

NIH GUIDE

For Grants and Contracts

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

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NOTICES

NOTICE OF MEETING: E-GUIDE ACCESS 1
National Institutes of Health
Index: NATIONAL INSTITUTES OF HEALTH

NIH EXTRAMURAL PROGRAM INFORMATION AVAILABLE ELECTRONICALLY VIA
THE NIH GRANT LINE 2
National Institutes of Health
Index: NATIONAL INSTITUTES OF HEALTH

NOTICES OF AVAILABILITY (RFPs AND RFAs)

CVD NUTRITION EDUCATION FOR LOW LITERACY SKILLS (RFA HL-90-11-P) 3
National Heart, Lung, and Blood Institute
Index: HEART, LUNG, BLOOD

ONGOING PROGRAM ANNOUNCEMENTS

RESEARCH ON THE PREVALENCE AND IMPACT OF DRUG USE IN THE
WORKPLACE (PA-90-19) 4
National Institute on Drug Abuse
Index: DRUG ABUSE

ERRATUM

COOPERATIVE CLINICAL TRIALS IN TRANSPLANTATION (RFA AI-90-07) 7
National Institute of Allergy and Infectious Diseases
Index: ALLERGY, INFECTIOUS DISEASES

NOTICES

NOTICE OF MEETING: E-GUIDE ACCESS

P.T. 16; K.W. 1004017

National Institutes of Health

Nearly a year has passed since the NIH Guide for Grants and Contracts became widely available electronically, mainly via BITNET. This electronic form of the Guide, known as the E-Guide, eventually will become the sole means for distributing the NIH Guide for Grants and Contracts. The present version of the Guide has been made possible because of the input, ideas, and cooperation of a large number of individuals, both outside of and within the National Institutes of Health.

As stated in some earlier announcements, a meeting will be held in the Bethesda area on Friday, September 7, 1990, to discuss the E-Guide. This meeting is an opportunity for new users to become familiar with the E-Guide and for current users to help shape the E-Guide of the future. The goals of the meeting are to:

- o help users and institutions gain additional information about the use and structure of the E-Guide
- o share useful approaches for accessing, using, and distributing the Guide
- o provide demonstrations and opportunities for hands-on experience with using the E-Guide
- o define format changes that could be made at the NIH and other changes that could be made locally at institutions which would maximize the usefulness of the E-Guide.

This meeting is intended to bring people together to address issues of importance to both small and large institutions regarding electronic access of the Guide and should be of interest to less experienced, as well as more sophisticated, users of the electronic system.

The meeting, which will begin at 8:30 a.m. and last until 4:30 p.m., will include formal presentations, on-line and simulated demonstrations, and lots of general and small-group discussions. The following presentations are planned:

- o The current E-Guide System and How it is Prepared, by William K. Jones, NIH
- o Primary E-Mail Distribution Via The BITNET LISTSERV System, by John Paul Elrod, Johns Hopkins University
- o Access By Anonymous FTP Via Internet, by Kenneth Yow, The University of North Carolina
- o Tools for Managing the E-Guide, by Karl Hittelman, The University of California at San Francisco
- o Indexing: Current Reality and Dreams for the Future, by John James, NIH
- o Options and Issues of Particular Interest to the Smaller Institutions, by Nicholas Suszynski

There is no charge for the meeting, but registration is limited to ninety participants. You may register by sending the information requested below, by August 7, to:

Ms. Claire Blados
Institutional Liaison Office
Building 31, Room 5B31
National Institutes of Health
Bethesda, MD 20892
Telephone: (301) 496-5366
BITNET: Q2C@NIHCU

E-GUIDE ACCESS MEETING REGISTRATION

NAME _____

INSTITUTION _____

ADDRESS _____

BITNET ADDRESS _____

TELEPHONE _____

Additional information will be sent to registrants in August. You should make your own hotel arrangements directly, by August 7. Three hotels that are fairly nearby are:

Crowne Plaza Holiday Inn

1750 Rockville Pike
Rockville, MD 20852
Telephone: (301) 468-1100

Government rates: \$84.00 plus 10% tax - single
\$94.00 plus 10% tax - double

(A block of rooms has been reserved at the Crowne Plaza for September 6. In calling to make a reservation, please identify yourself as an attendee at the September 7 Electronic Transmission of the Guide (NIH) meeting.)

