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## NEWS AND NOTES 1994, VOL.5, NO.13

The Rockefeller University

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## Surgeon donates \$1.2 million to RU for cancer research

The Rockefeller University has received the proceeds of a \$1.2 million gift made by the late Bernard S. Davison, a Tennessee surgeon, to support cancer research at the university. The university is also receiving an additional \$250,000 under the terms of Davison's will.

In return for the gift, the university named Professor Hidesaburo Hanafusa's laboratory the Jeanette Warren Davison laboratory, after Davison's first wife, who died of ovarian cancer. The university has also named Davison a founder in the university's Founders Society, which commemorates donors of large gifts with a plaque in the foyer of Caspary Auditorium.

"The Jeanette Warren Davison Fund will promote basic research in the biology of cancer. There continues to be an urgent need for a deeper understanding of the mechanisms driving cells to form malignant tumors," said President Torsten Wiesel. "Bernard Davison

was a friend of the university for more than a decade, and we are deeply grateful that he selected the Rockefeller University to be the recipient of such a generous gift."

Davison pledged the funds in 1991 by establishing a special type of charitable trust arrangement known as a planned gift. In this type of gift, the donor receives lifetime income from cash or assets that are held and managed by a trustee, and may claim an income tax charitable deduction in the year the trust is established. At the death of the donor, the trustee distributes the gift to the designated recipient.

Davison stipulated that his gift be used for "medical and scientific research to discover and understand the mechanisms of the causation, transmission, prevention, treatment, and cure of neoplastic disease, with particular emphasis in the fields of biochemistry, cellular

See *Gift*, page 2

## Mirksy Christmas lectures to focus on form and function in the brain

A select group of students from 80 high schools in the tri-state area will come to Rockefeller Tues., Dec. 27 and Wed., Dec. 28 for the 35th annual Alfred E. Mirksy Christmas Lectures on Science.

Professor Mary Elizabeth Hatten will speak in a series entitled "Form and Function: Building the Brain."

Hatten will discuss the complex processes sculpting the vertebrate

brain during embryological development and after birth. Drawing on her own research, Hatten will examine how the brain's billions of nerve cells derive their identities,

See *Hatten*, page 2



Professor Mary Elizabeth Hatten will give the Mirksy Christmas lectures this year.

## Rockefeller alumnus to give Friedheim lecture on trypanosomes



Biochemist Paul Englund, who will lecture today (Dec. 16), received his Ph.D. from RU in 1966.

Paul T. Englund, professor in the Department of Biological Chemistry at the Johns Hopkins University School of Medicine, will give this year's Ernst A. H. Friedheim Memorial Lecture today (Dec. 16). The talk is entitled "Replication of the Mitochondrial DNA Network of Trypanosomes."

Englund studies the biochemistry and molecular biology of trypanosomes, protozoan parasites that are responsible for major tropical diseases. Englund is currently investigating replication of kinetoplast DNA (kDNA), the parasite's unusual mitochondrial DNA. In these studies, Englund is examining the enzymes involved in replication, the structure of replication intermediates, and changes in network structure that occur during replication. He is also exploring the glycosyl phosphatidylinositol (GPI) anchor of the parasite's variant surface glycoprotein.

"Elegance, innovation, and diligence have been the hallmarks of Paul's work," said Professor George A. M. Cross, who introduces Englund today. "He has made major contributions to two distinct areas of trypanosome cell biology, and has established high standards for parasitology research and teaching."

A graduate of Hamilton College (B.A., 1960), Englund received a Ph.D. from Rockefeller in 1966 after working in Lyman Craig's lab-

oratory. In 1966, he went to Stanford as an N.I.H. Postdoctoral Fellow with Arthur Kornberg. After completing his fellowship in 1968, Englund began his affiliation with the Department of Biological Chemistry (formerly Physiological Chemistry) of the Johns Hopkins University School of Medicine as an assistant professor. In 1973, he was promoted to associate professor, and in 1980, professor.

Englund has been the recipient of many honors, including the Faculty Research Award of the American Cancer Society, a Senior International Fellowship from the Fogarty International Center, and the Burroughs-Wellcome Scholar Award in Molecular Parasitology. He is a member of the Tropical Medicine and Parasitology Study

See *Friedheim*, page 2

## Neurobiologist to give first Friday lecture of 1995

In the first Friday lecture of 1995, Eric R. Kandel, university professor at the College of Physicians and Surgeons of Columbia University, will speak on "Genes, Synapses and Long-Term Memory," Fri., Jan. 6.

