

"Still
The Second
Best Thing
About Payday"

The NIH Record

African American History

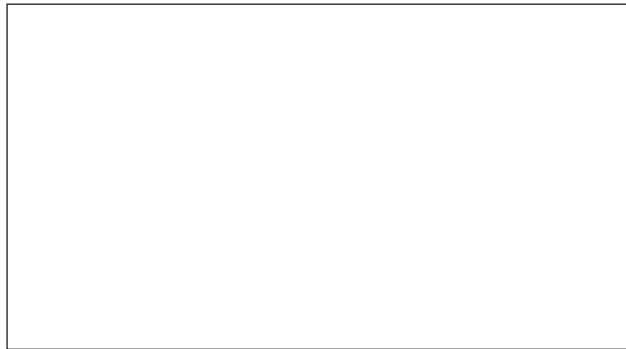
Annual NIH Observance Offers Cultural Tour

By Carla Garnett

NIH's 1995 observance of Black History Month covered a wide range of African American culture, from studies of ancient Africa and the beginning of civilization to exploration of such current health issues as bone marrow transplantation and melanin. Adding to the variety were presentations of poetry, gospel, jazz and pop music, and a stage drama. NIH's new African American Employment Program Manager Carlton Coleman was also introduced during the month. Appointed to the post last December, he also holds the position of Disability Employment Program manager in NIH's Office of Equal Opportunity.

Rediscovering Ancient Roots

Keynote speaker Anthony Browder, director of the Institute of Karmic Guidance, kicked off the month of activities with his discussion, "Nile Valley Contributions to Civilization," at the Feb. 1 opening program sponsored by OEO. Using slides of ancient African art and architecture, he depicted a starkly different concept of



A candlelight ceremony recognizing people needing bone marrow transplants was a highlight of NIH's Black History Month activities. Participants included (from l) Dr. Clive Callender, minority transplant pioneer; Dr. John Ruffin, NIH associate director for research on minority health; NIH director Dr. Harold Varmus; and NIH deputy director Dr. Ruth Kirschstein.

(See **BLACK HISTORY**, Page 6)

Breast Feeding Advice Lags, NICHD Study Finds

By Robert Bock

A nationwide survey supported by NICHD has found that a majority of physicians in three specialties likely to come in contact with new mothers are not prepared to offer effective counseling and support on breast feeding.

The study, which appeared in the Feb. 8 issue of the *Journal of the American Medical Association*, was conducted by a research team led by Dr. Gary L. Freed of the University of North Carolina, Chapel Hill.

Breast-fed infants, the authors noted, have fewer ear, respiratory, skin, and diarrheal illnesses than infants on formula. Moreover, the American Academy of Pediatrics, the American Academy of Family Physicians, and the American College of Obstetricians and Gynecologists have all issued statements recognizing the beneficial effects of breast feeding and encouraging their members to promote the practice.

Despite the recognized benefits of breast feeding, the authors continued, only half of American mothers undertake the practice, and fewer than 20 percent continue breast

(See **BREAST FEEDING**, Page 2)

IL-2 Benefits Cell Counts In HIV-Positive People

By Greg Folkers

In a small number of HIV-infected patients, infusions of an immune system protein significantly increased levels of the infection-fighting white blood cells normally destroyed during HIV infection, according to researchers at NIAID.

As reported recently in the *New England Journal of Medicine*, NIAID clinical director Dr. H. Clifford Lane, Dr. Joseph A. Kovacs of the Clinical Center's critical care medicine department, and their colleagues found that interleukin-2 (IL-2) boosted levels of CD4+ T cells in some patients for more than 2 years, a far longer time than typically seen with currently available anti-HIV drugs.

"This study provides the strongest evidence so far that it may be possible to rebuild and maintain the damaged immune systems of HIV-infected individuals," says Lane. "Ongoing studies of intermittent infusions of IL-2 will determine whether the increases in CD4+ T-cell counts seen in this trial will translate into clinical benefits."

In the NIAID study, patients received IL-2 intravenously for 5 consecutive days every 2 months. All participants took at least one approved antiretroviral drug such as zidovudine (AZT) or didanosine (ddI) during

(See **IL-2 TRIAL**, Page 8)

Subsidized Pleasure

NIH's Find Vanpoolers Have More Fun, Save \$\$

By Rich McManus

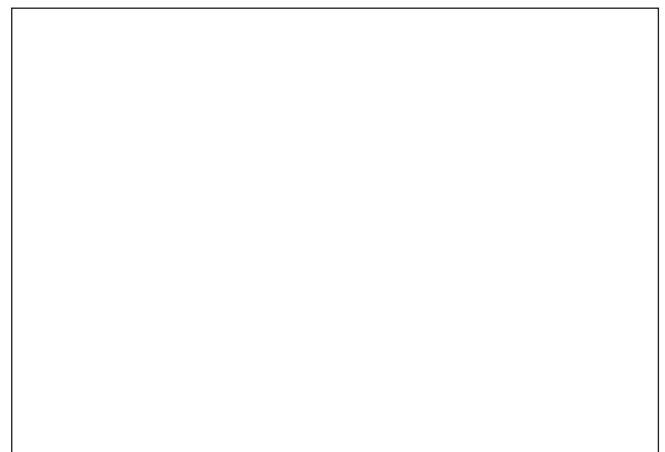
What could be sadder than the solitary ego and his or her single-occupant vehicle—the pitiful SOV—solemnly negotiating the morning and evening rush hours in tin envelopes of solipsism? Sure, you get to choose the radio channel, and no one challenges your politics or point of view, but look at what you're missing by driving alone instead of belonging to your friendly neighborhood vanpool:

✧ A chance to snag some extra z's in the morning (most vanpoolers interviewed for this story say their rigs are comatose in the a.m., convivial in the p.m.);

✧ Big-time savings in car-operating costs including insurance, wear-and-tear, and fuel;

✧ A community of friendly associates who like to josh, rib, poke fun, kibitz, remember birthdays, host Super Bowl parties, go out to lunch together, and generally add luster to your better lights.

There are about five official vanpools (with about 70 riders) serving NIH at the moment, reports Gail Thorsen of the Division of Security Operations' Employee Transportation Services Office, part of the Office of Research Services, "and probably more unofficial ones." The "official" vanpools—bold communes of the commuting age—are subsidized by the



Bldg. 1's Bonnie McKenzie (l) and Janet Pritts stand by their van, conveniently parked just outside their offices.

(See **VANPOOLING**, Page 4)

BREAST FEEDING

(Continued from Page 1)

feeding their infants through 5 to 6 months of age.

Earlier research, the authors wrote, has shown that appropriate counseling and encouragement from physicians could increase the numbers of women who breast feed and result in their breast feeding for longer periods of time. To this end, they sought to assess the breast-feeding knowledge, attitudes, training and experience of a nationally representative sample of physicians.

The investigators surveyed 3,115 residents and 1,920 practicing physicians in pediatrics, obstetrics and gynecology, and family medicine. Of the 68 percent who responded, most lacked knowledge of the benefits of breast feeding as well as how to advise women who were breast feeding.

Most of the residents surveyed said they received little instruction in breast feeding as part of their residency training. In all, 77 percent of pediatric residents, 46 percent of obstetric/gynecologic residents and 69 percent of family medicine residents reported that their instruction had been limited to attending classroom lectures on the topic. Only 25 percent of residents had benefited from techniques that offered greater activity for in-depth learning, such as demonstration

and videotape.

Roughly 70 percent of senior obstetric/gynecology residents and more than 70 percent of practicing obstetricians/gynecologists and pediatricians felt they received "less than adequate" or no training for providing breast feeding support.

The physicians' responses demonstrated their lack of training. More than 25 percent of all respondents did not agree that exclusive breast feeding was the most effective form of infant feeding available—a

The physicians' responses demonstrated their lack of training.

sentiment at odds with position statements issued by all three of the respondents' major professional societies.

Among practicing physicians, 65 percent of family physicians, 47 percent of obstetricians/gynecologists, and 71 percent of pediatricians agreed that breast feeding would reduce the incidence of otitis media (ear infections).

Fewer than half of the residents knew how to counsel the mother of an otherwise healthy but jaundiced breast feeding infant or knew that a breast abscess did not require a mother to stop breast feeding.

NIST Honors NCRR's Richard Leapman

Not only did NCRR's Dr. Richard Leapman win the prestigious Samuel Wesley Stratton Award from the National Institute of Standards and Technology, he is the first person outside of NIST to be so honored. Sharing the \$5,000 prize with Dr. Dale Newbury of NIST, he received a plaque for developing a trace elemental analysis technique that works at the nanometer scale, measuring in billionths per meter. NIST presents the Stratton award annually to scientists or engineers for unusual yet significant research contributions.

During the past 3 years, Leapman, a physical scientist in NCRR's Biomedical

Engineering and Instrumentation Program, and Newbury have collaborated on a technique that combines electron microscopy and spectroscopy to measure low concentrations of an element at high spatial resolution. For the first time, they have shown that it is possible to detect as few as two to five atoms of an element within an individual nanometer-sized structure.

Leapman is collaborating with intramural investigators to apply the method to structural and cellular biological research. He is working with scientists in the Laboratory of Neurobiology, NINDS, to measure minute levels of calcium in the nervous system.

"The extent of resident and practicing physician knowledge deficits regarding breast feeding poses a true threat to successful breast-feeding initiation and duration," the authors wrote.

