

April 2002

# Clinical Center News

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- Plain Language Awards
- Volunteer experiences: retirees and au pairs

## Poetry provides outlet for healing



Lori Weiner, coordinator of NCI's Pediatric HIV Psychosocial Support and Research Program, reads several poems written by Patricia Washington (left).

See related story on page six

## Image processing enhances diagnostic services

A new service in the Diagnostic Radiology Department provides image processing that enables physicians to gain a better understanding of patient medical conditions.

"The Clinical Imaging Processing Service (CIPS) allows physicians to order tests that haven't been available before," said Dr. Ronald Summers, clinical director of the service. "We have a range of expertise in processing, and we have been publishing research papers about it, but until recently, we

haven't been able to get the expertise from bench to bedside."

The department began offering virtual bronchoscopy a few months ago. "Physicians have been enthusiastic about it and have been ordering it," said Summers. "We're now ready to expand the number of image processing (IP) tests available."

Five exam categories are currently available. These include: **IP Dynamic** enhancement is an MRI study that shows how contrast uptake and washout are observed within a

See **Service**, page three

**GRAB THOSE  
RUNNING OR  
WALKING  
SHOES!**



**Join Team NIH  
in the  
2002 Komen National  
Race for the Cure  
Saturday, June 1**

Register onsite at the  
NIH Clinical Center  
April 22-26  
11 a.m.—2 p.m.  
Second floor and B1 cafeterias  
Full race and registration details  
at  
[www.nationalraceforthecure.org/  
registration.html](http://www.nationalraceforthecure.org/registration.html)  
or contact Clinical Center reps:

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## FAES neurosciences lecture

The Foundation for the Advanced Education in the Sciences (FAES) presents the 2002 Mathilde Solowey Lecture Award in the Neurosciences on May 16 at noon in Lipsett Amphitheatre. Jeffrey D. Rothstein, M.D., Ph.D., will be the keynote speaker. Dr. Rothstein is a Professor of Neurology and Neuroscience, Department of Neurology, Johns Hopkins University. The topic of his presentation will be "Stumbles and Twitches: How Disorders of Glutamate Transporters Contribute to Neurological Disease." For information call 301-496-7975.

## Primary care updates

Join the Clinical Center Nursing Department for its second primary care update seminar on May 15 in the Lipsett Amphitheater from 3 - 4 p.m. The topic will be "Genetic Health Care. Jennifer Loud, M.S.N., C.R.N.P., clinical genetics branch, NCI, will be the speaker.

## Stem cell transplantation workshop

A workshop on "Immune Reconstitution After Stem Cell Transplantation" will be presented Friday, April 26, 8 a.m. - 5 p.m. in the Masur Auditorium, Building 10. For information, call 301-435-0063.

## NIH Clinical Teacher's Award

The NIH Distinguished Clinical Teacher's Award is the highest honor bestowed collectively on an NIH senior clinician, staff clinician or tenure-track/tenured clinical investigator by the NIH clinical fellows. The deadline for nominees for the upcoming award is June 1. Online submission forms can be obtained at [http://felcom.nih.gov/Local/Subs/clin\\_teach.html](http://felcom.nih.gov/Local/Subs/clin_teach.html). Point of contact for further information is John Paul SanGiovanni, who can be reached via e-mail at [jpsangio@nei.nih.gov](mailto:jpsangio@nei.nih.gov).

## Take your child to work day

The annual Take Your Child to Work Day will be held on April 25 from 9a.m. - 4p.m. Children ages 8 to 15 are welcome. Please coordinate their visit with your supervisor. For more information and to register, visit <http://www.cc.nih.gov/cc/nihkids>. For reasonable accommodations contact Gary Morin, 301-496-4628 (voice) or 301-496-9755 (TTY) by April 18, 2002.

## FARE abstract competition for fellows

The ninth annual Fellows Award for Research Excellence (FARE) 2003 competition provides recognition for outstanding scientific research performed by intramural postdoctoral fellows. FARE winners receive a \$1,000 travel award for use in attending and presenting their work at a scientific meeting. Twenty-five percent of the applicants who apply will receive an award.

