepert, who was the executive officer at NIH (1947-1958), wrote to Calvin Baldwin: "Actually, although I am supposed to be in full retirement, my waking hours have been consumed by several priorities: 1) As a volunteer, meeting some deadlines for writing and editing promotional text for the Arizona Senior Academy (a new retirement community now under construction where I will move into a new town house next June); 2) About five 2-hour practices each week on a magnificent, new electronic organ at our church. As a piano player of pop music by ear, I'm taking classical music lessons with our new organist...I appreciate both of your letters, even though the vast new constructions on the NIH campus leave me wondering whether there is any space left for the grass to grow!"

Dr. George Vande Woude, who was at NCI as chief of the Laboratory of Molecular Biology (1981-1983), returned to NCI as director of NCI's Division of Basic Sciences and scientific advisor to NCI director Dr. Richard Klausner (1995-1999). He left NIH in 1999 to become director of the Van Andel Research Institute, Grand Rapids, Mich.

Dr. Robert Young, at NCI (1967-1988), is president of Fox Chase Cancer Center in Philadelphia. He was recently elected first vice president of the American Cancer Society.

Dr. Marvin Zelen, who was with the Biometry Branch at NCI (1963-1967), has left his position as chairman of Dana-Farber's department of biostatistics. He established the department in 1977. After a sabbatical leave, Zelen will return to Dana-Farber in a research capacity.

Dr. G. Donald Whedon sent the photograph shown below with this caption: Dr. Arthur Kornberg (r), Nobel laureate and former chief of biochemistry, NIAMD, with Dr. G. Donald Whedon (l), at the dedication of the new Arthur Kornberg Medical Research Building at the University of Rochester Medical Center in September 1999.

Whedon explained in an enclosed note that he and Kornberg had overlapped at NIH for about 6 months but they had known each other before because they were members of the same class, 1941, at University of Rochester School of Medicine.

Whedon adds, "Arthur is an alumnus of NIH, having been chief of the Biochemistry Laboratory of NIAMD. He left in 1952 for Washington University at St. Louis to head the Dept. of Biochemistry, where he was located when he won the 'prize.'"

He goes on to say that he thinks they both look pretty good for (almost) old age. "I'm almost 84, and, Arthur, I think, is 83. He is still at Stanford, no longer head of biochemistry there, but still active, mostly lecturing on the values of medical research."

Recent NIH Retirees who are also NIHAA Members

Dr. Erv Baas, NIDDK veterinarian who spent almost 30 years at NIH, has retired. He first joined NIH as a senior animal diseases investigator for the Veterinary Resources Program in the early 1970's and has witnessed a change from seeing veterinarians as enforcers of rules and regulations to being an integral part of the research team. He and his wife, Marilyn, are moving to Richmond, where he will be a part-time clinician in the animal resources division of the Medical School of Virginia at Virginia Commonwealth University ... **Stephanie Bursenos,** deputy director of the Fogarty International Center, has retired after more than 41 years of government service. She came to NIH in 1983 as a program officer for Europe and then took on additional responsibilities for Japan, the USSR, China and Taiwan. She became deputy director in 1994. Her retirement plans include taking courses, involving herself in local politics, and spending time with her grandchildren ... **Charles A. Rexroad,** known to everyone as "Al" has retired after a 34-year career spent entirely within the walls of Bldg. 10. He worked in various jobs at the CC and was on the staff of the special events section and in 1986 was named head of the office. Now that he is retired his plans include traveling and meshing with his fondness for sports, he has taken a part-time job at a local sporting goods store ... **Dr. Melvin L. Spann,** associate director for specialized information services at the NLM, recently retired after 35 years of government service from the library where he had worked since 1976 ... **Marvin Trusty,** NIAAA executive officer, has retired after 38 years of service. Plans for retirement include travelling, finishing house projects, more family activities, and time devoted to the civic association in Rockville and as an active member of the Baha'i Faith community ... **Paul Van Nevel,** director of the Office of Cancer Communications, NCI since 1974, retired Dec. 31. He had been with the institute for 26 years. Van Nevel recently received the Presidential Rank of Meritorious Executive. Early last year he received an award for distinguished service to journalism and mass communications from the University of Wisconsin, Madison, for being a "pioneer in the way professionals in the United States and throughout the world communicate about cancer and other health issues." He has started a communications consulting service to companies and organizations in the health fields.

Clarification:

In our last issue we wrote in the note about Dr. Samuel Broder that Celera Genomics and The Institute for Genomic Research (TIGR) were a joint venture. This is not accurate. Dr. Craig Venter left TIGR to found Celera Genomics. TIGR is a not for profit research institution; Celera Genomics is a for profit business organization. Venter founded Celera Genomics with Perkin-Elmer, a technology company, now known as PE Corp. TIGR is not affiliated with the new company.

Letter from NIHAA President Dr. William I. Gay to the Members

January 2000

Dear NIHAA Members:

Happy New Year. Your association officers and staff survived Y2K and the millennium celebrations, and we look forward to serving you in the year 2000.

The NIHAA has been fortunate since you last heard from me in that a generous alumna, Onie Powers Adams, has provided us with the funds to have an extra issue of NIHAA *Update* and to continue our activities through the rest of the year. We need to keep looking for support for our annual meeting, the Shannon lecture and other events, including the newsletter.

Our executive director, Harriet Greenwald, has arranged for us to have a web site at **http://www.fnih.org/nihaa.html**. Look for it on your computer. We look forward to keeping in closer touch with our members through this site and hopefully to recruit more new members.

Sincerely,

William I. Gay

William I. Gay, D.V.M.
President

Fifty-five Years Later: A World War II Recollection

By Dr. John F. Sherman, former NIH deputy director

In early April 1945, elements of the U.S. Army 89th Infantry Division and the 4th Armored Division confirmed long-held rumors about notorious German camps in which Jews, gypsies, people from occupied countries and political dissidents were imprisoned in large numbers. Much to the surprise and horror of men in the leading components of those units, they had over-run one of the first of those many camps during the rapid advance of Allied forces over Germany east of the Rhine River. This camp was located on the outskirts of a small German town called Ohrdruf, a few miles south of the city of Gotha.

The sight that greeted those U.S. soldiers was beyond belief. Inside a wire-fenced area were several rows of one-story, dark-colored wooden structures such as might have sheltered German soldiers. Nothing especially unusual about them, but what immediately drew the soldiers' attention was what they saw on the grounds of this enclave. Scattered in haphazard fashion were bodies of many humans dressed in filthy, ragged, black-and-white striped clothing. Closer examination revealed them to be not only dead but reduced to mere skeleton appearance and most had visible bullet wounds. As the Americans moved through the fenced area they were confronted by more sights that increased the initial reaction of disbelief and horror. Through the open doors of the nearest buildings, they discovered many more skeleton-like bodies arrayed on tiers of wooden bunks. In one structure were still more bodies in the same condition, piled like cordwood and sprinkled with a white substance that must have been lime. In another nearby building was a row of about four large furnaces, doors ajar and bones visible inside. The scene, such as from some movie so horrible as not yet made, continued with the discovery of a large pile, partially filled with half-burned logs intermingled with human bodies and railroad rails. (It was here that the frequently shown photograph of Generals Eisenhower, Bradley, Patton and others was taken. A copy of that picture is on display at the U.S. Holocaust Memorial Museum).

Questioning of a few remaining inmates who were still alive revealed that only a day or two previously the camp guards had rounded up those who were able to walk and forced them out of the camp to the east. Word had been received that the American troops were approaching rapidly. Those who could not join the march were summarily shot. Among the corpses found in the compound was at least one former guard who had attempted to hide his identity by dressing in inmate's clothes.

In October 1999, I joined about 50 of my World War II colleagues as well as wives, friends and some adult children on a Tour of Remembrance in France and Germany. I had been a major on the staff of Division Artillery, 89th Division, during the unit's engagement in that conflict, and the site of the Ohrdruf concentration camp was one of the stops on our two-week tour. The early part of the tour was spent in Normandy where following V-E day, the 89th spent most of the remainder of that year managing several huge tent camps and processing hundreds of thousands of U.S. troops destined to return to the U.S. through the port of Le Harve. The camps bore the names of then-popular American brands of cigarettes. Camp Lucky Strike, the largest, was located on a former German airfield and had a capacity of about 60,000 men. Others were called Old Gold, Twenty Grand and Philip Morris.

Of particular interest to the touring group was a warm greeting by the two-generation members of a club in the town of Yvetot. Over the years they had salvaged, restored and maintained a sizable number of WW II U.S. Army vehicles. In many instances, both the vehicles and the authentic uniforms of club members bore the Rolling W, the insignia of the 89th Division. Other highlights of the tour included ceremonies for fallen comrades at the Normandy and Luxembourg military cemeteries.

Most impressive and the high-point of the tour was a memorial service at St. Goar in honor of those who had perished in a combat crossing of the Rhine River near the Loreley Rock. Memories returned vividly of the swift river current and the steep banks on either side of the river, making the crossing under enemy fire especially hazardous.

Demonstrating that over time some attitudes have reflected an increased sense of tolerance and desire for peace, units of the American 1st Armored Division and of the German 5th Panzer Division played prominent roles in that ceremony. Later, moving from what had been West Germany into the former East Germany, it became obvious that even several years after reunification much remained to bring the latter up to par with the west.

In visiting the site of the former concentration camp, I recalled that I and others were, in effect, ordered to tour the camp on the day following its discovery and before any attempt had been made to alter its appearance. The American commanders also forced the burgermeister of the town, his fellow officials and their wives to see the camp and its "exhibits." The Germans had denied any knowledge of the camp or its existence. That night following their tour the burgermeister and his wife committed suicide.

Little information is now available about the camp. After the war ended that section of Germany was a part of the country occupied by the Soviet Union and was later included in East Germany. Apparently the camp in some form was used by the Soviet military and is now the site of a German Army training ground. No physical evidence of the concentration camp remains although members of the tour group were able to identify its general location. Not surprisingly, little apparently was documented during the Cold War and the Germans have shown no evident interest in attempting to locate sources of information. When the tour group reached the area, only a civilian and a senior enlisted man were available, it being a Sunday. After some negotiations, they agreed to accompany some members of the group to the area where it was thought the camp had been located.

