

NIH GUIDE

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U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

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The GUIDE is published at irregular intervals to announce scientific initiatives and to provide policy and administrative information to individuals and organizations who need to be kept informed of opportunities, requirements, and changes in grants and contracts activities administered by the National Institutes of Health.

Two types of supplements are published by the respective awarding units. Those printed on yellow paper concern contracts: solicitations of sources and announcement of availability of requests for proposals. Those printed on blue paper concern invitations for grant applications in well-defined scientific areas to accomplish specific program purposes.

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SPECIALIZED CENTERS OF RESEARCH

IN

THROMBOSIS,

NATIONAL HEART, LUNG,

AND BLOOD INSTITUTE

ANNOUNCEMENT

The Division of Blood Diseases and Resources, National Heart, Lung, and Blood Institute, invites national competition for grants to support Specialized Centers of Research (SCORs) in Thrombosis.

The objective of the Institute in establishing and continuing these SCORs is to focus resources, facilities, and manpower on the problem of thrombosis and related hemostatic mechanisms to expedite the development and application of new knowledge essential for improved diagnosis, treatment, and prevention of this major health problem. In order to achieve this goal, it is necessary to have a better understanding of normal hemostasis and how aberrations in coagulation factors, cellular elements, the vessel wall, fibrinolytic enzymes, inhibitors, and blood flow either cause or contribute to clinical thrombosis. Therefore, a broad approach to the problem is desirable, and research in any of these areas is appropriate for a Thrombosis SCOR, provided that the ultimate goal or central theme is directed toward the objective of this program.

The SCOR should have an active interdisciplinary research program relevant to thrombosis, and the staff should have access to facilities where sophisticated clinical investigations can be conducted. The program must include closely related experimental or basic research which is well integrated into the SCOR program. The SCORs in Thrombosis will also be expected to cooperate with the NHLBI and with each other in addressing the identified needs of the Thrombosis and Hemostasis Program of the Division of Blood Diseases and Resources.

Interested applicants should request the detailed announcement, "NIH-NHLBI-DBDR-79-G-I," from:

Anne P. Ball, Ph.D.
Acting Chief, Blood Diseases Branch
Division of Blood Diseases and Resources
National Heart, Lung, and Blood Institute
Room 5C10, Federal Building
Bethesda, Maryland 20205

Telephone: (301) 496-5911

Completed applications will be due on or before December 7, 1979.

LABORATORY ANIMAL SCIENCES PROGRAM,

DIVISION OF RESEARCH RESOURCES

ANNOUNCEMENT

Under authority of Section 301(a)(3) and (a)(8) of the Public Health Service Act, the Laboratory Animal Sciences Program of the Animal Resources Program Branch, Division of Research Resources, provides certain specific kinds of grant support to assist in providing animal resources required for biomedical research. In general, Laboratory Animal Sciences Program grants support activities that are designed to improve the quality and availability of animal resources which have broad usefulness in biomedical research. Operating subsidies for the routine care of animals are not provided. Specific types of animal resources supported include:

1. Developing and Improving Institutional Animal Resources Programs The purpose of institutional animal resource improvement projects is to assist biomedical research and educational institutions to comply with the Animal Welfare Act of 1970 and DHEW policies on the care and treatment of animals. To gain approval and support, both the need for resource improvement and a sound plan to bring the entire animal resource up to the required standards must be demonstrated, presented, and described in the context of the biomedical research and research training programs of the institution. The project plan must represent a logical step toward compliance with the principles of the Guide for the Care and Use of Laboratory Animals, DHEW Publication No. (NIH) 78-23, available from the Animal Resources Branch.
2. Animal Resource Laboratories The purpose of an animal resource laboratory is to upgrade the quality of animals used in NIH grantee institutions by providing a scientific base for animal health programs. A laboratory can be designed to serve one or more institutions. Animal resource laboratories should be capable of thoroughly defining naturally occurring disease processes and identifying the causes of disease in laboratory animals. In general, there should be competency in the areas of anatomic pathology, clinical pathology, and microbiology. Prior advanced training of the professional staff is expected. It is anticipated that such grants will result in new information on naturally occurring animal diseases. Pilot studies may be supported on relevant animal resource problems emanating from diagnostic activities. However, separate application should be made for support of costs associated with full-scale research projects.

