

IN SERVICE

Gillman Pushes Past Hardships to Help Other Vets

BY DANA TALESNIK

A year ago, Jake Gillman attended a career fair as a veteran looking for a new opportunity. In September, he attended the same Hiring Our Heroes event at Nationals Park, this time as an NIH contractor.

“I went to the Nats Park hiring event [this year] so I could help forward veterans’ résumés to hiring officials,” said Gillman, a scientific program manager at the Center for Cellular Engineering in the Clinical Center’s department of transfusion medicine.

“When I first started going to [veteran recruiting] conferences, [I realized] after



Jake Gillman, a veteran, helps NIH hire vets.
PHOTO: DANA TALESNIK

speaking with other vets out there, it takes a really long time for vets to translate their skills to the working world,” Gillman said. “I believe veterans have a strong work ethic and [most] have a core base values system that makes them work harder at their positions. That’s why I try to help as many vets as I can when I get the opportunity.”

A year earlier, Gillman fortuitously

stopped by NIH’s table at Hiring Our Heroes, staffed by the Office of Human Resources’ corporate recruitment unit. There he met Dr. Tim Puetz, an operations officer at the Clinical Center and, like Gillman, an Army veteran who was planning to switch agencies. Gillman now holds Puetz’s previous position at NIH.

“Tim helped me get this position,” said Gillman. “I’d really like to keep contributing to helping other veterans, just giving back, kind of paying it forward, from what Tim had done for me.”

Gillman served in the Army National Guard for 10 years, from 2006 to 2016, starting out as a truck driver while training to teach hand-to-hand combat. Even early on, as a private, he was busy helping his fellow soldiers, managing platoon training and preparing information they needed to get promoted.

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NIH Honors Legacy of Pioneering Cancer Scientist Rabson

BY SARAH SCHMELLING



Katie Couric at ceremony honoring Dr. Alan S. Rabson

Colleagues, friends and family of Dr. Alan S. Rabson gathered at Natcher Bldg. Oct. 30 to celebrate the life of the distinguished physician-scientist, who provided more than a half-century of service to NIH. Their stories, anecdotes and memories of

Rabson, who passed away in July, were of a brilliant, dedicated and, above all, kind man

SEE RABSON, PAGE 6

Adult Care Resources Are Available to NIH’ers

NIH clinical research nurse Martina Lavrisha knew something was wrong when her mother—a devout Catholic who attended services daily for most of her 98 years—started talking about not going to church. Her hearing, she complained, was too poor to hear the priest, so what was the point?

The unexpected change alarmed Lavrisha and her eight siblings. “This woman has gone to church every single day for her entire life,” she explains, noting that her mother also had trouble identifying family members because she could not see or hear who was entering her home. “We had been talking with her about getting hearing aids, but it’s hard to get a consensus.”

While the challenges of aging were hitting home in a new way, Lavrisha was familiar with the topic. Throughout her nursing career, she worked primarily with senior patients and, at the beginning of 2018, began



Like no other warehouse in HHS. See p. 5.

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Author Holds Q&A on Eunice Kennedy Shriver, Dec. 6 in Lipsett



Eileen McNamara

Join NICHD director Dr. Diana Bianchi for a Q&A session with Pulitzer Prize-winning journalist and author Eileen McNamara about her latest book, *Eunice: The Kennedy Who Changed the World*. McNamara is director of the journalism program at Brandeis University. The session will be held Thursday, Dec. 6, from 11:30 a.m. to 1 p.m. in Lipsett Amphitheater, Bldg. 10.

McNamara's book chronicles the life of Eunice Kennedy Shriver, including her efforts to get her brother President John F. Kennedy to create an NIH institute dedicated to understanding and improving child health, maternal health and the health of people with disabilities. All are welcome. Those who bring their copy of the book can have it signed by the author.

Federal Benefits Open Season, Til Dec. 10

The Benefits Open Season began on Nov. 12 and runs through Dec. 10. Don't miss this opportunity. If you plan to make an Open Season election, now is the time to do it. Unless you experience a Qualifying Life Event during the year, the annual Open Season is your only chance to enroll, cancel your enrollment or make a change to your enrollment for the participating programs.

For detailed information about the Federal Benefits Open Season, visit <https://hr.nih.gov/benefits/change-open-season/benefits-open-season>.

The three participating programs are:

- Federal Employees Health Benefits (FEHB) Program - To enroll, cancel or change your FEHB enrollment, you must use myPay at <https://mypay.dfas.mil/mypay.aspx>. Open Season elections will be effective on Jan. 6, 2019. Your current enrollment will automatically continue into next year if you do not take any action. (Exception: If you will be retiring between now and Jan. 5, 2019, do not use myPay to make your Open Season change. Instead, you must submit a hard-copy Health Benefits Election Form, SF 2809, along with your retirement paperwork to your benefits specialist.)

- Federal Employees Dental and Vision Insurance Program (FEDVIP) - To enroll, cancel or change your FEDVIP enrollment, you must use the BENEFEDS Portal at www.benefeds.com or call 1-877-888-3337 (TTY 1-877-889-5680). Open Season elections will be effective on Jan. 1, 2019. Your current enrollment will automatically continue into next year if you do not take any action.

- Flexible Spending Accounts (FSA) Program - To enroll in an FSA for 2019, you must use the FSAFEDS website at www.fsafeds.com or call 1-877-372-3337 (TTY 1-866-353-8058). Note that your current enrollment will not automatically continue into next year. If you want an account in 2019, you must enroll during the Open Season. Open Season elections will be effective on Jan. 1, 2019.

If you have questions, email AskBenefits@nih.gov or your benefits contact, who can be found at <https://hr.nih.gov/contacts/benefits>.

Enrollment Open for NIH Leave Bank

Fall open enrollment for the NIH Leave Bank runs until Dec. 10. The membership period will begin on Jan. 6, 2019.

The Leave Bank is a pooled bank of donated annual and restored leave available to eligible members. It acts like insurance for your paycheck and amounts to paid leave for members who have exhausted all of their own sick and annual leave and are affected by a personal or family medical condition.

The Leave Bank differs from the Voluntary Leave Transfer Program (VLTP) in that the bank is a depository of leave; leave is distributed to members who are approved to be leave recipients. The VLTP, on the other hand, requires a direct donation from donor to recipient. An advantage of the Leave Bank is that eligible members may receive leave to cover time out of the office without awaiting donations from coworkers.

To become a Leave Bank member, access the Integrated Time and Attendance System (ITAS) during open enrollment and enroll under "Leave Bank Membership." If you are a 2018 Leave Bank member, your membership will automatically continue into 2019, unless you opt out. The yearly membership contribution is one pay period's worth of annual leave accrual. The membership contribution will automatically be waived if you lack sufficient leave.

For more information, visit <http://hr.nih.gov/leave-bank> or contact (301) 443-8393 or LeaveBank@od.nih.gov.

NIH Judo Club's 40th Anniversary Class Begins Jan. 8

January 2019 marks the 40th anniversary of the NIH Judo Club. This is a special time and opportunity for members of the NIH community to begin judo as the club celebrates 4 decades of teaching, learning and practicing the sport.