The Ohrdruf camp, as terrible as it was, did not approach in size or purpose the extermination camps located east of Germany. Ohrdruf was considered a satellite of Buchenwald and apparently housed inmates working as laborers on some project the nature of which has never been established. A fitting commentary on what those veterans experienced was a recollection on one of the tour buses after the Ohrdruf stop. The speaker, at the earlier time a junior enlisted man and probably in his late teens, related his eyewitness account as one of the first into the camp. Along with a lieutenant physician, he was directed to move among the corpses to determine if any might reveal a pulse for possible resuscitation. They finally found one man alive but who was so weak and disturbed that there was no possibility of communication. Before he could complete his story on the bus, the speaker was overcome by emotion.

Even the passage of 55 years could not erase the horror of those sights.

Major John Sherman (far r) shown with other soldiers at Camp Lucky Strike in Normandy, in the summer of 1945.

What's Your News?

The NIHAA wants to hear from members. Please type or print your note (include available photographs), and send to Update at 9101 Old Georgetown Rd., Bethesda, Md; 20814; or email: nihalumni@yahoo.com.

Name: (Include NIH affiliation)

Home Phone:

News:

Budget. *(continued from p. 1)*

board budget cut of 0.38 percent; NIH is among the agencies affected by this reduction but will have flexibility in applying the cut, with no program to be trimmed by more than 15 percent. According to Sue Quantius, NIH associate director for budget, NIH's share of the budget cut is in the range of 0.55 percent, or a reduction of some $98 million.

The bill will result in budget increases at all of NIH's 24 institutes and centers, as well as the Office of the Director. It will also boost to nearly 10,000 the number of new and competing research project grants supported in FY 2000. The National Cancer Institute, NIH's largest, will get an increase of 14.8 percent to $3.3 billion, while NHLBI, the second largest institute, will realize a gain of 14.5 percent to a total of $2 billion. The National Human Genome Research Institute budget is set to rise by 25.4 percent, to a total of $337 million, and the National Center for Complementary and Alternative Medicine gets a 37.5 percent increase to $69 million. The Office of AIDS Research, part of the Office of the Director, gets $44.953 million and the Foundation for NIH is set to receive $500,000.

The omnibus bill directed NIH to transfer $20 million from NIAID to the Centers for Disease Control and Prevention by Jan. 15, 2000, for study of the safety and efficacy of vaccines used against agents of biological terror. NIH must also set aside $20 million for a new program of challenge grants — to be funded by the Public Health and Social Services Emergency Fund — to promote joint ventures between NIH and the biotechnology, pharmaceutical and medical device industries; the program is to be on a one-for-one matching basis to qualified organizations.

The National Center for Research Resources is slated to receive $75 million for extramural construction, an increase of $45 million over FY 1999. The National Institute of Environmental Health Sciences is strongly urged to study the effects of dioxin and Agent Orange in Southeast Asia. The bill contains a number of specific directions affecting OD:

- Programs including Minority Access to Research Careers, Minority Biomedical Research Support, Research Centers in Minority Institutions, and the Office of Research on Minority Health programs should continue to be supported at a level commensurate with their importance.

- NIH is encouraged to pursue research on all types of diabetes. NIH is requested to develop a report to Congress by Mar. 1, 2000, outlining a research agenda for Parkinson's focused research for the next 5 years, along with professional judgment funding projections.

- NIH is urged to establish an Office of Bio-imaging/Bioengineering and to review the feasibility of establishing an Institute of Biomedical Imaging and Engineering. The office should coordinate imaging and bioengineering research activities, both across NIH and with other federal agencies. NIH must report on progress achieved by this office by June 30, 2000.

- The NIH director is requested to contract with an independent group to study the overall security situation at the Bethesda campus. The study should include recommendations regarding the appropriate manpower, training and equipment needed to provide adequate security for NIH employees and all visitors to the campus as well as any recommended changes to the current security policy.

- NIH is strongly encouraged to dedicate more resources to autism research and to intensify these efforts through the NIH autism coordinating committee.

- The National Institute of Diabetes and Digestive and Kidney Diseases and NIAID are commended for jointly supporting research on foodborne illness; the institutes are encouraged to enhance research on the reaction of the gut to foodborne pathogens.

The omnibus bill was signed after eight Continuing Resolutions kept unfunded federal agencies operating beyond the Oct. 1 start of the new fiscal year. It keeps NIH on target for a congressional effort to double the NIH budget by 2004.

FY 2001 NIH Budget Proposed

President Clinton has proposed a $1 billion, or 5.6 percent, boost for NIH in his FY 2001 budget request released Feb. 7. NIH's total budget would be approximately $18.9 billion next fiscal year.

ACD Meeting, (continued from p. 1)

California Dental School; Dr. Norman Anderson, director of the Office of Behavioral and Social Sciences Research, leaves in March for a professorship at Harvard University's School of Public Health; and Varmus himself moved on, ending his sixth year as NIH director to take the reins of New York City's Memorial Sloan-Kettering Cancer Center in February. Also anticipated is the departure of Rep. John Porter (R-Ill.), who will not run for reelection. Varmus hailed Porter—longtime chair of the House of Representatives committee that oversaw NIH—as "one of the great champions of NIH" and credited him for being instrumental in acquiring via legislation the tremendous prosperity the agency has enjoyed in recent years.

Construction On Campus and Off

"In view of NIH's prosperity and the number of projects in progress and projected both here and around the country," Varmus said, "I thought it would be useful to think about how NIH supports construction and renovation, and what more we ought to be doing. We're developing our 2001 budget and planning for 2002. This seems like an auspicious time to consider whether the ways we currently support infrastructural needs are sufficient, or whether we should be pressing for even greater increases in the amount of money we can supply to extramural institutions' construction activities or to projects we can carry out here on campus."

Updates on several intramural building projects were presented, including the Clinical Research Center, the Louis Stokes Laboratories Bldg., and the Vaccine Research Center. In addition, a new project was proposed to occupy what is currently Bldg. 35. Institute directors Dr. Gerald Fischbach of NINDS and Dr. Steven Hyman of NIMH recommended the formation of an "integrated neuroscience research" program that could be housed by 2004 in a 200,000-square-foot Neuroscience Center on campus. The new center would bring together researchers from several institutes including NINDS, NIMH, NIAAA, NIDA, NIDCD and NIA.

Taking for example the molecule dopamine—which has implications in NINDS's Parkinson's disease research, NIAAA's and NIDA's drug addiction and reward research, and NIMH's emotion and mood disorder research—Hyman explained, "It's patently ridiculous to divide investigators who are interested in the action of this molecule into different buildings—even different intellectual universes—by virtue of the accident of where we divided up the clinical sciences years ago. It will lead to enormous progress both in terms of the basic science, but also in terms of the translation of discovery into clinical therapeutics by bringing these scientists together. We would like to create a model that goes from molecule to behavior to clinical application."

Citing the cost of renting off-campus lab space coupled with the need for scientists to interact with those doing similar work, Hyman continued, "There are other benefits that are less intellectual and lofty and more financial. There is this broad intellectual vision, but there is also a very practical aspect to this."

"I think this was the most exciting thing that I have read about in all the time that I have been involved with this group," enthused Dr. Shirley Tilghman, a professor in Princeton University's department of molecular biology and ACD member. "This is really spectacular. The spirit of cooperation that [Varmus has] obviously been able to incite here is exactly what this problem is going to need in the future."

Attendees also heard from presenters about planning and budgeting for extramural building projects: Dr. David Kaufman, president of the Federation of American Societies for Experimental Biology, gave a needs assessment for research institutions; Quantius offered a legislative proposal for NIH's support of such needs; and Dr. Wendy Baldwin, NIH deputy director for extramural research, explained the role of NIH funding in outside construction matters.

Issues in the News

Two other topics that were discussed during the ACD meeting coincidentally were also being covered in the media that day: NIH had released the first-ever proposed guidelines for stem cell research on Dec. 1; and the annual meeting of the recombinant DNA advisory committee (RAC) was scheduled for the next week. The RAC would be reviewing issues related to the death of a young man taking part in an NIH-supported clinical study of gene therapy at the University of Pennsylvania. The safety, and successes and failures of gene therapy clinical trials, as well as what oversight roles NIH and the Food and Drug Administration should have in the conduct of such studies were all concerns slated to be discussed at the RAC meeting.

"The NIH is in a difficult situation in that it is not inherently a regulatory agency," Varmus explained. Regulation is handled by FDA, he continued. "Gene therapy is one of a variety of therapeutic modalities, all of which have risks. NIH continues to believe it has a very important role in maintaining the public discussions of novel developments in gene therapy re-

search," he said. "Recent events require that NIH take a closer look to ensure that we are doing everything that can be done to minimize the dangers of gene therapy...I believe gene therapy has promise despite the unfortunate events and that we need to take a long term outlook."

Health Disparities Addressed

Another issue that merited special mention in the 2000 appropriation was the marked difference in health status between minority and majority populations in the U.S. and the world.

"The administration has taken a very firm position on reducing disparities in health status," Varmus said. "It's important that those of us who are charged with seeing technological improvements in medicine not lose sight of the fact that public health goals are paramount. In the 2000 budget, one of our key areas of emphasis is health disparities, both domestic and international. There are more than 50 new initiatives across NIH addressing various aspects of health disparities."

NIH is supporting a bill in Congress that would strengthen NIH's Office of Research on Minority Health (ORMH) by giving the office grantmaking authority, Varmus said. While "the fate of that bill is still unclear," he continued, "I will be taking specific administrative action before I leave to implement many of the ideas within the legislation. It doesn't include everything in the bill that I'd like to see—I can't establish a loan repayment program or award grantmaking authority—but I can do a number of other things that will be in this administrative directive."

One thing Varmus's directive will do is activate an annual strategic plan that will be formulated by institute directors, ORMH and the NIH director.

Kirschstein and Maddox at the Helm

Dr. Ruth Kirschstein has been named acting director of NIH until a permanent director is appointed. She has served as deputy director since 1993 and was also acting director of NIH for 5 months before Dr. Harold Varmus took over in November 1993.

