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The NIH Guide announces scientific initiatives and provides policy and administrative information to individuals and organizations who need to be kept informed of opportunities, requirements, and changes in extramural programs administered by the National Institutes of Health.

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P.T. 34; K.W. 1014006

National Institute of Neurological Disorders and Stroke

Applications for the Clinical Investigator Development Award (CIDA) of the National Institute of Neurological Disorders and Stroke (NINDS) must include three letters of reference: two from referees and one from the sponsor. To expedite the review process, the NINDS requires that applicants include these reference letters with their submitted application package, effective with applications submitted for the June 1, 1989, deadline.

CIDA applicants should request the reference letters from their referees and sponsor well in advance of the application submission deadline, and ask them to prepare the references and return them to the applicant in sealed envelopes in time to be included with the application package. To protect the utility and confidentiality of the reference letters, applicants are asked not to open the sealed envelopes.

Questions concerning the CIDA program may be directed to:

Mr. Edward M. Donohue
Deputy Director
Division of Extramural Activities
National Institute of Neurological Disorders and Stroke
Federal Building, Room 1016
7550 Wisconsin Avenue
Bethesda, Maryland 20892
Telephone: (301) 496-4188

DATED ANNOUNCEMENTS (RFPs AND RFAs)

CLINICAL TRIALS OF ANTICANCER AGENTS (PHASE II)

RFP NO. NCI-CM-07309-74

P.T. 34; K.W. 0755015, 0745005, 0740020, 0715035

National Cancer Institute

The Cancer Therapy Evaluation Program (CTEP) of the Division of Cancer Treatment (DCT), National Cancer Institute (NCI), is seeking organizations with the capabilities and facilities to provide a resource for the conduct of early and high priority Phase II trials. Specifically, the organizations shall: a) test new agents which have just completed Phase I trials, to confirm that the dose and schedule chosen can be safely given in subsequent Phase II trials; b) determine the antitumor activity of existing antitumor agents which can be administered in significantly higher doses when used with colony-stimulating factors or other factors which modulate toxicity or antitumor activity; c) determine the antitumor activity of combinations of antitumor agents and modalities; d) evaluate laboratory parameters which may correlate with or predict for response; and e) determine the spectrum of antitumor activity for new agents in selected human cancers.

While the contract will permit occasional Phase II trials, major emphasis shall be on early Phase II studies which are pivotal for drug development and require rapid initiation, completion and data reporting.

All patients for these studies must be treated at the offeror's own institution. Offerors who propose must demonstrate the institution's ability to accrue at least 200 fully evaluable patients per year and complete, on average, over the length of the contract, at least seven (7) Phase II trials a year. The minimum requirements for each tumor type shall be dictated by the particular protocols which are approved for each Contractor. For any proposed trial, the Contractor shall be required to document the institution's ability to accrue the required number of patients within a reasonable time period.

The proposed acquisition is a recompetition of four (4) existing contracts currently held by the following:

N01-CM-57732 Memorial Sloan Kettering
N01-CM-57733 Mayo Foundation
N01-CM-57734 University of Maryland
N01-CM-57739 University of Texas - M.D.Anderson

It is anticipated that four (4) awards will be made and that the resulting contracts will be awarded on an incrementally funded basis for a period of 84 months.

RFP NCI-CM-07309-74 will be available on or about February 22, 1989, with a due date for receipt of proposals of April 22, 1989.

