

nih record



ABOVE • NICHD director Dr. Duane Alexander greets Eunice Kennedy Shriver at his institute's 45th anniversary celebration. See full story at right.

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Marks Institute's 45th Year

NICHD Renamed for Eunice Kennedy Shriver, Advocate For Institute's Founding

By Robert Bock

They came from two coasts, both houses of Congress and both sides of the aisle. Among the guests were senators, congressmen, a former vice presidential candidate and the governor and first lady of California. All came in tribute to Eunice Kennedy Shriver.

Shriver, 86, a lifelong champion of people with intellectual disabilities, was the driving force behind the establishment of NICHD 45 years ago. Her foresight brought about an institute that seeks to secure children's health and to delineate the biological mechanisms underpinning human development, from conception through adult life.

"It is with the greatest pride for all of us at the National Institutes of Health that we witness the

SEE SHRIVER, PAGE 8



Eunice Kennedy Shriver speaks at Mar. 3 ceremony in her honor. PHOTO: PETE MULLER

Strategies from Past To Fix Future

Can Protest Politics Help with Health Gaps?

By Carla Garnett

Let's go back to the future, said Dr. Samuel Roberts of Columbia University. By revisiting strategies from the 1950s, 60s and 70s, we may be able to close some of the nation's most stubborn gaps in health. But first we must toss out the "sound-bite" way of viewing black history.

During February, he said, African-American History Month celebrations rightly focus on the sit-ins, marches and speeches usually associated with the Civil Rights Movement. But what often gets glossed over in the "obligatory references to I Have a Dream and We Shall Overcome" is the power of citizen protests. "We tend at times to empty them of mean-

SEE BLACK HISTORY, PAGE 4



Dr. Samuel Roberts



Dr. Daniel Levitin

Goosebumps in G Major

Levitin Reveals Your Brain on Music

By Belle Waring

Music has a profound and timeless power to move us. Dr. Daniel Levitin, professor of psychology and neuroscience at McGill University and author of *This Is Your Brain on Music: The Science of a Human Obsession*, recently visited NIH to share his research findings.

"For the last 15 years, I've looked at why we have goosebumps when we listen to music," he

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NIH 9-Hole Golf League Recruits

The NIH 9-Hole Golf League is seeking members for the 2008 season. The league provides a way to enjoy golf on a regular basis without needing to arrange foursomes or wait for tee times. It features two flights of mildly competitive, handicapped-match play and one non-competitive flight. The season starts the first week of May and continues through September. Play is after work on Tuesdays and/or Thursdays. An optional member/guest fall golf outing and a banquet take place in early October. The league has a block of reserved tee times (generally 4:15-6 p.m.) at Needwood Golf Course in Rockville (Tuesdays) and at Northwest Park Golf Course in Silver Spring (Thursdays). Members decide where and when to play by turning in preferences to their flight captain and the league treasurer a few weeks in advance. The league is open only to R&W members (who may be non-employees). Players registering in March get an early-bird discount. Membership is limited to the first 84 registrants. For more information, go to the league's web site at www.recgov.org/golf or email John Hamill at jhamill@mail.nih.gov.

FAES Bookstore Has Books Galore

The Foundation Bookstore, located in Bldg. 10, Rm. B1-L-101, is available to all NIH employees and guests. It carries fiction, nonfiction, cookbooks and children's books. Any book currently in print can be ordered. And for all you immunologists out there, the new edition of *Paul's Fundamental Immunology*, 6/E will be out on May 15.

Visiting Fellows Hold Opportunities Expo

The NIH visiting fellows committee invites all NIH fellows to participate in the 5th International Opportunities Expo on Thursday, May 15 at the Natcher Conference Center from noon to 4 p.m.



Visiting Fellows Committee

The expo provides an opportunity for fellows to obtain information on research, grants and job opportunities available overseas and in their respective home countries. NIHVFC has invited 38 embassies and 12 companies to the expo. Fellows will be able to network with science and technology representatives and develop

contacts for the next step in their scientific careers.

Before the expo, a plenary lecture will be held in Natcher Auditorium from 11 a.m. to noon. The guest speaker is Dr. Steven Buchsbaum, senior technology strategy officer for global health discoveries at the Bill and Melinda Gates Foundation. Lunch will be available for the first 350 registered participants. For more information visit <http://felcom.od.nih.gov/subcommittee/vfc/index.aspx>.

New Orientation Program Set for Admin Hires

The NIH human capital group recently launched an introductory program for all new administrative NIH hires that will accompany the entry-on-duty orientation. "Fall in Love with NIH" is a short afternoon program aimed at inspiring pride in employees' jobs from their very first day.

Successfully piloted within the human capital group in 2006 and 2007, the program was first developed to orient new HCG staff to NIH and help workers connect to the NIH mission. Collaboration has been a key feature of the program's development. Participants included institute, center and OD senior leaders, including executive officers. The program runs every 2 weeks.

According to HCG, one of the keys to retention at NIH is bonding to the mission. "Fall in Love with NIH" builds that bond and provides a deeper insight into the scientific work that non-scientific staff support. Program participants include most non-scientific new hires; Clinical Center staff and temporary/student hires are excluded. Pending results of this program, HCG will explore the possibility of including scientific staff and contractors. The initial target audience is administrative employees who may be the least connected with the scientific process.

The agenda includes several presentations:

1-1:20 p.m. 100+ Years of NIH Contribution. A brief overview of NIH featuring exploration of specific discoveries and contributions.

1:20-1:50 p.m. The Work We Do. A scientific speaker discusses his/her research within the framework of its public impact and how administrative employees support such work; 26 speakers will be featured per year.

1:50-2:30 p.m. Tour: NIH Close-up. A walking tour of the Clinical Center.

**Left:**

The IT plant is known as a caudex in this phase, when it is very young.

Right:

The leaves of the IT plant can be consumed as a tea and as a nutritious substitute for milk.

What Is IT?**NIH Celebrates Earth Day 2008**

On Thursday, Apr. 24, celebrate Earth Day in front of Bldg. 1 from 10 a.m. to 2 p.m. The event will include food, fun, activities and informative displays. The Earth Day celebration is for all adults and children here for Take Your Child to Work Day. More detailed information will be available in April.

The mystery plants in previous Earth Day contests were sources of potentially important medicines and were threatened in their native lands because of habitat destruction, over-harvesting, poaching and other challenges stemming from human activities. This year's mystery plant also has important medicinal properties but is not endangered. In fact, perhaps like no other single species, this plant has the potential to help reverse multiple major environmental problems and provide for many unmet human needs. Here are some clues for contestants:

✎ Unlike the plants in previous contests that came from Africa, IT originally came from Tamil Nadu. But you can now find IT grown in many tropical areas of the world.

✎ IT comes from a small family, but many of its closest relatives have very big trunks. ITs is only big when IT is very young, as in the photo above. At that stage IT is called a caudex.

