

National Institute of Allergy and Infectious Diseases

FY 2006
FACT BOOK



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health

National Institute of Allergy and Infectious Diseases

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TABLE OF CONTENTS

Letter from the Director	i
Introduction	ii
Location of NIAID in the U.S. Department of Health and Human Services.....	1
NIAID Organizational Chart.....	2
Budget In Review.....	3
NIAID Appropriations History.....	4
NIAID Funding by Budget Mechanism.....	5
NIAID Mission Areas	6
NIAID Funding By Budget Mechanism (Mission Areas)	7
NIAID Research Project Grants: FY 2005 and FY 2006.....	8
Competing and Noncompeting RPGs	9
NIAID Research Project Grants.....	10
NIAID Training and Career Development Awards	11
NIAID-Supported National Research Service Awards.....	12
Selected NIAID Disease Funding	13
Extramural Research by State–FY 2006	14
NIAID International Research Funding.....	15
NIAID Funding and Positions	16
NIH Management Fund, Service & Supply Fund,and Roadmap Contributions: FY 2006.....	17
Technology Transfer and Partnerships	18
National Advisory Allergy and Infectious Diseases Council.....	19
Directory of Key NIAID Personnel.....	20
Location of Buildings Occupied by NIAID Personnel.....	22
Glossary	

Letter from the Director

In 2008, the National Institute of Allergy and Infectious Diseases (NIAID) will celebrate 60 years of research advances in microbiology, infectious diseases, immunology, and related disciplines. During these remarkable six decades, NIAID-supported scientists have made numerous breakthroughs in fundamental research and translated these findings into diagnostic tools, therapies, and vaccines and other prevention measures that have helped prevent and alleviate pain and suffering around the world. The NIAID research program is predicated on the view that we live in a global community; we cannot separate the health problems of the United States from those of the rest of the world. Because of the enormous volume of international travel and trade, it is folly to think that we are isolated from health threats that might emerge in a distant country. In addition, in an era of the interdependence of nations brought on by globalization, healthy nations are critical to economic and political stability. Therefore, virtually all NIAID programs are devoted to improving health both domestically and abroad.

NIAID-sponsored research has led to dramatic progress against many important infectious diseases. For example, the development of more than 25 licensed medications against the human immunodeficiency virus (HIV) has greatly reduced HIV-related morbidity and mortality wherever these drugs have been used. The development of virtually all licensed vaccines was due directly or indirectly to NIAID-sponsored research at some stage along the process from basic research and concept development up to clinical trials, and the list of diseases that can be prevented by vaccination continues to grow. Ongoing research holds great promise for new interventions to diagnose, treat and prevent HIV, malaria, tuberculosis and other major infectious diseases, as well as emerging infectious diseases, such as those caused by novel influenza viruses or agents of bioterrorism.

NIAID advances in understanding and fighting immune-mediated diseases also have been substantial. NIAID-supported research has led to extraordinary growth in our conceptual understanding of the immune system and the pathogenesis of immune-mediated diseases. Fundamental research in turn has been the springboard for the development of many useful therapies. For instance, we now have powerful treatments that selectively target several immune system molecules that cause inflammation, a hallmark of many autoimmune diseases. NIAID-sponsored researchers are developing novel ways of selectively blocking inappropriate or destructive immune responses, while leaving protective immune responses intact, an area of research known as tolerance induction. Many of the world's major diseases—including infections, cancer, autoimmune disorders and allergy—involve the immune system, and our continued progress in understanding basic immune mechanisms is essential for developing new treatments and preventions for diseases that affect millions worldwide.

Many challenges to public health remain, and new ones are constantly emerging. However, with a strong research base, talented investigators in the United States and abroad, and the availability of powerful new research tools, I know that our many research programs will continue to contribute to saving countless lives in the United States and around the world.



Anthony S. Fauci, M.D.

Director

National Institute of Allergy and Infectious Diseases

INTRODUCTION

The National Institute of Allergy and Infectious Diseases (NIAID) is part of the National Institutes of Health (NIH), an agency of the U.S. Department of Health and Human Services (DHHS). NIAID supports basic and applied research on infectious and immune-mediated illnesses, such as the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), tuberculosis, malaria, autoimmune disorders, asthma, and allergies.

Through its intramural and extramural research programs, NIAID contributes substantially to the global effort to identify infectious agents, decipher how they cause disease, and develop preventive measures and treatments. NIAID research has led to advances that have improved the health of millions of people in the United States and worldwide. These efforts support the DHHS goal of enhancing the capacity and productivity of the Nation's health science researchers to prevent, diagnose, and treat disease and disability.

Within NIH, NIAID carries out a comprehensive research program on infectious and immune-mediated diseases—with the flexibility to redirect research quickly to new disease threats as they emerge. In recent years, NIAID's research portfolio has expanded considerably in response to challenges such as bioterrorism, emerging and re-emerging infectious diseases, and the increase in the prevalence of asthma in children. The growth of NIAID programs also has been driven by unprecedented scientific opportunities in the core NIAID disciplines of microbiology, immunology, and infectious diseases.

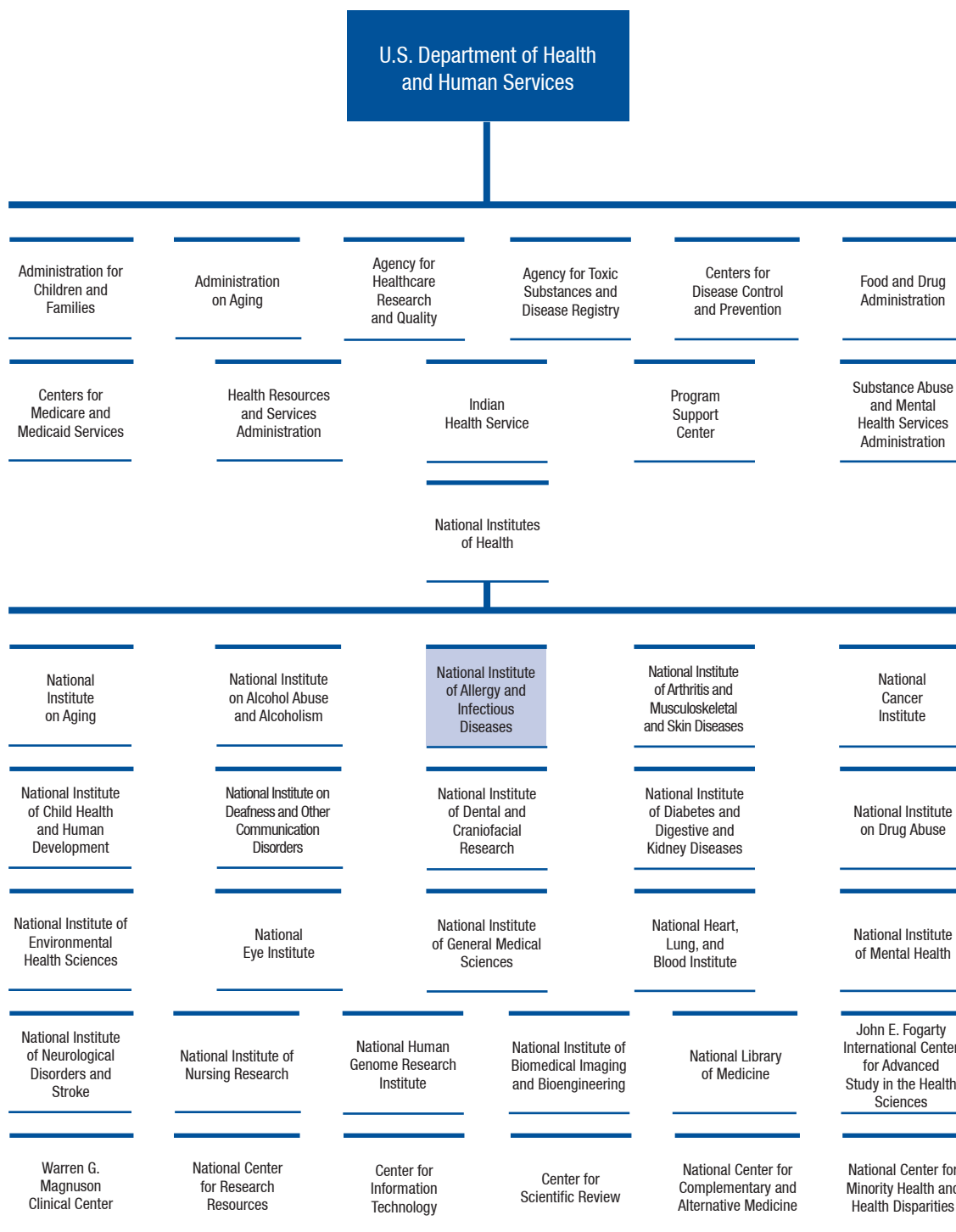
The threat of bioterrorism has had a tremendous impact on NIAID's agenda. The investment in biodefense research and development will benefit other areas of medicine, as many of the organisms under study are significant public health threats in the United States and throughout the world. Research

on microbial biology and advances in developing diagnostics, vaccines, and therapies will have direct relevance to many naturally occurring diseases. Basic research on natural defenses against infection will improve our understanding of the human immune system, which can lead to improved treatment and prevention of immune-mediated diseases such as systemic lupus erythematosus and rheumatoid arthritis. And improved understanding of the immune system will assist in the search for preventions, treatments, and cures for diseases such as cancer and allergic diseases, as well as for preventing rejection of transplanted organs.

