

February 2000

# Clinical Center News

## In this issue:

- *Medicine for the Public art*
- *CC patient's book*
- *CFC campaign successful*

## Blizzard hits; CC keeps going

The recent snowstorms caught the Washington, D.C., area unprepared. Although snow totals ranging from 12 to 18 inches caused the Federal government to close down for two days last month, the Clinical Center stayed open, continuing to provide uninterrupted care to patients.

"My special thanks to all the staff who came in during the inclement weather and kept the place running so smoothly. Also thanks to Maureen Gormley, Elaine Ayres, and Pat Piringer for their help coordinating things," said CC Director John Gallin.

With the cafeterias closed, the Nutrition Department was the main source of food for employees who desired more to eat than a candy bar and a soda. Nutrition staff prepared 100 boxed lunches for staff who stayed for extra shifts the night of the blizzard.

Outpatient Department staff were also on hand to coordinate various activities, including delivering those boxed meals, coordinating bed assignments for staff who stayed overnight, arranging transportation, and fielding numerous phone calls from NIH employees and patients.

See **snow**, page two

## Klein to head blood association

Dr. Harvey Klein, chief of the Department of Transfusion Medicine, was recently elected president-elect of the American Association of Blood Banks (AABB). His one-year term begins in November.

Dr. Klein has been on the AABB's board of directors for the past 6 years and chaired the association's research-funding entity, the National Blood Foundation, when it was created a decade ago.

Established in 1947, the AABB sets standards for blood collection

See **Klein**, page seven



Dr. Harvey G. Klein

## Atkinson receives mastership



Dr. Arthur J. Atkinson, Jr.

Dr. Arthur J. Atkinson, Jr., the Clinical Center's senior advisor in clinical pharmacology, was recently elected a Master of the American College of Physicians-American Society of Internal Medicine (ACP-ASIM).

According to ACP-ASIM, "those awarded Mastership have achieved recognition in medicine by exhibiting pre-eminence in practice or medical research, holding positions of high honor, or making significant contri-

See **Atkinson**, page seven

## Cafeteria still shut

The reopening of the Bldg. 10 B1-level cafeteria has been postponed to address unforeseen plumbing issues. The cafeteria will continue to offer a limited variety of grab-n-go food items. It will reopen as soon as possible.

## Blood study

Healthy postmenopausal women are needed for a study of normal blood. To be eligible, you must have had no abnormal bleeding or clotting in the past. Study participants must be willing to stay off any hormone treatment for 9 months. Participants will be required to give a small sample of blood (about 2 tablespoons) in an initial screening. The study takes place

at the Clinical Center and involves no hormones or medications. NIH will pay participants \$50 for each blood draw. For more information call 6-5150.

## Benefits statements

Watch your mail this month for your 4th annual Personal Statement of Benefits, provided by the Clinical Center Office of Human Resources Management. If you have questions or comments, call Sharon Reed on 6-6924.

## Competency class

The Education and Training Section presents "Competency 101," Feb. 15, from 1:30 p.m. to 4:30 p.m., or Feb. 17, from 8:30 a.m. to 11:30

a.m., in Bldg. 10. (Call for rooms.) This class will assist managers and supervisors in understanding the CC's policy for assuring the ongoing competency of all hospital personnel, contractors, volunteers, and students. Call 6-1618 for details or to register.

## Snow policy

Confused about what to do when the government closes or delays due to bad weather? You can review the Clinical Center's policy on such matters at the following web site: <http://ohrm.cc.nih.gov/benefits/emergency.html>

If you have any questions about these policies, discuss them with your supervisor.



**Snow**, continued from page one

The surrounding community chipped in to help as well.

"Channel 9 called asking if we needed them to make any announcements for us," said Maureen Gormley, the CC's chief operating officer. Once the call went out, volunteers with 4-wheel-drive vehicles ferried hospital staff from all over the area. "The NIH police also helped out by transporting emergency staff from the Metro station to the their work areas and driving patients from hotels to their hospital appointments," Gormley said.

Clinical Center  
**News**

Editor: Sue Kendall

Clinical Center News, 6100 Executive Blvd., Suite 3C01, MSC 7511, National Institutes of Health, Bethesda, MD 20892-7511. Tel.: 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.



## Keeping your credit clean

If you're like many Americans you probably hoped that the Y2K bug would wipe out all your negative credit entries. So when you woke up on Jan. 1 and realized that you couldn't have been so lucky, you hopefully opted for Plan B, working to repair your credit.