In January 1979, the NIH Judo Club was founded by Dr. Thomas E. Malone, who was then NIH deputy director. Judo, an Olympic sport since 1964, was founded in 1882 in Tokyo. The NIH dojo (place to practice judo) is located in the Thomas E. Malone Judo and Taekwondo Center in the Fitness Center (Bldg. 31C, B4 level).

This is how the club was advertised to the NIH community 40 years ago: "The club will emphasize

Kodokan judo in which the principles and techniques of judo lead to development of the mind and the body [and] carry over to all aspects of daily living. The formal phase of the initial course will include judo exercises, methods of breaking falls and selected throwing and grappling forms."

Today, for beginners, the NIH Judo Club follows the same format with some modifications as students learn judo techniques, train for competition and work toward earning their first belt-rank.

The club will reserve 10 slots for beginners from NIH. Inquiry for admission to the introduction to judo course in January 2019 (starting Tuesday, Jan. 8) is now open and will close on Dec. 15. The course material will be covered over four Tuesday classes; attendance at all four Tuesdays in January is mandatory for admission to the class.

If you are interested, visit <http://nihjudoclub.com> and contact the club at info@nihjudoclub.com. There will be other months that the club will offer an introductory course to celebrate the 40th anniversary.

Webinar on Open Data, Place-Based Research, Dec. 6

The Office of Disease Prevention will hold a Methods: Mind the Gap webinar with Dr. Stephen J. Mooney on constructing measures of place from secondary data. The event will occur on Thursday, Dec. 6 at 2 p.m.



Dr. Stephen J. Mooney

Mooney will discuss approaches and useful tools for constructing measures of place from secondary data, including "ecometrics" (using psychometric techniques to build place-based scales), spatial interpolation and assessing and correcting for sampling biases in crowdsourced data.

Mooney is acting assistant professor in the department of epidemiology at

the University of Washington. He has a background as a computer programmer and recently obtained a Ph.D. in epidemiology from Columbia University. His research focuses on how urban environments shape health, particularly through active transport and transport-related injury and on developing methods to measure those urban environments accurately.

To register visit <https://prevention.nih.gov/education-training/methods-mind-gap/open-data-place-based-research-and-getting-measures-we-need-ask-right-questions>.

NIH Celebrates PA Week

BY DANA TALESNIK

A patient's first encounter with a physician assistant (PA) might be met with skepticism. Who is this "assistant" examining me? Where's the doctor?



Dr. Lisa Alexander, president of the PA Education Association and professor of PA studies at George Washington University, gives the keynote address.

There are more than 123,000 PAs working across the country in every medical field from pediatrics to internal medicine to surgery. They conduct physical exams, record medical histories, order and interpret lab results and prescribe medications.

PA education is a graduate-level program completed after an undergraduate degree that must prepare students for higher level basic and medical science courses. After graduation, all PAs must pass a rigorous national

certification exam that is required for licensing at the state level. There are more than 230 accredited PA programs nationwide.

At NIH, there are some 45 PAs working in clinical research, providing medical care for patients on various protocols. Some of them took a quick break from their busy day to attend NIH's annual PA Week celebration held Oct. 12 in the Clinical Center's southeast patio room.

A year ago, Rep. Karen Bass (D-CA), the one PA in Congress, introduced legislation designating Oct. 6-12 as National PA Week. Capt. Josef Rivero, a PHS officer and NHLBI associate investigator who led the group effort to get the legislation sponsored, read



PAs assemble for a photo at event honoring profession.

PHOTOS: CHIA-CHI CHARLIE CHANG

aloud the PA proclamation, which raises awareness and appreciation for the profession.

Keynote speaker Dr. Lisa Alexander noted the exponential growth of the field. She was excited to learn from a colleague recently that Brigham and Women's Hospital in Boston, for example, has a

★ ★ ★

"We look at patient care as a team effort and with that messaging I think we stand to preserve the profession we so dearly love."

★ ★ ★

robust workforce but is still interested in recruiting more PAs. "In my lifetime, I never thought a hospital would be looking to fill 60 positions for PAs at one time," said Alexander, professor at George Washington University and president, Physician Assistant Education Association.

The profession has historically been linked to the military, with many veterans seeking to expand their service training to become PAs. During the last 15 years, changes in the demographics of incoming students have taken place, including more women. These changes are not unique to the PA field, where many see flexibility and work-life balance as attractive features of the career.

"What I look for in an applicant is someone who's had some life experience and can multi-task," said Alexander, who is also a PA, clinician and researcher. "There haven't been any studies demonstrating that clinical experience is a predictor of success; however it makes the student, I think, a much more sought-after commodity in the sense that they have exposure to patients who are at their most vulnerable or they may have a working knowledge of the vernacular that we use in medicine that sometimes we try to teach but you can't get unless you're embedded in the system."

The younger PAs might not remember the advocacy efforts that helped the profession progress to where it is today, said Alexander. In the early years, after the field was established in 1967, the American Academy of PAs (AAPA) played a critical role in recognizing and advancing the profession, including lobbying for prescription-writing privileges.

Today, the AAPA is working to modernize the state laws that govern PA practice by advocating for policy that removes

administrative barriers to hiring PAs. In many states, laws that govern PA practice include stipulations related to physician supervision, which requires additional paperwork and burdens that can delay the licensure and hiring process.

"We're not looking for independent practice," said Alexander. "We're just looking to reduce the administrative burdens that can negatively impact effective utilization of PAs."

With physician shortages still predicted by various workforce experts, a strong PA workforce will be needed to collaborate with physicians to effectively care for the ever-growing number of patients seeking care, she added.

"We look at patient care as a team effort and with that messaging I think we stand to preserve the profession we so dearly love." **R**



ON THE COVER: *Astyanax mexicanus* (cavefish). NIH researchers have identified how eye loss occurs in blind cavefish. The study yields potential clues to understanding eye disease and blindness in people.

IMAGE: DANIEL CASTRANOVA, NICHD

The NIH Record

Since 1949, the *NIH Record* has been published biweekly by the Editorial Operations Branch, Office of Communications and Public Liaison, National Institutes of Health, Department of Health and Human Services. For editorial policies, email editor or phone (301) 496-2125.

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NIH National Institutes of Health
Turning Discovery Into Health

Gillman

CONTINUED FROM PAGE 1

One of the biggest highlights of his military career, he said, was mentoring subordinates. “I guided some of my soldiers toward careers outside the military that they might not have known they’d be good at,” said Gillman. “That’s part of, I think, being a good leader.”

As Gillman rose through the ranks to sergeant, active guard reserve and ultimately second lieutenant, he continued overseeing all aspects of his platoon’s training to keep his unit ready to deploy at a moment’s notice.

In fact, Gillman did deploy twice, including a year-long assignment in Iraq. When he returned from overseas, he grappled with the same hardships facing many other soldiers struggling with the physical and psychological tolls of combat while trying to reacclimate to life back home.

“I didn’t feel like my family understood my deployment,” said Gillman. “I felt like I couldn’t talk to anybody who was outside of the military...When you lose a lot of time around people, you feel like you’ve lost touch with reality.”

Physically, Gillman’s deployments left him in chronic pain from multiple back injuries.

“The hardest thing is, I’m a physically active person and I just want to feel like I did before I left for combat,” he said. “I was in really good shape, but now my back is always hurting.”

