

June 2001

Clinical Center News

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- Nurses pave the way
- Asian/Pacific American Heritage Program

CC Director given top honors by PHS



Dr. Gallin received announcement of the award last month, a day after he celebrated his seventh year as director of the CC.

CC Director Dr. John Gallin has been named the 2001 Physician Executive of the Year by the Physicians Professional Advisory Committee of the U.S. Public Health Service.

The award was presented to Dr. Gallin by U.S. Surgeon General Dr. David Satcher during the annual meeting of the Commissioned Officer's Association. The award recognizes a physician executive who plays a key role in the successful administration of a PHS program. The recipient makes exceptional contributions to the accomplishments and goals of the PHS while serving as a manager. He makes choices that maximize the use of available resources and enhances the goodwill between the U.S. government and the public. "It is a great honor to receive such a special award," said Gallin.

Clinical Center gets OK to hire under Title 42

The CC has been given the go-ahead to hire nurses and allied health professionals under Title 42, an alternative personnel system designed to be more flexible and streamlined for both employees and management.

It will be a few more months before current employees will be eligible to convert to Title 42 from the Title 5 [GS schedule]. Current employees will have the option of staying in the GS schedule or converting to the new system.

Current CC employees that have recently been offered a position under the GS schedule will remain in the GS schedule. All new job offers See **title 42**, page eight

Cipolone awarded by UMBC program

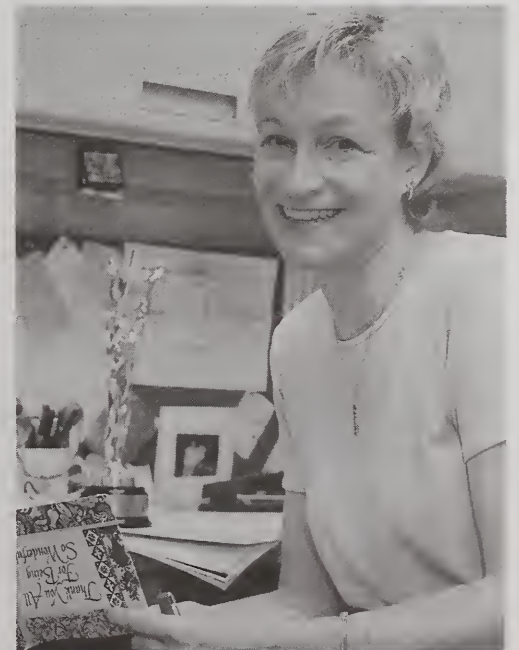
This year's graduating class from the University of Maryland Baltimore County, Department of Medical and Research Technology, selected Karen Cipolone as the Outstanding Clinical Instructor for the 2000-2001 academic year.

Cipolone is the education coordinator for the Department of Transfusion Medicine, where she teaches students as part of their rotation in the Medical Technology program at UMBC. "This award is not just for me, but the entire department," said Cipolone. "It feels great when students recognize the time

and effort we put into making this rotation a great learning experience."

Cipolone was selected by the 26 students for her excellence in clinical instruction, accurate knowledge of subject matter, ability to stimulate interest, awareness of student's needs and her positive, professional image. She has been a clinical instructor with the UMBC program since 1995, when NIH became an affiliate. NIH is now one of 26 affiliates associated with the program.

"NIH is a great place for teaching, and the staff is excellent in training students," said Cipolone.



Quality of Worklife & Diversity

Last month, the CC QWI/Diversity Council focused on the many NIH resources available to help employees manage personal stress that may be resulting from home or from work pressures and/or conflict.

Some of the resources listed previously included the NIH Employee Assistance Program and the NIH Center for Cooperative Resolution. Each resource employs trained consultants providing confidential counseling services to employees.

This month, the council wishes to share tips on ways supervisors, leaders and/or team members can effectively manage team conflict that can result in on-the-job stress.