Copies of the RFP may be obtained by sending a written request to:

Odessa S. Henderson
Contract Specialist
Treatment Contracts Section
National Cancer Institute
Executive Plaza South, Room 603
Bethesda, Maryland 20892
Telephone: (301) 496-8620

CLINICAL TRIALS OF ANTICANCER AGENTS (PHASE I)

RFP AVAILABLE: NCI-CM-07301-74

P.T. 34; K.W. 0755015, 0745005, 0740020, 0715035

National Cancer Institute

The Cancer Therapy Evaluation Program (CTEP) of the Division of Cancer Treatment (DCT), National Cancer Institute (NCI), is seeking organizations with the capabilities and facilities to provide Phase I and Clinical Pharmacokinetic evaluation of investigational new drugs which are developed through the DCT Drug Development Program and are sponsored to the Food and Drug Administration (FDA) under an Investigational New Drug Application (IND) held by DCT. Specifically, the organizations shall perform studies to define the acute toxicities of new anticancer agents in patients with advanced cancer; redefine the acute toxicities and pharmacokinetics of anticancer agents administered in combination with agents to modulate toxicity or antitumor effort; provide information on the pharmacokinetic characteristics (absorption, distribution, metabolism, and elimination) and pharmacodynamics of selected antitumor agents; and determine a treatment regimen suitable for evaluation of antitumor activity in Phase II trials.

All patients for these studies must be treated at the offeror's own institution. Offerors who propose must demonstrate an adequate patient accrual rate within the offeror's institution to provide at least 50 fully evaluable patients per year. It is estimated that the contractor shall perform at least three Phase I trials per year. The Contractor shall perform at least two pharmacokinetic studies per year on the compounds evaluated in the Phase I trials.

The proposed acquisition is a recompetition of six existing contracts currently held by the following:

N01-CM-57732 Memorial Sloan Kettering
N01-CM-57733 Mayo Foundation
N01-CM-57734 University of Maryland
N01-CM-57735 University of Wisconsin
N01-CM-57736 Ohio State University
N01-CM-57737 University of Texas - San Antonio
N01-CM-57738 Johns Hopkins University
N01-CM-57739 University of Texas - M.D.Anderson

It is anticipated that eight (8) awards will be made and that the resulting contracts will be awarded on an incrementally funded basis for a period of 66 months.

RFP NCI-CM-07301-74 will be available on or about February 22, 1989, with a due date for receipt of proposals of April 22, 1989.

Copies of the RFP may be obtained by sending a written request to:

Odessa S. Henderson
Contract Specialist
Treatment Contracts Section
National Cancer Institute
Executive Plaza South, Room 603
Bethesda, Maryland 20892
Telephone: (301) 496-8620

EVALUATION OF THE SAFETY AND IMMUNOGENICITY OF AN INVESTIGATIONAL VACCINE

RFP AVAILABLE: NICHD-IRP-89-13

P.T. 34; K.W. 0755015, 0740075

National Institute of Child Health and Human Development

The National Institute of Child Health and Human Development (NICHD) is proposing a study for the evaluation of the safety, immunogenicity and effectiveness of a new vaccine developed by the NICHD scientists. The study will determine whether the vaccine prevents meningitis and other invasive diseases due to Haemophilus influenzae type b. The design will be a double-blinded randomized controlled study of a newly developed vaccine. The Offeror shall have access to a population of 2-month-old infants, 5500 per year for 2 years, under the care of private practitioners who have the knowledge and willingness to participate in a community with a program designed to test the effectiveness of the new vaccine. The Offeror shall have a position of authority and responsibility within a community that has had documented history of the number of cases of its Haemophilus influenzae type b meningitis over a 10-year period, to establish the consistency of disease occurrence and to evaluate the effectiveness of this vaccine so that a statistically valid assessment of its effectiveness can be established.

The Request for Proposals, RFP/NICHD/IRP-89-13, will be issued on or about February 1, 1989, with responses due on March 21, 1989. Copies of the RFP may be obtained by sending a written request to:

Mrs. Jennifer Jones
Contracts Management Section
Office of Grants and Contracts
National Institute of Child Health and Human Development
Executive Plaza North, Room 515
6130 Executive Boulevard
Bethesda, Maryland 20892

CENTER FOR RESEARCH AND KNOWLEDGE DISSEMINATION ON SELF-HELP MENTAL HEALTH SERVICES

RFA AVAILABLE: MH-89-15

P.T. 04; K.W. 1004017, 0403004

National Institute of Mental Health

Application Receipt Date: May 4, 1989

The National Institute of Mental Health announces the availability of support for one Center for Research and Knowledge Dissemination on Self-Help Mental Health Services. The purpose of this Center will be to provide a stimulating and productive environment in which experienced health services, clinical, and sociocultural researchers can interact and work with mental health consumers, consumer representatives, services policymakers, and mental health service advocates on self-help aspects of mental health. Eligible applicants are any non-profit or for-profit research organizations.