Despite the pain and the persistent post-combat-related stress, Gillman stays positive, focused on mentoring opportunities and pursuing his doctorate in organizational leadership and management.

“I never thought I’d get to this point, having a master’s degree or being even close to having my Ph.D.,” said Gillman, who’s grateful to the military for paying all his tuition. “I enjoy working for my group at NIH and applying my degrees to my work. I feel like getting my M.B.A. has helped this group and [my current studies] have really helped them save money and put best clinical practices into place.”

Gillman also enjoys helping young people at NIH discover their potential. “I enjoy mentoring younger people here,” he said. “I ask their goals...and try to help them see where they might fit into the bigger picture.”



Gillman (r) with HR recruitment team

It wasn’t long ago, he reflected, that he discovered his ultimate career path. Back in high school, his friend’s mother, a radiologic technologist, gave a presentation and he became hooked. “As soon as she started showing us x-rays, I knew my passion was going to be health care.”

And now Gillman has another life transition for which he’s grateful. He and his wife are expecting a baby in December. **R**

Dyer To Give NEI Audacious Goals Seminar

Dec. 13

On Thursday, Dec. 13, Dr. Michael A. Dyer will present the next NEI Audacious Goals Seminar in Neuroregeneration from noon to 1 p.m. in Lipsett Amphitheater, Bldg. 10. In his presentation “Cellular Pliancy in Retinal Development and Disease,” Dyer will discuss how stress and injury affect the eye’s susceptibility to cancer and degeneration.



Dr. Michael A. Dyer

Dyer is chair of the department of developmental neurobiology at St. Jude Children’s Research Hospital and a Howard Hughes Medical Institute investigator. He studies factors that influence and coordinate early cellular development. Specifically, he investigates how cells in the developing light-sensing retina proliferate and organize into cellular subtypes. His objective is to understand the causes of eye cancers such as retinoblastoma and degenerative eye diseases such as age-related macular degeneration.

For more information about the series, visit <https://nei.nih.gov/audacious/>.

NLM Director Brennan Honored

NLM director Dr. Patricia Flatley Brennan was presented the 2018 Morris F. Collen Award of Excellence on Nov. 4 at the American Medical Informatics Association’s 2018 annual symposium in San Francisco.

In honor of Morris F. Collen, a pioneer in the field of medical informatics, the award is considered the highest honor in informatics. The recipient is chosen by the American College of Medical Informatics (ACMI), an



Dr. Patricia Flatley Brennan

elected body of fellows within AMIA, the leading association for informatics professionals.

“ACMI is honored to recognize Dr. Brennan for her significant accomplishments,” said ACMI president Dr. Christopher Chute. “We are

grateful for her leadership at the National Library of Medicine and her commitment to AMIA’s mission.”

AMIA cited Brennan’s ability to use technology to improve the safety and effectiveness of health service delivery systems; her impact on development of technologies for in-home management of chronic illness, including heart disease and AIDS; her leadership in ensuring federal requirements that electronic health records systems safely and effectively include patient-generated and patient-sourced data; and her ongoing efforts at NLM to emphasize data science as a key component in informatics.

Dr. Douglas Fridsma, AMIA president and CEO, said, “Patti is a true pioneer. Her expertise is known throughout informatics and nursing, but what everyone should remember her for is her core mission to always put patients first. There is truly no one more deserving of this prestigious award.”

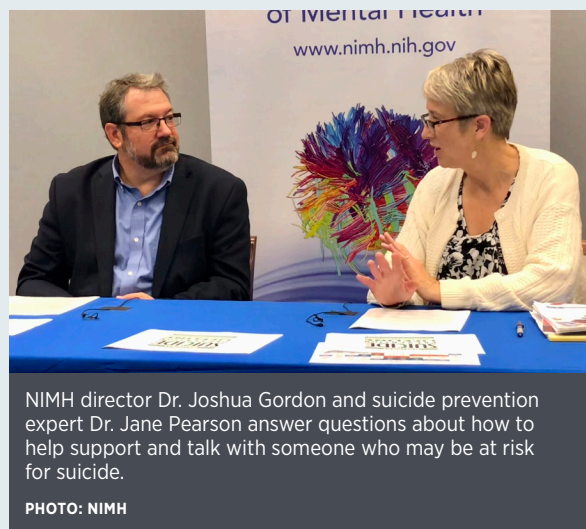
LIVE EVENT

NIMH Addresses Strategies for Suicide Prevention

What should you do if you are concerned a loved one may be thinking about suicide? According to National Institute of Mental Health director Dr. Joshua Gordon, “the most important thing to do is to ask.”

This message was among many that Gordon shared during NIMH’s Facebook Live event held in recognition of Suicide Prevention Week. The social media forum engaged members of the public in a conversation about suicide prevention and highlighted how NIMH-supported research is furthering knowledge that will help save lives and help reverse the rising suicide rates in the U.S.

“Suicide claims nearly 45,000 lives a year in our country, and we urgently need better prevention and intervention strategies,” said Gordon. “Thanks to research efforts, it is now possible to identify those at risk using evidence-based practices, and there are effective treatments currently being tested in real-world settings. This forum was an opportunity to share these interventions with a broad audience.”



NIMH director Dr. Joshua Gordon and suicide prevention expert Dr. Jane Pearson answer questions about how to help support and talk with someone who may be at risk for suicide.

PHOTO: NIMH

Gordon was joined by Dr. Jane Pearson, chair of the Suicide Research Consortium in NIMH’s Division of Services and Intervention Research. Together, they fielded a variety of questions including how to identify and help individuals at risk for suicide and how to find resources to support those in need.

Many of the questions from the public focused on how to support and talk with someone you think may be having suicidal thoughts. Gordon and Pearson explained that you can ask someone directly “in a caring and supportive way” if they are thinking of killing themselves. They addressed the common misconception that

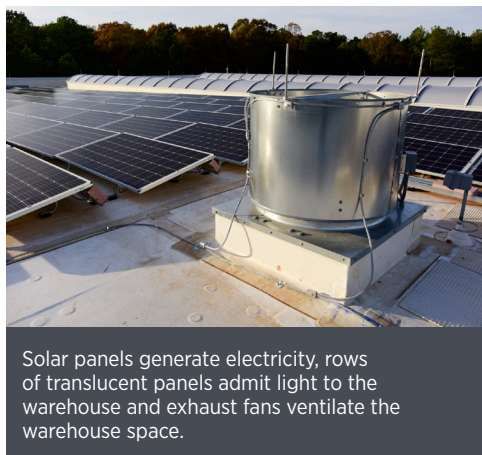
asking someone if they are thinking of harming themselves will put that individual at greater risk.

Thoughts of suicide don’t go away if you don’t ask about them, Pearson indicated. She explained that it is much better to understand what is going on with someone, and if needed, help them find professional care through services like the National Suicide Prevention Lifeline (1-800-273-8255). They shared that research shows that straightforward and cost-effective interventions, such as safety planning with a health care provider and caring communications following a health care visit, can help those in crisis.

