



# National Institutes of Health

The Nation's Medical Research Agency



[HOME](#) | [HEALTH](#) | [GRANTS](#) | [NEWS](#) | [RESEARCH](#) | [INSTITUTES](#) | [ABOUT NIH](#)



## From the Desk of the NIH Director

Elias A. Zerhouni, M.D.

Spring 2008

**First, do no harm. Then, innovate: Implementing Renewed Peer Review**

In my desk-to-desk last summer I told you we were embarking on a review of peer review at NIH. It was a study based on internal and external response to our call for ideas. We started from the premise that our intention is "to fund the best science, by the best scientists, with the least amount of administrative burden." I am grateful to Dr. Tabak and Dr. Berg who co-chaired this stellar effort and to the literally thousands of you who participated in person or by comment.

There had been a pervasive sense that peer review service has become more of a chore than a stimulating and privileged experience. Reclaiming that excitement and pride, as well as removing needless burden, will stimulate new innovation and transformative research. Those goals drove the impetus to improve parts of the system.

As we contemplated possible changes, we were guided by two fundamental principles. First, while improving the system, do no harm. That is, ensure that any changes to the peer review system bring significant value and reflect a favorable balance between costs and benefits. Second, continue to maximize the freedom of scientists to explore.

*The Implementation Plan Report* <http://enhancing-peer-review.nih.gov> consists of four main priorities.

- **Priority 1—Engage the Best Reviewers:** Increase flexibility of service, formally acknowledge reviewer efforts, alleviate pressures related to time and effort, and enhance and standardize training
- **Priority 2—Improve Quality and Transparency of Reviews:** Through appropriate means, shorten and redesign applications to highlight impact and to allow alignment of the application, review, and summary statement with five explicit review criteria, and modify the rating system.
- **Priority 3—Provide for Balanced and Fair Reviews Across Scientific Fields and Career Stages:** Supporting early stage investigators and investigators new to NIH at targeted levels and emphasize retrospective accomplishments of experienced investigators. To encourage and expand the transformative

research pathway, NIH intends to create a new investigator-initiated Transformative R01 Award program funded within the NIH Roadmap with a planned commitment of \$250 M over five years.

- **Priority 4—Develop a Permanent Process for Continuous Review of Peer Review.**

Collaborative teams of internal and external participants have worked meticulously to tackle all the challenges of the system and discover solutions. The product is well-thought out, and is a comprehensive framework to begin implementation.

We are headed into the future with a nimbler, more responsive system that should serve science well and with a plan to continuously re-evaluate our process.

Again, NIH is grateful for all of your comments, discussions, and participation and look forward to the results of this work.

### **New Program on Undiagnosed Diseases Announced**

- On May 19, NIH made an exciting, long-hoped-for announcement: NIH has established a new program, the Undiagnosed Diseases Program, (<http://rarediseases.info.nih.gov/Resources.aspx?PageID=31>) that will focus on the most puzzling medical cases referred to the NIH Clinical Center by physicians across the nation. Its goal is to provide answers to patients with mysterious conditions that have long eluded diagnosis and to advance medical knowledge about rare and common diseases. With its infrastructure now in place, the program is ready to accept patients starting in July 2008.

### **Looking for Candidates**

- New Institute and Office Director searches are underway. At OBSSR, we are pleased that the longtime, distinguished NICHD scientist, Dr. Chris Bachrach, is serving as the acting Director of OBSSR. Dr. Richard Hodes (NIA) and Dr. Nora Volkow (NIDA) are leading the search for a new director for the Office.
- There is also a search for a new director for NIEHS. Dr. Stephen Katz (NIAMS) and Dr. Griffin Rodgers (NIDDK) are co-chairs for this important search.
- We will soon be forming another search committee for NHGRI. We will be sorry to see Dr. Francis Collins, our colleague of 15 years, leave August 1st to explore new opportunities. He has been a visionary leader, initiating and creating a wide range of projects built upon the success of the Human Genome Project. The Haplotype Map (HapMap), Knockout Mouse, and the Molecular Libraries Screening Centers projects have all been projects led or co-led by Francis by making data rapidly and freely available to researchers worldwide. We will miss his leadership, but we know he will be exploring other ways to pursue the frontiers of science to benefit human health.

### **Genetic Nondiscrimination Act of 2008 (GINA) becomes law.**

We are also pleased that the Genetic Information Nondiscrimination Act of 2008

(GINA) became a reality on May 21, 2008, while Francis was still here. This was an effort, debated in Congress for 13 years, that will benefit us all as it protects Americans against discrimination based on our genetic information when it comes to health insurance and employment. Francis was instrumental in providing technical expertise in the final success of this greatly-needed legislation.

### Update on Public Access

Again, thank you for your comments now all available on the public access Web site (<http://publicaccess.nih.gov>) We are combining these results from the RFI with feedback received from our March 20, 2008 Open Meeting (on line at the same site). We will be posting this analysis and the results by September 30, 2008. We are proud of this effort to bring research results to the scientific community and the public as rapidly as possible and without restrictions of cost.

### Next time:

I will be sharing progress on the NIH Public-Private Partnerships Program (PPP). Initiated in 2005, PPP was an outgrowth of the NIH Roadmap. PPP is the NIH's central resource on these collaborations providing guidance and advice to NIH and potential partners on the formation of partnerships that leverage NIH and non-NIH resources.

I invite you to share any comments you have with me, directly, at [zerhounidirect@nih.gov](mailto:zerhounidirect@nih.gov).

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

For information about NIH programs, useful health information, and additional resources, see the NIH web site at [www.nih.gov](http://www.nih.gov). An archive of the Director's Newsletter is available at <http://www.nih.gov/about/director/newsletter/archive.htm>.



National Institutes of Health (NIH)  
9000 Rodville Pike  
Bethesda, Maryland 20892



Department of Health  
and Human Services