Applications can be made for a maximum amount of \$250,000 (total, including direct and indirect costs) per annum, and for a maximum period of 5 years. NIMH will accept applications under the single receipt date of May 4, 1989.

Potential applicants wishing further information should contact:

Charles Windle, Ph.D.
Biometry and Clinical Applications Branch, NIMH
5600 Fishers Lane, Room 18C-14
Rockville, Maryland 20857
Telephone: (301) 443-4233

COLLABORATIVE STUDIES FOR DIAGNOSTIC CENTERS FOR
PSYCHIATRIC LINKAGE STUDIES

RFA AVAILABLE: MH-89-05

P.T. 34; K.W. 0785185, 0715177, 1715180, 0745020

National Institute of Mental Health

Application Receipt Date: May 4, 1989

The National Institute of Mental Health (NIMH) seeks applications for cooperative agreements from institutions to participate with NIMH in a multi-center genetic linkage program to study the genetics of schizophrenia, bipolar disorder, and Alzheimer's disease. The primary goal is to establish a national resource of immortalized cell lines from reliably diagnosed probands with the above disorders and their key relatives.

Applicants should request cooperative agreement support for 5 years. The maximum amount of support that may be requested is \$140,000 per year in direct costs. It is anticipated that 9 awards will be made in fiscal year 1989. The initial receipt date for applications is May 4, 1989.

For consultation concerning submission of applications, potential applicants should contact NIMH staff listed below:

S. Charles Schulz, M.D.
Chief, Schizophrenia Research Branch
Division of Clinical Research, NIMH
Room 10C-06, Parklawn Building
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-3524

or

Mary C. Blehar, Ph.D.
Head, Clinical Biological Studies of Mood
Disorders Program
Division of Clinical Research, NIMH
Room 10C-24, Parklawn Building
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-4524

RESEARCH DEMONSTRATION GRANTS ON DRUG TREATMENT
WITH PUBLIC SERVICE OR FOR PREGNANT WOMEN

RFA AVAILABLE: DA-89-03

P.T. 34; K.W. 0404009, 0775020, 0403004

National Institute on Drug Abuse

Application Receipt Date: April 24, 1989

Research Areas of Interest

New applications for research demonstration projects are solicited in two areas of interest: 1) the feasibility and efficacy of programs providing drug abuse treatment and vocational training in exchange for public service; and 2) the effectiveness of providing maternal care in drug abuse treatment to pregnant women, post partum women, and their infants. Applicants are not expected to combine both areas of interest into a single study.

Research demonstration projects may include the creation of new treatment slots or may augment existing slots by providing new services needed for research purposes.

Program for Treatment and Vocational Training in Exchange for Public Service

Many drug abuse treatment programs now require patients to pay some portion of treatment costs. Since drug abusing individuals seeking treatment may often have financial and employment problems, this requirement may impose a barrier for many in need of drug treatment. Also, many of those needing treatment lack appropriate job skills and need vocational training. An alternative to

requiring direct or third-party payment is to allow individuals to exchange public service for treatment coupled with appropriate vocational training.

The National Institute on Drug Abuse (NIDA) will support research demonstration studies to investigate the feasibility and efficacy of programs providing drug abuse treatment and vocational training in exchange for public service. The public service should have practical significance for the drug abuser and the community, and ideally would integrate the drug abuser's vocational training, aptitude, and ability.