To handle conflict among your team members:

- Ask those who disagree to paraphrase one another's comments. This may help them learn if they really understand one another.
- Work out a compromise. Agree on the underlying source of conflict, then engage in a give-and-take and finally agree on a solution.
- Ask each member to list what the other side should do. Exchange lists, select a compromise that all are willing to accept, and test the compromise to see if it meshes with team goals.
- Have the sides each write 10 questions for their opponents. This will allow them to signal their major concerns about the other side's position. And the answers may lead to a compromise.
- Convince team members they sometimes may have to admit they're wrong. Help them save face by convincing them that changing a position may well show strength.
- Respect the experts on the team.

Give their opinions more weight when the conflict involves their expertise, but don't rule out conflicting opinions.

Source: Making Teams Succeed at Work, Alexander Hamilton Institute, reprinted from Communication Briefings - Ideas that Work, Vol. XVIII, No. IV.

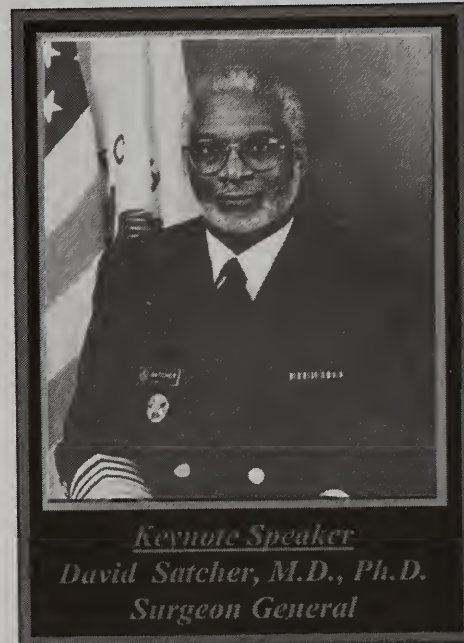
More QWI News: The council has

reported the continuing problems with access to stamps to our ORS contacts. The Bldg. 10 concession stand in the basement is now carrying stamps as an added convenience to employees. Stamps are also available in the R&W store and the stamp machines. If stamp machines malfunction, call the R&W concession stand cashiers at 6-3087.

The Annual NIH

John W. Diggs Lecture Series

"The National Strategic Plan for the Elimination of Health Disparities"



July 23, 2001

11:30 A.M.

Building 10

Masur Auditorium

National Institutes of Health

Bethesda, Maryland

* Sign language interpretation will be provided. For other reasonable accommodation needs * please contact Michael Chew at 301-402-3681, TTY (Federal Relay Service 1-800-877-8339).

Clinical Center
News

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NIH (ClinPRAT) training program

This three-year postdoctoral research fellowship training program is sponsored by the Clinical Center, the National Institute of General Medical Sciences, and the NIH Office of Intramural Research, Office of the Director. This program emphasizes the application of laboratory pharmacology, biostatistics, pharmacokinetics and chemistry to the study of drug action in humans. Postdoctoral training will be available starting July 1, 2002, and in subsequent years. Candidates must have a M.D. degree and, in general, have completed three years of residency training and be board eligible in a primary medical specialty. Candidates must be U.S. citizens or permanent residents of the United States. Candidates' qualifications are evaluated by the Clinical Pharmacology Steering Committee. Selection is highly competitive and preference will be given to applicants with outstanding potential. The stipend is determined by the candidate's educational and professional experience. For additional information visit our website at <http://www.cc.nih.gov/OD/clinprat/> or call Donna L. Shields at 301-435-6618.

Chronic 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 eligible to participate if you are age 18 or older and have had pain in your back and leg or buttock for the last three months. For more information or to volunteer, call 1-800-411-1222 (TTY: 1-866-411-1010).

Men needed

NIAAA is seeking healthy males, age 40-59, to participate in cognitive/psychological studies. No medication is involved. Call 301-594-9950. Compensation is provided.

Sickle cell study

Individuals with sickle cell disease are asked to participate in a six-hour blood 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 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).