✎ Like the *Jathropa* (a member of another much bigger family), IT can easily be grown in drought, on poor, damaged soils and can also help to reclaim them. ITs seeds also contain oil that can be used as a source of renewable energy. But *Jathropa* is toxic and really overrated because IT can be:

- **Eaten—all parts.** ITs high-quality oil can be used in cooking and ITs leaves (see photo) can be consumed as a tea and as a nutritious substitute for milk. They are an excel-

lent source of protein and iron—you won't find that in many other plants. Here's how IT compares with other foods: 7 times the vitamin C of oranges; 4 times the calcium of milk and twice the protein of yogurt. Many other vitamins and minerals are present—literally from A to zinc, and all the essential amino acids.

- **Grown in all countries of the world** that have significant percentages of their population malnourished. IT could save millions of lives.
- **Used to purify polluted water**, working as both a coagulant (for removal of turbidity) and as an anti-microbial. Extracts from its seeds can be used on a small or large scale as a low-cost, locally available alternative for water treatment chemicals.
- **Used as medicine** by native peoples to prevent or treat over 300 diseases. Additional scientific studies are needed to confirm its effectiveness for these traditional uses.

IT is known by over 100 names in different languages around the world. NIH's contest will accept any name commonly used in English or scientific name (genus and species).

Entries for the plant contest are due by Apr. 16 and should be submitted to green@mail.nih.gov. Prize winners will be selected randomly from all correct answers submitted. 📧

STEP Forum on 'Diagnosis in the 21st Century'

The staff training in extramural programs (STEP) committee will present a Science in the Public Health forum on the topic, "Diagnosis in the 21st Century: Know Today or No Tomorrow," on Tuesday, Apr. 1 from 8:30 a.m. to 12:30 p.m. in Lister Hill Auditorium, Bldg. 38A.

Genomics and associated technologies are changing the field of clinical diagnosis. Infectious diseases can be diagnosed rapidly and accurately using array technologies. Cancers can potentially be diagnosed early by detecting specific biomarkers in blood. Metabolomics can be used to evaluate overall health status and to establish a personal baseline for any potential changes that may occur later when disease arises. With significant advances in various imaging modalities and the promise of even more advanced diagnostics in the future, the field appears unlimited. Learn the amazing technologies that are bringing diagnoses into the 21st century, the challenges to their development and what it takes to get the new technologies into practice.

BLACK HISTORY

CONTINUED FROM PAGE 1



Roberts, of Columbia University, discussed the relevance of employing protest politics to combat today's health disparities crisis.

PHOTOS: MIKE SPENCER

ing,” Roberts said. A deeper look at history shows tangible improvements are won with determined and well-reasoned outrage, not with the chants and slogans that become popular battle cries later.

In his Feb. 8 lecture, “New (Social) Histories for New (Social) Politics: Thinking About African-American Health History in Ways that Matter,” he discussed how at least as far back as the late 19th century, social uprisings have forced changes to the nation’s health status. “Even black physicians—so rarely prone to radicalism—created their own variety of protest politics,” he said, noting establishment in 1895 of the National Medical Association. NMA was begun as the African-American equivalent of the American Medical Association, which did not accept black members at the time.

Roberts is an assistant professor of history at Columbia and of sociomedical sciences at Mailman School of Public Health. NLM’s History of Medicine Division sponsored the talk.

“Most public observances of Black History Month pay some sort of tribute to the Civil Rights Movement,” he said. “This year may be more appropriate than others. Aside from the fact that the next elected U.S. president could very well be an African-American man or a European-American woman, there’s much about the 2008 campaign that looks like campaigns in 1964 or 1968 in that the major issues once again surround the war, the economy, poverty, citizenship rights and health care.”

Roberts said civil rights protests benefited more citizens than just African Americans. “The general understanding by the movement’s leaders and members is that it’s as much about class as it is about race,” he said. “Civil rights is an acknowledgment of the socioeconomic impact of racism.”

Taking a brief tour of bygone eras, Roberts said noted African-American scholar W.E.B. DuBois was one of the first to suggest and present evidence publicly that black inferiority in health and education status, for example, was due not to innate biological differences among the races, but to “socioeconomic exclusion. However, it was not an idea whose time had come.”

The Dubois-led Niagara Movement, which gave rise to the NAACP, mentioned health explicitly in its 1905 declaration: “We plead for health—for an opportunity to live in decent houses and localities, for a chance to rear our children in physical and moral cleanliness.”

Although the violent race riots of the early 20th century are not generally connected to direct improvements in African-American health, they were part of the same political moment that brought about the spread of National Negro Health Week. The observation envisioned and organized by Booker T. Washington and others, but not held until shortly after Washington’s death in 1915, grew slowly but steadily. By the 1930s, hundreds of thousands participated annually.

By the time Congress passed the 1946 Hill-Burton Act to address American workers’ health, Roberts said “pathologies of the ghetto”—diseases wrongly linked to race and color, and more accurately due to poverty—were already part of the national conversation on U.S. health. That “health seemed purchasable was a widely held assumption.”

Over the years, outraged citizens banded together to protest in groups. The medical committee for human rights, the Student Health Organization and the Black Panthers were among the most well known.

“It’s difficult to assess how effective they were,” he said, “but certainly the political consciousness they raised was very important. We have thousands of community leaders who emerged from this period with a different consciousness about citizenship and health.”

Roberts suggested that today’s environmental justice efforts are an extension of movement politics. In the 1970s, Warren County, N.C.— widely recognized as the birthplace of the movement—dumped hazardous waste in a predominantly poor black neighborhood. Following well-publicized demonstrations by thousands of citizens that included locally and nationally elected officials, North Carolina agreed to clean up the site. The state spent more than 20 years restoring the land.

Today 9.2 million people are estimated to live within 3 kilometers of the nation’s 413 commercial hazardous waste facilities; more than 5.1 million of them are people of color.

“Essentially the catalyzing moment is when various communities look about themselves and see that they have had locally unwanted land uses forced upon them,” Roberts said. In what he described as a “devil’s bargain, many places will promise jobs and economic improvement in exchange for having a toxic facility located in a neighborhood.”

What is the connection between geographic social and health inequalities and such disorders as cardiac disease, tuberculosis and HIV-AIDS? Some experts have mentioned the Chicago heat wave of 1995 and post-Katrina as environmental justice issues. “In an era when the policy of segregation has been definitively outlawed,” Roberts said, “what do we make of unequal environmentally induced health burdens?”

Studying environmental inequality history will help us think about all other sorts of history, he concluded. “If we can broadly think about environmental issues encompassing not just toxic dumps and local land uses, but also asthma, infant mortality, even the distribution of fast-food restaurants, and tobacco and alcohol advertisements, [then] this offers us a way of thinking about social issues as a whole. Certainly if this harkens back to the old way of thinking, it might help us consider what is real on the horizon in 10 or 20 years.”



NIH Battles Global Epidemic of Non-Communicable Diseases

Support is growing at NIH to find ways to battle the predicted global epidemic in chronic, non-communicable diseases, forecast to cause some 388 million deaths worldwide in the next decade.

