August 2003

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Lacasse appointed new chief financial officer

Lisa Lacasse has been appointed as the new chief financial officer of the Clinical Center.

Lacasse has served as acting CFO since Feb. 2002, overseeing the planning, formulation and execution of the Clinical Center's \$330 million budget.

"This position allows me to focus on the things I like to do," said Lacasse. "It's rewarding to be able to find more efficient ways for the Clinical Center to expend its resources in order to assure a robust and flexible clinical research support environment."

Lacasse received her Masters of Business Administration with a focus in Health Care Management from the The Wharton School, University of Pennsylvania. After a graduate fellowship with the University of Maryland Medical System in Baltimore, Lacasse was named assistant vice president, executive affairs of UMMS. She was later promoted to senior director of Management Services at UniversityCARE, LLC, as part of a joint venture created between the University of Maryland Medical System and University Physicians, Inc., the physician practice group of the University of Maryland Medical School.

In 1999, Lacasse joined the Clinical Center as special assistant to the director where she led the

9-year-old donates \$100 to FOCC



When each student in 9-year-old Charlotte Mecklenburg's Sunday School class received a crisp \$100 bill to donate to the cause of their choice. Charlotte instantly remembered the kind treatment her late grandmother received while a patient at the Clinical Center. "She did a lot of things for other people," said Charlotte. "Maybe I can do something for other people, too, and learn from what she did." The Sunday School project was designed to teach children how to share something they value to benefit others. Charlotte presented the \$100 bill to Therese Clemens, executive director of the Friends of the Clinical Center. The money will go to buy toys for the 14th floor playroom and waiting areas in the outpatient clinics.



Clinical Center

Lisa Lacasse development of computerized protocol mapping and served as project leader for the Clinical Research Information System (CRIS).

"Ms. Lacasse has demonstrated extensive skills in management of financial and human resources, and has successfully addressed complex financial, organizational and operational issues," said Clinical Center Director John Gallin. "Her experience within the clinical research setting coupled with her knowledge of academic health care make her uniquely qualified for this position."

Lacasse credits her 12-member staff with much of the office's success while serving as acting CFO. "The people who work for me are talented, dedicated and have an incredible vision for this place," said Lacasse.



Neuroscience Nurse Internship Program class of 2003

A Certificate of Program Completion was recently presented to the fourteenth class of the Neuroscience Nurse Internship Program. The NNIP, jointly sponsored by the Clinical Center Nursing Department and the National Institute of Neurological Disorders and Stroke, is a six-month neuroscience clinical internship for recent nursing graduates. The program is also designed for registered nurses with recent clinical

experience interested in beginning careers in neuroscience nursing. The 2003 class was comprised of five registered nurses (front row, I to r), LaToya S. Sewell, Laurel Nicole Kepner, Janelle M. Stank, Lindsay Karen Blair, and Rachel C. Perkins.

The Neuroscience Leadership Team was comprised of (back row, I to r) Clare Hastings, R.N., Ph.D., chief, Nursing and Patient Care Services; Marsha Moore, R.N., acting nurse manager, Neuroscience and Ophthalmology Program of Care, Nursing Department; Henry McFarland, M.D., clinical director, National Institute of Neurological Disorders and Stroke; Beth Price, R.N., clinical nurse specialist, Neuroscience and Ophthalmology Program of Care, Nursing Department; and Audrey Penn, M.D., acting director, National Institute of Neurological Disorders and Stroke.

clinical center online

CASPER

The Clinical Center's Computer **Application Service Provider** Resource (CASPER) is an online service providing users access to a large set of computer applications. Before CASPER was launched by the Department of Networks and Applications in 2000, these applications could only be accessed onsite at NIH through Microsoft Windows workstations. All relevant offsite NIH users now access the same applications on both Windows and non-Windows operating systems via CASPER's web-page or clientbased versions of the Citrix application (the remote access product called Metaframe).

CASPER represents the Clinical Center's implementation of a application environment where all applications are stored and run from centrally-managed servers. System administrators can guarantee that the corporate-supported applications are running in a virus free, fullysupported environment.

Recent upgrades to CASPER include improved security, an enhanced web interface and the ability to optimize server-based software. New features and services will be added as technology and user requirements develop. To access CASPER go to: <u>https://casper.nih.gov/</u>. For more information, send an e-mail to CasperAdmin@mail.cc.nih.gov.

