NIH GUIDE

For Grants and Contracts

NOTICE OF MAILING CHANGE

☐ Check here if you wish to discontinue receiving this publication

☐ Check here if your address has changed and you wish to continue receiving this publication. Make corrections below and mail this page to:

NIH Guide
Printing & Reproduction Branch
National Institutes of Health
Room B4BN08, Building 31
Bethesda, Maryland 20892

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

OFFICIAL BUSINESS
Penalty for Private Use, $300

First Class Mail
Postages & Fees Paid
PHS/NIH/OD
Permit No. G-291

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

Vol. 19, No. 2
January 12, 1990

Vol. 19, No. 2, January 12, 1990

DATED ANNOUNCEMENTS (RFPs AND RFAs)

ONGOING PROGRAM ANNOUNCEMENTS

ERRATA

AIDS COMMUNITY-BASED OUTREACH/INTERVENTION RESEARCH PROGRAM

RFA AVAILABLE: DA-90-02

P.T. 34, FF; K.W. 0715008, 0403004, 0404021, 0411005

National Institute on Drug Abuse

APPLICATION RECEIPT DATE(S)

Receipt Date	Initial Review	Advisory Council Date	Earliest Start Date
March 12*	June/July	Sept/Oct	November

* After this special receipt date, applications may be submitted to this announcement using the regular AIDS receipt dates.

PURPOSE

The purpose of this research grant program is to announce a cooperative agreement program to evaluate the efficacy of community-based intervention strategies designed to prevent and reduce the spread of AIDS among intravenous (IV) drug users, their sexual partners, and those at demonstrable risk for intravenous drug use.

RESEARCH OBJECTIVES

Emphasis is placed on gaining an understanding of the efficacy of different innovative strategies for containing the spread of AIDS within and from high-risk populations, e.g., IV drug users who are not in treatment, their sexual partners, and those at demonstratable risk for intravenous drug use. There is also a large concern with monitoring and understanding the nature of risk-taking behavior within communities and groups over time. Consequently, the National Institute on Drug Abuse (NIDA) will continue to facilitate grantee collaboration and will make a closed-ended interview schedule, the AIDS Initial Assessment, to be administered to all subjects admitted into the applicant's study. This instrument is to be administered as a baseline measure prior to HIV testing and/or the initiation of traditional or innovative interventions. The applicant will also state hypotheses s/he will be testing in the course of the study. It is expected that outcome variables will consist of at least the following: (a) reduction in risk-taking behaviors associated with needle use and with sexual behaviors; (b) increases in knowledge about AIDS transmission and risk factors. Beyond the outcome study and the description/monitoring of risk-taking behaviors and knowledge regarding AIDS transmission, the applicant should plan for the conduct of sub-studies relevant to an understanding of the issues involved in planning and developing AIDS prevention programs for the different populations they are studying.

INCLUSION OF MINORITIES IN STUDY POPULATIONS

The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) urges applicants to give added 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.

INCLUSION OF WOMEN IN STUDY POPULATIONS

ADAMHA urges applicants 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 ADAMHA-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."

AVAILABILITY OF FUNDS

It is estimated that in FY 1990, up to 20 projects may be funded under this announcement. Applications received in response to this announcement will compete for approximately $7 million in FY 1990 grant money expected to be available for this purpose.

REVIEW PROCEDURES

Applications received under this announcement will be assigned to an initial reveiw group for scientific and technical merit review. Such groups consist primarily of non-Federal experts. Notification of review outcome will be sent to the applicant as soon as it is available. Applications will receive a secondary review by the National Advisory Council of the National Institute on Drug Abuse whose review may be based on policy considerations as well as scientific merit. Only applicants recommended for approval by the National Advisory Council will be considered for funding.