Volunteers needed

Researchers studying infantile neuronal ceroid lipofuscinosis are enrolling patients in a study. For more information, call 1-800-411-1222 (TTY: 1-866-411-1010).

Dental study

NIDCR is seeking healthy volunteers, ages 40-60, to participate in a research study comparing absorption of drug levels to aid in treatment of oral ulcers. You may be eligible if you are not taking any prescribed or over-the-counter drugs, except birth control, do not have oral ulcers or a chronic illness and are not participating in any other research study at the same time. Participation involves three outpatient visits. Compensation is provided. For more information or to volunteer, call 1-888-606-0220.

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; are 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.

Schizophrenia study

The Clinical Brain Disorders Branch of the NIMH is conducting a six-month in-patient research study. Participants must be ages 18-65, diagnosed with schizophrenia or schizoaffective disorder, and be free of significant medical/neurological illnesses and active substance abuse. For information, contact E. Anne Riley, Ph.D. at 301-594-0874 or toll-free at 1-888-674-NIMH (6464) or e-mail: anne.riley@nih.gov or website: <http://cbdb.nimh.nih.gov/inpatient>.

Stuttering study

The NIH seeks adults and children age 5 or older who stutter or have family speech disorders for an experimental study of the causes of these disorders. Researchers offer speech, voice and language testing. There are no study-related costs to participants. Compensation provided. For information, call 1-800-411-1222 (TTY: 1-866-411-1010).



Isatu Bah (left), clinical nurse on the 2 East Surgical Immunotherapy Unit, works closely with Tye Mullikin (right) as they prepare to administer chemotherapy to a Clinical Center patient. Bah completed a training program at the Clinical Center two years ago and recently joined the nursing staff on the unit.

Nurses pave the way for research

Imagine if you will...one tiny, miniscule ant trying desperately to fight a huge army. Now take that heroic, smart, clever ant and somehow exponentially grow it and put it back on the battlegrounds, this time with a whole battalion, furiously ready to fight once again.

Although it sounds like one of the newest video games to hit the market, this is actually a simplification of an innovative cancer treatment, one that is skillfully supported by nurses on the 2 East Surgical Immunotherapy Unit.

The procedure, called tumor infiltrating lymphocytes, or TIL, involves a surgical procedure where a tumor is removed from the body, chopped up and scoured for cells that are attempting to fight the tumor.

“Just like that one ant that was trying to fight an army, we take the immune cells in the growing cancer that were trying to fight the tumor and grow them in the lab,” said Tye Mullikin, clinical nurse on the unit. “Once we reintroduce them into the patient’s body, they will immediately

return to the tumor, still fighting, but this time much stronger.”

Simplicity, even in the way that treatments are explained, is the key on the unit, which houses adult cancer patients mainly dealing with

melanoma, kidney cancer, lung cancer, colon cancer and sarcoma. Since 60 percent of the patients on the unit have melanoma (the fastest rising cancer in the U.S.), the nurses are specially trained to deal with the dis-



Jenny Westwood (left) and Azam Nahri (middle), both with NCI, along with Tye Mullikin, clinical nurse on the unit, work in the lab that performs all of the techniques for the state-of-the-art therapies that take place on the 2 East Surgical Immunotherapy Unit.