Kandel studies the molecular biological basis of memory and learning. He has examined implicit forms of memory storage in gill withdrawal of the sea snail *Aplysia* and explicit forms of storage that require the hippocampus in genetically modified mice. In both cases he has focused on the molecular nature of the switch whereby short-term memory is converted to a long-term form.

"Eric is a leading figure in the study of learning," said Professor Victor Wilson, who will introduce Kandel. "He has performed fundamental work on its molecular basis in vertebrates and invertebrates."

Kandel received an M.D. from New York University School of Medicine in 1956. From 1960 to

See *Kandel*, page 2

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2 Origami tree

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3 The culture of dying

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4 Work in progress

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## Hatten to give Mirsky lectures to high-school students on brain

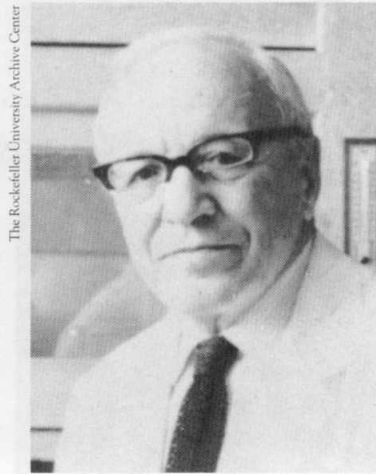
(continued from page 1)

and how its complex architecture becomes organized.

The first lecture, "Specifying the Brain's Building Blocks," explores the question of what determines the identity of a neuron: Is it heredity or environment? Hatten's studies of the weaver mouse have shown that signals from neighboring cells tell each neuron how and when to progress to the next stage of development. In the second lecture, "Organizing the Brain's Architecture," Hatten will discuss her use of video technology to watch living nerve cells travel along cellular "monorails" composed of glial cells to their final positions in the brain.

Hatten received a Ph.D. from Princeton University in 1975. From 1975 to 1978, she was a post-doctoral investigator at Harvard Medical School, then moved to the Department of Pharmacology at New York University School of Medicine. In 1987, Hatten became an associate professor of pathology in the Center for Neurobiology and Behavior at Columbia University's College of Physicians and Surgeons, and in 1990, professor. She came to Rockefeller as professor and head of lab in 1992.

The Mirsky Christmas lecture series began at the Rockefeller University in 1959 when Alfred E. Mirsky, a biochemist who was also the university's librarian, organized a series of Christmas lectures for young people. Mirsky was inspired by the scientific lectures inaugurat-



The Rockefeller University Archive Center

**Alfred E. Mirsky began a Christmas lecture series in 1959. After his death in 1974, his widow provided an endowment for its continuation.**

ed by Michael Faraday in 1827, which were held at Christmastime at the Royal Institution of Great Britain. Faraday was convinced that popular lectures could give young people an appreciation of the power and beauty of science.

When Mirsky died in 1974 the series was renamed in his honor, and an endowment to ensure its continuation was provided by his widow, Sonya Wohl Mirsky, currently university librarian emerita.

Tickets are required for entrance to the lectures, which begin at 10:00 A.M. each day. For more information, contact the Office of Public Affairs, x8967.

## Kandel to lecture on Jan. 6

(continued from page 1)

1965, he was affiliated with the Massachusetts Mental Health Center at the Harvard Medical School, first as an intern, then as a staff psychiatrist and director of the Laboratory of Neurophysiology. He returned to NYU in 1965 as an associate professor, and in 1968 became professor and head of the Department of Neurobiology and Behavior at the Public Health Research Institute. In 1974, Kandel went to the College of Physicians and Surgeons of Columbia University as founding director of the Center for Neurobiology and Behavior and professor in the Department of Physiology and Psychiatry. He was named University Professor in 1983, and became a senior investigator of the Howard Hughes Medical Institute in 1984. In 1992, Kandel became professor in the Department of Biochemistry and Molecular Biophysics.

Kandel has received many hon-

ors and awards, including the National Medal of Science, the Albert Lasker Basic Medical Research Award, the Gairdner International Award for Outstanding Achievement in Medical Science, and the Harvey Prize of the Technion in Israel.