With more than a million people filing for bankruptcy in 1997, banks are balking more and refusing requests for loans. If you think it's perfectly OK to pay a couple of bills or loans a little late, or think no one will ever know, you're wrong. It's all there on your credit report and with today's technology, that subscription bill you ignored five years ago or those late payments you made can all come back to haunt you. Here are some tips to keep your credit report as clean as possible:

1. Get a copy of your report from all three major credit bureaus. It's a good idea to order your credit report once a year to make sure there are no errors. The major credit-reporting agencies are:

Equifax	1-800-685-1111 www.equifax.com
Experian	1-888-397-3742 www.experian.com
Trans Union	1-800-916-8800 www.transunion.com

2. Know how to read the report. Reports will list every credit account you've ever had, any account that's gone to a collection agency, bankruptcies, liens, judgments, and each payment you've made on each account. Note that payments will also contain a notation on their timeliness:

1 for "paid as agreed"  
2 for 30+ days past due  
3 for 60+ days past due; and so on, up to number 9 for "charged off to bad debt," the worst mark you can receive.

You can dispute any of the entries on your report if you feel they have been entered in error. The credit-reporting agency will investigate the dispute and inform you of the findings of their investigation. You also have the right to explain your side of the story if the issue remains unresolved. You may write an explanation of up to 100 words that will appear on your credit report.

3. Pay your bills on time. If you're falling behind, pay the minimum amount due. This keeps your report in good shape.

4. If you know you can't pay a bill, be proactive. Call the company and explain your situation. Make arrangements to set up a manageable payment schedule. Many will agree to meet your needs.

If you've already had some bumps and bruises in the credit game, rebuilding isn't as hard as it may seem. Here are some strategies:

1. Open a checking account. Keep your checkbook balanced, and don't overdraw your account.

2. Open a savings account. Make regular deposits and avoid taking money out of the account. To help you re-establish your credit, some banks will allow you to take out a small personal loan secured by your savings account.

3. Join a credit union. These organizations often may be more

willing to take your personal and financial situation into account when reviewing your application for a credit card or loan.

4. Get good credit references. Even if you've had negative entries based on a credit card or installment loan, you can demonstrate good standing by having a stable relationship with a bank or credit union, and a record of paying your rent and utility bills on time.

5. Apply for a gasoline or department store credit card. When you use them, pay on time to develop a positive record with the credit bureaus. Keep in mind, these usually have higher interest rates so you should pay the full balance when payment is due.

6. Get a cosigner. Sometimes you can begin to re-build your credit by having someone agree to assume responsibility for your loan or credit card if you aren't able to make payments.

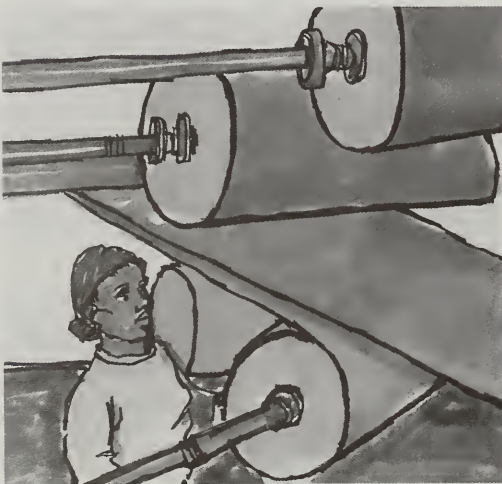
Keep in mind, if you owe money to a lot of companies, it may be time for expert help. There are nonprofit credit-counseling organizations such as Consumer Credit Counseling Service. These organizations can work with you and your creditors to set up a repayment plan. This service is provided at little or no cost. But beware of "credit repair" companies that offer to fix your credit history for a fee. To check out a company's reputation call the Better Business Bureau.

*This information was compiled by LaTonya Kittles, and is provided as a service to CC employees by the CC Quality of Worklife Council.*

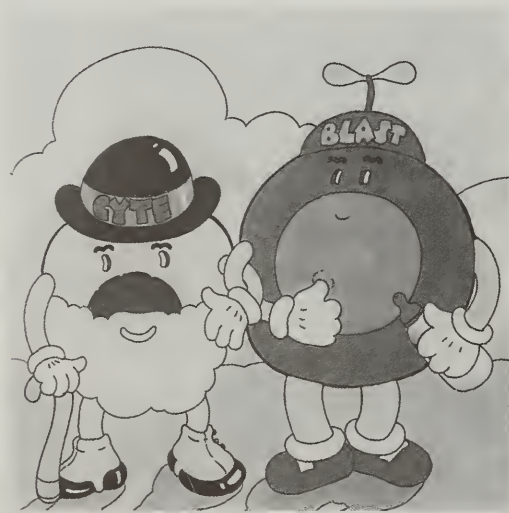
## Medicine for the Public artwork shines again in CC gallery