3. Colonies of Special Research Animals Special research animals are defined as animals that have specific characteristics that make them especially valuable to research, but are not generally available because they are held in a very limited number of colonies. Animal resource support is appropriate for special colonies only if they serve as a resource for a variety of research projects which span the interests of two or more disciplines or disease categories. Requests for support of special colonies related to research supported by a single categorical Institute should be directed to that Institute.
4. Developing and Defining Animal Models Projects for the characterization and development of animal models are designed to establish, expand, or improve the usefulness of a particular animal as a biomedical research model. Grants may be awarded for investigations to elucidate the value of a certain animal species, stock, or strain as a model for studies on a number of naturally occurring disease processes or other biological phenomena related to human health. Support is limited to those models which display potential for rather broad biomedical research utility. Projects that attempt to establish an animal model for a single specific disease should be directed to the Institute that supports research on that disease.
5. Information and Reference Centers These projects are designed to provide the biomedical community with directories to or information on sources of specific types of research animals, information on the use of specific animals, or reference centers for certain kinds of technical knowledge or assistance related to the use of animals in research.
6. Research Projects to Improve Animal Resources Support may be requested for specific research projects aimed at improving the health and well-being of research animals. Appropriate projects include those designed to study the etiology, pathogenesis, and control of laboratory animal diseases. Other relevant areas include research on environmental and husbandry requirements of laboratory animals (e.g. caging, housing, temperature, light, noise, humidity, exercise, interactions with people and other animals, effects of specific microflora in controlled environments, etc.)

This is not an announcement of a new program nor a specific request for proposals. The purpose of the announcement is to restate DRR's continuing interest in the support of animal resources. More detailed application guidelines are available for each of the types of activity supported.

Application should not be made without consulting these guidelines and discussing the project with Animal Resources Program Branch staff. Inquiries and requests for application guidelines should be addressed to:

Director
Laboratory Animal Sciences Program
Animal Resources Program Branch
Division of Research Resources
National Institutes of Health
Bethesda, Maryland 20205

Telephone: (301) 496-5175

THE GENETIC BASIS OF AGING:

PROTOZOA AS MODELS,

NATIONAL INSTITUTE ON AGING

ANNOUNCEMENT

I. BACKGROUND INFORMATION

The National Institute on Aging (NIA) conducts and supports biomedical, behavioral, and social research and research training related to aging processes and the diseases and other special problems and needs of the aged.

Basic mechanisms of human senescence at the cellular level are not known, thus NIA research support includes research grants awarded to investigators seeking to understand these mechanisms in human cells. Research support is also available for studies on other laboratory organisms that have promise of contributing to a general knowledge of the molecular basis for cellular senescence. It is possible that such knowledge from relatively simple laboratory organisms is more readily achievable than from mammals and man, and will provide the basis for more insightful investigation of the molecular basis of cellular senescence in man.

The NIA seeks applications for research grant support of studies of senescence in protozoa. Research is encouraged on the genetic, molecular, and evolutionary basis of the senescence of protozoa including the loss of proliferative capacity phenomenon within populations of protozoa. Organisms proposed for study must exhibit an individual or population decline in function attributed to senescence. This does not exclude comparative studies with clones or other protozoa which show no indication of senescence. It is anticipated that most applications in response to this announcement will be of potential significance to research on human cellular aging using cell-culture systems. If appropriate to the application, this possible significance and the related theoretical framework are to be discussed.

II. GOALS AND SCOPE

The goal of NIA pertinent to this announcement is to understand the biological and biochemical basis for individual and population senescence in protozoan model systems; that is, an understanding of either specific genes or regulatory processes which can influence senescence. Anticipated findings are expected to lead to more precise scientific inquiry of aging in mammals.

This program is described in the Catalog of Federal Domestic Assistance, 13.866. Legislative authority is found in Section 301 of the Public Health Service Act and in P.L. 78-410, as amended.

III. MECHANISM OF SUPPORT, FUNDING

The support for this program will be via the traditional research project grant. All PHS policies governing research project grants will be applicable. Applicants are expected to plan and execute their own research programs. Support of grants pursuant to this announcement is contingent upon receipt of appropriated funds for this purpose.

IV. REVIEW PROCEDURES AND CRITERIA

A. Application Review

Upon receipt, applications responsive to this announcement will be assigned by the Division of Research Grants to an Initial Review Group (study section) for scientific merit review, and to the NIA for secondary review by the National Advisory Council on Aging.

B. Review Criteria

Applications must be relevant to the goals of this announcement. The factors considered in evaluating applications are:

- scientific merit of the research design, approaches, and methodology;
- adequacy of existing and proposed facilities and resources;
- qualifications and experiences of the principal investigator and proposed staff for the conduct of the proposed investigations;
- rationale of the subject and duration of the project in relation to the proposed research.

