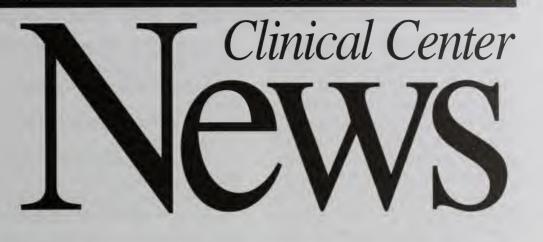
April 2001

In this issue:

Construction changes
Celebrating volunteer week
Mad hatter campaign



CC unveils new training program

The Clinical Center recently announced a collaboration with the University of Pittsburgh, designed to broaden clinical research training opportunities. The program will lead to a Certificate in Clinical Research or a Master of Science in Clinical Research from the University of Pittsburgh. Aimed at reaching practitioners beyond doctors and researchers, this program will include members of allied health professions.

"As with all of our research training programs, we are excited about the possibilities of this latest endeavor," said Dr. John Gallin, CC director. "Since clinical research can be beneficial and successful only when individuals have the necessary training and expertise to conduct it, we see this program, as well as a host of others, as a major step in providing the tools that people need."

Similar to the NIH-Duke Masters Program in Clinical Research that was initiated in 1998, this program will help to fill the void in the community of formally trained clinical researchers, in an interactive, state-of-the-art way.

Unlike the Duke program, the new collaboration will be open to a wider audience, including Ph.D.'s and doctorally-prepared pharmacists and nurses. Physicians and dentists are also eligible for matriculation in the program.

The training consists of a core

curriculum, which is taught over an intensive eight-week summer session at the University of Pittsburgh, followed by a nine-month methodology seminar, held via videoconferencing at the Clinical Center.

The core courses are designed to teach trainees the basic elements that all clinical investigators should know, including courses on clinical research methods, biostatistics, introduction to clinical trials, and measurement in clinical research.

Trainees will then choose from four specialty concentration areas, including: effectiveness and outcomes, clinical therapeutics, health and behavior, and epidemiology. Participants have the option of receiving a Certificate in Clinical Research (15 credits) or a Master of Science in Clinical Research (30 credits) from the University of Pittsburgh.

The program will begin in July. Tuition for the 2001-2002 academic year is \$480 per credit. The cost for room accommodations for the intensive eight-week summer session in Pittsburgh is \$800.

Prospective participants should consult with their institute or center regarding the official training nomination procedure. For more information, visit the University of Pittsburgh website at www.pitt.edu/~crtp/ or send an email to crtp@imap.pitt.edu.

-by LaTonya Kittles



U.S. Surgeon General David Satcher speaks to CIGNA directors during visit.

CIGNA visit lays groundwork for future alliance

Nearly 150 CIGNA medical directors from across the nation visited the NIH last month and toured the CC, in an effort to lay the groundwork for future partnerships with non-federal health organizations such as CIGNA.

CIGNA Healthcare is a health benefits provider that serves 14 million people around the country.

"The visit provided a great opportunity for the CC and the NIH to make connections with a major managed-care organization and hopefully will serve to stimulate continuing dialogue between CIGNA and NIH on ways in which we might

See visit, page six

Resources available for stressed-out workers

Feeling a bit blue? Having trouble concentrating? Experiencing conflicts at work? Has stress from work or interpersonal issues got you down? Are you seeking a better quality of life? Take heart! There are many NIH and other resources available to help employees and supervisors navigate the dark waters of conflict and stress, and achieve personal and/or professional fulfillment. For example, consider the following:

The NIH Employee Assistance Program 301-496-3164

www.nih.gov/od/ors/ds/eap/ Provides confidential consultation services to help address difficult situations that may affect employees. *The NIH Center for Cooperative Resolution* 301-594-7231 www4.od.nih.gov/ccr/ Provides confidential and informal assistance in resolving work-related conflicts or concerns. *The NIH Work and Family Life Center* 301-435-1619

http://wflc.od.nih.gov/ Provides guidance and advice on balancing work, family, and career development needs. *CIVIL*

301-453-0031

Provides advice, guidance and crisis intervention services regarding workplace violence, threats and other aggressive behaviors at NIH. *Police Branch, Division of Public Safety* 911 for emergencies. 301-496-5864 for non-emergencies.

www.nih.gov/od/ors/dps/ Provides assistance to employees:

National Domestic Violence Hotline

1-800-787-8224 or 1-800-799-SAFE TDD: 1-800-787-3224

www.ojp.usdoj.gov/vawo/newhotline.htm

Provides victim assistance and referral services.