APPLICATION PROCEDURES

Applicants must use the standard PHS-398 (Rev. 10/88) research grant application form. "AIDS Community-based Research Program" should be typed on Item #2 on the face page of the PHS 398 form and check the YES box. Application kits containing the necessary forms and instructions may be obtained from the following office:

Grants Management Branch
National Institute on Drug Abuse
5600 Fishers Lane, Room 8-A-54
Rockville, Maryland 20857
Telephone: (301) 443-6710

INQUIRIES

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

Chief, Community Research Branch
National Institute on Drug Abuse
5600 Fishers Lane, Room 9-A-30
Rockville, Maryland 20857
Telephone: (301) 443-6720

VIRAL ONCOGENESIS AND PATHOGENESIS OF HEPATOCELLULAR CARCINOMA

RFA AVAILABLE: 90-CA-08

P.T. 34; K.W. 0715035, 0705025, 0765033, 1002045

National Cancer Institute

Letter of Intent Receipt Date: June 4, 1990
Application Receipt Date: August 3, 1990

INTRODUCTION

A diverse group of viral agents are etiologically associated with human viral hepatitis, some of which are also associated with chronic sequelae that may progress to primary hepatocellular carcinoma (PHC). Hepatitis B virus (HBV) is a double-stranded DNA virus that occurs worldwide and can be transmitted by contaminated blood, blood products, or unsterile needles. In addition, horizontal spread of the virus occurs, particularly among young children, by contamination of mucous membranes or small breaks in the skin with contaminated secretions from infected playmates. Perinatal (vertical) transmission from HBV-infected mothers to offspring also occurs and is a particularly important mode of transmission in Asia. HBV progresses to a chronic infection or chronic carrier state in 5-10 percent of the adult clinical cases and has been strongly associated with the etiology of PHC.

The term "non-A, non-B hepatitis virus" (NANBH) describes viral hepatitis that occurs in the absence of serologic markers for known hepatotropic agents such as hepatitis A virus (HAV), HBV, or other viruses such as cytomegalovirus or Epstein-Barr virus that are associated with hepatitis-like symptoms. Three epidemiologic forms of human NANBH, called "blood-transmitted",

"coagulation-factor-transmitted", and "enteric" or "waterborne", have been proposed based on studies in primate models. NANBH agents cause an acute hepatitis that is somewhat milder than HBV induced disease; however, it has been estimated that at least half of the NANBH infections result in chronic hepatitis, which in turn results in cirrhosis in approximately 20 percent of these cases. Chronicity and cirrhosis carry increased risk of PHC. NANBH is of particular significance in the U.S. since up to 10 percent of transfusions in the U.S. are thought to result in hepatitis and more than 90 percent of the transfusion-associated hepatitis in the U.S. is associated with NANB agents. The "blood transmitted" form of NANBH, also referred to by some investigators as hepatitis C virus (HCV), has an RNA genome and is the only one of these agents currently associated with primary hepatocellular carcinoma.

This Request for Applications (RFA) is for a single competition with a deadline of August 3, 1990, for receipt of applications, and June 4, 1990, for receipt of letters of intent. Applications should be prepared and submitted in accordance with the aims and requirements described in the complete RFA document which may be obtained from the program director listed in the INQUIRIES section.

RESEARCH GOALS AND SCOPE

The overall thrust of this RFA is to stimulate research on the human hepatitis viruses associated with liver cancer (e.g. HBV, NANBH or HCV), and their interactions with environmental factors (e.g., dietary aflatoxin), and host factors (chromosomal fragility, immune response) in order to identify the mechanism(s) involved in establishment of chronicity, cell transformation, and PHC. Examples of research objectives would include the following: (i) development and/or use of sensitive and specific assays for blood-borne NANBH (HCV) to determine the possible role of this agent in PHC; (ii) determination of the prevalence of HBV strains resistant to currently available vaccines and the role of genetic variation of HBV isolates in this process; (iii) definition of the role of the HBV X gene in transformation; (iv) systematic studies of co-carcinogenesis (viral, chemical, and/or dietary factors) in the development of PHC in animal models of human cancer (e.g. the woodchuck); (v) determination, in transgenic animals, of the oncogenic potential of specific viral gene products; (vi) determination of the possible role of cellular oncogenes or anti-oncogenes in PHC; (vii) investigation of the role of chromosomal abnormalities in susceptibility to PHC; and (viii) measurement of the host response to individual viral proteins with the goal of delineating the host response to different viral antigens in hepatitis-associated pre-malignant and malignant sequelae.