V. METHOD OF APPLYING

A. Application Procedure

Use the standard research grant application form PHS 398. If the institution's business office or central application control office does not have this form, an individual copy may be requested by writing to:

Office of Grants Inquiries
Division of Research Grants
National Institutes of Health
Bethesda, Maryland 20205

or by calling (301) 496-7441.

Type the phrase "NIA BASIC AGING PROGRAM: PROTOZOA" on the upper margin of the face page of the application. Enclose a covering letter stating that the application is in response to this announcement. Send the NIA a copy (see below).

Follow the instructions with the application form PHS 398 making sure that items noted in Section IV of this announcement are covered appropriately. Forward to:

Division of Research Grants
National Institutes of Health
Room 240, Westwood Building
5333 Westbard Avenue
Bethesda, Maryland 20205

Receipt dates for research grant applications in response to this announcement are no later than: July 1, November 1, and March 1.

VI. INQUIRIES AND CORRESPONDENCE

Inquiries and correspondence should be directed to:

Basic Aging Program
Extramural and Collaborative
Research Program
National Institute on Aging
National Institutes of Health
Bethesda, Maryland 20205

Telephone: (301) 496-9350

REQUEST FOR RESEARCH GRANT APPLICATIONS: RFA

NIH-NIAID-79-7

NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

ANNOUNCEMENT

TITLE: *ASTHMA AND ALLERGIC DISEASE CENTERS*

Application receipt date, October 15, 1979.

BACKGROUND INFORMATION

The National Institute of Allergy and Infectious Diseases (NIAID) invites applications for grants to be initiated during FY 1980 for participation in the ongoing Asthma and Allergic Disease Centers (AADC) program.

The Allergy and Clinical Immunology Branch of the Immunology, Allergic, and Immunologic Diseases program of NIAID sponsors fundamental and clinical research grants and contracts and the procurement and application of research resource and reference reagents concerned with asthma, allergic, and immunologic diseases and with relevant mechanisms of hypersensitivity and inflammation. This request for applications is intended to encourage the development of proposals from clinical investigative groups meeting the criteria and requirements for an AADC and to coordinate the submission of new and renewal applications providing equitable opportunity for both to compete for funds currently available for this programmatic activity.

Since its inception in 1971, the AADC program has progressively expanded with the gradual addition of new Centers on an open application basis. In accordance with established policy announced in the *NIH Guide for Grants and Contracts*, Vol. 7, No. 8, p. 1, June 9, 1978, proposals for AADCs are received only periodically and at designated times. Applications for both renewal of existing AADCs and creation of new Center programs will be expected to compete for funds available through the periodically announced awards.

The AADC program currently consists of 15 Centers. Each year several are scheduled to terminate and may compete for renewal. During FY 1980, NIAID expects to make 4 AADC new or competing renewal awards.

NIAID's fundamental objective in continuing the AADC program remains unchanged: acceleration of the application of emerging knowledge on the immune system and from relevant biomedical sciences to clinical investigations concerned with asthma, allergic diseases, and hypersensitivity disorders. Especially sought as the requisite factors within a participating institution are quality research in (a) basic science(s) and clinical investigation supported by adequate clinical facilities, staff expertise

Legislative authority for this program is found in Section 301 of the Public Health Service Act (Public Law 78-410, 42 USC 241). The Catalog of Federal Domestic Assistance number is 13.855.

in diagnosis and management of asthmatic and allergic patients, and access to (an) appropriate patient population(s) within a suitable academic/investigative setting designed to favor multidisciplinary interaction.