Also, your assigned administrative officers (Office of Administrative Management and Planning, Building 10) and personnel management specialists (Office of Human Resources Management, 6100 Executive Blvd.) may be helpful in providing advice and suggestions.

Visit the CC Office of Human Resources Management website at http://ohrm.cc.nih.gov, for detailed employee information on employee-See resources, page eight



Take Your Child to Work Day

National Institutes of Health Thursday, April 26, 2001 9am—4pm

Let your child experience the exciting world of science and medical research. Children ages 8-15 welcome. Preregistration required for some events; coordinate on-the-job visits with your supervisor. Details are on the web: http://www.cc.nih.gov/ccc/nihkids/

> Far sign language interpreting ar other reasonable accammodotion services, contact Gary Morin, 301-496-4628 (Voice) or 301-496-9755 (TTY) by April 20.



Editor: Tanya Brown Contributing Writer: LaTonya Kittles

Clinical Center News, 6100 Executive Blvd., Suite 3C01, MSC 7511, National Institutes of Health, Bethesda, MD 20892-7511. 301-496-2563. Fax: 301-402-2984. Published monthly for CC employees by the Office of Clinical Center Communications, Colleen Henrichsen, chief. News, article ideas, calendar events, letters, and photographs are welcome. **Deadline** for submissions is the second Monday of each month. *Clinical Center News* online: www.cc.nih.gov/ccc/ccnews/current



Women needed

The National Institute of Child Health and Human Development is seeking women, ages 18-42, to participate in a study comparing bone density in healthy women. You may be eligible to participate if you have no medical conditions and a regular menstrual cycle, not pregnant, nursing or planning pregnancy over the next three years; do not use oral contraceptives or prescribed medications; smoke less than two cigarettes per day; and drink less than two alcoholic drinks per day.

Participation involves four visits over a three-year period, blood test, bone density test, urine test and cognitive testing. Compensation is provided. For more information call 301-435-7926 or 301-594-3839.

Uveitis and JRA

Doctors are investigating the safety and effectiveness of the drug etanercept (Enbrel) against a placebo. If your child has uveitis associated with juvenile rheumatoid arthritis, consider enrolling him/her in the study by calling 1-800-411-1222 (TTY 1-866-411-1010). All participants will have the opportunity to be on the study medication. Volunteers will be compensated.

Sickle cell study

Individuals with sickle cell disease are asked to participate in a six-hour bood study during which nitric oxide, a substance produced naturally by the body, will be given. Researchers believe that nitric oxide may improve the flow of blood, which may reduce complications and improve the overall health of people with sickle cell disease. Volunteers will receive a free heart exam as part of the study and will have their progress followed for two years. If you are between the ages of 18 and 65 and have sickle cell disease, you may be able to take part in this study. Call 1-800-411-1222 (TTY: 1-866-411-1010).

Menopause study

National Institute of Child Health and Human Development invites healthy women, ages 45-70, to participate in a study of a new investigational hormonal treatment for menopause. You may be eligible if you are not diabetic, had no menstrual periods for at least one year, do not take hormone replacement therapy, do not smoke and have not had a hysterectomy. Participation involves brief weekly outpatient visits over 8-10 weeks. Compensation is provided. Call 1-800-411-1222 (TTY: 1-866-411-1010).

Crohn's disease

The National Institute of Allergy and Infectious Diseases is conducting a study to test the safety and effectiveness of a potential new Crohn's disease treatment against a placebo (a substance that neither harms nor helps). If you are 18 or older with moderate Crohn's symptoms, call 1-800-411-1222 (TTY: 1-866-411-1010) for more information.

Jaw pain/TMD

The National Institutes of Health seek people 18-65, with early onset or later stage TMD for a study testing treatment medications against a placebo. Call 1-800-411-1222 (TTY 1-866-411-1010).