The lecture will be held at 3:45 and preceded by tea at 3:15 P.M. in Abby lounge. All are welcome.

## Gift

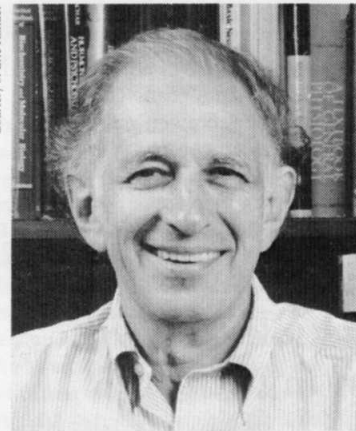
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biology, molecular biology, immunology, and similar, related scientific fields."

Davison received medical training at New York University and Bellevue Hospital in the 1930s. His first wife graduated from the Bellevue School of Nursing in 1936. Until her death in 1972, she worked as a nurse and a teacher of nurses and devoted her energies to the needy, the ill, and the underprivileged.

In setting up the Rockefeller fund that bears her name, Davison said it was "extraordinarily fitting that our memory of her as a dedicated member of the nursing profession be linked with the significant efforts now being made to eliminate the tragedy of the disease that took her life."

After retiring from medical practice, Davison undertook an extensive national tour of cancer research facilities. On the basis of his research, he made the planned gift to Rockefeller and gave an equal amount to Memorial Sloan-Kettering Cancer Center.



Courtesy of Eric Kandel

**Eric Kandel will lecture on genes, synapses, and long-term memory Fri., Jan. 6.**

## Friedheim

(continued from page 1)

Section of the N.I.H. and chairman of the Molecular Parasitology Advisory Committee of the Burroughs-Wellcome Fund.

This annual lecture series on a subject related to the therapy and prevention of parasitic diseases was endowed in honor of Ernst A. H. Friedheim in 1989. Friedheim, born in Zurich in 1899, was a distinguished scientist whose work over half a century furthered the development of new and better treatments for parasitic diseases. Friedheim was a visiting professor at Rockefeller from 1977 until his death in 1989.

The lecture will be held in Caspary Auditorium at 3:45 P.M. and preceded by tea at 3:15 P.M. in Abby lounge. All are welcome.

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**Peter Cassidy, recycling coordinator, decorates a Christmas tree with origami ornaments made of recycled paper. For this tree, Cassidy, who has sold gold leaf ornaments to Bloomingdale's, folded multiple sheets of paper into single ornaments in a type of origami known as Kusudama, or "medicine ball." The tree will be on display in Founder's Hall next week.**

# Doctor advocates better care of dying to prevent pain, suicide

Kathleen Foley, chief of Memorial Sloan-Kettering Cancer Center's Pain Service, spoke at the Zanvil A. Cohn Forum on Health Affairs Tues., Nov. 29. Her topic was "Transforming the Culture of Dying in America." What follows is a synopsis of her remarks, prepared by News&Notes.

My involvement with the care of the dying comes from caring for large numbers of patients with advanced disease. They have significant pain and often request physician-assisted suicide or euthanasia. My interest in this topic has been virtually forced upon me. It is a tough issue. I think I know where I stand; all physicians should know where they stand. But as a society, we need to address how we should care for the dying, differently or better.

## Many doctors misunderstand standards of care for the dying

At present, what is legal and moral in American medical care is withholding or withdrawing treatment to let a patient die, and administering opioids or sedative drugs to relieve pain and suffering in a dying patient. These are now well-established guidelines, yet surveys demonstrate enormous confusion in the medical community about them. This is critical; it means that when patients have significant pain, they are often under-medicated because physicians somehow feel that they are aiding or abetting patients in their death.

In one survey, doctors and nurses and house officers were asked: Is allowing patients to die by foregoing or stopping treatment ethically different than assisting suicide? Many recognized the difference, but overall, physicians didn't—and don't—see the ethical difference. And while all competent patients have the right to refuse life support—this is at the heart of patient autonomy—14 percent of medical attending physicians do not agree that patients have this right.

But if the medical establishment lacks knowledge about the moral principles that underlie the care of patients with advanced disease, there is clearly confusion in the public as well, in part because public debate has been framed by people like Jack Kevorkian.