HHS Secretary, Donna E. Shalala, in her announcement of the designation, said Kirschstein "brings to her new role a wealth of experience within the NIH and the Department ... Her proven leadership qualities, administrative abilities and skill in representing the NIH and HHS to various public and congressional constituencies ensure a smooth leadership transition."

Kirschstein, a native of Brooklyn, N.Y, received her B.A. degree in 1947 from Long Island University and her M.D. in 1951 from Tulane University School of Medicine. She interned in medicine and surgery at Kings County Hospital, Brooklyn, and did residences in pathology at Providence Hospital, Detroit; Tulane University School of Medicine; and the Clinical Center in 1956. From 1957 to 1972, she did vaccine safety research at the Division of Biologics Standards (now the Center for Biologic Evaluation and Research) of the FDA. In 1974, she was named director of the National Institute of General Medical Sciences and remained in that position until 1993. She was also acting associate director of the Office of Research on Women's Health (1990-1991) when it was first established. She is the author of more than 70 scientific publications and a member of the Institute of Medicine and the American Academy of Arts and Science. She received the highest honor for career civil servants, the Presidential Rank Award for Distinguished Executives.

Recently Kirschstein announced the appointment of Dr. Yvonne Maddox as acting deputy director for NIH. Maddox has been the deputy director of NICHD since January 1995. Before joining NICHD, she served in various positions with NIGMS, including acting director of the Minority Access to Research Careers Program and deputy director of the Biophysics and Physiological Sciences Program branch.

She completed her undergraduate studies at the Virginia Union University in Richmond, Va. She completed advanced studies in biology at American University, and received her doctorate in physiology and biophysics from Georgetown University, where she served as an assistant professor and independent investigator. She has been involved with several DHHS initiatives including the National Strategy to Prevent Teen Pregnancy and the DHHS Race and Health Disparities initiative. She has received numerous awards including the Presidential Meritorious Executive Rank Award, PHS Special Recognition Award and the NIH Director's Award.

Dr. Harold Varmus Leaves NIH: Excerpts from Exit Interview

A few days before Varmus left NIH to head Memorial Sloan-Kettering Cancer Center in New York City, he was inteviewed by Rich McManus, editor of the *NIH Record* and other reporters. McManus wrote a two-part interview that appeared in the Jan. 11 and Jan. 25 issues (http:www.nih.gov/news/NIHRecord/archives/htm). Following are excerpts from those articles:

Why did you decide to leave now?

Various reasons. One of them is I began to feel it was repetitive ... Secondly, there is a timing of one's career. To have gone deeply into my sixties would have, I think, reduced the chances of my getting another really good job, and I did want to have a really good job. Third, this opportunity became available. There have been other things that I've heard about, and occasionally even inquired about and gotten into discussions about, but this is the first thing that seemed to be very appealing, and I really couldn't put this off for another couple of years. I think in an ideal world I probably would have left maybe a year after the next administration, assuming that I could stay on and they didn't ask for my resignation. But my wife was also interested in leaving and then I find the draw of a combination of New York and putting cancer research together with cancer treatment, and being in a strong institution with interesting neighbors like Dr. Arnold Levine and the Rockefeller, all pretty appealing.

Can you assess your role, accomplishments and what you've learned as NIH director and NIH scientist in the intramural program?

Obviously I'm going to have both roles at Memorial Sloan-Kettering, in fact my roles there will probably be more obviously divided because here I have one major office in Bldg. 1 and I spend almost all my day in Bldg. 1. I go to my lab for an hour or so a day, but I don't have my office equipment there, so I don't settle in. But at Memorial Sloan-Kettering, my intention is to spend half my day in the hospital executive office and half the day next door at my lab in the Rockefeller Bldg.

With respect to the (NIH) intramural program, I have to say that from the first day I got here, I've really enjoyed being in the intramural program. I did choose wisely, I believe, by placing my lab in one of the nicer buildings — Bldg. 49 and in choosing to be in the midst of investigators in the Human Genome Project...being enmeshed in that network of investigators has been very energizing. And we've had a lot of collaborative arrangements. I've seen though, and heard from many investigators, that they feel that the *esprit de corps* has risen, and that the seminar programs have improved. A lot of this I don't take credit for — Michael Gottesman has been a tremendous director of intramural research here...I've also enjoyed watching new buildings go up, and clinical investigation prosper, to the point where we're now worried about having too many activities in the Clinical Center rather than too few. That's all been exciting to me, even though my own lab has not been involved in clinical research...I think in general the feeling is that the (intramural) program is incredibly healthy and that the new buildings are going to make it even more so.

I'll point to the Vaccine Center as a particularly exciting accomplishment because we've gotten that center built both physically and intellectually in a very short time. Great people have been brought in here — certainly Gary Nabel's recruitment was a godsend — and the idea that the intramural program can really, as advertised, respond quite quickly to what was perceived to be a national need, namely we weren't doing enough to foster the development of an AIDS vaccine, has been responded to in a way that probably could not happen on this scale anywhere else except at NIH.

How involved do you intend to be in the private sector once you leave federal service?

I want to be associated, for the time being, with nonprofit ventures, and I am interested in encouraging the growth of biotech in New York. One of the things I've spoken about elsewhere in the last couple of months that I think could end up being A) a lot of fun, B) quite stimulating scientifically, C) actually economically beneficial to the state and city of New York is to try to find a location for building a kind of science park or biotech incubator. A place I have in mind, and I haven't been shy about saying this, is the waterfront in Queens. Many of the major institutions in New York that I care about are on the East River—Sloan-Kettering, Cornell, Rockefeller and NYU. Others

are not that far away. The streets are crowded, the river is pretty open...There is space over on the riverfront in Queens that is less expensive and more available, and connected to interesting neighborhoods. So I envision this little ferry service running back and forth among these places, and bringing our investigators back and forth (and) seeing not-for-profit and for-profit labs that do genomics and other technology development and pharmaceutical development kinds of things side by side, in a way that would be quite attractive to investors. It would be fun.

What advice would you give your successor?

One is to continue the budget fight, second is to take great advantage of the strong advocacy that NIH has. I've been saying to both the scientific advocacy groups and the patient and disease-oriented advocacy groups that they need to work better with each other. NIH, I think, has done a good job working with its scientist constituencies; I think it's done an improved job, and at many of the institutes a splendid job, of working with patient advocates...I think I was slow to appreciate the importance of developing a kind of nonsectarian council of advocacy individuals of the sort that I finally have now with my Council of Public Representatives...I've found my interactions with those folks tremendously useful...I've also tried to remind people of the equity issues...the need to be conscious of health disparities and the need to pay attention to the more general application (of scientific advances), especially as our science becomes heavily technological and potentially very expensive.

You have advice for the reorganization of NIH — would you want to be on any task force that would deal with that?

Sure. But my own view is that the kinds of changes that are being contemplated are, first of all, reasonably radical. Secondly, they may fly in the face of the interests of advocacy groups and Congress, both of which have been extremely generous to the NIH. I feel that it would be wrong for it to appear that NIH was driving these changes. NIH is a publicly created institution, and it's been successful for that reason. Any sense that NIH is trying to take matters into its own hands and make it more convenient for itself I think could produce some waves of disgruntlement that would serve the institution very poorly. My own advice is that at some point, enlightened members of Congress and the administration who understand some of the difficulties that result from having tremendous proliferation of institutes and centers should consider asking the National Academy (of Sciences) to set up a commission to think, over the course of a couple of years, about the future of the NIH...Our budget is soon going to pass the $20 billion mark, we have 25 institutes and centers, and there will be more because things never seem to go backwards. As I noted when I first came here, when you create new institutes, it's like the spring is coming out of a little peanut brittle can and you never stuff things back in. You can't deal with this issue piecemeal—it's very apparent to me that the small institutes simply can't operate with the kinds of efficiencies and carry out some of the tasks the bigger institutes can carry out...I can see an NIH in which there are, basically, five or six organizations or clusters of organizations that work very effectively together and make the whole process of running the NIH one that is much more effective.

If you were around for another 6 years as NIH director, how would you improve the intramural program?

Part of it is location. I'm concerned about having significant components of our program in less than ideal space, and too far removed from centers of activity. I think we're going to have tremendous flowering of the program as a result of the new Clinical Center and Bldg. 50, but there are still outlying groups that worry me. The campus up in Bayview (Baltimore) is going to become more self-sufficient; as we bring the three components that are up there together, they'll have a nucleus of activity. I am worried that we do have pieces, and sometimes almost all of certain other programs not well organized. One of the most promising things that I've strongly supported and have helped to get under way is the concept of having a Neuroscience Center on campus, with some new and renovated buildings in the Bldg. 35-36 complex that will help to bridge some of the chasms that currently exist between some of the institutes, even though they do very similar things.

Whimisical artwork announcing the farewell included a caricature of Varmus biking to his new job.

Update on Gene Therapy Oversight

Editor's Note: Almost a decade ago, NIH intramural researchers pioneered two human gene therapy trials. Since then there have been some 350 human gene therapy protocols. The death last September of Jesse Gelsinger, an 18-year-old patient with partial ornithine transcarbamylase (OTC) deficiency, who was enrolled in a study protocol at the University of Pennsylvania in Philadelphia, prompted congressional hearings, media articles and an FDA freeze on the study in which Gelsinger was enrolled. The NIH recombinant DNA advisory committee (RAC), held a 3-day meeting at NIH in December to review the scientific, ethical and oversight questions. Following is an excerpt of an article from the Jan-Feb. 2000 issue of the *NIH Catalyst*, written by Fran Pollner, managing editor.

The rules and roles of federal agencies involved in overseeing gene therapy experiments are undergoing review and may be revised in the wake of Jesse Gelsinger's death. Specifically, the role of the NIH recombinant DNA advisory committee is being revisited, and proposed amendments to the *NIH Guidelines for Research Involving Recombinant DNA Molecules (NIH Guidelines)* have been published. The harmony—or lack of it—between NIH and FDA adverse event reporting requirements in the conduct of clinical trials is also being scrutinized.

Revisiting the RAC. Before vacating the office of NIH director, Harold Varmus announced the formation of a subcommittee of the director's advisory group to recommend further actions NIH might take to minimize adverse events in gene therapy trials. Although the group's charge also places the role of the RAC back on the table, Varmus stands by his actions in 1995 to recast the RAC from a quasi-regulatory body with approval authority over every gene therapy application to a public policy forum on novel methods in gene therapy clinical trials and thorny issues related to gene therapy.