The Fogarty International Center has been conducting outreach to other institutes and centers to identify ways to leverage the considerable existing expertise to combat chronic diseases such as diabetes, cardiovascular conditions and cancer that are increasingly striking populations in the developing world.

A recent *Nature* article, "Grand Challenges in Chronic and Non-Communicable Diseases," whose authors included FIC director Dr. Roger Glass and NHLBI director Dr. Elizabeth Nabel, helped galvanize the effort.

To foster continued dialogue on the topic, Fogarty recently hosted the paper's lead author, Dr. Abdallah Daar of the McLaughlin-Rotman Center for Global Health, for a series of discussions and presentations. In addition to consulting with Nabel and NHLBI staff, he met with NIH director Dr. Elias Zerhouni, NIDDK director Dr. Griffin Rodgers and NINDS director Dr. Story Landis.

"We are encouraged that by working together with NIH partners and outside collaborators, we can transfer proven intervention strategies that can be adapted and implemented to suit the populations of developing countries," said Glass.

Daar called for a coordinated research strategy similar to the Human Genome Project in order to halt the approaching global epidemic in non-communicable diseases.

"We must move away from the notion that nothing can be done, and that people only have themselves and their unhealthy lifestyles to blame. These myths and misconceptions are part of the reason why people don't get



Left:

In his recent visit to NIH, Dr. Abdallah Daar warned of the approaching global epidemic of chronic, non-communicable diseases.

Right:

NIH support is growing to combat conditions such as cardiovascular disease, a leading cause of death in Africa.

RIGHT PHOTO COURTESY WHO/CHRIS DE BODE

involved," he said. "The problems are complex and difficult to solve, but it is feasible."

Supporting research collaborations that will stem the tide of preventable deaths from non-communicable diseases in the developing world is one of five goals detailed in Fogarty's new strategic plan, set to be published shortly.

"While we must continue our research and training efforts in infectious diseases, we cannot ignore the terrible toll that chronic conditions such as diabetes and cancer will claim in human lives over the next decade if we do not act now," said Glass.

The full text of the *Nature* article is available at www.nature.com/nature/journal/v450/n7169/full/450494a.html. 🔗

FARE Abstract Competition for Fellows

The 15th annual Fellows Award for Research Excellence (FARE) 2009 competition will again provide recognition for outstanding scientific research performed by intramural postdoctoral fellows. FARE winners will each receive a \$1,000 travel award to use for attending and presenting their work at a scientific meeting. Twenty five percent of the fellows who apply will win an award.

FARE applicants must submit an abstract of their research, which will be evaluated anonymously on scientific merit, originality, experimental design and overall quality/presentation. The travel award must be used between Oct. 1, 2008, and Sept. 30, 2009.

The FARE 2009 competition is open to postdoctoral IRTAs, visiting fellows and other fellows with fewer than 5 years total postdoctoral experience in the NIH intramural research program. In addition, pre-IRTAs performing their doctoral dissertation research at NIH are also eligible to compete. Visiting fellows/scientists must not have been tenured at their home institute. Questions about eligibility should be addressed to your institute's scientific director. Fellows should submit their application (including abstract) electronically now through Apr. 14 via <http://felcom.od.nih.gov/subcommittee/fare.aspx>. Winners will be announced by the end of September 2008. More information is available on the web site above. If you have questions, contact one of your institute's FelCom representatives at <http://felcom.od.nih.gov/members.aspx>.

BRAIN ON MUSIC

CONTINUED FROM PAGE 1

told the SRO crowd in the Neuroscience Center at Executive Plaza. His lecture was part of the NIMH Director's Innovation Speaker Series.

A former studio musician and independent producer who has worked with Eric Clapton, the Grateful Dead and Stevie Wonder, Levitin said he'd always felt the magic. After dropping out of MIT, he started his own production company, racking up 16 gold and platinum albums.

The turning point came during a session with Carlos Santana, the Grammy Award-winning guitarist. "I asked myself, why was I getting goosebumps? What transcended that moment?"

Levitin sold his business, phasing out of the studio and into Stanford University where he studied psychology and cognitive science. He

now heads the Laboratory for Music Perception, Cognition and Expertise at McGill, researching the science of musical sound as well as "more speculative issues, where music meets evolution and genetics."

Levitin noted evidence for music's beneficial effects on health, yet "before 2003," he said, "there were relatively few scientifically controlled studies addressing the underlying mechanisms. Singing releases endorphins, but why?"

Singing also increases oxytocin, the "bonding" hormone. Immunoglobulin A, a critical antibody, goes up when we listen to music. Serotonin and key neurotransmitters increase after 4 weeks of music therapy and then decrease after it's discontinued. And, Levitin noted, even among those with Alzheimer's, music may be "the last thing to go. Even if they don't know their own spouse, they can sing the songs of their youth. Something evolutionary is going on here."

Understanding the mechanisms of how music creates pleasure "would provide part of a fully formed scientific theory." Playing sound clips, Levitin invited the audience to listen. Some highlights:

Our recognition of sounds is so extraordinary that we can identify them within 500 milliseconds. As soon as Levitin played a half-second clip of the Beatles' "Eleanor Rigby," the audience got it.

By age 5, any child can say what chord is out of sequence according to his or her cultural context. "As [Noam] Chomsky says, we're all linguistic experts," Levitin said. "We're all musical experts."

The brain fills in missing information to hear a continuous stream of sound despite interruptions. "The brain knows that in a natural environment, often sound is occluded, but we can cope with that."

The brain groups sounds by similarity. "If there is a change in timbre [tonal sound], the brain binds together like elements."

The brain does "template match"; for example, if a symphony is performed with mandolins instead of an orchestra, we recognize it. Yet "this is such a difficult problem that there's no computer in the world that can do it."

The brain can also recognize well-known music played with a power saw used on different lengths of wood. "We are able to make subtle discriminations about the music we know."

While there are elaborate maps of how the visual cortex processes color, edge, movement and the like, there are few such schematics of the auditory pathway. Music, said Levitin, goes to the auditory cortex, fans out to the computational units, hits areas where melody, rhythm and timbre are processed, then comes back together within 30 milliseconds.

We remember a piece better if we see it performed. "From an evolutionary perspective, and in most preliterate societies, music and dance always co-occur; the brain evolved watching music and listening to it at the same time." When we hear music, our motor cortex is firing; to keep still, we have to suppress it.

Music activates the same brain centers as chocolate, opium and orgasm. Levitin believes "there is a reward system in place for learning music."

The brain is also "a structure detector"; it can spot odd chords, "violations of harmonic expectancy," or familiar segments scrambled in random order: "A tiny spot in the prefrontal cortex



Levitin (l) worked closely with Charles Tolbert, AV specialist, to play sample audio clips used in his experiments.

PHOTOS: BILL BRANSON



Dr. Teresa Levitin of NIDA (l) introduced McGill's Dr. Daniel Levitin. They are cousins.

detects structure in anything and has a connection to the brain's emotional centers."