Program for Drug Abuse Treatment Services to Pregnant Women, Post Partum Women, and their Infants

The potential consequences of maternal drug abuse to offspring include retarded fetal growth, premature delivery, low birth weight, drug-specific neonatal withdrawal syndromes, and abnormal environmental responses. Elimination or reduction in the maternal use of illicit drugs as a result of enrolling and retaining drug-abusing pregnant and post-partum women in drug abuse treatment may forestall such consequences, and providing medical care to these women should provide additional benefits.

Although drug abusing childbearing women may be difficult to locate, enroll, and maintain in traditional drug abuse treatment programs, clinical studies have shown the importance of providing a continuum of care through therapeutic programs, comprehensive supportive services, and medical treatment.

NIDA will support controlled clinical studies to investigate the benefits of programs providing drug abuse treatment and maternal care services for drug abusing pregnant and post partum women and their infants. Of particular interest are research projects directed toward comprehensive programs that provide a continuum of prenatal and postnatal care, including detoxification or methadone maintenance, psychotherapy, social support activities, and general followup medical care for mother and infant.

For a copy of complete RFA announcement contact:

Mr. Desmond McLearn
Grants Management Branch, OPRM
NIDA, Room 10-25
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-6710

For more detailed program information contact:

Dr. Jack Blaine
Treatment Research Branch
Division of Clinical Research
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-4060

COOPERATIVE MULTICENTER REPRODUCTIVE MEDICINE NETWORK

RFA AVAILABLE: 89-HD-04

P.T. 34; K.W. 0715167, 0785135, 0413002, 0785035

National Institute of Child Health and Human Development

Application Receipt Date: July 17, 1989

The Reproductive Sciences Branch (RSB) of the Center for Population Research (CPR) of the National Institute of Child Health and Human Development (NICHD) invites applications from investigators willing to participate with the assistance of NICHD under Cooperative Agreements in multicenter cooperative clinical studies investigating problems in adult reproductive medicine, including reproductive endocrinology, obstetrics and gynecology, and andrology.

BACKGROUND

The area of reproductive health care has, in some instances, put into use diagnostic and therapeutic practices without sufficiently rigorous controlled evaluation of their effectiveness. With the present demographic trend to delayed childbearing, there is a greater need than ever to be able to identify reproductive disorders quickly and accurately, to describe subpopulations of

infertility and subfertility, and to be able to provide the most appropriate therapies with the least possible delay.

RESEARCH GOALS AND SCOPE

The purpose of this RFA is to establish a Network of Clinical Reproductive Medicine Units (RMUs) and a Data Coordinating Center (DCC), with the cooperation of NICHD staff, to conduct research in high priority areas of reproductive medicine. The Network will identify topics of high priority, design appropriate protocols, implement the protocols, and analyze and disseminate the results. It is anticipated that the program will consist of four phases (duration of phases are estimates only):

Phase 1 (6 months) Identification of issues of importance and ranking according to public need.

Phase 2 (6 months) Design of diagnostic and treatment protocols to be accepted in common by all participating organizations.

Phase 3 (48 months) Institution of clinical protocols, data collection, data transfer.

Phase 4 (40 months) Planning pertaining to study termination, new protocols, and future needs. This phase will begin six months after Phase 3 has started.

It is anticipated that six RMUs and a DCC will be enrolled in the program. Awards will be for five years. The deadline for receipt of applications is July 17, 1989. Applications received after this date will not be considered. Only institutions in the United States will be eligible for participation.

The RMUs will recruit, evaluate and treat the patients in the clinical studies. The DCC will have primary responsibility for data collection and management. Planning and implementation of the studies will be supervised by a Steering Committee consisting of principal investigators (PIs) from each of the RMUs, the PI of the DCC, and the NICHD Program Officer for Reproductive Medicine, who will act as Research Coordinator. Each PI will serve as chairperson on a rotating basis.

MECHANISM OF SUPPORT

The funding mechanism to be used to assist the scientific community in undertaking this system of clinical investigation will be a Cooperative Agreement between the participating units and NICHD. The major difference between a Cooperative Agreement and a research grant is that there will be substantial programmatic involvement of NICHD staff above and beyond the levels required for traditional program management of grants.