Back and leg pain

The NIH Pain Research Clinic is conducting research studies to improve the treatment of chronic back and leg pain. The clinic is interested in pain resulting from a pinched lumbar nerve caused by conditions such as a herniated disc, a bone spur or arthritis. You may be able to take part if you are age 18 or older and if you have had pain in your back and leg or buttock for the last 3 months. Call 1-800-411-1222 (TTY 1-866-411-1010).

Construction changes cause confusion for some *Clinical Research Center team explains recent changes made to Bldg. 10*

Much confusion has been generated by the recent closure of the stairway off the east terrace that has served as the route to Buildings 1 and 31. The CRC team apologizes for the lack of forethought in recognizing that not only was it important to get people into Building 10, but also out of Building 10.

New signs have been placed on the doors that lead to the terrace explaining the new exiting paths. These directions can also be found at other strategic locations throughout Building 10.

For the best access to Buildings 1, 2, 4, 6, and 31, take the front ACRF Clinic elevators to the P-3 garage, and follow walkway and directional signs to exit onto Memorial Drive.

For the best access to Buildings 3, 5, 7, 8, 9, and 50, take the east elevator tower to the B-1 level and follow signs, exiting via the south end of A-wing.

Pedestrians should be alert when using the P-3 exit because of vehicu-

lar traffic. Please use the crosswalk and do not exit through the P-3 entry drive. Although the B-2 loading dock is open, the CC strongly discourages the use of this as an entry/exit to and from Building 10. Heavy truck and van traffic at the dock, along with traffic down the corridor to the dock can be dangerous.

These construction changes will last for at least a year. When completed, access via the terrace will again be made available. For inquires call Don Sebastian at 301-402-9243.

A salute to

Flower shop volunteers get more from giving Big hearts and beautiful bouquets bring smiles to patients and employees

The Friends of the Clinical Center Flower Shop volunteers wouldn't call themselves professionals, although their work is certainly topnotch. They wouldn't even say that their arrangements brighten people's day, although they do. But what they will say is that they receive more by giving.

"I never leave here one day without feeling that I'm blessed to be able to come," said Floride Canter, head of the Red Cross volunteers at the Clinical Center. Canter has been volunteering at the Clinical Center for 18 years and currently works eight hours a day, five days a week. "I don't come just to get, but to give."

The Flower Shop volunteers are Red Cross volunteers who dedicate two to three hours of their time each week to arrange flower bouquets for patients and events at the Clinical Center. They also supply floral arrangements for the three hospitality desks in the Clinical Center, decorate the store and assist customers with orders.

Floride has faithfully recruited her husband Harry, (who drives to a warehouse each week to pick up supplies for the shop), her neighbors and friends. Most admit that they had no previous floral-arranging experience, but learned by trial and error.

"I would learn a lot from watching other people," said Ann Hall. "It's great just to see how flowers lift spirits." Ann and her husband, Arthur, have been volunteering at the flower shop as a team for more than five years. They set aside every Tuesday to help out.

"We've had friends who were patients here and we've known parishioners who have been on the faculty, so just to be a part of NIH



The Friends of the Clinical Center Flower Shop volunteers dedicate their time to creating bouquets and crafts for patients, visitors and employees. All proceeds go to the Friends of the Clinical Center. Some of the volunteers include (from I to r) Harry Canter, Floride Canter, Lila Nathanson, Ann Hall and Arthur Hall.

"Just to be a part of NIH and give a tiny bit back, makes us proud."

—Arthur Hall

and give a tiny bit back makes us proud," said Arthur.

All proceeds from the flower shop go to support the Friends of the Clinical Center, a nonprofit, charitable organization that provides emergency financial aid to NIH patients and their families. Some patients and their families are stressed and often suffer loss of income while being treated at the Clinical Center. The organization depends solely on contributions to provide financial assistance to patients and their families who are facing crises resulting from long-term illnesses.

Last year, the organization helped nearly 50 families to pay their rent, utilities and other third-party bills.

"Volunteers are essential; you rely on them," said Lila Nathanson. Nathanson has been volunteering at the flower shop for seven months. Prior to that, she volunteered at the Prevention of Blindness Society. She said she has a knack for arranging flowers, and for the past five years she has learned Japanese flower arranging.

Nathanson said one thing she has learned in her years of working as a volunteer is that volunteers are never taken for granted.