In specific populations with neurogenetic impairments, Levitin compared those with Williams syndrome (who are highly social and highly musical) with people with autism spectrum disorders (who are non-social and not very musical). What do they hear when they hear music? With Williams, there was "diffuse activation," making Levitin wonder if there may be a gene cluster that influences both musicality and "outgoingness."

Audience question: Why is some music pleasurable and other music "just noise?"

"Humans differ," Levitin said. "Taste hasn't been worked out." What is understood is that "we all become fixed in musical taste by around age 14 or 15." Until then, the brain has been making new connections like crazy, but after age 15 "the brain prunes out unneeded connections." After that, "trying to like a different type of music is like trying to learn a new language."

You get Beethoven, your teen gets Green Day, but everybody gets goosebumps. 🎧



Nobel laureate Dr. Oliver Smithies (front, c) poses with NIH director Dr. Elias Zerhouni (front, far l), NHLBI director Dr. Elizabeth Nabel (front, far r), Randolph-Macon College students and their teacher, Dr. W. Wallace Martin (back row, 4th from l).

Nobel Laureate Smithies Connects with Students

Dr. Oliver Smithies was the first speaker of the new year in NHLBI's Biomedicine Lecture Series and promises to be a tough act to follow. Winner of the 2007 Nobel Prize in physiology or medicine, Smithies—an Excellence professor at the University of North Carolina at Chapel Hill—shared his love of science and detailed personal notes, dating back to New Year's Day 1954, with a packed audience in Masur Auditorium.

"There is no better demonstration of the value of scientific enterprise than Dr. Smithies," said NIH director Dr. Elias Zerhouni. He noted that Smithies was no stranger to NIH, having received grants from NIGMS, NIDDK, NCI and NHLBI since 1973.

A group of 20 students from Randolph-Macon College in Ashland, Va., traveled to NIH with their history of medicine professor, Dr. W. Wallace Martin, to meet and learn from Smithies.

"The students are very familiar with Dr. Smithies' work and for them to have the opportunity to hear a Nobel laureate speak about his work really has an impact on them," said Martin. "They will never forget this experience and it gives them confidence—that these esteemed researchers are just people too."

While giving a lecture he titled "Two Mouse Tales," Smithies admitted that he had "fallen in love with his own experiments all over again" and acknowledged the group of students in the audience, saying that meeting with young scientists is always gratifying. "If I can do anything to help them on their way to discovery, I am happy to do it," he said.

"NHLBI, through our strategic plan, is committed to supporting science education in schools to ensure a steady stream of enthusiastic and creative young scientists," said NHLBI director Dr. Elizabeth Nabel. "It is presentations like these that inspire students to keep doing well in science."

Nick Artabazon, a senior at Randolph-Macon currently doing research on cancer-causing genes, said Smithies is a true pioneer in science; seeing him in person was an opportunity he could not pass up. "I am about to start my Ph.D. program and I know there is a lot I can learn from him," Artabazon said. He eventually wants to go to law school to study intellectual property law while specializing in genetics.

Catherine Wallace, also a senior, just completed research on a variety of fungi to determine if one could be considered a new species. "I'm thrilled to have the opportunity to talk with a Nobel Prize winner," she said. "He has a great deal of influence over much of what we do in the lab." Next up for Wallace are a master's program and a decision on attending veterinary school.

"Dr. Smithies is an exciting speaker—humorous and engaging—just the kind of person you'd want your students to emulate," concluded Martin.

For more information on the monthly lecture series, visit www.nhlbi.nih.gov/about/lectures/. 🎧



SHRIVER

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Above, left:

Chatting with Shriver (r) at the event are (from l) her brother Sen. Edward Kennedy (D-MA), Dr. Nadia Zerhouni and her husband, NIH director Dr. Elias Zerhouni.

Above, right:

Other guests include (from l) California Gov. Arnold Schwarzenegger, Shriver's son-in-law; Sen. Orrin Hatch (R-UT), cosponsor of the legislation that changed the name of NICHD; and Rep. Steny Hoyer (D-MD).

Below:

NICHD director Alexander (l) joins Jana Monaco (standing, c) and her children. The family benefited from studies conducted at an NICHD research center.

change of the name of the National Institute of Child Health and Human Development to the Eunice Kennedy Shriver National Institute of Child Health and Human Development," said NIH director Dr. Elias Zerhouni at NICHD's recent 45th anniversary celebration. "Mrs.

Shriver, this change in our name represents far more than your role in helping to establish this institute. The dedication, the commitment and the passion that you bring to this effort is a beacon for scientists around the country and the world and for the millions of people with intellectual and developmental disabilities."

Proposed by Shriver's brother, President John F. Kennedy, NICHD was established in 1963. Legislation recently enacted by Congress authorized the name change in Shriver's honor.

NICHD director Dr. Duane Alexander explained that it was Shriver who persuaded

President Kennedy to include the proposal for an NIH institute focusing on child health and human development in his first health message to Congress. At the time, NIH institutes focused only on a particular organ system or disease category.

Alexander noted that Shriver also testified before the congressional committees in support of the bill for the new institute and worked behind the scenes to persuade members of Congress of the need for it.

"In Washington and elsewhere, many good ideas languish unfulfilled," Alexander said. "That could have happened with this idea if a champion had not come forward to bring it to fruition. That champion was Eunice Kennedy Shriver, who was passionate about improving the lives of persons with mental retardation."

Alexander also announced that Shriver would be inducted into the NICHD Hall of Honor. Housed in the institute's Bldg. 31 offices, the Hall of Honor features commemorative plaques that recognize individuals who have made noteworthy contributions to child health and human development. Shriver's plaque will stand at the hall's entrance, to mark her founding role in the institute's history.

In addition, Alexander said that NICHD also has renamed its Mental Retardation and Developmental Disabilities Research Centers Program in honor of Shriver. The 14 university-based facilities in the program seek to advance the diagnosis, prevention, treatment and amelioration of intellectual and developmental disabilities. Alexander explained that the centers were first proposed by Dr. Robert Cooke, a member of President-elect Kennedy's transition team.

"[The Program's] purpose was to move mental retardation research out of the shadows





NICHD director Alexander unveils the plaque announcing Shriver's induction into the NICHD Hall of Honor, which is located on the 2nd floor of Bldg. 31's A wing. NICHD also has renamed its Mental Retardation and Developmental Disabilities Research Centers Program in honor of Shriver.

of the institutions and into the mainstream of research by providing federal funds to construct research facilities at universities and medical schools to attract top-quality scientists to the field," Alexander said. "Again, it was Mrs. Shriver whose advocacy efforts with the administration and the Congress achieved passage of this legislation in 1963."

The program is now known as the Eunice Kennedy Shriver Intellectual and Developmental Disabilities Research Centers Program. The name change acknowledges Shriver's contribution and renames the centers with terms more accurately reflecting current usage.

One of these research centers, Children's National Medical Center, played an important role in diagnosing and treating a rare disease that had a devastating impact on a Washington-area family. Jana Monaco of Woodbridge, Va., spoke of how she found her 3-year-old son Stephen unconscious one morning. Researchers at Children's determined that Stephen suffered from a rare disorder, isovaleric acidemia. Stephen lacked an important enzyme for processing proteins and had suffered severe brain damage.