These special Terms of Award are in addition to, and not in lieu of, otherwise applicable OMB administrative guidelines, HHS grant administration regulations at 45 CFR Part 74, and other HHS, PHS, and NIH grant administration policies.

APPLICATION AND REVIEW PROCEDURES

Any application which does not meet the minimum requirements (see Additional Information, below) of this RFA will be returned to the applicant without technical review. Applications meeting the minimum requirements will be reviewed as a group on a competitive basis with each other and in accordance with the usual NIH peer review procedures for research grants.

Responsive applications may be subjected to a triage by a peer-review group to determine their scientific merit relative to the other applications received in response to this RFA. NIH will withdraw from competition those applications judged to be noncompetitive, and notify the applicant and institutional business official.

The review will be conducted first for scientific and technical merit by a special review committee convened specifically for this purpose by the Scientific Review Program, NICHD. This will be followed by a second-level review by the National Advisory Child Health and Human Development Council.

Applications must be submitted on form PHS 398 (revised 9/86), which is available in most institutional business offices or from the Division of Research Grants, NIH. Applications should be identified by checking the "yes" box in Item Number 2 on the face page of the application, and typing in the words, "In Response to RFA-HD-89-04." In addition, the RFA label available in the 9/86 revision of Application Form 398 must be affixed to the bottom of the face page and placed on top of your entire package. Failure to use this label could result in delayed processing of your application, such that it may not

reach the review committee in time for review. The original and four (4) copies should be received by the Division of Research Grants no later than July 17, 1989.

Applications should be sent or delivered to:

Application Receipt Office
Division of Research Grants
National Institutes of Health
Westwood Building, Room 240
Bethesda, Maryland 20892**

In addition to those applications mailed to the Division of Research Grants, two (2) copies of the application should be sent to:

Laurance Johnston, Ph. D.
Scientific Review Program
National Institute of Child Health
and Human Development
National Institutes of Health
Executive Plaza North, Room 520
Rockville, Maryland, 20892
(Courier Zip Code 20852)

ADDITIONAL INFORMATION

Potential applicants should obtain a detailed Request for Applications from:

Donna L. Vogel, M.D., Ph.D.
Reproductive Sciences Branch
Center for Population Research
National Institute of Child Health
and Human Development
Executive Plaza North, Room 603
Rockville, Maryland 20892
Telephone: (301) 496-6515

This Program is described in the Catalog of Federal Domestic Assistance number 13.864, Population Research. Awards will be made under the authority of the Public Health Service Act, Title X, Section 1004 (Public Law 92-572, as amended; 42 USC 241) and Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241). This program is not subject to Executive Order 12372 or Health Systems Agency review.

PUBLIC-ACADEMIC FELLOWSHIP PROGRAM IN MENTAL HEALTH SERVICES RESEARCH

RFA AVAILABLE: MH-89-14

P.T. 22; K.W. 0715129, 0730050

National Institute of Mental Health

Application Receipt Date: May 4, 1989

The National Institute of Mental Health (NIMH) requests applications for a fellowship training program designed to support training of developing investigators in the skills required for effective research concerning mental health service delivery in the public sector. Consideration will also be given to training in clinical research on the severely mentally ill. The program is also intended to enhance the ability of States and other public sector organizations to conduct research on the treatment and delivery of services, especially to severely mentally ill adults and children. These fellowships will support full-time research training for medical students or psychiatric trainees who intend to pursue a research career.

Domestic public or private nonprofit institutions and professional and scientific organizations and associations may apply. It is anticipated that in fiscal year 1989, up to \$175,000 will be for the support of one postdoctoral program. NIMH will accept applications under the single receipt date of May 4, 1989.