NIH Guidelines. NIH clarified the definition of adverse events and investigators' reporting obligations in a proposed action to amend the *NIH Guidelines*, published in the *Federal Register* Nov. 22, 1999. The proposal reaffirms that investigators must report serious adverse events immediately to NIH, so NIH may rapidly notify the RAC and others involved in gene transfer studies. "Immediately" is defined as no later than 15 days from the event. A "serious adverse event" is defined as any "expected or unexpected adverse event, related or unrelated to the intervention, occurring at any dose" that results in death, a life-threatening event, hospital admission or prolonged stay, or disability.

Responding to questions during a news briefing after the first day of the RAC meeting are (from l), Amy Patterson, director, NIH Office of Biotechnology Activities; Lana Skirboll, director, NIH Office of Science Policy; Phil Noguchi, director, FDA Division of Cellular and Gene Therapies; and Kathryn Zoon, director, FDA Center for Biologics Evaluation and Research. Nearly all questions centered on FDA's oversight role in the OTC study, protocol violations, and FDA's steps to uncover, punish, and prevent irregularities in gene therapy clinical trials.

It also rejects recent claims by some gene therapy investigators and sponsors that human gene transfer protocols and serious adverse event reports are trade secrets. Informed consent documents would reflect the necessarily public nature of RAC discussions of adverse events.

The *NIH Guidelines* require the principal investigator to report serious adverse events to local review bodies and the FDA as well as to NIH and the federal Office of Protection from Research Risks. FDA reporting requirements require the study sponsor (who has presumably been informed by the investigator) to immediately report serious and *unexpected* adverse events to FDA. NIH proceedings are public; FDA proceedings are often closed.

During the RAC proceedings, industry representatives accepted the need for immediate reporting only of "related and unexpected" serious adverse events, and some RAC members voiced skepticism that they could deal meaningfully with reports of all adverse events.

Science Research Updates

Gene Mutation Results in Missing Teeth

Approximately 20 percent of the population are born unable to develop a full set of teeth. Although the underlying causes are mostly unknown, members of a Houston family who lack mainly their first and second molars were found to have a mutation in a gene called PAX9. This is the first report of a human disorder linked to PAX9, one of a family of "master" genes that help determine body shape and organ formation during embryological development. This discovery is an important contribution to understanding the genetics of human tooth development and brings scientists a step closer to someday replicating the process.

Scientists at the University of Texas-Houston Dental Branch and Baylor College of Medicine discovered the PAX9 mutation in a family in which congenitally absent molars were documented in members of three generations.

The finding, published in the January issue of *Nature Genetics*, was supported by the National Institute of Dental and Craniofacial Research.

The discovery of the PAX9 mutation began with Dr. Rena D'Souza, associate professor of orthodontics, directing her students to look for patterns of missing teeth in their patients. One of these students, coauthor Monica Goldenberg, observed a 13-year-old boy missing 14 permanent teeth. Further investigation revealed that the father and two brothers had a similar condition, and out of 43 family members, 21 were determined to have congenitally missing molars.

"This is an example of an astute clinical observation unveiling a classic pattern of autosomal dominant inheritance, where offspring of both sexes have a 50-50 chance of inheriting a mutated gene and the disorder associated with it," said D'Souza. "From that point it was a matter of applying the techniques of molecular epidemiology and DNA analysis to identify the gene."

Centers To Breed Genetically Variant Mice

To help learn more about how human bodies repair their environment-damaged DNA and control their cells' life cycles, NIEHS will fund up to five research centers to develop and breed mice with genetic variations that are more like those of humans in these regards.

The centers will provide the special mutant mice for scientists throughout NIH and to other research programs as well. Many cases of human disease are caused or triggered by a natural or man-made substance in the environment, often when an environmental substance causes a genetic mutation or a disturbance in cell growth. Variations in a person's genes make the person more, or less, sensitive to these substances or more, or less, able to resist or repair the damage.

Genetic variations explain why one smoker gets cancer or heart disease from that exposure while another smoker doesn't. Or why some members of a family react to environmental substances and develop asthma, while others do not. NIEHS said that understanding the variations in a mouse's genes better—and modifying the mice to add or subtract a human-like gene with its variations—will help scientists unlock the secrets of these and other human diseases in a variable humankind.

NIAMS Launches Projects in Autoimmunity

The National Institute of Arthritis and Musculoskeletal and Skin Diseases has awarded nearly $4 million for new projects on autoimmune diseases, conditions in which the body's immune cells mistakenly attack its own tissues and vital organs. The funds are part of a $30 million allocation from Congress to bolster research in autoimmunity.

The awards enhance NIAMS' commitment in this area, and involve the start-up of nine projects targeted against some 80 serious, chronic, autoimmune illnesses involving almost every human organ system.

"Autoimmune diseases like rheumatoid arthritis, lupus, scleroderma, alopecia areata, and many blistering skin diseases exact a huge toll in human suffering and economic costs," said NIAMS director Dr. Stephen Katz. "But we've recently witnessed exciting research advances in several of these, and we have every intention of pushing our knowledge base further."

Are you a life member? If not, you will receive a dues notice from NIHAA this spring.

Dues are an important source of our income, and we need your continued support. Please renew promptly.

For Your Information

Glenn Visits NIH

On Thursday evening, Jan. 27, Sen. John H. Glenn and fellow astronauts from the Space Shuttle Discovery, STS-95, visited NIH to present "home movies" from their October 1998 scientific research mission. The presentation took place in the main auditorium of the Natcher Conference Center. NIH and NASA are collaborating on a wide range of research areas. The STS-95 mission studied body changes that are shared by astronauts and older people. On Friday, Jan. 28, scientists of the STS-95 mission participated in a symposium that featured a scientific session about the experiments carried out on their flight. That took place all day in Masur Auditorium, Bldg. 10.

Ship Ahoy!

Continuing Education, Inc., University at Sea is sponsoring, in conjunction with Holland America, a 7-night Alaska Cruise starting May 20, 2000, featuring Dr. C. Everett Koop.

The theme is "The Excellence of Aging - Design Your Lifestyle for the Best Years of Your Life."

NIHAA will benefit if we participate. Interested NIHAA members should call 1-800-422-0711 or email: contactus@continuingeducation.net for details.

NIH Revises Master Plan

NIH has prepared a Master Plan modification for the northwest quadrant of the campus. The modification originated from the road changes associated with the Clinical Research Center project. Replacement sites had to be found for four major facilities in the 1995 Master Plan. It also became clear that NIH would need a third electrical power substation.

Several alternate sites were evaluated to accommodate a day care center, a patient family guest house, a parking garage, and a fire station. As part of the process, NIH consulted with nearby neighborhood and civic organizations as well as the Montgomery County Planning Board and the National Capital Planning Commission.

Final site selection was also endorsed by the NIH Community Liaison Council, which is composed of representatives of surrounding communities. The Master Plan modification includes the following:

Day Care Center. A future child day care facility will be located just north of Center Drive directly northwest of the CRC. It will be accessible from major circulation routes. A drop-off lane is readily situated from the Master Plan loop road. The plan includes playground space that can accommodate 75-150 children.

PEPCO Substation. One-third of the NIH power demand will be situated in this quadrant when the CRC and other facilities are completed. The substation will be placed on the slope of the hill just north of Center Drive near the proposed fire station and adjacent to the wooded area in the northwest quadrant. The site selection ensures minimal removal of trees and avoids major drainage impacts. It will be

away from the medical building complex and allows the main underground electrical feeder lines to be placed within the right-of-way of Center Drive.

Parking Structure. Six and one-half levels of parking! 850 spaces! The parking facility's exterior design will adhere to the guidelines for architectural materials identified in the 1995 Master Plan. It will be built on a parcel that is currently being used as a surface parking lot next to Bldg. 10. All vehicle access will occur from Convent and South Drives using the perimeter loop road system. Adjacent sidewalks will provide convenient pedestrian access to the CC.

Fire Station. The new fire station will replace the existing outdated facility that is not well connected to the new roadways. The planned station will have approximately 22,000 square feet of space, including an apparatus room and dormitory space. It will be built on an existing parking lot to minimize tree removal. New emergency vehicles will have rapid access to the NIH campus road system.

Guest House. This building will be situated on the lawn area south of Center Drive and north of the former convent. This structure will house patients and their families in a two-story building that will be residential in scale and detailing, featuring materials and forms compatible with the former convent building.

As with the 1995 Master Plan, this amendment provides a guideline for development if and when funding becomes available for any of the projects mentioned. Currently, only the fire station and the electrical substation are scheduled to be constructed this year.

Volunteers Needed to Record Scientific Texts for Students

Recording for the Blind & Dyslexic of Metropolitan Washington (RFB&D) is setting up a recording booth in Bldg. 31 for the convenience of NIH employees, alumni and neighbors.

Local students who have visual, learning or other physical disabilities urgently need taped versions of their science textbooks.

NIH's Broadcast Services Office is providing studio time to RFB&D from 10 a.m. to 1 p.m. on Tuesdays and Thursdays. To learn more about this volunteer opportunity and to sign up for upcoming orientation sessions contact Chris Smith at 202-244-8990 or ccsmith@rfbd.org.

Back, And To The Future

The 1999 Research Festival attracted a record number, as attendees crowded three plenary sessions (gene therapy, transplantation and imaging); a host of mini-symposia and poster sessions; and a hugh Technical Sales Association vendors show. Research Festival 2000 is scheduled for the week of Oct. 9-13.

Takeshi Ito of NIMH describes his poster.

NIEHS HQ Renamed to Honor Dr. David Rall

The NIEHS headquarters and laboratory Bldg. 101 in Research Triangle Park, N.C., has been renamed the Rall Bldg., in honor of former NIEHS director Dr. David Platt Rall, who died Sept. 28 after an automobile collision. NIH and Rep. David Obey of Wisconsin recommended the designation, which was approved by HHS. Rall was remembered at two memorial services in December, one was held at NIH and the other at NIEHS. The announcement was made by Dr. Ruth Kirschstein at the NIH service.