Days Inn

1775 Rockville Pike
Rockville, MD 20850
Telephone: (301) 881-2300

Government rates: \$79.00 plus 10% tax - single
\$84.00 plus 10% tax - double

Bethesda Marriott

5151 Pooks Hill Road
Bethesda, MD 20814
Telephone: (301) 897-9400

Government rates: \$84.00 plus 10% tax - single or double

NIH EXTRAMURAL PROGRAM INFORMATION AVAILABLE ELECTRONICALLY VIA THE NIH GRANT LINE

P.T. 16; K.W. 1004017

National Institutes of Health

Previous issues of the NIH Guide announced the electronic availability of the NIH Guide for Grants and Contracts (Vol. 18, No. 20, June 9, 1989) and the DRG Grants Inquiries On-Line System of extramural program guidelines (Vol. 18, No. 28, August 18, 1989) through computer networks such as Bitnet (CREN) and Internet. Since then, participants have been sent these files automatically at the time of update. A new and additional electronic information service, the NIH GRANT LINE, merges files containing the NIH Guide, the Grants Inquiries On-line NIH extramural program guidelines, and the organizational section of the NIH Telephone Directory. This makes it more convenient for research organizations with modest computer resources to obtain NIH extramural program information electronically. Institutions that currently receive the NIH Guide and other NIH program related materials electronically via computer networks through their institutional hubs will continue to receive those materials by the previously established pathways, with no change in existing arrangements.

Now, organizations and individuals who do not have access to information networks such as Internet or Bitnet may receive NIH extramural program information electronically using a personal computer, modem, and communications software that is available in most colleges, universities and research organizations. The NIH GRANT LINE can be used to download weekly issues of the NIH Guide, the latest revisions of Program Announcements and Guidelines, the Extramural Green Pages (abbreviated NIH Telephone Directory) and other items such as indexes to the Guide. The Program Announcements and Guidelines are the same as those that have been distributed by the Grants Inquiries Office in the Division of Research Grants. Those who are currently receiving documents electronically from the DRG Grants Inquiries On-Line

System may use either the old or the new system at the present time; however, we plan to merge the two systems into the NIH GRANT LINE in the near future. Any questions about the Grants Inquiries files relating to program guidelines may be addressed to Ms. Sue Meadows, tel. (301) 496-7441. Questions about obtaining either the NIH Guide (and its indexes) or the Extramural Green Pages via the NIH GRANT LINE may be addressed to Dr. John C. James at (301) 496-7554.

The brief description, in this announcement, of the technical requirements for receiving the NIH GRANT LINE files electronically is intended to help users to get started as soon as they are ready. If you have difficulty downloading the documents, we suggest that you first seek technical assistance locally before contacting the NIH.

Please note that this facility is intended only for those whose organizations are not members of Bitnet or Internet. After a trial period of approximately six months, the data on usage of the files will be analyzed and comments from users will be welcomed to assist in the evaluation of the trial.

To those who have already tested a prototype of the NIH GRANT LINE by using the public initials "GT4", we express our thanks for their comments and for the experience we have gained. That early system will be discontinued on August 1, 1990. However, the new service described in this announcement will have the same kinds of information plus some new items such as bulletins, notices of publications and other features that will be added in the future.

INSTRUCTIONS FOR DOWNLOADING MATERIAL INTERACTIVELY

It is possible to download copies of the NIH GRANT LINE documents, stored at the NIH Computer Center in Bethesda, Maryland, using a personal computer and a modem. For this process, you will need a personal computer, a 1200 or 2400 baud modem, and a terminal emulation program to run on your PC. The terminal emulation program must support raw file downloading (a facility that allows you to store in a file everything that is displayed on the PC screen during the downloading process). All the most popular terminal emulators, KERMIT, Telios, PROCOM, etc. for the IBM, and VersaTerm for the MAC, support raw file downloading. Consult the documentation for your particular terminal emulator to find how it is done.