Gordon and Pearson also relayed the importance of talking about suicide in health-care settings. For example, the NIMH-supported Emergency Department Safety Assessment and Follow-up Evaluation (ED-SAFE) study found that asking everyone who visits emergency department settings if they are having suicidal thoughts or feelings almost doubles the number of individuals identified as at risk for suicide. They described NIMH efforts to create tools used to screen for suicide, such as the Ask Suicide-Screening Questions (ASQ) screening tool to help health care providers identify children and adolescents at risk for suicide. The accompanying ASQ toolkit offers resources to help providers implement the ASQ and talk with parents about the importance of asking youth directly if they are having thoughts of suicide.

“We had a high level of engagement from the public with many insightful questions about how to prevent suicide,” said Gordon. “This event was a great opportunity to answer their questions and spread the word about how we can all make a difference addressing this critical public health issue.”

To learn about the warning signs of suicide, action steps for supporting someone in emotional pain and crisis helpline numbers, go to the NIMH Suicide Prevention webpage at <https://www.nimh.nih.gov/health/topics/suicide-prevention/index.shtml>. The archived Facebook Live event is available at <https://www.nimh.nih.gov/news/media/2018/facebook-live-suicide-prevention.shtml>.

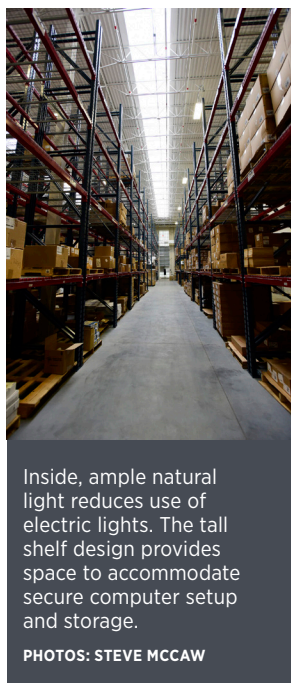


Solar panels generate electricity, rows of translucent panels admit light to the warehouse and exhaust fans ventilate the warehouse space.

NIHES Warehouse Earns ‘Platinum’ Rating

On Oct. 9, the new NIEHS warehouse was certified as LEED Platinum, which is the highest-level recognition for overall sustainability. The facility is the first government-owned building within the Department of Health and Human Services to earn the rating. The warehouse, which has been recognized by other groups as well, lived up to its name as the NIEHS Net Zero Energy Warehouse by generating 38 percent more energy than it used during the first year of occupancy.

The design-build contract required LEED Gold, yet NIEHS and the Office of Research Facilities



Inside, ample natural light reduces use of electric lights. The tall shelf design provides space to accommodate secure computer setup and storage.

PHOTOS: STEVE MCCAWE

partnered with the designers and builders to aim for Platinum certification. This meant using healthy and sustainable design, along with green construction practices such as incorporating recycled material, using rapidly renewable and local materials, optimizing energy and water conservation and protecting wildlife habitat.

The Leadership in Energy and Environmental Design (LEED) certification, awarded by the United States Green

Building Council, is the most widely recognized system for evaluating overall sustainability.

The new building and its site also offer security advantages over previous NIEHS warehouse arrangements. With a separate entrance from the main campus, the location minimizes the number of large commercial vehicles that can gain access to locations on the greater campus.



At left, NCI deputy director Dr. Doug Lowy called Rabson “a master at helping you find yourself.” Rabson advised a young Lowy, “I don’t care what you do—just be sure it’s good.” Victoria Reggie Kennedy (c), widow of Sen. Ted Kennedy, explains the four elements of “Rabsonian wisdom.” At right, Dr. Ira Pastan said Rabson always counseled being kind to coworkers, since they may one day supervise you. “That happened four times in my career,” he quipped.

Rabson

CONTINUED FROM PAGE 1

who continues to inspire many in the NIH community and beyond.

Rabson had many roles at NIH, including 20 years working in the NCI Laboratory of Pathology. He served as director of what is now NCI’s Division of Cancer Biology and later became a long-time deputy director of the institute. He was renowned for his scientific achievements, including research on tumor virology and cancer pathology, but also for his leadership style, compassion and sense of humor.

The celebration was fittingly held in Ruth L. Kirschstein Auditorium, named for Rabson’s wife of 59 years. Kirschstein was an eminent NIH scientist as well: the first woman to direct an IC (NIGMS) and she served as deputy director and acting director of NIH before she passed away in 2009.

At the event, NIH director Dr. Francis Collins referred to Rabson and Kirschstein as “the original power couple at NIH.

“[A] and Ruth, who led so many enterprises, and mentored so many who came through the doors and went away as better human beings as a result, are certainly people that we will always honor and always recognize,” Collins said.

Principles of ‘Rabsonian Wisdom’

The speakers included many current and former NCI scientists and leaders who knew Rabson as a mentor, a strong supporter and, in many cases, a personal advisor. Several of his former colleagues told stories of calling Rabson after a friend or loved one received a cancer diagnosis and describing how he immediately jumped into action, offering advice and knowing exactly where to refer them.

Rabson also provided guidance to those far beyond NIH. Katie Couric, the journalist and co-founder of Stand Up to Cancer, said that when her husband Jay received the “crushing” diagnosis of stage IV colon cancer, her boss, Tim Russert, told her to “call Al Rabson.

“From that very first phone conversation,” she said, “Dr. Rabson became my comrade-in-arms.” She would call him often, asking about an article she’d read on a new treatment or [scientific] finding, to the point where he affectionately called her “Dr. Couric.” She said that, in many ways, he became her lifeline. And after her husband passed away, she said Rabson continued to

support her in her efforts to increase awareness of colon cancer and to be her friend.

Victoria Reggie Kennedy said that through her experience referring a colleague to Rabson and then turning to him when her husband, Sen. Ted Kennedy, and her stepdaughter were diagnosed with cancer, she learned what she calls the four principles of “Rabsonian wisdom.”

Principle 1, she said, is “there is always hope.” Principle 2 is “always get a second opinion.” Principle 3 is “the biggest mistakes in cancer treatment are made at the beginning...so take your time and do it right.” And Principle 4 is “it’s important to go to an academic medical center,” she said.

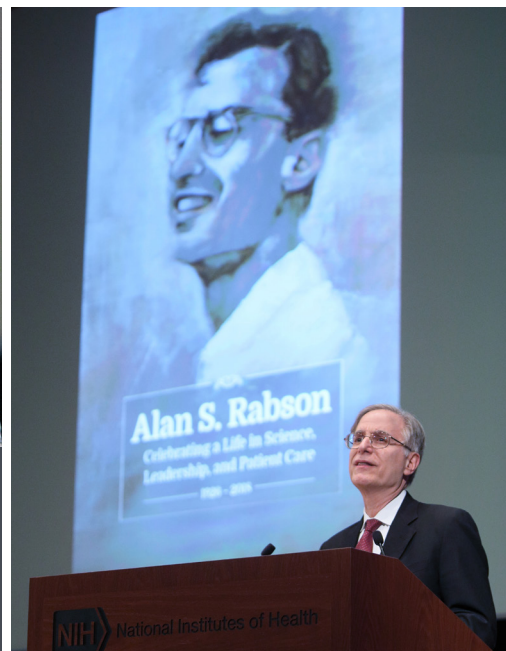


Enjoying a light moment at the tribute were (from l) Couric, Kennedy, NIH director Dr. Francis Collins and Dr. Arnold Rabson.