The authors added that physicians who do not understand the benefits of breast feeding will, at best, fail to tell expectant mothers that breast feeding is the preferred form of infant nutrition and, at worst, may convey that breast feeding is simply not worth the trouble.

Similarly, physicians lacking in the knowledge of breast-feeding specifics may provide incorrect advice to women experiencing problems, perhaps leading the women to abandon the practice prematurely.

The authors recommended that in the future, residency programs offer the clinically based training that residents would need to promote breast feeding for expectant mothers and to counsel them when necessary. Residents should also receive instruction on the use of breast pumps and the storage of breast milk, and how to advise women who wish to continue breast feeding after returning to work.

Freed advised expectant mothers who do not have any knowledge of breast feeding to first ask their physicians if they can provide the necessary counseling. In addition, the hospitals where they are planning to give birth may also offer breast-feeding classes. Lay language publications on breast feeding may also be available through local libraries and bookstores. □

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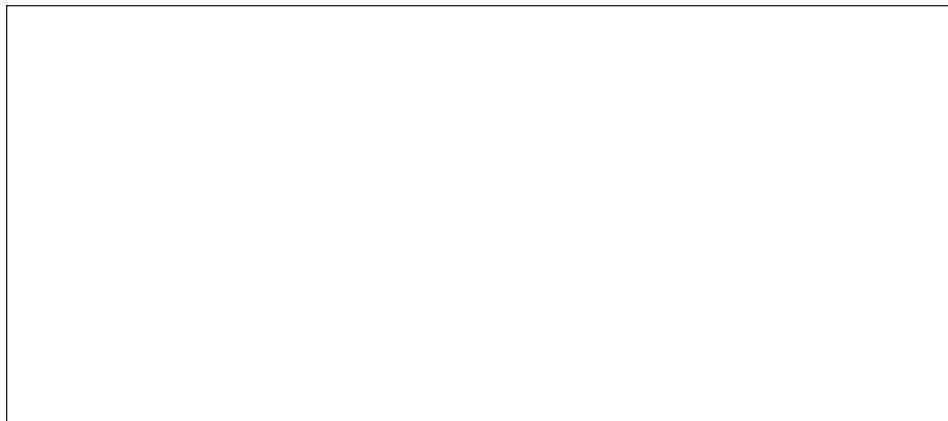
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Dr. Richard Leapman (second from r) receives his letter of notification for the Stratton Award in his NIH laboratory. Dr. Rance Velapoldi (second from l), chief of NIST's Chemical Science and Technology Laboratory, presents the letter in the presence of coawardee Dr. Dale Newbury (c), Dr. Henry Eden (l), BEIP's acting director and Dr. Judith Vaitukaitis, NCRR director.

Magnesium Linked to Lower Incidence of Cerebral Palsy

A new study shows that very low birth weight babies have a lower incidence of cerebral palsy (CP) when their mothers are treated with magnesium sulfate soon before giving birth. The findings come from a study sponsored by the California Birth Defects Monitoring Program (CBDMP) and NINDS and reported in the February issue of *Pediatrics*.

The study compared a group of 42 very low birth weight children who had moderate or severe congenital CP to a control group of 75 very low birth weight children without the disability. Three of the 42 mothers of children with CP and 29 of the 75 mothers of children in the control group received magnesium sulfate during pregnancy. The researchers concluded that magnesium sulfate seems to have a protective effect against CP in very low birth weight infants.

The investigators caution however that more research will be required to establish a definitive relationship between the drug and prevention of the disorder. The current study results are based on observations of a group of children born in four northern California counties.

"This intriguing finding means that use of a simple medication could significantly decrease the incidence of cerebral palsy and prevent lifelong disability and suffering for thousands of Americans," said Dr. Zach W. Hall, NINDS director.

CP is a serious disorder that causes problems in movement control in more than half a million Americans at an estimated cost of \$5 billion a year. Many people with CP suffer additional neurological disabilities, including mental retardation and epilepsy. More than 25 percent of all CP occurs in

very low birth weight babies, defined as those born weighing less than 1,500 grams, or 3.3 pounds. There are approximately 52,000 very low birth weight babies born each year. Of these, 1 in 20 who survives infancy has CP.

"Although medicine has made striking advances in allowing more preterm babies to survive," said Dr. Karin B. Nelson, acting chief of NINDS's Neuroepidemiology Branch and lead author of the paper, "some of these children face grievous, lifelong disabilities. We hope the findings from our study will help prevent cerebral palsy in some of these vulnerable infants."

Magnesium sulfate, an inexpensive natural chemical, is commonly used in the United States by obstetricians to prevent preterm labor or to treat preeclampsia, high blood pressure brought on by pregnancy.

Nelson and coauthor Dr. Judith K. Grether of CBDMP have not yet compiled data on the exact dosages of magnesium sulfate administered or on the time of treatment relative to the time of birth. This information is important since it takes 2 to 3 hours for magnesium sulfate to reach the fetus.

The study authors speculate that magnesium may play a role in brain development and possibly prevent cerebral hemorrhage in preterm infants. Although the precise mechanism for this effect is not known, several suggestions for effectiveness can be cited. An earlier study has shown higher survival rates in infants born weighing less than 1,000 grams whose mothers were given magnesium sulfate; and in animal models magnesium has been associated with decreased brain injury after the brain has been deprived of oxygen.—Margo Warren □

Autoimmune Diseases in Women Examined

The third program of the Women's Health Seminar Series focuses on "Autoimmune Diseases in Women" at 2 p.m. on Mar. 21 in Lipsett Amphitheater, Bldg. 10. The program will open with Dr. Michael Lockshin, acting NIAMS director, who will provide an overview of the seminar.

The first lecture, presented by Dr. Jill Buyon, director of the lupus clinic at the Hospital for Joint Diseases, will focus on the "Effects of Pregnancy on Autoimmune Diseases." Most patients with autoimmune rheumatic diseases are young women. Because young women become pregnant, autoimmune diseases and pregnancy often coexist, leading doctors to believe—in the absence of clear proof—that pregnancy induces or worsens autoimmune disease.

Dr. Noel Rose, director of immunology and of the World Health Organization Collaborating Center for Autoimmune Diseases at Johns Hopkins University School of Medicine, will follow with a discussion on "Gender Disparity, Controversy, and Research Needs and Opportunities." He will discuss a recent study at Johns Hopkins indicating that susceptibility to autoimmune thyroid disease depends not only on racial (genetic) factors, but also on age and sex.

The final lecture, "Gender Differences in Animal Models for Multiple Sclerosis," will be made by Dr. Caroline Whitacre, chair of the department of medical microbiology and immunology at Ohio State University.

The program will conclude with a question-and-answer period with the three speakers.

The Women's Health Seminar Series is sponsored by the women's health seminar committee of the Office of Research on Women's Health. The four-part series includes current research findings by nationally recognized experts. The next seminar will focus on "Physical Fitness" on May 30. Admission is free and open to the public. For more information, call 2-1770. □

Male-Female Brain Differences Reported in Language Study

A team of researchers supported by NICHD has shown that men and women use fundamentally different regions of the brain when responding to language. The finding indicates that future studies of language function need to include both men and women.

"The results of this study contribute to our understanding of the broader issue of individual differences in cognitive performance and how they relate to differences in underlying brain organization," said Dr. Bennett A. Shaywitz of the departments of pediatrics and neurology at Yale University School of Medicine. The study appeared in the Feb. 16 issue of *Nature*.

In the study, the researchers used a sophisticated brain-imaging technique known as echo-planar functional magnetic resonance imaging, or fMRI, to identify which brain regions were activated during various linguistic tasks. In all, 19 men and 19 women were studied, all of them right-handed.

Specifically, the researchers investigated brain activation patterns during orthographic (letter recognition), phonological (rhyming), and semantic (word meaning and use) tasks.

For the task involving rhyming, brain activation differed significantly between the men and women. Principally, the men's brain activity was limited to the left hemisphere, in the brain region known as the left inferior frontal gyrus. In contrast, the women showed activation not only in the left inferior frontal gyrus, but also in the corresponding area in the right hemisphere, the right inferior frontal gyrus.

"This finding is an extremely important milestone in our understanding of language ability, and provides an explanation for why females may recover from brain injury more effectively than males and why female dyslexics have a higher rate of compensation than male dyslexics," said Dr. G. Reid Lyon, director of extramural research programs in learning disabilities at NICHD's Human Learning and Behavior Branch. "Future studies of the neural mechanisms of language will need to take gender differences into account."

Lyon also stated that the study demonstrated the importance of conducting well designed investigations that provide a clear window on how brain activity is associated with complex behaviors. □

Director's Seminar Set, Mar. 24

The next speaker in the NIH Director's Seminar Series will be Dr. Mary Cecilia Dasso, who will address "The Role of RCC-1 and 'Ran' in Cell Cycle Control and Interphase Nuclear Function," on Friday, Mar. 24 at noon in Bldg. 1, Wilson Hall.

VANPOOLING

(Continued from Page 1)

Transshare program at NIH, which pays up to \$40 each month to members. In vanpools, riders fork over the Transshare subsidy to the vanpool organizer, plus a small fee, and that's their total payment for the month. Some pools have somewhat different fee structures. But no matter how you tote the figures, it is considerably cheaper in most cases to ride in company than to bustle along alone.

"We have a lot of fun." Repeat that to yourself 10 times. That's what it's like to interview people who belong to vanpools at NIH. It is the mantra of the Soaked Set—those who are In The Pool.