## Causing suicide among those with psychiatric illness

Kevorkian has assisted 21 patients in dying; most died of carbon monoxide poisoning, three of

the suicide machine. Pain, psychological distress, and existential suffering were the reasons they gave.

I had the opportunity to learn about two of these people. One was a physician who was significantly depressed when he sought out Dr. Kevorkian. A second patient, a woman, also had profound psychiatric disease. Should we kill patients who have psychiatric illness of a profound nature? Have we failed so much in the medical establishment that we can't provide care?

*Final Exit* was on the best seller list of *The New York Times* for several months. The *New England Journal of Medicine* published an article that demonstrated that the number of psychiatric patients who were asphyxiated by a plastic bag over the head—a procedure well described in the book—rose in the year after its publication. Those who were not necessarily terminally ill were moved to use the book's approach.

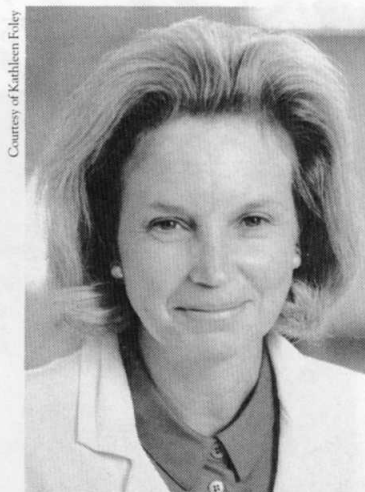
## The Dutch way veers toward the slippery slope

We are not Holland, and what happens there with regard to euthanasia is not necessarily a model for the U.S. In Holland in the late 70s, a physician who aided a patient in dying was jailed. The medical community was outraged, and so the government looked at the care of the dying and developed criteria for euthanasia.

Of the Dutch physicians who were euthanizing patients, 1,900 were general practitioners doing it at patients' homes. They had many different criteria. One was a durable wish for death in the part of the patient, but the wish was sometimes durable for only four or six hours, not days or weeks. Dutch doctors said a patient's request had to be well informed and well considered. But if the physician doesn't know how to manage the patient's pain, what has the patient considered?

Similarly, doctors said they asked themselves if the patient had unacceptable suffering without alternative relief. I have often seen patients whose pain and depression could readily be treated. But their physicians called their suffering unacceptable because they were unable to treat it because they didn't have appropriate knowledge. So, the question here is, what do the physicians in Holland know?

With these criteria, what has happened in the Netherlands? The most recent follow-up report suggests that there are life-terminating acts without patients' explicit



Kathleen Foley spoke on the need to transform the culture of dying at the Cohn Forum Nov. 29.

requests. The incompetent are being euthanized. This is of great concern, in Holland and elsewhere: Is it the beginning of the slippery slope?

And in the Netherlands, there are 129,000 deaths per year, in contrast to our 2.2 million.

## Hospices provide what hospitals don't: palliative care

Among American professionals, the debate centers on who will care for the dying, where will they die, and how? At the heart of the matter is hospitals, which were created for acute care, not to care for the dying. A doctor cannot even admit a patient to the hospital for dying—only for pneumonia or a urinary tract infection, and the patient must be treated within 24 hours or the hospital won't get paid. The system encourages acute medical care and discourages medical care of the dying. Yet in many countries around the world, palliative care has arisen as a true medical discipline.

The rise and success of the American hospice movement, with 10 percent of patients dying in 2,000 hospices now, is an attempt to deal with the lack of the care of the dying in hospitals.

## Medical practitioners need to learn more about death

How do patients die? Are they awake? Able to converse? One small study found 68 patients who were awake up to six hours before death, 36 up to one hour, 29 up to fifteen minutes. These are times when they could be talking to family. But who was with them, closing the eyes of the dead? In our own country and in our own hospitals,

we don't know. We, as medical practitioners, don't understand the impact of death on survivors, nor have we done good enough bereavement studies as to how that issue should influence our care of the dying.

## Relieving pain, conferring dignity

In Timothy Quill's article in the *New England Journal of Medicine*, he told the story of his patient Diane, and how he gave her a lethal dose of medication as a last resort. Sadly, there was no discussion of the fact that Dr. Quill had taken care of this patient for a long time. There were issues of transference and countertransference. Diane had had cervical cancer, suffered alcoholism, acute leukemia, and severe depression. She had refused treatment and was afraid of dying; she desperately wanted to not suffer.