ProtoType

The clinical research protocol writing tool, developed by the Clinical Center Office of Protocol Services, has entered formal testing. An intramural orientation session was held during the week of July 21. The testing phase for the web-based program known as Prototype proceeds through August and September, training principal investigators, clinical directors and protocol coordinators. Full implementation of the program and availability for intramural use is anticipated for the fall, with release

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2002-2003 Duke clinical research training class graduates

Members of the 2002-2003 NIH-Duke Training Program in Clinical Research gathered for a luncheon held in their honor in late May. The program, established in 1998, is administered through a joint collaboration between Duke University School of Medicine and the Clinical Center's Office of Clinical Research Training and Medical Education. To date, 24 participants

representing various NIH institutes or centers have completed the program. The program provides NIH physician-scientists with formal academic training in the quantitative and methodological principles of clinical research and leads to a Master of Health Sciences in Clinical Research conferred by the Duke University School of Medicine. For more program information, contact DeNedra McPherson dmcpherson@cc.nih.gov.

Pictured above (I to r) are: Gabor Illei (NIAMS), Fathia Gibril (formerly with NIDDK), Miroslawa Nowak (NIAMS), and Manish Agrawal (NCI). Not pictured are Imelda Cabalar (formerly with NIAMS), Patricia Chulada (NIEHS), Alison Ehrlich (NCI), Marjorie Garvey (NIMH), Nicole McCarthy (NCI), Elizabeth Molloy (NIMH), Jordan Prutkin (NIH Clinical Research Training Program), Charles Sansur (NIH Clinical Research Training Program), Irini Sereti (NIAID) and David Squires (NCI).



Orientation provides overview for Clinical Fellows

NIH leadership welcomed new Clinical Fellows at a reception held in conjunction with the annual orientation program on July 2. The orientation program, sponsored by the Clinical Center, Office of Clinical Research Training and Medical Education, provides an overview of the programs and services that will be an integral part of the Fellows' training experience. Following the orientation program, Fellows meet informally with institutional leadership.

Celebrating 50 years of Clinical Research

Guests, patients and employees came together July 9 to mark 50 years of clinical advances during the anniversary celebration of the Warren Grant Magnuson Clinical Center. "This place has become the crucible for many advances in medicine and the cradle for training many Americans in clinical research around the world," said Clinical Center Director John Gallin during the ceremony. "The Clinical Center is more than a large brick building. Throughout the years, dedicated scientists partnering with remarkable patients and devoted staff have created the perfect environment for long-term clinical research studies." The ceremony concluded with a 15-minute film depicting the Clinical Center's advances in medicine and a tent reception held on the south grounds of the Clinical Center.



Presentation of the Colors by the Armed Forces Color Guard.



Poster displays on the first floor of Bldg. 10 highlighted the history of each Clinical Center Department. Discussing the posters are Karen Morrow (left), Spiritual Ministry, and Eileen Dominick-Holschuh, OD.





HHS Deputy Secretary Claude A. Allen lauded the Clinical Center as a hospital that cares.



NIH Director Elias Zerhouni complimented the dedication of the Clinical Center staff.



Howard P. Drew, who holds the Guiness World Record for blood donations, spoke on the importance of volunteers to the Clinical Center.













Photos:

1. Tent reception.

2. Cake designed with a picture of the original Clinical Center was served with other refreshments.

3. A 50th Anniversary banner adorns the entrance of the south lobby.

4. Dr. David Rubinow, clinical director, NIMH, leads the Bad Business Blues Band, which took center stage at the reception.

5. Clinical Center Director John Gallin and NIH Director Elias Zerhouni.

6. Earl Laurence, former Clinical Center executive officer (left), with Dr. Saul Rosen, former Clinical Center acting director (center), and Dr. Robert Nussenblatt, chief, Clinical Center Protocol Service Center, catch up on old times.

Medicine for the Public returns for 2003 season

The Clinical Center's 27th annual Medicine for the Public Lecture series will take place September-October in Building 10's Masur Auditorium. The lectures, which are free and open to the public, are presented at 7 p.m. on Tuesdays. NIH videocasts will be available for each lecture. For more information go to: <u>http://www.cc.nih.gov/ccc/mfp/curren</u> <u>t/index.html</u> or call 301-496-2563.

September 16

Alzheimer's Disease: Advances and Hope

Trey Sunderland, M.D. Chief, Geriatric Psychiatry Branch National Institute of Mental Health Despite many recent advances in the understanding of Alzheimer's disease, its diagnosis is still based on vague clinical criteria and confirmed only by biopsy or autopsy. Diagnosis by an experienced doctor is accurate 80-to-85 percent of the time. This presentation will describe the rationale behind, and progress to date, of a comprehensive study to examine the spinal fluid of Alzheimer's patients during the course of their illness compared to healthy patients. The research study also involves an extended view of a special group of normal subjects perceived to be at risk for developing Alzheimer's disease. The hope is to isolate specific biological traits which may aid in the early identification of the disease.

