

New Surgeon General: 'Still a Tourist' Living The American Dream

By Carla Garnett

Young Richard Carmona was just 12 years old when he first had the sense knocked into him. His startling moment of clarity — provided inadvertently by his mother — occurred on a day when he and his three siblings were hungry. Poor and struggling, living in a tiny apartment with bare cupboards, four kids and an absentee alcoholic husband, Carmona's mother, also addicted to alcohol, had "come home not with food but with a bottle of rum."

After an argument, Carmona took it upon himself to pour the contents of her brand new bottle down the sink. Outraged, his mom swatted him across the legs with a broom. Carmona said the lash — the only time his mother ever struck him — served solely to reinforce a harsh lesson he had already begun learning: "I started to understand then how this substance can assist in destroying a family. We made up and everything was fine, but I decided then that I wasn't going to do that."

If Carmona had squandered the rest of his life — ending up in the streets, in jail or worse — few would have been surprised. After all, not many high school dropouts from poor Latino families living in the Washington Heights part of Harlem go on to exemplary military service careers, graduate from college, ace medical school and find themselves as the nation's top doctor.

"The first time I met Dr. Carmona, I thought, 'Wow, what an energetic man,'" remarked NIH director Dr. Elias Zerhouni, who introduced Carmona at the Hispanic Heritage Month observance last Sept. 19. "The second
(See *Carmona*, p. 10)

The 'Right Dust' Zerhouni Plots NIH 'Roadmap for Action'

By Rich McManus

The worst job Dr. Elias Zerhouni ever had was before he entered medical school at the University of Algiers. He took a job with a construction laboratory, testing the strength and durability of concrete and steel bars for large construction projects. Project foremen had been complaining that batches of the company's concrete had been failing regularly, crumbling under heavy loads. Zerhouni set out to discover why.



Dr. Elias Zerhouni

He read books on how to make concrete. An engineer showed him how to analyze sand, rocks and cement. Zerhouni found that, of all the elements in the recipe for concrete, the most important is the fine dust that acts as a binding agent for the larger stones. Without the right volume and type of dust, the concrete lacks strength.

Zerhouni presented his findings to the company, which selected a new quarry for its sand dust and soon real-

(See *Zerhouni*, p. 11)

No One To Lose Job, But Work May Differ NIH Works To Apply A-76 Fairly

By Rich McManus

No less than the wisdom of Solomon is required of NIH officials who are obliged to comply with an old federal policy given new urgency by the Bush administration: namely, that the government should not compete with private industry for services that the private sector can provide. The challenge at NIH is that almost half the workforce of 18,000 people fall into occupational categories that are commercial in nature, not inherently governmental. In order to comply with OMB Circular A-76 and the FAIR (Federal Activities Inventory Reform) Act of 1998, NIH must review up to half of the total of its potentially commercial positions in the next few years, and "outsource" those jobs that the private sector can do in instances where the company can provide the

same goods or services that federal workers had been providing, at least a 10 percent savings to Uncle Sam.

(See *A-76*, p. 14)

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NIHAA Annual Meeting Scheduled for June 7

In 2003, the NIH Alumni Association will host two events. First, the annual meeting of the group will be held on Saturday, June 7, 10 a.m. to 1 p.m., at Bethesda United Methodist Church, 8300 Old Georgetown Rd. (corner of Huntington Parkway). Because of security regulations on the NIH campus, we are unable to use the Cloister.

The NIHAA board of directors in January selected Dr. Donald A.



Dr. D. A. Henderson

Henderson, to receive the group's 2003 Public Service Award. He started at CDC and is the founding director of the Center for Civilian Biodefense Strategies at the Johns Hopkins Bloomberg School of Public Health. He was dean of the school (1977-1990). Now he is distinguished service professor at Johns Hopkins University and director of research and development for the Office of Public Health Preparedness. Henderson is being recognized not only for his current

role in domestic efforts regarding bioterrorism/smallpox, but also his international effort with WIIO to eradicate smallpox worldwide.

The NIHAA board of directors has also selected Randy Schools, president of the R&W at NIH, for the group's NIH Service Award, also to be presented at the annual meeting. He was chosen because his tireless efforts have added immeasurably to life at NIH for employees, patients and their families. Invitations with program details will be sent to local members in May.



Randy Schools

Second, in fall 2003, the seventh James A. Shannon lecture will be offered. Details will be in the summer issue of *Update*.

In 1997, the NIHAA established a lecture series in honor of Dr. James A. Shannon, NIH director (1955-1968), to promote public discussion of issues affecting NIH's mission.

Mark your calendar

*Annual Meeting and
Awards Presentation*

*Saturday, June 7
10 a.m. - 1 p.m.*

*Bethesda United
Methodist Church*

*8300 Old Georgetown Rd.
Refreshments*

Update

The NIHAA Update is the newsletter of the NIH Alumni Association. The NIHAA office is at 9101 Old Georgetown Rd., Bethesda, MD 20814-1616, 301-530-0567; email address: nihalumni@yahoo.com; website: www.fnih.org/nihaa.html.

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.

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Kennedy Surveys Borderlands of Public, Private Knowledge at Sixth Shannon Lecture

By Rich McManus

Standing atop the dual promontories of editor-in-chief of *Science* magazine and president emeritus of Stanford University, Dr. Donald Kennedy surveyed both the positive and unintended negative consequences of exposing the frontiers of knowledge — formerly regarded as a public province — to private parceling in the sixth annual James A. Shannon Lecture on Nov. 20. He argued that the Bayh-Dole Act of 1980, enacted to stimulate the transference of the fruits of public research into marketable products, has had largely the same effect on the "knowledge commons" or intellectual frontier, that the Homestead Act of 1862 had on public lands of the American West, settled and made productive during the 19th century. Both acts reordered sensitive ecosystems which, viewed in retrospect, forfeited some integrity or at least some cultural coherence.

The Shannon Lecture always focuses on science's public policy implications, and Kennedy is well-positioned to comment; he is a former commissioner of the Food and Drug Administration and a former NIH grantee. Indeed he told one guest at a reception following his lecture that an NIH grant, won shortly after he earned a doctorate in biology, "saved my life."

"My first NIH grant had only four digits," he joked at the outset of his talk, titled, "A Second Post-War Revolution in Biomedicine." He said former NIH director Shannon and NIH "were symbols of hope for a generation of scientists." Following World War II, the United States made "a remarkable choice." It decided to divert its post-war economic might, including a huge investment in military research, into

biomedical research, much of it basic. "No other industrial democracy made a similar decision."

The idea was that publicly financed research would create a huge "knowledge infrastructure" out of which industry could choose nuggets for private investment. "This was a wise thing to do," said Kennedy. "It transformed a research enterprise that had been the province of a small elite into a vast public enterprise...an 'endless frontier.'" The "decanting" of research resources toward health from the military was postwar revolution number one.

He likened unexplored intellectual territory to the yet-unclaimed physical spaces of the American West in the 1800s. The intellectual frontier, or "knowledge commons," was for years "largely publicly owned and managed." But just as the Homestead Act, which offered essentially free use of lands, and eventually ownership, to settlers who could improve their lots, the Bayh-Dole Act has had the effect of "enclosing" the knowledge commons, said Kennedy. With Bayh-Dole, the government relinquished its right to patent claims on the inventions of its grantees. The goal was to spur "technology transfer" by enabling federally supported scientists to patent and license their discoveries.

"It worked, sort of," observed Kennedy. "Like mushrooms after heavy rains, technology transfer offices sprang up in academia." With the incentive of royalty income, scientists abandoned the purity of the Ivory Tower. "There was a proliferation of start-ups, many peopled by faculty who profited by Bayh-Dole," said Kennedy.

The transformation of science into a deliberately profit-oriented enterprise was pushed further along by tax law changes in the late 1970s that reduced

taxes on capital gains and offered more deductions on capitalization of research, Kennedy explained. A flood of venture capital ensued.

At Stanford University today, some 60 faculty are involved in more than 100 companies, he said. "The proportion of basic research done in the proprietary sector rose dramatically, due to powerful economic incentives...The research portfolio became as important as one's business plan." Landing a paper in as respected a journal as *Science* became not only academically, but also financially rewarding, even prospectively so: "Papers in *Science* came to have street value...Companies that were years away from having a product were valued by how their labs were perceived, how prestigious they were.

"Bayh-Dole is the Homestead Act of our time, along with accompanying statutory changes in the tax laws," said Kennedy. "Unclaimed spaces in the knowledge commons are filling in."

Benefits from this new enclosure are sundry, he allowed. "It's good to see papers in *Science* from company researchers rather than from MIT and Johns Hopkins," he noted wryly. He credits Dr. J. Craig Venter's hugely expensive private effort to map and sequence the human genome as another advantage of the new economic landscape (Venter is a former NIH scientist who took his ideas and ambitions to the private sector).

But there are costs, too, to Bayh-Dole, Kennedy warned. "There are serious problems for our venture that have fallen on scientists, institutions and journals," he said. "The erosion of easy communication among scientists, which used to be common, has been disappointing to me." Universities, whose technology licensing offices began with cautious guidelines, have become far more aggressive than ever anticipated, he said. Two years after Bayh-Dole passed, he related, the presidents of five research universities met to

hammer out "guidelines for the new universe." They established three major principles: agreements between universities and industry were to be public; licensing was to be nonexclusive whenever possible; and coinvestment on the part of investigators with universities was forbidden — "schools shouldn't go into business with their faculties." Nowadays, the latter situation is common, Kennedy said. "Of the three principles, only the first is still reasonably intact."

He warned of other dangers: graduate students coerced to work on behalf of faculty company projects, conflicts of interest (objectivity sacrificed to profit pressures), the invariable muddying of such issues as space, salary and promotion. "Scientific exchange, too, is hurt," Kennedy continued, by the proliferation of technology licensing offices. MTAs, or material transfer agreements, "are increasingly burdensome legal documents — most researchers would like to be free of them." He quoted Stanford's Nobel laureate Dr. Paul Berg: Bayh-Dole has engendered "onerous barriers to the free exchange" of ideas and materials.

Journal editorship, too, has become a tougher enterprise; Kennedy gently called the results of the new profit orientation "a little odd and unexpected." For example, *Science* requires authors to provide cell lines and reagents to other scientists. What happens when a third party acquires the materials with a view to commercializing them? What about a company researcher who refuses to publish if coerced to share materials?

Papers in the agricultural sciences are particularly affected by issues involving trade secrets vs. openness, Kennedy reported. A new requirement of some journals is a "conflict statement" in which authors disclose links to industry, he said.

"There is a new public suspicion about our enterprise," Kennedy continued. Universities used to enjoy a more

lofty status, and were seen as providing a valuable social function, he said.

"This preferred status is eroded at the edges when we're perceived to be in business — and to be rather good at it."

The major research universities earned the same deference as Big Oil when it came to tax lobbying on Capitol Hill in the late 1980s, he noted. Like multinational corporations, universities run the risk of encouraging student unrest as they are seen more as economic powerhouses than as solvers of the world's problems. "This might become the hardy perennial of student resentment," he said, citing protests about high-cost drugs discovered with public money.

"Universities pay a public-image price in their overeager response to Bayh-Dole."

Kennedy returned to the Homestead Act to find a remedy for the current dilemma. The act was very effective at the beginning, as settlers moved West, first to the corn belt and prairie grasses, then to the wheat belt and the range. In the ideal situation, yeoman farmers thrived. But the mountains brought more serious problems for settlers and few staked mountain claims, which were hard to lay out. Mining and railroad interests gained control of huge parcels, often without offering any improvements.

Late in the game, forests and parkland were ceded back to the government as privately unprofitable, which gave rise to a generous network of national parks.

Kennedy sees much the same sort of endgame playing out in Bayh-Dole, predicting continued border skirmishes and sectional hostility, and continued capture of public value by private interests.

He concluded by reminding the audience of the wisdom of an old English poem, once read on the floor of Congress: "The law will punish man or woman/ Who steals the goose from off the common./ But leaves the greater felon loose/ Who steals the common from the goose."

Calendar of Upcoming Exhibits and Events

Exhibits

National Library of Medicine

Continuing until **July 31, 2003** in the NLM Rotunda, "Dream Anatomy," an exhibit that features illustrations from NLM's collection of fantastic imaginations from 1500 to the present. Guided tours are available. For more information, call 301-496-5963, or email: educator@nlm.nih.gov

Another exhibit on "AIDS Ephemera," is on display in the glass cases near the front entrance of Bldg. 38, NLM. It continues through **May 27, 2003**.

DeWitt Stetten, Jr., Museum

For more information about the Stetten Museum exhibits, call the NIH Historical Office at 301-496-6610 or check out: www.nih.gov/od/museum.

Other Activities of Interest

Feb. 2003—April 2003 FAES Chamber Music Series

The Chamber Music Series, sponsored by FAES, Sundays at 4 p.m. has had to change its location. The concerts are now held at the Landon School's Mondzac Performing Arts Center. For more information and confirmation call 301-496-7976 or visit www.faes.org.

Feb. 23 — Wolfgang Holzmaier, baritone, Russell Ryan, piano

Mar. 2 — Winner Borciani Quartet competition

Mar. 23 — Trio Fontenay

NIH Events

The NIH Director's Wednesday Afternoon Lecture Series (WALS) is at 3 p.m. in Masur Auditorium, Bldg. 10. For more information, reasonable accommodation, and confirmation of the full schedule, call Hilda Madine, program director, at 301-594-5595 or check www1.od.nih.gov/wals/schedule.htm.

March 12 — Florence Mahoney

Lecture: Dr. Elizabeth Blackburn

Apr. 16 — Robert Gordon

Lecture: Dr. Jeremiah Stamler

May 7 — Margaret Pittman **Lecture:**

Dr. Pascale Cossart

June 11 — GM Cancer Research Laureates Lectures

June 18 — NIH Director's **Lecture:**

Dr. Eric Lander

CC Grand Rounds and Great Teachers

Contemporary Clinical Medicine: Great Teachers is given the second Wednesday from February to June at noon in Masur Auditorium, in conjunction with the NIH/FAES continuing medical education committee. For information call 301-435-7231 or email lagassei@od.nih.gov.