I raised this last issue with Dr. Quill. He was her most trusted physician, and yet he was unable to assure her that he would treat her pain and sedate her if he needed to and to try to protect her from having to die alone as she did. Sadly, for Dr. Quill, he has convinced the group in Oregon to put into the law that if a physician is at the bedside of a patient who dies with physician assistance, that should not be a legal constraint to the physician. Quill was released from grand jury in New York State because he was not present at Diane's death, and yet he has enormous remorse for not having been there to care for her.

I have found very useful a wonderful quote from ethicist Daniel Callahan's book, *The Troubled Dream of Life*:

"There is a peculiar irony in the contention that in cases of severe suffering, our human dignity can only be achieved by having another person kill us or by providing us with the means to kill ourselves. It is a way of saying that we cannot achieve dignity on our own in some circumstances but must turn to the community to make it possible—to at least to one other person to make it physically possible, and to society more generally to make it legally possible. Yet it is a strange kind of community that would require consensual homicide to realize its members' individual dignity."

This is a way of thinking about these issues for those of us who care for dying patients, a way of thinking about improving their care while preserving our moral integrity and their personal autonomy.

## Potpourri

### Tri-Institutional Noon Recital

The Barry Harris Jazz Sextet will perform the works of George Gershwin, Rogers and Hart, Vernon Duke, Jerome Kern, Harris, Duke Ellington, and Thelonious Monk at the Tri-Institutional Noon Recital today (Dec. 16). The concert, to be held in Caspary Auditorium at noon, is free. All are welcome.

### Friday films

*Vidas Secas* (Brazil, 1963), directed by Nelson Pereira dos Santos, will be shown today (Dec. 16). The film is in Portuguese with English subtitles. *Full Metal Jacket* (U.S., 1987), directed by Stanley Kubrick, will be shown Fri., Jan. 6. Both films are free and will be shown in Caspary Auditorium at 8:00 P.M. All are welcome.

### Statistical Physics Seminar

Sara A. Solla of AT&T Bell Labs in New Jersey will speak on "Incremental Learning in Multilayer Neural Networks" at the Statistical Physics Seminar Mon., Dec. 19 at 2:00 P.M. in the B level conference room in Smith Hall Annex.

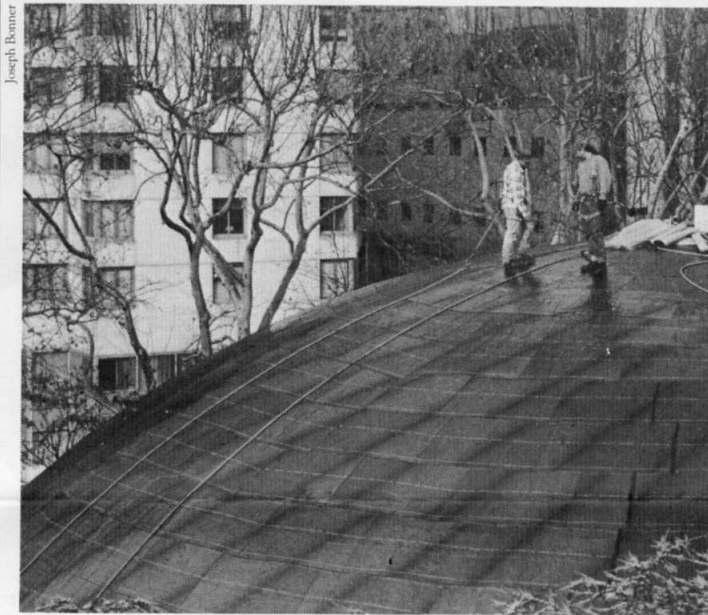
### Yuletide discount

In appreciation of the university community's patronage, the Abby Aldrich Rockefeller dining room is offering a 20 percent discount to parties of four or more during the week of Dec. 19. For reservations call x8894.

### Holiday festivity

Everyone on campus is invited to join the annual holiday party Thurs., Dec. 22 from 2:30 P.M. to 4:30 P.M. in Tower Café. To accommodate the celebration, the cafeteria will close for lunch; full breakfast service will be available from 7:30 A.M. to 9:30 A.M.