1. Configure your terminal emulator as: speed indicated by the modem being used, even parity, 7 data bits, 1 stop bit, Local Echo on (sometimes referred to as Local Copy on or Half Duplex).
2. Using the procedure specified in your setup, dial 1-301-492-2221. When you get a response indicating that you have been connected, type ",GEN1" and press ENTER; you will be prompted by the NIH system for "INITIALS?". Type BB5 and press ENTER. You will then be prompted for "ACCOUNT?". Type CCS2 and press ENTER.

This process will cause a menu to be displayed that will allow you to access the online NIH Telephone Directory (the Extramural Green Pages), download one or more versions of the NIH Guide, or download one or more of the files from NIH Program Announcements and Guidelines. Follow the instructions given by the program to successfully download the desired information. When you have finished the session, you will automatically be signed off and can process the downloaded information on your personal computer.

NOTICES OF AVAILABILITY (RFPs AND RFAs)

CVD NUTRITION EDUCATION FOR LOW LITERACY SKILLS

RFA AVAILABLE: HL-90-11-P

P.T. 34; K.W. 0710095, 0502028, 0715040, 0411005

National Heart, Lung, and Blood Institute

Letter of Intent Receipt Date: August 15, 1990

Application Receipt Date: October 16, 1990

The Prevention and Demonstration Research Branch of the Division of Epidemiology and Clinical Applications, National Heart, Lung, and Blood Institute (NHLBI), announces the availability of a Request for Applications (RFA) for the development and validation of nutrition education programs to reduce cardiovascular disease (CVD) risk factors related to nutrition

(elevated blood cholesterol, moderately elevated blood pressure, and obesity) in at-risk adults with low literacy skills.

This special grant program will support research to develop innovative nutrition education methods and materials for adults with low literacy skills and CVD risk factors and to evaluate these materials for comprehension and efficacy in modifying CVD risks.

Prospective applicants are advised that the RFA solicits a multi-disciplinary approach to developing materials for this underserved population, with involvement of various members of the health care team (such as physicians, nutritionists, nurses, educators, behavioral scientists, including cognitive, social, and clinical psychologists) as well as specialists in communication, educational technology, and instructional design. This RFA is limited to education in the English language.

The mechanism for this program will be the traditional, individual, research-project grant. Although the financial plans for fiscal year 1991 include approximately \$1,000,000 for the total costs (direct and indirect) of this program, support of grants pursuant to this RFA is contingent upon receipt of funds for this purpose. It is anticipated that approximately three or four grants will be awarded under this one-time solicitation.

Timetable

Letters of Intent	August 15, 1990
Application Receipt Date	October 16, 1990
Technical Review	February/March 1991
Advisory Council Review	May 1991
Award Date	August 1, 1991

Inquiries and requests for copies of the RFA should be made to:

Nancy C. Santanello, M.D., M.S.
Division of Epidemiology and Clinical Applications
National Heart, Lung and Blood Institute
Federal Building, Room 604
7550 Wisconsin Avenue
Bethesda, MD 20892

ONGOING PROGRAM ANNOUNCEMENTS

RESEARCH ON THE PREVALENCE AND IMPACT OF DRUG USE IN THE WORKPLACE

PA: PA-90-19

P.T. 34; K.W. 0404009, 0725020, 0755030, 0404000, 0414000, 0715195

National Institute on Drug Abuse

The National Institute on Drug Abuse (NIDA) has an interest in research on drug use and drug abuse as they relate to the workplace. NIDA's interest encompasses a broad range of topics generally subsumed under the areas of prevalence, etiology, and impact of drug use by the workforce. This differs from previous program efforts in that the focus is upon the worksite and the workforce. Given that a large majority of the adult population of the U.S. is employed, worksite programs may have unique potential for reducing drug use and its adverse consequences in a large proportion of the drug using population. Estimates from NIDA's National Household Survey suggest that 70 percent of illicit drug users are employed.