RESEARCH GOALS AND SCOPE

1. There should be indication by the sponsoring university or medical institution of willingness and preparedness to commit resources to insure development, operation, support, and function of the proposed Center in devoting its efforts to an identified study on asthma and/or allergic disease as a fundamental prerequisite.
2. The applicant's achievements in basic science research should have reached that stage of development where experimental leads are sufficiently encouraging to warrant transition from promising laboratory findings to corresponding investigations at the clinical level with the ultimate goal of developing new and improved methods for diagnosis, prevention, and treatment of asthma and/or the other allergic diseases.
3. A prospective Center should be in a position to present evidence of experience, orientation, laboratory and clinical facilities, scientific and professional staff, support personnel, and the expertise to design proposals, execute protocols representing a multifaceted long-term approach, and bring diverse institutional strengths to bear upon the study of major problems in asthma, other (of the) allergic disease(s) and/or pathophysiologic mechanisms underlying these disorders.
4. Suitable subjects for study within the provisions of this program may include those relevant to:
 - a. asthma and its multifactorial aspects
 - b. atopic diseases (e.g. allergic rhinitis, urticaria, atopic dermatitis)
 - c. identification, isolation, and characterization of etiologic agents of allergy (e.g. drugs, chemicals, foods, airborne allergens)
 - d. pathologic expressions, pathophysiologic mechanisms, and genetic factors of allergic disease and allergic inflammation
 - e. immune mechanisms and agents of immediate hypersensitivity and of related hypersensitivity manifestations of antigen-antibody reactions or cell mediated immunity (e.g. hypersensitivity, pneumonitis, allergic dermatitis, vasculitis, allergic gastroenteritis, drug reactions) and the development of corresponding improved diagnostic materials and methods
 - f. immunopharmacology, immunotherapy, and the development of specific pharmacologic agents designed for prevention and treatment of asthma and the other allergic diseases.

5. Study of animal models will be considered acceptable as a partial segment or adjunct to a Center's program only if this line of research is applicable to the character of the primary investigation of asthma or the human allergic disease central to the proposal.
6. Designation of a Center Director should be based upon accomplishment and experience as a senior scientist and ability to assume both leadership of the investigative group and responsibility for scientific, professional, and administrative functions.
7. More than one delineated avenue of research may be pursued within a Center with provision for unified operation and coordination of component projects and collaborative investigators.
8. A Center should not rely upon its ability to conduct research activity solely within the confines of a single discipline, but rather should have established the associations to involve participation by workers in the pertinent biomedical fields and medical specialties allied to asthma, allergy, and clinical immunology (e.g. immunobiology, biochemistry, microbiology, genetics, pathology, respiratory and neurophysiology, pharmacology, biostatistics, bioinstrumentation and computer science; and the clinical subspecialties, e.g. dermatology, rheumatology, infectious diseases, pulmonary medicine, hematology, otorhinolaryngology).
9. The Center Director will be expected to communicate freely with the NIAID and other designated Centers for effective exchange of new information, to interact with scientists working in other Centers on related investigative problems, and to present progress reports and share experimental data with other Centers through exchanges and attendance at NIAID sponsored meetings of study groups and AADC workshops.

MECHANISM OF SUPPORT

In fiscal year 1980, the NIAID plans to award at least four Asthma and Allergic Disease Center Awards. Each grant will have a duration of not more than five years. Funding beyond the first year of the grant will be contingent upon satisfactory progress during the preceding year.

The receipt date for applications will be October 15, 1979. They will undergo initial review in February-March and subsequent review by the National Advisory Allergy and Infectious Disease Council in May 1980. September 1, 1980, will be the earliest starting date for successful applicants.

Grant funds may be utilized to support the research activities of scientific and professional personnel, administration, consultation services, central support services, equipment, supplies, travel, and publication costs. Support for research-related costs of patient involvement and medical care may be authorized. Since the program cannot provide funds for new construction, adequate physical facilities must be available for the primary needs of the Center. However, moderate alterations or renovations to

enhance clinical facilities may be allowed if they are necessary to meet objectives of the Center's program.

Only those institutions that can demonstrate expertise in both basic and clinical areas and can direct their resources toward a multifaceted attack on asthma or the other allergic diseases can be supported under the provisions of the AADC program.

REVIEW PROCEDURES AND CRITERIA

For preliminary screening by NIAID staff, a "letter of intent" must first be prepared by the prospective program director.

Letters of intent should cover the following points:

1. a brief description of the intended project
2. a description of available laboratory facilities
3. a brief description of ongoing basic immunologic and clinical research relating to asthma, allergy, or hypersensitivity with especial reference to any studies of the immediate type
4. a brief description or reference to published research works by the investigators on asthma, allergy, or hypersensitivities especially pointing out those that may relate to the immediate type and identification of existing projects and sources of support
5. a description of all clinic facilities available for use by the proposed Center
6. specific information on the institution's present patient load and projections for patient involvement in clinical investigation
7. the academic positions and major research interests of the program director and his professional staff who will be involved in the work of the Asthma and Allergic Disease Center
8. collaborative possibilities with other area laboratories and investigators and delineation of the roles and manner of anticipated participation and interaction of the principal investigators, consultants, and collaborators.