Potential applicants wishing further information should contact:

Dr. Kenneth G. Lutterman
Associate Director for Research Training
and Resource Development
Division of Biometry and Applied Sciences, NIMH
5600 Fishers Lane, Room 18C-26
Rockville, Maryland 20857
Telephone: (301) 443-3685

RESEARCH ON SERVICES FOR PERSONS WITH MENTAL DISORDERS
THAT CO-OCCUR WITH ALCOHOL AND/OR DRUG ABUSE

RFA AVAILABLE: MH-89-13

P.T. 22; K.W. 0715129, 0404003, 0404009

National Institute of Mental Health
National Institute on Alcohol Abuse and Alcoholism
National Institute on Drug Abuse

Application Receipt Date: May 4, 1989

The National Institute of Mental Health (NIMH), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the National Institute on Drug Abuse (NIDA) seek applications for studies of alcohol, drug, and mental health services for individuals whose multiple diagnoses include mental disorder(s) as well as alcohol and/or drug abuse disorders. Support may be requested through applications for a regular research grant, Small Grant, First Independent Research Support and Transition (FIRST) Award, ADAMHA Scientist Development Award, and ADAMHA Scientist Development Award for Clinicians.

Applicants may request support for up to 5 years (with the exception of small grant applications, which are limited to 2 years). It is anticipated that up to \$2.5 million will be available to support new grant awards under this RFA during fiscal year 1989, subject to the availability of funds. Funding in future years will depend on annual appropriations.

NIMH will accept applications under the single receipt date of May 4, 1989. Potential applicants are encouraged to discuss their planned research with NIMH staff listed below before submitting a formal grant application:

Dave Larson, M.D., M.S.P.H., or Charles Windle, Ph.D.
Biometric and Clinical Applications Branch
Division of Biometry and Applied Sciences, NIMH
Parklawn Building, Room 18C-24
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: Dr. Larson (301) 443-1330
Telephone: Dr. Windle (301) 443-4233

CANCER PREVENTION AND CONTROL RESEARCH SMALL GRANTS PROGRAM

RFA AVAILABLE: 89-CA-09

P.T. 34; K.W. 0715035, 0745027, 0795003, 0745035, 0404000, 0710030

National Cancer Institute

Application Receipt Date: May 5, 1989

I. INTRODUCTION

The Division of Cancer Prevention and Control (DCPC) of the National Cancer Institute (NCI) invites Small Grants research applications (R03) in areas relevant to the cancer prevention and control program as noted below.

New as well as experienced investigators in relevant fields and disciplines (e.g., disease prevention and control, medicine, public health, health promotion, epidemiology, social work, nursing research, nutrition, health policy, health services research, and behavioral sciences, such as social psychology, health education, sociology, and community organization) may apply for small grants to test ideas or do pilot studies.

Up to 30 awards will be made under this RFA if meritorious applications and funds are available. Under previous RFAs, 79 awards have been made.

II. BACKGROUND INFORMATION

Cancer control is defined as the reduction of cancer incidence, morbidity, and mortality through an orderly sequence from research on interventions and their impact in defined populations to the broad, systematic application of the research results.

Cancer control research studies are classified into one of five phases which represent the orderly progression noted in the above definition: (I) hypothesis development; (II) methods development and testing; (III) controlled intervention trials to establish cause-and-effect relationships; (IV) research in defined human populations; and (V) demonstration and implementation studies. The Division is interested primarily in research on cancer control intervention in Phases II through V.

III. RESEARCH GOALS AND SCOPE

A Cancer Prevention and Control Research Small Grants Award is designed to encourage investigators from a variety of academic, scientific, and public health disciplines to apply their skills to scientific investigations in the field of human cancer control intervention research.

Within this small grant program, investigators may choose any of the full range of scientific approaches in their work. Many studies and research designs may contribute to the design, implementation or evaluation of future phase III-V studies, e.g., descriptive baseline surveys, testing, modification and validation of surveys or program materials for use in the proposed population groups, testing of recruitment or compliance procedures for participants, etc. The research may occur in a variety of settings, such as communities, schools, health departments, worksites, etc. These investigators will become part of the new nationwide group of scientists pursuing cancer control research goals.