Dr. Louis Staudt (l) said that when Rabson learned Staudt was “not a morning person,” Rabson let him park in his driveway at 6 West Dr. for 10 years. Dr. Dinah Singer (c) also benefited from Rabson’s sympathy for parking problems at NIH; he gave her his red sticker. At right, Dr. Arnold Rabson told the crowd, “Gratitude is the best antidote for sadness.” Of his father, he said, “He lived his love, and he radiated it to the very end.”

PHOTOS: CHIA-CHI CHARLIE CHANG



Because her beloved stepdaughter followed these principles, she said, Cara remained cancer-free until her death 10 years later from an unexpected heart attack. And when Ted Kennedy was diagnosed with glioblastoma, she said Rabson “went into overdrive. We followed the principles of Rabsonian wisdom, and I believe that Teddy had a longer, better quality of life because of it.”

A Mentor and Friend

Many speakers at the event told personal stories, including how Rabson supported their careers in ways great and small.

Dr. Louis Staudt, director of NCI’s Center for Cancer Genomics, shared stories of how Rabson helped him overcome challenges in the lab but also relayed an anecdote that perhaps many NIH’ers can appreciate: When Staudt, who says he’s not a “morning person,” struggled with parking, Rabson let him park in the driveway of his on-campus residence.

Dr. Dinah Singer, director of NCI’s Division of Cancer Biology, said Rabson “was a constant in my life at NIH.” She discussed how he supported novel research and taking risks. She also remembered his generosity and responsiveness. “His phone never seemed to ring more than once when I called,” she said.

NCI deputy director Dr. Doug Lowy credited Rabson with starting his career here. Addressing many NCI staffers in the audience and on stage, he said, “We’re all [at NCI] in large part because of him.”

Continuing the Rabson Legacy

The speakers shared many ways NIH will continue to honor Rabson. There is already an NIH Director’s Award—the Alan S. Rabson Award for Clinical Care—established in 2012. Collins noted that the award is “specifically given to somebody who has gone out of their way to reach out, out of compassion and knowledge, and help those who come forward asking for assistance in a difficult time.”

NCI director Dr. Ned Sharpless said that in honor of Rabson and Kirschstein, their

lectures in his memory at academic medical centers around the country.

The last speaker at the event was Rabson’s son, Dr. Arnold Rabson. He said his father would not have wanted all the fuss about him, “but he would have understood.”

The younger Rabson said he “hit the jackpot of the parent lottery,” and detailed the many lessons he learned from his mother and father. He talked about the outstanding breadth of the scientific papers his father published, and how, in many ways, his father was his best friend and advisor. Like

• • •

“...It’s good that we don’t say goodbye completely, because the world desperately needs who Alan was, and it needs the values that his memory still enlivens in us.”

—DR. ARNOLD RABSON

• • •

home on the NIH campus will serve as an extension of the Children’s Inn at NIH. “Given Dr. Rabson’s commitment to patient care, and to families of patients, I can’t think of a better use for this space,” he said.

Dr. Michael Gottesman, NIH deputy director for intramural research, announced that the board of scientific directors is creating an Alan S. Rabson Memorial Lecture Series, “in which outstanding scientists from his beloved intramural program” will give

everyone at the event, he spoke of his father’s kindness. “He taught me to value each person I meet, and to take care that they felt better after we were together than they felt before,” he said.

He said that he can’t really say goodbye to his father. In fact, he believes “it’s good that we don’t say goodbye completely, because the world desperately needs who Alan was, and it needs the values that his memory still enlivens in us.” [B](#)

Adult Care

CONTINUED FROM PAGE 1

leveraging her expertise as a voting member of the NIH aging and adult dependent care committee. At her first committee meeting in February, she learned about a resource that she thought might help her family get the help they needed: the NIH adult dependent care resource and referral services hotline.

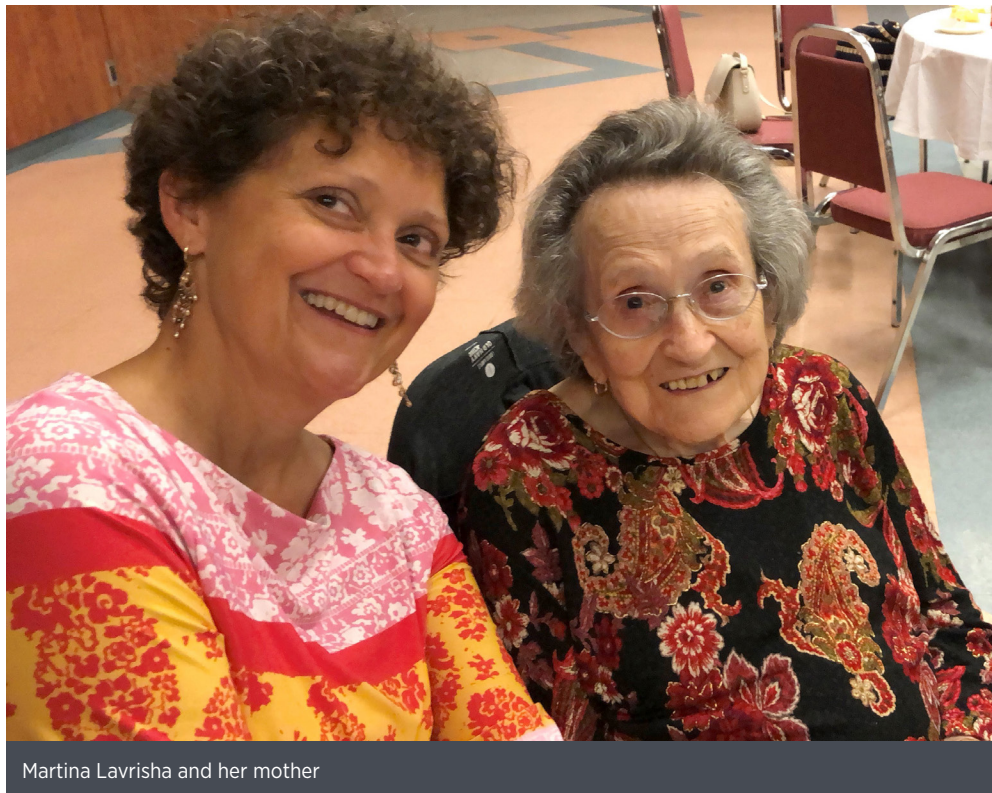
“I thought, let me try it out,” Lavrisha recalls.

An intake specialist recorded Lavrisha’s concerns, noting that her mother resides out of state. Lavrisha says she received an email from a resource specialist within 24 hours. The specialist offered Lavrisha contact information for hearing specialists in her mother’s area. She also offered tailored advice, including ways her mother’s local library services could benefit her with assistive technologies. With the new information, Lavrisha and her siblings arranged for her mother to see a hearing specialist and receive hearing aids.

“Connecting with resources empowers caregivers,” says Tonya Lee, who manages the Child & Family Program in NIH’s Office of Research Services. “Whether you are providing care within your own home or from across the country, all caregivers deserve help. My office is excited to offer this and other resources to make caregiving easier for the NIH’s dedicated employees.”

Debra Thangarajah, a management analyst at the National Institute of Nursing Research, knows how important that extra help can be in times of crisis.

