

FYI from the NHLBI



Public Interest News from the National Heart, Lung, and Blood Institute

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Director Shared Vision with PIOs

Dr. Elizabeth G. Nabel, Director, NHLBI, shared her vision for the Institute's future with representatives from public interest organizations (PIOs) at the sixth annual PIO meeting. The February 8-9 event provided Dr. Nabel with an opportunity to meet and visit with PIO representatives as one of her first official duties as Director.

Dr. Nabel spoke about her active clinical practice before joining the NHLBI and noted that her interactions with patients strongly influenced her research. She emphasized that she is delighted with the prospect of working with the PIOs: "I cannot state strongly enough the importance of our working relationship, going forward, to achieve our common goals."

Dr. Nabel expressed her commitment to supporting investigator-initiated research, reducing health disparities, and encouraging young investigators. Additionally, she said, the NHLBI will focus its efforts on:

- Stimulating the discovery of causes of disease
- Speeding the translation of these new discoveries to clinical applications
- Facilitating communication between scientists and physicians, and
- Communicating advances to the public.

Other speakers included Dr. Stephen Groft, Director, Office of Rare Diseases, NIH, who discussed program activities of the ORD and Ms. Wendy Chaite, member, NIH Director's Council of Public Representatives, who provided an overview of the Council's activities. Dr. Sally Shumaker, a clinical center director of the NIH Women's Health Initiative (WHI), spoke about "clinical trials and tribulations" and Dr. Gene Gary-Williams, a WHI volunteer, shared her perspective on her experience as a study participant. During the meeting, PIO representatives had the opportunity to meet with NHLBI program staff, attend scientific sessions, and participate in roundtable discussions.

The NHLBI appreciates the feedback and suggestions it has received about the meeting. In response to requests for more information about upcoming NHLBI workshops and working groups, we added a list to the *FYI* (see page 2), with an understanding that PIO representatives will be accommodated on a space-available basis and will be responsible for their own travel expenses. The NHLBI staff members listed may be contacted for more information.

Women's Health Study Reports Findings on Low-Dose Aspirin

Although aspirin has been shown to reduce the risk of a first heart attack in men, until recently its effectiveness in women was uncertain. The Women's Health Study, supported by the NHLBI, is the only large clinical trial to study the use of low-dose aspirin (100 mg on alternate days) to prevent heart attack and stroke in women. The 10-year randomized, double-blind, placebo-controlled study, which was conducted among nearly 40,000 healthy women age 45 and older, found that aspirin did not prevent first heart attacks or death from cardiovascular causes. Indeed, aspirin users experienced only 9 percent fewer major cardiovascular events than non-users, a difference that was not statistically significant. However, the stroke rate was 17 percent lower in those taking aspirin, a statistically significant difference. The greatest benefit was in women age 65 and older for whom aspirin reduced the risk of major cardiovascular events by 26 percent.

Dr. Nabel summed up the results saying: "The bottom line is that many women, especially those 65 and older, may benefit from taking low-dose aspirin every other day to prevent stroke. But it is important for women to weigh the risk and benefits of taking aspirin and to consult with their doctor. Above all, women, like men, should adopt the well-proven approaches that reduce the risk of heart disease – eating for heart health, getting regular physical activity, maintaining a healthy weight, not smoking, and controlling high cholesterol, high blood pressure, and diabetes."

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Upcoming NHLBI Workshops and Working Groups