Frederick Event

On **Wednesday, May 14** and **Thursday May 15**, the **Seventh 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. This event is subject to cancellation because of security so please confirm 1-301-846-5382.

NIHAA Events

The **NIHAA Annual Meeting and Public Service Award** will be held on **Saturday, June 7**, at Bethesda United Methodist Church, 8300 Old Georgetown Rd., 10 a.m.-1 p.m. All members are invited. Invitations will be mailed in May (see article on p. 2).

Coming Up in the Fall

Research Festival 2003 is scheduled for the week of **Oct. 14-17**.

Share the Health, Saturday, Oct. 25, 2003.



At a small reception, following the Jan. 9, 2003, board meeting, NIHAA president Dr. Cyrus Creveling (l) presents to Dr. Ruth Kirschstein an etched crystal piece honoring her as the first recipient of the group's NIH Service Award for her significant and outstanding contributions to NIH.

For more information about NIH events call 301-496-1766. For more information about NIHAA events call 301-530-0567.

News From and About NIHAA Members

Dr. Ellsworth C. Alvord, Jr. wrote, "I will retire from the University of Washington School of Medicine where I have been professor of pathology and chief of neuropathology since 1960." Alvord, who was known as "Buster," was in neuropathology at NINDS (1953-1955), working under the late Drs. Milton Shy and Maitland Baldwin, when he began his long-time collaboration with the late Marian W. Kies, (biochemist at NIMH) on experimental allergic encephalomyelitis, still the most acceptable model of multiple sclerosis. After leaving NIH, he spent 5 years at Baylor Medical College as associate professor of neuropathology.

Dr. Norman Anderson, who was the first NIH associate director in charge of behavioral and social science, and the founding director of the NIH Office of Behavioral and Social Sciences Research (1995-2000), has left his position at Harvard University School of Public Health where he was professor of health and social behavior. In September 2002, he was named CEO of the American Psychological Association. APA president Dr. Philip G. Zimbardo said that Anderson was selected "for his renaissance qualities as an educator-scientist with clinical credentials and a public interest orientation. His enormous energy and expansive vision will increase the impact of psychology for decades to come." Anderson was also recently elected to the National Advisory Council of the NIDA.

Dr. Artrice V. Bader, who was a research and science administrator at NIH (1957-1990), and a member of NIHAA's board of directors (1998-present), was the subject of a recent article in the *Washington Post* detailing her success in starting an exercise program that focused on walking. The combination of walking, dieting and

strength building exercises enabled her to lose weight, bring down her blood pressure and lower her risks for diseases.

Bobbi Plocinik Bennett recently retired after 39 years at NIH. At her Dec. 3 retirement party she remarked that she "had one of the luckiest careers ever." She was one of the few two-way players in the science communications community because she spent 11 years in various laboratories and then became a science writer for the last 28 years. Bennett plans an active retirement that will include doing genealogical research, taking classes, and advocating better care for the elderly. An early supporter of NIHAA, she joined as an associate member in 1990.

Linda Rhodes Bray was at NIH from 1971 to 1988, finishing as chief of Special Events at the Clinical Center. Linda is now living in Virginia Beach and sell-

ing upscale condominiums on the Chesapeake Bay for Long & Foster Realtors. Last year she had over \$16 million in sales.

Dr. Robert Butler, director of the National Institute on Aging (1976-1982), is now president and CEO of the International Longevity Center, an affiliate of Mount Sinai School of Medicine. The center has recently published a booklet, "Is there an 'anti-aging' medicine?" to help readers become informed consumers. Please visit www.ilcusa.org for more information about the publication or call 1-800-424-3410.

Dr. Paul Carbone who died in February 2002 has been honored with the Paul Carbone Memorial Award for International Oncology. Carbone was associate director for medical oncology at NCI (1960-1976) and then went to the University of Wisconsin where he served as director of the school's Comprehensive Cancer Center.



On Oct. 18, 2002, Dr. Robert L. Berger served as Honorary Grand Marshall of the homecoming parade at the Pennsylvania State University, accompanied by his wife, Dr. Victoria Harden, the NIH historian. Berger, who retired from NIH in 1996, was chief, biophysical instrumentation section, Laboratory of Biophysical Chemistry, NHLBI. He has worked closely with Penn State to arrange co-op positions at NIH and Walter Reed Army Institute of Research for students in PSU's Eberly College of Science.

Dr. George Canellos, who was at NCI as a clinical associate (1963-1965), as a senior investigator (1967-1974), and acting clinical director (1974-1975) is now in Boston at Harvard Medical School and the Dana-Farber Cancer Center. He has been named the editor of the Classic Papers series published by the American Society of Clinical Oncology. The latest one is "Classic Papers and Current Comments: Highlights of Melanoma Research" (Vol. 7, Issue 3), which is on cutaneous melanoma. He is the former editor-in-chief of *Journal of Clinical Oncology*.

Dr. Vincent T. DeVita, Jr., former director of NCI (1980-1988), is professor of medicine and also epidemiology and public health at Yale University School of Medicine. He is also director of the Yale Cancer Center. Last September, he was elected to the European Academy of Sciences and Arts for his "outstanding and lasting contributions to cancer research and medical education."

Dr. Charles H. Evans, Jr., former chief of the tumor biology section, Laboratory of Biology at NCI (1975-1998) and senior advisor for biomedical and clinical research (1998-2002) in the Institute of Medicine at the National Academies (Science, Engineering, and Medicine), has been appointed professor of health sciences at Georgetown University. He also directs the science programs in the School of Nursing and Health Studies at Georgetown University Medical Center and teaches research design and communication, and concepts of disease.

Dr. Joseph Goldstein, 1985 Nobel laureate and at NHBLI (1968-1970), has been elected a trustee of the Howard Hughes Medical Institute. He will become one of 10 trustees of the institute. He has been on the HHMI medical advisory board since 1985 and was named

Dr. Donald S. Fredrickson, 1924-2002



Attending the Oct. 18 service in memory of the late Dr. Donald Fredrickson are (from l) NIH director Dr. Elias Zerhouni, Fredrickson's son Rurik, the director's wife Dr. Nadia Zerhouni and Fredrickson's widow Henriette.

The papers of former NIH director Dr. Donald S. Fredrickson have been added to Profiles in Science, a web site created by the National Library of Medicine that is dedicated to documenting the lives and works of prominent 20th century biomedical scientists.

Fredrickson discovered the relationship between cholesterol and heart disease, and headed NIH from 1975 to 1981.

Fredrickson, who died in June, was remembered as a scientist, statesman and humanitarian by colleagues at a memorial program in Natcher Auditorium on Oct. 18. The occasion was marked by the addition of his papers to NLM.

"Fredrickson's studies of the connection between lipids (fats and cholesterol) and heart disease made him one of the most widely cited physiologists of the 1960s and 1970s, and highlighted the benefits of a healthy diet," said NLM's Dr. Alexa McCray who heads the Profiles in Science project, located at www.profiles.nlm.nih.gov.

The online exhibit about Fredrickson features correspondence, diaries, unpublished manuscripts, published articles and editorials, photographs and audio recordings illustrating his life and career. Visitors to the site can view, for example, his childhood scrapbook, as well as extensive documentation relating to the regulation of genetic research and to government funding for biomedical research in a time of fiscal constraints. An introductory exhibit places Fredrickson's accomplishments in historical context.

chairman in 1995. He is chairman of the department of molecular genetics at the University of Texas Southwestern Medical School at Dallas.

Dr. Murray Goldstein, currently vice president of NIHAA, and director of the National Institute of Neurological Disorders and Stroke for the last 10 of his 40 years at NIH (1982-1993), is now medical director of the United Cerebral Palsy Research and Education Foundation in Washington, D.C. Recently he was appointed to the Advisory Council of NIH's National Center for Complementary and Alternative Medicine. The council provides recommendations on the conduct and support of complementary and alternative medicine research for the center.

Dr. John W. Hiemenz, who was at NCI as a clinical associate (1980-1983), was recently appointed professor of medicine at the Medical College of Georgia where he will serve as associate director of the bone marrow transplant program and director, infectious disease research program in the Cancer Center.

Dr. William B. Jordan, Jr., is a former director of NIAID's Microbiology and Infectious Diseases Program (1976-1987), and past president of NIHAA. At NIAID, he was involved in conceiving and supervising the publication of "The Jordan Report," which is an annual comprehensive update on the state of vaccine development. Jordan remains active on a voluntary basis at NIAID. The latest edition was just issued, *The Jordan Report 20th Anniversary* (www.niaid.nih.gov/dmid/vaccines/jordan20).

Dr. Charles H. McKown, Jr., diagnostic radiology fellow (1963-1967) is completing his 14th year as vice president of

health sciences and dean of the School of Medicine at the Joan C. Edwards School of Medicine at Marshall University in Huntington, West Virginia.

Dr. John Parascandola, U.S. Public Health Service historian, and former chief, History of Medicine Division, NLM (1983-1992), was recently awarded the first Sidney M. Edelstein Award for Outstanding Achievement in the History of Chemistry from the American Chemical Society. The award was presented at the group's annual meeting in Boston on Aug. 20, 2002, where he participated in a symposium in his honor on "The Retort and the Mortar: Chemistry's Impact on Pharmacy and Drug Development."

John W. Peters, who worked at NIH (1957-1980), in the Office Services Branch, communications section, OD, participated as he has done for many years in the program to commemorate the anniversary of Dec. 7. The program, sponsored by the Fleet Reserve Association, is held at the National Naval Medical Center in Bethesda. Peters is a Pearl Harbor survivor and was the only survivor attending the service. Peters spent 20 years in the U.S. Navy, retiring as a chief boatswain's mate in 1957. He joined NIH the same year.

Dr. Paul Peterson, who was a U.S. Public Health Service officer, and also at NIAID for many years, died Oct. 9, 2001. After he left government service, he was the founding dean of the school of public health at the University of Illinois at Chicago (1971-1977). In fall 2002, he was honored with a set of sculptures depicting the spirit of public health to commemorate his life of service; they were placed in the lobby of the new school of public health building. "The Paul Q. Peterson Reference Center" was also dedicated in his

honor in May 2002. His widow, Mildred Peterson, writes, "I've gone to Chicago twice to celebrate and memorialize Pete's contributions...It has been gratifying to watch the scholarship fund in Pete's name grow; and to meet the capable students who are benefiting from the scholarships."

Dr. John C. Ruckdeschel, a staff fellow and associate at NCI (1972-1975) and a visiting scientist (1983-1985), has been named director, president and chief executive officer of the Barbara Ann Karmanos Cancer Institute in Detroit, Mich. He will also serve as president of the Barbara Ann Karmanos Cancer Foundation, director of the Meyer L. Prentis Comprehensive Cancer Center; associate dean, cancer affairs at Wayne State University School of Medicine and director of WSU's Cancer Institute and president of the cancer hospital and senior vice president at the Detroit Medical Center. Previously he was director and chief executive officer of the H. Lee Moffitt Cancer Center and Research Institute at the University of South Florida in Tampa.

Dr. Richard Schilsky, who was 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 associate dean for clinical research in the biological science division at the University of Chicago. He was a member of NCI's board of scientific advisors. Last year, he was elected a board member of the American Society of Clinical Oncology. He is also chairman of the cancer and leukemia group.

Dr. Leon Smith, who was at NIAID as a staff fellow (1957-1959), is now chairman of medicine of Seton Hall postgraduate school and preventive

medicine at New Jersey Medical School. He received the 2002 Master-ship of the American College of Medicine and also received in October 2002 the Mentor Award from the Infectious Disease Society. He has mentored more students, residents and fellows than anyone else in Seton Hall history during his 40-plus years there. He has five children, four of whom are physicians. His son Stephen, who was also at NIAID, works with his father, and is chief of infectious disease at the Seton Hall fellowship program.

Dr. James Steele, who worked with Dr. Charles Armstrong on brucellosis and infectious disease (1945-1947), is professor emeritus at the University of Texas School of Public Health. Last year he was honored on the occasion of his 89th birthday with the Tenth Annual James H. Steele, D.V.M. Lecture.

Dr. Edward Trapido, who was in NCI's intramural epidemiology program as a staff fellow (1981-1984), has left his position as professor and vice chair of the department of epidemiology and public health at the University of Miami School of Medicine. He was also associate director for cancer prevention and control at the Sylvester Comprehensive Cancer Center and directed the M.P.H. and Ph.D. epidemiology teaching programs. He has returned to NCI, as associate director of the Epidemiology and Genetics Research Program, Division of Cancer Control and Population Sciences. He will oversee the development of the Cancer Family Registries, the Cancer Genetics Network and the new Cohort Consortium.

Dr. Gary Williams, who was at NCI (1969-1971), is now professor of pathology and director of environmental pathology and toxicology at New York Medical College. He has recently been

made a fellow of the College of Pathologists, U.K.

Dr. Kathryn C. Zoon, who was in the Laboratory of Chemical Biology, NIAMDD (1975-1980) as a postdoc and staff and senior fellow, is the director of FDA's Center for Biological Evaluation and Research, which this fall celebrated its 100th anniversary. She was in October elected to the Institute of Medicine. Recently it was announced that she will leave CBER to become principal deputy director at NCI's Center for Cancer Research in mid-January 2003.

What's Your News?

We want to hear from you. Please send your news with photo if possible to Harriet Greenwald, *NIHAA Update*, 9101 Old Georgetown Rd., Bethesda, MD 20814-1522 or email nihalumni@yahoo.com.

What's Your Email?

If you would like to send us your email address, please send it to the above email address.

NIHAA Wants YOU To Become a Volunteer

The NIH Alumni Association (NIHAA) sponsors a volunteer program. Many and varied opportunities exist not only at NIH, but also in this area. NIH alumni can make a difference. Our program targets retired or soon to be retired local NIH'ers. Retirees should think of themselves as people with a vast amount of experience in a variety of areas! Retirement is the "fun" part of life where retirees can choose activities they enjoy. Volunteering is a rewarding activity for both you and the people with whom you interact. Volunteering is giving back to the community.