Health Communicators Discuss How to Find What Works

By Mimi Lising

Get some exercise! Eat your fruits and vegetables-five a day! Stomp that cigarette! And take your medicine, lower your fat intake, your cholesterol and your blood sugar! Promoting these kinds of messages is the daily business of federal health communicators. What works? What doesn't? And how do we know?

These and other questions brought 169 government health communicators to "So...What Happened? Incorporating Evaluation into Health Communication Programs," the third annual NIH Health Communications Forum. The forum was sponsored by the communications offices of NIDDK, NHLBI, NIDCR, NIAAA, NICHD, and the NIH Office of Communications and Public Liaison.

Keynote speaker Dr. Bill Smith, a nationally recognized expert in health communications and social marketing from the Academy for Educational Development, encouraged participants to begin by understanding the needs of their audiences; trying different methods to find out what works; and then using those methods. He added that they should not hesitate to change strategies to meet the needs of their audiences.

Speaking about the "fear and loathing" that many professional communicators feel for the task of evaluating, Elaine Bratic Arkin acknowledged that there is little money to evaluate health education programs; outcomes from other federal programs are often data-based; and health education is hard to quantify. In addition, results from a health education program may take years to surface.

A former PHS deputy assistant secretary for public affairs who is now a popular health communications consultant, Arkin urged the audience not to let apparent barriers stymie them. She suggested myriad ways to evaluate such as using case studies, measuring processes, examining activities rather than the total program, and thinking in terms of changes as well as results.

Breakout sessions in the afternoon included looks at ongoing campaigns such as NIDDK's National Diabetes Education Program and NEI's Eye Health Education Program, as well as ways of assessing the effectiveness of mass media campaigns, media relations and web sites; partnerships with both private and public groups; and tools to measure outcomes of health communications efforts.

Workshop speaker Leslie Hsu of the Office of Disease Prevention and Health Promotion, DHHS, stressed the need for web site evaluation in discussing her experiences with DHHS's healthfinder.gov. "People initiate web sites so quickly that they may not think of the need to evaluate them." However, Hsu added, the web is "such an important communication tool that evaluation is essential." NCI's Janice Nall shared her institute's recently developed guidelines for web site design and usability based on lessons learned from redesigning the CancerNet web site.

Resources and evaluation materials provided a variety of take-home messages for participants. John Burklow, deputy director of NIH's Office of Communications and Public Liaison, called the forum a "very practical guide...for people at the front lines who are trying to do a lot with limited resources."

A videocast of the forum is available at http://videocast.nih.gov/PastEvents.asp?1.

Speakers Elaine Bratic Arkin (l) and Anne Lubenow discuss the forum.

Logos of NIH

Recently the new NIMH logo received *Print Magazine's* regional design annual award for 1999. Among the approximately 4,000 submissions from the Washington/Baltimore region, *Print Magazine* selected 72 designs, which were featured in the magazine's September/October issue.

NIMH
National Institute of Mental Health

"We're very pleased that *Print Magazine* showcased the NIMH design," said Clarissa Wittenberg, director, NIMH Office of Communications and Public Liaison. "This is one of the most prestigious contests in the design and advertising communities, so the award is an honor." In addition to the NIMH logo shown above, the other logos of NIH may be viewed on http://www.nih.gov/icd/.

NIH Notes — August 1999 to January 2000

Appointments and Personnel Changes

Dr. Norman B. Anderson, director of the Office of Behavioral and Social Sciences Research, OD, since 1995, is leaving to become professor of health and social behavior at the Harvard University School of Public Health. He will also be vice president for research and development and a principal of Behavioral Sciences Unlimited, a new startup company that is part of the Abacus Group ... **John Burklow,** deputy director of cancer communications, NCI, was named deputy director of the NIH Office of Communications and Public Liaison and director of the NIH Division of Public Information. He joined NCI in 1986 as a communications intern ... **Dr. Norka Ruiz Bravo** was recently appointed deputy associate director for extramural activities at NIGMS. She will assist in setting grant funding policies and procedures and serve as liaison to CSR ... **Nelvis Castro** has been named acting director of the Office of Cancer Communications, NCI. She has been chief of OCC's Health Promotion Branch and has specialized in communications to minority and underserved populations ... **Dr. Anthony D. Carter** recently joined NIGMS as a program director in the Division of Genetics and Developmental Biology, where he will manage grants dealing with chromosomal organization and gene regulation. He is a molecular biologist who comes to NIGMS from CSR ... **Laura R. Cearnal** was recently appointed acting patient representative for CC. The patient representative is an advocate for resolution of patient grievances, identification of areas for improvement, problem-solving to meet patient's needs, answering questions, and identifying resources ... **Dr. Paul Coates** has been appointed director of the Office of Dietary Supplements. He has experience in academic research in biochemistry and more recently as deputy director of NIDDK's Office of Nutrition Research Coordination, where he was involved with development of Healthy People 2010 ... **Dr. Barbara Conley** has been appointed chief of the Cancer Treatment and Diagnosis Research Branch, NCI. Prior to to NIH, she was a faculty member at the University of Maryland's Greenbaum Cancer Center ... **Michael D. Daniel** is the chief of the newly created CC Hospitality Services Program to assist visitors, guests and patients. He was previously director of Patient Access Services at the University of Maryland Medical System ... **Dr. Charles G. Edmonds** has joined NIGMS as a special expert in the Division of Cell Biology and Biophysics, where he will administer grants in analytical chemistry and mass spectroscopy. He is a chemist who comes to NIGMS from the Department of Energy ... **Dr. Gillian Einstein** has joined CSR as scientific review administrator of study section 2 in the molecular, cellular, and developmental neuroscience integrated review group. She comes to NIH from Duke University where she was an assistant research professor in the department of neurobiology ... **Dr. Paula F. Flicker** recently joined the staff of NIGMS as a program director in the Division of Cell Biology and Biophysics. She comes from Vanderbilt University, where since 1989 she had been a faculty member in the department of molecular biology ... **Richard J. Gordon** has been appointed the CC's first chief information officer. Most recently Gordon served as technology officer for the North Atlantic Regional Medical Command in Washington, D.C. which manages all the Army hospitals and medical facilities from New York to North Carolina. He will facilitate the creation of a digital hospital across many of the CC functional areas—labs, radiology, pharmacy, critical care ... **Maureen E. Gormley** was recently appointed chief operating officer of the CC. She will serve as principal advisor on strategic planning, policy development, program formulation, and the overall administrative coordination of the CC ... **Dr. Stephen Groft,** head of NIH's Office of Rare Disease Research, is acting director of the Office of Medical Applications of Research while a search is conducted to replace Dr. John Ferguson, who recently retired ... **Dr. Mark C. Haines** has been named CC veterinarian. He replaces Dr. Joe Pierce who is now with NIAMS. He is one of a group of veterinarians who serve the various institutes. Known as the Animal Program Directors, these doctors are responsible for the proper care of NIH's animal subjects ... **Marianne Henderson** has been named chief, Office of Division Operations and Analysis in the NCI Division of Cancer Epidemiology and Genetics ... **Mary Jo Hoeksema** has been named NIA's new legislative officer. She was an NIH Presidential Management Intern (1995-1997), then special assistant to the director, Office of Policy for Extramural Research Administration (1997-1998), where she helped coordinate NIH extramural reinvention activities. Prior to coming to NIH, she worked on the Hill (1990-1995) as a legislative staffer ... **Dr. Richard Ikeda** has joined NIGMS as a program director in the Division of Pharmacology, Physiology and Biological Chemistry, where he will manage a portfolio of grants covering the areas of enzymology and bioenergetics. He comes to NIGMS from the Georgia Institute of Technology where he had been an associate professor of chemistry and biochemistry since 1993 ...

Two IC Changes

Dr. Allen M. Spiegel has been named the new NIDDK director effective Nov. 15. He has served at NIH for more than 25 years. Since 1990, he has been scientific director as well as chief of the Metabolic Diseases Branch in NIDDK. Spiegel is an internationally recognized authority on signal transduction. He has been involved in training young physicians, strategic planning and the development and allocation of research resources.

Dr. Harold Slavkin, director of NIDCR, recently announced that he will resign his position in July 2000 to return to his alma mater, the University of Southern California. Slavkin joined NIDCR in the summer of 1995 on an "extended leave of absence" from USC, where he served as director of the Center for Craniofacial Molecular Biology. Slavkin will return to USC to become the dean of its School of Dentistry.