Where appropriate, collaborative arrangements to facilitate the achievement of research goals should be considered.

Applications should contain as goals both methodological development and application to a specific area of HBV or HCV oncogenesis as well as studies of possible synergistic interactions between viruses, alcohol, aflatoxins, etc.; basic and/or clinical issues are considered as appropriate subjects for this RFA.

MECHANISM OF SUPPORT

This RFA will use the National Institutes of Health (NIH) grant-in-aid (R01). Responsibility for the planning, direction and execution of the proposed project will be solely that of the applicant. Except as stated in this RFA, awards will be administered under PHS grants policy as described in the Public Health Service Grants Policy Statement, DHHS Publication No. (OASH) 82-50,000, revised January 1, 1987.

This RFA is a one-time solicitation. Generally, future unsolicited competing renewal applications will compete as research project applications with all other investigator-initiated applications and be reviewed in a standing Division of Research Grants study section. However, should the National Cancer Institute (NCI) determine that there is a sufficient continuing program need, NCI may announce a request for renewal applications.

Approximately $1,000,000 in total costs per year for five (5) years will be committed to fund applications that are submitted in response to this RFA. Actual funding is dependent on the receipt of a sufficient number of applications of high scientific merit. The total project period for applications submitted in response to the present RFA should not exceed five (5) years. The earliest feasible start date for the initial awards will be April 1, 1991. Although this program is provided for in the financial plans of the NCI, award of grants pursuant to this RFA is also contingent upon the availability of funds for this purpose. Non-profit and for-profit

institutions are eligible to apply, as are both foreign and domestic institutions.

INQUIRIES

A copy of the complete RFA describing the research goals and scope, the review criteria, and the method of applying can be obtained by contacting:

Dr. John S. Cole, III
Program Director
RNA Virus Studies II
Biological Carcinogenesis Branch
Division of Cancer Etiology
National Cancer Institute
Executive Plaza North, Room 540
Bethesda, Maryland 20892
Telephone: (301) 496-1718

Written or telephone inquiries concerning the objectives and scope of this RFA or inquiries about whether or not specific proposed research would be responsive are encouraged and should be directed to Dr. Cole at the above address. The program director welcomes the opportunity to clarify any issues or questions from potential applicants.

ONGOING PROGRAM ANNOUNCEMENTS

MOLECULAR APPROACHES TO DRUG ABUSE RESEARCH

P.T. 34; K.W. 0404009, 1002008, 0760075, 0765010

National Institute on Drug Abuse

PURPOSE

The purpose of this announcement is to stimulate basic research in the molecular biology of the addictive process. In general, research is needed to: (1) identify and elucidate the structure of cellular membrane components such as receptors and transporters with specific affinity for drugs of abuse; (2) establish the biosynthetic pathways by which inter- and intra-cellular messengers involved in the addictive process are synthesized, modified and degraded; (3) explore the molecular mechanism(s) involved in tolerance, dependence, craving and other manifestations of the addictive process; and (4) develop new methods and resources to facilitate the study of the addictive process at the molecular level.

RESEARCH OBJECTIVES*

The National Institute on Drug Abuse (NIDA) encourages the submission of research proposals to gather and integrate information at the molecular biology and genetic levels in order to understand the underlying basis of addiction, the consequences of long-term drug abuse, and to generate better strategies for effective diagnosis, treatment, education and prevention.

Examples of particular interest include the following:

1. Neuropeptides: Studies of the expression, processing and distribution of various relevant neuropeptide genes at different developmental stages.

2. Receptors: Efforts to study the cloned genes of receptors, ion channels and transporters in terms of genomic organization, chromosomal localization as well as the regulation of their expression.