The NIH Alumni Association has compiled a directory of volunteer opportunities. They may be viewed on our website at <http://www.fnih.org/nihaa.html>. You will find the volunteer information under Activities.

Some examples are: helping at the Children's Inn, working at the Clinical Center (as an interpreter), or educating children about mercury for the NIH Environmental Branch (training provided), working on an NIH/CC Reunion, participating in the NIH or NIHAA speakers bureau programs, or conducting visitor tours or helping foreign scientists. You can also become involved by helping the Montgomery County Public Schools in planning career days, science fairs and field trips. There are also many opportunities in Montgomery County such as volunteering to help with Meals on Wheels, the Montgomery Hospice, Montgomery Preservation group and also at the Jewish Council for the Aging. There are also volunteer programs at ReSet, the National Zoo, Smithsonian Museums, Kennedy Center, Wolf Trap, and Arena Stage.

As you can see there is a lot out there, but we would also like to know if you are already currently volunteering in the area, or if you know of any additional volunteer opportunities that should be on our web site. Please email: nihalumni@yahoo.com, cmchale@comcast.net or heydrick@fred.net with info.

There is also an online form that interested volunteers can complete. Please contact Maggie Heydrick (heydrick@fred.net) or call her at 1-301-663-6043.

Carmona, continued from p. 1

time I met him, I said, 'This guy is energizing!' The third time I saw him, I said to him, 'Can you give me some of your energy?' He has an amount of enthusiasm and commitment to his mission that is absolutely remarkable. He is a dynamic leader with a remarkable background. He has dedicated his life to serving his patients, community and country in ways that few can match."

Zerhouni and Carmona were announced as potential presidential appointees at the same time last spring and both navigated the congressional confirmation process together.

Carmona's story may sound like the American dream now, but it didn't start out that way. His father was the youngest of 27 children and his mother was the daughter of an alcoholic. The word poverty might have been used to define his neighborhood. No one in his family had ever completed higher education; in fact, finishing high school was not a priority in most of his community. The most many in his family could predict for him and his siblings was a life spent in a spare apartment doing an ordinary, but steady job.

Recalling how his uncle rapped him — physically as well as verbally, "Our people don't do that" — for turning down a job as an electrician in favor of attending college, Carmona said, "I learned another lesson: Culture is wonderful, but it also binds you."

Nevertheless, his mother — who Carmona describes as "a single mom before the term was coined" — had a dream to see one of her children graduate before she died, and she tried to instill in them an appreciation for learning. "Get an education, because an education will set you free," she would say. If she was concerned about his future, it was his grandmother who wanted him to remember his roots.

"My *abuelita* tried to perpetuate our

culture," Carmona explained. "She came to the country in her 60s and she would always tell me, 'I'm too old to learn English, you gotta talk to me in Spanish.' I didn't understand at the time the importance of the culture and how my grandmother wanted me to maintain that culture, through the food we ate, through the traditions that would be perpetuated, through the understanding of the importance that Latinos have had in our country — she used to talk to me about the explorers and my ancestors — and the important contributions they have made."

Despite what he had told his uncle, Carmona admitted that the thought of college was more frightening to him than



Dr. Richard Carmona

combat had been. "I was afraid of failure," said the former Special Forces medic who served in Viet Nam and was

awarded the Bronze Star, the Purple Heart and a combat service medal. "I knew there were a lot of smart people in college. But, as you all must know, without accepting some risk there usually isn't any progress, so I said, 'Okay, I'm going to give it a shot.'"

Carmona undertook higher education with a sense of purpose, vowing to give back to the community. "It was a commitment I made to myself that if I ever made it," he said, "I wouldn't forget where I came from. I always had this idea that I would go back and stamp out disease and famine and pestilence and save the world after I got my education. The Lord didn't see it that way for me, as far as going back to Harlem, but I did get the education. I put those tools to use in other places."

"This is absolutely the most phenomenal job I could have ever envisioned," he said, "but the enormity of the job, the responsibility...I feel every day as if the weight of the world rests on my shoulders, because at times the world hangs on your every word. I don't take that responsibility lightly. To be honest with you, it scares me. I get up every day thinking, 'How can I be sure I'm doing the best job I possibly can?'"

If his words indicate the keen sense of duty he feels, Carmona insists all leaders should feel that way about their jobs, and that all meaningful work is accompanied by a measure of obligation to past, present and future generations.

"I never used to talk about my story," he admitted, "but people encouraged me to, because it was a story of hope for those trying to find their way out. I recognized that it did provide a horizon for some young person to say, 'If he did it, I can do it.'"

Throughout his remarks, Carmona commented on the rapport he has established with Zerhouni, HHS Secretary Tommy Thompson and the President. Recently while at the White House, the surgeon general was privately marveling at the incredible circumstances he now finds himself in, frequently mingling with people he had only read about or seen on TV. He confided the substance of his musings to President Bush. "I said, 'You know, I still feel like a tourist.' And he said, 'Well, that's good. So do I. If you ever you lose that, I probably don't want you working for me anymore. That's the kind of people we need in our administration, [people] who see the gravity and enormity, the immense responsibility you have inherited in this position.' Carmona ended with, "I realize I have a finite amount of time to do the very best job I can, to leave a legacy of change that is positive, to leave this office with the President and the secretary saying, 'He was the right one for the job.'"

Zerhouni (continued from p. 1)

ized that the young employee's hypothesis had been correct. Concrete no longer broke under stress, and the company could avoid the costly process of demolishing substandard batches. But it took someone willing to dig deep, and deal with the fine particles to solve the problem.

These days (Aug. 2002), 4 months into his post as the 15th director of NIH, Zerhouni is again acquainting himself with the fine particles, this time of a \$27 billion agency. By immersing himself in the small parts of the institutes — by late August he had been to nearly half the 27 institutes and centers and impressed many IC directors with his quick grasp of their issues (see sidebar p.13), not to mention the many individuals he has surprised with his warmth — Zerhouni hopes eventually to mold a stronger, more enduring NIH.

"After being a [construction] consultant, I said 'That's a great job, but I think I like research better, in the lab,'" Zerhouni recalls. "That was before I decided to go to med school. I had wanted to be an engineer because I was good at math and physics...I worked [construction] for 6 months, and it was good money, but I didn't like the engineering aspect. I liked more the research aspect. My experience was to test, to test, to test and ask 'Why is it failing?' That's when someone said, 'You know, you should go into research — you seem to ask the questions rather than implement the solutions.' That's what convinced me to go into medicine, actually."

Business Before Pleasure

As the Labor Day holiday weekend approached, Zerhouni was not preparing to enjoy a few days of windsurfing or boating at his house fronting the Chesapeake Bay. Rather, he was planning for the NIH director's annual Lead-

ership Forum, a traditional exercise he embraced for its opportunity to identify priorities in conjunction with the IC directors, build consensus and "really go into depth" on the major issues confronting NIH. An unabashed lover of the water — he grew up on the Mediterranean Sea and spent hours of every summer day swimming and diving with friends (he can hold his breath for nearly 3 minutes, and is still able to dive to depths of 30 or 40 feet and linger for up to half a minute) — Zerhouni nonetheless put aside pleasure to focus again on leading NIH, an activity he says takes all of his time, postponing even the radiological research projects he hopes one day to pursue here.

"I think it's important initially, when you take on a new job, to focus 100 percent on the new job, build teams, have appropriate interactions with the IC directors and all of the management team, set up some operating principles, and become also a spokesman for NIH, across many constituencies," he said. "That requires 100 percent commitment and focus."

The forum, he said, would enable him to define a "roadmap for action" that he had been thinking about for the previous three months, and which would cover the next 3-5 years of NIH's future. Focus groups composed of both intramural and extramural scientists helped set an agenda that was to include such topics as: access to research resources, databanks, bioinformatics, molecular libraries, clinical research networks — "a whole slew of issues that seem to be multidisciplinary, requiring teamwork. How do we encourage that, and more importantly, what new areas of science do we need to focus on that have a lot of promise to them, but may need NIH encouragement? Systems biology is one, biological engineering, mathematics of model systems — those are the issues...My

philosophy is that every institution and its people have a certain amount of energy, and you don't want to diffuse it — try to be all things to all people — but try to focus it strategically on the things that will make the most difference."

Zerhouni said the briefings he has been getting at his fact-gathering visits to the ICs have been an inspiration as he learns the ropes at NIH. "It's been terrific, actually. I have to say that the quality of the presentations, the discussions, the people — it's just outstanding," he said. "I'm very pleased to walk around and meet people, and get a sense of the challenges and the opportunities for the institution."

Changes in OD and Recruitment

With respect to the Office of the Director, Zerhouni said he's mulling some eventual changes. "I'm really thinking through that," he said. "At this point I have not made up my mind yet... Change for the sake of change is not something that I encourage. I want to identify what are the right things to do." He envisions an OD that works more closely with the ICs, communicates more effectively with the outside world, and that adopts a decision-making process that is more cogent and less taxing on staff.

Of several vacancies at the top of some institutes, he said, "One of the most, if not the most important jobs of a director is to recruit the best and brightest as heads of institutes and centers. I consider that probably my highest priority...It is not good to leave institutes without permanent leadership for too long a time...I think we'll be making some announcements pretty soon. I'm very pleased by our ability to attract some outstanding candidates to the NIH. It's taking me some personal effort and many, many phone calls, but I think that's what you need — you need to create a sense of excite-

ment and positive energy so that the best people out there will consider a leadership position at NIH. After all, being an IC director is an outstanding opportunity for someone who would want to make an impact on science.”

Town Meeting Series Planned

To improve morale on campus, Zerhouni proposed a series of “town hall” meetings, the first of which was held on Friday, Oct. 4. “For an organization as large as NIH, town meetings need to be regular events,” he said, “where the leadership of the institution communicates with the members of NIH and the community at large. It’s a chance to share challenges and opportunities, have questions asked. I am very much in favor of an open and interactive style of management. Good communications helps morale, helps everyone continue their outstanding commitment to the NIH. I’m impressed with the culture here of dedication to the NIH mission by

everyone...I believe the NIH director should not be a remote figure. After all, transparency in who you are, what you do and where you intend to go is very important not only for morale, but for effectiveness of the organization. So I intend to communicate, communicate, communicate.”

Addressing NIH relations with its parent Department of Health and Human Services, Zerhouni said that, particularly after a period of growth, it’s important to “harmonize interactions between various functions...So far we’ve had a very open dialogue in areas of public affairs and legislative affairs... Departmental and government-wide activities need to be coordinated, but there are activities that are NIH-specific that need to be preserved at NIH, and they will be preserved. You need the proper balance between centralization and decentralization.”

To achieve a so-called “soft landing” after the doubling of the NIH budget

during the past 5 years, Zerhouni said he would advocate as strongly as he could to defend the value of continued investment in biomedical research. “The opportunities in science have never been greater. My job is going to be to make that point.”

Zerhouni is concerned that “public recognition of the agency is not as high as one would think. And yet, all of the major advances in health care, and in discovery, over the past 30 years have come from NIH.” He wants to promote NIH as being in the vanguard in health care and research progress.

An Appetite for Fun

Turning to his hobbies, the director avidly described a lifelong love affair with the water. “I started diving when I was probably 3 years old...I grew up by the water. I spent probably 5 or 6 hours per day in the water when I was a kid. From age 12 to 19, I was a competitive swimmer. From 10 o’clock in the morning I was in the water til 3 in the afternoon — like the kid who was swimming with Flipper (the dolphin star of a 1960s TV show) all the time. I was also spearfishing — that was my hobby. Then when I grew up and had a little more means, I began recreational scuba diving, not wreck-diving or deep-diving. I trained all my kids to scuba dive, too...My daughter, she’s the best of the group.”

He spent an August vacation simply enjoying the pleasures of a waterfront home. “I love crabs,” he said. “My wife hates them, but I love ‘em, so I take her share.” Playing music on the lute is probably his second favorite pastime, he said, chiefly Spanish and Moorish tunes “from where I grew up.” Of his home country, he said he rarely returns to Algeria “because it is very troubled — maybe once every 2 or 3 years I’ll have a trip.”

‘Communicate, Communicate, Communicate’

Whether or not Dr. Elias Zerhouni knew he was mimicking Joseph Pulitzer’s journalistic admonition, “Accuracy, accuracy, accuracy,” or perhaps real estate’s maxim, “Location, location, location,” he nonetheless offered his own advocacy — in memorable triplicate — for communications.



“The best scientists are great communicators,” he said. “I have not known a great scientist who was not a great communicator...When you have to compete for your grants and your programs, you have to be a very good communicator because you need to convince people, I really believe that the best science is served by the best communication. To not communicate as a scientist means that maybe you don’t know or understand your science well enough to communicate it well. What you understand well can be communicated well. It’s a matter of not just discipline but obligation to the public for scientists to communicate both the excitement of science, the prospects of science and the accomplishments of science. This belief in communication is something I’ve had all along.”

Before the interview began, Zerhouni posed for NIH photographers on the lawn of Bldg. 1; these would be the official photos of the NIH director. The director's aides had been worried about the photographers' plans to have Zerhouni stand atop a picnic table, in order to get the best angle of him with Bldg. 1 in the background. What if he fell and got hurt? Would he look ridiculous? Discounting their concerns, Zerhouni simply said, "Let's do it," mounted the table without

pause, and posed — chin up, chin down, somber and grave, jovial and amused, arms crossed, arms at his side — whatever the photographers asked of him. Game to do whatever he needed to in order to get the job done, even if it kicked up a little dust.



Zerhouni poses for one of his new official portraits on the lawn of Bldg. 1.

'How's the New Director Doing?'

At the end of a half-hour interview with the *Record*, NIH director Dr. Elias Zerhouni proposed something unorthodox: "Maybe the thing you should do is talk to other people about what they have seen of me over the past three months...I think it's more interesting than me speaking...After all, how much can you get out of a 30-minute interview? Maybe you want to ask the IC directors and some people around here, 'How's the new director doing?'"