Letters of intent are due no later than August 15, 1979, and upon receipt will be screened by NIAID staff to determine the eligibility and suitability of the projected proposals for the Asthma and Allergic Disease Centers program.

Inquiries and letters should be directed and addressed to:

Robert Goldstein, M.D., Ph.D.
Chief, Allergy and Clinical Immunology Diseases Program
National Institute of Allergy and Infectious Diseases
Room 755, Westwood Building
National Institutes of Health
Bethesda, Maryland 20205

Telephone: (301) 496-7104

CONSEQUENCES OF LACK OF RESPONSIVENESS TO THE RFA OR LATE SUBMISSION

Based upon the letter of intent, potential applicants will be promptly advised whether or not their proposal is found to be within the research goals and scope of the program as defined in this RFA. Applicants will then have an opportunity to correct deficiencies or weaknesses and to restructure their submissions accordingly. Formal applications that are not responsive to the RFA or are not received by October 15, 1979, will not be accepted for review and will be returned to the applicant.

METHOD OF APPLYING

Before preparing an application, the prospective applicant should request from NIAID program staff a copy of the NIAID Information Brochure on Program Projects which contains details on the requirements for multi-disciplinary grant applications.

Use the standard research grant application form PHS 398. In addition to following accompanying format instructions for the development of a Center application, include expanded material listed above under the eight points for the "letter of intent". For purposes of identification and processing the words "ASTHMA AND ALLERGIC DISEASE CENTER" should be typed on the face page of the application and a brief covering letter should be attached indicating submission is in response to this NIAID announcement.

Forward to:

Division of Research Grants
National Institutes of Health
Room 240, Westwood Building
Bethesda, Maryland 20205

Please forward a copy (not the original) of the cover letter and the application face page to: (1) the NIAID Program Director in order to alert NIAID to the submission of the proposal, and (2) the Chief, Program and Project Review Branch, NIAID, Room 703, Westwood Building, National Institutes of Health, Bethesda, Maryland 20205.

REQUEST FOR RESEARCH GRANT APPLICATIONS: RFA

NIH-NIAID-79-6

NATIONAL INSTITUTE OF ALLERGY AND
INFECTIOUS DISEASES

ANNOUNCEMENT

TITLE: NEW INVESTIGATOR RESEARCH AWARDS IN TROPICAL DISEASES

Application receipt date, October 15, 1979.

I. BACKGROUND INFORMATION

The National Institute of Allergy and Infectious Diseases (NIAID) is initiating a New Investigator research award in tropical diseases. This NIAID program is intended to support new investigators during development of independent original research projects in tropical diseases.

Infectious diseases of the tropical developing countries have been a neglected area of international health. The most pervasive current health problem is widespread and debilitating third world diseases. More people suffer and die from tropical diseases than all other diseases combined, e.g. there are 150 million new cases of malaria, and in Africa alone one million children die each year of this disease. At least 200 million people have schistosomiasis, and about 300 million people are disfigured or blinded by filarial parasites. The prevalent nature of immune-related cutaneous disorders in tropical environments is also recognized and appreciated.

Parasites have become resistant to drugs; vectors have become resistant to insecticides; agricultural development has often helped create conditions conducive to the spread of tropical diseases; and massive control programs have been neglected due to apathy and/or increased costs. These problems have all contributed to an increase in the incidence of these diseases in developing countries. The U.S. has excellent biomedical research facilities in which sophisticated technologies could be developed and applied to the control of these diseases. One obstacle to the development and transfer of technology has been the paucity of competent investigators interested in these diseases; therefore, new investigators from many disciplines must be attracted to apply their skills.

II. RESEARCH GOALS AND SCOPE

These awards are designed to encourage new investigators in the discipline of tropical medicine to develop their research interests

This program is described in the Catalog of Federal Domestic Assistance, 13.856, and will be supported under authority of the Public Health Service Act, Section 301 (Public Law 78-410, 42 USC 241).

and capabilities in a multifaceted attack on the world's tropical diseases with emphasis on malaria, schistosomiasis, filariasis, trypanosomiasis, leprosy, leishmaniasis, and the immunology of these diseases. To help bridge the transition from training status to that of a productive investigator, this special grant program provides support for young scientists and physicians with meritorious research ideas.