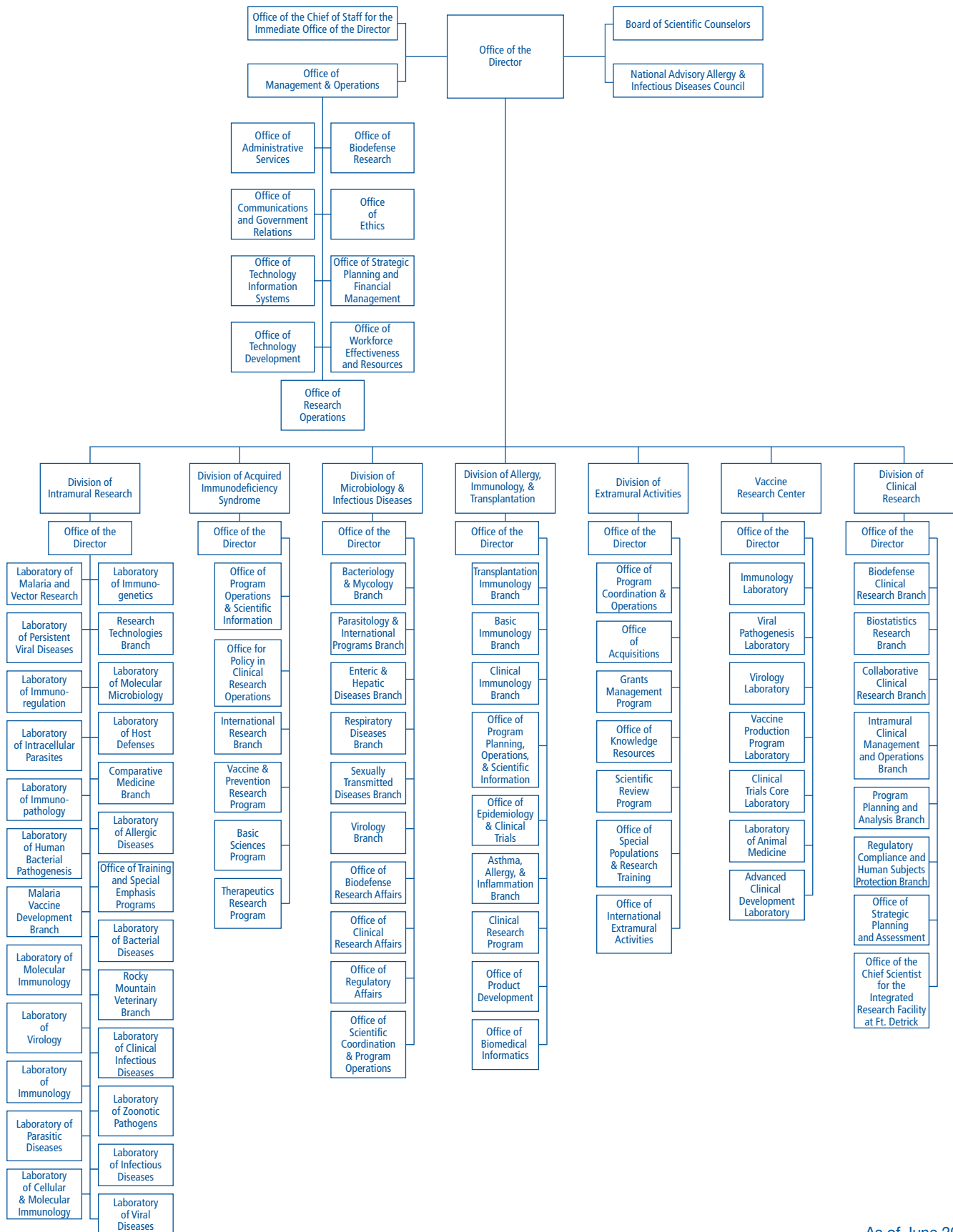
NIAID has taken the lead on research into HIV/AIDS since it first emerged 25 years ago. Because of the unique nature of HIV—the way the virus enters a cell, causes infection, affects every organ system, and unleashes opportunistic infections and cancers—AIDS research is unraveling mysteries surrounding many other diseases. AIDS research has led to the development of drugs that have transformed hepatitis B treatment, as well as therapies for opportunistic infections that afflict people undergoing chemotherapy for cancer or receiving immunosuppressive therapy following organ transplantation. It is likely to produce more effective approaches to treating diseases that involve malfunctioning immune responses, including allergies, multiple sclerosis, type 1 diabetes, rheumatoid arthritis, and lupus.

The new NIAID *Fact Book* provides expanded information about the organization and staff of NIAID; the Institute's budget and funding history; and its extramural grants, contracts, and research training programs. Previously, this information was included in the NIAID *Profile*, which also described the Institute's activities in basic research and clinical investigation and provided overviews of the Institute's major accomplishments and goals. A publication describing NIAID's scientific programs is forthcoming.

LOCATION OF NIAID IN THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



NIAID ORGANIZATIONAL CHART



BUDGET IN REVIEW

This report provides a summary of the distribution of the FY 2006 budget among the various National Institute of Allergy and Infectious Diseases (NIAID) research program and funding mechanisms, funding policies influencing grant awards, and comparisons with prior year allocations. Additional information on the NIAID budget and grants is accessible through the NIAID Home Page (www.niaid.nih.gov).

Summary

- For the period FY 1997-2006, the NIAID appropriation grew 249%.
- Funds available to NIAID in FY 2006 totaled \$4.412 billion, an increase of \$8.9 million or 0.2% over FY 2005.
- With less than a \$9 million increase over FY 2005, the NIAID reallocated funds to ensure that Research Project Grants (RPGs) continued to be the highest priority.
- An increase of nearly \$75 million was provided to RPGs, a growth of 3.4% over FY 2005.
- Within the RPG category, non-competing grants decreased by approximately \$30 million, while competing grants increased by more than \$107 million.
- Of the total NIAID budget, 53.2% was allocated to RPGs.
- The number of competing RPGs requested has more than doubled since FY 2002.
- The total number of RPGs funded was 4,323.
- Approximately 36% of the total NIAID budget supported ongoing, non-competing (Type 5) RPGs.
- Funds for the three mission areas were distributed approximately equally: Infectious and Immunologic Diseases (IID), 29.0%; AIDS, 33.7%; and Biodefense, 37.3%.

- Extramural construction decreased from \$148.8 million in FY 2005 to \$29.7 million in FY 2006. As the planned need for extramural construction funds dropped, funds were shifted to support research.
- In addition to the 1,259 training positions funded in FY 2006, the Institute uses other mechanisms to train scientists, including RPGs, for which data are not available.
- More than 80% of the NIAID total budget went to domestic institutions in 49 States, the District of Columbia, and Puerto Rico.
- NIAID supported research in more than 95 countries in FY 2006.

FY 2006 Financial Management Plan

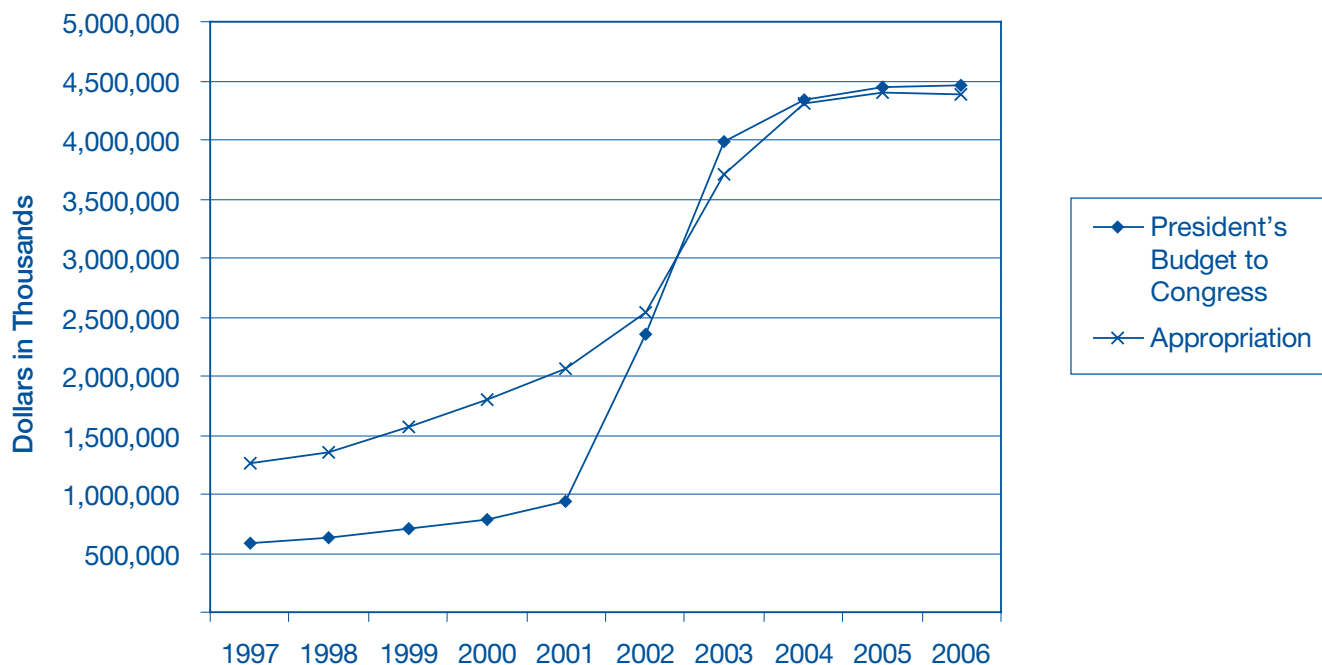
Pursuant to NIH budget policy:

- **Renewal Grants:** Capped at 20%—applicants could request up to 20% more than the level of the previous grant.
- **Noncompeting Nonmodular Awards:** NIAID funded all years at 97.65% of the amount in the Notice of Grant Award for the previous year.
- **Noncompeting Nonmodular Awards:** issued earlier this fiscal year at lower levels: NIAID added funds to reach the 97.65% level.
- **Competing Applications:** No average programmatic reductions were taken.

Traditionally, NIAID sets aside funds for Selective Pay and Bridge Awards:

- **Selective Pay:** NIAID set aside \$9 million (\$3 million for each extramural program division). Note: Investigators could not apply for selective pay funding, but had to be nominated by NIAID program officers.
- **R-56 Bridge Awards:** NIAID set aside \$18 million (\$6 million for each extramural division). Note: Investigators could not apply for R-56 Bridge Awards, but had to be nominated by NIAID program officers.

NIAID Appropriations History FY 1997 – FY 2006



Fiscal Year	President's Budget to Congress*	Appropriation * ¹
1997	\$ 584,362 ²	\$1,257,794
1998	634,272 ²	1,352,119
1999	703,723 ²	1,569,063
2000	789,156 ²	1,798,038
2001	935,166 ²	2,068,304
2002	2,355,325	2,534,539
2003	3,983,693 ³	3,706,722 ⁴
2004	4,335,255 ⁵	4,304,562 ⁶
2005	4,440,007 ³	4,402,841 ⁴
2006	4,459,395 ³	4,383,301 ⁴

*Dollars in Thousands

The NIAID appropriation has grown 249% over the past 10 years.