"It is impressive to see how quickly Dr. Zerhouni has become knowledgeable regarding the quality and loyalty of the NIH senior staff," observed Dr. Yvonne Maddox, deputy director of NICHD and recently acting NIH deputy director as well. "In doing so, he has re-instilled a tremendous amount of confidence among staff. He seeks their counsel, gives them significant responsibility and lets them get their jobs done."

Said Dr. Michael Gottesman, NIH deputy director for intramural research, "Dr. Zerhouni has been a very quick study, absorbing huge amounts of NIH lore and policy and adeptly adding his own, unique perspective. He has impressed everyone by his grasp of both basic science and clinical research, and his goal is to maximize the return on the public's investment in the NIH. He understands the important contributions made by the NIH intramural program and has encouraged intramural scientists to take full advantage of the opportunities afforded by the resources in the intramural program. He favors facts over opinions, and all of his decisions so far have been data-driven. All in all, an outstanding beginning."

"In my opinion, Dr. Zerhouni is doing an excellent job as the new NIH director," said NIDCD director Dr. James Battey, whom Zerhouni has tapped to lead a new NIH task force on embryonic stem cell research and related issues. "He has taken the time to listen closely to his colleagues at NIH about research opportunities, and has actively sought input from the research community. Based on this broadly-based input, I am confident he will chart a course for NIH that will capitalize on the many opportunities and compelling needs of the biomedical research community."

"Dr. Zerhouni has rapidly proven himself to be a knowledgeable and highly capable leader," noted Dr. Francis Collins, director of NHGRI. "His command of basic and clinical biomedical research is impressive, and he has a real vision for the future of NIH. Furthermore, he has already demonstrated remarkable skills in organizational leadership. We are fortunate indeed to have such an inspiring and dynamic new director."

Adds NIAID director Dr. Anthony Fauci, "I have been very favorably impressed with Dr. Zerhouni, both as a person and as a talented scientist/administrator. He has quickly grasped the complexities of the job, has shown leadership, insight, energy and conviction, and importantly, he is a very enjoyable person to work with."

Concluded Charles Leasure, Jr., NIH deputy director for management and chief financial officer, "He appears to be the perfect person for the times — an outstanding scientist and physician who recognizes the need to apply the latest management theories and techniques to make the best use of the resources given to us by the taxpayers as NIH tries to prioritize future research efforts."

A-76 (continued from p. 1)

Charles E. "Chick" Leasure Jr., who is NIH deputy director for management and chief financial officer, is at the top of a major effort on the part of executive officers and other officials from all institutes and centers to review commercial activities throughout NIH and provide a fair comparison — "apples to apples" — of functions currently done inhouse that could conceivably be done more cheaply and just as well or better by the private sector.

This can be fearful news to the half of us who do work that is also done outside government. But Leasure has an armload of assurances for frightened federal workers: "First of all, the Secretary (of HHS) has said that everyone (currently federally employed) will have a job, whether contracted out or not. Second, just because jobs are studied does not mean that they will be contracted out — we have to await the outcome of the study. If it turns out to be in the best interests of NIH, we'll pursue contracting."

The A-76 process began, conceptually, during the Eisenhower administration, explains Tom Fitzpatrick, who directs the commercial activities review team (CART) at NIH. It became policy, however, in 1965, when the Office of Management and Budget published its circular directing all agencies to assure that Uncle Sam wasn't taking jobs away from private industry. Successive administrations have put more and less emphasis on the policy, but President Bush has elevated competitive sourcing to one of the top five items on his President's Management Agenda (along with e-government, human capital management, budget and program integration), said Leasure. "This raises A-76 to another level."

NIH began responding to the initiative in fiscal year 2001, when it was directed to review 5 percent of its potentially commercial functions, or some 465 positions.

Targets for FY 03 and 04 are 10 percent of the commercial total, or about 930 positions for each of those years. The review doesn't end until NIH has examined some 4,650 positions, or half the estimated 9,300 jobs that could potentially be outsourced.

Many jobs at NIH are already outsourced: "There are well over 3,000 contractors on the Bethesda campus every day," said Leasure, "and that doesn't include all of the construction workers." But NIH doesn't get credit for those in the current A-76 review, he cautioned; "We have to study today's workforce."

Certain jobs at NIH, Leasure explained, have almost always been done by contractors — the people who cut the grass, run the cafeteria, and guard the campus as hired security. "We know there are functions at NIH that can, and should be, performed by contractors," he continued. "The challenge now is to find, 'What else?'"

Protected positions — those deemed "inherently governmental" — include setting program direction and obligating funds. Patient care, too, is protected, as is direct intramural research. But that leaves seven broad functional areas ripe for review: information technology, personnel, general administrative, facilities and installation services, R&D, grants and finance. The process of review is time-consuming and sometimes repetitive.

The OMB tools used by reviewers were originally developed by the Department of Defense, observes CART's Fitzpatrick, and have had to be modified to apply accurately to civilian positions. The A-76 review process itself is undergoing modification, he said, which will determine how extensive the examination of each position must be (see sidebar p. 15).

Leasure acknowledges that it can be unnerving to learn that one's job is under review as a potentially commercial activity. "It's a complex deal, and hard

for employees to understand," he said. "People want me to estimate what percentage of (NIH jobs) will be contracted out, and I can't answer. There's no historical precedent to go by.

"It's easy for me to understand why employees are concerned," he continued. "They may be retrained, moved or end up working for a contractor. Obviously these things can be unsettling to people. But I can't assure them until the studies are complete." Thus far, the printing function at ORS has been studied, soon to be followed by animal care, grants technical assistants, and the fire department; a recent all-hands email from Leasure details functions to be reviewed in FY 03 and 04.

Leasure sees an upside to a policy that forces the government to examine whether it is running a fiscally tight operation, but admits it means walking a knife-edge: "We shouldn't be wasting taxpayer money, but we also don't want to destroy the commitment and quality of work done by federal employees," he said. "(A-76) seems to me not totally a bad thing. It combines the best interests of NIH and the taxpayers. We can concentrate on the things that we do well. It forces us to get our own house in order, which is a side benefit of this exercise." He envisions potential savings as workers are retrained in areas where there is more demand for a particular skill.

Leasure chairs the steering committee in charge of A-76/FAIR at NIH, which is composed of representatives of the institutes and centers in areas such as EEO, personnel, information technology and contracts. Their goal is to apply consistency of criteria and methodology in all reviews. They have hired a private firm — Warden Associates — with expertise in this field.

Leasure is aware that many NIH employees perform multiple duties, and are not easily categorizable. "Most of

us perform several functions, for example secretary and timekeeper. That person might also do some editorial assistant work, and maybe some travel and procurement. It's a very difficult process to determine how to fairly assign a job category, and to be as fair and judicious as possible.

"What we're trying to get is the best bang for the buck — that's the common theme for both the government and private industry," Leasure summed up.

"In an ideal situation, everybody wins."

He knows there are fears out in the workforce "that highly paid people who are at no risk personally are making decisions for people in some smoky back room," but insists he is only working toward goals elucidated by NIH director Dr. Elias Zerhouni; that in all dealings, NIH be transparent, proactive and accountable.

He laments, "I can't guarantee anybody anything. But I do assure you that we are not keeping any secrets. I feel kind of like (Montgomery County Police) Chief Moose (who oversaw the recent sniper investigation) — I need to reassure NIH'ers that we are looking out for what's best for them. I know it's a tension-raising, emotional business. That's why it's critical that we do it right the first time...If we're good at what we do, we can benefit everyone. It won't be easy, but I think it can be done."

He repeats one of his management mantras: "Fair does not mean equal... At NIH, people don't fit into neat pigeon-holes very well."

NIH expects to open an outplacement office, he said, for those who want to seek employment elsewhere, under the auspices of the Office of Human Resources. Leasure also foresees offers of early or optional retirement.

But buyouts are not currently an option. Follow developments in the A-76/FAIR Act story as they unfold at <http://A-76.nih.gov>.

Sparing Employees Pain, Uncertainty

There are agencies within the federal government where compliance with the mandates of OMB Circular A-76 and the FAIR Act of 1998 are given rather less attention than NIH is devoting, especially when it comes to the concern for its employees, said Tom Fitzpatrick, a veteran of several federal agencies — most recently GSA — who has joined NIH to direct the commercial activities review team, a key player in the A-76 role. Along with his boss, Tim Wheelles, who directs the Division of Management Support, he is responsible for assuring that, when a comparison is done between what federal workers do and produce vs. what a contractor can offer, the terms of the equation are virtually identical. That is, that apples are compared with apples, and oranges with oranges.

There is lots of nit and grit when it comes to this subject, and these two are elbow-deep in it. Fortunately for NIH'ers, they are also dedicated to a fair and open approach. Says Fitzpatrick, "We try to help federal employees to win (retain their status as federal employees) by giving them every opportunity to win. We have the welfare of the NIH community in the forefront of our minds."

A-76 is a process governed by rules originally developed for the military. It initially included some 900 "function codes" used to place worker bees into distinct categories. But those have since been fine-tuned, to add flexibility. FAIR, on the other hand, is an inventory that must be undertaken annually by every federal agency to determine what activities are commercial and which are inherently governmental; it tells the private sector where opportunities to compete with government can be found. Both activities are mandatory requirements for federal agencies.

"The FAIR Act means you have to say which employees are doing what, and what the actual numbers are," said Wheelles. "A-76 compares functions; (FAIR Act accounting and A-76 accounting) don't necessarily match up one-for-one."

The managers know they must overcome a bias — "that everything done at NIH is inherently governmental" (and that some supervisors will inevitably try to "hide" employees from scrutiny). They also know that blue-collar jobs are typically commercial, whereas white-collar posts are more vague, which can lead some groups to feel targeted. Fitzpatrick jokingly refers to the "Yellow Pages test: If you can find (a job description) there, it can be contracted out." Along with the executive officers at NIH, they are committed to a "corporate approach, so that both the benefits and pains are shared across NIH."

When a job is under review, different cost comparison methods can be used. The most strict is a "full generic review," which is very involved and can take from 2 to 3 years. A "streamlined review" takes only 3-4 months, and is used for study sizes of 65 or fewer FTEs. An "expedited review," which is an NIH invention, can be completed in 2 months, and is also for groups of 65 or fewer.

What happens when "challenger" faces "incumbent?" The incumbent's strength lies in two areas: its MEO (most efficient organization, in other words, a self-description of a group's leanest, meanest version of itself), which in turn depends on a well-written and comprehensive performance work statement (also known as an SOW, or statement of work). It says to private industry, "Match this."

(See A-76 sidebar, p. 27)

NIGMS Celebrates 40 Years of Discovery, Progress

By Alisa Zapp Machalek

The year is 1962. John Glenn, Jr., becomes the first American to orbit the Earth, Sam Walton opens the first Wal-Mart, a first-class stamp costs 4 cents, and — most relevant here — NIGMS is created.

Established by Congress to support research and training in the “general or basic medical sciences,” NIGMS has a strong record of supporting scientists at the forefront of their fields. In its 40-year history, more than 50 of its grantees have won Nobel prizes for their groundbreaking research.

Today, NIGMS has one of the largest budgets at NIH, coming in at more than \$1.7 billion. The institute — which is almost entirely extramural — funds more than 4,000 research grants to universities, medical schools, hospitals and other research institutions. Its broad interests lie in areas such as cell, molecular, developmental and computational biology; genetics; chemistry; and pharmacology. Basic studies in these and other areas covered by NIGMS increase our understanding of life processes and lay the foundation for advances in disease diagnosis, treatment and prevention.

As part of its 40th anniversary celebration, NIGMS selected 40 topics that reflect its interests and accomplishments. Brief descriptions and illustrations of these topics are at <http://www.nigms.nih.gov/anniversary/discovery/>.

The institute has a longstanding commitment to increasing the number and competitiveness of minority biomedical and behavioral scientists. Through its Minority Opportunities in Research (MORE) Division, NIGMS has helped thousands of minority students pursue

degrees in science and has enhanced research and training at minority-serving institutions throughout the country. Adding to the air of celebration at NIGMS, both of MORE’s branches — Minority Access to Research Careers and Minority Biomedical Research Support — commemorated their 30th anniversaries in 2002.

Championing Basic Research

Many NIGMS-supported scientists dedicate their careers to detailed studies of the individual molecules — proteins, nucleic acids, carbohydrates and lipids — that form living systems. This research steadily improves our understanding of how these molecules function in healthy cells and how faulty molecules can cause disease.

NIGMS grantees working in the field of genetics identified key regulators of the cell cycle. Others discovered restriction enzymes, which launched the field of recombinant DNA technology.

Two NIGMS efforts in genetics have spun off to other NIH components. NIGMS’ early investment in genome sequencing spawned an initiative that grew into the National Human Genome Research In-

stitute. The GenBank database, which NIGMS established in 1982 to meet the critical need for a central storehouse of genetic sequence information, is now managed by the National Center for Biotechnology Information. The database contains more than 20 billion nucleotide bases from over 100,000 organisms, including the nearly completed human genome.

An exciting new area of exploration is RNA interference, which was first described in 1998 by an NIGMS grantee. This natural process, in which small pieces of double-stranded RNA “turn off” individual genes, has tremendous potential as a research tool and as a possible therapeutic approach. For example, RNA interference has recently been harnessed *in vitro* to block infections by HIV and poliovirus.

True to its commitment to basic studies that are not targeted to specific diseases, NIGMS supports the bulk of NIH-funded chemistry research. Chemists supported by the institute have made seminal discoveries in many areas, including catalytic RNA, organic synthesis and chiral reactions.

Another area within NIGMS’ broad mission is research on burns and other forms of trauma. Every year, more than 1 million Americans suffer serious burn injuries. One of the most significant NIGMS-sponsored advances in this area is the development of an “artificial skin” that promotes the healing of burns. This product, along with other NIGMS-supported discoveries on the body’s response to burn and trauma injury, has dramatically increased survival and recovery.

Training Tomorrow’s Scientists

Since its inception, NIGMS has been dedicated to teaching students how to become independent researchers.

Nearly half of all NIH predoctoral trainees, and a large portion of



postdoctoral trainees, receive their support from NIGMS.