Come On In, The Water's Fine

"Make the article real positive. Show everybody what a great idea vanpooling is. Get them excited." That's Janet Pritts talking. She works in ORS headquarters in Bldg. 1, and has been a pooler since 1982. Her pool coalesces in Frederick, Md., each morning at 6:15 at the shopping center on Seventh St. Tonight, a Friday, at 4:30, as they pull away from privileged parking a bagel's toss from Pritt's office window, her pool, headed by her pal Bonnie McKenzie, will feast on a shrimp hors d'oeuvres platter and enjoy the TGIF atmosphere.

Okay, so this pool is zipping along in the almost empty HOV lane, improving the hour, and saving some bucks. And there you are, tootling alone in bumper-to-bumper traffic, listening to NPR announcers mouth the syllables of the evening news. You've heard the newscast twice now, and are beginning to wonder why the announcer reads his own name like it's the lead sentence of the hour's top story. Cut!

"We all hate NPR," boom Pritts and McKenzie. "It's the only rule we have on the van—no NPR! One more news story and we're going to throw up!"

Like many commuters from the Frederickward direction, Pritts, McKenzie and most of their vanpool riders were once part of the 38 riders on the "B.J. Express," a bus operated by now-retired Clinical Center social worker Bob Jones. When Jones said sayonara a year ago, those on the bus broke into smaller cells and joined vanpools.

"I think we're probably the cheapest van rate coming down the road," boasts Pritts, who said cost-savings—not necessarily bonhomie—prompted members to join their pool last December. Calling themselves "The Corporate 12," the McKenzie/Pritts pool (actually 14 people) simply donned their accounting visors, did the math and decided vanpooling, like many other things, is cheaper by the dozen.

"I can't imagine why more people don't do it," Pritts said.

The rules for vanpooling are simple: you need a minimum of nine people to qualify for Transshare. Most NIH'ers lease with a company called VPSI, which provides specially designed 1994 Dodge vans with

seating arrangements that don't require awkward scrambling to enter/exit and offer such amenities as individual reading lights and heating/air conditioning controls at each seat. Leases are short-term, breakable after only 30 days if patrons aren't satisfied. "[VPSI] does the taxes, tags, insurance, maintenance, repair and replacement if the van breaks down. There's nothing to lose," McKenzie said. "All costs are fixed except gas," adds Pritts.

VPSI provides 24-hour road service, a mobile mechanic who will come to the NIH campus to make repairs if needed, and issues reimbursable vouchers for minor repairs paid for by lessees.

The company requires that those who volunteer as drivers submit to an inspection of their driving records by the department of motor vehicles. Those who sign the lease, however, are permitted to use the van on weekends, provided they stay within a 200-mile radius.

"We were scared at the beginning," McKenzie admits. "It seemed like a big responsibility that we didn't know if we wanted to take on." Both she and Pritts had, at one time in their lives, been committed solo drivers, each insistent on having a car available at work for errands during the day. But those days are long over, victim in no small part to a campus parking crunch that makes leaving during the day a risky proposition if you want to park anywhere near your building when you return.

"We're a close-knit group," says McKenzie. "Drivers and riders pay the same monthly fee and everybody takes on a certain bit of responsibility for the van, whether it's filling it up with gas, washing it, scraping the ice from the windows, or collecting the monthly fees and doing the banking chores. We all do our part to make it work. Our objective was to get to work the easiest and most economical way and that takes a cooperative effort."

"We celebrate birthdays—Bonnie brought trays of Danish for my birthday yesterday—and we occasionally go out and do a Vanpoolers Lunch. You become a family," Pritts adds.

Almost Heaven, West Virginia

John Maynard, an NCRR instrument technician in Bldg. 13 who bears a striking resemblance to quarterback Joe Montana, is what you might call a Committed Vanpooler. He rises each workday at his home in Martinsburg, W.Va., at 4:30 a.m., fires up his own 1994 Dodge van and drives 45 minutes to Frederick, where he meets the 14 members of his pool at the Service Merchandise discount store on the Golden Mile.

Departing at 6 a.m., he arrives on campus around 7, leaving about half his passengers in Bldg. 10, the other half in 31. At 4 p.m. he does the process in reverse, reaching Frederick by 5 and finally arriving home around 6 o'clock. Each rider signs over the Transshare payment, plus \$30 a month, to Maynard, who admits he realizes "a little

Rosa Snell has vanpooled from Prince George's County for more than 8 years.

profit."

Like Pritts, many of the riders on his van are B.J. Express alumni who have found a new set of roadmates.

"We clown around and stuff, pick on each other," says the laconic Maynard. Then, with a smile, "What I got is me and 12 women, so..."

A native of Parkersburg, W.Va., Maynard, a 3-year NIH vet who belonged to another vanpool during his first year here (he was at the power plant then), came to NIH from Charleston, S.C., where he worked at the Navy shipyard. It was there that he got the vanpool bug, commuting 45 minutes each way in a truck full of men.

It's definitely more fun riding with a predominantly female crowd, he says. "A coworker of mine said he'd [drive the van]—and he don't even live up there—just because of the 12 women."

Once, when Maynard's wife went out of town for a few weeks, his vanpoolers took turns packing him lunches.

Last Christmas, he mentioned that he had been looking for a replica of the original Cooperstown Hall of Fame baseball shirt, which sells, he guesses, for around \$200. "The members found one and gave it to me as a gift," he says.

Proud of his reliability as a driver—"I haven't missed a day this year"—Maynard did have to turn over the wheel to Mary Phelps once when he went on vacation. "My only request was that, when I got back, the van be returned to me in clean shape."

His vanpoolers took reckless advantage: "We hung lace curtains, put flowers in there, covered his dashboard with magnets," giggles Ginger Everhart, one of Maynard's riders who has become a close friend. "We stuck a bunch of girl things in there like lace tablecloth on the van console. He took 'em all down that weekend."

Impromptu decorating sessions aside, Maynard says, "everybody's pretty friendly. We have happy hour after work sometimes. We'll all go somewhere. To me, every hour is a happy hour on the van. Every day

they're fun to be with."

"John drinks his Diet Cokes, and everyone else is festive," says Everhart. "We harass him all the way home—that's his happy hour."

An administrative technician in the NIDR executive office who is closing in on her fourth year here, Everhart used to drive in from Frederick with a neighbor. When that arrangement changed, she consulted with Thorsen at ETSO and learned of Maynard's vanpool, which she's been in for a year.

"It's fun. We've gotten close, we have a really great time," she says. "The ride to work isn't as stressful. We laugh the whole way through. We have a joke teller—Steve Gearing. And then there's Charlie, the van mascot, who's a plastic parrot. It's like a big family. We sing carols at Christmas time—it's really corny. Then we sing [popular] songs, and get louder if the tune antagonizes someone.

"We sort of ignore the bad times, and the bad moods. We pick on John a lot. He doesn't mind. That's why it's so fun."

On social occasions where spouses who don't belong to the pool mingle, it's not uncommon to hear the phrase, "So you're the one who..." says Everhart.

A Van from P.G. County

Like Pritts and McKenzie, who forswear the self-serious tones of network news while commuting, Rosa Snell and her 15 passengers out of Prince George's County have a little onboard rule themselves: "We try not to talk about work too much."

It's okay to talk sports, or O.J., or religion, but don't be going on about the NI of H.

"In the mornings, people usually sleep or read," says Snell. "We've got our talkers and our nontalkers. We've got some Bible readers...But in the evening, we talk a lot. There's a lot of laughter. Certain ones we beat up on a little bit just for fun. We've been together for so long we're like a family. We know when someone's sick, or happy or sad."

At NIH for almost 30 years, Snell, an NHLBI supervisory personnel management specialist, started carpooling in 1985. Her fellow carpooler started a vanpool shortly thereafter, then retired, leaving Snell coordinator since 1988.

Unlike the Frederick vans, Snell's has two main pick-up points: on Auth Rd. in Marlow Heights, where 10 NIH'ers board the van, then a few stops around the Beltway to Central Ave., where five more get on.

"We'll leave 'em in the morning, but not in the evening," declares Snell. "We run on schedule. We give them 1 minute."

She takes the van home at night, keeps it gassed up and coordinates repairs. There are four drivers, two men and two women, who swap duties based on an honor system.

"You have to drive 1 week a month," says Snell, who is authorized to drive, "but only in an emergency. I just leave it up to the drivers to work it out themselves. The van always runs no matter what."

Drivers get a discount, paying only one-quarter of what riders pay.

Did many hands shoot up to volunteer? "No, we've had to twist arms."

Snell leases through VPSI, and reports smooth relations with them. "They're excellent," she says. "I would recommend [vanpooling] to other people. I've had several calls from interested people wanting to get a pool started."

Pritts and McKenzie have gone so far as to volunteer to do a brief presentation on the joys of vanpooling for any interested NIH'ers.

"I've got a waiting list of five people who want to join," Snell adds. "Gail [Thorsen of ETSO] sends me a quarterly list of interested parties. Her office has worked really well with us."

Asked why she's willing to assume the coordinator role, Snell responds, with a laugh, "I threaten to give up periodically because people don't pay. I agreed at first to do it for a couple of years—I still have it, unfortunately. But it's worked well. I like the people."

Snell's van likes to have the occasional group picnic or holiday get-together. "We do try to get together a couple of times a year for a little fellowship. Most try to attend."

Out of 15 people on her van, only 3 are

"We've been together for so long we're like a family. We know when someone's sick, or happy or sad."

men. "I don't think the men want to be obligated," says Snell when asked why more women seem to vanpool than men. "They may have places to go in the evening."