“Anatomy of Memory” lecture, 1989



“Genetics of Cancer” lecture, 1988



“Obesity” lecture, 1977

Like beautifully colored gems extracted from a dark cave, original illustrations created for the Clinical Center’s popular Medicine for the Public (MFP) lecture series have been pulled from storage, framed, and put on display in Gallery I.

“I was astonished at this wonderful collection of art that has been here all this time,” said Lillian Fitzgerald, of Fitzgerald Fine Arts, curator for the CC’s art galleries.

The Medicine for the Public lecture series was created by the CC in 1977, and has been presented every fall since. Lectures on disease topics are presented by NIH scientists and are illustrated by original art that helps translate medical terminology into understandable concepts.

In the spirit of the new millennium, Fitzgerald wanted to pull together a collection of art that reflected NIH’s history. During discussions with Colleen Henrichsen, chief of CC Communications, which runs the lecture series, and Linda Brown, of the Medical Arts and Photography Branch (MAPB), Fitzgerald said the idea of displaying the MFP art quickly took shape because the pieces fulfilled several goals at once.

“The illustrations are appealing from an artistic perspective, and they reflect artistic styles over the past 20 years, but they also depict a history of NIH’s work,” she said. Lecture topics are selected each year on the basis of current research, new findings, and public interest.

With over 180 lectures in 23 years, there are an estimated 9000 visuals in storage. “We couldn’t sort through all of them, so I selected some that particularly appealed to me,” said Fitzgerald. Brown pointed

out that “we could change the exhibit every month for 10 years and not run out of illustrations.”

Originally titled “Medicine for the Layman,” the series was developed as a means of reaching out to the general public with information on clinical research, and to make people aware of what NIH does and how it contributes to the public health of the nation.

“The challenge was to create a means of conveying complex medical and scientific information to nonscientists. This was achieved by creating understandable, recognizable, and sometimes humorous visual images to accompany the lecture,” said Henrichsen. As with any work of art, sometimes the images connected with the viewer, and sometimes not. But always the artistic quality remained high.

“When we selected artists for Medicine for the Public, we always looked at the quality of the art first,” said Ron Winterrowd, retired chief of MAPB. “Then we looked at which artists had the ability to work effectively with the doctors. And then, of course, they had to be able to meet the due date.”

After the lectures were over, many of the illustrations reappeared in a series of booklets developed from the talks. Although budget constraints have stopped development of illustrations for current MFP lectures, a new use for the art from past lectures is on the horizon.

“Lillian presented the idea of decorating selected areas of the new hospital with some of these illustrations,” said CC Director Dr. John Gallin. “We thought it would be an excellent new use for these interest-

ing and beautiful images. Also, since the art is already owned by the Clinical Center, there's a cost savings from not having to purchase new pieces."

The MFP art will be on display through March 1 in Gallery I, which is along the diagonal hallway that leads from the North Lobby to the Center Lobby elevators.

The Clinical Center maintains three other galleries and three sculpture cases. Shows are changed six times a year.

"There is often an NIH or CC connection in the shows," Fitzgerald said. "In addition to the MFP art, the current show has works by the wife of an NIH doctor and a CC nurse who was so inspired by the galleries that she returned to school to study art." (See below.) An exhibit last year showcased art by the mother of an NICHD doctor.

In addition to providing inspiration and enjoyment, the galleries benefit CC patients and their families. According to Crystal Parmele, art director for the CC galleries, "We ask that the artists make their works available for sale, with 20 percent of



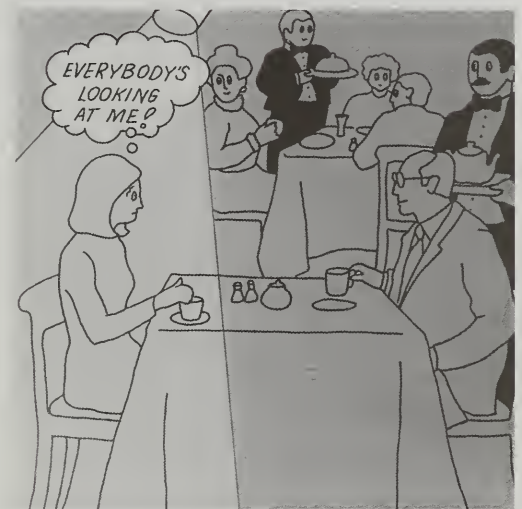
"Nicotine Addiction" lecture, 1996

the price donated to the Patient Emergency Fund. Only in special instances are pieces not for sale."