"If you volunteer, then you are important," she said.

volunteers

Language Interpreters: small, but crucial role

Demand for language interpreters increases in CC

With many patients traveling to the Clinical Center from foreign countries, the need for interpreters has grown significantly over the past 10 years.

In 1990, there were only two volunteer interpreters who spoke Spanish, and the Office of Volunteer Services received one call a week for an interpreter. Today, the numbers have grown to over 100 volunteer interpreters and 42 different languages. Yet, it is still difficult to meet the demands of the patients.

"We are facing a lot of challenges. Patients are being brought in from different countries, and we are required to provide good, quality patient care, and that includes interpreters," said Andrea Rander, director of Volunteer Services. "But if we

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don't know in advance when the patient is arriving, then we are going to have a problem providing that type of quality care."

Volunteer Services isn't always notified when an interpreter is needed. There have been cases where patients have had to wait several hours for interpreters to be found so that the patient can be admitted.

"It's hard to see patients just sitting there," said Valarie Bailey, admission assistant. "We just keep trying to reassure them that we are working hard to try and get someone to come and help them."

Nancy Pierre just happened to walk out of her office in Hospitality Services when she was approached by an employee at the admissions desk about a French-speaking patient



Spanish Interpreters Ingrid Witt (left) and Monica Sullivan donate their time to translate for patients. With an increasing number of patients coming to the Clinical Center from foreign countries, the need for interpreters is essential. Since Spanish interpreters are the most requested in the CC, plans are being made to have at least one full-time Spanish interpreter available.

who needed an interpreter and had been waiting a few hours. Pierre, a native of Haiti, and fluent in both French and Creole, assisted the patient, and was sympathetic about the amount of time spent waiting for an interpreter.

"The way we present ourselves to the patients reflects the Clinical Center as a whole. Unfortunately, when you don't have enough interpreters to help patients, it's the patient that suffers," said Pierre.

Oftentimes Rander receives emergency calls for interpreters and must contact each volunteer by telephone. If the volunteers are unavailable, then other resources are tapped.

In one case, Rander said she received a request for an interpreter who speaks Amharic, a dialect of Ethiopia. While walking down the hallway, she ran into a friend who is from Ethiopia. In casual conversation, she happened to ask if he spoke Amharic. Unfortunately, he didn't, but he knew a doctor in the CC who did.

A similar situation occurred with a patient who spoke Hebrew. There were no interpreters who spoke Hebrew, however an employee knew someone in the community who spoke the language.

"After we contacted her, she gave us a whole list of people who were fluent in Hebrew and willing to volunteer," said Rander. Because of that one resource, the Embassy of Israel contacted Volunteer Services and offered its assistance when needed.

"We just ask to be given a little notice, and we will find someone, and if we can't, then we will tell them and find other resources," said Rander.

That is how Monica Sullivan came to the CC. A native of Chile, Sullivan spoke Spanish and learned

See interpreters, page seven

Mercury-free campaign kicks off

It's time to retire and recycle those mercury-filled thermometers and blood pressure cups because the Division of Safety (DS) is "mad as a hatter" about mercury, and with your help they hope to eliminate it from the NIH.

The "Mad as a Hatter? Campaign for a Mercury-Free NIH" will kick off April 26 in Bldg. 10, in conjunction with Earth Day and Take Your Child to Work Day. There will be handouts, booths and presentations to help employees, their families and the community understand the hazardous effects of mercury in the workplace, homes, schools and the environment.

The kick off begins phase-two of the mercury reduction program, a NIH-wide initiative to dispose of all uses of mercury-containing devices, including non-medical devices in laboratories and electrical equipment. The initial phase began in 1996, when the Clinical Center took steps to eliminate all unnecessary uses of mercury in medical devices and laboratory chemicals. Nearly 1,500 mercury-containing devices were removed, and today the CC is virtually mercury free.

"We hope to build on the success of the Clinical Center campaign," said Capt. Ed Rau, environmental health director, Division of Safety, Office of Research Services (ORS).

Mercury spills from broken thermometers are the most common hazardous material response incident in NIH facilities, according to a report from the ORS. Such spills can contaminate air to hazardous levels and require special equipment and decontamination by the NIH fire department.