The goals of this program are to encourage systematic research on the impact of drug use and abuse in the workplace and studies of the prevalence and etiology of workplace-related drug use and abuse. This effort will, by necessity, be cross-disciplinary, and individual and collaborative proposals are encouraged from researchers from relevant areas, including but not limited to psychology, epidemiology, sociology, business and labor relations, public health, management, and economics.

Areas of Interest

I. Impact of drug use in the workplace

Of primary importance to NIDA are studies of the direct and indirect effects of acute and chronic use of drugs on behaviors relevant to job performance. While laboratory research has demonstrated that basic psychomotor and

cognitive skills relevant to job performance are impaired by some drugs, research on simulated job performance as well as field studies of the relationships between drug use and other indicators of performance, such as absenteeism, accidents and injuries, job turnover, health care costs, supervisory ratings, and other measures of productivity, are generally lacking.

A. Productivity, health, and safety research

Research on the relationships between drug use and accidents and injuries under various conditions in various occupations is encouraged.

Increasing use of sick leave, rising costs of medical and disability benefits, early retirement, and compensation settlements all have costs that may, in part, be attributable to drug abuse. As the focus of health care in our society shifts more and more to cost containment, more accurate estimates of the impact of drug abuse on health costs are needed.

Investigation of the effects of drug use on measures of productivity, such as absenteeism, turnover, worker output, supervisory ratings, and quality of products and services, are of interest. In addition to such performance-related issues, an important area of research is the determination of the impact of acute and chronic use of drugs on learning, motivation, and memory. These functional changes can impact job productivity in a direct manner. Also of interest are studies of the impact of workplace drug use or perceived drug use on the productivity of non-users.

Since drug-seeking behavior, administration, acute and chronic intoxication, hangover and withdrawal phases of drug usage may all have effects on performance, studies that attempt to avoid concentrating on a single phase of the drug-use cycle are encouraged.

B. Development of Performance Assessment Methods

NIDA is interested in supporting studies to develop and apply performance assessment methods for assessing drug-impaired functioning in the workplace.

1. Job Performance Standards

Advances in performance measurement, appraisal procedures, and utility analysis (i.e., estimating the value of an employee's performance to an organization), offer promise for application to the field of drug abuse research. For example, job analysis and behavioral rating scale techniques could be used to establish baseline standards of job performance for detection of changes induced by drug use. Indicator menus for performance difficulties (e.g., ways to recognize changes in performance over time that can be used by peers and supervisors) can be developed to provide for more reliable and valid assessment of performance change.

2. Performance Assessment Batteries

Intrusive means of obtaining biological samples (such as drawing blood) are generally problematic, and research to date indicates that behavioral impairment does not correlate well with the plasma concentrations of most drugs. NIDA is interested in exploring alternative non-intrusive ways of assessing drug-impaired functioning. In addition to interest in the development and application of job performance standards, it seems plausible that research methods from the areas of behavioral pharmacology, human factors and engineering psychology, psychophysics, and complex human performance could be applied to develop a single or perhaps small battery of test procedures to assess acute and chronic drug effects on work and academic performance.

The performance assessment battery should yield indices that are strongly and consistently correlated with changes in the criterion performance. It also should provide indices that permit estimation of the contribution to performance change due to both non-drug-related factors, (e.g., fatigue, age, primary sensory or motor impairment) and drug-related factors. Moreover, if drugs are judged as significant contributors to the impairment, the battery should provide at least a rough estimate of the class of substance likely to be involved (e.g., stimulants, depressants, hallucinogens, narcotics, and possible drug combinations).

C. Simulation and Field Studies

The question of whether studying drug effects on an isolated aspect of a particular task (e.g., tracking or reaction time) adequately represents the more complex behavior one is attempting to assess (e.g. monitoring radar, driving a motor vehicle, decision-making), remains controversial. Proposals

to utilize simulations of workplace environments and actual field studies are encouraged to examine the correlations among drug use, simple and complex measures of workplace performance, and other simpler behavioral measures. Both acute and chronic effects of drugs, as well as "hangover" effects, are important to consider.