Recognizing that the most significant biomedical investigations often involve and affect several different fields, the institute designed its training programs to cut across disciplinary and departmental lines. In addition, NIGMS has several programs that address areas of critical scientific need. One of these, the Medical Scientist Training Program, leads to a combined M.D.-Ph.D. degree and prepares scientists to bridge the gap between basic and clinical research. Other programs train scientists to conduct research in the rapidly growing field of biotechnology and at the interface between chemistry and biology. The institute also sponsors a Pharmacology Research Associate Program — its only intramural activity — that trains postdoctoral scientists in pharmacology in NIH and FDA laboratories and clinics.

Forging Paths into New Areas

In the late 1990s, NIGMS held meetings with leaders of the scientific community to get their advice and vision on new directions in science and the needs of researchers. A common theme emerged: Solving many of the most complex — and interesting — questions in biology requires interdisciplinary cooperation and multi-faceted approaches. In response, NIGMS established collaborative and integrative grants (better known as “glue” grants) to bring together large groups of scientists from diverse fields to help tackle these complicated research problems.

The institute currently supports glue grants to investigate cell communication (including the roles of G proteins and carbohydrates), cell movement and inflammation. (NIAID and NCI also co-fund the G protein grant.) For the first 4 years of the initiative, which began in

2000, NIGMS plans to invest more than \$100 million.

Another area that benefits from NIGMS’ emphasis on collaboration is pharmacogenetics, the study of how genes affect the way people respond to medicines. Already, more than a dozen NIGMS-sponsored research teams have begun unraveling why the same dose of a drug can help some people, have no effect on others and harm a few. This knowledge can allow physicians to tailor the doses of certain medications and save lives.

In 2000, NIGMS spearheaded a trans-NIH initiative in pharmacogenetics. It now commits more than \$10 million each year to the effort. At the heart of the program is a shared online resource called PharmGKB, where participating researchers deposit their data. This knowledge base, which does not identify study participants, is accessible to scientists worldwide.

The institute recognizes that vast scientific treasures are hidden within the burgeoning masses of genome sequence and other biological data. To mine these will require quantitative tools and approaches. Beginning in 1998, NIGMS created a set of initiatives to encourage mathematicians, physicists, computer scientists and engineers to apply their expertise to biomedical research. In 2001, to serve as the focal point for such activities, NIGMS created its newest component, the Center for Bioinformatics and Computational Biology.

NIGMS has also capitalized on advances in genome sequencing through its Protein Structure Initiative. Launched in 2000, this project builds on the institute’s significant investment in structural biology. The goal is to solve the structures of 10,000 genetically unique proteins in 10 years, enabling scientists to produce an inventory of all the shapes that proteins can take in nature. This, in turn, will

help make it possible to predict the structure of any protein based on its sequence. The institute expects to commit at least \$220 million to the project for its initial, 5-year pilot phase.

To further advance the field of molecular structure determination, NIGMS funds the cutting-edge equipment and facilities necessary for these studies. In recent years, the institute has supported construction of the most powerful NMR magnets available (900 MHz) and, together with NCI, it is funding the design and construction of three beamlines at Argonne National Laboratory’s Advanced Photon Source, the newest and most advanced synchrotron in the country.

A Bright Future

“The most important biomedical questions today — how genes are regulated, how cells and organisms develop and function and what causes cellular processes to go awry — have not changed much in the last four decades,” says Dr. Judith H. Greenberg, acting director of NIGMS. “But the level of detail at which we can answer these questions has changed dramatically. This progress not only helps us understand the biological basis of life, it has also been translated into new approaches to treating and preventing diseases.”

For 40 years, NIGMS has been at the leading edge of supporting this progress. As it continues to champion basic research, to train future scientists and to forge paths into new areas, its future promises to hold even more exciting and significant advances.

You will receive a 2003-2004 renewal notice this spring. **PLEASE** pay promptly. Dues are an important source of our income, and we need your support.

Another Kind of NIH Centennial

By Victoria A. Harden

In 1987, the NIH observed the centennial of its founding as a one-room laboratory, but last year, 2002, marked another important anniversary: the creation of an organized research program.

When young Joseph J. Kinyoun was asked to set up a “laboratory of hygiene” at the Staten Island Marine Hospital in 1887, the United States was embarking on an experiment to see if the new science of bacteriology would really be helpful to the medical officers in the Marine Hospital Service. Within a decade, the U.S. Congress had found the laboratory to be extraordinarily useful. Kinyoun, however, was relieved of duty as director in 1899. The reason remains a mystery, as no explanatory documents survive. Kinyoun was not a “scientist’s scientist,” however, and the Surgeon General, Walter Wyman, who appointed the Hygienic Laboratory’s director at that time, may have wanted a director more skilled in laboratory practices.

The person named as second director was Milton J. Rosenau. Thirty years



Dr. Milton J. Rosenau

old when he assumed leadership, this young physician stressed the need for an organized program of scientific research in his first *Annual Report* in

1900. He recommended, for example, a longer period of study for fewer officers in the bacteriological course. He also requested the outfitting of two portable laboratories in order to do

good laboratory work at the site of epidemics, and he launched publication of the *Hygienic Laboratory Bulletin*. The first bulletin dealt with studies on bubonic plague, newly arrived from Asia on the west coast of the United States.

In 1902, Congress enacted a law that, among other items, reorganized the Hygienic Laboratory into four divisions, adding the cutting edge scientific disciplines of that time — zoology, pharmacology and chemistry — to the original work on infectious diseases, which was placed in a division called “bacteriology and pathology.” With the addition of the new areas, it became evident scientists who had more specialized training — a Ph.D. instead of an M.D. — would also be needed in the research program. An advisory board of non-federal scientists was established for the Laboratory, and the first members included the leaders of medical research at that time.

The previous year, the Congress had allocated \$35,000 for a separate building for the Laboratory, and as the new director, Rosenau oversaw every detail of the construction. He designated that the building contain a scientific library large enough to hold 10,000 volumes. Workrooms were large with high ceilings and generous light. The area should also contain “an incubator and a cool chamber.”

How productive was the new research program in its early years?

In the area of infectious diseases, cholera, typhoid fever, bubonic plague, smallpox, yellow fever, Rocky Mountain spotted fever were all investigated. In 1908, George McCoy — later a director of the Laboratory — discovered a new bacterium, which he named *Bacterium tularense* after Tulare County, California, where he first identified it as the cause of a “plague-like disease of rodents.” In 1911, one of his col-

leagues, Edward Francis, picked up McCoy’s work and subsequently demonstrated that the bacterium also caused a disease in humans, tularemia. The causative microorganism was later renamed for Francis and is now known as *Francisella tularensis*. Today the NIH continues to conduct research on it because of its threatened use as a bioterror agent.

In August 1902, Charles Wardell Stiles became the first director of one of the newly created divisions, zoology. He came to the post from the Bureau of Animal Industry in the Department of Agriculture, where three months earlier he had described a new species of hookworm, *Necator americanus* (Stiles), known to cause disease in humans. He also prepared an *Index Catalog of Medical and Veterinary Zoology*, a monumental reference work published by the Hygienic Laboratory.

The first chief of the Division of Chemistry was Joseph Hoeing Kastle. Trained at the Johns Hopkins University, Kastle was representative of the chemists at that time who were adopting the then-new methods of biochemistry. He published two *Hygienic Laboratory Bulletins* on the oxidases. He also worked on a chemical method to identify and estimate the amount of hydrochloric acid in the stomach and worked on the development of a “hemoglobinometer” for measuring the amount of hemoglobin in the blood.

Reid Hunt, another Hopkins-trained scientist, was named the first chief of the Division of Pharmacology. In 1903 and 1904, while his new laboratory at the Hygienic Laboratory was being prepared, Hunt worked in Germany with the distinguished chemist Paul Ehrlich. Hunt’s major interest was the powerful biological action of acetylcholine on blood pressure. He was also interested in the effects of alcohol and in 1902 alerted the American medical profession to the toxicity of methyl alcohol.

Exit SunTrust, Enter NIHFCU Bldg. 10 Loses Commercial Bank, Credit Union Takes Space

By Rich McManus

After 52 years of hosting a commercial bank, the NIH campus lost its lone banking company, SunTrust, when the branch on the B1 level of Bldg. 10 closed permanently on Nov. 27.

The space occupied by the bank, just outside the B1 level cafeteria, will be reopened as a branch of the NIH Federal Credit Union, which is expanding its range of services to meet the needs of the private bank's clients, chiefly patients, visitors and employees.

SunTrust had been on campus for 4 years, according to K. Mark Steigerwalt, assistant vice president/NIH branch, but before that was called Crestar Bank, and before that, the Bank of Bethesda. The bank's customers were primarily patients and visitors, many of whom took advantage of its services over the years, said Steigerwalt. "I have loved working here," he said. "It's been a real treat."

He notified NIH customers in a letter dated Aug. 27 that the bank was set to close at 3 p.m. on Nov. 27. Staffing at the bank, once at seven employees, had dropped to four by mid-September. All of the SunTrust employees were told they would be relocated within the company.

According to Lindsay Alexander, chief executive officer of the NIH Federal Credit Union, "the NIHFCU is very excited about the opportunity to provide more convenient member services to the Clinical Center employees." In addition, we'll be able to handle foreign currencies, patient accounts and NIH cashier accounts," she said. "We'll offer basically all of the services that SunTrust offers."

For the moment, the credit union can-

not handle business accounts, including commercial checking and business loans, she explained, "but we will be able to do those things in the near future."

Alexander predicted that customers of her new branch "won't see much difference" between the credit union and what SunTrust offered.

"Most of the people who bank there are probably eligible to be credit union members anyway," she said.

SunTrust's decision to leave NIH was the result of several factors. With two other SunTrust branches close by (at Wildwood and in Bethesda), and a big increase in phone and Internet banking, the bank decided to close the NIH branch.

The Bank of Bethesda's original campus branch opened Apr. 10, 1950, on the third floor of Bldg. 1. Its first depositor was Mrs. Luke I. Wilson, who with her husband donated, in five segments, their 92-acre Bethesda estate to NIH. Hours then were from 9 a.m. to 2 p.m., hence the term "banker's hours."

According to the Apr. 24, 1950, *NIH Record*, the bank was allowed to open on campus by special permission: "The Treasury Department authorized the permanent banking facility because of the growing importance of NIH and as a service to the large number of NIH employees..."

It isn't clear just when the Bank of Bethesda migrated from Bldg. 1 to the Clinical Center basement, but by March



Mrs. Luke I. Wilson, joined Mr. S. Walter Bogley (l), president of the Bank of Bethesda, Dr. Norman Topping, NIH associate director, and formally opened the Bank of Bethesda branch at NIH on Apr. 10, 1950.

1955, according to the *Record*, its safe deposit boxes had been relocated there. Because the bank has a dedicated vault, it is thought that the branch opened when the Clinical Center did in 1953. The credit union, by contrast, had been established in 1939 and for years had a branch in Bldg. 10, although there hasn't been a credit union presence, other than two ATM machines, there in recent years.

Alexander concluded, "The credit union is absolutely delighted to be able to assume the bank branch space and provide in-person service to our members, potential members and patients of NIH in the Clinical Center. This move further solidifies our commitment to the NIH community, where we have been considered to be an employee benefit for over 60 years."

For information and an update about the Credit Union's new location check their web site at <http://www.nihfcu.org>.

For Your Information

Where Were You When...?

Last September, NIH joined others around the nation and the world to honor the victims of Sept. 11, 2001. Hundred of NIH'ers gathered from all parts of campus to attend the solemn and sober memorial observance on the Bldg. 1 lawn. A joint honor guard comprised of members of the NIH police and fire departments presented the colors. NIH director Dr. Elias Zerhouni spoke briefly to one of the largest crowd ever to appear for an outdoor event near Bldg. 1. At the end he asked for a moment of silence, after which "Taps" was played, the colors were retired and he ended the ceremony with "Ladies and gentlemen, God bless you."

In addition to the 9/11 observance that took place on Sept. 11, 2002, there were several other high-profile events on campus that enabled NIH officials to tell stories about where they were when they learned the awful news of the terror attacks on New York, Washington and aboard an aircraft streaking over Pennsylvania. At a special hour-long Grand Rounds that kicked off the new academic year, NIAID director Dr. Anthony Fauci offered his views on "Bioterrorism and Biodefense: One Year Later" and was introduced by Zerhouni, who filled in details of a story he had only begun to tell at the public ceremony earlier that day in front of Bldg. 1.

"I likened it (9/11) to the assassination of President Kennedy in 1963," said Zerhouni. "Those who were alive at the time never forgot that moment...It's something that will be with us for the remainder of our lives, and of the life of the nation."

Zerhouni recalled that he had been in a symposium at Johns Hopkins (where he was executive vice dean of the medical school before becoming NIH director last May). "Someone handed me a note and said there had been a major accident in New York, and that we had activated a Code Yellow at Johns Hopkins. I called the chief of surgery to inform him, then I was told that a plane had hit the Pentagon. I jumped in my car to go to the (Hopkins) hospital, where we called the governor (of Maryland) and Tommy Thompson (HHS secretary). We immediately stopped all operations at the hospital," he continued, thinking all hands would redeploy to casualty response. "Unfortunately, the number who made it out alive was not that much." His principal memory of that morning? "Every institution in the area responded, and NIH was among the first."

Fauci told the Masur Auditorium crowd that he had actually been in New York City on 9/11. "I was coming out of the Queens-Midtown Tunnel in a taxi, and I looked up and saw some smoke on the skyline. I thought that the air conditioning unit on top of a building had malfunctioned." He had been enroute to a meeting, and when he got there, the television was on. Only then did the magnitude of what had happened sink in. "I had no idea then how it would transform our nation," he said. "As the smoke cleared, it was clear we (NIH) had a major role, which was confirmed by the anthrax attacks so soon after."

Calling All NIHAA Members For Travel on Land and Sea

Two 2003 trips sponsored by NIH/NOAA Recreation. & Welfare Association are available to interested NIHAA members.

