

Photos: Tom Clark

Berliner and Marston: Assignment of roles at NIH.



MAN AND HIS SCIENCE: BERLINER

NIH policymaker

A fundamentalist takes the number two spot at NIH

by Barbara J. Culliton

Berliner: "If we were to sacrifice the fundamental work, we would lose the base from which later applications must spring."



When Dr. James A. Shannon retired as director of the National Institutes of Health in September 1968, he left a billion-dollar giant—the nation's premier biological research organization.

But there had been a time when the house that Shannon built was weak and little known. When he left his post as director of the Squibb Institute for Medical Research and assumed, at 30 percent less salary, the job of scientific director of the year-old National Heart Institute, his senior colleagues thought he was throwing away a career. That was in 1949 when the academic scientific community looked askance at industry and was downright scornful of Government.

But Dr. Shannon saw a challenge, particularly in the NHI—"It was new. No one had been there before and I inherited no sins," he says. And he set about assembling a staff of "bright youngsters whom I knew well and who were willing to bet we could cut through Government red tape."

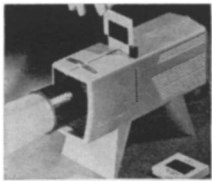
One of those youngsters was Dr. Robert W. Berliner, then 35, who left Columbia University to join Shannon in his adventure and who now has

ascended to a new position of Deputy Director for Science.

Under the recent reorganization of the Department of Health, Education and Welfare—effective last April—NIH has expanded to include not only its traditional research role but also responsibility for developing health manpower resources and facilitating the spread of biomedical information. As Deputy Director for Science, Dr. Berliner will handle policy matters for all NIH research activities.

This kind of assignment for the respected 54-year-old scientist has generally pleased research scientists, both at the NIH campus in Bethesda and at universities, the bulk of whose biomedical research depends on NIH policy. In their eyes the appointment vindicates the judgment of Dr. Robert Quarles Marston who succeeded Dr. Shannon as head of NIH. When Dr. Marston took the reins, NIH scientists called him a "total unknown" as far as policy positions were concerned, but feared that his background as dean of the University of Mississippi School of Medicine and director of the Regional Medical Programs would incline him toward

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. . . Berliner

programs of applied, pay-off directed research and toward delivery of health services. When he named Dr. Berliner Deputy Director for Science, those fears were allayed and the atmosphere in the laboratories lightened perceptibly. On research policy, they predict, Dr. Marston will defer to his deputy.

Of Dr. Berliner it is said, "He's even more oriented to fundamental research than Dr. Shannon." And though both men resist such a categorical description of themselves, they clearly share the view that scientific ventures demand a strong base of fundamental knowledge. "I certainly believe strongly in fundamental research," Dr. Berliner declares. "It is important that it not be abandoned while we pursue the problems of application. The growth of our body of fundamental knowledge must be maintained while we do applied work too. If we were to sacrifice the fundamental work, we would lose the base from which later applications must spring."

And a colleague declares categorically, "Politically motivated crash programs to translate research into applicable treatments are the sort of thing Bob Berliner classifies as unwise." This kind of fundamental orientation faced tough sledding in the Johnson Administration with the former President's declared emphasis on payoffs. But the present Presidential Science Adviser, Lee A. DuBridge, is guiding an apparently not unwilling President Nixon toward greater support of university-based research not necessarily geared to immediate applications.

By training and accomplishment, Dr. Berliner, a reticent, pipe-smoking New Yorker, is one of the salt-and-water boys; the 54-year-old scientist is one of the world's foremost renal physiologists. He is credited with leading the way to understanding of the balance of sodium and potassium salts in blood, the mode of transfer of electrolytes across the walls of kidney tubules and to the development of new theories on the mechanism of urinary dilution and concentration, an area of major significance in assessing kidney function.

"I've been interested in how the kidney regulated fluids since medical school at Columbia. There was just one diversion—to malaria research during the war."

Describing him, his associates unflinchingly point to his devotion to the laboratory. They have what they call "intuitive" reservations about his swap of a lab bench for an executive desk.

"Robert is a very distinguished scientist. I hope he doesn't become bogged down in administrative details," says Dr. Max Tishler of the Merck Institute

for Therapeutic Research. And, "I doubt if the fact that he'll now have virtually no time for the laboratory has really hit him yet," observes an NIH colleague.

Dr. Berliner turns out research papers with a single writing and often spends lunch time in the lab, munching a sandwich from the carry-out while discussing experiments. By all accounts, his greatest contribution to science lies in his capacity for critical analysis. Almost effortlessly, he absorbs data, beelines to the essentials and points the way to the next experiment.

"That capacity," declares his successor as head of the Laboratory of Kidney and Electrolyte Metabolism, Dr. Jack Orloff, "may be what makes him one of the few men who can afford to take regular vacations. He can come back to the lab after four weeks without being lost."

Dr. Berliner, says a long-time associate, "strikes terror in people who don't know him." That is partly because there is a premium on his respect, which is much sought by all his associates, young and old, and partly because "he seems stern but is really very gentle and very shy."

The premium reflects his overriding insistence on quality—an element some admire as "highly refined" and others call "a bit too rarefied." There are clinicians who suspect his high standards may mean that some grant projects may soon be weeded out. "He's been known to vote against expanding the honors awards in medical societies because he doesn't think there are enough worthy recipients," says one veteran Heart Institute researcher who thinks Berliner's standards are unrealistically high. But, he concedes, "Now that we're facing a financial pinch, I'd rather have him making the choices than anyone else."

Though Dr. Berliner's administrative skills in a major policy post have yet to be tested, and though—not unexpectedly with any administrator—not everyone is satisfied with his decisions on day-to-day matters, he's already proved to be highly efficient. As one colleague puts it, "Whether you like Bob's decisions or not, he doesn't leave papers sitting on his desk for long. No one is left hanging in the air for months while he gets to things. You quickly know where you stand." Among those papers are requests for such things as equipment and travel money.

On major decisions, the academic community clearly applauds this man who has been named as its standard bearer. Says Dr. Orloff, "He is very honest, very tough and very wise. We trust him on the big things." ◇