Workshop or Working Group	Date / Location	Contact for More Information
NIH State-of-the Science Conference on Manifestation and Management of Chronic Insomnia in Adults	June 13-15, 2005 Bethesda, Maryland	Dr. Regina Dolan-Sewell rdolan@mail.nih.gov; 301-443-3728
Leukoreduction Workshop (NHLBI and FDA co-sponsors)	July 20, 2005 Bethesda, Maryland	Dr. Liana Harvath harvathl@nhlbi.nih.gov; 301-435-0063
Use of Genetic and Genomic Resources at Minority Serving Institutions	July 21, 2005 Bethesda, Maryland	Dr. Dina Paltoo paltood@nhlbi.nih.gov; 301-435-0513
Adult Stem Cells, Lung Biology, and Lung Disease	July 25-27, 2005 Burlington, Vermont	Dr. Dorothy Gail gaild@nhlbi.nih.gov; 301-435-0222
Blood Vessel Maturation (Arteriogenesis)	Summer 2005 Bethesda, Maryland	Dr. Stephen Goldman goldmans@nhlbi.nih.gov; 301-435-0560
Integrative Approach to Identify Patients at High Risk of a Cardiovascular Event in the Near Future	September 2005 Bethesda, Maryland	Dr. Eser Tolunay tolunaye@nhlbi.nih.gov; 301-435-0545
Cardiovascular Manifestations of COPD	September 2005 Bethesda, Maryland	Dr. Thomas Croxton croxtont@nhlbi.nih.gov; 301-435-0202
Diseases of the Thoraco-abdominal Aorta	September 19, 2005 Bethesda, Maryland	Ms. Suzanne Goldberg goldbergs@nhlbi.nih.gov; 301-435-0515
Cellular and Molecular Mechanisms of Right Heart Hypertrophy and Failure	September 2005 Bethesda, Maryland	Dr. Elizabeth Denholm denholme@nhlbi.nih.gov; 301-435-0222
Host Response to Persistent Airway Bacterial Load in Cystic Fibrosis and Primary Ciliary Dyskinesia	September 2005 Bethesda, Maryland	Dr. Susan Banks-Schlegel schleges@nhlbi.nih.gov; 301-435-0202
Strategic Plan for Lung Disease Working Group	September 2005 Bethesda, Maryland	Dr. James Kiley kileyj@nhlbi.nih.gov; 301-435-0233
The Intrauterine Environment: Long-term Consequences for Obesity and Metabolic Disease	September 26-27, 2005 Bethesda, Maryland	Dr. Cristina Rabadan rabadanc@nhlbi.nih.gov; 301-435-0550

Research Advances from the NHLBI

Smoking Cessation Programs Improve Survival

New findings from the Lung Health Study (LHS), supported by the NHLBI, show that smoking cessation can greatly improve long-term survival even among smokers whose lung function is already impaired.

The LHS followed nearly 5,900 middle-aged smokers who had mildly or moderately abnormal lung function but were otherwise healthy. They were assigned to receive either a 10-week intensive smoking cessation program that included behavior modification, use of nicotine gum, and a five-year maintenance program to minimize relapse, or no intervention at all. Five years after the program began, only about 22 percent of people who received intensive intervention were sustained quitters - compared with about 5 percent of those receiving no intervention. Nonetheless, after 14.5 years, the death rate for those in the smoking cessation program was about 15 percent lower than for participants in the non-intervention group.

Across Racial Groups, Diuretics Still Best for Treating High Blood Pressure

Diuretics work better than newer therapies in treating high blood pressure and reducing risk of heart disease in both black and non-black patients, according to a long-term, multi-center trial of antihypertensive therapies funded by the NHLBI. An analysis of race-specific data from the ALLHAT (Antihypertensive and Lipid-Lowering Treatment to Prevent Heart Attack Trial) confirms earlier findings on the overall effectiveness of diuretics and emphasizes that diuretics should be preferred as a first therapy for most patients with high blood pressure.

Across both racial subgroups, a substantially higher risk of heart failure - 37 percent - was found among participants taking calcium channel blockers compared with those on diuretics. When compared with ACE inhibitors, diuretics were more effective in preventing cardiovascular disease, especially heart failure, for all participants and more effective in reducing high blood pressure and preventing stroke in black patients.

NHLBI Research Initiatives

From time to time, the NHLBI invites investigators to submit grant applications or contract proposals for specific research programs. We currently are soliciting applications for the following programs. Unless a due date is mentioned, applications are accepted for February 1, June 1, and October 1 deadlines each year. For full descriptions of these and other research initiatives, visit www.nhlbi.nih.gov/funding/inits/index.htm.

Chronic Fatigue Syndrome: Pathophysiology and Treatment (PA-05-030)

Objective: To support research on the epidemiology, diagnosis, pathophysiology, and treatment of chronic fatigue syndrome in diverse groups and across the life span.

Clinical Outcomes of Live Organ Donors

(RFA-AI-05-015)

Applications due: July 13, 2005

Objective: To conduct epidemiologic research on the medical and functional outcomes and health needs of live organ donors.

Community Participation in Research

(PAR-05-026)

Applications due: May 17, 2006 and 2007

Objective: To support research on health promotion, disease prevention, and health disparities that is jointly conducted by communities and researchers.