¹ Reflects enacted supplementals, rescissions, and reappropriations

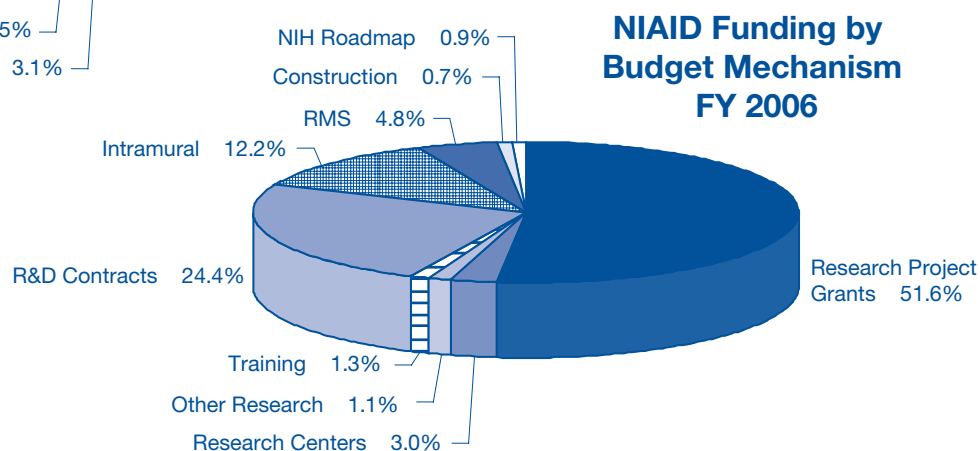
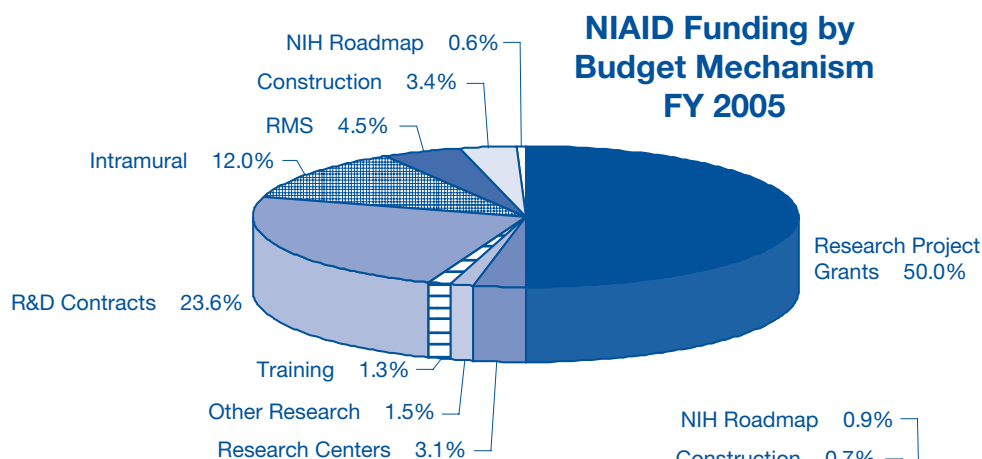
² Excludes funds for HIV/AIDS research activities consolidated in the NIH Office of AIDS Research

³ Includes \$100M for the Global Fund to Fight AIDS, Malaria, and Tuberculosis

⁴ Includes \$99M for the Global Fund to Fight AIDS, Malaria, and Tuberculosis

⁵ Includes \$150M for the Global Fund to Fight AIDS, Malaria, and Tuberculosis

⁶ Includes \$149M for the Global Fund to Fight AIDS, Malaria, and Tuberculosis



**NIAID Funding by Budget Mechanism
FY 2005 and FY 2006**

	FY 2005*	% of Total	FY 2006*	% of Total
Research Project Grants	\$2,201,442		\$2,275,434	
Noncompeting	1,608,960		1,578,340	
Competing	490,542		597,730	
Subtotal RPGs	\$2,099,502		\$2,176,070	
SBIR/STTR	101,940		99,364	
Total RPGs	\$2,201,442	50.0%	\$2,275,434	51.6%
<i>Research Centers:</i>	134,648	3.1%	132,279	3.0%
<i>Other Research:</i>	66,860	1.5%	49,779	1.1%
<i>Training</i>	59,049	1.3%	56,126	1.3%
<i>R&D Contracts**</i>	\$1,038,053	23.6%	1,076,893	24.4%
Subtotal Extramural	\$3,500,052	79.5%	\$3,590,511	81.4%
Intramural	527,708	12.0%	540,118	12.2%
RMS	199,073	4.5%	212,872	4.8%
Construction	\$ 148,800	3.4%	\$ 29,700	0.7%
Subtotal	\$4,375,633	99.4%	\$4,373,201	99.1%
NIH Roadmap	27,208	0.6%	38,567	0.9%
NIAID Total	\$4,402,841	100.0%	\$4,411,768	100%

*Dollars in Thousands; reflects actual obligations

**Includes Global Fund to Fight AIDS, Malaria, and Tuberculosis

NIAID MISSION AREAS

Funding for NIAID falls into three mission areas:

- HIV/AIDS
- Biodefense (BioD)
- Infectious and immunologic diseases (IID)

Congress provided NIAID its first appropriation for biodefense research in FY 2003, \$1.2 billion.

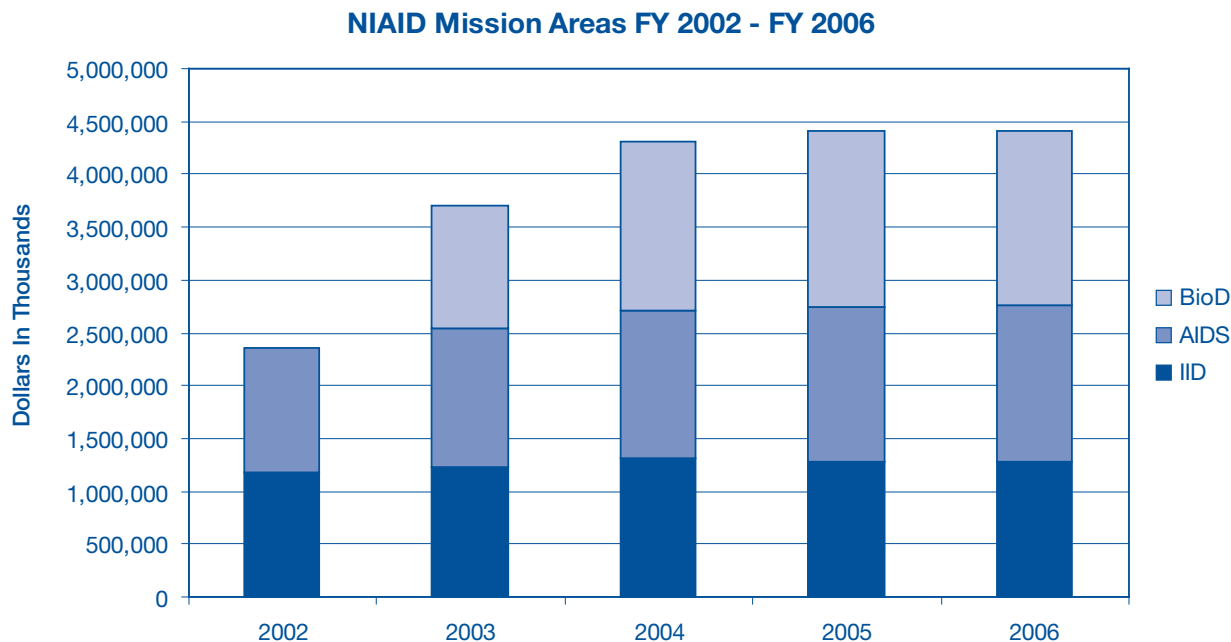
(Dollars in Thousands)

	2002	2003 ¹	2004 ^{1,2}	2005 ^{1,2}	2006 ^{1,2}
AIDS	\$1,186,494	\$1,311,274	\$1,397,370	\$1,459,642	\$1,488,377
BioD	-	1,162,267	1,599,896	1,658,211	1,646,702
IID	1,178,285	1,232,598	1,307,890	1,284,988	1,276,689
Total	\$2,364,779	\$3,706,139	\$4,305,156	\$4,402,841	\$4,411,768

Reflects Actual Obligations.

¹ Includes Global Fund to Fight AIDS, Malaria, and Tuberculosis

² Includes NIH Roadmap



FY 2006 Fact Book

NIAID FUNDING BY BUDGET MECHANISM <i>(Dollars in Thousands)</i> AIDS			
	Fiscal Year 2006 Actual		
	<u>Number</u>	<u>Dollars</u>	<u>% of Total</u>
Noncompeting	890	\$ 621,300	
Competing	249	267,034	
Subtotal - RPGs	1,139	888,334	
SBIR/STTR	32	13,260	
Total - RPGs	1,171	\$ 901,594	61%
Centers	19	24,142	2%
Other	161	20,476	1%
Training	185	9,302	1%
Contracts	77	292,322	19%
Total - Extramural		\$1,247,836	84%
Intramural		166,517	11%
RMS		61,050	4%
Construction		-	0%
Roadmap		12,974	1%
Global Fund		-	0%
Total		\$1,488,377	100%