Applicants must submit a research abstract that will be anonymously evaluated based on scientific merit, originality, experimental design, and overall quality/presentation. The travel award must be used between October 1, 2002, and September 30, 2003.

The FARE 2003 competition is open to postdoctoral Intramural Research Training Awardees (IRTAs), visiting fellows and other fellows with less than five 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 scientific directors of each institute. Fellows are asked to submit applications and abstracts online at <http://felcom.nih.gov/FARE>, from May 1-31. Winners will be announced by the end of September. More information is available on the website above. Questions may be addressed to the relevant NIH institute's Fellows committee representative.



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# New service offers bench-to-bedside expertise

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lesion. This will aid in the study of tumor blood vessels to support research on tissue factors, including angiogenesis.

**IP Perfusion** shows the physiologic parameters of cerebral blood flow and volume. By displaying variation in blood flow to different parts of the brain, scientists gain a better understanding of stroke, atherosclerosis and certain tumors.

**IP 3-D Angiography** reconstructs images of blood vessels to provide 3-D views from different angles.

**IP Virtual Endoscopy** provides simulated visualization of the inside of specific organs, such as blood vessels, airways, the colon, the urinary tract, and sinuses.

**IP 3-D Reconstruction** evaluates bone and bone tumors.

When a physician orders one of the exams, the CIPS staff plans a series of images based on the patient's condition and the needs of the researcher. The images are then taken and processed.

"Advanced image processing isn't performed on preexisting data," explained Summers. "We must do new scans to process them. It requires special qualities of data, such as thinner slices than usual or injecting contrast in a particular fashion."

Image processing is the computer manipulation of images. It differs from computer graphics, which is usually more concerned with the generation of artificial images, and from visualization, which attempts to understand real-world data by displaying it as an artificial image (e.g. a graph). Image processing is used in image recognition and computer vision.

A web-based CIPS information resource has been developed to explain the various exam categories and related exam types. Physicians may also view sample IP static and dynamic images. The goal is to educate physicians so they may make informed decisions about which

exam is most appropriate for their particular patient. After visiting the CIPS website the relevant IP exams may then be more readily ordered on the Medical Information System (MIS).

The CIPS team will host a demonstration of the web resource, instruction on how to order the exams on the MIS, and a question-and-answer session regarding image processing and the Clinical Center's IP service on Monday, April 29, from 11:30 a.m.-12:30 p.m. and Tuesday, May 14, from 11a.m.-noon in the Lipsett Amphitheater. The sessions are open to all clinical researchers

and staff.

"We have outstanding expertise and state-of-the-art equipment available for advanced image processing," said Dr. King Li, associate director, Radiology and Imaging Sciences. "We want to make sure the institution takes full advantage of our expertise and equipment."

For clinical or research image processing beyond what is currently available at the CC, consult Dr. Jack Yao; for further information on the Clinical Image Processing Service contact Dr. Ron Summers. Both may be reached at 301-496-7700.

## Plain language lauded at ceremony

The NIH Plain Language Coordinating Committee held its second annual Plain Language awards ceremony on March 20.

Plain Language Awards were given to more than 100 NIH recipients. Clinical Center awardees include Barbara Fahey, R.N., Nursing, Mickey Hanlon, Communications, Capt. Frances Oakley, Rehabilitation Medicine, and Dale Boggs and Genny Finch, Social Work.

Susan Dentzer, health correspondent for PBS's NewsHour with Jim Lehrer, was the special guest speaker. Her feature stories have included congressional mammography hearings, risks of *in-vitro* fertilization, the anthrax vaccine, the National Academy of Science's report on cloning, and breaking the genetic code.

"As a journalist," she told ceremony attendees, "I love plain language, and when I see it, I embrace it like a dear friend. This is because, frankly, it makes my life a whole lot easier!"