III. MECHANISM OF SUPPORT

Beginning in fiscal year 1980, the NIAID plans to make 10 to 12 New Investigator Research Awards annually. Each award will have a duration of not more than three years. Funding beyond the first year of the grant will be contingent on satisfactory progress during the preceding year. To assess the effectiveness of the program in fulfilling its objectives the Institute intends, after termination of each grant, to follow the progress of the recipient for a period of six years to determine the impact of the initial support on the investigator's career; e.g. subsequent grant and contract support, scientific publications, and other professional activities. It is anticipated that the results achieved with this award, in a majority of cases, will provide the basis for successful competition in the regular research grant programs of the Institute.

The receipt date for applications will be October 15, 1979. They will be reviewed by study sections in February-March and by the National Advisory Allergy and Infectious Disease Council in May 1980. July 1, 1980, will be the earliest starting date for successful applicants.

Except where otherwise indicated in this announcement, the policies which apply to research project grants apply also to the NIAID New Investigator Research Awards. The award will provide support for a three year period in an amount not to exceed \$90,000 direct costs, of which no more than \$30,000 may be requested for any 12-month period. These grants are not renewable and because of their special nature, certain limitations are placed on the items which can be supported, as specified below:

Personnel

In no instance will the salary support of the investigator exceed \$21,000 per year from this grant. The effort of one part-time technical assistant may also be supported, if justified in terms of the proposed research.

Equipment

The facilities available should include most of the necessary equipment. Some specialized equipment essential to the specific research effort may, however, be justified. Only in unusual circumstances will equipment purchases be allowed in the third year of the award.

Supplies

The cost of necessary supplies must be detailed and justified.

Travel

Expenses to attend one national meeting closely related to the project may be requested for each 12-month period.

Hospitalization

Support for patient expenses may be requested but must be strongly justified if needed for the project.

Publication Costs

These will be allowable.

Other Expenses

If other items are necessary for performance of the research effort, these must be clearly justified in terms of that need.

Indirect Costs and Cost Sharing

These will be provided in accord with established DHEW policies for regular research grants. Cost sharing is required.

IV. REVIEW PROCEDURES AND CRITERIA

Method and Plan for Review

The grant proposals will be reviewed by the appropriate NIH initial review groups and by the National Advisory Allergy and Infectious Diseases Council.

Criteria for Review

The project proposed in a New Investigator Research Award application should be:

1. Relevant to basic and applied aspects of studies on infectious tropical diseases. Also relevant are studies concerned with humoral and cell mediated immune responses to the etiologic agents and studies focused upon or emphasizing the immunopathogenesis and the primary or secondary effects that these agents may have on the immune system.
2. A well-defined project to answer a specific scientific question or a pilot study, but not supplemental to a project supported by other funds.

3. Designed for completion within a 3-year period.
4. Acceptable in accordance with the customary criteria of scientific merit.

The Investigator Must:

1. Provide a satisfactory plan for completing the project within 3 years.
2. Submit with the application the names of three persons who are present or past supervisors or preceptors and who will forward letters attesting to the applicant's ability to undertake the project.
3. Have completed a two-year period of postdoctoral laboratory training by the time of the award, or have accumulated equivalent research experience.
4. Not be or have been the recipient of a Research Career Development Award nor the principal investigator on a research grant, research contract, or the equivalent, either at present or in the past; however, trainees or research fellows are not excluded.
5. Be a citizen or a non-citizen national of the United States or its possessions and territories, or have been lawfully admitted to the United States for permanent residence at the time of submitting the grant application.
6. Agree to keep the NIAID informed about scientific accomplishments, change in professional status, and change in institutional affiliation for a period of six years after the grant terminates.
7. Agree to devote at least 70 percent of his or her time to the project.

The applicant institution, through the chairman of the sponsoring department, must indicate its commitment to the project by:

1. Providing space and facilities necessary to pursue the project.
2. Releasing the principal investigator from other responsibilities for the proportion of time or effort to be devoted to the project.

Institutions may submit more than one application. Only United States institutions may apply.

Consequences of Lack of Responsiveness to the RFA

Applications judged by the NIH to be not responsive to the RFA, or applications received after October 15, 1979, will be returned to the applicant.

V. METHOD OF APPLYING

Applications must be submitted on form PHS 398. Application kits containing this form may be obtained from the institution's application control or business office. The face page of the original copy and the folder in which it is submitted should be clearly labeled "IN RESPONSE TO RFA NIH-NIAID-79-6."

The chairman of the department sponsoring the research should submit a signed statement as part of the application, detailing the commitments made to the project.