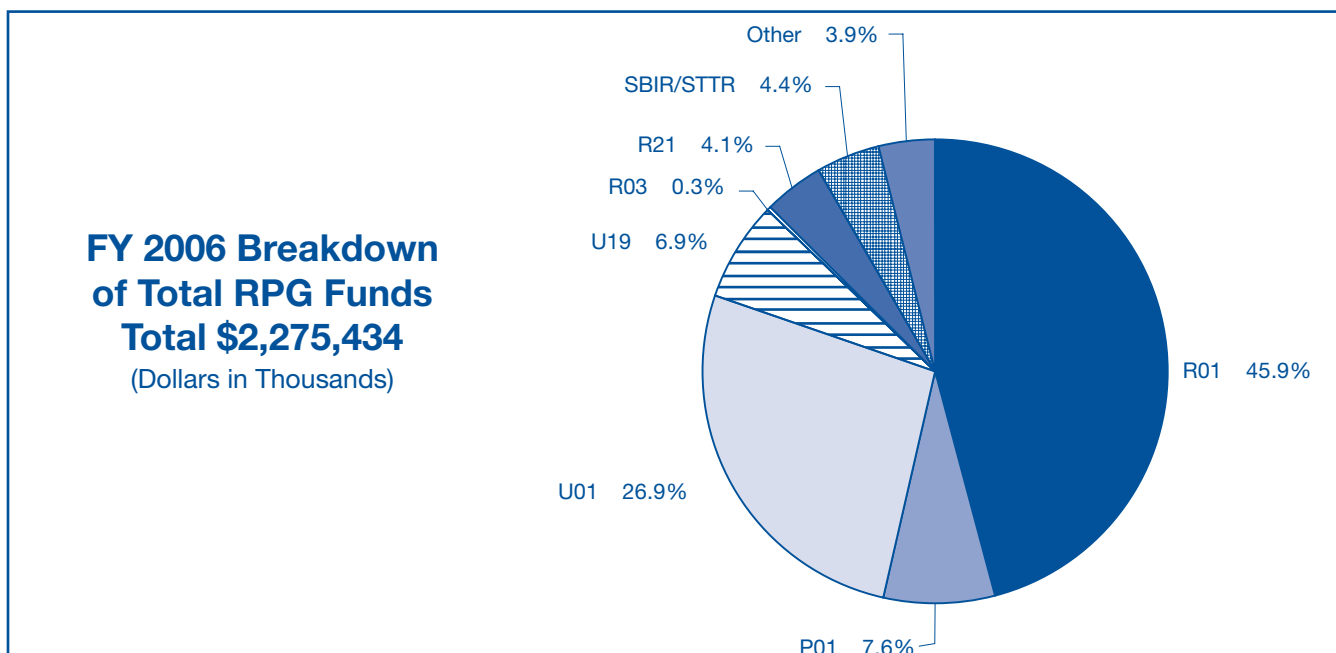
NIAID FUNDING BY BUDGET MECHANISM <i>(Dollars in Thousands)</i> BIODEFENSE			
	Fiscal Year 2006 Actual		
	<u>Number</u>	<u>Dollars</u>	<u>% of Total</u>
Noncompeting	706	\$ 378,779	
Competing	302	146,303	
Subtotal - RPGs	1,008	525,082	
SBIR/STTR	98	52,404	
Total - RPGs	1,106	\$ 577,486	35%
Centers	11	105,853	6%
Other	60	5,973	.5%
Training	161	7,197	.5%
Contracts	130	572,995	35%
Total - Extramural		\$1,269,504	77%
Intramural		230,543	14%
RMS		102,533	6%
Construction		29,700	2%
Roadmap		14,422	1%
Global Fund		-	0%
Total		\$1,646,702	100%

NIAID FUNDING BY BUDGET MECHANISM <i>(Dollars in Thousands)</i> IID			
	Fiscal Year 2006 Actual		
	<u>Number</u>	<u>Dollars</u>	<u>% of Total</u>
Noncompeting	1,469	\$ 578,261	
Competing	498	184,393	
Subtotal - RPGs	1,967	762,654	
SBIR/STTR	79	33,700	
Total - RPGs	2,046	\$ 796,354	62%
Centers	2	2,284	0%
Other	192	23,330	2%
Training	912	39,627	3%
Contracts	49	112,576	9%
Total - Extramural		\$ 974,171	76%
Intramural		143,058	11%
RMS		49,289	4%
Construction		-	0%
Roadmap		11,171	1%
Global Fund		99,000	8%
Total		\$1,276,689	100%

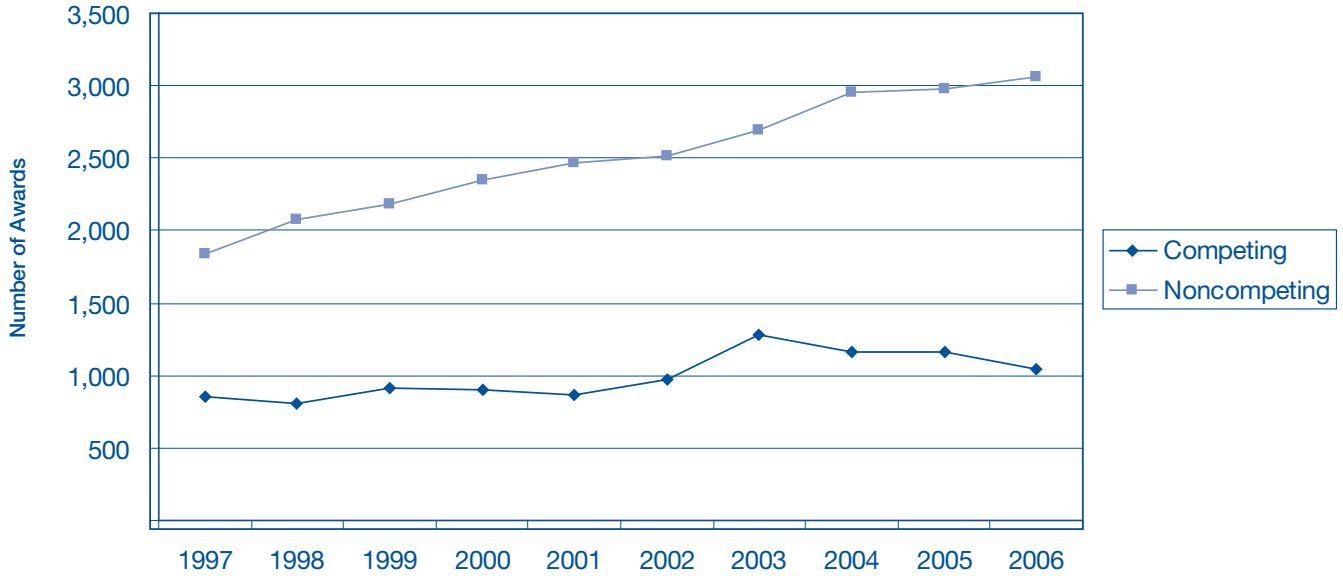
NIAID Research Project Grants: FY 2005 and FY 2006
(Dollars in Thousands)

	FY 2005		FY 2006	
	No.	Amount	No.	Amount
Total funding for RPGs	4,363	\$ 2,201,442	4,323	\$ 2,275,434
SBIR/STTR	222	101,940	209	99,364
Funding for RPGs w/out SBIR/STTR Program	4,141	2,099,502	4,114	2,176,070
Continuation or noncompeting grants funded	2,977	1,356,809	3,065	1,468,333
Competing grants funded	1,164	490,541	1,049	597,730
Admin. Supplements	(151)	252,151	(148)	110,007
Funds set aside within competing dollars for:				
Grants within paylines:	1,026	\$ 425,422	918	\$ 551,839
Traditional R01	550	197,788	508	194,998
Non-R01	327	132,094	213	51,331
Program Projects (P01)	9	10,925	10	19,034
RFA Grants	140	84,615	187	286,476
Discretionary	138	\$ 65,119	131	\$ 45,891
Competing application requests for RPGs	4,611	\$ 539,045	5,104	\$ 898,161
Funding success rate	25.2%		20.6%	
Percentile funding for R01 Grants	18.0		14.0	
Percentile funding for new investigators			16.0	
Average cost—competing RPGs		421		570
*Adjusted average cost—competing RPGs		\$ 409		\$ 410

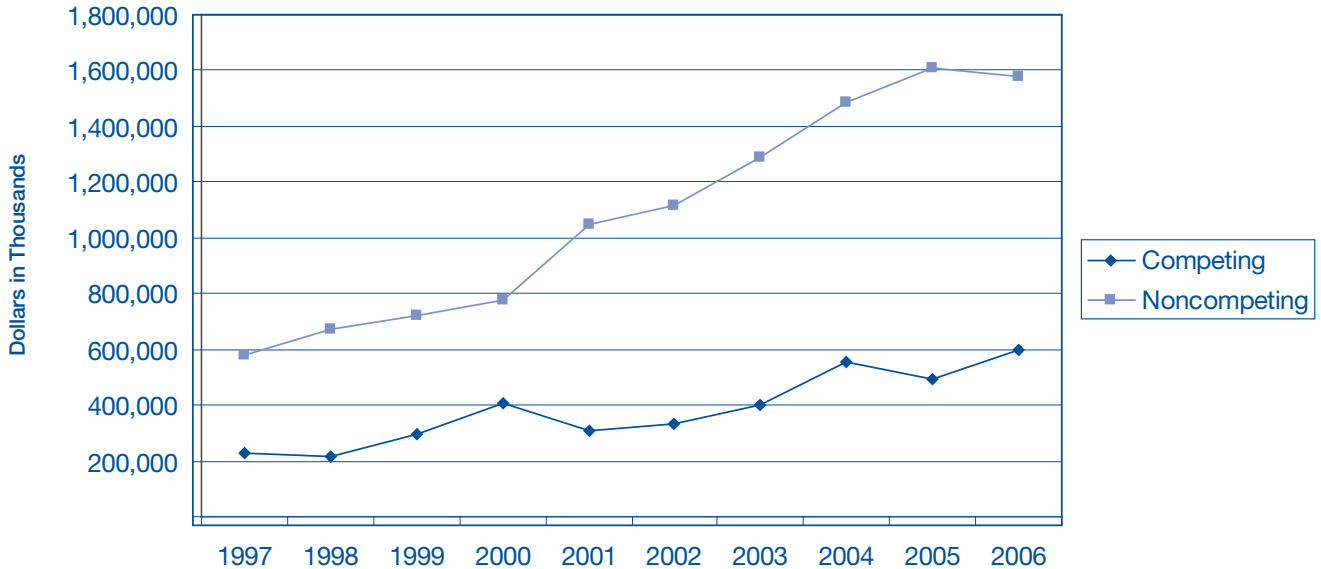
* The average cost of competing grants has been adjusted to account for large AIDS Clinical Trials Network awards in FY 2006 and the Center for HIV-AIDS Vaccine Immunology award in FY 2005. Excluding these large dollar awards allows for the comparison of the average cost of comparable competing RPG awards.