Over the past 25 years, Dentzer said she covered Wall Street economics, general economics, health policy, and a range of medical and health care issues. As she moved from one area to the other, she found

herself repeatedly having to explain arcane technical concepts. "In economics, it was what's a repro, as opposed to a reverse repro?" she said. And "what is one's marginal propensity to consume, and what is the pareto optimal?"

While reporting on health policy, she found herself explaining, "the average adjusted per capita cost rate" and "sequencing the human genome"—and why these things mattered.

"So, to get through the various stages of my career, I've had to first understand the topics myself and translate these terms into English for the general public," she said. "That means I've had a fairly steep learning curve, especially when I wander into a topic I've never dealt with before."

Plain language doesn't necessarily mean using fewer words or avoiding larger words. Dentzer reminded her listeners that words convey ideas and concepts, and that some words carry connotations and denotations that otherwise get lost. But when using more complex words or terms, they should be explained. Also, common phrases such as "foreseeable future" should be dropped entirely.

"Why? Because the future's not

See **Plain language**, page eight

# Retirees give back by volunteering

Some people can't wait to retire. Others want to hold off and keep working for as long as possible. But a group of Clinical Center volunteers has the best of both worlds.

"I've been here virtually since the Clinical Center opened," said Eugene Streicher, a retiree who decided five years ago to return and volunteer. "I'm very attached to the Clinical Center and NIH and I wanted to contribute."

Streicher is one of 11 NIH retirees who decided to continue helping others through volunteerism.

"They have spent a total of 336 years on staff, and now have contributed more than 15,000 hours as volunteers in retirement," said Andrea Rander, director of Volunteer Services. "These volunteers have honor, and are courageous and committed. It is a pleasure to work with people who put others first and themselves last."

A ceremony in recognition of National Volunteer Week will honor these individuals on April 24 at Bradley Hills Presbyterian Church in Bethesda.

Streicher came to NIH in 1954 as a research grant writer for NINDS and later became a health scientist administrator with the same institute, which he retired from in 1997. After retiring, he didn't doubt he would return as a volunteer.

"I've been attached to NIH for 43 years," he said. "I wanted to keep my association with people here alive." And he does that one afternoon a week by working on outpatient units, filing, copying forms and making phone calls. "Wherever help is needed, I'm there," he said.

Streicher not only volunteers but recruits as well. In 1999, when Dr. Emanuel Stadlan retired as deputy director of the Demyelinating, Atrophic and Dementing Disorders program, NINDS, Streicher



**Retired volunteers (top): Virginia Johnson, Manual Stadler, Harry Canter; (middle): Janet Inches, Sarah Kalsner, Eugene Streicher, Alvin Barnes; (front): Fred Yamada, Eleanor Howe, Elaine Brill, and Lee Kush. Not pictured are Estelle Gonzalez-Barry and Nelva Reckert.**

encouraged him to give of his time.

"One of my good friends, who used to be my boss, volunteers here," said Dr. Stadlan. "I love NIH, so it seemed like the natural thing to do."

Stadlan volunteers as an interpreter in Hebrew and is constantly on call. "Some weeks I come in every day; other weeks I may come in once," he said. "It's a feeling of fulfillment. Since I'm no longer working in the medical field, this is one way to contribute to the welfare of patients and be a part of the Clinical Center staff."

That seems to be Harry Canter's motto, too. Since retiring from the NCI division of research grants in 1993, Canter has given more than 4,000 volunteer hours to the Clinical Center.

"After I retired, my wife told me there was a need for volunteers, so I took off one hat and immediately put on another," said Canter. His wife, Floride, heads the Clinical Center's Red Cross volunteers and has more than 18,000 hours of volunteer service.

Canter works eight hours daily Monday through Thursday. If needed, he comes in on Friday. Wednesday, he said, is his busiest day because he spends his time setting up for the NIH Wednesday Afternoon Lecture Series. On other

days, he escorts patients to the airport or helps out with areas in need when someone cannot make it. "I'm constantly on call," he said.

But it has its rewards. "I never worked directly with patients before. It's good to see some of the same patients over again and they often look better and healthier than they did the first time you saw them," said Canter.