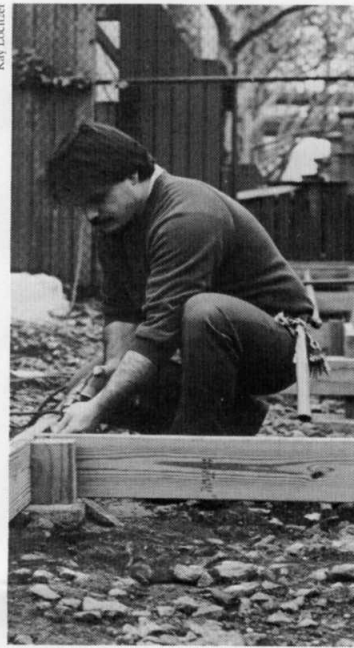
## Work in progress



Joseph Bonner

On top of Caspary Dome, a Nicholson and Galloway work crew finishes the waterproofing. Next comes a layer of insulation and then the exterior surface. Work will continue throughout the winter.

Ken Loebner



RU carpenter Andrew Gallina constructs the foundation for a new ramp to the Infant-Toddler Center, located on the ground floor of Sophie Fricke Hall. The ramp runs between the tennis court and York Avenue.

### Grant deadlines

All applications due between Mon., Dec. 26 and Mon., Jan. 2 should be brought into the Office of Sponsored Programs by 3:00 P.M. Thurs., Dec. 22 for review and signature. Voice mail messages left at x8054 during the holiday week will be promptly answered.

### New Year's Eve party

Anyone who will be on campus on New Year's Eve is invited to a party at the Faculty and Students Club Sat., Dec. 31. For more information, contact Dimitar Nikolov, x7423 or e-mail nikolod, James Cheetham, x8786 or e-mail cheethj, or club manager Patrick Griffin, x8078.

### Green card update

Permanent residents who possess green cards with an I-151 notation—generally issued before 1978—are required to obtain new cards or apply for citizenship before Mar. 20, 1995. After this date, anyone who possesses the old card may be denied reentry to the U.S. after an absence abroad and will not be permitted to apply for permanent resident status for family members. Further information on application requirements is available from Kerry Harvey in the Personnel Office, x8302.

### Election

University trustee Ronald C. Breslow has been chosen the 1995 president-elect of the American Chemical Society. Breslow will

assume his new title for a year beginning Jan. 1, 1995, and will serve a one-year term as president of the society in 1996.

### Obesity gene coverage

A videotape featuring highlights of the broadcast media's national coverage of the cloning of the *ob* gene by the Friedman laboratory will be available from the Office of Public Affairs Thurs., Dec. 22. All three major networks (ABC, CBS, and NBC) led with the RU findings on their evening news programs. The work was also featured on CNN, The MacNeil/Lehrer NewsHour, CBS This Morning, and The Today Show, among others. For further information contact the office, x8967.

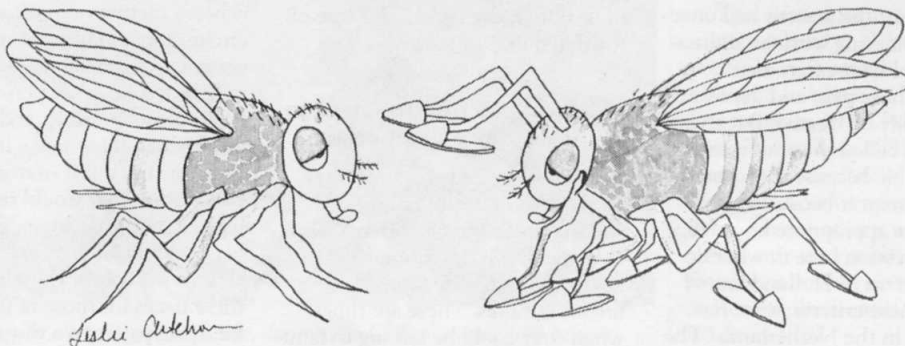
### Children's School applications

The RU Children's School and Infant-Toddler Center (I.T.C.) are accepting applications for the academic year beginning Sept. 1995 for children from 3 months to 5 years old. In addition, the I.T.C. currently has three openings for infants (3 to 12 months old) for this academic year. For further information, contact Marjorie Goldsmith, x8580.

### News&Notes schedule

News&Notes will not be published for three weeks due to the holidays. The next issue will be Fri., Jan. 13.

Leslie Archibson



"EVERY YEAR I GET THE SAME THING - MORE SLIPPERS."