**Competing and Noncompeting RPGs
Number of Awards
FY 1997–FY 2006**

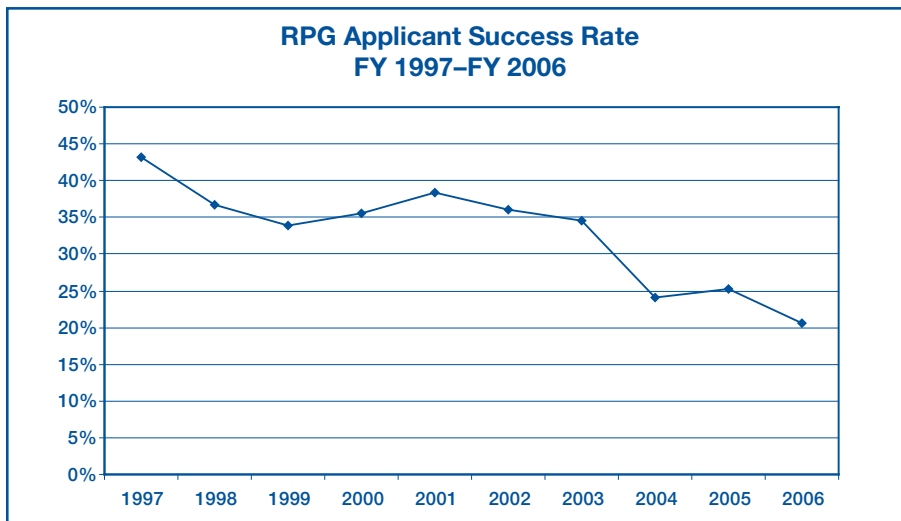
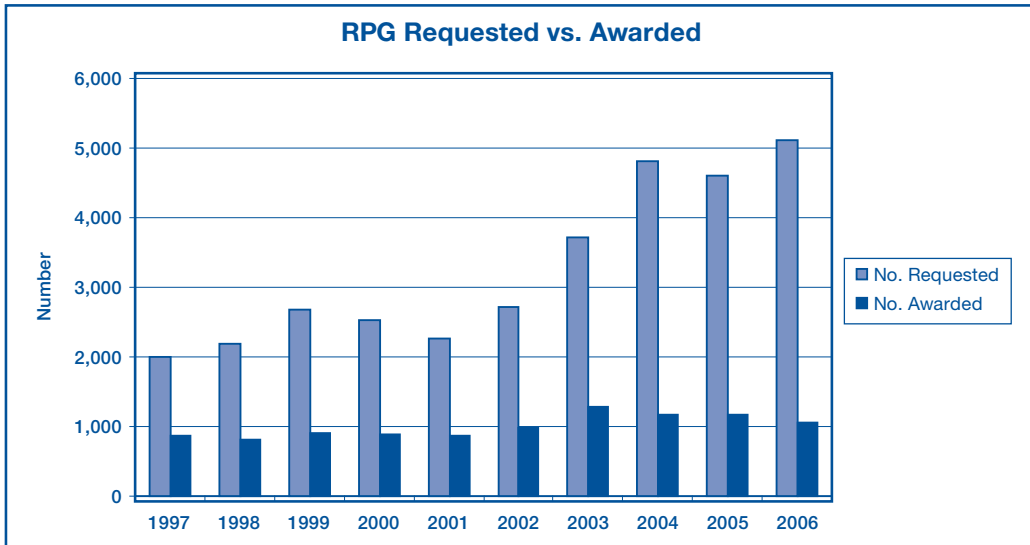


**Competing and Noncompeting RPGs
Funding
FY 1997–FY 2006**



NIAID Research Project Grants

	No. Requested	No. Awarded	Success Rate
1997	1,993	860	43.2%
1998	2,191	805	36.7%
1999	2,681	908	33.9%
2000	2,527	896	35.5%
2001	2,262	866	38.3%
2002	2,712	978	36.1%
2003	3,708	1,278	34.5%
2004	4,817	1,161	24.1%
2005	4,611	1,164	25.2%
2006	5,104	1,049	20.6%



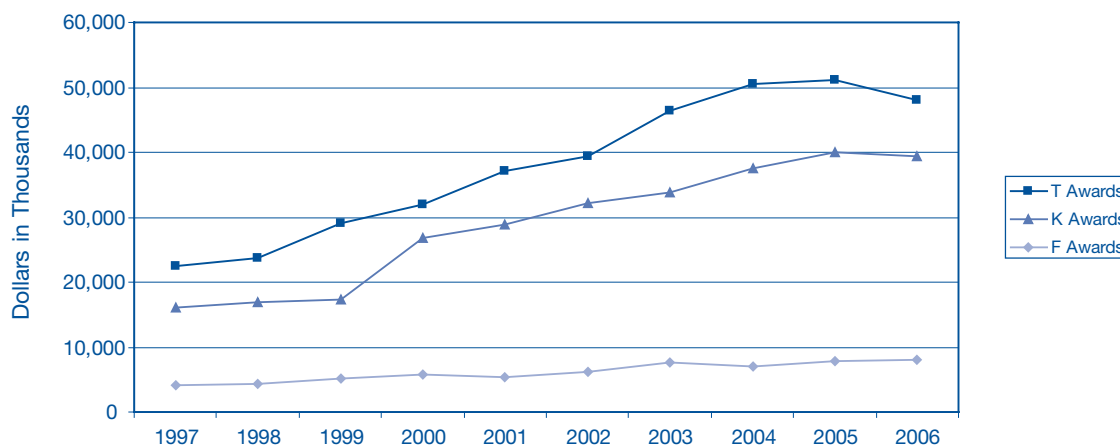
NIAID Training and Career Development Awards
(Dollars in Thousands)

Fiscal Year	T Awards (Institutional Awards)		K Awards (Career Awards)		F Awards (Individual Training Awards)	
	No. Training Positions	Dollars	No. Training Positions	Dollars	No. Training Positions	Dollars
1997	780	\$22,478	204	\$16,159	150	\$4,067
1998	808	23,738	211	16,908	151	4,350
1999	797	29,091	204	17,286	146	5,178
2000	852	32,035	241	26,863	161	5,709
2001	923	37,113	245	28,885	146	5,266
2002	919	39,474	272	32,237	153	6,162
2003	1,016	46,345	286	33,914	184	7,722
2004	1,087	50,550	314	37,521	173	7,100
2005	1,078	51,136	326	39,903	187	7,913
2006	1,079	48,128	319	39,470	180	7,998

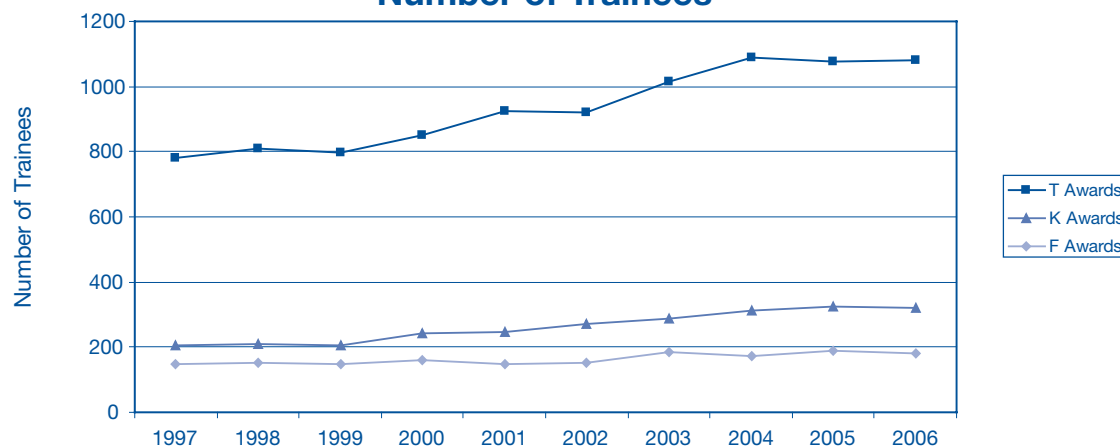
*Includes F31, F32, F33, F34, K01, K02, K06, K08, K22, K24, K25, T32, T35, and T36

There are other mechanisms used to train scientists, including RPGs, for which data are not available

Funding



Number of Trainees

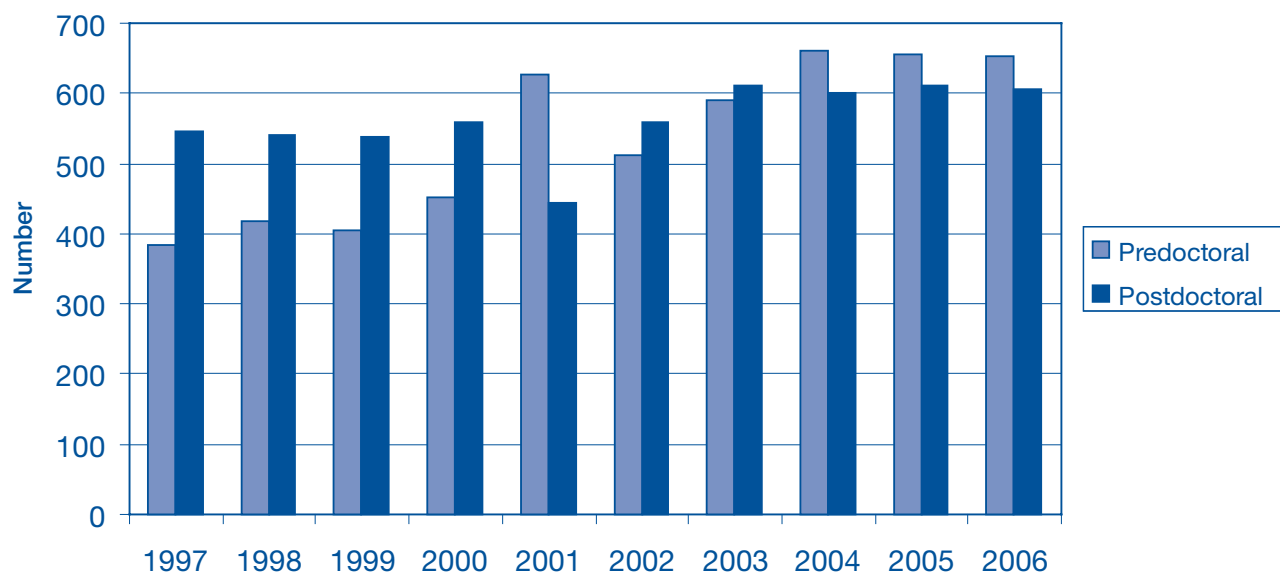


NIAID-Supported National Research Service Awards

Predocctoral and Postdoctoral Trainees Fiscal Year 1997–2006										
	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006
Predocctoral	384	418	404	453	626	513	590	660	655	652
Postdoctoral	546	541	539	560	443	559	610	600	610	607
Total	930	959	943	1,013	1,069	1,072	1,200	1,260	1,265	1,259

