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With the death of Steve Straus, on May 14, 2007, the infectious diseases community lost a scientist, colleague, collaborator, and, most importantly, a dear friend. For the past 3 decades, Steve was a leader among scientists of the intramural program of the National Institute of Allergy and Infectious Diseases (NIAID). Steve came to the National Institutes of Health in 1973 as a research associate working on adenoviruses, and he returned in 1979 to head the Medical Virology Section at the NIAID Laboratory of Clinical Investigation (LCI). In 1991 he was named chief of the LCI. His research interests included the pathogenesis, treatment, and prevention of human herpesvirus infections, an area where he became an international leader.

During his tenure at the LCI, he distinguished himself by concerted efforts to translate basic science observations into clinical research and, subsequently, to translate the latter back into further bench investigations. Early in his career, he used acyclovir to probe the natural history of herpes simplex virus (HSV) infections. Steve and his colleagues were among the first to demonstrate not only that acyclovir therapy suppresses the frequency of clinical recurrences of oral and genital HSV but also antiviral resistance in an immunocompetent patient and in individual neurons of an immunocompromised patient. He showed that genital HSV can be transmitted by asymptomatic partners. With one of his colleagues (L.C.), he advanced studies of a subunit HSV glycoprotein vaccine for both prevention and therapy. In so doing, he recognized the need to provide enhanced cellular immune responses, potentially with an engineered vaccine to be developed with another colleague (D.K.). At a more basic level, he contributed to our knowledge of the mechanisms of HSV latent infection and of the latency-associated transcript encoded by HSV.

Paralleling his work on HSV was Steve’s work as a leader in studies of varicella-zoster virus (VZV). Steve, Bill Ruyechan, and John Hay worked on cloning and mapping the entire VZV genome. Using restriction-enzyme analysis, they were able to demonstrate that varicella and herpes zoster were caused by the same virus. One of Steve’s most significant contributions was the role that he played in assisting Mike Oxman, Myron Levin, and others on the executive committee of the Shingles Prevention Study. This seminal study proved that a VZV vaccine could reduce both the debility associated with shingles and the incidence of the disease.

Steve played a key role in studies of numerous other diseases of viral or putative viral etiology, including chronic fatigue syndrome (he demonstrated that acyclovir therapy was ineffective), influenza (he correlated cytokines responses with symptoms), and herpes B virus infection (he demonstrated that asymptomatic infection rarely, if ever, occurs).

Beyond his interests in virology, Steve led the clinical team that discovered a new genetic disorder—autoimmune lymphoproliferative syndrome (ALPS), an inherited disorder of lymphocyte apoptosis. He and his colleagues demonstrated that mutations in several genes, including those for Fas, Fas ligand, caspase-10, and N-Ras, result in ALPS. Indeed, his team follows the largest cohort of ALPS patients in the world.

In 1999, Steve was appointed by US Health and Human Services Secretary Donna Shalala to serve as the first Director of the National Center for Complement-
tary and Alternative Medicine (NCCAM). As NCCAM director, he brought rigorous scientific research to a field that needed evidence-based data to investigate safe and effective therapies in complementary and alternative medicine.

Steve received many honors, including election to the American Society for Clinical Investigation and the Association of American Physicians; the Enders Award for excellence in virology, from the the Infectious Diseases Society of America; and the gold medal for excellence in clinical medicine, from Columbia University College of Physicians and Surgeons. He chaired several committees that were part of the NIH Roadmap for Medical Research, as well as the NIH Committee on the Recruitment and Career Development of Clinical Investigators. Steve was a member of the Clinical Research Roundtable of the Institute of Medicine. He published more than 400 research articles and was a coeditor of *Fields Virology*.

Steve was diagnosed with a brain tumor in November 2004; yet, despite his illness, he continued to make major contributions to both basic and clinical research. Steve leaves behind a family that he treasured: his wife Barbara, an educator; his children Katie, an early interventionist who works with special needs children; Benjamin, an architect; and Julie, a newly graduated lawyer; his mother, Dora; and a sister and brother. As a testimony to Steve, his children were with him throughout his illness, even to the point of rearranging their school and job schedules. Besides his immediate family, he leaves a legion of fellows and students who benefited from his wisdom and scientific insights.

We among his friends and surrogate family pay tribute to Stephen Straus and his enrichment of all of our lives.