Dr. Mark. A. Klebanoff was recently named director of NICHD's Division of Epidemiology, Statistics and Prevention Research. He has been at NICHD since 1983 ... **Dr. Michael Martin** has recently joined CSR as director of the Division of Physiological Systems. He will coordinate and monitor the initial peer review of grant applications submitted to NIH ... **Ana Martinez** has been appointed chief of the newly established Pharmaceutical Affairs Branch in NIAID's Division of AIDS ... **Dr. Elizabeth Nabel** recently joined NHLBI as director of the Clinical Research Program in the Division of Intramural Research. She becomes one of two directors for NHLBI's intramural research program. Last summer, NHLBI reorganized the division into clinical and laboratory research programs. The reorganization allowed creation of several new units including a Vascular Biology Branch, which also will be headed by Nabel ...**Dr. Richard Nahin** has been named first director of the Division of Extramural Research Training and Review by the National Center for Complementary and Alternative Medicine (NCCAM). He served as the division's acting director since early 1999, after becoming the program officer for NCCAM extramural activities in 1996 ... **Dr. Michael Nunn** has been appointed scientific review administrator of the molecular, cellular, and developmental neuroscience 6 study section in CSR. He was a senior staff fellow in the Laboratory of Molecular Biology, NIMH ... **Christopher J. Ohlandt** was recently named director of the new Division of Customer Support in CIT. He returns to NIH after working for Microsoft ... **Dr. Angela Pattatucci** joined the CSR as scientific review administrator for two study sections in the AIDS and related research integrated review group. She recently completed a 1-year visiting professorship at the University of Louisville in women's studies and psychology ... **Susan Quantius** recently was appointed NIH associate director for budget. She had been director of federal relations for the Association of American Universities for 2 years prior to joining NIH. She replaces Francine Little, who joined NIEHS ... **Dr. Narayani Ramakrishnan** has recently joined the Division of Receipt and Referral, CSR. She comes from the department of applied cellular radiobiology, Armed Forces Radiobiology Research Institute, where she was a visiting scientist (1989-1994) and a research biologist (1994-1999) ... **Alexander I. Rosenthal** was recently named director of the new Division of Enterprise and Custom Applications for CIT. He came to NIH in 1995 from R.O.W. Sciences, Inc., where he worked as a senior systems analyst ... **Dr. Julia Howe Rowland** has been named director, Office of Cancer Survivorship, NCI. The office is the focal point for support of special initiatives aimed at investigators who interact with cancer survivors, and research programs relevant to survivors and their families ... **Dr. Michael Sayre** recently joined CSR as scientific review administrator of the CDF-1 study section within the cell development and function integrated review group. Prior to joining CSR, he was an assistant professor in the department of biochemistry, and continues as an adjunct assistant professor in the department of biochemistry and molecular biology at Johns Hopkins University School of Hygiene and Public Health ... **Dr. Arthur Schatzkin** has been selected to head the Nutritional Epidemiology Branch in the Division of Cancer Epidemiology and Genetics, NCI. His research focuses on the nutritional causes and prevention of cancer. He first joined NCI in 1984 as a senior staff fellow in the Cancer Prevention Studies Branch of the Division of Cancer Prevention and Control, becoming a senior investigator in 1988 ... **Dr. Anne Schaffner,** a former biologist in the NINDS Laboratory of Neurophysiology, is now a scientific review administrator in CSR. In her new position, she is managing the peer review of research grant applications in the molecular, cellular, and developmental neuroscience integrated review group ... **Dr. Marcia Steinberg** has joined the CSR as chief of the cell development and function integrated review group and as scientific review administrator of the cell development and function 4 study section. Her research interests encompass cell biology and biochemistry ... **Dr. Stephen E. Straus,** chief of the Laboratory of Clinical Investigation, NIAID, has been appointed director of the National Center for Complementary and Alternative Medicine. He was selected for his experience in alternative therapies and his expertise in clinical evidence, which will result in significant expansion of clinical research in this field ... **Dr. Anne Thomas** recently joined the staff of NINR as clinical director of the Division of Intramural Activities and chief, Health Promotion Laboratory. She comes to NINR from Indiana State University School of Nursing at Terre Haute ... **Esmail Torkashvan** recently joined NCRR as a general engineer in the research infrastructure area. He is a registered professional engineer in the state of Maryland who specializes in administering and evaluating construction and renovation grants. At NCRR, he will work primarily on the Research Facilities Improvement and Animal Facilities Improvement Programs ... **Frederick Walker** became the executive officer for OD on Oct. 1. He has a long background in human resource management at NIH, serving most recently as director, Division of Senior and Scientific Employment, Office of Human Resource Management ... **Dr. Lawrence Wolfe** has been named NIAID's chief information officer and director of the institute's Office of Technology Information Systems. He comes to NIH from General Services Administration ... **Dr. Lawrence Yager** recently joined the CSR as a health scientist administrator in the infectious diseases and microbiology integrated review group. He comes to CSR from Temple University.

Honors and Awards

Dr. Arthur A. Atkinson, Jr., senior advisor in clinical pharmacology to the CC director and director of the ClinPRAT postdoctoral training program, has been named a master by the American College of Physicians-American Society of Internal Medicine for his distinguished contributions to internal medicine ... **Dr. Robert Balaban** delivered the G. Burroughs Mider Lecture on Feb. 2 in Masur Auditorium speaking on "Domestication of the Mitochondrion for Cellular Energy Conversion." Longtime chief of NHLBI's Laboratory of Cardiac Energetics, he recently became director of the Laboratory Research Program in NHLBI's Division of Intramural Research ...

Dr. Leslie Ford, associate director for clinical research in NCI's Division of Cancer Prevention, received from the Association of Community Cancer Centers its Outstanding Achievement Award for "significant efforts in enhancing clinical research through the NCI's Community Clinical Oncology Program and her leadership in the Breast Cancer Prevention Trial" ... **Dr. Phillip Gorden** was presented the American Diabetes Association's Albert Renold Award for a career distinguished by outstanding achievements in the training of diabetes researchers and his efforts "to preserve the integrity of basic research during times of fiscal constraint and to strengthen mechanisms for research training and career development in diabetes." He has stepped down as NIDDK director and will continue to work as head of the Diabetes Branch ... **Dr. Robert Hoover,** director of the NCI Epidemiology Program, was presented the Distinguished Service Award by DES Action USA, for his research benefiting DES-exposed individuals ... **Dr. Alice Horowitz,** a health educator in NIDCR's Health Policy, Analysis and Development Branch, recently received the Distinguished Service Award from the American Association of Public Health Dentistry. She was honored for her "excellent and distinguished service" to public health dentistry ... **Frances Humphrey Howard,** special assistant to the associate director, Division of Extramural Programs, NLM, has received the Institute of International Education's Duggan Award. She was hailed for the significant contributions she has made toward increasing understanding and ties between citizens of the U.S. and those of other nations ... **Dr. Muriel Kaiser-Kupfer,** chief of the Ophthalmic Genetics and Clinical Services Branch, NEI, recently received a Lifetime Achievement Award from the Cystinosis Foundation for her work in describing and treating that disease ... **Dr. Albert Z. Kapikian** recently received a doctor of science, *honoris causa* degree from his alma mater Queens College in recognition of his outstanding scientific contributions in the fields of epidemiology, virology and vaccinology. He also delivered on Nov. 16 the Kinyoun Lecture, on "Development of a Rotavirus Vaccine for the Prevention of Severe Diarrhea in Infants and Young Children" ... **Dr. Miriam F. Kelty,** NIA associate director for extramural affairs, recently received the Career Service to Health Psychology Award from the American Psychological Association's health psychology division. She was cited for her "contributions to the field of health psychology and behavioral medicine research and to the division" ... **Dr. Richard Klausner,** NCI director, received the 12th Donald Ware Waddell Award from the Arizona Cancer Center, Tucson, Ariz. The award is presented annually to a basic or clinical investigator who has made outstanding contributions to cancer research ... **Dr. Edward Lakatta,** chief of NIA's Laboratory of Cardiovascular Science, was recently coawarded the 1999 Novartis Prize for Gerontological Research with Dr. Paul Baltes of the Max-Planck Institute for Educational Research in Berlin. His research emphasizes how the cardiovascular system is altered by aging ... **Bill Leonard,** a producer in NLM's Audiovisual Program Development Branch, has been selected for membership in the "Silver Circle" by the Washington, D.C. chapter of the National Academy of Television Arts and Sciences. The Silver Circle was established in 1987 to honor media professionals for their outstanding contributions to the D.C. television industry ... **Dr. G. Reid Lyon,** chief of NICHD's Child Development and Behavior Branch, recently received the Kingsbury Center 60th Anniversary Award for his "critical leadership of scientific inquiry in mental development and learning" and for his own research efforts in reading development and reading disorders ... **Dr. Barbara Sonies,** chief of the speech-language pathology section and director of the ultrasound oral pharyngeal imaging laboratory of the department of rehabilitation medicine, CC, received the highest award, the HONORS, bestowed upon its members by the American Speech-Language Hearing Association. The award recognized her work in diagnosis of swallowing and swallowing disorders that raised the area of dysphagia management to a respected position within medicine ... **Dr. Constantine A. Stratakis,** head of the unit on endocrinology and genetics of NICHD's Developmental Endocrinology Branch, has received the first annual International Award for Excellence in Published Clinical Research ... **Dr. George Thoma,** chief of the Communications Engineering Branch, Lister Hill National Center for Biomedical Communications, NLM, is one of 24 members of the International Society for Optical Engineering who were promoted to fellow of the society. He was cited "for technical accomplishments and extensive contributions in the areas of imaging processing, document image understanding, and biomedical image databases" ... **Dr. Maria Turner,** chief of the Dermatology Branch Consultation Service, NCI, received the Everett C. Fox Memorial Lecture Award of the American Academy of Dermatology recently. After her lecture, entitled "Medical Dermatology Is Alive and Well," she was presented with a commemorative plaque and a $10,000 check ... **Dr. Weidong Wang,** head of the transcription remodeling and regulation unit at NIA's Laboratory of Genetics, recently received the Ellison Medical Foundation New Scholar in Aging Award. The $200,000 award provides 4 years of support to conduct basic biological research in the field of aging. Wang is characterizing a novel protein complex involved in the premature aging disease Werner syndrome at NIA's Gerontology Research Center in Baltimore ... **Dr. Koji Yoshinaga,** NICHD health science administrator, has received the 1999 Distinguished Service Award from the Society for the Study of Reproduction. The award acknowledges his contributions to the reproductive biology community through work as an investigator, administrator and "facilitator of scientific exchange." He was the first researcher to investigate the effects of nicotine on pregnancy.

Five Elected to IOM

Five NIH employees were among the 55 people newly elected to the Institute of Medicine of the National Academy of Sciences: **Dr. Kenneth Fischbeck**, chief of NINDS's Neurogenetics Branch; **Dr. Patricia Grady**, NINR director; **Dr. Richard Hodes**, NIA director; **Betsy Humphreys**, assistant director for health services research information, and deputy associate director for library operations, NLM; and **Dr. Daniel Weinberger**, chief of the Clinical Brain Disorders Branch in NIMH's intramural research program.