The MFP illustrations, however, represent one of those special instances. They will remain in the CC's permanent collection.

*For further information on the galleries, contact Crystal Parmele at 2-0115.*

*-by Sue Kendall*



"Phobias" lecture, 1985

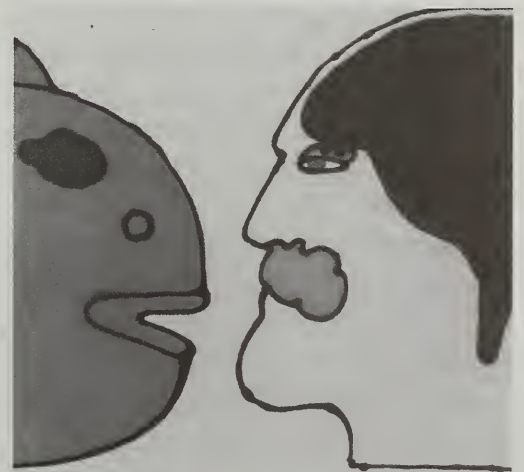
## A few words

I have spent the last 21 years working as a nurse, and 14 of those years were here at the National Institutes of Health. During my time at NIH, I have had the opportunity to view many wonderful works of art displayed in the galleries which line these hallways. I would always make an effort to enter and leave the building via the hallways with these exhibits, because it would help me begin and end my workday with such beautiful, sometimes thought-provoking images. It so inspired me, that I decided to go back to school to study art.

I have now been studying in the evenings after work for two years, at Montgomery College in Rockville. I have concentrated mostly on watercolor, working under the wonderful guidance of Professor Andrea Burchette. It has been an adventure I never dreamed could happen, and it is a joy to have my work hanging in the very art-filled halls that inspired me to pick up a paintbrush. I hope that you will find something in these halls that touches your soul also.

*-by Leslie Stephens*

*Leslie Stephens's work is on display in Gallery III, near the Admissions Desk.*



"The Brain" lecture, 1977

# CC patient chronicles experiences here

Knowing that you are not alone, that someone else has traveled the road you are on and lived to tell of the journey, can often be a great help to people coping with an illness.

Former Clinical Center patient Gianna Pedace Allentuck understands this. In 1996, at the age of 25, she was diagnosed with non-Hodgkin's lymphoma, and underwent chemotherapy at the Clinical Center as a participant in an NCI clinical trial.

"While I survived the rigors of chemotherapy and continue to remain in remission, I firmly believe I would not have fared so well without the constant love and support provided by my family and friends," she said. "Unfortunately, however, there are those who do not have a support system equal to my own; and who do not survive their own battles with chemotherapy so well, sometimes succumbing to the cancer."

As a tribute to family, friends, and fellow patients, and in an effort to reach out to other families coping with serious illness, Allentuck has written a book of essays, "Welcome to My Heart," detailing various experiences during diagnosis and treatment of her disease.

In addition to providing emotional support for patients and their families, Allentuck wants the book to benefit others in a very concrete way. She plans to donate all proceeds from the sale of her book to The Children's Inn at NIH. "Our goal is to sell 3000 books and raise a significant amount for the Inn," she said. "I believe strongly in the loving, supportive atmosphere fostered by the Inn, and I hope this book will be of help to children and their families during such a frightening time."

The following excerpt is from her essay entitled "The World Series":

I had expected the NIH Clinical Center to be a sterile, serious place with doctors and nurses stiffly walking from room to room and patient to patient. Instead, I had been greeted with smiles and laughter. While the goals of the clinic remain serious, the staff are also serious about making the patients feel at ease, feel better, which is a huge step in the scary road to treatment and hopefully recovery....

NIH is one big major league with all the different departments acting as teams. I would become a player for the clinical team (the Yankees, let's say); and when we all worked/played together, my treatment game plan played out like the 1998 World Series.