"Some people think mercury is perfectly harmless to work with because they played with it as a child," said Karen Helfer, informa-



In Alice in Wonderland, author Lewis Carroll selected a hat maker as the demented host of the tea party. Hatters of the time commonly exhibited psychotic symptoms, hence the expression "mad as a hatter." In the 1800s, Hat makers used hot solutions of mercuric nitrate to shape wool felt hats. They worked in poorly ventilated rooms leading to chronic exposure to mercury, resulting in neurological damage known as hatters' syndrome.

tion officer, DS.

Helfer said mercury is a curious material, and children would often find it and play with it. "We want those people to overcome their prior belief that mercury isn't dangerous."

The campaign not only covers mercury-containing devices in laboratories, but will also concentrate on removing mercury in electrical equipment such as thermostats, switches, fluorescent light bulbs and batteries that contain small amounts of mercury.

"For most uses of mercury, there are substitutes, and use of these alternatives is encouraged" said Rau. "A little bit of mercury is a lot. We don't have much left here, but we want to try and keep it as low as possible."

For the few uses for which there is no substitute, mercury can still be used with appropriate safety precautions. All mercury waste must be segregated and carefully labeled in order to be recycled efficiently.

The voluntary campaign requires participants to sign a pledge to survey their work areas for items containing mercury, dispose of them properly, and replace them with mercury-free alternatives. A drawing for prizes will be held for all pledges that are submitted.

For more information or to submit a pledge electronically, visit the website at

www.nih.gov/od/ors/ds/nomercury.

Visit prompts talks about health issues

continued from page one work together," said Dr. David

Henderson, CC deputy director for clinical care.

The medical directors were interested in the operations of the clinical research center and received tours of the NIH lab facilities and clinical operations, along with several briefings from NIH staff about research on the human genome project and recruitment for clinical trials.

An afternoon symposium featured presentations by panelists and a question-and-answer period about how research organizations and private medical organizations can together promote medical research

The day-long symposium concluded with a presentation from U.S. Surgeon General David Satcher, who discussed his recent report on oral health.

"This has given us an opportunity to learn more about NIH," said Dr. Rachelle Dennis-Smith, vice president of health policy at CIGNA. "It's an opportunity that we can afford to give our directors in an effort to help provide access to quality healthcare."

briefs

Take child to work

NIH will sponsor a fun, educational opportunity for children ages 8 to 15 during the Take Your Child to Work Day, April 26, from 9 to 4.

The event was designed to introduce school-aged children to the vital public services their parents provide and encourage them to consider careers in medical research. For a listing of activities, registration requirements, and other information, visit the website at **www.cc.nih.gov/ccc/nihkids**. For accommodations for disabilities, contact Gary Morin 496-4628, (TTY) 496-9755.

For more information, contact Joyce Starks at 402-6068 or Ana Kennedy at 496-4547.

QWI awards

The NIH is once again soliciting awards from the ICs for quality-ofworklife accomplishments. Award categories include strengthening family-friendly work programs, strengthening workplace learning and change management activities, improving communication with employees, promoting the effectiveness of diversity management and fostering overall workplace improvement.

The deadline for submissions is April 20. For more information, visit the website at

www1.od.nih.gov/ohrm/qwl/award s/awards-toc.htm or call Wendy Thompson at 301-435-1619.

Literary event

"Essential Bridges: Using the Humanities in Medical and Therapeutic Settings" will be held on Friday, April 27, 8:30 to 5 at the Neuroscience Conference Center, 6001 Executive Boulevard. Registration deadline is April 6. Registration fee of \$30.00 covers all materials, sessions, workshops, continental breakfast, lunch, and closing reception. Featured poets include Linda Pastan and Richard McCann.

Bucolo leaves post after three decades

After more than 34 years of repairing and maintaining medical equipment, Joseph Bucolo is leaving his job as a biomedical technician with the Materials Management Department and moving to Tennessee to spend time with his family and enjoy his retirement.

Bucolo came to the Clinical Center in September 1966, after working five years as an electrical engineer with NASA, where he created electronic components for spacecrafts.

Seven years ago, Bucolo had the opportunity to retire, but he enjoyed his job so much that he decided against it.

Bucolo was responsible for checking the safety of each piece of medical equipment that entered the CC. He also repaired the equipment and performed routine maintenance.

"I enjoy helping the patients and the doctors," said Bucolo. "First and



foremost is the patient and making sure that all the equipment works so that the patients can be helped."