Monaco added that her daughter Caroline was a testament to the work done at the centers. A year after she found Stephen, Monaco learned she was pregnant with another child. Scientists at the center determined that the baby she carried also had the same rare disorder. Shortly after Caroline was born, researchers put her on a special diet. As a result, she escaped the nervous system damage her brother suffered.

Rep. Steny Hoyer (D-MD), majority leader of the U.S. House of Representatives, quoted President Kennedy, speaking about children with disabilities: "Although these children have been the victims of fate, they shall not be the victims of our neglect." Hoyer said that those remarks were especially appropriate to Shriver; because of her life's work, children with developmental disabilities "shall not be the victims of our neglect."

Sen. Orrin Hatch (R-UT), cosponsor of the legis-



Above, left: Zerhouni enters Natcher with Maria Shriver and husband Schwarzenegger.

PHOTO: PETE MULLER

Above, right: Alexander greets the guest of honor before the program. Shriver was also the subject of a video tribute—Life in the Shadows. Two other videos were shown during the program, one on Special Olympics and one containing greetings from some of the newly renamed NICHD centers.

PHOTOS (UNLESS OTHERWISE NOTED): ERNIE BRANSON

lation that changed the name of the institute, said that because of Shriver's vision, considerable progress had been made in children's health and in helping individuals with intellectual and developmental disabilities.

"Eunice, congratulations for all that you've done for mankind," Hatch said. "We all owe you a great debt."

Sen. Edward Kennedy (D-MA) recounted his sister's accomplishments. These included heading the Joseph P. Kennedy, Jr. Foundation and advocating for people with disabilities, helping to establish the first Presidential commission on mental retardation and founding the Special Olympics. He said she also dreamed of a world-class facility that would focus on the needs and treatment of children with developmental disabilities. After the election of 1960, she saw her opportunity and discussed the idea with President Kennedy every time she saw him.

"I guess you could say that Eunice has a talent for getting her way," Kennedy said. "And lucky for all of us, 'her way' is to make the world a better place for people with disabilities—and she's been doing that with incredible success for more than 60 years."

Shriver thanked Kennedy, her husband Sargent Shriver, her children and other family members for the love and support they provided her through the years. She added that her sister Rosemary, who had suffered rejection because of an intellectual disability, had been the driving force behind her family's efforts on behalf of those with intellectual disabilities. She concluded her remarks by asking everyone to stand up for people with such disabilities.

"There is no purpose nobler than to build communities of acceptance for all," she said. "This is our glory. This is the greatness of the United States of America."

After the ceremony, Shriver, Kennedy and their sister, Jean Kennedy Smith, personally



Above, left:

Shriver family attending the NICHD anniversary program include (from l) the honoree; her son, Dr. Timothy Shriver, chair of Special Olympics International; his wife, Linda Potter Shriver; Eunice's husband, Sargent Shriver; and the honoree's sister, Jean Kennedy Shriver. The event was held Mar. 3 in Natcher auditorium.

Above, right:

Shriver's NICHD Hall of Honor plaque



Eunice Kennedy Shriver

*Joseph P. Kennedy, Jr. Foundation
Special Olympics*

For her vision and unrelenting advocacy for establishing a new NIH Institute for research on improving pregnancy outcomes and fostering healthy development of children, as part of her lifelong dedication to improving the lives of persons with intellectual and developmental disabilities, recognized by the U.S. Congress by naming the Institute she championed the Eunice Kennedy Shriver National Institute of Child Health and Human Development

H A L L O F H O N O R

CONTINUED FROM PAGE 9

greeted each of the 500 guests attending the event in a receiving line in the Natcher foyer.

Legislation authorizing NICHD passed in October 1962. "We will look to the National Institute of Child Health and Human Development for a concentrated attack on the unsolved health problems of children and of mother-infant relationships," President Kennedy said

when he signed the bill into law. "This legislation will encourage imaginative research into the complex processes of human development from conception to old age."

In 1974, the NICHD research program on aging was transferred to the National Institute on Aging, created by Congress to focus on the health and well-being of older people.

JFK's Persistence Secured First NICHD Director

"As all of you who know Eunice understand, she is not the kind of person who takes no for an answer," Sen. Edward Kennedy said at the Mar. 3 event honoring his sister. "In fact, she doesn't take the first 100 no's for an answer."



PHOTO: MIKE SPENCER

Persistence, apparently, is a Kennedy family trait. At a recent meeting of NICHD's advisory council, director Dr. Duane Alexander relayed this story of the institute's beginnings:

The search committee charged with finding a director for the new institute unanimously recommended Dr. Robert A. "Bob" Aldrich for the job. However, when then-NIH director Dr. James Shannon offered him the position, Aldrich turned him down—more than once, in fact. Aldrich thanked Shannon, but explained he wasn't interested as he was very happy serving

as chair of the University of Washington Medical School's pediatrics department.

A short time later, Aldrich's phone rang. President Kennedy was calling, personally asking Aldrich to serve as NICHD's first director and to help establish the new institute. Aldrich thanked the President for his interest, but again explained that he couldn't possibly abandon his position at the University of Washington.

A few minutes later, the phone rang again. This time, it was the University of Washington's president. He told Aldrich that Aldrich's refusal of a call to service by the President of the United States reflected badly on the university.

"You're fired," the university president said before he slammed the phone down.

Still absorbing the shock of the news, Aldrich had barely put the receiver back in its cradle when the phone rang once more. "This is President Kennedy calling again," said the voice at the other end. "I understand that you're out of a job. I know of an opening that you might be interested in."

Aldrich served as NICHD director from March 1963 to October 1964 before returning to the University of Washington Medical School.



feedback

Feedback: I wondered what the process is for checking the exhaust system of NIH-run vehicles. Some of them emit a great deal of noxious fumes.

Reply from the Office of Research Facilities: The Fleet Management Branch is required by federal regulation to adhere to laws set forth by the state in which the vehicles are housed. The law in Maryland is that we perform emission inspections every 2 years on government vehicles and we do adhere to this regulation. We also are meeting all requirements of Executive Order 13423 with the reduction of gasoline and the use of alternative fuel. [President Bush entered EO 13423 into the *Federal Register* on Jan. 26, 2007, to strengthen "federal environmental, energy and transportation management."]

Feedback: What is the value of paying a contract employee to sit in the booth outside of multi-level parking garage 10 (adjacent to Bldgs. 31 and 33)? I have seen a sign indicating that valet parking assistance is available for handicapped individuals, but the booth seems to be occupied at the wrong times (often unoccupied in the morning; occupied at the end of the day when most people are leaving). How often is the valet parking utilized?