Directed Stem Cell Differentiation for Cell-Based Therapies for Heart, Lung, Blood and Aging Diseases (R-21 and SBIR/STTR)

(PA-05-043 and PA-05-044)

Objective: To develop methods to direct the differentiation or development of stem cells along specific cell lineages to yield replacement cells for clinical use.

Heart Failure Clinical Research Network

(RFA-HL-05-003)

Applications due: August 16, 2005

Objective: To expedite clinical research to evaluate the diagnosis, management, and treatment of heart failure.

Lung Response to Inhaled Highly Toxic Chemicals

(PA-05-058)

Objectives: To stimulate research on airborne chemical threats that affect the upper and lower respiratory tract, and identify potential therapies to prevent or limit development of pulmonary edema, a major complication of chemical irritation.

Pediatric Heart Network (RFA-HL-05-10)

Applications due: September 23, 2005

Objective: To evaluate new treatments and management strategies for children and adults with congenital heart defects and for children with inflammatory heart disease, heart muscle disease, and arrhythmias.

Research on Sleep and Sleep Disorders

(PA-05-046)

Objectives: To advance biomedical knowledge related to sleep or sleep disorders, to improve understanding of the functions of sleep, to enhance timely diagnosis and effective treatment of sleep-related disorders, and to implement and evaluate innovative community-based public health education and intervention programs.

Restless Legs Syndrome and Periodic Limb Movement Disorder (PA-05-032)

Objective: To enhance understanding of and develop treatments for restless legs syndrome and periodic limb movement disorder.

SCCOR in Chronic Obstructive Pulmonary Disease (COPD) (RFA-HL-05-008)

Applications due: August 17, 2005

Objective: To support multidisciplinary research related to COPD and speed progress in its diagnosis, prevention, and treatment.

SCCOR in Host Factors in Chronic Lung Diseases

(RFA-HL-05-009)

Applications due: August 17, 2005

Objective: To facilitate multidisciplinary basic and clinical research that identifies alterations in host responses and lung homeostasis and their contribution to the development or progression of chronic lung disease.

SCCOR in Pulmonary Vascular Disease

(RFA-HL-05-007)

Applications due: August 17, 2005

Objective: To accelerate understanding of the contribution of inappropriate vascular proliferative responses to injury in pulmonary hypertension, including evaluation of anti-proliferative agents as possible treatment.



News from Capitol Hill Fiscal Year 2006 Appropriations

At a hearing of the House Appropriations Subcommittee on Labor, Health and Human Services, Education, and related agencies held on March 9, Dr. Zerhouni, Dr. Nabel, and other NIH directors highlighted specific areas in which the NIH has made progress and described ongoing activities. Representatives asked questions about topics such as obesity, cardiovascular complications associated with long-term use of COX-2 inhibitors, and recent findings from the NHLBI-supported Women's Health Study on the use of low-dose aspirin to prevent heart attack and stroke. At a hearing of the corresponding Senate Appropriations Subcommittee held on April 6, questions focused on the President's policy on stem cell research and the new NIH conflict of interest policy.

Selected Bills and Resolutions Introduced

After the 109th Congress convened on January 4, members introduced several bills, including:

- The Biomedical Research Assistance Voluntary Option Act (H.R. 370), which would allow taxpayers to designate part of any income tax refund to be donated to the NIH for biomedical research.
- The Prevention of Childhood Obesity Act (S. 799), which includes a provision that would require the NIH Director to intensify research addressing the prevention of childhood obesity.
- The Screening Abdominal Aortic Aneurysms Very Efficiently (SAAAVE) Act of 2005 (H.R. 827, S. 390), which would provide for coverage of ultrasound screening for abdominal aortic aneurysms under part B of the Medicare program.
- The Teague Ryan Sudden Child Cardiac Arrhythmia Syndromes Screening and Education Act of 2005 (H.R. 1252), which would require the Centers for Disease Control and Prevention to award grants for screening programs to identify children who have sudden cardiac arrhythmia syndromes.
- The Stem Cell Research Investment Act of 2005 (H.R. 1650), which would provide tax credits to holders of bonds issued by state or local governments for support of stem cell research.

Members also have introduced resolutions to:

- Support the goals and ideals of Chronic Obstructive Pulmonary Disease Awareness Month (H.Con.Res. 10).
- Designate March as Deep-Vein Thrombosis Awareness Month (S.Res. 56).
- Recognize the 100th anniversary of the American Thoracic Society (S.Res. 114).
- Designate May 2005 as National Cystic Fibrosis Awareness Month (S.Res. 115).
- Recognize America's Blood Centers for commitment to providing a safe and adequate blood supply (H.Res. 220).