If it's not their week to drive, some of the men in Snell's pool will actually drive alone to work, she said.

"Women like to relax more," Snell theorizes. "We've had more women drivers than men—they're good drivers, too."

She concludes, "It's a happy van. I've made a lot of friends. Learned some things, too."

So what are you waiting for? If you could have heard the way Snell made that last comment, you might well be intrigued enough to try vanpooling, simply for the education. If you want to get wet, call Thorsen at ETSO, 2-7433. Everybody into the pool! □

String Quartet To Perform

The last concert in the FAES 1994-1995 music series will be held Sunday, Mar. 19 at 4 p.m. in Masur Auditorium featuring the Borromeo String Quartet. Tickets at the door are \$20 cash or check; postdoctoral fellows and students pay \$10. For information call 6-7975. □

NHLBI's Lenfant Honored

NHLBI director Dr. Claude Lenfant was awarded the Distinguished Executive Service Award from the Senior Executive Association (SEA), a nonprofit, professional association that represents the interests of more than 7,000 senior executive service men and women.

Located in Washington, D.C., since 1980, SEA recognized Lenfant's overall career achievements. SEA cited his skills in initiating and managing highly visible, complex, and sensitive programs of national and international scope, as well as for a history of outstanding leadership and management and development of research programs.

At this year's awards, accolades were expressed at a ceremony held at the National Press Club. Lenfant was presented a certificate and an award, an inscribed pewter tray.

Lenfant has held many executive positions. He began his career in the Public Health Service as associate director for lung programs at the then National Heart and Lung Institute in 1970 and also assumed the position of acting associate director for collaborative research and development programs. Under his direction, the program evolved into the Division of Lung Diseases, formed in 1972.

He continued to direct the Division of Lung Diseases until he became NIH associate director for international research and director of the Fogarty International Center in 1981. In 1982, he was appointed NHLBI director.

Lenfant's other honors include the HEW Superior Service Honor Award, Senior Executive Service Performance Awards, the American Heart Association Scientific Councils' Distinguished Achievement Award, the Presidential Meritorious Executive Rank Award, and the Brotherhood Award from the Association of Black Cardiologists. He also was named Distinguished Executive of Senior Executive Service in 1991 and Federal Executive of the Year in 1992 by the Institute Alumni Association, and in 1993, received the Surgeon General's Exemplary Award. □

Chamber Music Concert Set

The Rock Creek Chamber Players will perform at 3 p.m. on Sunday, Mar. 19 in the 14th floor assembly hall, Bldg. 10. The program will include Haydn's 1794-95 piano trio in E major, Barber's *Dover Beach*, Liszt's arrangement for solo piano of the Liebestod from Wagner's *Tristan und Isolde*, and Martinu's sonata for flute and piano. The concert, which is free and open to all, is sponsored by the Clinical Center's recreation therapy section. For more information call (202) 337-8710. □

BLACK HISTORY

(Continued from Page 1)

world history in which popularly recognized icons generally thought to have originated from the culture of Greeks and other nationalities were actually developed instead by early African civilizations.

"We're the best kept secret on Earth," he declared, pointing out African bone structure features in photos of the famous Sphinx sculpture and marked architectural similarities between the Greek-named obelisks and African structures that predate the towers by centuries. A symbol used in monuments around the world including the local Washington Monument, Browder said, obelisks were first designed by African people as religious memorials.

An educator and author, Browder encouraged reexamination of some widely held historical beliefs that exclude the influence and contributions of African heritage on modern society.

"You cannot limit the accomplishments of the oldest people on this planet to 1 month out of a year," he concluded. "When people say, 'There is no reason to celebrate Black History Month, you all have come so far,' we

"Skeletons of populations with so-called Negroid features have been found at various locations from various periods of ancient Egyptian history," he said. "But skeletons from other ancient Egyptian populations were erroneously assumed to be Caucasian because their features differed from those of so-called 'Negroes' (e.g., Hamitic, Mediterranean). These 'Caucasoid Hamites' are now known to be anatomically and genetically more closely related to all other African populations—including 'Negroes'—than to any Caucasian populations."

Misidentification of skeletal remains—often the only documentation of ancient civilizations—led many scientists to make the wrong conclusions about the racial makeup in Ancient Egypt and other parts of Africa, he continued.

A former NIH clinical pharmacy resident who earned his Ph.D. in pharmacology from USUHS, Crawford showed that cursory examination of ancient bone structures is not adequate to define and characterize early African ancestry accurately. The most

definitive anthropologic studies, he said, include mitochondrial DNA, serogenetics, multivariate analysis of cranial features, measurements of stature and analysis of skin melanin content. "These methods," he explained, "clearly establish the ancient Egyptians as members of the great family of African peoples."

Results of these more accurate studies need to be disseminated in forums such as these, Crawford concluded, in order for the true range of contributions by Black African civilizations to be fully appreciated. Until recently, he said, historians have "focused mainly on Egyptians, and neglected

other African civilizations."

Monique Moore of NCI provided a *capella* musical selections for the program, which was followed by a book signing with Crawford. His research on ancient African civilizations was included in a chapter of the book, *Egypt, Child of Africa*, now on sale. Proceeds from the sales benefit NIH's BIG; to purchase copies, contact Ivan Wallace, 6-5775.

Also speaking at BIG's observance was Oscar Eason, BIG's newly elected national president, who congratulated NIH's chapter on its leadership in recent years. "This is the kind of chapter I love," he said, "one that is doing exactly what it's supposed to be doing—leading the way for African Americans in federal service all over the country."

Nurturing the Extended-Family Tree

Continuing NIH's annual tradition of linking a labor of love with the holiday of love, the Black History Month observance continued on Valentine's Day with the bone marrow donation awareness and recruitment drive, cosponsored by OEO and NIH's Black employees advisory committee.

Keynote speaker Dr. Walter Broadnax,

HHS deputy secretary for health, told the story of a 25-year-old African American single mother who launched a shoestring marrow donation education and recruitment campaign about a year ago. The woman had been diagnosed with leukemia, and a bone marrow transplant was her best hope for survival.

Unfortunately she did not find a donor, and her health is not good.

"It's a difficult task to ask someone to save your life," Broadnax said, "but for patients with leukemia, aplastic anemia and some other blood disorders a marrow transplant is their only chance."

Close genetic matching is more important in bone marrow transplantation—where the patient's own bone marrow can more readily reject the donor marrow—than in transplantation of any other organ, he pointed out. One and a half million people have registered with the National Marrow Donor Program since it began in 1987, he said, but only 100,000 of them are African American. More than 2,500 Caucasian patients have received a marrow transplant through a match from the registry, but only 69 African Americans have had the same chance.

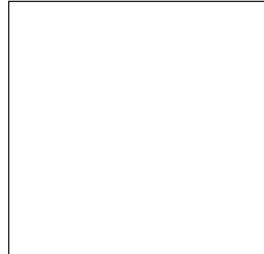
"We have to be an extended family for each other," Broadnax concluded, quoting a Black father who had appealed 2 years ago to the African American community for a donor for his 21-year-old daughter. "To save a single life is to save an entire world. That's the great power we celebrate today."

Two women who had exercised their power to save a life—two bone marrow donors—frankly described their experiences with the program, including the series of preliminary tests, the emotional upheavals and the slight discomfort following donation.

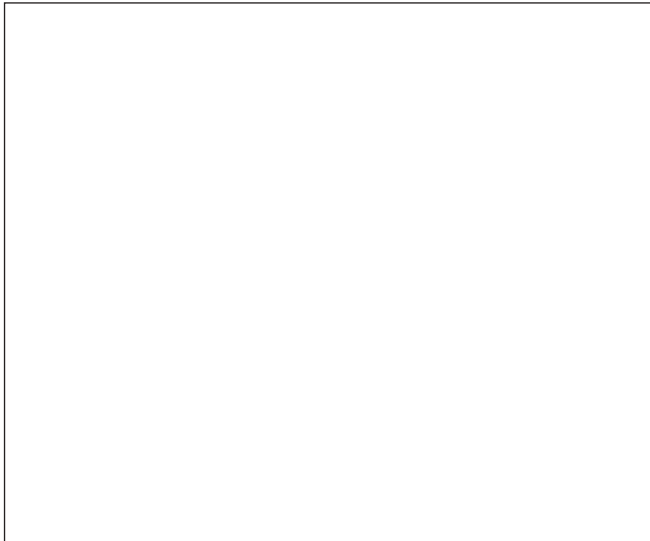
"I was going to be uncomfortable for a day, maybe a week," said donor Jan Crase, "but this woman needed something for the rest of her life... There is no greater feeling than to know that you have saved a life."

'Have Faith'

Inspiring words were also offered by Dr. Clive Callender, director of Howard University Hospital's Transplant Center, the only minority-operated dialysis and transplant center in the country. He described his life in terms of a hypothetical autobiography he said he would title, "From Birth to MOTTEP [Minority Organ/Tissue Transplant Education Program]." He founded MOTTEP in 1991 after becoming aware of the low ratio of



Dr. Walter Broadnax



The Dunbar High School Choir provided music for the Black History kickoff program on Feb. 1.

Photos: Bill and Ernie Branson

need to remind them how much further we have to go."

The Dunbar High School Choir provided music for the kickoff, which also featured original poetry—"Surviving in Life" and "Our Battle Will Never Be Over"—by Harriette E. Bell, an NIAID administrative technician.