I had been scheduled for several tests that day, and each department we visited, from Phlebotomy to Radiology to the 10th floor nurses station to the 12th floor Clinic, pulled together as a team to make my appointments as comfortable as possible. The nurses who draw blood in Phlebotomy, conscious of my nervousness about giving blood, distracted me by playfully teasing each other about who was the best "draw" nurse.... One nurse in particular, named "the cat man" because he has so many cats, drew a picture of a kitty cat on my arm bandage after I told him about my two kittens, Bob and Chunky. While the bandage only stayed with me for about 15 minutes, the cat man's sensitivity and sense of humor have stayed with me since then.

The staff of the Radiology Department were also sensitive to my nerves and my needs. When I went for my X-rays, CT scans, and "glow-in-the-dark" test, the nurses and technicians always offered me a heated blanket. Usually I was shaking from both anxiety and cold, and the cozy blanket always warmed my limbs and settled my nerves.... After Lee and I finished making the scheduled rounds, we returned to the 10th floor nurses station....

After thanking the doctors and Deb for their time, I asked for a moment alone with Lee so that we could discuss



Gianna Pedace Allentuck

my entering the clinical trial versus undergoing standard treatments with Georgetown or a private clinic. Once the doctors had left the room, Lee and I reviewed the paperwork and the information that the doctors had given us and decided to sign up for the program. We felt that after dealing with the wonderful staff of NIH all day and finally ending up with obviously caring and intelligent doctors, in addition to the convenience of NIH, it would be best to join the protocol.

I had been a "free-agent" weighing my treatment options, and I decided to sign with this team of superstars. A decision that has clearly paid off as we continue to hit home runs together each time I leave the clinic with another quarterly clean bill of health. For me, NIH has never been about individual status or priorities, but about teamwork. About working together to reach the ultimate goal — patient recovery — the victory in life's world series.

*"Welcome to My Heart" will be available starting Feb. 14 at NIH R&W gift shops and at [www.sharinghearts.org](http://www.sharinghearts.org). All proceeds will benefit The Children's Inn at NIH ([www.childrensinn.org](http://www.childrensinn.org)).*

**Klein**, from page one

and transfusion, provides education and certification for physicians and medical personnel, and assesses institutions involved in the collection and processing of blood products.

Its membership comprises hospital and community blood centers, transfusion and transplantation services, and individuals involved in activities related to transfusion and transplantation medicine. The association also publishes "Transfusion," the premier research journal on blood-related issues.

Dr. Klein's primary responsibilities as president will be strategic planning and leadership on blood transfusion issues, both national and international.

"Many national policies are developed with input from the AABB, which has not only the data but also the expertise among its

membership and various committees," he said. "One of my responsibilities will be to make sure the organization is positioned to provide this critical information." Dr. Klein will be the AABB's main spokesperson as well.

"With its organization and resources, the association is ideally placed to provide the country with the information required to make decisions about blood transfusion. It can provide a forum for diverse groups—patients, donors, or collection centers—to discuss important issues, such as emerging infectious diseases in the blood supply," he said.

One arm of the association, the National Blood Data Research Center, collects data involving blood donation and transfusion.

"It is the only centralized source of national statistics on blood donation and transfusion," said Dr. Klein,

who pointed out that the Federal government has no mechanism to collect such data. "The recent concern over blood shortages was based on data collected by the Blood Data Research Center. The Red Cross collects similar data from its own operations, but it collects slightly less than half the blood in the U.S. and it does not transfuse at all. The Center collects data for both of these functions nationally."

Klein admits he'll be a busy man during the year of his term, as he will continue to head DTM. "I'll probably have to set aside other outside activities to perform this function. It's a large responsibility, but I am willing to spend a year as president because of the importance this organization has in the safety and availability of this national resource."

—by Sue Kendall

**Atkinson**, from page one

contributions to medical science or the art of medicine."

The formal award ceremony will be held in Philadelphia in April, but preliminary recognition was made last month at the local ACP-ASIM chapter meeting. The ACP and ASIM were two separate internal medicine organizations before they merged in 1998.

Dr. Atkinson was recognized for a distinguished career devoted to research in and teaching of clinical pharmacology, a medical subspecialty that studies the effects of a drug on the body, or conversely, the effect of the body on the drug, i.e., how it is metabolized.

"This award is a particularly welcome recognition that clinical pharmacology is important to the practice of internal medicine," Dr. Atkinson said.

Before joining the CC in 1998, Dr. Atkinson was professor of pharmacology and medicine at Northwestern University Medical School for 24 years. He started Northwestern's program in clinical pharmacology, which under his leadership evolved into a multidisciplinary center with NIH-funded research and training programs. He also set up and directed the therapeutic drug assay laboratory at Northwestern Memorial Hospital. This lab was the first of its type in the United States and was instrumental in demonstrating the clinical utility of therapeutic drug monitoring.