September 23

Preparing for SARS, or Smallpox, or Whatever Comes Next: Responding to Emerging Infectious Diseases and Bioterrorism Threats David Henderson, M.D. Deputy Director for Clinical Care Warren Grant Magnuson Clinical Center

The world has recently seen an emergence or reemergence of infectious diseases such as smallpox, SARS, West Nile virus, and monkeypox. What is the public perception of these diseases? How are they spread? Are we prepared if they occur close to home? How will hospital workers be protected? This presentation will cover these issues and how the Clinical Center has responded to new diseases in the past. It will also address new technologies controlling the airborne transmission of disease.

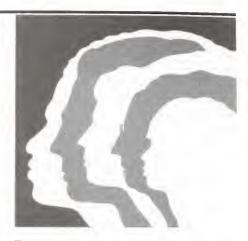
September 30

Sickle Cell Anenuia: Moving from Pain to Cure Mark Gladwin, M.D. Senior Investigator Section Chief, Sickle Cell/Nitric Oxide Therapeutics Section Critical Care Medicine Department Warren Grant Magnuson Clinical Center

Sickle cell disease is the most common inherited blood disorder in the United States. Scientists have learned a great deal about the medical condition during the past 30 years-what causes it, how it affects the patient and treatments that do or don't work. Understanding the disease and its warning signs aids researchers working to unravel the mysteries of sickle cell. This presentation will cover those topics and related ongoing clinical research. Current investigations include efforts to understand the role of lung complications in adults with sickle cell disease and evaluating the role of current and future therapies in sickle cell disease treatment.

October 7

Stem Cell Transplantation: Promise in Cancer Treatments and Blood Disorders Michael Bishop, M.D. Investigator and Clinical Head Experimental Transplantation and Immunology Branch National Cancer Institute



Bone marrow transplantation has been in clinical use for more than 30 years. The bone marrow contains stem cells that give rise to the blood components, including white blood cells, red blood cells and platelets. Today, bone marrow transplantation is more commonly referred to as stem cell transplantation, as stem cells can be obtained from several other sources other than the bone marrow, including the peripheral blood and umbilical cord blood. Stem cell transplantation is commonly used for a variety of malignant disorders such as leukemias and lymphomas. However, it is also used for a number of other diseases such as immune deficiency states and non-malignant blood disorders. This presentation will discuss current research efforts at the National Cancer Institute that focus on increasing the application of stem cell transplantation to a broader patient population by increasing the potential stem cell donor pool, decreasing transplant-related toxicities and investigating its use in diseases not commonly treated with stem cell transplantation.

October 21

When Too Much Iron Is Bad: Hemochromatosis, the Silent Blood Disease Susan Leitman, M.D. Acting Chief, Transfusion Medicine Department Warren Grant Magnuson Clinical Center Too little iron in the blood results in a disorder called anemia. Yet too

See Medicine for Public page eight

Caring Canines: improving morale among patients and their families

In 1988, Holly Parker, a recreation specialist at the Clinical Center, began investigating the idea of using dogs as therapy. The idea actually came from a patient who raised dogs and understood the calming effect it could have on ailing people.

"He felt the companionship of his own dog was beneficial and thought that other patients might derive the same sort of comfort and companionship from animals, even if they weren't their own," Parker said.

But there were procedures and concerns that had to be carefully thought out. Where could they find the animals? How could the dogs be certified to be friendly and clean? Who would they visit and how often? assignments, and the dogs had to be socially outgoing.

Burton Goldstein has been bringing MG (Micah Goldstein), his *shih-tzu* (lion dog) for more than three years. With pig tails, MG often is mistaken as a female, Burton grumbles, but repeatedly explains to patients and visitors that there's no way he can keep the hair out of the dog's face but to create two petite ponytails and tie them with ribbons.

"I had a friend in the Caring Canines program, and about four years ago I got MG. I waited until he was old enough and we entered the program." Burton adds that MG enjoys making rounds and even does support work at other hospitals.



Killian (seated behind dog) and his brother, Garrett, enjoy the attention of Casey, a large Irish setter.