Includes Individual and Institutional Trainees

Number of NRSA Trainees



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Selected NIAID Disease Funding	FY 2006 Actual
Allergy	\$ 35,419
Anthrax	139,478
Antimicrobial Resistance	193,483
Asthma	73,313
Autoimmune Disease	147,737
Biodefense	1,728,241
Antibiotics/Antiviral	392,155
Basic Research	684,516
Chemical Countermeasures Research	49,473*
Diagnostic	53,841
Health Facilities Construction	29,700
Radiological/Nuclear Research	46,488*
Vaccines	472,068
Diabetes	24,485
Emerging Infectious Diseases	1,716,498
Food Safety	270,476
Hepatitis	62,598
HIV/AIDS	1,475,079
Infectious Diseases, excluding HIV/AIDS	2,209,794
Liver Disease	81,727
Lupus	34,440
Lyme Disease	18,928
Malaria	89,809
Microbicides	57,380
Multiple Sclerosis	21,997
Pandemic Influenza	196,251
Pediatric	212,182
Pediatric AIDS	104,583
Pneumonia & Influenza	315,523
Sexually Transmitted Infections	169,665
Smallpox	148,073
Transplantation	167,250
Tropical Medicine	531,287
Tuberculosis	119,772
Vaccine Development	1,094,143
Vaccine-Related (AIDS)	491,409
Vector-Borne Diseases	443,089
West Nile Virus	83,397

Dollars in Thousands

*NIAID coordinates/manages these programs on behalf of NIH

For a complete listing of NIH estimated funding for various diseases, conditions, and research areas go to the Web site <http://www.nih.gov/news/fundingresearchareas.htm>

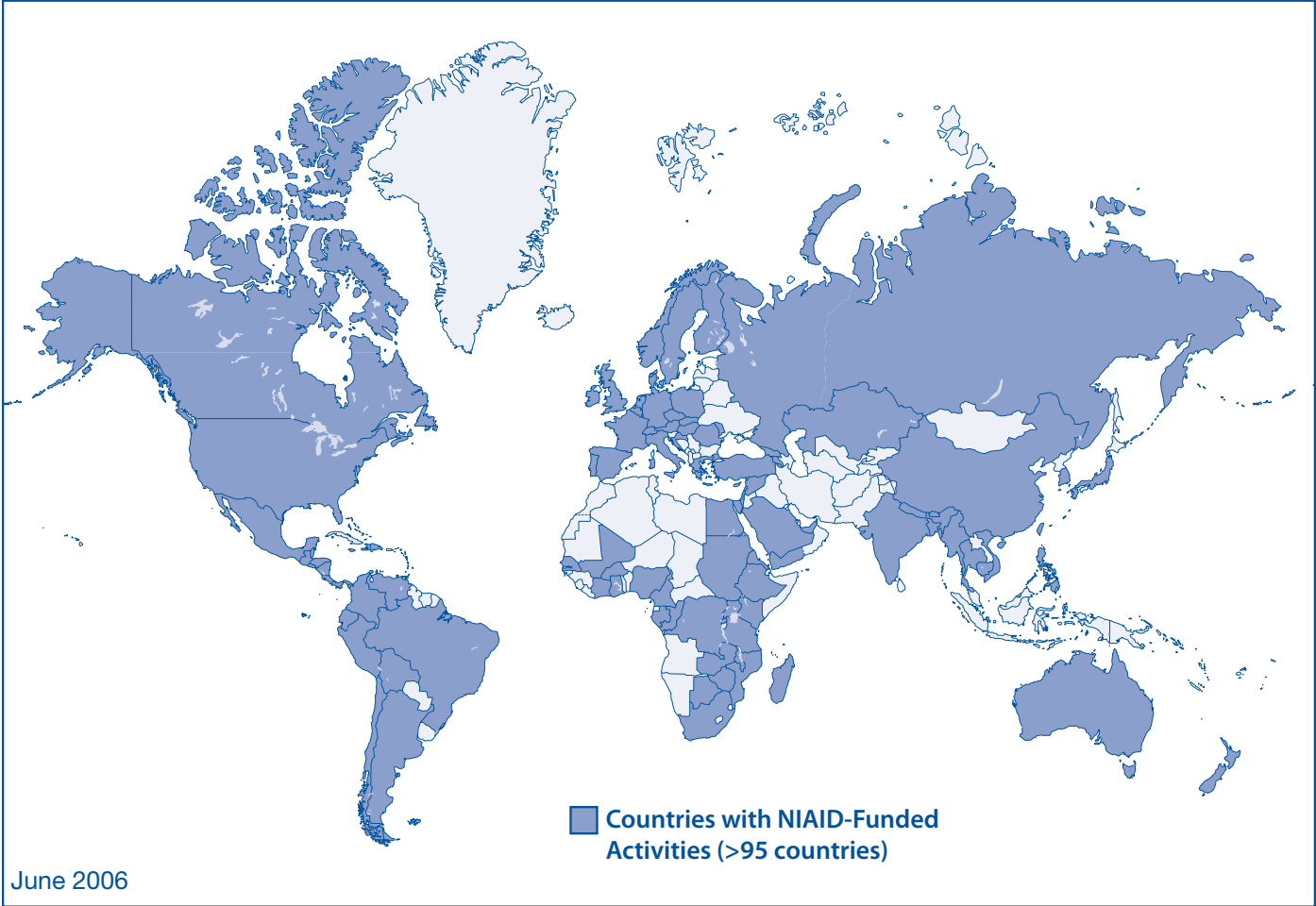
EXTRAMURAL RESEARCH BY STATE—FY 2006

State	Number of Awards	Dollars
Alabama	93	\$69,609,416
Arizona	34	\$16,916,487
Arkansas	14	\$4,804,405
California	820	\$536,010,093
Colorado	125	\$60,145,562
Connecticut	133	\$64,778,800
Delaware	1	\$452,235
District of Columbia	46	\$48,856,096
Florida	69	\$27,311,750
Georgia	122	\$56,028,722
Hawaii	9	\$6,397,077
Idaho	2	\$846,745
Illinois	132	\$79,981,612
Indiana	43	\$25,041,517
Iowa	45	\$20,369,843
Kansas	18	\$4,778,117
Kentucky	31	\$8,990,508
Louisiana	41	\$22,430,089
Maine	6	\$1,385,769
Maryland	346	\$457,628,024
Massachusetts	614	\$417,367,963
Michigan	93	\$39,403,589
Minnesota	94	\$54,608,836
Mississippi	4	\$1,350,582
Missouri	111	\$56,646,247
Montana	20	\$12,576,806

State	Number of Awards	Dollars
Nebraska	12	\$2,832,945
Nevada	4	\$2,210,185
New Hampshire	24	\$11,177,592
New Jersey	61	\$26,720,515
New Mexico	29	\$32,745,718
New York	472	\$273,624,015
North Carolina	186	\$231,391,280
North Dakota	3	\$741,810
Ohio	165	\$71,693,547
Oklahoma	38	\$22,340,577
Oregon	55	\$26,792,866
Pennsylvania	297	\$162,593,509
Puerto Rico	3	\$4,024,423
Rhode Island	27	\$8,848,755
South Carolina	10	\$4,863,316
South Dakota	4	\$770,375
Tennessee	101	\$42,775,265
Texas	270	\$170,380,062
Utah	19	\$12,440,454
Vermont	12	\$5,412,732
Virginia	104	\$59,069,241
Washington	214	\$217,265,924
West Virginia	3	\$586,442
Wisconsin	104	\$61,340,904
Wyoming	1	\$343,318
Total	5,284	\$3,547,702,660

80.4% of NIAID funds went to the States, District of Columbia, and Puerto Rico.