Although he won't be working a full-time job, at age 62, Bucolo said he is too young to retire and will probably work a part-time job just to keep busy. When he's not working, he hopes to tend to his garden and develop his woodworking skills by building furniture and crafts.

Interpreters give voice to ill patients Volunteers are life-savers to foreign speakers

continued from page five

German from her father before mastering English. Sullivan had a friend who volunteered as an interpreter at a hospital in Houston. Her friend became ill and later died. Her death inspired Sullivan to volunteer, so she informed her neighbor of the decision and her neighbor, a Red Cross volunteer at the CC, put her in contact with Volunteer Services.

"If I can help out in any small way, I try to do that," said Sullivan. "I'm not a physician or a nurse, but I help out in a social capacity and it's very rewarding."

Sullivan is one of the few interpreters who work a regular schedule. Each Thursday from 9 a.m. to 1 p.m. she checks in at the Volunteer Services Office to see where she is needed.

If she has spare time, or is not needed immediately, Sullivan said she goes to the Red Cross information desk and looks over the patient list to see if there are any names she recognizes from previous visits. If so, she will go and visit them.

"Many patients come back every two or four months and when I see their names, I immediately know who they are," said Sullivan. "It's difficult not to become personally involved. We are asked not to form relationships with the patients, but in many cases it's hard not to."

With the ever-increasing number of ethnic groups that enter the Clinical Center, more employees with medical knowledge are needed to help interpret.

"They don't have to be available every hour, but their names will go on a list and they will be contacted if they are needed," said Rander. "It's the goodness of the interpreters that makes this program work."

Anyone interested in volunteering, call Andrea Rander at 301-496-1808.

QWI offers resources and classes

continued from page two

friendly topics ranging from incentives and employee benefits to professional development and flexible work options.

Course offerings:

A number of CC-sponsored courses scheduled for spring can assist employees with fine-tuning skills and creating a more manageable work environment.

Several classes are back by popular demand. Brian Easley from the NIH Work and Family Life Center is presenting Creating an Individual Development Plan. A Franklin Covey presentation will be given on Time Management.

Leadership seminars include: Competency Development, Best

Grand Rounds

Lipsett Amphitheater

noon-1 p.m.

Management Practices for Recognizing Your Employees and Working with Challenging People.

The CC Education and Training Section is also sponsoring the everpopular CompUSA Macintosh Computer Training. Visit the OHRM website to learn more about all course offerings.

NIH-sponsored personal and professional development resources: For personal consultations related to career development, contact the NIH Work and Family Life Center at 301-435-1619.

The NIH Human Resource Development Division also provides classes in conflict management and communication skills. Call 301-496-6211.



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Whether it is Better to Enroll Healthy or Affected Children in No-Benefit Research Norman Fost, M.D., University of Wisconsin

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Silencing the Cell Cycle, in DNA Replication Jasper D. Rine, Ph.D., University of California, Berkeley

Grand Rounds noon-1 p.m. Lipsett Amphitheater

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The Pediatric Procedure of Killing Children in Nazi Germany: A Case Study of Due Process, Medical Economics, and Public Denial Susanne Zimmerman, M.D., Friedrich-Schiller University Anticonvulsants in the Treatment of Bipolar Affective Disorder Robert M. Post, M.D., NIMH

a p r i l

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Synaptic Plasticity and the Redistribution of Glutamate Receptors Roger Nicoll, M.D., University of California, San Francisco

Grand Rounds noon-1 p.m. Lipsett Amphitheater

Guidelines for the Prevention of Catheter-Related Bloodstream Infections Naomi O'Grady, M.D., CC ABCA1 Transporter: Role in High Density Lipoprotein Mediated Cholesterol Efflux and Tangier Disease Alan Remaley, M.D., Ph.D., CC Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Managing and Monitoring Multicenter Clinical Trials: Who is in Charge of What? David L. DeMets, Ph.D., University of Wisconsin

Grand Rounds noon-1 p.m. Lipsett Amphitheater

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Multiple Endocrine Neoplasia Type 2: Recent Advances in Basic Concepts and Clinical Management Christian Koch, M.D., NICHD

Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Mouse Models of Human Cancer Harold Varmus, M.D., Memorial Sloan Kettering Cancer Center, NY