The first trip will go from Oct. 20 - Oct. 29, and will focus on "Reflections of Italy" covering in 10 days, Rome, Perugia, Florence, Venice and more. Includes airfare, hotels, sightseeing and 13 meals. At 5 p.m. on Wednesday, Feb. 26, R&W will host a presentation by Collette Vacations about the trip. It will be at the FAES house, 9101 Old Georgetown Rd. Call Julie at 301-496-6061 if you wish to attend.

Then from Nov. 20 - sDec. 5, 2003, visit Oahu, Kauai, Maui and Hawaii. Includes airfare, hotels, sightseeing, transfers, tips and gratuities. "YMT Vacations" are the travel agency.

For more detailed information about the trips, please contact: NIH/NOAA R & W
Attn: Randy Schools
31 Center Drive, Bethesda, MD 20892-0001 or call 301-496-6061.

Also Continuing Education, Inc., University at Sea is sponsoring, in conjunction with several cruise lines, a series of CME medical conferences on many topics to destinations such as Alaska, Caribbean, Hawaii and Europe in 2003. Interested NIHAA members should call 1-800-422-0711 or email contactus@www.continuingeducation.net.

NIH Convenes Hormone Therapy Conference

Long-term use of the estrogen plus progestin combination — one of the most commonly prescribed hormone regimens — does not prevent cardiovascular diseases and other chronic conditions in postmenopausal women. In fact, the risks (increased breast cancer, heart attacks, strokes and blood clots in the lungs and legs) outweigh the benefits (fewer hip fractures and colon cancers). This was the finding of a recent NIH scientific workshop on Menopausal Hormone Therapy, which featured the world's leading experts on the subject.



Former NIH director Dr. Bernadine Healy established the Women's Health Initiative in 1991. NIH director Dr. Elias Zerhouni opened and closed the workshop.

The purpose was to review results from one component of the Women's Health Initiative (WHI) clinical trial — an NIH study that was halted in May 2002 due to an increased risk of invasive breast cancer and cardiovascular disease — and place these results in the context of other completed and ongoing research on menopausal combination hormone therapy. The goal of the meeting was to assess what researchers know about the use of menopausal hormone therapy, particularly as a preventive agent, and decide what questions still need to be addressed through future research.

"There is not a simple, single answer for all women," said Dr. Elias Zerhouni, NIH director. "However, the WHI results do help simplify and clarify — not complicate — the decision-making process. Women now have information from a randomized clinical trial — the gold standard for evidence-based medicine. Combined hormone therapy should no longer be considered the effective prevention strategy against chronic diseases."

Women who are considering whether to start or continue hormone therapy to relieve menopausal symptoms need to consider the findings from this and other studies and discuss with their

health care provider their individual risk for specific chronic conditions and their personal preferences.

The workshop, which was attended by nearly 800 people, may be viewed online at <http://videocast.nih.gov/PastEvents.asp?c=1>. For more information on hormone therapy, go to the NIH menopausal hormone page at <http://www.nih.gov/PHTindex.htm>. — Ellyn Pollack

Research Festival - Past And Future

The 2002 Research Festival attracted the usual number of visitors. "Biodefense: A New NIH Mission," was the subject of the first plenary session. Basic science, and



Gitanjali Saluja (r) of NICHD shares her poster with institute colleagues Margaret Hillier (l) and Courtney Johnson.

clinical science and clinical research were highlighted in the second plenary session on "Bench to Bedside: NIH Success Stories."

There were 12 mini-symposia and almost 400 posters. At the start there was the job fair and a huge Technical Sales Association vendor show ended the 4-day event. Research Festival in 2003 is scheduled for the week of Oct. 14-17.

Groundbreaking for New Edmond J. Safra Family Lodge



Breaking ground for the Edmond J. Safra Family Lodge are (from l) Dr. Michael Gottesman, NIH deputy director for intramural research; Dr. Elias Zerhouni, NIH director; Dr. John Gallin, director, Clinical Center; Jeffrey Keil, president, Ellesse L.L.C.; Amy McGuire, executive director, Foundation for the NIH; and Susan Lowell Butler, member Clinical Center patient advisory group. The groundbreaking ceremony on Oct. 29, 2002, was held indoors due to inclement weather. Construction should begin early next year, with completion forecast for the summer of 2004. The Edmond Safra Family Lodge, located near the corner of Center and Convent Dr., will be a home-away-from-home for the families and caretakers of NIH Clinical Center patients. For more information call Jan Weymouth, 301-496-2925 or visit http://www.cc.nih.gov/ccc/family_lodge.html.

NIH Notes August 2002 – December 2002

Appointments and Personnel Changes

Dr. David Armstrong has been named chief of the brain disorders and clinical neurosciences integrated review group at the CSR ... **Dr. Wendy Baldwin**, NIH deputy director for extramural research since 1993, has left to become vice president for research at her doctoral alma mater, the University of Kentucky in Lexington. In 1973, she joined NICHD as a health scientist administrator and stayed within NICHD taking on expanding roles until 1993 when she went to OD ... **Dr. Anna Barker** was named deputy director of the NCI's Strategic Scientific Initiatives Branch, OD, a newly created position. She is the cofounder and former president and CEO of Bio-Nova, a biotechnology company based in Portland, Ore. She will develop public-private partnerships to advance the development of targeted new therapies and plan for modernization of NCI's Frederick Cancer Research and Development Center ... **Stephen Benowitz** has left his job at NIH to become an associate director reporting directly to Kay Coles James, deputy director of the Office of Personnel Management. He was the human resources and products services leader in OD ... **Dr. Marshall Bloom**, an internationally recognized authority on Aleutian mink disease, persistent infections and parvoviruses, has been named associate director of NIAID's Rocky Mountain Laboratories in Hamilton, Mont. ... **Dr. Dan Brock** is now an NIH senior scientist in the department of clinical bioethics at the CC. He comes to NIH from Brown University where he was director of the Center for Biomedical Ethics and had a joint appointment in the department of philosophy and the medical school ... **Dr. Donna J. Dean** has been named first deputy director of the National Institute of Biomedical Imaging and Bioengineering. She had been acting director of NIBIB and had played a role in the formation and development of the newest of NIH's institutes and centers, which supports fundamental research that applies principles of engineering and imaging sciences to biological systems and to human health and well-being ... **Tyrrell Flawn** recently joined the Children's Inn at NIH as

executive director. She comes from Austin, Tex., where she was the first non-family executive director of the RGK Foundation. Previously she was executive director of volunteer services and the children's art project at M.D. Anderson Cancer Center ... **Dr. Peter Guthrie** has joined CSR as scientific review administrator of its molecular, cellular and developmental neuroscience-4 study section. Before coming to CSR, he was an associate professor at the University of Utah School of Medicine, Salt Lake City, where he investigated intracellular and extracellular mechanisms underlying interactions of astrocytes with neurons and microglia ... **Dr. Alan E. Gutmacher** has been named second deputy director of the National Human Genome Research Institute. In that position, he will oversee the translation of the findings of the Human Genome Project into new diagnostic tests and therapies. He is also acting director of the NHGRI Office of Policy, Planning and Communications ... **Dr. Robert Hiatt**, deputy director of the NCI's Division of Cancer Control and

Population Sciences, is returning to California in February to become director of population science at the University of California, San Francisco and professor of epidemiology at UCSF School of Medicine ... **Dr. David Jollie** has joined CSR as scientific review administrator for fellowship applications in the biophysical and chemical sciences integrated review group. He came to CSR from the University of Maryland, where he was an assistant professor in its department of chemistry and biochemistry ... **Dr. Michele Kiely** recently joined NICHD as chief of the collaborative studies unit in the Division of Epidemiology, Statistics and Prevention Research. In this capacity, she has become scientific advisor to the NIH-D.C. Initiative to Reduce Infant Mortality in Minority Populations in the District of Columbia ... **Dr. Cheryl A. Kitt** recently joined NIAMS as director of its extramural program. She was formerly at NINDS ... **Dr. Theodore Kotchen** has been named special advisor on clinical research review at CSR. He will serve part-time and maintain his research and academic efforts at the Medical College of Wisconsin, where he is professor of medicine and epidemiology and

New Director Named for NIMH

In mid-September 2002, NIH director Dr. Elias Zerhouni, announced the appointment of Dr. Thomas R. Insel, as the new director of NIH's National Institute of Mental Health. Insel, who had served as professor in the department of psychiatry and as director of the Center for Behavioral Neuroscience at the Emory University School of Medicine in



Dr. Thomas Insel

Atlanta, Georgia, began his new position in November 2002. "After a thorough and careful search process," said Zerhouni, "it became clear that Insel's ability to communicate a compelling vision for mental health research, his outstanding scientific research career and his leadership roles in shaping research in the academic arena make him well-suited to lead the NIMH."

Insel is no stranger to NIMH. He first joined the institute in 1979, and served in various administrative and leadership posts for 15 years. Within that time, he conducted key research in obsessive-compulsive disorder, initiating some of its first treatment trials. He also launched a research program in social neuroscience, focusing on the neurobiology of complex social behaviors in animals. In 1994, Insel went to Emory University as a professor in the department of psychiatry and as director of Yerkes Regional Primate Research Center. As director of the primate center, he was responsible for building one of the nation's leading HIV vaccine research programs.

Insel serves on numerous academic, scientific and professional committees, including 10 editorial boards. He is a fellow of the American College of Neuropsychopharmacology and has received awards from the National Alliance for Research on Schizophrenia and Depression, the Society for Biological Psychiatry and the U.S. Public Health Service. He received his bachelor's and medical degrees from Boston University.

associate dean for clinical research ... **Mary McCabe** has stepped down as head of the NCI's Office of Cancer Communications to advise NCI director Dr. Andrew von Eschenbach on clinical research strategy and policy. Jill Bartholomew, the deputy director of OCC, has also left to take a position at HHS. Nelvis Castro and Mary Anne Bright are acting director, OCC, and acting deputy director, OCC. ... **Dr. Sheldon S. Miller** has been named NEI scientific director. Formerly a professor of molecular and cell biology at the University of California, Berkeley, he has focused his research on understanding the regulation and function of epithelial layers throughout the body, especially epithelia from the breast, lung and eye. He has authored or co-authored more than 60 scientific papers, and has received continuous grant support from NIH since 1978 ... **Dr. Melody Mills** is the new scientific review administrator of the bacteriology and mycology-2 study section at CSR. Before coming to CSR, she was at the Uniformed Services University of the Health Sciences ... **Dr. N. Kent Peters** recently joined NIGMS as a scientific review administrator in the Office of Scientific Review. He was formerly a program director for metabolic biochemistry at the National Science Foundation. Before that, he was a professor in the department of chemistry and biotechnology at the Agricultural University of Norway ... **Dr. Joanna Pyper** is now the scientific review administrator for the virology study section at CSR, after participating in the CSR Review Internship Program. Prior to coming to CSR, she was a research fellow in the picornavirus virus replication section of NIAID's Laboratory of Infectious Diseases ... **Dr. Alexander Politis** is the new chief of the infectious diseases and microbiology integrated review group at CSR. He previously was scientific review administrator of CSR's immunological sciences study section ... **Dr. Barbara Rimer**, director of NCI's Division of Cancer Control and population sciences, has left NCI for a position at the University of North Carolina as professor of health behavior and health education in the School of Public Health and also as deputy director for Population Sciences at UNC's Lineberger Cancer Center. Dr. Robert Croyle, associate director for behavioral research, has been named interim head of the division ... **Dr. Anita Miller Sostek** has been named director of a newly reconfigured Division of

New Director Named for NIAAA

Dr. Ting-Kai Li will lead the National Institute on Alcohol Abuse and Alcoholism as its new director. Appointed by NIH director Dr. Elias Zerhouni last fall, Li comes from the department of medicine and of biochemistry and molecular biology at Indiana University School of Medicine in Indianapolis, where he recently served as distinguished professor of these departments and as director of the Indiana Alcohol Research Center.

"It gives me great pleasure that one of our nation's preeminent scientists in the alcohol research field will be taking the helm at NIAAA to lead our federal alcohol research efforts," said Tommy Thompson, HHS secretary.



Dr. Ting-Kai Li

An author of more than 400 journal articles and book chapters, Li has produced ground-breaking research in several areas, including alcohol metabolism and animal models of alcoholism. He is a major participant in two NIAAA-supported research consortia — the Collaborative Study on the Genetics of Alcoholism and the Integrative Neuroscience Initiative on Alcoholism.

He received his medical degree from Harvard University in 1959 and joined the faculty of Indiana University School of Medicine in 1971 and served as the associate dean for research from 1986–2000. Li's research accomplishments include the Markle Scholar in Academic Medicine; the Research Society on Alcoholism Award for Research Excellence; the James B. Isaacson Award for Research in

Chemical Dependency Disease; the Jellinek Award; the R. Brinkley Smithers Distinguished Scientist Award; an honorary degree (D.Sc.) from Northeastern Ohio Universities College of Medicine and the Mark Keller Honorary Lecture Award. Li is an honorary fellow of the Society for the Study of Addiction (UK) and is a member of the Institute of Medicine, National Academy of Sciences. He also serves as the current journal editor of *Alcoholism: Clinical and Experimental Research*.

Li replaces Dr. Raynard Kington, who has served as acting director of NIAAA since January 2002 following the retirement of Dr. Enoch Gordis, NIAAA director from 1986 to 2002.

Clinical and Population-Based Studies at CSR. She was previously chief of CSR's biobehavioral and behavioral processes IRG and its predecessor ... **Dr. Vonda Smith** has joined CSR as scientific review administrator of the SSS-6 study section, which reviews small business innovative research grant applications for the biophysical and chemical sciences integrated review groups. She comes to CSR from Hewlett-Packard in Palo Alto, Calif., which then became Agilent Technologies. There she performed spectral analysis and liquid phase analysis of various biomolecules ... **Dr. Nadarajan A. Vydelingum** has been named deputy director of the NCI Center to Reduce Cancer Health Disparities. He came to NIH in 1991 when he joined the Division of Research Grants (now CSR) where he headed a scientific review group on peer review in bioengineering and physiology ...

Dr. Marian Wachtel has joined CSR as the new scientific review administrator of the special reviews study section that examines small business innovative research grant applications for the infectious diseases and microbiology integrated review group ...