Response from Tom Hayden, transportation planner in the Office of Research Facilities: Throughout the day, there are a total of three attendants assigned to assist handicapped motorists. As a general guide, two are assigned specifically to MLP-10 and another at the Lot 31B booth. There is attendant coverage from 6 a.m. until 7 p.m. Their primary role is to assist handicapped motorists by providing valet parking between Lot 31B and MLP-10. The peak times for providing these services are 9 to 10:30 a.m. and then again during the evening hours of 4 to 5:30. Often when attendants are not seen in the parking booth, they may be performing one or more of the following customer service functions: parking or retrieving a vehicle for an employee with disabilities, assisting employees with finding a parking space throughout the day or even changing a flat tire for an employee. On average, 15 NIH employees are assisted daily. In terms of value, for my NIH co-workers who use this service, this assistance is extremely important. Vehicles are parked and retrieved safely at the end of the business day.

Star Named NIDDK Division Director

Dr. Robert Star has been named director of the Division of Kidney, Urologic, and Hematologic Diseases, NIDDK. He has been acting director of the extramural research division since September 2006 and was appointed director on Feb. 26 after a nationwide search. Star oversees a \$400 million program of grants and contracts.

"Dr. Star is an exemplary and creative physician-scientist, leader and manager. A scientific leader, not just a manager," said NIDDK director Dr. Griffin Rodgers. "He rolls up his sleeves, steps up to tough issues and attracts problem-solving, talented scientists from within as well as outside NIH to craft solutions."



Star was a postdoctoral fellow at NIH in the mid-1980s before joining the faculty of the University of Texas Southwestern Medical Center in Dallas. In 1999, he returned to NIH as a senior scientific advisor for kidney disease and to run a lab studying acute kidney injury. In 2002, he became senior advisor for clinical research in the NIH Office of Science Policy and Planning. There he worked on NIH Roadmap for Medical Research initiatives to re-engineer the clinical research enterprise. He also led training and career programs for clinical researchers and helped develop the clinical and translational science awards.

Especially interested in translational research, Star's own intramural work on early identification, prevention and pre-emption of sepsis and acute kidney injury will continue. His research has produced more than 100 published manuscripts and he has written 8 textbook chapters and holds several patents.

Star graduated *summa cum laude* in applied mathematics from Harvard College and *cum laude* from the Harvard Medical School-Massachusetts Institute of Technology Joint Program in Health Sciences and Technology. He did his internship and residency in internal medicine at Michael Reese Hospital in Chicago.

Star has received honorary awards and research support from NIH, FDA, biotech and the Young Investigator Award recognizing excellence in nephrology research, jointly awarded by the American Society of Nephrology and the American Heart Association. He currently serves on the editorial board of the *Journal of Clinical Investigation*. 📧

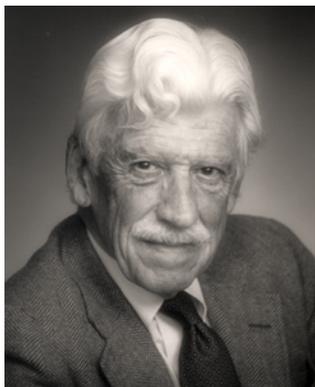
Workshop on Clinical Research Networks

NCCR is hosting Clinical Research Networks: Building the Foundation for Health Care Transformation, a workshop on Thursday, May 8 from 8:15 a.m. to 6 p.m. in Natcher Auditorium. It will provide an opportunity for experts to present key accomplishments of the Clinical Research Networks Program and provide a venue for the research community to critically review and discuss how these accomplishments can be used to advance clinical and translational research. Speakers include NIH director Dr. Elias Zerhouni, NCCR director Dr. Barbara Alving and Isaac Kohane, Harvard Medical School informatics program chair.

The Clinical Research Networks Program, an NIH Roadmap for Medical Research Initiative, is a series of far-reaching projects designed to transform the nation's medical research capabilities and speed the movement of research discoveries from the bench to the bedside. The upcoming workshop includes case studies, demonstrations and posters.

The workshop is free and open to the public. Registration is requested by Apr. 28. To register, visit www.nccr.nih.gov/UPenn.asp. Individuals who need sign language interpreters and/or reasonable accommodation to participate should contact the Federal Relay Service at 1-800-877-8339 at least 5 days before the event.

milestones



Former NIH deputy director for intramural research Dr. Joseph "Ed" Rall died Feb. 28.

Longtime Scientist, Administrator Rall Dies

Dr. Joseph "Ed" Rall, thyroid expert, former NIH deputy director for intramural research (DDIR) and a scientist who in the 1950s built a legendary endocrine group in the newly created National Institute of Arthritis and Metabolic Diseases before serving for nearly 20 years as scientific director for that institute and its various transformations into NIDDK, died Feb. 28. He was 88.

"In addition to Ed's savvy as a manager and scientific recruiter, mentoring young scientists from around the world, he was a true scientist to the core, typically found reading scientific journals religiously front to back in his lab and office," said Dr. Michael Gottesman, current DDIR. "Under his direction, his institute, with its modest intramural program, became a major contributor to new discoveries in biomedical and clinical research."

During his tenure as scientific director, Rall was a supporter of Dr. Marshall Nirenberg as he sequenced the DNA code, Gottesman recalled. "This was a period of intense intramural collaboration that had begun under Ed's predecessor, DeWitt Stetten, which Stetten later called 'NIH's finest hour' and which earned Nirenberg the Nobel Prize in 1968.

"Ed also oversaw the work of Christian Anfinsen, who won a 1972 Nobel Prize for protein chemistry; Martin Rodbell, who won a 1994 Nobel Prize for work done in the 1970s on GTP-binding and G proteins; and Baruch Blumberg, who performed a part of his prize-winning research at NIAMD in the 1960s before moving to the Institute for Cancer Research in Philadelphia and winning a 1976 Nobel Prize."

Rall was a member of the National Academy and the first person at NIH named to the executive rank in the Senior Executive Service. He wrote more than 160 journal articles.

His first major contribution to science, said Gottesman, came in the late 1950s, as a graduate student at the Mayo Clinic and then postdoc at Memorial Sloan-Kettering, where Rall was among the first to use radioactive iodine to study thyroid function. With his long-time friend and NIH colleague Jack Robbins and others, Rall introduced hormone treatment to thwart the development of thyroid nodules and cancer from radiation fallout from atomic bomb testing near the Bikini Atoll. "The

programs they developed for prevention and treatment of these radiation-related problems have become standards of care, applied by Ed and his NIDDK colleagues to the near-meltdown at Three Mile Island and for the disaster at Chernobyl," Gottesman noted.

Rall served as acting deputy director of science from 1981 to 1982 and then as the first DDIR from 1983 to 1991 before his return to the lab and then retirement in the 1990s.

"Often in my own role as DDIR, I ask myself, 'What would Ed do?,'" said Gottesman. "Ed's life was synonymous with science. He lived and breathed science and he eloquently championed and defended the scientific process within the Intramural Research Program and beyond. He was one of the lions of NIH and he will be greatly missed."

Rall's first wife, Caroline Domm Rall, whom he married in 1944, died in 1976. His second marriage, to Nancy Rall, ended in divorce.