Dr. Leslie Ford, associate director for clinical research in NCI's Division of Cancer Prevention, received from the Association of Community Cancer Centers its Outstanding Achievement Award for "significant efforts in enhancing clinical research through the NCI's Community Clinical Oncology Program and her leadership in the Breast Cancer Prevention Trial" ... **Dr. Phillip Gorden** was presented the American Diabetes Association's Albert Renold Award for a career distinguished by outstanding achievements in the training of diabetes researchers and his efforts "to preserve the integrity of basic research during times of fiscal constraint and to strengthen mechanisms for research training and career development in diabetes." 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Reid Lyon**, chief of NICHD's Child Development and Behavior Branch, recently received the Kingsbury Center 60th Anniversary Award for his "critical leadership of scientific inquiry in mental development and learning" and for his own research efforts in reading development and reading disorders ... **Dr. Barbara Sonies,** chief of the speech-language pathology section and director of the ultrasound oral pharyngeal imaging laboratory of the department of rehabilitation medicine, CC, received the highest award, the HONORS, bestowed upon its members by the American Speech-Language Hearing Association. The award recognized her work in diagnosis of swallowing and swallowing disorders that raised the area of dysphagia management to a respected position within medicine ... **Dr. Constantine A. Stratakis,** head of the unit on endocrinology and genetics of NICHD's Developmental Endocrinology Branch, has received the first annual International Award for Excellence in Published Clinical Research ... **Dr. George Thoma,** chief of the Communications Engineering Branch, Lister Hill National Center for Biomedical Communications, NLM, is one of 24 members of the International Society for Optical Engineering who were promoted to fellow of the society. He was cited "for technical accomplishments and extensive contributions in the areas of imaging processing, document image understanding, and biomedical image databases" ... **Dr. Maria Turner,** chief of the Dermatology Branch Consultation Service, NCI, received the Everett C. Fox Memorial Lecture Award of the American Academy of Dermatology recently. After her lecture, entitled "Medical Dermatology Is Alive and Well," she was presented with a commemorative plaque and a $10,000 check ... **Dr. Weidong Wang,** head of the transcription remodeling and regulation unit at NIA's Laboratory of Genetics, recently received the Ellison Medical Foundation New Scholar in Aging Award. The $200,000 award provides 4 years of support to conduct basic biological research in the field of aging. Wang is characterizing a novel protein complex involved in the premature aging disease Werner syndrome at NIA's Gerontology Research Center in Baltimore ... **Dr. Koji Yoshinaga,** NICHD health science administrator, has received the 1999 Distinguished Service Award from the Society for the Study of Reproduction. The award acknowledges his contributions to the reproductive biology community through work as an investigator, administrator and "facilitator of scientific exchange." He was the first researcher to investigate the effects of nicotine on pregnancy.

Five Elected to IOM

Five NIH employees were among the 55 people newly elected to the Institute of Medicine of the National Academy of Sciences: **Dr. Kenneth Fischbeck**, chief of NINDS's Neurogenetics Branch; **Dr. Patricia Grady**, NINR director; **Dr. Richard Hodes**, NIA director; **Betsy Humphreys**, assistant director for health services research information, and deputy associate director for library operations, NLM; and **Dr. Daniel Weinberger**, chief of the Clinical Brain Disorders Branch in NIMH's intramural research program.

to Washington from Iowa and worked for NIMH. From 1971-1975, he was deputy director of NIAAA and after leaving NIAAA, he continued to work in alcohol abuse education until his retirement in 1991 ... **Dr. Richard Feinberg,** a retired NINDS scientist, died Nov. 28. He was the chief, visual abnormalities section, in the perinatal project at NINCDS. He had worked at the institute from 1966 to 1979 ... **Janet L. Fitzwater,** 79, the retired chief of surgical nursing services at the CC, died of Alzheimer's disease Oct. 24 in Richmond. She worked at NIH for 18 years, beginning in 1953 and was a captain in the PHS. She held patents for surgical services and contributed articles to nursing and clinical journals. After she retired, she was director of the Washington Home and taught nursing at Catholic University and Montgomery College ... **Dr. Clair L. Gardner,** 83, died at his home in Grants Pass, Oregon, on Oct. 12. He served as acting director of NIDR (1975-1976) and also as director of extramural programs. He retired in 1981 after 26 years in the PHS ... **Dr. Dezider Grunberger,** 77, a cancer researcher and professor emeritus of biochemistry, molecular biophysics and public health at the Columbia University College of Physicians and Surgeons, died of colon cancer on Aug. 7. His research focused on chemical carcinogens and the mechanisms by which they cause cancer. In 1964, after working in Prague, he came to NIH to work and left in 1968, when he began a long association with Columbia's Comprehensive Cancer Center ... **William Cassel Hanson, Jr.,** 82, a retired security force member (1950-1978) at NIH, died of congestive heart failure July 29 at Woodside Center Nursing Home in Silver Spring ... **Virginia Thomas Harter,** 72, an NIH employee who retired in 1994, died Sept. 29 at the NIH clinic after a heart attack. She was secretary to the director of NIMH for 21 years before retiring ... **Rosemary Healy,** 83, a registered nurse who worked at NIH, died of heart disease Dec. 19 at the Montgomery Village Care and Rehabilitation Center in Gaithersburg ... **Carolyn Doe Herbert,** 60, a former registered nurse at NIH, died of a cerebral hemorrhage Jan. 3 at Montgomery General Hospital. She worked at NIH as an occupational medicine and employee health nurse in the mid-1960's and 1970's ... **Dr. Itzhak O. Jacoby,** 53, who worked at the Uniformed Services University of the Health Sciences and NIH, and **Gail Jacoby,** 50, chief of planning at NIA, along with their 13-year-old daughter, Atira, died Nov. 26 as a result of injuries sustained in an airplane crash in Newark, N.J. He was professor and director, Division of Health Services Administration at USUHS. An expert in health services management and policy, he was deputy director and director of the Office of Medical Applications of Research at NIH (1981-1988). She was director of the Office of Planning, Analysis, and Evaluation, and headed NIA's ongoing efforts to prioritize and evaluate its research program ... **Dr. Melvin Kahn,** a clinical professor of medicine, Mount Sinai School of Medicine, and attending cardiologist at Mount Sinai Hospital, died in New York City. In the mid-1950's, Kahn was a clinical associate at NIH in cardiology and renal disease ... **Dr. Jerome Irving Kleinerman, 75,** a pathologist and lung specialist who helped develop national health standards for workers, died in an automobile accident on Aug. 6 in Arcadia, Fla. He was an NIH advisory committee member ... **Audrey B. Lenderking,** 86, a retired nurse at NIH, died of congestive heart failure Dec. 6 at Warren Memorial Hospital in Front Royal, Va. She worked as a pediatric nurse and retired from the child research branch in 1974 ... **Francis Joseph Miller,** 86, an NIH systems analyst (1972-1978), died of congestive heart failure on Dec. 13 at Inova Cameron Glen Care Center in Reston. After retiring, he participated in tournaments sponsored by the U.S. Masters Swimming program ... **Dr. Irving Louis Miller,** 79, a genetics research scientist at NIH (1982-1992), died of cardiopulmonary arrest July 27 at Cherrydale Nursing Home in Arlington ... **Flora Moore,** a supervisor in the Division of Nursing at the CC (1957-1965), died Sept. 19 in Texas of complications from heart disease. She was also a nurse officer with the rank of commander in the PHS. After she left NIH she served in a surgical unit that had a tour of duty in Vietnam ... **Louise E. Moore,** 75, a nurse who also worked as an interpreter at NIH, died of cancer Sept. 15 at her home in Palm Bay, Fla. ... **Dr. Gerald Murphy,** 65, secretary-general of the International Union Against Cancer (UICC) and past president of the American Cancer Society, died Jan. 21 after a heart attack while attending the meeting in Israel. Murphy directed the Roswell Park Memorial Institute for cancer research and treatment in Buffalo (1970-1985). He was an early member of the National Cancer Advisory Board and chaired the National Prostatic Cancer Project. While in New York state, his research group discovered prostate-specific antigen (PSA). Recently he was clinical professor of urology at the University of Washington and research director of the Pacific Northwest Cancer Foundation in Seattle ... **Robert Johnson Nash,** 70, a Washington architect who designed churches, public buildings and schools in the metropolitan area, died of cancer Dec. 5 at his home in Fort Washington. He designed the ambulatory care research facility at NIH ... **Dr. Daniel Nathans,** 71, a Johns Hopkins University molecular biologist who shared the 1978 Nobel prize for medicine for research in molecular work, died of leukemia Nov. 16 at his home in Baltimore. He was a clinical associate at NCI in the mid-1950's ... **Eleanor O'Donoghue Nealon,** 59, director of NCI's Office of Liaison Activities, died of metastatic breast cancer Oct. 22 at her home in Bethesda. She joined NCI in 1981 as a speech writer and formed the liaison office in 1994. She also was involved with the formation in 1997 of the Director's Consumer Liaison Group. NCI has established the Eleanor Nealon Extraordinary Communication Lecture Series to honor her memory ... **Dr. Robert H. Parrott,** 76, a pediatrician and virology researcher who ran Children's Hospital in Washington D.C. for 3 decades, died of a stroke at his home in Highland, Md. From 1954 to 1956, he did virus research at NIH, while serving in the PHS, in the Laboratory of Clinical Investigation, NIAID ... **Ruth Boyer Peck,** 91, who retired in July 1973 after 16 years as a science writer with NINDS, died of pneumonia Sept. 17 at the Friends Nursing Home. While at NIH, she received awards for a series of NIH neurology publications for laymen called "Hope Through Research" ... **Donna Phillips,** a retired NEI employee, died Oct. 10, after a two-year battle with cancer. She retired on May 21, 1999, because of illness. She began working at NEI on Nov. 30, 1969, in the administrative office, arriving as one of the institute's first employees ... **Dr. Clinton C. Powell** who was at NIH (1946-1964) lastly as the director of NIGMS, died of multiple myeloma in Redding,