NIAID INTERNATIONAL RESEARCH FUNDING

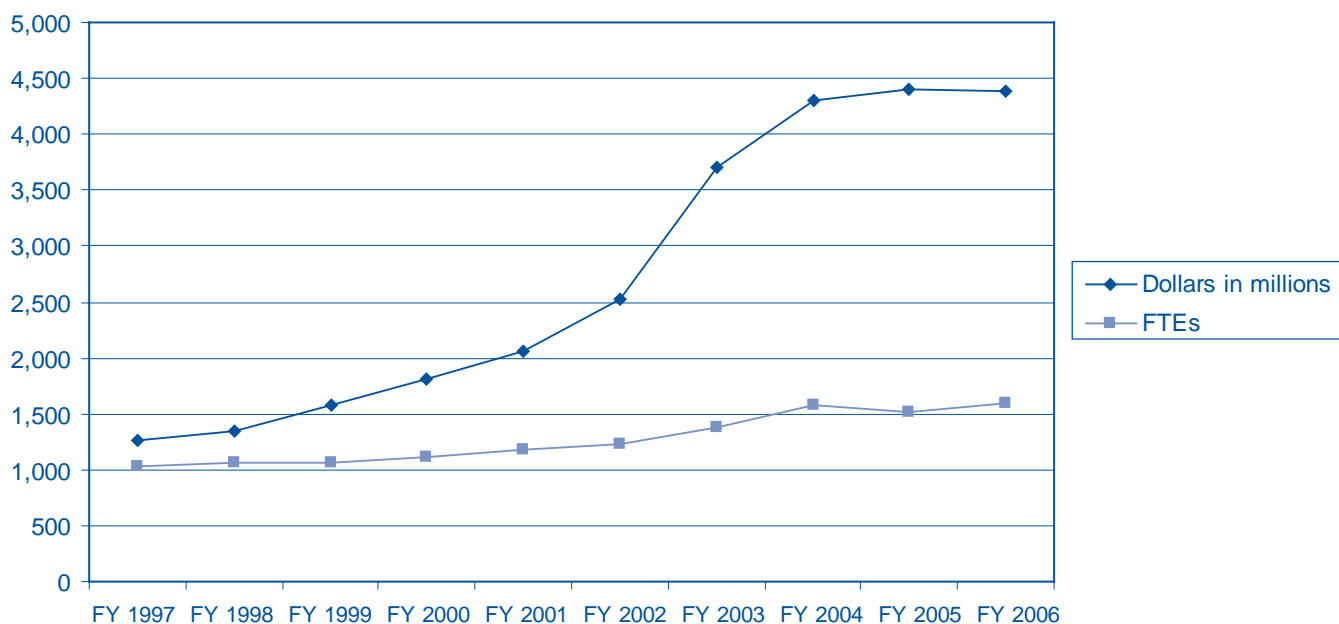


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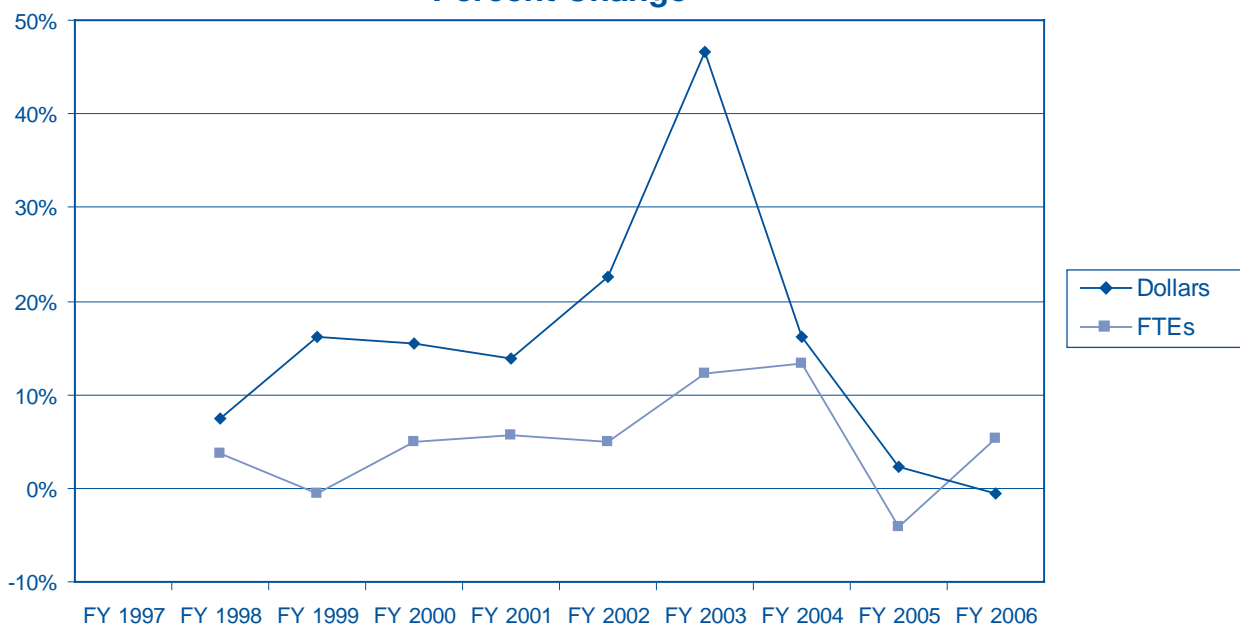
NIAID Funding and Positions FY 1997–2006

	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001	FY 2002	FY 2003	FY 2004	FY 2005	FY 2006
Dollars in millions	\$1,258	\$1,352	\$1,571	\$1,812	\$2,062	\$2,526	\$3,703	\$4,303	\$4,403	\$4,379
FTEs	1,029	1,067	1,062	1,114	1,177	1,236	1,387	1,572	1,507*	1,589

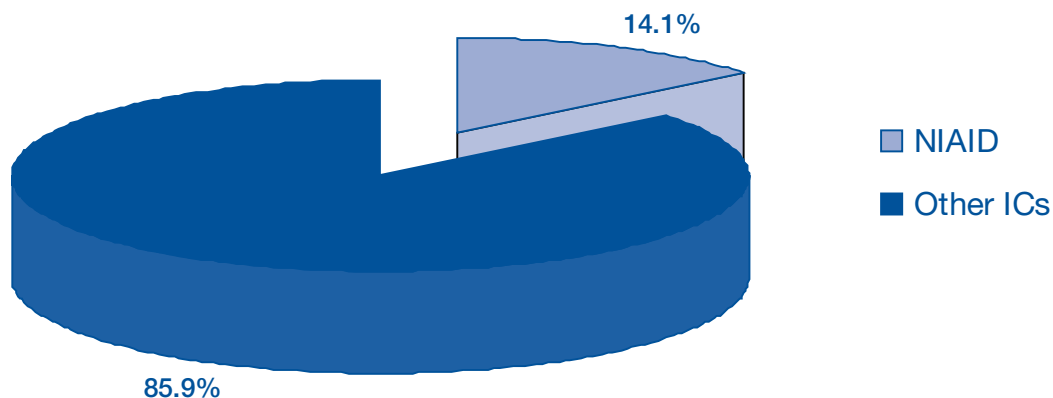
*FTEs transferred to NIH Division of Extramural Activities Support, a result of an A-76 review



Percent Change



**NIH Management Fund, Service & Supply Fund,
and Roadmap Contributions
FY 2006**



DISTRIBUTION OF NIAID PAYMENT	Amount	% of NIAID Contribution
Clinical Center	\$ 68,166	52.1%
Center for Scientific Review	6,328	4.8%
Center for Information Technology	4,542	3.5%
Service & Supply Fund (SSF)	27,797	21.3%
Office of Research Services	7,955	6.1%
Other	16,023	12.2%
Total NIAID Management Fund and SSF	\$130,811	100.0%
Other Institutes Management Fund and SSF	742,065	85.0%
Total NIH Management Fund and SSF	\$872,876	100.0%

	Amount	NIAID % of Total
NIH Roadmap (NIAID)	\$ 38,567	11.7%
NIH Roadmap (Other Institutes)	290,433	88.3%
Total NIH Roadmap	\$ 329,000	100.0%
Total NIAID Management Fund, SSF and Roadmap	169,378	14.1%
Other Institutes Management Fund, SSF and Roadmap	1,032,498	85.9%
Total NIH Management Fund, SSF and Roadmap	\$1,201,876	100.0%

The Management Fund provides for the financing of certain common research and administrative support activities that are required in the operations of NIH:

- Clinical Center: Admissions and followup, anesthesiology, diagnostic radiology, nuclear medicine, clinical pathology, blood bank, rehabilitation medicine, pharmacy, medical records, nursing services, patient nutrition service, housekeeping services, laundry, and social work.
- Center for Scientific Review: Initial scientific review of applications, assignment of research grant applications to the Institutes.
- Center for Information Technology: Research and development program in which concepts and methods of computer science are applied to biomedical problems, central network and telecommunications for the NIH community.
- Office of Research Services: Safety, engineering, biomedical engineering veterinary resources, and NIH library.
- The Service and Supply Fund provides for animal support, collaborative research, conference services, hazardous waste management, interpreting services, library, occupational health and safety, property management support, and radiation safety.

TECHNOLOGY TRANSFER AND PARTNERSHIPS

Technology transfer in Federal laboratories facilitates the dissemination of new technologies and research materials developed by Government scientists. This fuels further innovation and commercialization by the extramural research and development community, ultimately resulting not only in an improvement in the public health, but also an increase in the competitiveness of U.S. industry. Federal legislation mandates and defines the Government's technology transfer activities.

The NIAID Office of Technology Development (OTD) facilitates the transfer of significant research advances and resources to the broader scientific community and develops collaborative relationships among NIAID scientists, industry, and academia. NIAID uses various mechanisms to accomplish these ends, including Material Transfer Agreements (MTAs), Cooperative Research and Development Agreements (CRADAs), Materials-CRADAs (M-CRADAs), Confidential Disclosure Agreements (CDAs), Clinical Trial Agreements (CTAs), Drug Screening Agreements (DSAs), Research Collaboration Agreements (RCAs), and patenting of inventions and negotiation of various license agreements through the NIH Office of Technology Transfer (OTT).

In addition to OTD mechanisms, other mechanisms for collaboration and partnerships exist. These include grants, Small Business Innovation Research (SBIR) grants and contracts and partnerships established through the Foundation of the National Institutes of Health (FNIH).

NIAID Technology Transfer Activities

Fiscal Year	Pending US Patent Applications	Issued US Patents	Licenses In Effect	Active CRADAs
1997	154	115	93	71
1998	158	128	119	95
1999	162	148	145	74
2000	171	161	138	86
2001	167	174	147	93
2002	188	187	157	85
2003	207	189	153	71
2004	221	203	142	70
2005	234	207	159	76
2006	229	214	154	73

Select Partnerships Active During FY 2006

Collaborator	Title
Beth Israel Deaconess Hospital	Novel recombinant adenovirus, plasmid DNA, and mycobacteria vector-based vaccine for HIV-1
Emory University	FNIH Gates Grand Challenge Collaborator Grant
Medicines for Malaria Venture	Drugs for anti-malarial compounds using assay developed by Laboratory of Malaria and Vector Research
Sequella	TB drug for clinical testing
USAMRIID	Research partnership at Fort Detrick
University of Montana-Missoula	Doctoral level programs in the biomedical sciences

Additional information about the activities of the NIAID Office of Technology Development can be found at the Web site <http://www3.niaid.nih.gov/about/organization/odoffices/omo/otd>.

NATIONAL ADVISORY ALLERGY AND INFECTIOUS DISEASES COUNCIL

Composed of both scientists and laypersons, the National Advisory Allergy and Infectious Diseases Council makes final recommendations on the scientific merit of NIAID-assigned applications for research grants, cooperative agreements, and research training awards. Council review is the final step in the NIH peer review process, and its recommendations are based both on scientific merit, as judged by the scientific review groups, and the relevance of the proposed study to the Institute's programs and priorities. Applications reviewed relate to all activities within the NIAID research mission, including the fields of immunology, allergic and immunologic diseases, transplantation immunology, microbiology and infectious diseases, and AIDS and AIDS-related conditions. Through its subcommittees, the Council conducts concept clearances and advises NIAID on general policy.