Eleanore Howe never stopped working after her 1978 retirement from NHLBI as a chemist. At age 87, Howe is still adding on to the 24 years that she has already volunteered at the Clinical Center.

"I don't have much family, and I just needed something to do to fill up the time after I retired," said Howe. So she came to the Clinical Center where she visited patients, offered direction to visitors and sorted mail. That was 20 years ago. Times have changed, according to Howe. "NIH is so much bigger and busier now," said Howe. "I enjoy coming in and being a part of the group."

Despite the dedication of this group and their love of the Clinical Center, they maintain more people are still needed. "People just aren't aware of how you can help just by volunteering," said Streicher. "The world needs all the help that it can get."

# Au pairs gain unexpected, invaluable experience volunteering

When Martin Kristof and Inga Priedniece came to the United States they had no intention of volunteering at the Clinical Center. In fact, they come from different countries and speak different languages. Yet, their motivation was the same—to take a one-year break from medical school and come to the United States as au pairs.

“I was burned out and I just wanted to get away,” said Priedniece, who is in her third year at Rigas Stradina University Medical School in Latvia. “The U.S. was far enough away that I couldn’t run back home.”

She signed up with an au pair agency and was connected with a family in the Washington, D.C., area. After two weeks in the United States, she missed being in a medical setting and immediately began looking for local hospitals where she felt she could be of help.

“My host mother told me there was a place called NIH and she thought they might take volunteers,” said Priedniece. She admits that she was not familiar with NIH or the Clinical Center, but after her host mother called Volunteer Services, Priedniece was anxious to begin volunteering on Outpatient Clinic 12 (OP-12).

As an au pair Priedniece cares for two girls, 12 and 15 years of age. On Thursdays she prepares them for school in the morning and then spends the afternoon volunteering. “The best part of this experience is learning how to communicate with patients,” said Priedniece. “The only way to learn something like that is by doing it. You can’t learn it in the classroom.”

Priedniece volunteers on OP-12’s busiest day of the week. While there, she sees approximately 45 patients, taking and recording their temperatures and blood pressures.

“She is a life saver,” said Peggy Shovlin, R.N., B.S.N., OP-12 clinic coordinator. “She doesn’t take her work lightly. She is dedicated and



**Learning to communicate with patients is just one of the many things Inga Priedniece has learned since volunteering at the Clinical Center.**

helps out tremendously.” Shovlin said that the OP-12 clinic has benefited tremendously from Volunteer Services. “We have a need for volunteers and we just appreciate the program.”

The au pair program is a combination of cultural exchange and child care. A family applies to an au pair organization to become a host family. The organization selects its trained au pairs to travel to the U.S. and stay with the host families to assist with childcare.

Au pairs are generally between the ages of 18 to 26, proficient in conversational English and have had previous experience caring for children. According to a spokesperson from EF Au Pair, one of only six organizations in the world designated by the U.S. State Department as authorized to place au pairs with American host families, most au pairs sign up as a way of experiencing life in the U.S.

Martin Kristof has a year of medical school remaining at Jessenius Faculty of Medicine Komenius University in Slovakia. Before completing his degree,

Kristof wanted to come to the U.S. where he could not only take a break from his studies, but also perfect his English—a chance that he otherwise might not have once he graduates.

The au pair program was the perfect opportunity.

In the morning, Kristof prepares breakfast and spends time with the 10-year-old boy in his care. After sending the boy to school, Kristof said he had the entire afternoon to himself and needed something to do with that time. So he asked his host father, Dr. Donald Rosenstein, deputy clinical director, NIMH, if he could find something for him to do during that time.

“I had no idea that I would be coming to a family where my host father is a doctor,” he said. “I didn’t expect this type of opportunity at all.”

Kristof spends some of his afternoons going on rounds with Dr. Fred Gill, Clinical Center Internal Medicine Consult Service, discussing patient cases and treatments. On occasion, he visits patients with Dr. Rosenstein and attends lectures.