Dr. Keith Crawford, an NIDDK staff fellow, delved deeper into specific ancient African civilizations with his lecture, "Racial Identity of Ancient Egyptian Populations Based on Analysis of Physical Remains," sponsored on Feb. 9 by NIH's chapter of Blacks in Government (BIG). A student of archaeology for the past 14 years, he said the wide variability of ancient African people has not fully been understood or characterized by many anthropologists.

African American donors to potential recipients on national transplant registries. NIH's Office of Research on Minority Health awarded a \$1.2 million contract to the now renowned MOTTEP for 1993-1995, which allowed the program to expand to 11 cities.

An identical twin who faced tragedy very early in his life when his mother died shortly after delivering him and his brother, Callender frequently repeated what he said had become his theme early in life: "Obstacles are but stepping stones to success."

As he gave details of his life, his adopted philosophy became easier to understand. Reared by an aunt while his father worked on a railroad, Callender said he realized at the age of 7 that he wanted to be a doctor and travel as a medical missionary to Africa, providing his medical skills to needy populations. However, he was a poor student and his teachers and academic advisors kept urging him to make less challenging career plans. To make matters worse, at 15 he contracted pulmonary tuberculosis for which major surgery—part of a lung was removed—and a 6-month rehabilitation were required.

But relying on his strong religious foundation, Callender said, he became only more determined to battle back through such opposition.

"The difficult is easy," he said, repeating the mantra that

delivered him to his current success, "the impossible, possible, if you believe in God, have faith, work hard and—then if you are not afraid after you've been successful—give God the glory."

Explaining the special need for a strong minority recruitment effort in organ transplantation, NIH director Dr. Harold Varmus said because of their genetic diversity, African Americans have particular difficulty finding the exact HLA (a gene cluster on chromosome 6) matches needed for successful transplants.

"An average African American seeking a compatible transplant donor has about a 15 percent chance of finding such a donor in the donor bank compared to a 50 or 60 or 70 percent chance for a European, or Native American or Hispanic person," he said. "So the rich cultural and racial diversity that's implicit in being an African American has its disadvantage in this one context. That's why it's extremely important that we have such a particularly large collection of African American potential donors in the registry.

"Fortunately," Varmus continued, "over the last few years the NIH registry has been particularly well endowed with registrants from the African American community. We do much better here at NIH than is done nationally."

Cast members from the play Our Young Black Men Are Dying...join Jalil Mutakabbir, former NIH Black Employment Program manager who retired recently, and Carlton Coleman (r), who now manages the program.

Speakers at the awareness program, joined by NIH associate director for research on minority health Dr. John Ruffin and OEO Director Naomi Churchill, also took part in a special ceremony during which candles were lit to symbolize hope for transplant recipients. The band Skyz the Limit, which performed several jazz and popular tunes during the program, also provided musical accompaniment, "You Light Up My Life," for the candlelight ceremony.

On Feb. 21, the play "Our Young Black Men Are Dying and Nobody Seems to Care" was presented to a capacity crowd in Masur Auditorium. A series of vignettes connected by a recurrent theme—"I don't care what this world does to me, I will not let it destroy me"—the play featured a three-man cast illustrating an African American male's perspective on such issues as alcoholism, suicide, domestic violence, AIDS, the war on drug abuse, genocide, education and death row. "Our complacency is our death," intoned one character, commenting on the violence that the otherwise vocal minority community has allowed to run rampant in many U.S. cities, particularly those with large populations of African Americans.

The critically acclaimed play—really an expanded and periodically updated letter written by a down-and-out James Chapman to his mother as he contemplated suicide at age 23—premiered in 1990 in Dayton, Ohio, and has been staged for audiences nationwide by the nonprofit organization Living the Dream, Inc.

In the final, poignant scene in which names—provided by audience members during intermission—were read of dozens of young Black men whose lives ended early due to violence, the cast implored the audience not to stop caring about the Black male population: "Though we stand atop a mountain of hopelessness," they declared, "we still have hope. Though our dreams are tattered and torn, we still dream."

Wrapping up NIH's African American Month observance, the annual luncheon featuring keynote speaker Dr. John Chissell was held at the Howard University Hotel on Feb. 24. Chissell spoke on "Melanin and Optimal Health." □

National Donor Recognition Ceremony, Apr. 2 in Great Hall

The Department of Health and Human Services invites all federal employees who are transplant recipients or donor family members to participate in the National Donor Recognition Ceremony scheduled for Sunday, Apr. 2 from 1 to 2:30 p.m. in the Great Hall, Hubert H. Humphrey Bldg., 200 Independence Ave., SW, Washington, D.C.

The purpose of this event is to honor organ and tissue donors from around the country. In 1993, there were over 4,800 donors in the United States and 18,029 transplants were performed. But this is not enough; more donors are desperately needed. More than 37,000 patients are now waiting for organ transplants, and estimates are that as many as eight patients die each day because no suitable organs are available.

For registration information, contact Dr. Mary Ganikos, 3-7577 or fax 4-6095. □

ORWH Starts Bulletin Board

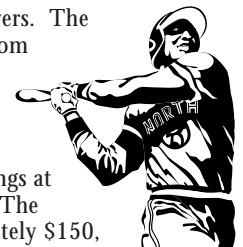
The Office of Research on Women's Health has established an electronic bulletin board on the NIH Education Network, EdNet. The bulletin board, entitled ORWHnews Conference, contains ORWH fact sheets as well as information on seminars, publications, events, research and career development opportunities, and meetings dealing with women's health issues.

The ORWHnews Conference may be accessed via Internet (telnet wylbur.cu.nih.gov) or by 2400 baud modem (1-301-402-2221 or 1 800-358-2221) with parameters set at "7, Even, 1". When connected to NIH, type ".VT100" for terminal emulation, "WOW" for initials, and ARX1" for account number. The local phone number for a 9600 baud connection is 2-8142.

For information or to request "A User's Guide to the NIH Education Network - NIH EdNet" call 4-3278. To submit information to be posted on the ORWHnews Conference, call 2-1770. □

Softball Teams, Players Needed

The NIH R&W Men's Softball League is looking for additional teams for the upcoming season. Teams consist of approximately 15 players. The softball season runs from May until August and includes both the regular season and playoffs. Games are played weekday evenings at a field close to NIH. The entry fee is approximately \$150, which is about \$15 per player and less than \$1 per player per game. Compared to county softball leagues, this is a real bargain for a lot of fun. Current teams are also looking for individual players. Team captains or individual players should contact Frank Nice, 6-1561, for more details. □



IL-2 TRIAL

(Continued from Page 1)

the study. CD4+ T-cell measurements were made 1 and 2 months after each course of IL-2.

In 6 of 10 patients who started the study with CD4+ T-cell counts higher than 200 per cubic millimeter (mm³) of blood, CD4+ T-cell counts rose by more than 50 percent after 12 months. The remaining four had stable CD4+ T-cell counts or showed a slight decline.

Of the 15 patients who started the study with CD4+ T-cell counts below 200/mm³, only 2 showed a 50 percent increase in their CD4+ T-cell count. In the remaining 13, no significant increases in CD4+ T-cell counts were observed, and side effects were considerably more severe than in the patients with baseline CD4+ T-cell counts above 200/mm³.

In several patients, the rise in CD4+ T cells was dramatic—for example, one individual's CD4+ T-cell count rose from 554 to 1,998 cells/mm³ after 12 months on IL-2. A healthy person usually has 800 to 1,200 CD4+ T cells/mm³.

"Although current anti-HIV drugs have transient benefits, especially for individuals in late-stage disease, they do not prevent the immunologic deterioration associated with HIV disease," says Lane. "It is increasingly evident that preservation and restoration of the immune systems of HIV-infected people are necessary if they are to live for long periods of time. This study shows that IL-2 may help accomplish this. We believe the principles established here for augmentation of the T helper cell limb of the immune system might also benefit patients with other diseases characterized by decreased T-cell function."

Side effects were common in the study, including rash, fever, lowering of blood pressure, flu-like symptoms, diarrhea and laboratory abnormalities such as reduced calcium, albumin and magnesium in the blood.

"While receiving infusions of IL-2, patients are extremely uncomfortable, often with symptoms worse than a very bad bout with the flu. Fortunately, none of the side effects we have observed thus far in these studies appears to be life-threatening," notes Lane. "As with any treatment, the potential clinical benefits of IL-2 therapy ultimately will need to be weighed carefully against its potential side effects." □

Volunteers Needed at NHLBI

The Cardiology Branch, NHLBI, needs normal volunteers age 45 and older to participate in a study assessing the causative mechanisms of certain cardiovascular diseases. Volunteers must not be taking any medication. The study includes placement of a small needle in the brachial artery and takes approximately 4 hours. Participants will be paid. For more information, call Cressie Kilcoyne, 6-8739. □

FIC's Jones Bids Farewell, Spent 46 Years in Government Service

Dr. Morris Jones, head of the Special Foreign Currency Program (SFCP) at the Fogarty International Center, and a champion of international scientific cooperation, retired recently after more than four decades of service to the U.S. government. The last 30 of these years were spent at FIC and its predecessor, the Office of International Relations, NIH.