The completed grant application should be mailed to:

Division of Research Grants
National Institutes of Health
Room 240, Westwood Building
Bethesda, Maryland 20205

Upon receipt of each application at NIH, a postal card acknowledging receipt will be mailed to the investigator. When the application has been assigned to an initial review group (study section) the applicant will again be notified by mail.

The applicant must ask three present or former supervisors or preceptors to send a letter to the review group in the Division of Research Grants attesting to his/her potential for conducting research, but these need not comment on the merit of the specific project. These reference letters should not be mailed to NIH until the applicant has received the middle part of the Receipt Card indicating the review group (study section) and its address. The applicant is responsible for making the necessary arrangements to assure that the reference letters are mailed directly to the review group. (NIH staff is unable to respond to individual inquiries concerning the receipt of these reference letters.)

Questions or requests for further information should be directed to the staff of the NIAID program to which the application will be assigned.

For applications concerning the infectious aspects and pathogenesis of tropical diseases, contact:

Dr. Kenneth O. Phifer
Molecular Microbiology
and Parasitology Branch
Microbiology and Infectious
Diseases Program
NIAID
Room 737, Westwood Building
Bethesda, Maryland 20205

Telephone: (301) 496-7114

REQUEST FOR RESEARCH GRANT APPLICATIONS: RFA

NIH-NIDR-NCP-79-2

NATIONAL INSTITUTE OF DENTAL RESEARCH

ANNOUNCEMENT

TITLE: STREPTOCOCCAL IgA PROTEASE ACTIVITY IN THE HUMAN ORAL CAVITY

Application receipt date, November 15, 1979.

The National Caries Program (NCP) of the National Institute of Dental Research is a special initiative research and development effort to devise methods to eliminate dental caries as a major health problem by preventing the disease. One of the principal strategies of this program is to combat the responsible microbial agent or agents. This includes efforts to induce or possibly enhance host immunity mediated by oral immunoglobulins. However, recent studies have shown that the antibody activities of serum IgA and secretory IgA may be impaired due to inactivation of the immunoglobulins by bacterial enzymes. These proteolytic enzymes, specific for IgA, are found only in a limited number of microorganisms, including some strains of Streptococcus sanguis commonly found in the human oral cavity. Additional information is required concerning the properties and functional significance of this microbial enzyme, which has the potential to diminish the ability of immunoglobulins to combat cariogenic organisms in the mouth.

Individual grant applications are invited for research on this topic. Proposed studies should emphasize the streptococcal enzyme, secretory IgA of the mouth and factors which may influence their interaction in the human oral cavity. Initially, there will be a single competition with an application receipt date of November 15, 1979; this RFA may be re-issued at a later date.

BACKGROUND INFORMATION

Salivary antibodies of the IgA isotype may play a significant role in reducing the development of dental caries. Although no direct evidence for such a protective effect in humans is available, immunization trials using streptococcal antigens in experimental animals have demonstrated elevated levels of IgA antibodies associated with reductions in the incidence and severity of dental caries induced by cariogenic bacterial challenge.

Recent studies have shown that some strains of S. sanguis, indigenous to the human oral cavity, excrete proteases which specifically cleave the IgA₁ subclass, but not the IgA₂ subclass, of this immunoglobulin in human

The legislative authority for this program is found in Section 301 of the Public Health Service Act (Public Law 78-410, 42 USC 241, 42 CFR 52). The Catalog of Federal Domestic Assistance number is 13.840.

saliva and serum. Cleavage produces intact Fab α and Fc α fragments, and although antigen binding by the Fab α fragment occurs, antibody activity is greatly reduced or lost. Streptococcus sanguis is often found in appreciable numbers in human dental plaque. It is not believed to be a prime cariogen, but is often associated with cariogenic streptococci and lactobacilli. The production of this protease by this organism may explain why dental caries persists in the presence of antibody directed to cariogenic microorganisms. Little is known of the distribution of this enzyme in human saliva, dental plaque, gingival crevicular fluid and on adjacent oral surfaces. Why certain strains produce this enzyme and others of the same species do not is puzzling. Studies are needed on IgA protease enzymology and on the influence of oral factors or cultural conditions on its activity. Information on the IgA subclass distribution in saliva is required to approach the question of IgA protease interference with secretory immunity. The purpose of this RFA is to solicit proposals to elucidate the role of IgA protease activity in the human oral cavity.

GENERAL INFORMATION

This RFA identifies the scope of the program's interest in the topic. It leaves the choice of research objectives, identification of specific aims, development of appropriate protocols and methodology, and the procedures for analysis and interpretation of data to the investigator's initiative. However, once an award is made under this program, any substantial modification of the research originally proposed must be mutually agreed upon by the investigator and the National Caries Program.