It was determined that both dogs and owners would be recruited as volunteers. At regular intervals owners would bring the dogs to the Clinical Center. There they would interact with children, the elderly, cancer, HIV, epilepsy and other neurological patients. Upon arrival, the dogs would be spot checked by the Clinical Center veterinarian. Each also would have to be bathed and clipped before their daily Many patients are dog lovers, but even cat lovers seem to love dogs and the attention they provide. Burton said MG is versatile. "He knows how to play with the kids and cuddle with the elderly. And he can handle anything in between."

To one young outpatient, Brooks, it makes coming to the hospital fun.

"I love petting the dogs and just being around them," he said. "It makes me feel good that I'm making



Burton Goldstein and his shih-tzu, MG, have been a part of Caring Canines for three years.

the dog feel good."

Currently there are 12 dogs in the program. Owners and their dogs visit the Clinical Center four times a month. "Each visit with patients is facilitated by a recreation therapist," said Parker. "We feel that the animalassisted therapy program is an effective part of an overall treatment and we have had a highly favorable response rate from the patients."

–by John Iler



Roy, a patient, enjoys the company of a whippet named Jessie.

Medicine for the Public returns

continued from page six

much iron in the blood can also cause health problems. Less well known, but carrying potentially serious



effects, is a blood disorder called hemochromatosis. Hemochromatosis affects 1 in 200 Caucasians in the United States. It can cause liver damage and premature arthritis. This easily detectable and treatable disorder, often called the silent blood disease, is the focus of this presentation. Hemochromatosis research efforts will also be covered.

October 28

Complementary and Alternative Medicine: From Promises to Proof Stephen Straus, M.D. Director

National Center for Complementary and Alternative Medicine Arthritis, depression, menopause, cancer-for millions of Americans. these and other health concerns are not being adequately addressed through conventional medicine. Many are turning outside the medical mainstream to approaches that embrace the whole person – mind, body and spirit. In fact, Americans spend more money for complementary and alternative medicine or CAM than for all other health care needs. From acupuncture to massage therapy to dietary supplements, CAM approaches are affordable and accessible, but largely untested. This presentation will discuss current research on which CAM practices work, why and how they work and whether they are safe.

clinical center online

to the extramural clinical research community expected as a long-term endpoint. For more details, contact Kim Jarema kjarema@cc.nih.gov. Joint Commission

With preparations underway for the Joint Commission on the Accreditation of Healthcare Organization's October 2003 survey visit, new and helpful information continues to be added to the JCAHO web pages. To view the latest updates go to: <u>http://intranet.cc.nih.gov/od/jcaho/;</u>

for more information on the Clinical Center's JCAHO work, contact Laura Lee, llee@cc.nih.gov.

50th Anniversary

Celebration of the Clinical Center's 50 years of research continues. The video presentation shown at the July 9 ceremony may now be viewed on the 50th Anniversary web page. Go to: <u>www.cc.nih.gov/50th</u> and click on "Bench-to-Bedside and Back." For more information on 50th Anniversary activities, contact Elaine Ayres, eayres@cc.nih.gov.

Readers are encouraged to share ideas and items for Clinical Center Online. E-mail dneedham@cc.nih.gov.

august

The August 2003 Rounds will host a special Clinical Grand Rounds for Fellows. All physicians and allied healthcare professionals are welcome to attend.

Grand Rounds for Fellows noon-1 p.m. Masur Auditorium Healthcare Economics in the Academic Medical Center

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Peter R. Holbrook, M.D., Chief Medical Officer, Children's National Medical Center, Washington, D.C.

14 Grand Rounds for Fellows noon-1 p.m. Masur Auditorium Medical Error: Treatment and Prevention

> Saul N. Weingart, M.D., Ph.D., Assistant Professor of Medicine, Harvard Medical School, and Medical Director of Patient Safety for CareGroup Healthcare System

21 Grand Rounds for Fellows noon-1 p.m. Masur Auditorium The HIPAA Privacy Rule and

The HIPAA Privacy Rule and Research - Lessons for NIH

Valerie Hurt, J.D., Senior Attorney, NIH Office of General Counsel



Grand Rounds for Fellows noon-1 p.m. Masur Auditorium

Cancer Screening: The Clash Between Intuition and the Scientific Method

Barnett S. Kramer, M.D., M.P.H., Director, Office of Medical Applications of Research, and Associate Director, Office of Disease Prevention, NIH



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Grand Rounds for Fellows noon-1 p.m. Masur Auditorium Advanced Directives: Helping Your Patients and Research Subjects Plan Ahead

Marion Danis, M.D., Clinical Bioethics Department, CC, NIH

Christine Grady, R.N., Ph.D., Head, CC, NIH

David S. Wendler, Ph.D., Clinical Bioethics Department, CC, NIH