“This will help add to Martin’s

See **Au pair**, page eight



**Martin Kristof enjoys attending lectures and reading articles given to him during his rounds with Dr. Fred Gill, Clinical Center Internal Medicine Consult Service.**

# Poetry project works its magic throughout the Clinical Center

Davi Walders connects people through poetry.

"I don't consider myself to be a therapist," said Walders. "I provide a safe house where people talk and express themselves. A place where people going through similar situations are connected through the arts." Over the past seven years, Walders' safe house has developed into a lighthouse, guiding parents of sick children to a common ground of understanding, and offering patients a brief refuge from a daylong series of needles and exams.

"People should be exposed to the art of poetry whether they are sick or well, rich or poor, or are college educated or not," she said. "The art of poetry speaks to the deepest parts of our hearts and I want to bring this to people who may have never experienced poetry." That was her main objective in 1995 when she called Lori Wiener, coordinator of NCI's Pediatric HIV Psychosocial Support and Research Program. Walders asked if she could start a poetry session at the Children's Inn for the parents of children being treated at the Clinical Center.

"She wanted to bring poetry to a different setting. I told her we'll try it once and see how the parents respond," said Wiener. "Anything that enriches lives and helps people cope in such a stressful environment is always positive and can make a difference."

And it did.

"It was fabulous!" said Wiener. "It gave parents an opportunity to talk about issues in their lives. Usually they can relate their own lives to a poem or relate to what the poet was feeling."

That was the motivation Walders needed to continue coming back two to four times a month to read, write and discuss life and poetry.

"People get a sense of empowerment that allows them to create art out of the chaos that their



Nationally-known poet Davi Walders has dedicated much of her free time to teaching and healing through poetry.

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*"The art of poetry speaks to the deepest parts of our hearts..."*

*— Davi Walders*

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illness throws at them," said Walders. "In one case, a parent started attending and her daughter began to write. At first her daughter thought it was stupid, but once she began to write, it made a difference."

Two years ago 13-year-old Travis Casey followed his mother Carlise Casey, into one of the poetry sessions. Since then, he hasn't stopped writing. "Sometimes he just goes to the computer and writes a poem right off the top of his head about what's going on in the world today," said Carlise.

"It helps me see what other people are going through," said Travis, who was diagnosed with HIV when he was 15-months old. "Poetry helps me experience and feel. I can express my feeling about this disease through poetry."

More and more children began attending the sessions with their parents and writing about their diseases. During one session, the pediatric HIV group discussed living

with secrets and telling lies just to be accepted.

Kelly Meiser could relate perfectly. At age 3, Kelly was diagnosed with HIV. However, in order to avoid social rejection, her family didn't tell her she had the disease until she was 14.

"I didn't talk about it and kept it all inside," said Kelly. "When people found out I had the disease, my mother lost her best friend, I was in and out of the hospital and I thought I was going to fail school," said Kelly, now age 18. "I hated hiding it, I wanted people to know. It's just so easy to try and give up because you get so tired of hiding it."

Kelly openly shared one of her poems entitled "Lying, Lying, Lying, Lying." She wrote it when she found out she had HIV.

I talk to my friends in homeroom. They don't know.

I go to my classes. No one knows. I speak to my teachers. They are clueless.

I eat lunch with my friends. They have no idea.

I go home by bus, they would never guess.

I live with HIV. I have for 12 years. To the rest of the world, I have leukemia, or influenza, or frequent pneumonias.

I'd like to tell my friends the truth. I wish my teachers also knew. I'd like not to lie about my life, my medicine, my hospital visits and stays.

I'd like to be honest. I'd like to tell the truth. I'd like to stop the lying, the insanity, the falseness of my life.

I'd like to be accepted. As the person they all knew. The student who worked hard. The friend they relied on. I'm still me. Living with HIV.

"You can't let this disease stop you," said Travis. "You can tell anybody. You just can't fear this

continued on next page

disease.”