Thangarajah learned about the hotline at NIH Safety, Health & Wellness Day, after which she called to learn about at-home dialysis support resources for her father. A consultant was able to review some of her options. “I felt very supported. She contacted several resources in the at-home medical care community on my behalf and provided a thorough response very quickly,” Thangarajah recalls.



Martina Lavrisha and her mother

Her father’s health deteriorated the following year and a serious medical crisis landed him in the intensive care unit.

When the social work team at the hospital told her mother that she needed to identify a rehabilitation facility for him, Thangarajah remembered how helpful the hotline had been. She called again and the same consultant was able to help her find facilities and show her how to locate credible ratings.


“She made a difficult process much easier,” Thangarajah says. “The situation was never going to be easy, but I would have been at a real loss without somebody knowledgeable to turn to.”

After her father passed away, Thangarajah called the hotline a third time to access legal and financial services in support of her mother. She was connected with a consultant who had previously been employed by the IRS and she was given information about how to compile the

appropriate tax paperwork for her mother’s situation, which eased her mother’s concerns. “It was all-hands-on-deck to help me,” Thangarajah says. “Without these resources, I would not have been able to support my parents as effectively.”

For Lavrisha, the hotline had a tangible effect on her own life and her mother’s. “She’s now able to hear what the priest is saying at church. The hearing aids have really helped,” says Lavrisha. “I think [the resource and referral services] is great because it streamlines the process of finding community resources. It’s a great service. I highly recommend it.”

“Managing the care of an aging loved one can be overwhelming,” says Lee. “Many people don’t know where to start and don’t realize the many resources that may be available to them. The resource and referral service is a great first step that allows NIH employees to describe their individual situation and receive personalized advice and referrals.”

Free to all NIH employees, trainees and contractors, this confidential service is open Monday through Friday, 8 a.m.-5 p.m. It can be reached by dialing 1-800-777-1720. 

More Adult Care Resources

NIH has contracted with Bright Horizons to offer employees access to back-up care when they need to be at work and their regular adult care is unavailable. NIH federal employees have access to in-home adult care and self-care—when they need it. Care can be provided in your home or in your loved one’s home all over the United States.

There is also the Adult_Care_Support Listserv. It allows the NIH community to share information and resources on all aspects of aging and adult and elder care.

More information about each of these services can be found at <https://www.childfamilycare.ors.nih.gov>.

NIH Scientists Combine Technologies to View the Retina in Unprecedented Detail

By combining two imaging modalities—adaptive optics and angiography—investigators at the National Eye Institute can see live neurons, epithelial cells and blood vessels deep in the eye's light-sensing retina. Resolving these tissues and cells in the outermost region of the retina in such unprecedented detail promises to transform the detection and treatment of diseases such as age-related macular degeneration, a leading cause of blindness among the elderly. The paper was published online in *Communications Biology*.



A normal retina. NEI investigators now can see live neurons, epithelial cells and blood vessels deep in the eye's light-sensing retina.

IMAGE: NEI

"For studying diseases, there's no substitute for watching live cells interact," said Dr. Johnny Tam, Stadtman investigator in NEI's clinical and translational imaging unit and lead author of the paper. "However, conventional technologies are limited in their ability to show such detail."

Biopsied and postmortem tissues are commonly used to study disease at the cellular level, but they are less than ideal for watching subtle changes that occur as a disease progresses over time. Technologies for noninvasively imaging retinal tissues are hampered by distortions to light as it passes through the cornea, lens and the gel-like vitreous in the center of the eye.

Tam and his team turned to adaptive optics to address this distortion problem. The technique improves the resolution of optical systems by using deformable mirrors and computer-driven algorithms to compensate for light distortions. Widely utilized in large ground-based space telescopes to correct distortions to light traveling through the atmosphere, adaptive optics began being used in ophthalmology in the mid-1990s.

The NEI researchers combined adaptive optics with indocyanine green angiography, an imaging technique commonly used in eye clinics that uses an injectable dye and cameras to show vessel structures and the movement of fluid within those structures.

NIH Scientists Illuminate Causes of Hepatitis B Virus-Associated Acute Liver Failure

NIH scientists and their collaborators found that hepatitis B virus (HBV)-associated acute liver failure (ALF)—a rare condition that can turn fatal within days without liver transplantation—results from an uncommon encounter between a highly mutated HBV variant and an unusual immune response in the patient's liver that is mainly sustained by antibody-producing B cells.

By applying state-of-the-art technologies, the researchers discovered important new mechanisms about the disease by examining liver samples taken from four patients who developed HBV-ALF. HBV-ALF is one of the most dramatic clinical syndromes in medicine, according to the research team, but so rare that samples of this type are seldom available for study.

Scientists from NIAID led the project with colleagues from two Italian universities. Their study is published in *Proceedings of the National Academy of Sciences*.

The investigators used advanced gene sequencing and tissue and cell analysis technologies to determine specific molecular events occurring at the

site where HBV replicates and damages liver tissue. They identified processes that are distinct to HBV-ALF cases compared with cases of classic acute HBV infection. Some of these unique events involve a highly mutated virus antigen, the HBV core antigen. The scientists believe that this antigen plays a key role in disease development because it interacts with specific antibodies that are—unusually, they say—already present in these patients.

Due to ethical reasons in obtaining liver tissues from patients with classic acute HBV, for their comparison study the scientists used archived liver specimens from two chimpanzees with acute HBV that had been studied many years earlier. They found the mechanism of acute HBV disease to be completely different from that of ALF.

More Adults, Children Use Yoga, Meditation

Over the past 5 years, more Americans of all ages are rolling out their yoga mats and meditating. A large nationally representative survey shows that the number of American adults and children using yoga and meditation has significantly increased over previous years and that use of chiropractic care has increased modestly for adults and held steady for children.

The complementary health questionnaire was developed by the National Center for Complementary and Integrative Health and by the Centers for Disease Control and Prevention's National Center for Health Statistics. The complementary health questionnaire is administered every 5 years as part of the National Health Interview Survey (NHIS), an annual study in which thousands of Americans are interviewed about their health- and illness-related experiences. To identify trends in Americans' use of specific practices, 2017 survey data were compared with a version of the survey fielded in 2012.



The number of American adults and children using yoga and meditation has significantly increased over previous years.

IMAGE: FATCAMERA/GETTY

"The 2017 NHIS survey is the most current and reliable source of information on the use of specific complementary health approaches by U.S. adults and children," said Dr.

David Shurtleff, acting director of NCCIH. "The survey data suggest that more people are turning to mind and body approaches than ever before, and the research we support at NCCIH is helping to determine the impact of those approaches on health."

Survey highlights for adults:

- Yoga was the most commonly used complementary health approach among U.S. adults in 2012 (9.5 percent) and 2017 (14.3 percent). The use of meditation increased more than threefold from 4.1 percent in 2012 to 14.2 percent in 2017.

- The use of chiropractors increased from 9.1 percent in 2012 to 10.3 percent in 2017.

- In 2017, women were more likely to use yoga, meditation and chiropractors in the past 12 months than men.

- Non-Hispanic white adults were more likely to use yoga, meditation and chiropractors than Hispanic and non-Hispanic black adults.

Tumminia Named NEI Deputy Director

Dr. Santa Tumminia was appointed deputy director of the National Eye Institute on Nov. 12.