Survivors include two children from the first marriage, Priscilla Rall of Rocky Ridge, Md., and Edward C. Rall of Kensington, seven grandchildren and eight great-grandchildren.



NCI Appoints Reid Branch Chief

Dr. Britt Reid has been named chief of the Modifiable Risk Factors Branch (MRFB) of the Epidemiology and Genetics Research Program (EGRP) in the Division of Cancer

Control and Population Sciences, NCI. The MRFB focuses on cancer factors that may be modifiable such as diet and nutrition, alcohol, physical activity and energy balance, tobacco, infectious diseases, physical and chemical agents and medical exposures.

Reid joined NCI in 2007 as a program director in MRFB. Prior to joining EGRP, he was an assistant professor in the department of health promotion and policy at the University of Maryland Dental School, where he was director of a graduate course on applied scientific evidence, an epidemiology consultant for the NIH-funded Data Resource Center and global data director for the Special Olympics oral health program. Reid also was a principal investigator for two NIH-funded grants addressing head and neck cancers and co-investigator for

two additional NIH-funded grants addressing the impact of comorbid conditions on health outcomes. He also served as a reviewer of epidemiology and cancer content for seven scientific journals and two NIH study sections. He has authored or coauthored 27 manuscripts in peer-reviewed scientific journals since 2000.

Prior to his academic career, Reid practiced clinical dentistry in Washington, D.C., and as a naval officer in support of the Fleet Marine Force in Japan. He received his D.D.S. from the University of Michigan and Ph.D. in epidemiology from Johns Hopkins Bloomberg School of Public Health.



NIGMS Grantee Slaughter Wins Presidential Award

Dr. Gayle Slaughter, director of several NIH-funded minority programs at Baylor College of Medicine in Houston, was among the latest recipients of the Presidential Award for Excellence in Science, Mathematics and Engineering Mentoring.

The annual awards recognize influential institutions and individuals who have been leaders in encouraging minorities, women and people with disabilities to pursue careers in science, technology, engineering and mathematics. Slaughter is assistant dean for graduate education at Baylor, where she directs two NIGMS Minority Opportunities in Research (MORE) programs and an NHLBI training grant aimed at increasing the number of minority biomedical and behavioral scientists.

She was recognized for pioneering Baylor's Summer Medical and Research Training Program and for her "success in recruiting and retaining graduate students, especially from underrepresented groups." She is credited with mentoring more than 500 minority students.

Slaughter was among 10 individuals and 1 institution who received the awards during recent ceremonies at the White House. The awards, established by the White House Office of Science and Technology Policy and administered through the National Science Foundation, consist of a \$10,000 grant and a commemorative Presidential certificate.

Since the awards program began in 1996, 14

individuals and 2 organizations supported by MORE have been recognized with the honor.

"The substantial number of awards to MORE grantees is gratifying," said Dr. Clifton Poodry, director of the MORE program. "It indicates that we are funding some of the most dedicated and effective mentors out there."

For a full list of MORE winners of the Presidential mentoring award, see www.nigms.nih.gov/Minority/PresidentialAwards.htm.—Susan Athey

Kopstein To Head CSR Office

Dr. Andrea Kopstein has joined the Center for Scientific Review to head its Office of Planning, Analysis and Evaluation.

"Dr. Kopstein brings impressive analytic and leadership skills, and we're pleased she will be leading efforts to plan and assess our many initiatives to enhance CSR's peer review operations," said CSR director Dr. Toni Scarpa. He noted that Kopstein has nearly 30 years of experience planning and evaluating federal health science programs. "And she was the top candidate recommended by a trans-NIH search committee, which conducted a nationwide search," he added.

Kopstein comes to CSR from the Substance Abuse and Mental Health Services Administration, where she was chief of the Quality Improvement and Workforce Development Branch within the Center for Substance Abuse Treatment. This was one of three progressive terms as chief of branches within the center. She formerly led the Practice Improvement and Program Evaluation Branches.

Before becoming a branch chief, Kopstein was a survey statistician working on the National Household Survey on Drug Abuse, first at the National Institute on Drug Abuse and then SAMHSA. Early in her career, she spent 11 years at the National Center for Health Statistics, part of the Centers for Disease Control and Prevention, working on multiple national data-collection efforts. She received her Ph.D. in epidemiology from Johns Hopkins and her masters in public health from the University of Texas.



Crystallography Expert Smith Joins NIGMS

Dr. Ward Smith recently joined NIGMS as a program director in the Structural Genomics and Proteomics Technology Branch of the Division of Cell Biology and Biophysics. His responsibilities include helping to direct the Protein Structure Initiative, a network of research centers that are making protein structure determination faster, easier, cheaper and more useful to a broad range of scientists. Smith was formerly a protein crystallographer in the biosciences division at Argonne National Laboratory, where his research focused on the structure and function of biological macromolecules and structure-based drug design. Prior to that, he was an associate director in the department of structural biology at GlaxoSmithKline. Smith earned a B.S. in chemistry from the University of Illinois at Urbana-Champaign and a Ph.D. in biological chemistry from the University of Michigan. He conducted postdoctoral research at the University of California, Los Angeles. 



One More Reason to Hate Winter

Yesterday marked the first day of spring, but that doesn't mean cold temperatures—and with them, the winter flu—may be entirely over.

Why is the flu virus more infectious in cold winter weather than in warmer months? New

research from NICHD and NIAAA may provide an explanation. Scientists found that at cold temperatures, the virus's outer covering, or envelope, hardens to a rubbery gel that shields the flu as it passes from person to person. At warmer temperatures, this protective gel melts to a liquid phase that's not so well-protected from the elements and the virus loses its ability to spread so easily. Scientists said the study

results, published online Mar. 2 in *Nature Chemical Biology*, opens up new avenues of research for reducing the spread of winter flu outbreaks, such as testing detergents and hand-washing protocols that could effectively hinder spread of the virus.

Fighting Asthma at Home

A new study conducted in part by NIEHS has linked increased allergen levels in the home with asthma symptoms in people with allergies. The findings, published online in the March issue of the *Journal of Allergy & Clinical Immunology*, suggest asthmatics with allergies could alleviate their symptoms by reducing allergen levels in their homes. In a national survey, researchers found that exposure to multiple indoor allergens—like those from dogs, cats, cockroaches and dust mites—was common in U.S. homes, with 52 percent of households having at least six detectable allergens and 46 percent having three or more allergens at increased levels. The study is the first to provide information on total allergen burden in the U.S. and how it relates to asthma. Its results could be helpful to people all over the country who suf-

fer from asthma, a chronic ailment that affects more than 22 million Americans.