Since 1964, Jones' name has been virtually synonymous with the SFCP, a unique resource that has enabled NIH to support biomedical research in a number of countries using U.S.-owned excess local currencies. In addition, he managed NIH participation in the Joint Fund Programs between the U.S. and Poland, Hungary, the Czech Republic, Slovakia, and most recently, Slovenia and Croatia. These funds aim to encourage and support a wide range of scientific and technological cooperation founded on mutual interest and mutual benefit. Dr. Philip Schambra, FIC director, noted that Jones' legacy would remain with the center for many years to come, and that his "dedicated stewardship of the Foreign Currency and Joint Board programs over the years is evidenced by the many outstanding collaborative research projects and the success with which NIH competed for these scarce funds."

Jones joined the U.S. Navy in 1944, after receiving his Ph.D. in bacteriology from the University of Illinois. He spent 6 years as a scientific research administrator at the Office of Naval Research, and came to NIH in 1956, working first at NIAID and the former



Dr. Morris Jones

and foreign scientists. His colleagues in the U.S.-India Program have attributed much of its success to his dedicated support, and F. Gray Handley, the science attaché at the U.S. Embassy in New Delhi, recently called him the "personification of American goodwill and competence," and "an example of what is best about committed public service."

All Jones' colleagues and friends at NIH and around the world wish him well as he and his wife, Betsy, begin this new chapter in their lives. □

NIH Artist Exhibits in CC

An NIH employee's work will be featured in the Clinical Center's first floor gallery through Apr. 24. Dr. Ihor Masnyk, deputy director of NCI's Division of Cancer Biology, Diagnosis and Centers, paints eggs in the traditional Ukrainian style. There will be a display of these eggs in the sculpture cases located in the Bldg. 10 lobby. □

NLM's George Cosmides Retires After 38 Years

After more than 38 years of federal service, Dr. George J. Cosmides, deputy chief of NLM's Specialized Information Services, is retiring. He plans to continue to pursue scholarly interests and his passion for writing.

He helped develop the first major psychotropic drugs in the United States while he was a senior scientist at Smith, Kline & French Laboratories in Philadelphia. These were the phenothiazines—chlorpromazine, compazine and stelazine—which have made a dramatic impact on the therapy of mental and emotional diseases since mid-1950. He came to the National Institute of Mental Health in 1959, to help establish the new field of psychopharmacology. He and colleagues created the Psychopharmacology Service Center at NIMH.

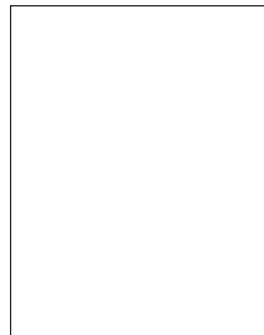
In 1963, Cosmides took charge of NIGMS' Pharmacology and Toxicology Training Program; he also served as executive secretary of the pharmacology training committee and the behavioral sciences training committee—instrumental in supporting most major

university training in both domains.

He was also founder and first director of NIH's Pharmacology Research Associate Training Program. Among the preceptors of the program were many of the best scientists of NIH.

In 1974, Cosmides joined NLM as deputy director for specialized information services, a post that oversees the Toxicology and Environmental Health Information Program. This program provides access to a number of widely used online data files in chemistry, toxicology, and environmental health.

A native of Pittsburgh, Cosmides received his B.S. from the University of Pittsburgh in 1952 and his Ph.D. in pharmacology from Purdue University in 1956. He is a member of the American Society for Pharmacology and Experimental Therapeutics, the Society of Toxicology, and is a fellow of the American Association for the Advancement of Science, which gave him its Distinguished Lecture Award in 1971. He received the Distinguished Alumnus Award of the University of Pittsburgh in 1966. □



Dr. George J. Cosmides

Novel Treatment Cures Mice of MS-Like Disease

NIAID scientists and their collaborators have developed a new therapy for immunologic diseases and have used it to successfully treat mice with an autoimmune disease that is similar to human multiple sclerosis (MS). In both MS and experimental allergic encephalomyelitis (EAE) of mice, white blood cells that normally fight invading pathogens instead attack the body's own tissues.

The treatment—which triggers the suicide of these self-destructive immune cells— involves repeated high-dose injections of myelin basic protein. This protein, found in the sheath surrounding the tail-like axons that extend from nerve cells, is the same substance attacked by immune cells in patients with MS and in mice with EAE.

"Accumulating evidence suggests that injecting multiple high doses of protein from the myelin sheath can curb inappropriate immune responses that cause these autoimmune diseases," says Dr. Michael J. Lenardo of NIAID's Laboratory of Immunology, leader of the project. "This approach to treatment employs an extremely powerful self-regulatory mechanism of the immune system that only now is becoming understood."

Research into this mechanism by Lenardo and his collaborators helps explain why administering a specific antigen (a substance to which white blood cells respond) sometimes suppresses, rather than enhances, immune responses to that antigen.

"We have found that a feedback mechanism of the immune system deletes certain immune cells when their numbers reach a point at which their effects are harmful rather than helpful," explains Lenardo. "High doses of an antigen, when given at the appropriate time, trigger the feedback mechanism."

As reported last year in the journal *Science*, untreated mice developed severe paralysis as a result of experimentally induced EAE, but treated mice were virtually symptom-free following repeated high doses of myelin basic protein.

"The effects of the treatment were striking," says Lenardo. "Untreated mice were barely able to move around their cages, but treated mice responded to the point where they had, at worst, a limp tail. In one group, three of five treated mice showed no symptoms of EAE and were indistinguishable from their normal litter mates."

The effects of the treatment have lasted for more than 4 months, the researchers report, and recent data suggest that animals with more advanced EAE and those that develop paralysis and then go into remission also benefit from the treatment.

The NIAID researchers and their colleagues from NINDS recently found in laboratory experiments that specific T cells of MS patients are highly susceptible to death by the same feedback mechanism.

Clinical investigators led by Dr. Henry

McFarland of NINDS, in collaboration with Alexion Pharmaceuticals of New Haven, Conn., are designing a clinical trial to evaluate treatment of patients using myelin protein antigens. Alexion, the NINDS researchers, and Lenardo's team work together under a cooperative research and development agreement. NIAID has a patent pending on the novel treatment methodology, and Alexion has developed proprietary myelin antigens for clinical use.

"The potential advantage of antigen therapy over current therapies to impair autoimmune responses is quite profound," states Lenardo.—Greg Folkers □

Safety Belt, Seat Awareness

The Office of Community Policing of the NIH Police reminds NIH'ers that March is Safety Belt and Child Safety Seat Awareness Month. Driving or riding in an automobile can be dangerous if you are not wearing your seat belt. Children should be secured in proper child safety seats.

Each year, motor vehicle crashes:

- ◆ Kill almost 50,000 drivers and passengers.
- ◆ Seriously injure more than 1.7 million drivers and passengers.
- ◆ Are the leading cause of accidental death for people ages 1-34.
- ◆ Are the number one cause of on-the-job deaths.

You are more likely to escape death or injury in an automobile crash if you are using a lap and shoulder belt. For a copy of a booklet on safety belts, contact Cpl. Thomas Hayden, 6-5685.

Important Phone Numbers

On campus emergency-police	115
On campus nonemergency	6-5685
Crime Prevention Branch	6-9818
Locksmith Section	6-3507
Off campus emergency	911

Blue Cross Service Day, Mar. 22

Blue Cross/Blue Shield of the National Capital Area will be on the NIH campus Wednesday, Mar. 22 to assist Blue Cross/Blue Shield enrollees who have claims or enrollment problems. A BC/BS representative will be available from 10 a.m. to 2 p.m. on that day in Bldg. 31, Conf. Rm. 9 (C wing, 6th floor) armed with a laptop computer to access directly the enrollee's records at BC/BS headquarters.

No appointment is necessary. Assistance will be provided on a first-come, first-served basis. It is anticipated that BC/BS will schedule more service days in the future. □

Hypertension Study Needs Vols

The Cardiology Branch, NHLBI, is recruiting patients with high blood pressure for an outpatient study. Volunteers should not have any other medical problems and should not have a cholesterol level higher than 200 mg/dL. Participants will be paid. Call Cressie Kilcoyne, 6-8739. □

NIAMS Establishes New Patient Registries for Rare Diseases

NIAMS recently awarded contracts to five institutions to establish patient registries that will greatly facilitate research on several rare diseases by compiling information on affected individuals and families. Research on rare diseases is often hampered by difficulty in finding enough patients with a particular disorder.

"These registries will serve as extremely valuable national resources for research on sometimes devastating rheumatic and skin diseases," said Dr. Michael D. Lockshin, acting NIAMS director. "By providing a central source of medical information, the registries will accelerate basic and epidemiologic research on rare diseases such as juvenile rheumatoid arthritis and neonatal lupus." The registries will also serve as a source of patients for clinical studies on new methods for treatment and prevention. NIAMS will work with the organizers of each registry to promote the registry's use as a national resource for research.

The five new research registries are: National Registry for Ichthyosis and Related Disorders, with Dr. Philip Fleckman as principal investigator, at the University of Washington in Seattle; Research Registry for Juvenile Rheumatoid Arthritis, led by Dr. Edward H. Gianinni, at Children's Hospital Medical Center, Cincinnati; New Onset Juvenile Dermatomyositis Registry, with principal investigator Dr. Lauren M. Pachman, at Children's Memorial Hospital, Chicago; Research Registry for Neonatal Lupus, led by Dr. Jill P. Buyon, at the Hospital for Joint Diseases in New York City; and the Scleroderma Registry, with principal investigator Dr. Maureen D. Mayes, at Wayne State University in Detroit.