“Dr. Tumminia brings to the deputy post a deep understanding of vision research and a wealth of experience managing science programs at the national level,” said NEI director Dr. Paul Sieving. “The NEI has already benefitted greatly from her steadfast dedication to supporting the highest quality science.”

Tumminia earned her Ph.D. in biology at Rensselaer



Dr. Santa Tumminia

Polytechnic Institute. In 1991, she joined NEI as a senior staff fellow in the Laboratory of Mechanisms of Ocular Diseases. She then spent 5 years with the Foundation Fighting Blindness, the largest private funding source for retinal degeneration research, where she oversaw a \$12 million vision research grant portfolio.

After returning to NIH in 2003, she served as a special assistant to the NEI director and was promoted in 2013 to associate director for science strategic initiatives and programs. She provides ongoing oversight of key NEI biomedical initiatives such as eyeGENE, a pioneering public-private genomic medicine initiative that ties advances in ophthalmic disease gene identification and disease phenotype to clinical care.

A long-time mentor to NIH staff in administrative, scientific and clinical careers, Tumminia was honored with an NIH Director's Award for mentorship in 2018. She also served on numerous trans-NIH committees, including the NIH-wide strategic plan working group.

risk. Her early work helped characterize the role of vegetables and fruits, individual carotenoids, folate and one-carbon metabolism in cancer etiology. In addition, she has conducted a number of breast cancer studies with emphasis on anthropometry, diet and endogenous hormones and growth factors.

For example, she helped design and direct a large, population-based case-control study of breast cancer in Asian-American women to elucidate the modifiable exposures, related to lifestyle and/or environment, that explained the 6-fold difference in breast cancer incidence between Asia and the West. More recently, she collaboratively developed an international pooled analysis of circulating vitamin D concentrations in relation to risk of colorectal and breast cancer.

Ziegler has applied her training in chemistry and biochemistry to the development of new and improved methods for measuring various hormones and nutrients in epidemiologic studies. Recently, she played a critical role in the successful development of a sensitive assay for assessment of estrogen metabolites and a validated assay for concurrent measurement of the major steroid hormones.

Ziegler is a fellow of the American Society for Nutrition and helped establish its nutritional epidemiology research interest section. She currently serves on the editorial boards of the *Journal of the National Cancer Institute* and the *Nutrition Action Healthletter* and previously served on the editorial boards of the *American Journal of Clinical Nutrition*, the *Journal of Nutrition* and *Cancer Epidemiology, Biomarkers, and Prevention*. She received an NIH Merit Award for her research on the role of vegetables, fruits and micronutrients in the etiology of a variety of cancers.



After nearly 40 years at NCI, Dr. Regina G. Ziegler retired recently.

Ziegler Retires from NCI

Dr. Regina G. Ziegler retired in October after nearly 40 years of service to the National Cancer Institute. She is widely recognized for her expertise in nutritional epidemiology, incorporating circulating biomarkers into epidemiologic studies and facilitating the development of assays needed by cancer epidemiologists.

Ziegler received a B.A. from Swarthmore College, a Ph.D. in biochemistry from the University of California at Berkeley and an M.P.H. from Harvard School of Public Health. After graduate school, she taught international nutrition and global food resources courses at Yale, Harvard and Tufts universities. She joined NCI in 1979, was tenured in 1987, and has served most recently as a senior investigator in the Epidemiology and Biostatistics Program.

Throughout her career, Ziegler's research has focused broadly on dietary, nutritional, anthropometric and hormonal determinants of cancer



Dr. Griffin Rodgers (r) with Dr. M. Roy Wilson, immediate past chair of the Association of American Medical Colleges, at the association's annual awards ceremony

NIDDK Director Honored for Commitment to Health Equity

Dr. Griffin Rodgers, director of the National Institute of Diabetes and Digestive and Kidney Diseases, received the 2018 Herbert W. Nickens Award in November from the Association of American Medical Colleges (AAMC).

Named in honor of the late Dr. Herbert W. Nickens, founder and past vice president of AAMC's diversity policy and programs unit, the award was established by the AAMC to continue advancing Nickens' concerns about the educational, societal and health care needs of minorities. Rodgers received the honor for his record of encouraging health equity, while also creating opportunities for underrepresented minorities within the biomedical workforce.

Among his other accomplishments, Rodgers collaborated in developing the first FDA-approved treatment for sickle cell disease. He also hosts NIDDK's *Healthy Moments*, a radio program airing health messages on more than 50 stations across the country. Now in its 10th year, *Healthy Moments* reaches more than 60 million people annually.

“Everyone deserves access to quality medical care and the opportunity to live a long, healthy life,” Rodgers said. “Health equity doesn't just apply to people with diseases. It's also important to have diversity in health care providers and researchers. I accept this honor on behalf of the entire NIDDK family, as the institute joins me in working toward health equity for all.”—January Payne

NEI's Datiles Retires

Senior investigator and medical officer Dr. Manuel “Manny” Datiles III of NEI retired in September. Institute staff recently gathered to celebrate his career and wish him well in his next phase of life.

“It is not what you have that counts; it is what you do with what you have that counts!” said Datiles.

He first came to NEI in 1979 as a research fellow in the Laboratory of Vision Research after his



Dr. Manuel Datiles (fourth from l) with (from l) his sister Therese Datiles, daughter Jeanne Michelle Datiles, wife Jacqueline Datiles, NEI director Dr. Paul Sieving and Dr. Rachel Bishop, chief of the NEI consult services section

part of the institute's consult services section, he established cataract and corneal surgery at NEI and performed hundreds of eye surgeries under various NIH protocols.

In collaboration with NASA physicist Rafat Ansari, Datiles co-developed a special clinical device based on a quasi-elastic light-scattering technique and used it to show that oxidation-caused loss of a lens protein, alpha-crystallin, a molecular chaperone, leads to the formation of human age-related cataracts. This finding will help hasten the development of non-surgical anti-cataract drug treatment.

ophthalmology training. In the lab, he worked with the late Dr. Jin Kinoshita to demonstrate that aldose reductase inhibitor (ARI) drugs could prevent cataracts in animal models. ARIs are now used to prevent cataracts in diabetic dogs. He also co-discovered a novel lens protein in guinea pigs, the zeta-crystallin, with NEI protein chemist Dr. Sam Zigler.

He left for eye surgical training at Johns Hopkins Hospital and returned to NEI to become the primary cornea and lens clinical investigator at the institute. In his nearly 40-year career at NEI, he worked to find the causes and find possible cures for blinding cataracts.

As NEI's anterior segment surgeon and later as

Datiles also helped care for hundreds of NCI and NHLBI cancer patients who received stem cell transplants. He led a clinical trial of blood serum eye drops for patients who developed severe dry eye as a consequence of therapy.

Datiles published more than 100 peer-reviewed papers and received awards from the American Academy of Ophthalmology, Johns Hopkins University, NEI, NIH, HHS and the Catholic Archdiocese of Washington, D.C.

Datiles plans to continue working at NEI as a special volunteer and NIH IRB member, teach at Johns Hopkins School of Medicine, where he is an adjunct associate professor, and dedicate more time to church, family, music and the arts.