II. Prevalence and etiology of workplace-related drug use

While national research efforts provide information on the prevalence of drug use in the general public it has proven difficult to characterize the general nature and extent of drug use and abuse in the workforce. Prevalence estimates of the extent of drug use in the American workforce, as well as for specific companies or types of businesses or occupations, are important both as indicators of the extent of drug use and as baseline/followup measures for evaluations of workplace drug programs.

Studies are encouraged to develop and utilize valid and reliable methods of assessing incidence and prevalence of drug use by the workforce and at the workplace in various segments of business and industry and in various occupations. Research is needed to compare and contrast prevalence estimation techniques currently in use in work-related populations, with appropriate consideration of issues of reliability and validity. The three principal data-collection methods currently in use are chemical testing of biological samples, self-report surveys, and on-the-job observation and referral. Prevalence estimates based on chemical testing, such as urinalysis, provide a tool for epidemiological investigations of drug use by the workforce but have limitations because traces of most drugs are detectable for only a few days. Self-report data can provide an accurate estimate of prevalence rates and patterns of drug use, as long as these data are collected appropriately. Observation and referral are most useful in detecting acute impairment or later stage impairment due to chronic use.

While NIDA has long had an interest in the etiology of drug use and abuse, research has focused primarily on adolescent populations. This announcement encourages research to examine the relationships among worker characteristics, job characteristics, organizational environment, and patterns of drug use and its consequences. Studies to identify workers who may be vulnerable to specific kinds of stressors in the work environment are of interest along with those that focus on job/organizational characteristics across different worker populations.

Inclusion of Women in Study Populations

Applicants are urged to consider the inclusion of women in the study populations for all clinical research efforts. Exceptions would be studies of diseases which exclusively affect males or where involvement of pregnant women may expose the fetus to undue risks. Gender differences should be noted and evaluated. If women are not to be included, a clear rationale should be provided for their exclusion.

In order to provide more precise information to the treatment community, it is recommended that publications resulting from Alcohol, Drug Abuse, and Mental Health Administration-supported research in which the study population was limited to one sex for any reason other than that the disease or condition studied exclusively affects that sex, should state, in the abstract summary, the gender of the population studied, e.g., "male patients," "male volunteers," "female patients," "female volunteers".

Inclusion of Minorities in Study Populations

Applicants are urged to give attention (where feasible and appropriate) to the inclusion of minorities in study populations for research into the etiology of diseases, research in behavioral and social sciences, clinical studies of treatment and treatment outcomes, research on the dynamics of health care and its impact on disease, and appropriate interventions for disease prevention and health promotion. If minorities are not included in a given study, a clear rationale for their exclusion should be provided.

Inquiries

Further information and consultation on NIDA's program requirements can be obtained from:

Steven W. Gust, Ph.D.
Workplace Performance and Technical Research Branch
Division of Applied Research
National Institute on Drug Abuse
Parklawn Building, Room 9A-53
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 443-6014

ERRATUM

COOPERATIVE CLINICAL TRIALS IN TRANSPLANTATION

RFA: AI-90-07

P.T. 34; K.W. 0745065, 0755015, 0745045, 0745040

National Institute of Allergy and Infectious Diseases

The following is a correction notice to reflect a change in the Request for Applications (RFA) entitled "Cooperative Clinical Trials in Transplantation", published in the NIH Guide for Grants and Contracts Volume 19, No. 19, on May 18, 1990.

As written, the objective of this study is to evaluate new and currently used immunotherapeutic protocols in the treatment and prevention of acute kidney graft rejection. It is the desire of NIAID staff not to limit the protocols to acute kidney graft rejection. Therefore, every place where acute kidney graft rejection is mentioned in the Announcement and in the RFA, the word acute should be deleted. Copies of the RFA requested from Program staff as listed in the Announcement reflect this change.