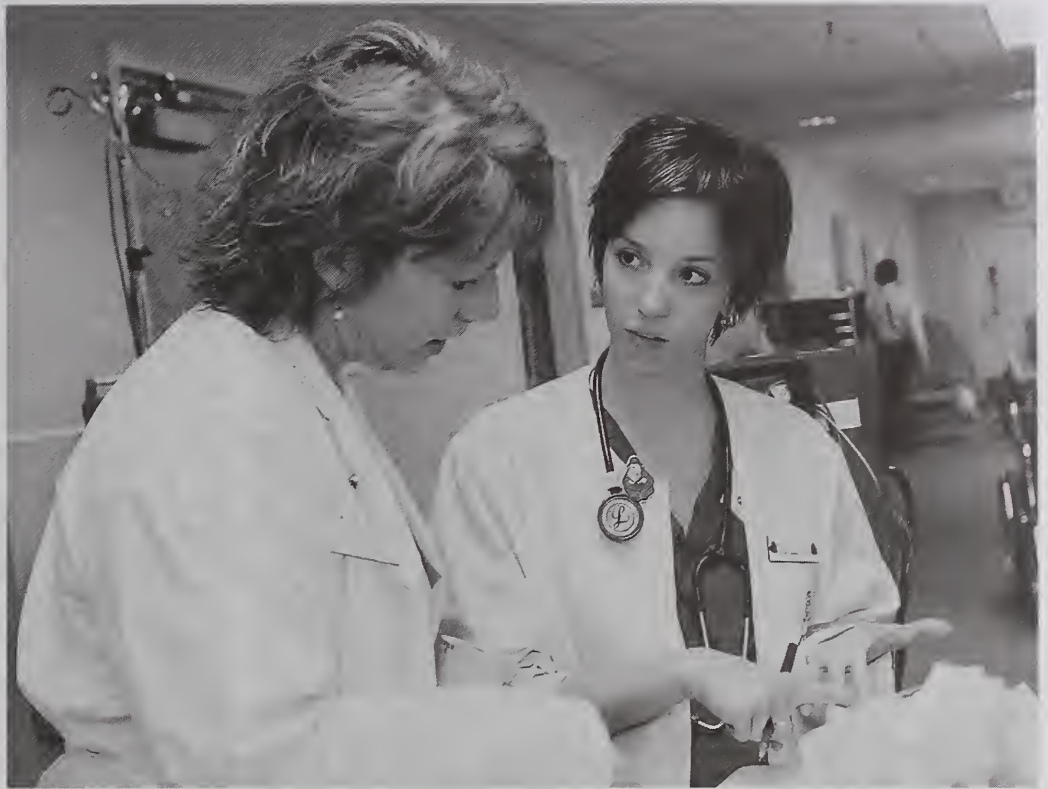
ease and more specifically, the treatments and their side effects. Another state-of-the-art treatment on the unit involves administering an experimental vaccine that targets tumors. Once the patient is immunized, a conventional cancer treatment called IL-2 is given. IL-2, which is FDA-approved for melanoma patients, mediates the growth of lymphocytes, which are one type of white blood cell. It's the unique environment of the NIH that weds conventional treatments and experimental treatments to help combat diseases, which is just the reason that many patients come here.

"IL-2 is available in my hometown, but one of the many reasons that I chose to come here is that back home the hospitals may do IL-2 treatments about once a week, but here they do between three and ten a day," said a Columbus, Ohio, melanoma patient. "My belief is that experience means a lot in whatever you are doing, and that is clear because the nurses here are very specialized and extremely experienced."

Training, as with all nursing units here, is an integral part of the 2 East Surgical Immunotherapy Unit. "Our scope is crossing over between medical and surgical oncology and the variances in our protocols are very wide, so there is a lot of information that our staff needs to know," said Paula Muehlbauer, clinical nurse specialist on the unit. "Many of the protocols that we support have lots of new ideas, and since we have seen an increase in the last few years in the number of protocols, the protocol managers and high-caliber nursing

"Here nurses are treated as peers rather than subordinates"

—Crystal Cook



Paula Muehlbauer (left) and Amy Knopf (right) are just a few of the high-caliber nurses on the 2 East Surgical Immunotherapy Unit. Knopf, a graduate of Western Kentucky University, completed the Cancer Nurse Internship program and was so impressed with the program that she joined the staff.

staff have done an excellent job getting up and running and getting the information to the patients."

One specialized training that helps support nurses, the Cancer Nurse Internship Program, brings nurses from across the country to the CC for an intensive 6-month session. Initiated in 1985, this program uses classroom and bedside teaching to train nurses in the intricacies of the field of oncology.