NEI's Hikosaka Receives Neuroscience Prize

Dr. Okihide Hikosaka, senior investigator in the Laboratory of Sensorimotor Research at the National Eye Institute, is a recipient of the 2018 Gruber Prize in Neuroscience. The prize is awarded



Dr. Okihide Hikosaka
PHOTO: LESLEY EARL

each year by the Gruber Foundation to a scientist or scientists whose work has significantly impacted the neuroscience field. The prize was presented at a ceremony on Nov. 4 during the annual meeting of the Society for Neuroscience.

Since first arriving at NIH in 1979 as a postdoctoral fellow, Hikosaka has studied how evolutionarily ancient regions of

the brain known as the basal ganglia process visual information. His research has revealed how the basal ganglia control eye movements (saccades). More recently, his work has focused on how neuronal pathways in the basal ganglia encode long-term memories about emotional values of visual objects.

Hikosaka shares this year's prize with Dr. Ann Graybiel, Massachusetts Institute of Technology, and Dr. Wolfram Schultz, University of Cambridge, who have also made seminal discoveries about the structure and function of the basal ganglia. **R**

Former NIH Senior Advisor, IC Director Vaitukaitis Remembered



Dr. Judith Vaitukaitis
PHOTO: ERNIE BRANSON

Dr. Judith Vaitukaitis, 78, an accomplished reproductive neuroendocrinologist and clinical researcher, died Oct. 19 at Hartford Hospital in Connecticut.

She retired from NIH in 2005 as a senior advisor to the NIH director on scientific infrastructure and resources. Prior to her appointment to this position, she served as director of the former National Center for Research Resources from 1993 to 2005, where she also held positions as the center's deputy director and director of the General Clinical Research Center (GCRC) program.

Prior to joining NCRR, Vaitukaitis was professor of medicine at Boston University School of Medicine (BUSM), where she also directed the GCRC and headed the section on endocrinology and metabolism at Boston City Hospital.

Vaitukaitis began her tenure at NIH in 1970 as a postdoctoral researcher, studying human chorionic gonadotropin (hCG), first at NCI and then as a senior investigator in NICHID's Reproduction Research Branch. There, she and colleagues were interested in accurately detecting elevated hCG levels to find cancer and recognized that because hCG is secreted during pregnancy as well, a sensitive hCG assay might also detect early-stage pregnancy. They published a landmark paper in 1972 that described the assay; the first home pregnancy tests, marketed to consumers in 1978, were based on their method.

Vaitukaitis received her B.S. in chemistry and biology from Tufts University in 1962 and earned her M.D. in 1966 from BUSM. She completed her residency at Cornell Medical Services, Bellevue Memorial Hospital, New York City.

Born in Hartford, she grew up in nearby Windsor Locks. She was an avid fan of the Boston Red Sox, Boston Celtics and the New York Giants. In her spare time, she enjoyed golf with her friends.

VOLUNTEERS

HIV Vaccine Study Needs Subjects

Vaccine Research Center researchers seek persons 18-60 years old who are living with HIV for a research study. The study evaluates an investigational product targeting the HIV virus to determine if it is safe and can generate an immune response. Compensation is provided. For more information, call 1-866-833-5433 or email vaccines@nih.gov. Read more online at <https://go.usa.gov/xQGp2>. Se habla español.

NHLBI Study Recruits Volunteers

NHLBI invites volunteers ages 18-80 of African descent with or without sickle cell trait and patients with sickle cell disease to participate in a one-time visit research study. Volunteers will provide blood samples that will be used to look for a link between the PKLR gene and pyruvate kinase protein. The PKLR gene is active in the liver and in the red blood cells and helps to create protein called pyruvate kinase that is essential in normal functioning of the red blood cells. Compensation is provided. For more information about study 18-H-0146 call 1-866-444-2214 (TTY 1-866-411-1010) or visit <https://go.usa.gov/xP8HX>.



The Safra Family Lodge updated its interior—the first significant improvements since 2005. Above are a guest room, the dining room and a common area lounge.

ADDING LIGHT, COLOR, CALM
Safra Family Lodge Gets Makeover

BY CARLA GARNETT

The Edmond J. Safra Family Lodge recently underwent its first substantial redesign since opening in spring 2005. Strategically located on campus just steps from the hospital, near the intersection of Center and Convent Drives, the lodge offers temporary residence for adults participating in Clinical Center research and their families.

The Foundation for the NIH, which partnered with the Edmond J. Safra Philanthropic Foundation to underwrite the project, held an event on Oct. 24 to showcase the new spaces for lodge supporters. NIH director Dr. Francis Collins, Clinical Center Chief Operating Officer Pius Aiyelawo, FNIH president and executive director Dr. Maria Freire and FNIH Vice President of Advancement Robert Balthaser offered remarks. Brief tours followed a short presentation by designers.

According to Balthaser, scheduling for the makeover was based on a lifecycle plan developed for the lodge when it was first built. After 13 years in constant use, the 34 guest rooms and public spaces were showing signs of wear. When word of the need reached philanthropist and FNIH board member Lily Safra, she advised FNIH, in partnership with NIH, to organize a remodeling effort and engage a design team.

“The aim for the [update] was to promote serenity and calm through the use of color and

lighting,” Balthaser explained. “We wanted it to be transformative and I think the designers accomplished that.”

Improvements included new interior paint, upgraded lighting as well as fresh upholstery, wall coverings, carpet and draperies. Refurbishments took fewer than 4 months to complete and were accomplished with a nearly full house of residents.

In fact, input from lodge guests was taken into consideration alongside the project team’s recommendations.

Lodge staff engage families as they leave, Balthaser noted. “We’re always receiving feedback. That’s how we learned we needed to make the lounge a little more modern.”

The third floor common area—a hangout space for younger family members—got a new audio system with built-in earbud and headphone receiver jacks to help minimize any noise disruption for guests using that room. That was added to the widescreen television, PlayStation video game system and new Foomball table. Another popular refuge, the library, received a new conference-style table as well as new sconces. Guest rooms were spruced up with adjustable lighting and USB electrical outlets, in addition to custom window treatments.

Each year, the lodge provides a temporary home for hundreds of people who are seriously ill and their loved ones. In 2017, more than 9,200 room nights were reserved for patients and caregivers. Guests stay on average about 7 days. The stay can be longer, depending on research requirements. Since opening in 2005, the lodge has welcomed close to 140,000 residents.

In all, the ultimate goal of the restoration was to offer a sense of hope and help ease the way for patients and families experiencing a difficult time in their lives.

“As doctors, nurses and any number of other caretakers will attest, a patient’s home life and non-treatment times are all crucial considerations,” Balthaser concluded. “We know that the lodge is an essential part of the clinical formula. It’s very important that we remember that the lodge is home away from home for its residents and our top priority is to provide comfort and a sense of calmness to the patients and their families who are making vital contributions to our world’s health.”



Upgrades to the lodge included new interior paint, improved lighting as well as fresh upholstery, as seen here in a downstairs nook.

PHOTOS: FOUNDATION FOR THE NIH



ABOVE: NIH director Dr. Francis Collins (l) and CC Chief Operating Officer Pius Aiyelawo (c) applaud the lodge’s new look at a recent event for supporters. At right, a view of the new table and other furnishings in the redone lodge library