February 10, 2005, Meeting of the National Heart, Lung, and Blood Advisory Council

Dr. Nabel expressed her enthusiasm for working with the National Heart, Lung, and Blood Advisory Council (NHLBAC). New Council Members were welcomed, including Dr. Katherine High, Dr. Charles T. Esmon, Ms. J. Hoxi Jones, Dr. Jeffrey McCullough, and Dr. Patricia Wahl.

Dr. Nabel reviewed the new NIH policy on enhancing public access to archived publications that result from NIH-funded research. NIH-funded investigators are being asked to submit electronic copies of manuscripts that have been accepted for journal publication to the National Library of Medicine's PubMed Central.

Ms. Sandra Gault gave an overview of the President's FY 2006 budget request for the NHLBI, which totals \$2,951.3 million, a 0.3 percent increase over FY 2005. Under the President's budget, funding for competing research project grants would be 3.8 percent lower than the FY 2005 level, while funding for noncompeting research project grants would increase 1.5 percent.

Dr. Carl Roth presented the Institute's biennial report on inclusion of women and minorities as subjects in its clinical studies. He also provided an overview of the 6th annual NHLBI PIO Meeting. Several Council members who had attended the PIO meeting commented that the meeting provided a good opportunity for networking, the scientific sessions were of high quality, the roundtable discussions were creative, and the presentation about the Women's Health Initiative illustrated how clinical trials are conducted. In addition, PIO representatives attending the Council meeting enthusiastically expressed their appreciation to the NHLBI for holding what they characterized as a very worthwhile meeting. They emphasized the responsiveness of NHLBI staff to the needs and requests of the PIOs and noted the diversity of organizations attending.

Drs. Lawrence Friedman and James Kiley, NHLBI; Dr. Robert Harrington, Duke University; Dr. Kevin Peterson, University of Minnesota; and Dr. Robert Star, National Institute of Diabetes and Digestive and Kidney Diseases, discussed NIH Road Map activities.

During the closed portion of the meeting, the Council concurred on the award of 294 grants for a total cost of \$143,954,939.

The next NHLBAC meeting is scheduled for 8:30 a.m. on June 16, 2005. It is open to the public and will be held in NIH Building 31C, Conference Room 10. Full minutes of Council meetings and summaries of the initiatives are available at www.nhlbi.nih.gov/meetings/nhlbac.

Upcoming Events

Activity	Date / Location	More Information
Chronic GvHD: The Next Frontier in Transplantation Research	June 6 Bethesda, Maryland	cms.palladianpartners.com/cms/1110309890
National Scleroderma Awareness Month	June	www.scleroderma.org
Adult Congenital Heart Association Regional Conference	June 4 New York, New York	www.achaheart.org//index.php
National Heart, Lung, and Blood Advisory Council	June 16 and Sept. 16 Bethesda, Maryland	www.nhlbi.nih.gov/meetings/nhlbac/index.htm
World Association of Sarcoidosis and Other Granulomatous Diseases Meeting	June 12-15 Denver, Colorado	www.nationaljewish.org/education/sarcoidosis.html
Manifestations and Management of Chronic Insomnia in Adults	June 13-15 Bethesda, Maryland	consensus.nih.gov/ta/026/InsomniainIntro.html
Associated Professional Sleep Societies 19th Annual Meeting	June 18-23 Denver, Colorado	www.apss.org
National Scleroderma Conference	June 18-20 Cambridge, Massachusetts	www.scleroderma.org/national_conference.htm
Advances in Treating and Managing the Cost of Respiratory Disease	June 27-28 Las Vegas, Nevada	www.worldcongress.com/wcls/respiratory/index.cfm
XIX International Congress on Clinical Chemistry	July 24-28 Orlando, Florida	www.aacc.org/2005AM
Aplastic Anemia and MDS International Foundation Patient & Family Conference	July 28-30 Denver, Colorado	www.aplastic.org/conference-index.shtml?press_name=Conference
National Cholesterol Education Month	September	www.nhlbi.nih.gov/about/ncep/index.htm
National Sickle Cell Month	September	www.sicklecelldisease.org
Sickle Cell Disease Association of America Annual Convention	September 7-10 Baltimore, Maryland	www.sicklecelldisease.org
First Candle/SIDS Alliance 2005 Conference	September 15-18 Arlington, Virginia	www.sidsalliance.org/print_friendly/conference_2005.html
2005 Pulmonary Hypertension Resources Network Symposium	September 30-October 1 Bethesda, Maryland	www.phassociation.org/PHRN/Symposium