"Some of the treatments that we administer, such as the IL-2 protocol, are very nurse-dependent and our nurses are able to manage side effects and get our patients through the protocols because they know what to do and when to do it," said Mullikin. "This program provides specialized training to a cadre of nurses, many of whom stay on after completing the program."

Those who do not, according to Mullikin are better prepared for the field, no matter which organization they end up in. Mullikin, herself a graduate of the first class of the Cancer Nurse Internship Program, extends her abilities outside the NIH

walls by training nurses from other hospitals on how to administer IL-2. Supporting the training of community nurses, furthers the NIH's ability to conduct extramural research. "When we learn to be experts on something, we should train others on it," said Mullikin. "IL-2 is something that many people on the outside are afraid to give and its use is not real prominent, but if they come here and train, they might not be as intimidated by the drug."

"Masters-prepared nurses at the bedside add yet another element to the care that we can give here," said Mullikin, who herself has a master's in nurse education and is a strong proponent of nurses pursuing advanced degrees. "Their knowledge and skills are passed on to less experienced nurses right there at the bedside, during regular and off-hours, including weekends."

The unit also takes a team approach to primary nursing, which according to staff members has made a world of difference. "Here at NIH

See nurses, page seven

Asian/Pacific American Heritage Program brings “Unity in Diversity” through dance



The 29th Annual Asian/Pacific American Heritage Program intertwined a myriad of cultural dances that showed the vast diversity and artistic talent of the Cambodian, Chinese, Philippine and Indian cultures. *(left)* Internationally known dancer Veronique Tran performs a Balinese dance entitled Chandra Wangi. Translated, Chandra Wangi means perfume of the moon, and is a welcome dance to acknowledge the gods and the audience.



(above) Members of the CKS Dance Academy perform the Chi dance, a traditional Chinese dance. The size and complexity of the women’s headpieces and shoes require them to learn how to move around and still remain graceful. *(below)* The Konark Dance School performs an Indian dance entitled “The Dance of the Enchantress,” choreographed by Jayantee Paine-Ganguly.



(above) The Pilipino American Cultural Arts Society performs Asik/Singkil, which takes its name from the bracelets worn around the dancer’s ankles. According to legend, a princess was walking in the forest with her ladies-in-waiting when an earthquake jolted the surroundings. The dance simulates the dangers as the princess and her ladies-in-waiting weave in and out of the criss-crossed bamboo poles, which are clapped vigorously to represent the surging ground.



Nurses play a critical role in clinical research

Training and team work help researchers and heal patients

continued from page five

we have time to understand why we are doing what we are doing, and often at community hospitals some nurses become task-oriented because of time constraints," said Mullikin. "As a result, the nurses here are an integral part of the research protocols, and are treated as such."

According to Crystal Cook, a clinical nurse on the unit who travels to the CC from West Virginia, it was that valued role of nurses that made her decide to come here after serving as a temporary nurse at an area facility. "Here nurses are treated as peers rather than subordinates," said Cook. "They treat you like you have input and your opinion is relevant, and it's viewed as something that can make or break a protocol."

But it's not just fellow nurses that see the collaboration and team

approach, the patients see it also. "The nurses on this unit are great with patients and they really show concern," said a lung cancer patient, undergoing her third surgery here. "I've found that nurses here work together really well and are not afraid to ask questions or ask for help if they need it."

In fact, according to Mullikin, by asking questions the patients as well as the organization benefit. "There is no such thing as a dumb question," said Mullikin. "By asking questions, nurses help to improve our standards of practice. Their question could relate to something that we have taken for granted for years, as a result we will be able to work toward improving our policies or practices."

So as new and innovative cancer treatments are developed daily, so too is the knowledge-base of the

nurses on the 2 East Surgical Immunotherapy Unit. Viewed as experts in their field, the nurses support themselves, each other, and the patients who come from across the world in a valiant effort to advance the knowledge of cancer.