Walders suggested writing a poem starting with the phrase “let us not keep secrets.” She asked each individual to say the first word that came to mind. Each word was written on a piece of paper and hung up on the wall. Then Walders asked each person to write a poem beginning with “let us not keep secrets,” and include all the words on the wall – sunshine, sleepy, trust, smile, stretch.

Travis, who brought a large 3-ring binder full of poems that he has written over the years, wrote:

Let us not keep secrets  
It is dark and cold in my little room  
I place the slippers on my feet  
As the sunshine beamed through my window.  
Day to day I look out and ask the Lord  
Why do I keep these secrets?  
Why I asked him?  
Because I know that he’s smart, a lovely man  
And I could trust him. He loves my smile  
He touched my heart and I touched his and  
Our compassion stretched beyond our greatest imagination.  
He helped me when I couldn’t see.  
After the light blazed and my path was clear.  
I knew what I needed to do.  
No more secrets.

“This is a poetry support group that is therapeutic. It’s not a therapy group,” said Wiener. “But it is used to enrich our program and improve the quality of life for our patients.”

Within months after starting, the Children’s Inn poetry project grew. Notebooks were placed in each room of the Inn, so when parents had the urge, they could write a poem and leave it for others to read. Eventually, the notebooks became full of poems, some of which were read during the sessions.

By 1998, Walders received a grant from the Witter Bynner Foundation for Poetry and with it, published the poetic writings of the parents in a book entitled *The Vital*

*Signs Poetry Project of the Children’s Inn at the National Institutes of Health*. Nearly 2,000 copies were printed and distributed nationally and internationally. The grant expired in 2000, but Walders is searching for another grant that will allow a second volume to be printed, which she hopes will include writings from the children.

In the meantime, she plans to expand from the Children’s Inn to other therapeutic settings within the Clinical Center. Last month, she began a Wednesday Evening Coffee

writing a full-time profession.

Her poetry and prose have appeared in more than 100 publications including *The American Scholar*, *Seneca Review* and *Journal of the American Medical Association*. She has also won numerous awards for her anthology, *Poetry Across the Curriculum*, a collection of poems for teachers that shows how to incorporate poetry into each lesson.

But she wanted to do more.

“I want to be of use in a non-traditional setting and explore other ways to reach people,” said Walders.



**Davi Walders (second from the right), director of the Vital Signs Poetry Project at the Children’s Inn, continues to expand her poetry sessions to include the Wednesday Evening Coffee Hour and one-on-one sessions with patients.**

Hour in the recreational therapy department for patients and employees. At the 14th floor library, she placed a basket where patients and employees can deposit and pick up poetry to read and share with others. She also does one-on-one sessions with patients.

“Poetry holds beauty that I wanted to share,” said Walders. “I figured if I could learn, then so could everyone else.”

Walders said she took the back way in to poetry. In fact, she didn’t even begin writing poetry until the age of 40. After leaving her job as a teacher, she took writing courses at local colleges. She then began to study poetry, write and read it, and to learn from published poets. After mastering the craft, Walders made

She began teaching poetry to inmates in the Maryland Correctional Institute for Men in Jessup, Md. Then she taught at an abuse shelter in Montgomery County. But, her desire to come to the Clinical Center was personal.

“My mother was treated here and it helped prolong her life,” she said. Her goal now is to make poetry a part of everyday life in the Clinical Center. Whether it is a patient, parent, guardian or employee, Walders feels that poetry can “work its magic if you just let it.”

*Davi Walders may be contacted at 301-657-3282.*

–by Tanya Brown

## Au pairs learn through volunteering

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experience in the U.S.," said Dr. Rosenstein. "Hopefully, coming here has exposed him to a version of medicine that he otherwise would not be exposed to in his country."

"Everything is going well for me here," said Kristof. "This opportunity has been great and I feel like I have learned something that will give me an advantage."

Kristof will leave in August, while Priednice will return home in July. Both have enjoyed adjusting to American life.

"When I first arrived, people

asked me 'how are you,' and I would try to tell them about my whole day, but I realized that isn't what they wanted to hear," said Priednice. She added that her first negative experience happened when she stepped on a scale and realized she had to convert pounds to kilos. "When I looked at that number I thought, I'm going to die!"