New Findings for Bad Odors

More on household irritations: Scientists don't yet know why certain smells—such as onions, ammonia and paint thinner—can be so overwhelming. But new NIDCD-funded research in mice has uncovered an unexpected role for specific nasal cavity cells in this process. The findings, described in the March issue of the *Journal of Neurophysiology*, show that a particular cell, abundant near the entry of many animal noses, plays a crucial part in transmitting irritating and potentially dangerous odors. Though the research was conducted with mice, similar solitary chemosensory cells have been found in the nasal cavities, airways and gastrointestinal tracts of many mammals. Scientists think it's likely they're also present in humans. Prior to the study, it was thought that irritating odors stimulated the trigeminal nerve; the new research corrects this assumption and expands scientific knowledge of olfaction, which could lead to a better understanding of why some people are especially sensitive to certain smells.

Avoiding Unnecessary Joint Procedures

NIAMS researchers have developed a potential test that could help surgeons confirm or rule out the presence of infection-causing bacteria in prosthetic joints, freeing some patients from an unnecessary procedure. Described in the March issue of the *Journal of Bone and Joint Surgery*, the diagnostic test could spare a subgroup of people whose prosthetic joints require surgical revision from a time-consuming and costly treatment for infection, while also determining those who truly need the procedure. Each year in the U.S., thousands of prosthetic joints must be removed and replaced due to severe pain and swelling often caused by infection. The standard treatment for suspected infection is to replace the joint prosthesis with a spacer filled with antibiotics, remove the spacer 6 weeks later and then implant the new prosthesis. With the new test, those who don't have infections could go without this process.—compiled by Sarah Schmelling



New research from NICHD and NIAAA may explain why the flu virus is more infectious in cold winter temperatures than during warmer weather.



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

Gingival Overgrowth

Do you have enlarged gums and are you taking dilantin, cyclosporine or calcium channel-blockers? Take part in an NIH study.

Allergy Clinic

Does your child have allergies? The NIH Pediatric Allergy and Asthma Clinic is for children 3 months to 18 years of age. All study-related tests and treatments will be provided at no cost. Parental permission and child agreement are required.

Study of Fibroids Needs Women

Women ages 33-50 suffering with fibroids are invited to participate in an NIH study. Compensation is provided. Refer to study 06-CH-0090.

Dry Mouth

Do you have dry mouth after radiation therapy for head and neck cancer? Are you currently cancer-free? If so, you may be eligible to participate in a clinical research study that will test a new gene therapy to try to increase saliva production. All study-related tests and medications are provided at no cost.

Kidney Disease

Do you have diabetes and early kidney disease (microalbuminuria)? If so, you may be eligible to participate in a research study to try and identify biomarkers that may lead to better treatments. All study-related tests and medications are provided at no cost. Study is for patients 18 or older.

Coronary Artery Disease

Have you had a heart attack, angioplasty or bypass surgery? If so, you may be eligible to participate in a clinical research study that will test an investigational medication that may lower C-reactive protein. C-reactive protein may indicate that you are at risk for sudden heart problems such as a heart attack. All study-related tests and medications are provided at no cost. Compensation is provided.

Neck Pain Study Needs Volunteers

The Clinical Center's rehabilitation medicine department is seeking individuals with neck pain and healthy volunteers between the ages of 21-65 to participate in a natural history study of neck pain (02-CC-0245). Participation involves 4 monthly visits (about 1 hour each) for a comprehensive cervical musculoskeletal examination. No compensation is provided. Contact neckpainstudy@gmail.com or (301) 451-7514.

One-Day Outpatient Study

Healthy volunteers, ages 19 to 55, are needed to participate in research studying genes and brain function. Testing procedures involve a blood draw, non-invasive neuroimaging, interviews and cognitive testing. No overnight stay. No medication trial. Compensation is provided. Call the Clinical Brain Disorders Branch at (301) 435-8970 or email Danielef@mail.nih.gov. Refer to protocol 95-M-0150.

Schwartzberg Wins AAI Investigator Award

Dr. Pamela L. Schwartzberg, senior investigator and head of the cell signaling section of NHGRI's Genetic Disease Research Branch, will receive the AAI-BD Biosciences Investigator Award from the American Association of Immunologists (AAI).



The award recognizes Schwartzberg's outstanding early-career research contributions to the field of immunology and her high-impact observations in the broad field of T-cell signaling. Her work utilizes genetic and biochemical approaches to dissect signaling pathways in T cells and determine the roles these pathways play in lymphocyte development and function.

"To be in the same category as some of the other awardees is an incredible honor," Schwartzberg said. "I was not trained as an immunologist, and I really have learned from my colleagues on the NIH campus. Their feedback has been invaluable."

Schwartzberg's selection reflects the appreciation in the immunology community for contributions from a genomics researcher. It recognizes her accomplishments to date and her promise of success in the future. She will accept the award on Apr. 7 at the 95th annual meeting of AAI in San Diego, where she has been invited to deliver a lecture to mark the honor. The award includes a plaque, \$3,000 and travel support to attend the meeting. AAI is the largest professional association of immunologists, with a membership of more than 6,500 scientists.

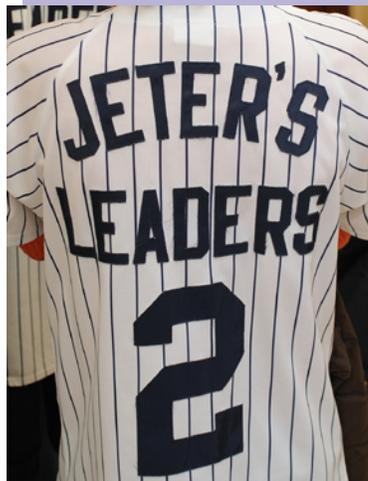


'Jeter's Leaders' Welcomed Back to Campus

NIH recently hosted a return visit by New York City youngsters dubbed "Jeter's Leaders," an outreach program supported by the Derek Jeter Foundation; Jeter is the star shortstop for the New York Yankees.

The mission? Help high school students become peer educators on alcohol abuse and underage drinking. The methods? Meetings with NIAAA clinical director Dr. Markus Heilig, Clinical Center director Dr. John Gallin and NIDDK director Dr. Griffin Rodgers; sessions in NIAAA's Dr. Dennis Twombly's "Drunken Brain" exhibit and "fatal vision" obstacle course, as well as a monkey facility with Drs. Christina Barr and Steve Lindell; a peek at NLM's forensic exhibit with Erika Mills; and a trip to NIDDK's Metabolic Research Core with its director, Dr. Kong Chen.

The topics? Why people crave alcohol, the minimum legal drinking age, recovery, exercise and the truth about sodas. The break? Boxed lunches (donated by the Bean Bag) dovetailed with a panel discussion led by Jorge Zapata of NIAMS and Frank Holloman of NIDDK. The verdict? Science is awesome. For more information on Jeter's Leaders, visit www.turn2foundation.org.



Top:
NIDDK's registered dietitians quiz the kids on sugar in soda.

Clockwise from above:
Why do people crave alcohol? Jeter's Leaders now have answers.

NIDDK director Dr. Griffin Rodgers (standing, fourth from r) welcomes the kids.

Jairo Sanchez-Chavez chills in the BMI-measuring Bod Pod.

NIDDK's Dr. Kong Chen, Metabolic Research Core director, outlines good nutritional choices.

PHOTOS: ERNIE BRANSON