PROGRAM AREAS OF INTEREST

The NCI has announced a goal and objectives for achieving a 50 percent reduction in the cancer mortality rate by the Year 2000 (Greenwald, P., Sondik, E.J. Cancer Control Objectives For the Nation: 1985-2000, NCI Monograph No. 2, 1986).

Cancer Control Program areas appropriate for research grants include HUMAN INTERVENTION research in the following areas:

- o Prevention (chemoprevention, diet and nutrition intervention studies).
- o Screening and early detection, e.g., pilot studies of new methods; application of the "NCI guidelines for early detection". In the area of breast screening and detection, studies of breast self-examination as a single modality will not be accepted.
- o Cancer control sciences (studies to change current behaviors and/or institute new behaviors or health promotion interventions effective in reducing incidence, morbidity or mortality from cancer).
- o Smoking prevention and cessation pilot studies targeted at improving UTILIZATION of current technologies in target populations or organizations are encouraged. Minor enhancements of existing technology are NOT encouraged.
- o Applications research in modifying, feasibility testing, and adopting proven, state-of-the-art intervention programs and strategies from other research projects (e.g., screening, smoking prevention, etc.) for use in special populations, state and local health agencies, or other organizational and community settings. In addition, planning, epidemiologic, and survey studies aimed at developing cancer control interventions, or cancer control operations research and evaluation studies.
- o Community oncology (improving the application of patient management and continuing care research advances into community settings).
- o Applied epidemiology (using epidemiologic methods to determine the association between exposure to an INTERVENTION and its impact on disease).

EXCLUSIONS

Studies to determine the efficacy of chemotherapy, surgery, radiotherapy, and other primary treatment interventions are not considered cancer control research under this RFA. Other animal studies are not allowed.

IV. MECHANISMS OF SUPPORT

Support of this program will be through the National Institutes of Health (NIH) grant-in-aid. Total costs (direct plus indirect) must not exceed \$35,000. The duration of support is one year but may be longer (up to two years) if the \$35,000 funding limit is not exceeded for the entire project.

V. ELIGIBILITY

Applicants may be established researchers, new investigators, qualified staff of public health departments and collaborating agencies, and predoctoral investigators. DISSERTATION research proposals are allowed.

The only INELIGIBLE applicants are: (1) those individuals who are or have previously been Principal Investigator on an NCI funded CANCER CONTROL grant or contract for more than TWO years; (2) previous recipients (principal investigators) of a DCPC small grant; (3) foreign institutions.

VI. INQUIRIES

Written or telephone inquiries concerning the objectives and scope of this RFA or inquiries about whether or not specific proposed research would be responsive are encouraged and should be directed to the program director below. The program director welcomes the opportunity to clarify any issues or questions from potential applicants.

Carlos E. Caban, Ph.D.
Program Director for Cancer Control Research
Division of Cancer Prevention and Control
National Cancer Institute
Executive Plaza North, Room 218
Bethesda, Maryland 20892
Telephone: (301) 496-8577

ONGOING PROGRAM ANNOUNCEMENTS

RESEARCH ON CHILDREN OF ALCOHOLICS

P.T. 34, AA; K.W. 0404003, 1002019, 0760003

National Institute on Alcohol Abuse and Alcoholism

PURPOSE

This announcement seeks epidemiological research on children of alcoholics as well as well-controlled research that provides a foundation for the development of effective preventive and early intervention programs to alleviate the potential adverse effects of parental alcoholism and related genetic and environmental factors on this population.

RESEARCH OBJECTIVES

The National Institute on Alcohol Abuse and Alcoholism (NIAAA) encourages a variety of studies aimed at furthering our understanding of the genetic traits, environmental factors, and individual strengths and vulnerabilities of children of alcoholics. NIAAA is particularly interested in research that includes large, nonclinical populations of children of alcoholics, research on biological markers for alcoholism, research on genetic, environmental, or individual factors that may "buffer" children of alcoholics from the adverse effects of parental alcoholism, and research that compares children of actively drinking alcoholics to children of abstinent alcoholics or to children of parents with other chronic problems such as depression or renal disease.