Dr. John Whitmarsh recently joined NIGMS as a program director in the Biophysics Branch of the Division of Cell Biology and Biophysics, where he will administer grants in bioinformation and computational biology. For the past 21 years, he served on the University of Illinois at Urbana-Champaign faculty in the plant biology and biochemistry departments.

Awards and Honors

Dr. Duane Alexander, NICHD director, recently received the American Academy of

Grantees Win Nobel Prizes

Winning Nobel prizes in 2002 were two grantees. Dr. John B. Fenn, who received support from NIGMS, shares half of the prize in chemistry. He is cited for refining an analytical technique called mass spectrometry, making it possible to analyze large molecules in biological samples. NIGMS provided more than \$1.5 million to support Fenn's research from 1984 to 1994, a period during which his prize-winning research was published. Fenn is professor of analytical chemistry at Virginia Commonwealth University. Also winning half of the prize was Koichi Tanaka of Shimadzu Corp. in Kyoto, Japan.

Sharing the Nobel Prize in Physiology or Medicine was Dr. H. Robert Horvitz, who was cited for characterizing key genes controlling cell death, which is essential for embryonic development and, when improperly controlled, is a hallmark of numerous diseases. NIH has provided more than \$7 million to support Horvitz's research over the past 25 years; NIGMS was the principal source of funds, and NCI and NICHD also supported his work.

Horvitz, professor of biology at the Massachusetts Institute of Technology, shares the prize with Dr. Sydney Brenner of the Molecular Sciences Institute in Berkeley, Calif., and Dr. John E. Sulston, of the Sanger Centre in Cambridge, UK. The three, who worked independently, are recognized "for their discoveries concerning genetic regulation of organ development and programmed cell death."

disorders and inspired investigations in this field ... **Dr. Samuel W. Cushman**, chief of NIDDK's experimental diabetes, metabolism, and nutrition section, received the Banting Medal for Scientific Achievement at the American Diabetes Association meeting in San Francisco. This award is ADA's highest research honor. He was honored for basic science findings that were pivotal to explaining the relationship between insulin and glucose transporters. According to ADA, "the discovery of intracellular glucose transporters, subsequently shown to be GLUT4, turned out to be not only a major breakthrough in understanding the molecular mechanism of action of insulin on glucose transport, but also of key importance to understanding the pathophysiology of insulin resistance and type 2 diabetes." He is now doing studies that rely on antibodies and fluorescent probes to track exactly where individual glucose transporter go in fat and muscle cells in normal and insulin-resistant animal models of human metabolic states, especially type 2 diabetes and obesity ... **Dr. John Gallin**, Clinical Center director, was awarded the Marie T. Bonazinga Award by the Society of Leukocyte Biology for

Pediatrics' Arnold J. Capute award, given to pediatricians who contribute to the health and well being of children with disabilities through service and/or advocacy at the local, state or national level. Under his leadership, the institute's program in mental retardation and development disabilities research fostered numerous research advances, including the discovery of genes for Rett syndrome and fragile X syndrome ... **Dr. Harvey Alter**, chief, infectious disease section, and associate director for research, department of transfusion medicine, Clinical Center, has been elected to the Institute of Medicine of the National Academies... **Dr. Arthur J. Atkinson**, senior advisor in clinical pharmacology to the director at the Clinical Center, has been awarded the 2002 Pharmaceutical Research and Manufacturers of America Foundation Award in Excellence. The award is given to scientists who received a foundation grant at the outset of their careers in a discipline important to the research-based pharmaceutical industry and went on to distinguish themselves through their scientific and/or academic achievements ... **Dr. Ad Bax**, NIDDK, and **Dr. Marc Gwadz**, NCI, placed first in the 2-man master's category at the 38th annual Head of the Charles Regatta in Boston last Oct. 19 ... **Dr. Roscoe O. Brady**, chief of the Developmental and Metabolic Neurology Branch, NINDS, was honored at a scientific symposium celebrating his research that has spanned 50 years. Brady and his team have conducted pioneering research on hereditary metabolic storage diseases (also called lipid or lysosomal storage disorders) such as

Gaucher, Niemann-Pick, Fabry and Tay-Sachs — defining much of what is known of their biochemistry, enzymatic bases and metabolic defects. His research has stimulated colleagues throughout the world to define the causes of many other related

Grantees Win Lasker Awards

Two NIGMS grantees, Dr. James Rothman and Dr. Randy Schekman, were honored with the 2002 Lasker Award for Basic Medical Research. They shared the award for their discovery of cellular membrane trafficking, a process that cells use to organize their activities and communicate with their environment.

Rothman is chairman of the cellular biochemistry and biophysics program at Sloan-Kettering Cancer Center, and Schekman is a Howard Hughes Medical Institute professor in the division of biochemistry and molecular biology at the University of California, Berkeley. Rothman is also an NCI and NIDDK grantee.

The 2002 Lasker Award for Clinical Medical Research was given to Dr. Willem J. Kolff of the University of Utah and Dr. Belding H. Scribner of the University of Washington for the development of renal hemodialysis, an advance that has revolutionized the treatment of acute and chronic kidney failure.

In the late 1960s, Kolff and his group received several NIAMD contracts to develop and test an improved artificial kidney system. Scribner is a former NIDDK grantee who pioneered the use of dialysis in patients with kidney disease by inventing a shunt that would enable repeated use of hemodialysis. His research also established the minimum level of dialysis needed and the factors that need to be considered in determining the dialysis schedule for individual patients (for example, weight and residual kidney function).

The 2002 Lasker Award for Special Achievement in Medical Science went to Dr. James Darnell, Jr., the Vincent Astor professor at Rockefeller University, for leading breakthroughs in the understanding of gene regulation and for fostering the careers of more than 125 scientists. Darnell is a long-time grantee of NIAID and NCI. He has also received funding from NIGMS and NIDDK.

He received the award for "an exceptional career in biomedical science during which he opened two fields in biology — RNA processing and cytokine signaling — and fostered the development of many creative scientists," according to the citation.

excellence in leukocyte biology. He received the award at the society's annual meeting in Torino, Italy ... **Dr. Patricia A. Grady**, director of the National Institute of Nursing Research, recently received the Centennial Achievement Medal from Georgetown University School of Nursing. She was the first recipient of this award, which was created to celebrate 100 years of educating nurses at Georgetown, and was honored for her leadership, accomplishments and contributions to nursing science ... **Dr. Stephen Holland**, senior clinical investigator and head of the immunopathogenesis unit, NIAID, was awarded the 2002 NIH Distinguished Clinical Teacher Award. The award is the highest honor bestowed on an NIH senior clinical investigator by NIH clinical fellows ... **Dr. James Huff**, NIEHS toxicologist, received the American Public Health Association's David P. Rall award for Public Health Advocacy. He established the levels of evidence of carcinogenicity used by the National Toxicology Program to evaluate results of carcinogenesis studies that are still used in the bioassay technical reports ... **Dr. Gerald T. Keusch**, director, Fogarty International Center, and NIH associate director for international research, has been elected to the Institute of Medicine of the National Academies ... **Dr. Barry R. Komisaruk**, a program director in the NIGMS Division of Minority Opportunities in Research, recently received a 2002 National Role Model Mentoring Award for his 17 years of service on NIGMS' Minority Biomedical Research Support grant at Rutgers, The State University of New Jersey ... **Dr. Alan P. Koretsky**, chief of NINDS's Laboratory of Functional and Molecular Imaging, recently received the Gold Medal award from the International Society of Magnetic Resonance in Medicine for his significant contributions to research in this field. He also serves as director of the NIH MRI Research Facility/Mouse Imaging Facility, and was particularly recognized for his and his colleagues' pioneering work on transgenic mice, the use of Mn²⁺ as a paramagnetic tracer for brain studies and perfusion measurements using arterial spin labeling ... **Dr. Peter Lipsky**, scientific director at NIAMS, was recently awarded the Lee C. Howley, Sr., Prize for Arthritis Research. The Arthritis Foundation award recognizes significant advances in the understanding, treatment or prevention of arthritis and rheumatic diseases. He has taken a leadership role in the development of

new agents for treatment. Lipsky also received the Distinguished Investigator Award at the 2002 national conference of the American College of Rheumatology ... **Dr. Robert L. Nussbaum**, chief of both the Genetic Disease Research Branch and the Inherited Disease Research Branch in NHGRI's Division of Intramural Research, has been named 2004 president-elect of the American Society of Human Genetics. ASHG was founded in 1948 as the primary professional membership organization for human geneticists in the Americas. The nearly 8,000 members include researchers, academicians, clinicians, laboratory practice professionals, genetic counselors, nurses and others involved in or with a special interest in human genetics. As president-elect and president, Nussbaum also will provide leadership to ASHG and serve on its board of directors, which is responsible for managing the policies of the society ... **Dr. Kenneth Olden**, director of NIEHS and the National Toxicology Program, won the American Public Health Association's Calver Award at APHA's annual meeting Nov. 11 in Philadelphia. He was recognized for "more than 10 years as director of the NIEHS. He has deepened the science of his agency at the same time he has broadened its relevance to public health." He was also selected as the first recipient of the Cincinnati Children's Environmental Health Award. The award acknowledges his leadership role in addressing children's health issues, especially lead poisoning, and recognizes NIEHS's role in a number of initiatives that have enhanced children's health in the Cincinnati area ... **Levon O. Parker**, minority and special concerns officer, NINDS, recently received a 2002 National Mentor Role Model Award for his work as a mentor to students. He was also recognized for helping minorities, women and individuals with disabilities do research on the brain and nervous system, and for stimulating interest in clinical and basic research training opportunities at, and supported by, NIH ... **Dr. Norman Salem**, chief of NIAAA's Laboratory of Membrane Biochemistry and Biophysics, recently won the Supelco-Nicholas Pelick/American Oil Chemists' Society Research award, a major honor for research in lipid chemistry. The 2002 award to Salem is for work that, over 30 years, has explored and elucidated the physiological role and importance of key fatty acids in health and development ... **Elizabeth "Liz" Scanlon**, a laboratory animal technologist

for NCI in Bldg. 14D, was the winner in 2:57:27 of the women's portion of the Marine Corps Marathon on Oct. 27, 2002 ... **Dr. Allen M. Spiegel**, director, National Institute of Diabetes and Digestive and Kidney Diseases, has been elected to the Institute of Medicine of the National Academies ... **Dr. Lawrence A. Tabak**, director, National Institute of Dental and Craniofacial Research, has been elected to the Institute of Medicine of the National Academies.

Retirements

Dr. Gregory Curt, NCI clinical director since 1989, has retired from the USPHS to become medical director with AstraZeneca pharmaceutical company in Delaware ... **Bill Dehn**, NIH glassblower for the past 40 years, retired in January 2003. He will take with him NIH's last vestige of the centuries-old tradition of glassblowing of laboratory devices that were not available commercially ... **Dr. Elke Jordan** recently retired as deputy director of NHGRI after 30 years of service to NIH. She was an integral leader of the Human Genome Project. Her contributions to NIH will not end with her retirement. She started working at the Foundation for the NIH to create partnerships with outside organizations to support various projects.

Deaths

Dr. Roger M. Brown, associate director of neuroscience in NIDA's Division of Neuroscience and Behavioral Research, died June 13, of cancer, after a short illness. At NIDA for more than 20 years, he fostered the use of neuroscience tools for the study of drug dependence and addiction and oversaw the growth of the institute's neuroscience program, now a focus of NIDA's research. His life and contributions were celebrated in fall 2002 when the Roger Brown memorial library in the neuroscience resource room was dedicated. Last year, he donated many books and journals from his private library. On May 14-15, 2003, NIDA will convene a symposium in his honor. Investigators who conducted research with grants administered by him will speak about the programs and discoveries he helped nourish ... **Donald F. Cyphers**, 67, a retired budget officer at the National Institute of Diabetes and Digestive

and Kidney Diseases, died of cancer Sept. 27 at his home. He began working at NIH in the early 1960s working first at NIAID and then at NIDDK until he retired in 1994 ... **Ilse A. Fleischman**, 78, who worked at NIH as a teacher and tutor, died of cancer Oct. 23 at her home in Chevy Chase. For the past 30 years, she worked with employees at NIH in a program designed to help them earn the equivalent of a high school diploma ... **Marlene J. Foster**, 70, who was on the nursing staff at NIH (1957-1988), died of pulmonary fibrosis Sept. 20 at Washington Hospital Center ... **Jean Maclay Garvey**, 53, who worked at NIH as a food service manager for Guest Services, Inc., died suddenly while at work on Nov. 8. She had been working as a chauffeur for RMA Chauffeured Transportation ... **Dorothy "Toby" Hertz**, 87, a psychiatric social worker, died Oct. 17 at her home in Hollywood, Md. She had Alzheimer's disease. In the early 1960s, she did research at NIMH in family therapy and personality disorders in young people. She was the wife of Dr. Roy Hertz, a longtime NIH scientist who died 11 days later ... **Dr. Roy Hertz**, 93, former NCI researcher and NICHD scientific director, died Oct. 28 of congestive heart failure at his home in Hollywood, Md. He came to NIH in 1941. He became chairman of the endocrinology section at NCI before becoming NICHD's scientific director and then chief of NICHD's Reproductive Research Branch. In 1956, he developed the anticancer drug methotrexate, the first successful treatment for choriocarcinoma, a cancer of the placenta. This was the first effective chemotherapy for a solid tumor. In 1972, he received the Albert Lasker Award for Clinical Research for this achievement. Hertz developed two synthetic forms of the hormone progesterin, which later provided the basis for the development of oral contraceptives. He also developed drugs useful for the treatment of Cushing's disease, a disorder of the adrenal glands. After he left NIH in 1966, he was scientific director of the National Child Institute and then Rockefeller University where he worked with the Population Council. He returned to NIH as a scientist emeritus and continued research focusing on the treatment of AIDS in pregnant women. A memorial program was held on Dec. 7 in the CC chapel. In 1953, when the CC opened, Hertz, then chief of NCI's Research Medicine Branch, admitted NIH's first research patient who was treated for prostate cancer ... **Dr. Robert**

