The National Institutes of Health (NIH) celebrated the opening of the Mark O. Hatfield Clinical Research Center on Wednesday, September 22, 2004. This new hospital is totally dedicated to clinical research. This is the most significant addition to the NIH campus in more than 50 years and provides a unique opportunity for scientists, clinicians, and patients to study and conquer both chronic and acute disease in the twenty-first century.

The 870,000-square foot Hatfield Center connects to the existing Warren Grant Magnuson Clinical Center, which opened its doors to patients in 1953. In the 50 years since its opening, NIH has worked in partnership with more than 350,000 participants in clinical studies from every state in the United States and from around the world.

The Hatfield Center will continue to set the pace for developing the most promising medical advances. Annually, more than 1,000 clinical studies are conducted at the NIH, and the proximity of laboratories, equipment, and patient care units will help rapidly move biomedical laboratory findings into the mainstream of medical practice, carrying on the bench-to-bedside tradition of the original NIH Clinical Center.

In 1989, an assessment of the existing Clinical Center's building systems concluded that the hospital had 12 to 15 years of useful life left. In 1994, by mandate of Congress, NIH convened an external advisory committee to conduct an in-depth review of the agency's intramural program. This committee strongly endorsed NIH's research program and recommended the immediate revitalization of the Clinical Center through construction of a new 242-bed hospital, followed by the phased renovation of the existing Clinical Center. Former NIH directors Bernadine Healy, MD, and Harold Varmus, MD, provided crucial support to this effort.

Named in honor of former Senator Mark O. Hatfield, who served in Congress for 30 years and provided steadfast support to the NIH and clinical research, the new hospital will allow for cutting-edge research and patient care in the twenty-first century. The Hatfield Center opened with approximately 240 inpatient beds and 80 day-hospital stations. Laboratories and patient rooms are highly flexible and can quickly adapt to meet new requirements and changing priorities.

Senior officials, researchers, and patients attending the opening ceremony on September 22, 2004, included former Senator Hatfield; Department of Health and Human Services Secretary Thompson; Elias A. Zerhouni, MD, Director, NIH; John I. Gallin, MD, Director, NIH Clinical Center; and US Representative C. W. Bill Young, chairman, Committee on Appropriations, US House of Representatives.

UT Southwestern Receives \$1.78 Million Grant for Obesity Research from NIH Roadmap Initiative

University of Texas (UT) Southwestern Medical Center at Dallas has been awarded a prestigious 3-year planning grant from the National Institutes of Health (NIH) to study the causes of obesity and associated metabolic diseases.

The \$1.78 million grant, part of the NIH Roadmap for Medical Research, creates an Interdisciplinary Research Center and could develop into a permanent Metabolic and Obesity Center at UT Southwestern.

Dr. Gregory Fitz, chairman of internal medicine, initiated the Taskforce for Obesity Research at Southwestern. Dr. Jay Horton, associate professor of internal medicine and principal investigator on the grant, and 23 other UT Southwestern investigators from various disciplines will examine the behavioral, metabolic, and molecular mechanisms that cause obesity and metabolic syndrome. The major focus is the brain and liver because these or-

gans play key roles in the development of obesity and related disorders.

Four research teams will concentrate on three objectives: to foster interdisciplinary interactions at UT Southwestern to study obesity and metabolic syndromes, to develop state-of-the-art research programs using genetically modified mice to elucidate the metabolic and molecular bases of obesity and metabolic syndromes, and to support translation of scientific findings made in animal models to humans.

Dr. Keith Parker, chief of endocrinology and director of the Jean D. Wilson Center for Biomedical Research, is lead investigator for the team studying central regulators of energy metabolism. Dr. Horton will head the molecular biology of energy metabolism, whereas Dr. Craig Malloy, professor of radiology and internal medicine, will oversee the in vivo intermediary metabolism team. Dr. Scott Grundy, director of the Center

for Human Nutrition, is lead investigator for the human genetics and energy metabolism group.

In applying the research to humans, investigators will use participants from the Dallas Heart Study, an investigation of cardiovascular disease involving nearly 6,000 Dallas County residents. Molecular and clinical research techniques are being used in this groundbreaking study of a large multiethnic group of individuals to develop new biotechnology and establish a novel training program for scientist-physicians.

This initiative is led by the National Center for Research Resources. The NIH Roadmap is a series of far-reaching initiatives designed to transform the nation's medical research capabilities and speed the movement of research discoveries from the bench to the bedside. It provides a framework of the priorities that the NIH must address to op-