For more information on these research registries, contact Elia Ben-Ari, 6-8188 (e-mail: benarie@od.niams.nih.gov). □

FOCC Board Seeks Members

Interested in taking an active role in the Friends of the Clinical Center (FOCC)? Consider applying for membership on the group's board. FOCC is a private, non-profit organization that provides emergency funds to support Clinical Center patients in times of crisis.

Money for FOCC, raised through contributions to the Combined Federal Campaign, corporate sponsorships and fundraising efforts such as the group's annual Great Pumpkin Chase, have helped hold many families together during illness and treatment here. Patients who need FOCC's assistance are referred by the CC social work department. The board of directors reviews and acts on all requests. Board membership is open to NIH employees and community members. For consideration, send a resume to the FOCC office in Rm. 1C119, Bldg. 10, by Mar. 20.

The NIH Life Sciences Education Connection



A distinguished panel of external experts will convene Mar. 31 to discuss priorities for NIH in science education. This science education working group, consisting of 16 scientists and educators from around the country, will be chaired by Dr. Bruce Alberts, president of the National Academy of Sciences.

In the morning, panelists will make brief presentations outlining, from their own perspectives, the issue of science education and the role NIH should play. In the afternoon, the panel will discuss some of the specific questions facing the Office of Science Education: What should be the top priorities? How should the needs for local action be balanced with the desire to affect science education reform at a national level?

The forum will be held in Wilson Hall, Bldg. 1 from 8 a.m. until 5 p.m. and is open to anyone interested in attending. For a copy of the agenda and/or a roster of the participants, contact the Office of Science Education Policy, 2-2469.

A training workshop will be held Mar. 15 from noon until 2 p.m. for current Science Alliance volunteers and for any other scientists who may be interested in becoming a volunteer. Science Alliance pairs NIH scientists with local elementary school classes. This is the second of two such workshops and participants will hear suggestions on such topics as: what classroom activities and materials work well, problematic classroom events and students, and questioning techniques. It will be an opportunity to observe plans and ideas that produce success in the classroom.

If you would like to attend, contact Anne Baur, Bldg. 31, Rm. 2A49, 6-1971, email: baura@HD03.NICHD.NIH.GOV.

Sailing Lessons Offered

Join the fun with the NIH Sailing Association—basic training classes start Wednesday evening, Apr. 5. Cost is \$110 plus \$35 club membership dues. Course includes six evening classroom sessions, a Saturday morning orientation at the marina and three or four weekday afternoons on South River near Annapolis, with two students and one instructor in the club's Flying Scots (19-foot sloop-rigged centerboard daysailers). Students completing basic training qualify to sail these boats for very low charter fees.

Students must be NIH employees, patients, or contractors, as well as R&W members. Application forms (class and membership) and more information on the sailing club are available at the R&W activities desk in Bldg. 31. □

James Hill Retires After 20 Years at NIAID

By Ann C. London

"I went to college to get away from the cotton fields," is how Dr. James C. Hill describes the beginning of his journey from being a boy in the rural South to becoming a highly respected scientist administrator at NIH. Hill, who recently retired after 20 years at NIAID, had been the institute's deputy director since 1987.

NIAID director Dr. Anthony S. Fauci said, "Dr. Hill has made enormous contributions to NIAID in so many areas ranging from policy making to constituency interactions. His understated competence is matched only by his warmth and extraordinary popularity. He will be greatly missed by us all."

Fauci's sentiments were echoed by everyone who attended Hill's recent retirement luncheon. Colleagues from scientific institutions and organizations all over the country sent Hill letters expressing their gratitude for his support and advice over the years.

Until he went to college, Hill's world revolved around picking cotton on his father's farm near the tiny town of Manila, Ark., where, Hill says, "Velveeta was found in the gourmet section of the grocery store."

After he received a master of science in bacteriology and a Ph.D. in microbiology from the University of Arkansas in 1967, he was looking forward to teaching science in the South. On a whim, however, he stopped to talk with a Navy recruiter and jokingly asked if they had any research positions. A short time after that conversation, he became a commissioned officer in the Navy and found himself sitting at a research bench at the Naval Biological Laboratory in Berkeley, Calif., rather than standing and teaching. In 1969, he left California and moved east to the Naval Medical Research Institute in Bethesda. Two years later, he became head of the institute's division of microbial physiology.

In 1974, Hill left the Navy to become a commissioned officer in the Public Health Service and joined NIAID as a bacterial vaccines program officer in the Microbiology and Infectious Diseases Program. During his tenure, Hill was responsible for the scientific administration of grants and contracts to develop and test bacterial vaccines, including vaccines to prevent meningococcal meningitis, pertussis, *Haemophilus influenzae* type b (Hib), and pneumococcal pneumonia. He helped put together a trial of meningococcal A vaccine in Finland, which used an experimental Hib vaccine as a control. Not only did the trial of meningococcal A vaccine show efficacy in children 18 months and older but it also demonstrated the efficacy of Hib vaccine in this same population. According

to Dr. Helena Mäkelä of the National Public Health Institute in Helsinki, because of Hill's efforts, "our work on the group A meningococcal vaccine has resulted in this vaccine being available for use in children."

Hill also helped develop clinical trials to show the efficacy of pneumococcal vaccine in the elderly and initiated the first trials of Hib and candidate pertussis vaccines in infants. In a letter to Hill on the occasion of his retirement, Dr. Claire V. Broome, deputy director of the Centers for Disease Control and Prevention, wrote, "The support you gave to the development of

Haemophilus influenzae type b conjugate vaccines resulted in a tremendous public health success by reducing the burden of Hib meningitis." Hill became associate director of NIAID's intramural program in 1983, one of the few NIH scientists to go from an extramural program into an intramural one.

In late 1984, Fauci, then newly appointed NIAID director, asked Hill to join his staff as an assistant to the director. Three years later, Hill became NIAID deputy director. In that position, he assisted Fauci in all aspects of managing the scientific programs of the institute, especially relating to AIDS. He worked closely and tirelessly with NIAID staff as well as with representatives from other agencies, congressional leaders and staffers, and activists and leaders from community and political organizations. His efforts helped the institute build a strong research program on AIDS and helped focus national attention on the AIDS epidemic, and in particular on people with HIV infection and AIDS.

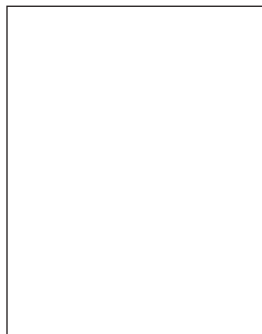
During his years at NIAID, Hill received the PHS Distinguished Service Medal and the Surgeon General's Exemplary Service Medal.

Though Hill states emphatically that he "is not looking for another job," those who have worked with him know that he is unlikely to be idle in his retirement. Even before he retired, he spent many hours as a volunteer working in the AIDS clinic in the Clinical Center, which he will continue to do.

He also will continue to share his advice and expertise with the NIAID director on special projects. But he does plan to relax and enjoy upcoming trips to Europe and the Caribbean, where he'll probably indulge in one of his favorite pastimes—cycling. □

High Cholesterol Vols Needed

The Cardiology Branch, NHLBI, seeks volunteers with cholesterol greater than 250 mg for an outpatient study. Participants should have no other medical problems. Volunteers will be paid. Call Cressie Kilcoyne, 6-8739. □



Dr. James C. Hill



TRAINING TIPS

The Division of Workforce Development, OHRM, offers the following courses:

Courses and Programs Starting Dates

Management and Supervisory, 6-6211

Preventing Sexual Harassment at NIH	4/18
Effective Presentation Skills	4/5
Practical Approaches to Stress	3/28
Practical Management Approaches	4/19
Interacting with Difficult Employees	5/4
Effective Listening & Memory	5/15

EEO Training, 6-6211

Preventing Sexual Harassment at NIH for All Employees	4/18
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Special Courses, 6-6211

NIH Retirement Seminar	4/19, 5/8, 6/14
Planning Early for Retirement	6/8
Privacy Act Seminar	3/23
Practical Approaches to Stress	3/28

Administrative Systems, 6-6211

Delegated Acquisition Training Program	5/8
Basic Time and Attendance (Manual Process)	5/17

Administrative and Skills Development, 6-6211

Improving Telephone Skills	5/16
Creating and Maintaining Filing Systems	4/18
Professional Development for Secretaries	4/5
Editing: An Introduction	5/22
Valuing Diversity in the Workplace	4/19
Scientific & Medical Editing	5/1

Personal Computing, 6-6211

Lotus 4.0 for Windows	3/29
Excel 4.0 for Windows	4/11
Intro to Windows	4/28
Advanced Windows	4/24
Intro to WordPerfect 5.1	3/28
DeskTop Publishing With 5.2 Windows	4/6
Intro to Personal Computing for New Users	4/12
Intro to Paradox 4.5 for Windows	5/8
MS:Mail for Windows	5/8

Macintosh Courses:

Welcome to Macintosh	5/4
Advanced Macintosh Techniques	3/23
Introduction to Pagemaker	4/13
Kaleidagraph 3.0	4/18
Intro PowerPoint 3.0	4/5
Intro Filemaker 2.0	4/11
Intro Excel 4.0	5/22
MS:Mail Macintosh	6/9

Personal computer training is available through User Resources Center self-study courses. There is no cost to NIH employees for these hands-on sessions. Additional courses are available by completing the "Training By Request" form in the back of the DWD catalog. For more information, call DWD, 6-6211 or consult the catalog. □

Chamber Music Concert, Mar. 28

The NIH Chamber Players will perform a program of string quartets at noon on Tuesday, Mar. 28 in Masur Auditorium, Bldg. 10. The featured works on the program will be quartets of Hindemith and Haydn. The event is sponsored by the special events section of the Clinical Center, and is free and open to all. For more information, call (301) 897-5463. □

NIH'ers Attend SACNAS Meeting

NIH staff recently attended the 1995 annual conference of the Society for Advancement of Chicanos and Native Americans in Science (SACNAS) held in El Paso, Tex.