"The protocols we undertake often involve treatments never done before and the nurses here always meet this challenge with flexibility, innovation and enthusiasm and often make suggestions and changes that greatly improve our experimental efforts," said Dr. Steven Rosenberg, chief of the NCI Surgery Branch. "The nurses on 2E and 2J [Surgical Intensive Care Unit] are the best patient-care nurses I have ever worked with. They really make a difference!"

—by LaTonya Kittles



Iron man makes time for kids

Internationally known bodybuilder and seven time Mr. Olympia finalist, Kevin LeVrone, dropped by the CC to visit with fans. LeVrone, a native of Maryland, has won many of the European Grand Prix championships, competed in the Arnold Classic and placed second in the Mr. Olympia competition last year. When he's not training, LeVrone dedicates much of his time to visiting children in hospitals around Maryland. Pictured (l to r) Kevin LeVrone, Tony Grayson, Sean Hickey and Marcus Rhodes.

Clinical Center gets go-ahead to hire under Title 42

continued from page one
will be made under Title 42.

Title 42 for Clinical Research Support is an employment system for CC employees engaged in direct or indirect clinical patient-care service. The system is centered around pay bands that use competency and not longevity to determine the amount of individual pay increases or supple-

mental pay (awards, bonuses) given to employees.

Depending upon the position, each job will fall into one of three pay bands. Band I represents a developmental continuum from the entry level through the full operating level. Band II represents an expert or specialist level that requires highly developed or specialized knowledge

of an occupation. Band III represents a managerial, senior specialist or executive level. Pay band ranges were established to be in alignment with similar positions in the private sector and other federal agencies.

For more information on Title 42, visit the Office of Human Resources Management website at <http://ohrm.cc.nih.gov>.

j u n e

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

Clinical Implications of Donor-Recipient ABO Blood Group Incompatibility After Hematopoietic Stem Cell Transplantation Performed with Non-myeloablative Conditioning
Charles Bolan, Jr., M.D., CC

Bioterrorism
Pierre Noel, M.D., CC

**Wednesday Afternoon
Lecture
1:30 p.m.
Masur Auditorium**

Lectures by Laureates of the Kettering Sloan and Mott Prizes for Cancer Research
GM Cancer Research Foundation 2001 Annual Scientific Conference

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

Myocardial Viability in Heart Failure: Nuclear-Based Methods
Vasken Dilsizian, M.D., CC/NHLBI

Is Schizophrenia a Neurodevelopmental Disorder?
Robert K. McClure, M.D., NIMH

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

Structure, Function and Regulation of NhaA, a Key Na⁺/H⁺ Antiporter for pH and Na⁺ Homeostasis
Etana Padan, Ph.D., Professor, Division of Microbial and Molecular Ecology, Institute of Life Sciences, Hebrew University, Jerusalem

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

Nicotinic Acetylcholine Receptor and the Structural Basis of Fast Synaptic Transmission
Nigel Unwin, Ph.D., Head, Neurobiology Division, MRC Laboratory of Molecular Biology, Cambridge, UK

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**Special Tuesday Lecture
3 p.m.
Masur Auditorium**

The Population Biology of HIV Pathogenesis and the Evolution of Drug Resistance in Treated Patients
Roy M. Anderson, Ph.D., FRS, University of London

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

Pathogenesis and Treatment of HIV-Associated Renal Diseases
Paul L. Kimmel, M.D., NIDDK

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

Cancer: An Unfortunate Genetic Collaboration
Philip Leder, M.D., John Emory Andrus Professor and Chairman, Department of Genetics, Director, Harvard Institute of Human Genetics, Senior Investigator, HHMI, Harvard Medical School, Boston

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

Bench to Bedside
Recombinant Immunotoxins for the Treatment of Hematologic Malignancies
Ira Pastan, M.D., NCI
Robert J. Kreitman, M.D., NCI