Yet the overall experience has been positive. "Everything here is bigger and really different, but I got used to it very fast," said Kristof. "It's a good place for young people to be."

## Rewarding plain language

continued from page three  
foreseeable," she said. "At 8 a.m. on September 11, how much of the future was foreseeable?"

Using words and phrases in their proper context also is important to avoid misunderstanding. When the anthrax attacks were publicized in the United States late last year, journalists were quick to learn about a topic they knew almost nothing about. When asking an official about cross contamination—when one letter in the mail system bumps against another containing spores—was "likely," the official, said Dentzer, replied it was "unlikely."

"Well, the truth is, it was unlikely, but it was possible, and that nobody knew it wasn't possible because the only evidence anyone had was from a bunch of monkey studies done years before," Dentzer said. "No one had tried to take a small number of anthrax spores and to infect a human being. Unlikely was half the truth. We were all, in a way, misled by that." The telling of half-truths reminded her of the words of boxing manager Dennis Rappaport: "I'm not going to tell you any half truths unless they're completely accurate."

Concluding her remarks, Dentzer also quoted a line from former basketball superstar-turned-commentator Walt Frazier: "Plain language is just jam cool."

"The mission of NIH," said Dr. Ruth L. Kirschstein, acting Director, NIH, "is to conduct and support research that will lead to better health care for all Americans. But if we're to succeed in this, we must communicate in ways that are clear, concise and to the point. Such communication opens doors to reach those who depend on our research to make important medical decisions."

For information about the plain language initiative at NIH visit [www1.od.nih.gov/execsec/plainlanguage.htm](http://www1.od.nih.gov/execsec/plainlanguage.htm).

—by John Iler

## a p r i l

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**Grand Rounds  
noon-1 p.m.**

**Lipsett Amphitheater**

*End of Life Issues*

Diane E. Meier, M.D., Mount  
Sinai School of Medicine

**Wednesday Afternoon**

**Lecture**

**3 p.m.**

**Masur Auditorium**

*A Paradigm Shift in Brain  
Research*

Arvid E. Carlsson, M.D.,  
Ph.D., University of  
Göteborg, Sweden

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**Grand Rounds  
noon-1 p.m.**

**Lipsett Amphitheater**

*The Skin and the Eye*

Irwin M. Braverman, M.D.,  
Yale University

**Wednesday Afternoon**

**Lecture**

**3 p.m.**

**Masur Auditorium**

*Regulation of Receptor*

*Trafficking By Rab GTPases*

Suzanne R. Pfeffer, Ph.D.,  
Stanford University

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**Grand Rounds  
noon-1 p.m.**

**Lipsett Amphitheater**

*Emerging Protective Roles of  
Omega-3 Polyunsaturated  
Fatty Acids in Aggressive and  
Depressive Disorders*

Joseph R. Hibbeln, M.D.,  
NIAAA

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**Grand Rounds  
noon-1 p.m.**

**Lipsett Amphitheater**

*MRI of Myocardial Perfusion  
and Viability*

Andrew Arai, M.D., NHLBI  
*Antibiotic Treatment to  
Prevent Preterm Birth in  
Asymptomatic Pregnant  
Women with Bacterial  
Vaginosis*  
Mark Klebanoff, M.D.,  
M.P.H., NICHD

**Wednesday Afternoon**

**Lecture**

**3 p.m.**

**Masur Auditorium**

*How The Ear's Works Work:  
Transduction and*

*Amplification By Hair Cells*

A. James Hudspeth, M.D.,  
Ph.D., Rockefeller University

*Imaging the Effect of Medical  
and Interventional Therapies  
in Patients with Heart Failure*  
Vasken Dilsizian, M.D.,  
University of Maryland

**Wednesday Afternoon**

**Lecture**

**3 p.m.**

**Masur Auditorium**

*Molecular Microbial Ecology:  
In Hot Springs and Human  
Disease*

Norman R. Pace, Ph.D.,  
University of Colorado