ORD Supports Scientific Conferences

The Office of Rare Diseases (ORD) collaborates with the NHLBI to stimulate rare diseases research by cosponsoring scientific conferences. This year, the ORD is co-sponsoring:

- Molecular Aspects of Myeloid Stem Cell Development and Leukemia
- Host Response to Persistent Airway Bacterial Load in Cystic Fibrosis and Primary Ciliary Dyskinesia
- Pulmonary Alveolar Proteinosis Research Conference
- The World Association of Sarcoidosis and Other Granulomatous Disorders 8th Annual Meeting.

Mission Possible to Fight High Blood Pressure

The Institute's National High Blood Pressure Education Program is offering a new online resource, *Prevent and Control High Blood Pressure: Mission Possible*. It provides materials that you can use to help combat high blood pressure in your community. The Web site also includes information to help you build new partnerships to reach broader audiences with your high blood pressure awareness messages. Visit hin.nhlbi.nih.gov/mission to learn more.

Constituents' Corner

From First Candle/SIDS Alliance **Helping Babies Survive and Thrive**

The First Candle/SIDS Alliance and the International Stillbirth Alliance are co-sponsoring a conference on September 15-18, 2005, in Arlington, Virginia. Titled "Together Making a World of Difference," it will bring together families, health professionals, and researchers from around the world to share knowledge and experiences. To request conference materials, visit www.firstcandle.org or call 1-800-221-7437.

Submitted by Laura Reno, First Candle/SIDS Alliance

From The Mended Hearts, Inc. **Announcing Mended *Little* Hearts**

Recognizing that heart disease affects all ages, Mended Hearts is now offering support to parents and families of children through its Mended *Little* Hearts program. The core of the new program is parent-to-parent visits based on the visiting model developed by Mended Hearts. Dedicated to inspiring hope for parents of children with heart defects or heart disease, the program will connect families in crisis with others who have survived the shock of learning a child has a heart problem and navigated the maze of medical decisions. Ongoing support through group meetings, health education resources, and workshops is also offered.

Mended *Little* Hearts or Mended Hearts may be reached at 1-888-HEART99 (1-888-432-7899) or by visiting www.mendedhearts.org. Mended Hearts is a nationwide patient-to-patient support group affiliated with the American Heart Association.

Submitted by Tim Elsner, The Mended Hearts, Inc.

From Pulmonary Hypertension Association **Learning Together, Moving Forward**

The Pulmonary Hypertension (PH) Association is hosting the 2005 PH Resource Network Symposium: Learning Together, Moving Forward on September 30-October 1, 2005, in Bethesda, Maryland. Nurses, therapists, physician assistants, and other PH treating medical professionals will gather for lively discussions, diverse educational sessions, and opportunities to meet and network. For more information, visit www.phassociation.org/PHRN/Symposium.

Submitted by Justine Elliot, Pulmonary Hypertension Association

We invite you to use this space that we reserve for you to share your successes and opinions. You may submit your ideas and articles to nhlbi.listens@nih.gov or Public Interest News, Office of Science and Technology, Building 31, Room 5A03, 31 Center Drive, MSC-2482, Bethesda, MD 20892-2482.

Need More Information?

We are always interested in receiving comments and suggestions from the community. If you or your organizations have questions for me or for the Institute, please contact me at nabele@nhlbi.nih.gov or Dr. Carl Roth at rothc@nhlbi.nih.gov.



Elizabeth G. Nabel, M.D.
Director, NHLBI

For information on specific issues, the following contacts may be helpful:

- For health-related questions and publications, please contact the trained information specialists at the NHLBI Information Center (NHLBIinfo@nhlbi.nih.gov) or write to the Information Center at P.O. Box 30105, Bethesda, MD 20824-0105.
- For communications pertaining to NHLBI policies and priorities, contact the NHLBI Office of Public Liaison (nhlbi.listens@nih.gov).
- For additional information regarding NHLBI events, consult the references provided or www.nhlbi.nih.gov/calendar/nhcal.htm. Most other NIH Institutes and Centers also maintain calendars on their Web sites. Links to their Web pages are at www.nih.gov/icd.