MECHANISM OF SUPPORT

Applications received in response to this announcement will compete with others submitted to NIAAA for funding. Support may be requested for a period of up to 5 years (renewable for subsequent periods). Grant funds may be used for expenses clearly related and necessary to carry out research projects, including both direct costs which can be specifically identified with the project and allowable indirect costs of the institution. Funds may not be used to establish, add a component to, or operate a treatment, rehabilitation, or prevention service program.

ELIGIBILITY

Applications may be made by public or private nonprofit or for-profit organizations such as universities, colleges, hospitals, laboratories, units of State or local governments, and eligible agencies of the Federal Government.

APPLICATION PROCEDURES

All applications in response to this announcement must be submitted on Application form 398 Rev. 9/86. Insert on line 2 of the application face page the title "Research on Children of Alcoholics".

INQUIRIES

All inquiries and requests for the full text of this announcement should be directed to:

Jacqueline Wallen, Ph.D.
Project Officer, Treatment Research Branch
Division of Clinical and Prevention Research, NIAAA
Parklawn Bldg., Room 16C03
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-0796

ERRATA

ADAMHA SCIENTIST DEVELOPMENT AWARD AND ADAMHA SCIENTIST DEVELOPMENT AWARD FOR CLINICIANS

P.T. 34; K.W. 0710030, 0404003, 0404009, 0715095

National Institute of Mental Health
National Institute on Alcohol Abuse and Alcoholism
National Institute on Drug Abuse

In the NIH Guide for Grants and Contracts, Vol. 7, No. 44, December 30, 1988, information was missing from the first paragraph. The first paragraph is repeated below in its entirety.

The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA), which includes the National Institute of Mental Health (NIMH), the National Institute on Alcohol Abuse and Alcoholism (NIAAA), and the National Institute on Drug Abuse (NIDA), announces the ADAMHA Scientist Development Award (SDA) and the ADAMHA Scientist Development Award for Clinicians (SDAC). The SDA and SDAC are awards to foster the development of outstanding scientists and enable them to expand their potential for making important contributions to the fields of alcoholism, drug abuse, or mental health (ADM) research. The SDA is for highly promising developing scientists who need further supervised research experience in order to undertake independent research. The SDA provides 5 years of support; in exceptional circumstances, an established investigator who needs supervised research experience to enable him or her to switch fields may apply for up to 2 years of support. The SDAC is intended to meet the need for supervised experience for individuals trained primarily as clinicians, especially physicians, who show special promise for a research career. The SDAC provides 5 years of support, with eligibility taking into account that the candidate has been trained primarily as a clinician and thus may possess only minimal research skills. Such an individual must show genuine commitment to a research career to justify the need for a 5-year development award.

In addition, the spelling of the name of the Chief, Epidemiology Branch, Division of Biometry and Epidemiology, NIAAA, is Mary Dufour. The room number for Edgar Adams, Sc.D., Director of Epidemiology and Statistical Analysis, NIDA, is 11A-55, and his telephone number is 301-443-6504. NIMH should be inserted before the names of Drs. Lutterman, Schneider, and Lash.

DEVELOPMENT OF SMALL ANIMALS EXPRESSING HUMAN IMMUNODEFICIENCY VIRUS
GENES AS MODELS FOR THERAPY

RFA: 89-AI-05

P.T. 34; K.W. 0715008, 1002002, 0765033, 0740023, 0760015

National Institute of Allergy and Infectious Diseases

This announcement was published in the NIH Guide for Grants and Contracts on December 23, 1988, Vol. 17, No. 43. The following sentence was omitted from that announcement:

"Only R01 applications will be considered in response to this RFA."