Calif., on Oct. 11. In 1954, he came to NIH where he served successively in the CC, NCI and DRG, eventually becoming chief of the Division. In 1961 he was named assistant director at NIAID. He was appointed chief of the Division of General Medical Sciences, becoming director of the new institute on Jan. 30, 1963. He served until 1964 when he left to become associate coordinator of medical and health sciences at University of California ... **Elizabeth Mary Hayes Quinlan,** 81, a former secretary at NIH, died Oct. 6 at her home in Silver Spring of renal failure. She worked as a secretary at NIH from the late 1950's to the late 1960's. She helped make her birth town in Ireland, Wexford, the sister city of Annapolis ... **Dr. David Platt Rall,** 73, a cancer researcher who simultaneously headed both NIEHS and the National Toxicology Program, died Sept. 28 in Bordeaux, France, as a result of injuries suffered in an automobile accident. He joined NCI in 1954 and his early research led, among other things, to methods for preventing the spread of leukemia to the brain. Meanwhile, he became increasingly interested in the dilemma that anti-cancer drugs, in the doses needed to be effective, tend to be highly toxic and may predispose patients who are successfully treated for a first cancer to develop a later malignancy. That kindled his interest in using animal research to predict toxic effects in patients and in systematically exploring the impact of environmental chemicals on health. This made him a logical choice to head NIEHS. He was director of the National Toxicology Program when it was headquartered at NIEHS. He had been a member of the NIHAA board of directors ... **Ann E. Rathbone,** 87, a secretary at NIH, died Sept. 27 at Shady Grove Hospital in Rockville after a heart attack. She worked at NIAID in the 1970's ... **George Ray, Sr.,** 53, a longtime NIH employee who was also an African Methodist Episcopal pastor, died Jan. 25 at Malcolm Grove Medical Center after a heart attack. He spent the past 28 years at NIH where he was an engineering technician in the contracts department and an equal employment opportunity specialist. In addition to his work at NIH, he was involved in his church and in working in the community to help people. He also drove a yellow taxicab for more than 25 years ... **Loraine Bishop Royal,** 72, a retired registered nurse who worked for NIH in the 1970's, died Dec. 4 at her home in Bethesda. She had leukemia ... **Dr. Sydney E. Salmon,** 63, a cancer researcher and founder of the Arizona Cancer Center in Tucson, died Oct. 13 of pancreatic cancer at his home in Tucson. Early in his career, he was a special fellow in hematology and immunology at NIH. In 1991, he was named to the National Cancer Advisory Board ... **Benno Schmidt,** 86, a pioneering venture capitalist who was also an advocate for the federal government's war on cancer, died of heart failure on Oct. 21 at his home in New York City. In 1970 as a member of the National Panel of Consultants he was involved in the shaping of the National Cancer Act of 1971. He was appointed by President Nixon to head the President's Cancer Panel and helped NCI secure its first substantial appropriation: $100 million in 1972. He was also the chairman of Memorial Sloan-Kettering Cancer Center Boards of Overseers and Managers. He was an acknowledged leader in both the public and private sector efforts in biomedical research ... **Dr. Paul B. Sigler,** 65, a molecular biologist and biochemist who studied organic structure at Yale University, died of a heart attack Jan. 11. He had worked briefly at NIH after receiving a doctorate in biochemistry at Cambridge, England in 1968 ... **Elizabeth Daley Snow,** 67, a librarian and medical indexer at NLM, died of liver failure Aug. 13 at her home in Vero Beach, Fla. She joined NLM in 1983 and continued to do work for NLM even after 1992 when she retired and moved to Florida ... **Tolbert Lee Strong, Jr.,** 50, a printing specialist for 21 years with the printing procurement section of the Office of Research Services's Reprographic Communications Branch, died on Nov. 26 of cancer. He began his government career in 1969 as an administrative aide in the White House. After being promoted to staff printer there, he joined NIH in 1978 as a printing specialist ... **Dr. S. Susan Su,** a National Opinion Research Center senior research scientist whose field of research included drug abuse and AIDS prevention, died of ovarian cancer Sept. 2 at a hospital in Los Angeles. At the time of her death, she was the leader of long-term studies on drug use and HIV risk behavior that was supported by NIDA. She also served on grant application review committees for NIDA and NIMH. She was a member of the NIDA's AIDS behavioral subcommittee and NIH's committee of behavioral and social science of transmission and prevention of HIV infection ... **Dr. Sydney Udenfriend,** 81, a former NIH biochemist who made contributions to studies of amino acids, peptides and biogenic amines, died Dec. 29 in Atlanta, Ga., following heart surgery. Before coming to NIH in 1950, he had worked with Drs. James Shannon and Bernard Brodie at the Goldwater Laboratory, New York University. He was chief of the Laboratory of Chemical Biochemistry, NHI. He left NIH in 1968 to become director of the Roche Institute for Molecular Biology in Nutley, N.J. ... **Anne Udoff** died on Nov. 9. She worked in OD at NIH ... **Dr. Eric M. Wagshal,** 54, a retired internist, died of renal cell cancer Dec. 20 at the CC. After a post-residency fellowship in gastroenterology at Johns Hopkins Hospital, he served in the PHS at NIH as a researcher at NCI in the mid-1970's ... **Dr. Hans Waine,** 92, an expert in rheumatology, died Dec. 5 at a nursing home in Stamford, Conn. Prior to becoming a physician, Waine received a doctorate in history in Germany and worked as a journalist in Berlin. He was chairman of grants at NIAMD ... **Jean S. Willis,** 79, a secretary at NIH in the 1960's, died Jan. 18 of cancer at Suburban Hospital. After NIH, she worked as a secretary to members of the board of the *Washington Star* newspaper until it closed in 1981 ... **Dorothy C. Windham,** 74, a retired NIH executive assistant, died of a pulmonary embolism Aug. 1 at Suburban Hospital. She worked at NIH (1960-1977) as executive assistant to the director of research. She had been an active church leader and a community volunteer ... **Dr. Geraldine Woods,** 78, former chairman of the Howard University board of trustees, died of cancer Dec. 27 in Los Angeles. She maintained a relationship with NIH as a special consultant (1969-1987) on the development and implementation of research, training and fellowship programs in biomedical sciences at minority institutions.

Mrs. Mary Calley Hartman made a contribution to NIHAA in memory of **Cpt. Janet Fitzwater.**

NIHAA 2000 BOARD BALLOT

PLEASE TEAR OUT AND RETURN WITH YOUR VOTE

In accordance with the bylaws of the NIHAA, alumni members of the association are to elect one-third of the board of the association. The nominating committee, appointed by President William I. Gay, has nominated the alumni members listed below. Each has agreed to serve on the board of directors if elected, occupying positions on the board left open by expiring terms of office of present members. Alumni members may vote for four (4) of these nominees. However, associate members (current NIH employees) are not eligible to vote in this election.

Please vote for up to four (4) and return your ballot to the NIHAA office by April 15.

	Nominees	Last NIH Affiliation
☐	**Dr. W. Emmett Barkley***	Director, Division of Safety, OD
☐	**Dr. Rita Colwell**	Member, NIH Advisory Councils/Committees
☐	**Dr. Murray Eden***	Chief, Biomedical Engineering, NCRR
☐	**Dr. James Ferguson**	Special Expert, NLM
☐	**Dr. Peter Frommer**	Deputy Director, NHLBI
☐	**Mr. Benjamin Fulton**	Executive Officer, NICHD
☐	**Dr. Samuel Greenhouse***	Epidemiologist, NIMH
☐	**Dr. Joseph Handler**	Scientist, NHLBI
☐	**Dr. Irwin Kopin**	Scientist, NINDS
☐	**Dr. James F. O'Donnell**	Director, Office of Extramural Programs, OD
☐	**Dr. Lawrence Shulman***	Director, NIAMS
☐	**Dr. Robert E. Stevenson**	NCI Virologist
☐	**Ms. Joan Topalian**	Executive Officer, ORS
☐	**Mr. Paul Van Nevel**	Director, Office of Cancer Communications, NCI

***CURRENT BOARD MEMBERS WHO ARE ELIGIBLE FOR A SECOND TERM.**

NIH Retrospectives: 5 Decades of History

Winter 1950

Building 12 is now completed. It will provide maintenance, overhaul and storage facilities for NIH vehicles, and general storage space {It now has been converted to office and machine space for data processing and computer operations} ... Work is continuing on the CC construction site that was begun in November 1948. In January the superstructure began to rise with wooden forms for pouring the reinforced-concrete walls set up.

Winter 1960

In January the *NIH Record* and *NIH Calendar of Events* offices moved from Bldg. T-19 to Bldg. 1, Rooms 209-A and 209 ... Seventy-five "Old Timers" who have worked at NIH for over 12 years met informally on Jan. 7. Among those present, James E. Phillips, Laboratory Aids Branch, DRS, was senior in length of service. His 39 years with NIH extend back to the days when the Hygienic Laboratory, forerunner of NIH, was located at 25th and E Streets in Northwest Washington ... Outbreaks of Asian influenza on St. Paul Island and St. Lawrence Island in the Bering Sea were investigated by scientists of the Arctic Health Research Center, Alaska Department of Health, and NIAID's Rocky Mountain Laboratory. Each outbreak arose from a single introduction of virus, affording an unusual opportunity for identifying the precise time limits of virus activity in each community.

Winter 1970

On Dec. 18, 1969, Dr. Jesse Steinfeld was confirmed as Surgeon General of the Public Health Service. He succeeds Dr. William H. Stewart who retired ... Drs. Harry M. Meyer, Jr., and Paul D. Parkman, pediatricians in the Division of Biologics Standards, have been awarded the 1969 *Parents Magazine* Medals for "outstanding service to children" because of their contribution to rubella research. They developed the first attenuated virus strain, HPV-77 for rubella vaccines, which is presently being used in nationwide immunization programs.

Summer 1980

The President's fiscal year 1981 budget request for NIH is $3,581.5 million, a net increase of $138.9 million over the 1980 comparable budget of $3,442.6 million ... Flexible and compressed work schedules at NIH have been authorized by Dr. Donald S. Fredrickson, NIH director. Employees will be able to select and vary their starting, lunch and quitting times within the limits established by NIH and B/I/D policy. The NIH flexitime policy was developed as a result of experiments here and at other federal agencies. In order for the program to work at NIH, arrival and departure preferences, rotation of schedules with coworkers, and coordination of attendance at meetings are essential ... Dr. Earl R. Stadtman, chief of the Laboratory of Biochemistry, NHLBI, was awarded the National Medal of Science, the highest honor that the federal government accords to this country's scientists and engineers. Since 1959, when the medal was established, five of the recipients have been NIH scientists.

Winter 1990

Dr. Louis W. Sullivan, secretary of Health and Human Services, has approved the long-awaited merger of the Division of Research Resources and the Division of Research Services, a new organization named the National Center for Research Resources (NCRR). Dr. Robert A. Whitney, Jr. has been named director of the new center. He was director of DRS since November 1985 and director of DRR since October 1988, when NIH proposed the merger ... The new National Center of Human Genome Research (NCHGR), formerly the Office of Human Genome Research under the NIH director, will now be equivalent to other NIH institutes in its authority to award grants and plan and direct scientific research.