More information about the National Advisory Allergy and Infectious Diseases Council is located at the Web site http://www.niaid.nih.gov/ncn/budget/default_council.htm.

Chair: Anthony S. Fauci, M.D., Director, NIAID

Executive Secretary: Marvin Kalt, Ph.D., Director, DEA, NIAID

Members:

Barbara A. Baird, Ph.D. (2009)
Cornell University

Stanley W. Chapman, M.D. (2007)
University of Mississippi Medical Center

Anthony M. D'Alessandro, M.D. (2006)
University of Michigan

Charles E. Davis, M.D. (2006)
University of Maryland, Baltimore

Kathryn M. Edwards, M.D. (2009)
Vanderbilt University Medical School

Richard A. Insel, M.D. (2008)
Juvenile Diabetes Research Foundation International

Jay Brooks Jackson, M.D. (2007)
Johns Hopkins Medical Institutions

Anne Munoz-Furlong (2006)
Food Allergy and Anaphylaxis Network

Martin G. Myers, M.D. (2008)
University of Texas Medical Branch

Raymond C. O'Brien, J.D. (2006)
The Catholic University of America

Shelley M. Payne, Ph.D. (2008)
University of Texas, Austin

Anjana Rao, Ph.D. (2006)
Harvard Medical School

Martin Rosenberg, Ph.D. (2009)
Promega Corporation

Ruth M. Ruprecht, M.D., Ph.D. (2007)
Dana-Farber Cancer Institute

Gary K. Schoolnik, M.D. (2008)
Stanford University Medical Center

Megan T. Sykes, M.D. (2009)
Massachusetts General Hospital

Nathan M. Thielman, M.D., MPH (2007)
Duke University Medical Center

Gail W. Wertz, Ph.D. (2007)
University of Virginia

Ex Officio

Mitchell L. Cohen, M.D.
Centers for Disease Control and Prevention

Lawrence R. Deyton, M.D.
U.S. Department of Veterans Affairs

Michael O. Leavitt
Department of Health and Human Services

Maj. Gen. Eric B. Schoomaker, M.D.
Walter Reed Medical Center

Elias A. Zerhouni, M.D.
National Institutes of Health

Information about all NIAID Committees can be found at the Web site <http://www3.niaid.nih.gov/about/overview/councilcommittees/>

DIRECTORY OF KEY NIAID PERSONNEL

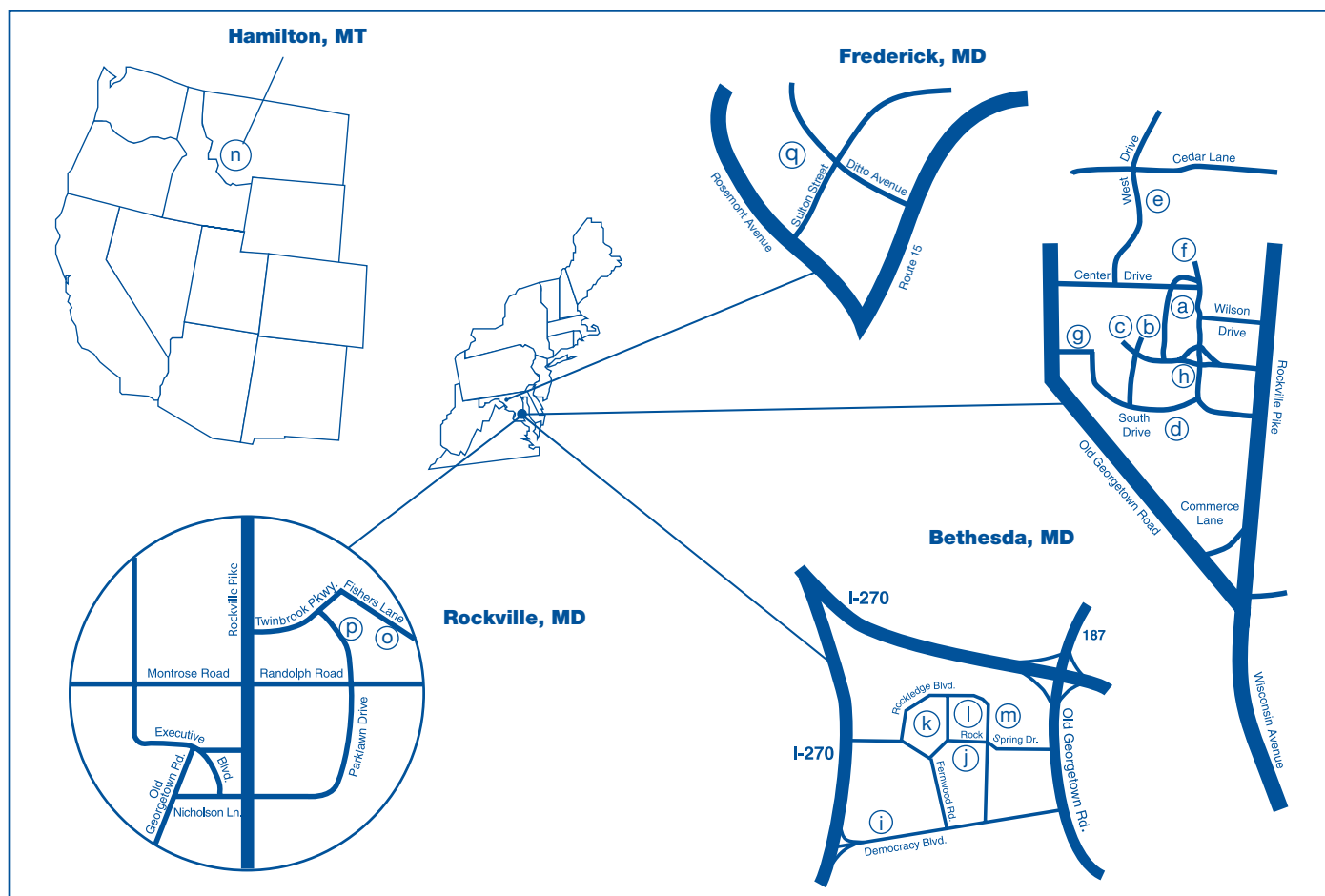
Name	Bldg.	Room	Telephone	E-mail
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Anthony S. Fauci, M.D. <i>Director</i>	31	7A03	301-496-2263	af10r@nih.gov
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Kevin Callahan, Ph.D. <i>Director, Office of Strategic Planning and Financial Management</i>	31	7A47	301-496-6752	callahak@mail.nih.gov
Jon Mathis, M.P.A. <i>Director, Office of Administrative Services</i>	31	7A18	301-496-3656	mathisj@niaid.nih.gov
Michael R. Mowatt, Ph.D. <i>Director, Office of Technology Development</i>	6610	4035	301-496-2644	mmowatt@niaid.nih.gov
Michael Tartakovsky <i>CIO and Director, Office of Technology and Information Systems</i>	Fernwood	2NE04	301-496-8219	mtartakovs@niaid.nih.gov

FY 2006 Fact Book

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Gary Nabel, M.D., Ph.D. <i>Director, Vaccine Research Center</i>	40	4502	301-496-1852	gnabel@nih.gov
Kathryn C. Zoon, Ph.D. <i>Director, Division of Intramural Research</i>	33	2N09G	301-496-3006	kzoon@niaid.nih.gov

Current as of June 2007. To locate personnel not listed, the telephone number for general NIH information is 301-496-4000. Information is available online at <http://www3.niaid.nih.gov/about/findingpeople>.

LOCATION OF BUILDINGS OCCUPIED BY NIAID PERSONNEL



- a. Building 4**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- b. Building 7**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- c. Building 10**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- d. Building 14B-S**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- e. Building 15B-1**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892

- f. Building 31**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- g. Building 40/VRC**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- h. Building 50**
NIH Campus
9000 Rockville Pike
Bethesda, MD 20892
- i. Democracy 2**
6707 Democracy Boulevard
Suite 880
Bethesda, MD 20892
- j. Fernwood Building**
10401 Fernwood Road
Bethesda, MD 20892
- k. Rockledge Building (6700A)**
6700 A Rockledge Drive
Bethesda, MD 20892

- l. Rockledge Building (6700B)**
6700 B Rockledge Drive
Bethesda, MD 20892
- m. Rockledge Building (6610)**
6610 Rockledge Drive
Bethesda, MD 20892
- n. Rocky Mountain Laboratories**
903 South Fourth Street
Hamilton, MT 59840
- o. Twinbrook Building #1**
5640 Fishers Lane
Rockville, MD 20857
- p. Twinbrook Building #2**
12441 Parklawn Drive
Rockville, MD 20857
- q. Frederick Cancer Research and Development Center**
Building 550
Ft. Detrick, MD 21702

GLOSSARY

A-76	Office of Management and Budget Circular A-76 regarding Performance of Commercial Activities
AIDS	Acquired Immunodeficiency Syndrome
BioD	Biodefense
F31	National Research Service Awards (NRSA) for Individual Predoctoral Fellowship to Promote Diversity in Health Related Research
F32	Postdoctoral Individual NRSA
F33	NRSA for Senior Fellows
F34	Minority Access to Research Careers (MARC) Faculty Predoctoral Fellowship
FTE	Full-Time Equivalent
IID	Infectious and Immunologic Diseases
K01	Research Scientist Development
K02	Independent Scientist
K06	Research Career
K08	Clinical Investigator
K22	Research Scholar Development
K24	Mid-Career Investigator Award in Patient-Oriented Research
K25	Mentored Quantitative Research Career Development
NIH Roadmap	NIH Roadmap for Medical Research
P01	Program Project
R01	Research Project (Traditional)
R-56	Bridge Award
RMS	Research Management and Support
RPG	Research Project Grant
SBIR/STTR	Small Business Innovation Research/Small Business Technology Transfer Awards
SSF	NIH Service and Supply Fund
T32	Institutional NRSA
T35	NRSA Short-Term Research Training
T36	MARC Ancillary Training Activities

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health



National Institute of Allergy and Infectious Diseases

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