J. Highet, 78, an NHLBI organic chemist who specialized in nuclear magnetic resonance (NMR) studies of natural products, died of colon cancer on July 15 at Holy Cross Hospital in Silver Spring. He retired in 1994, after more than 41 years in NHLBI's Laboratory of Chemistry. While in the lab, he was instrumental in bringing to NIH the first chemist-oriented NMR instrument, called the Varian A-60. Most recently, he collaborated with NIDDK scientist Dr. Herman Ziffer on substances from the plant *Artemisia annua*, which is used in the treatment of malaria. Highet, a long-time Bethesda resident, is survived by his wife, Patricia, who worked at NHLBI and NIDDK for 35 years until retiring in 1999 ... **David Beall Hoover**, 78, a biostatistician and Public Health Service official who had worked at NIH in the mid-1950s as a researcher in early pregnancy, died Nov. 16 at home in Rockville. He had a systemic disorder, mastocytosis ... **Frances Humphrey Howard**, 88, a special assistant to the associate director for extramural programs at NLM (1970-1999), died of congestive heart failure Sept. 23 at Sibley Memorial Hospital. The sister of the late Vice President Hubert Humphrey, she was a force in her own right who helped draw attention to medical libraries and served as a liaison between NLM and other federal agencies, the biomedical community, private nonprofit organizations and universities ... **Dr. Morris T. Jones**, 85, who was head of the special foreign currency program at the Fogarty International Center when he retired in 1994, died of heart arrhythmia on Aug. 12 at his home in Bethesda. He came to NIH in 1956 working first at NIAID as a parasite researcher. In 1964, he embarked on his long career in the international arena working at FIC for 30 years before retiring. He was instrumental in enabling NIH to support biomedical research in countries using U.S.-owned excess local currencies. He managed NIH participation in programs involving Poland, Hungary, Egypt, Israel, the Czech Republic, Yugoslavia, Slovakia, Slovenia, Croatia, and India ... **Dr. Sewa Ram Joshi**, 70, who was a retired FDA toxicologist and researcher, died Sept. 2 at a hospital in Canton, Mich., after a heart attack. He was in Detroit to attend a wedding. In 1971, after 6 years as a research associate at Harvard Medical School, he came to NIH to work as an oncology research scientist. He left to join the FDA in 1976 and retired in 1997 ... **Nancy Kelley**, who worked at NIH for 40

years, died Oct. 6. She worked at NIH on and off during the 1950s and 1960s. She returned to NIH in the 1970s to become one of the CC's first hospital administrative officers. She retired in 1995 ... **Dr. Lawrence Kilham**, a research virologist at NIH (1949-1960), died in Lyme, N. H. on Sept. 21, 2000. After he left NIH, he joined the faculty at Dartmouth in 1961. While on a sabbatical in Uganda in the mid-1950's, he developed an interest in bird behavior. In 1988, his book *On Watching Birds* won the John Burroughs Award for best book on nature writing ... **Dr. Lloyd W. Law**, a geneticist and researcher at NCI (1947-1992), died Oct. 20 at his home in Asbury Methodist Village in Gaithersburg. He was one week short of celebrating his 92nd birthday. His outstanding scientific career spanned over five decades, including more than 40 years at NCI. He joined the institute in 1947 and headed a leukemia studies section where he developed a combination chemotherapy to treat childhood leukemia. He retired in 1990 as a scientist emeritus and chief of the NCI's Laboratory of Cell Biology, but was a frequent visitor to the lab. On the occasion of his 90th birthday, a symposium was held in his honor and the Lloyd W. Law Library for Cancer Research was dedicated in Bldg. 37. He was a two-term member of the NIHAA board of directors ... **Florence Mahoney**, 103, a tireless advocate for medical research since pre-World War II years, died Nov. 29 at her home in Washington, D.C. Her goal was to persuade those individuals with political power of the value of a strong national medical research endeavor, especially through an expanded mission and funding for NIH. She worked closely over the years with her colleague, Mary Woodard Lasker. In her own right, she was the most influential backer of the legislation that led to the establishing of the National Institute on Aging. In June 1996, she was honored by the NIHAA with the Public Service Award ... **Delphine Moeller**, 92, a secretary at NIH for more than 40 years, died of a heart attack Sept. 1 at Suburban Hospital. She first came to NIH to work as a clerk-typist in the Department of Infectious and Communicable Diseases. She then became head secretary in the CC's department of pharmacy until she retired in 1996 ... **Dr. Sanford L. Palay**, 83, a neuroscientist who worked at NIH in the early 1960s, died Aug. 5 of kidney failure at a hospital in Concord, Mass. He came to NIH from Rockefeller University to become

chief of the neurocytology section where he published several papers that described the structure of cells that support and protect neurons, called neuroglia. He left NIH to become professor of neuroanatomy at Harvard University Medical School, where he worked until retiring in 1989 ... **Gene Rogot**, 74, a statistician and epidemiologist at NHLBI, died in October 2001 in Bethesda, Md. His work at NHLBI involved the National Longitudinal Mortality Study, which links census data to the national death index and allows comparison of socioeconomic mortality statistics. He also worked on the development of matching algorithms for record linkage using the National Death Index. After he retired he was a consultant on the National Longitudinal Mortality Study ... **Madeline Stuart Ross**, 92, an administrative assistant at NIH (1957-1964), died of pneumonia Dec. 8 at Shady Grove Adventist Hospital ... **William H. Schuette**, 68, who worked at NIH as an electrical engineer (1963-1988), died Sept. 21 of a heart attack at Inova Fairfax Hospital. While at NIH he worked on an ultrasonic device used for fetal monitoring. He left NIH to become deputy technical director of the Naval Surface Warfare Center's Carderock Division. He retired from there in 1993 and worked as a consultant for biomedical research firms. He published over 180 papers and held 14 U.S. patents. He was also a flat-water canoeist who was named to the 1952 and 1956 U.S. Olympic teams ... **Emmie V. Seggel**, 86, a volunteer and club member, who was the wife of former NIH executive officer and associate director of administration (1958-1971) Richard L. Seggel, died Oct. 8 at Suburban Hospital. She had cancer. She came to Washington, D.C. in 1940 to work as a secretary in the Office of Price Administration and two years later married Seggel ... **Dr. Winifred Sewell**, 85, a retired librarian who worked at the National Library of Medicine from the early 1960s until 1970, died of congestive heart failure Oct. 23 at her home in Cabin John. After she left NLM, she worked at the University of Maryland until 1992. She did consulting work and was honorary president of the American Association of Colleges of Pharmacy ... **Dorothy Ramsay Sharman**, 87, an administrative secretary who worked at NIH (early 1970s and early 1980s), died of pneumonia Nov. 12 at Shady Grove Adventist Hospital nursing home ... **Dr. Harry Burgess Wood, Jr.**, 83, a research

chemist at the National Cancer Institute (1950-1980), died of a cerebral hemorrhage Aug. 7 at Suburban Hospital. He began his career in 1950 and worked at the National Heart Institute and National Institute of Arthritis and Metabolic Diseases until 1960 when he moved to NCI where he was chief of the Office of Extramural Research and Resources. After he retired he was a consultant ... **Dr. Richard Yamamoto**, 82, a retired NIH research scientist (1956-1984), died of pneumonia Dec. 7 at Suburban Hospital. He worked at NIAMD, but specialized in cancer research. During World War II, he was in the 442nd Regimental

Combat Team. This unit, made up of Japanese Americans, fought in Europe. He received a Bronze Star with three clusters. In his retirement, he worked on archival material concerning the combat team.

Mrs. Mary Calley Hartman made a contribution to NIHAA in memory of Delphine Moeller.

A-76 Sidebar (continued from p. 15)

Fitzpatrick says an accurate SOW is paramount for groups under review; a strong one is the best defense against loss to private industry. It is important to capture all of the details of the work we do in the SOW in order to level the playing field and be competitive, Wheelles adds. "If, at that point, in the process of studying ourselves we find out that we're not competitive, then A-76 says, 'Why are we doing (the activity)?'"

All NIH jobs that come under review first evaluate themselves, according to commonly agreed upon criteria developed in a software program called ExpertChoice, to determine which functions get reviewed first. "That's a defensible model," according to Wheelles.

Both men know of situations, albeit not under the A-76 program, where federal activities were contracted out, only to be brought back under Uncle Sam's umbrella after costs skyrocketed and performance suffered. "Not all of these (conversions) are going to work out perfectly," said Fitzpatrick.

Some functions are already converting to contract. The Clinical Center's housekeeping department is converting, but only by attrition — no one currently on staff is being forced out. "We hope to do more of this," Wheelles noted. Lab technicians, and some aspects of intramural research, are also due for review.

Meanwhile, the A-76/FAIR team is doing its best to educate, clarify and maintain fairness and consistency as the review rolls forward. "We're an incredible congress at NIH," notes Wheelles. "Any 'senator' can shut down the process. So there's lots of education on what A-76 is and what it isn't. We've got a lot of scared employees who think we're going to give their jobs away. There's a lot of 'Anywhere but my backyard.' But for every one person who is trying to spin us in the wrong direction, there are twice as many urging us to do it right."

Like NIH Deputy Director for Management Chick Leasure, they hope that at the end of the day, NIH retains its core strengths — the things at which it excels — and cedes, in accordance with the President's policy, to the private sector those activities that companies do best — and at least 10 percent cheaper.

Update on Construction at NIH



Site preparation (l) goes forward at the Children's Inn at NIH on a project to expand the facility by one-third. The new wing will be built on the south side of the existing structure, some of whose windows can be seen boarded-up. The new wing — slated to open in 2003 — will provide space for 18 more families, bringing the inn's total capacity to 55 families.

NIH's new firehouse (r), just a few ladders' lengths away from a county firehouse at the corner of Old Georgetown Rd. and W. Cedar Lane, will include 22,000 square feet and open this spring as home to the NIH Fire Department.



The new John Edward Porter Neuroscience Research Center labs (l) will occupy 560,000 gross square feet, or approximately the same space as three Bldg. 36s. It is to be built in two phases, with completion of the whole lab facility by spring 2007.



Other construction projects at NIH

The Mark O. Hatfield Clinical Research Center (870,000 gross square feet) is scheduled for completion in summer of 2003 with the additional sections being completed in the fall and winter. The facility will be fully completed by March 2004.

The Bldg. 10 Revitalization Program has 4 phases of construction and the old Bldg. 10 Research Program will be replaced by 2011 and construction will be fully completed by 2018.

The Power Plant Expansion is part of the overall infrastructure Modernization Program for Bldg. 11 that will increase the existing chilled water plant capacity by 20,000 tons.

NIH Retrospectives: 5 Decades of History



Winter 1953

On Friday evening, Jan. 30 the new NIH switchboard began operation. It is located in the new Clinical Center's first floor basement. The board is larger than the old one, which was located in Bldg. 3, and will provide the necessary additional service required when the CC begins operation ... Regular tours of the CC started on Feb. 16, so NIH employees could see the new facility before patients are admitted ... NIH has established a new series of annual lectures to recognize outstanding scientific achievement and to facilitate the exchange of information. Each year eight lectureships will be awarded by the seven research institutes and the Office of the Director. Lecturers will be nominated by senior investigators in the various institutes and chosen by a committee composed of the institutes' scientific directors. The first lecture is scheduled to be given on the evening of Jan. 21 by Dr. Severo Ochoa, professor of pharmacology at New York University School of Medicine. Ochoa will speak on "Tricarboxylic Acid Cycle: Enzymatic Mechanisms."



Winter 1963

The NIH Pacific Office was established in Tokyo, Japan, on Jan. 1 ... Dr. Luther L. Terry, surgeon general of the Public Health Service, announced the directors of the two newest institutes at NIH. Dr. Robert A. Aldrich, profes-

sor and chairman of the department of pediatrics at the University of Washington School of Medicine, has been named director of the National Institute of Child Health and Human Development (NICHD), which is expected to be in operation in early March. Dr. Clinton Powell, who had been chief of the Division of General Medical Sciences since last August and has been at NIH since 1954, has been appointed director of the National Institute of General Medical Sciences (NIGMS). Dr. Wyndham D. Miles, the NIH historian, is trying to assemble a complete file of NIH telephone directories for reference use. [Editor's note: the current NIH historian, Dr. Victoria A. Harden, is still looking for telephone directories and NIH Scientific Directories/Annual Bibliographies for the time before the early 1950s. If you have any of the above please call Brooke Fox at 301-451-4344 or email: foxb@od.nih.gov.]



Winter 1973

NIH director since 1968 Dr. Robert Q. Marston's letter of resignation was accepted by President Nixon. Dr. John F. Sherman, deputy director of NIH, was named acting director of NIH on Jan. 21, 1973, and served until a new director, Dr. Robert Stone, was appointed on May 29 ... A committee has been formed to consider all phases of parking administration and traffic control on the reservation ... Edith F. Philips has been appointed administrative officer of the Division of Cancer Grants, NCI. She is the first woman in the institute to be named an administrative officer.



Winter 1983

Dr. Murray Goldstein has been appointed director of the National Institute of Neurological and Communicative Disorders and Stroke. He had been acting NINCDS director since February 1981 ... On Jan. 18, Bldg. 1 was officially named the James A. Shannon Building in honor of the former NIH director (1955-1968) ... The advisory committee to the NIH director recently held its first meeting under the chairmanship of Dr. James B. Wyngaarden, NIH director ... The area suffered a blizzard of major proportions on Feb. 11. Despite the severe weather, the Clinical Center remained open as did the other buildings on campus.



Winter 1993

NIH director Dr. Bernadine Healy announced on Feb. 26 that she will resign her position by June 30. She has been director for the past 22 months. Citing his "active advocacy of biomedical research as a necessary national investment" the NIH Alumni Association has selected Rep. William H. Natcher (D-Ky.), chairman of the House Appropriations Committee, to receive its first NIHAA Public Service Award. The award was established in 1992 by the NIHAA board of directors to recognize individuals who have rendered outstanding service through strengthening public understanding and support of biomedical research.