SACNAS is a national organization with most of its members residing in the Southwest. Founded by a small group of Latino and Native American professors in 1973, its mission is to encourage Chicano and Native American students to pursue graduate education in order to obtain the advanced degrees necessary for research careers and science teaching professions.

SACNAS was established at a time when opportunities for Latinos and Native



Attending the conference were (from l) Rosalin Clipper of NHLBI, John Medina III of OEO, and Regina Anderson of NHLBI.

Americans were few and rare. Over the past few years, it has concentrated on holding national conferences to help carry out its mission; Dr. Ciriaco Gonzales of NIGMS sits on its board. These conferences have been financially supported by NIH and the National Science Foundation.

Some 850 outstanding science students, faculty, and research scientists as well as corporate and government representatives attended the conference, which included 3 days of scientific symposia, workshops, panel discussions, tours of local universities, and networking socials. Students had an opportunity to share their own research through poster sessions and oral presentations and to gain information about graduate schools, summer research programs, and fellowships from the recruitment exhibit booths and workshops.

NIH Hispanic Employment Program Manager John Medina III, NINDS EEO Officer Levon Parker and Chris Steyer, of NINDS personnel, conducted a "Summer Programs Workshop" in which they informed students of internships, fellowships, and employment opportunities at NIH.

"The short-term benefit to NIH is that this conference produced worthy Chicano and Native American candidates for the 1995 NIH internship and fellowship programs," said Medina. "The long-term benefit is that several years into the future, NIH will have Chicano and Native American potential hires who have advanced degrees for research careers and science professions." □

Toxicology, Environmental Health Gopher Now Available Via NLM

The Toxicology and Environmental Health Information Program (TEHIP) of NLM's Specialized Information Services Division is now represented on the NLM gopher. The TEHIP Gopher is designed to facilitate Internet access to national and international resources focusing on toxicology and environmental health.

Easily accessible are documentation and computer-based training materials for the MEDLARS toxicology databases, a calendar of meetings, and a list of courses and publications of interest to those working in the areas of toxicology, environmental health and medicine, and occupational health and medicine. The Specialized Information Services publication *Alternatives to the Use of Live Animals in Biomedical Testing and Research* is also on the gopher in ascii text format. All of these materials are available for downloading to the user's system from the gopher (gopher to gopher.nlm.nih.gov) or the associated ftp service (ftp to public.nlm.nih.gov).

The TEHIP gopher team has identified additional useful resources on the Internet, and the connections to these other services have been built into the gopher, offering convenient access to various national and international sites having information on topics related to toxicology and environmental health and medicine.

Questions regarding the TEHIP gopher can be e-mailed to:

tehip@teh.nlm.nih.gov; or call 6-5022. □

DRT Training Classes

InStat: Easy Statistics for Scientists	3/20
Data Analysis and Scientific Graphs Using Prism	3/20
Nonmathematical Intro to Curve Fitting	3/20
Fundamentals of Unix	3/21 - 3/22
Preview of the SAS System for Windows	3/23
MATLAB	3/24
Introduction to WYLBUR	3/27 - 4/7
Basic Statistics Using SAS/STAT Software	3/27 - 3/29
Unix Commands	3/28
Getting Started with Windows	3/29
Network Printing Using lpr/lpd	3/30
Network Security at NIH	3/30
Age Specific HIV Prevalence in the United States	3/31
Getting Started with C	4/3 - 4/6
LAN Concepts	4/3
Creating Documents for Internet Publishing	4/4

Moppetts To Benefit Inn

A musical variety show to benefit the Children's Inn at NIH will be performed Mar. 25 and 26 at 3 p.m. in Masur Auditorium, Bldg. 10 by Katherine Mizell's Modelling Moppetts & Stage II Teen Models. The "26th Annual Bunny Benefit," titled "America," will feature Moppetts as its stars. Tickets are \$4. Call (301) 294-3099 for information. □

NLM Provides HIV/AIDS Treatment Information

The Department of Health and Human Services has announced the start of the first 800-number service that provides federally approved treatment information about HIV/AIDS. Now HIV/AIDS patients and health care professionals who care for them can call ATIS—the AIDS Treatment Information Service—at 1-800-HIV-0440. Callers speak to health information experts, including those who are fluent in Spanish, about up-to-date AIDS treatments. Deaf access (TDD) is included. The service is provided Monday through Friday, 9 a.m. to 7 p.m. EST. All calls are completely confidential.

NLM's full-text database HSTAT (Health Services and Technology Assessment Text), a major resource for ATIS, is available to the public at no charge. HSTAT is continually updated to include all federally approved HIV/AIDS treatment information. Among the clinical practice guidelines found in HSTAT are chapters on early HIV infection in adults, caring for adolescents, early HIV infection in infants and children, and case management.

The HSTAT database can be accessed 24 hours a day via computer, using a modem or over the Internet. For more information on HSTAT, phone 1-800-272-4787 (select 1,6,3,2) or 6-0176, e-mail: nichsr@nlm.nih.gov. □

Wednesday Lectures Continue

The 1994-1995 Wednesday Afternoon Lectures continue this month with presentations by two Howard Hughes Medical Institute investigators. On Mar. 22, Dr. H. Robert Horvitz of MIT's department of biology will speak on "Genetic Control of Programmed Cell Death in *C. Elegans*." On Mar. 29, Dr. Robert Tjian, professor of molecular and cell biology at the University of California, Berkeley, will address "Mechanisms of Transcriptional Regulation: Assembly of Activator, Coactivator, and TAF Complexes."

The lectures are at 3 p.m. in Masur Auditorium, Bldg. 10. For more information, contact Hilda Madine, 4-5595.

Head of Apple USA To Speak

"Trends and Technologies for the 21st Century" will be discussed by James J. Buckley, head of Apple USA, a division of Apple Computers, Inc., Cupertino, Calif., during a brief stopover in the Washington, D.C., area on Wednesday, Mar. 15. Sponsored by the NIH Biomedical Research Macintosh Users Group (BRMUG) and the Division of Computer Research and Technology, the talk takes place at 1:30 p.m. in the Natcher Conference Center, Bldg. 45. □

Dr. George McCarthy of NIDR's Clinical Investigations and Patient Care Branch poses with townspeople near Vellore, India. He recently spent a month at the Christian Medical College and Hospital in Vellore as a volunteer dentist with Health Volunteers Overseas (HVO). HVO is a private organization dedicated to improving the quality of health care in developing countries through training and education. McCarthy is the first dentist from NIDR to participate in the HVO program.

Things a Bike Rider Should Know

As nice weather approaches, many individuals will begin to ride bicycles to work, or simply for enjoyment in their neighborhood. The Office of Community Policing of the NIH Police wishes to inform you of the following facts pertaining to the safe operation of a bicycle both on and off the NIH enclave.

Since a bike is legally defined as a vehicle in Maryland, cyclists have rights and duties like those of the driver of a motor vehicle. On all public highways where cycling is allowed, the operator must:

- Obey all traffic signs, signals and other traffic control devices.
- Ride with vehicular traffic flow (as near to the right of roadway as practical).
- Use standard arm signals to alert others of his/her intentions; left arm out straight signals a left turn, left arm bent upwards at a right angle signals a right turn, and left arm bent downward at a right angle signals slowing or stopping.
- Yield to all pedestrians.
- Move to the right and stop for emergency vehicles.
- Stop for loading and unloading school buses when warning lights are flashing.
- Maintain sufficient spacing behind vehicles for emergency stopping.
- Make all passing maneuvers to the left (exceptions: passing left-turning vehicles and on one-way streets).

● Remain at scene of an accident to render aid and information.

By law, a bicycle must be equipped with the following:

- Brakes that enable the operator to make the braked wheel skid on dry, level, clean pavement.
- An audible device (bell or horn) that can be heard for at least 100 feet; note that sirens and whistles are prohibited.
- When operating a bike at night, a white beam headlight for night use, visible at a distance of 500 feet, and a red rear reflector, visible at a distance of 600 feet, must be used.

Optional safety equipment that should be considered includes:

- A rearview mirror.
- A rear tail light for greater night-time visibility.
- A hard-shelled bike helmet for head protection.
- Leather or vinyl palmed gloves to protect hands.

For residents of Montgomery County, the county bicycle helmet law became effective Sept. 13, 1991. Under the law, a person who is under age 18 must wear a bicycle helmet when riding or being carried on a bicycle, including a bicycle with training wheels, on a public street, right-of-way, or bicycle path in the county.

The NIH Police Branch sponsors bicycle registration on the NIH campus. The necessary registration forms and decals may be obtained at the NIH police desk located in Bldg. 31, Rm. B3B17, Monday through Friday from 7 a.m. to 3 p.m. You will need to have all information about your bike ready prior to obtaining your decal. This includes frame number, any other bike ID number, make/style, size and color.

For a copy of a booklet entitled, *A Safety Handbook for Bicycle and Moped Owners*, contact Cpl. Thomas Hayden, 6-5685. □