At the Clinical Center, Dr. Atkinson heads the Clinical Pharmacology Research Associate Program (ClinPRAT) ([www.cc.nih.gov/OD/clinprat/](http://www.cc.nih.gov/OD/clinprat/)) and directs the popular Principles of Clinical Pharmacology course. The

program, a joint effort by the CC and NIGMS, seeks to develop a cadre of scientists with the capability to conduct both basic and applied clinical pharmacology research.

In becoming a Master, Dr. Atkinson joins a nationwide fellowship of distinguished physicians that also includes former CC director Dr. John Decker and NIAID's Drs. Anthony Fauci and John Bennett. Dr. Paul Plotz, of NIAMS, also received the award this year.

—by Sue Kendall

The Principles of Clinical Pharmacology course is held Thursdays from 6:30 p.m. to 8 p.m., in Lipsett Amphitheater. All are welcome to attend. Consult the course web site for upcoming topics and speakers:  
[www.cc.nih.gov/ccc/principles](http://www.cc.nih.gov/ccc/principles)



## Keyworkers key to CFC success

Keyworkers were key to the success of the Clinical Center's effort in the 1999 Combined Federal Campaign. CC contributions totalled over \$102,000, according to Dr. George Patrick, chief of the Recreation Therapy Section of the Rehabilitation Medicine Department and CC campaign coordinator. "The best news, however, is that we also increased our participation to almost 49 percent of employees. This is up from 40 percent last year. We are very happy to have new people signing up and, we hope, establishing the habit of giving." Dr. Patrick emphasized the role of more than 80 CC keyworkers in the success of the campaign. At left, Mary Palsgrove, keyworker for Materials Management, displays a silk scarf she hand-painted and used as a prize in a drawing of people who donated. Dr. Patrick also credits Nicole Butler, OD, and Sharon McDowney, Nursing, for handling all the paperwork and keeping up-to-date spreadsheets on the status of the campaign.

## f e b r u a r y

2

**Ethics Grand Rounds**  
noon - 1 p.m.  
Lipsett Amphitheater

*When is it Ethical to Refuse to Care for a Patient?*  
Ezekiel Emanuel, M.D., Ph.D., CC, moderator;  
Howard Brody, M.D., Ph.D., Michigan State University, guest discussant

**Wednesday Afternoon Lecture**  
3 p.m.  
Masur Auditorium

*Domestication of the Mitochondrion for Cellular Energy Conversion*, Robert S. Balaban, Ph.D., NHLBI

9

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

*Bench to Bedside: Novel Strategies for the Treatment of Systemic Prostate Cancer*, William L. Dahut, M.D., NCI, and Philip Arlen, M.D., NCI

**Wednesday Afternoon Lecture**  
3 p.m.  
Masur Auditorium

*Wiring the Brain: Molecular Mechanisms of Axon Guidance in Vertebrates*, Marc Tessier-Lavigne, Ph.D., University of California, San Francisco

16

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

*The Myth of Holiday Weight Gain*, Jack A. Yanovski, M.D., Ph.D., NICHD

*The Use of DNA Microarray Chips in the Study of Human Diseases*, Richard Lempicki, Ph.D., NCI

**Wednesday Afternoon Lecture**  
3 p.m.  
Masur Auditorium

*Cellular Signaling by Tyrosine Phosphorylation*, Joseph Schlessinger, Ph.D., New York University Medical Center

18

**Clinical Center RoundTable**  
noon - 1 p.m.  
Lipsett Amphitheater

*Drug Interactions with Complementary Medicines*, Stephen Piscitelli, Pharm.D., CC, panel leader; Aaron Burstein, Pharm.D., CC, Judith Falloon, M.D., NIAID, and Kimberly Struble, Pharm.D., FDA, panelists

*A live broadcast featuring physicians and scientists from NIH and other prestigious institutions discussing current research activities and issues in depth.*

23

**Clinical Staff Conference**  
noon - 1 p.m.  
Lipsett Amphitheater

*New Insights into the Pathogenesis and Treatment of Early Synovitis*, Hani El-Gabalawy, M.D., NIAMS, moderator

**Wednesday Afternoon Lecture**  
3 p.m.  
Masur Auditorium

*The Human as a Model System in Genetics: Examples From Fragile X Syndrome and Incontinentia Pigmenti*, David L. Nelson, Ph.D., Baylor College of Medicine, Houston