Although funds have been allocated for this program in the NCP financial plans for fiscal years 1980 through 1983, award of grants resulting from this RFA is contingent upon receipt of appropriated funds. Requests should be restricted to three years of research support.

All policies and requirements which govern the research grant programs of the PHS, including cost sharing, will apply to grants made as a result of responses to this invitation.

APPLICATION PROCEDURE

Applications should be prepared on form PHS 398, the application form for the traditional research grant, which can be obtained from the Division of Research Grants (DRG), NIH, or from the institution's application control office. The first (face) page of the application and the outside of the mailing package should be labeled "RESPONSE TO RFA NIH-NIDR-NCP-79-2 IgA PROTEASE ACTIVITY." The receipt date, for an original and six copies of the application, is on or before November 15, 1979. Applications should be sent to:

Division of Research Grants
National Institutes of Health
Room 240, Westwood Building
5333 Westbard Avenue
Bethesda, Maryland 20205

Proposals judged nonresponsive to this RFA by the DRG and the NIDR will be processed as regular research grant applications, as will applications received after November 15, 1979. The DRG will not accept an application in response to this announcement that is the same as one concurrently being considered by any other NIH awarding unit.

REVIEW PROCEDURES

Applications in response to this invitation will be reviewed in competition with each other. The initial review of the applications for scientific and technical merit will be by an appropriate study section of the DRG; secondary review will be by the National Advisory Dental Research Council in May 1980.

Applicants will be informed of the outcome of the review shortly thereafter. The earliest possible funding date will be July 1, 1980.

Questions concerning this RFA and other grant-related activities of the National Caries Program should be addressed to:

Chief, Caries Research Grants & Contracts Branch
National Caries Program
National Institute of Dental Research
Room 522, Westwood Building
5333 Westbard Avenue
Bethesda, Maryland 20205

Telephone: (301) 496-7884

CLINICAL TRIAL ACTIVITY



In a notice published August 4, 1978 (*NIH Guide for Grants and Contracts*, Vol. 7, No. 10), the grantee and contractor community was invited to comment on an earlier policy recommendation of the NIH Clinical Trials Committee, which would have required the establishment of a data and safety monitoring committee for every clinical trial sponsored by NIH. The purpose of the proposed policy was to assure the prompt recognition of causes for the modification or termination of ongoing trials.

The committee has reconsidered the proposed recommendation in light of the many interested and helpful comments that were received. It has adopted, and recommended to the Director, NIH, to the Office for Protection from Research Risks, and to all Institutional Review Boards established pursuant to the HEW Regulations for the Protection of Human Subjects (45 CFR 46), the following statement:

1. Every clinical trial should have provision for data and safety monitoring.
2. The mechanism(s) for data and safety monitoring should be presented to and approved by the Institutional Review Board as an integral part of its review of the project proposal.

A variety of types of monitoring may be anticipated depending on the nature, size, and complexity of the clinical trial. In many cases, the principal investigator would be expected to perform the monitoring function.

3. Large or multi-center trials, and trials in which the protocol requires blinding of the investigators, should have a data and safety monitoring unit.

The unit should consist of clinicians expert in the disease under investigation, biostatisticians, and scientists from other pertinent disciplines. Physicians engaged in the care of study patients or directly responsible for evaluating clinical status are excluded.

The committee wishes to express its appreciation for the interest, support, and assistance it has received in its deliberations on this issue.

Robert S. Gordon, Jr., M.D.
Chairman
NIH Clinical Trials Committee

UPDATE ON FORSHAM v. CALIFANO

(Vol. 7, No. 11, August 18, 1978)

NOTICE

RELEASE OF INFORMATION

On July 11, 1978, the United States Court of Appeals for the District of Columbia upheld a lower court decision that the public normally has no right under the Freedom of Information Act to raw data in the hands of university scientists. The data in question had been collected under NIAMDD grants as part of the University Group Diabetes Program (UGDP).

After losing in the Court of Appeals, those who had requested the data asked the United States Supreme Court to review the Court of Appeals decision. On May 14 the Supreme Court agreed to do so.

This does not mean that the Supreme Court will necessarily overturn the Court of Appeals decision, but simply that at least four of the Supreme Court Justices felt the case involved important issues which should be considered by the Supreme Court. The case will probably be argued before the Supreme Court in the Fall, with a decision by June 1980.