3. Genetic Factors of the Addiction Processes: Development of strains of animals exhibiting variation in drug preference, vulnerability, tolerance and dependence to abused substances, studies to uncover the genes responsible for these variations.

MECHANISM OF SUPPORT

Support can be obtained in the form of R01 (Research Project Grants), R03 (Small Grants), R13 (Research Conference Grants), R29 (First Independent Research Support and Transition Awards).

ELIGIBILITY

Application for research grants may be submitted by any public or private non-profit or for-profit institution such as universities, colleges, hospitals, laboratories, units of State or local government, private industry and eligible agencies of the Federal Government. Women and minority investigators are encouraged to apply.

APPLICATION PROCEDURES

Applicants should use the grant application form PHS-398 (Rev. 10/88). The title of this Program Announcement, "Molecular Approaches to Drug Abuse Research," should be typed in item number 2 on the face page of the PHS-398 application form.

Application kits containing the necessary forms and instructions may be obtained from business offices or offices of sponsored research at most colleges, universities, medical schools, and other major research facilities. If such a source is not available, the following office may be contacted for the necessary application material:

Grants Management Branch
National Institute on Drug Abuse
5600 Fishers Lane, Room 10-25
Rockville, Maryland 20857
Telephone: (301) 443-6710

The signed original and six (6) permanent, legible copies of the completed application should be sent to:

Division of Research Grants
National Institutes of Health
Westwood Building, Room 240
Bethesda, Maryland 20892**

RECEIPT AND REVIEW SCHEDULE

The schedule for receipt and review is as follows:

Receipt Dates (New/Renewal)	Initial Review	Advisory Council Review	Earliest Start Date
Jun 1/Jul 1#	Oct/Nov	Jan/Feb	Apr 1
Oct 1/Nov 1#	Feb/Mar	May/June	July 1
Feb 1/Mar 1#	May/June	Sep/Oct	Dec 1

Amended applications (new or renewal) are to be submitted on these dates.

Applications received after the above receipt dates are subject to assignment to the next review cycle or may be returned to the applicant.

REVIEW PROCESS

The Division of Research Grants, NIH, serves as a central point for receipt of applications for most discretionary PHS grant programs. Applications received under this announcement will be assigned to an Initial Review Group (IRG) in accordance with established PHS Referral Guidelines. The IRGs, consisting primarily of non-Federal scientific and technical experts, will review the applications for scientific and technical merit. Notification of the review recommendations will be sent to the applicant after the initial review. Applications will receive a second-level review by an appropriate National Advisory Council whose review may be based on policy considerations as well as scientific merit. Only applications recommended for approval by the Council may be considered for funding.

Applications submitted in response to this announcement are not subject to the intergovernmental review requirements of Executive Order 12372, as implemented through Department of Health and Human Services regulations at 45 CFR Part 100 and are not subject to Health Systems Agency Review.

REVIEW CRITERIA

Criteria for scientific/technical merit review of applications will include the following: significance and originality from a scientific or technical standpoint of the goals of the proposed research; adequacy of the methodology proposed to carry out the research; feasibility of the principal investigator and other key research personnel; availability of adequate facilities, other

resources, and collaborative arrangements necessary for the research; appropriateness of budget estimates for the proposed research activities; and adequacy of provision for the protection of human subjects and the welfare of animal subjects, as applicable.

AWARD CRITERIA

Applications recommended for approval by the National Advisory Council on Drug Abuse will be considered for funding on the basis of overall scientific and technical merit of the research as determined by peer review, National Institute on Drug Abuse needs and balance, and availability of funds.

INQUIRIES

The guidelines, other information about the drug abuse research grants program, and further information about areas of interest described in this announcement may be obtained by contacting:

Dr. Theresa Lee
Biomedical Branch
National Institute on Drug Abuse
5600 Fishers Lane, Room 10A-31
Rockville, Maryland 20857
Telephone: (301) 443-6300

* Other components of the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) share an interest in several of the research areas described in this announcement. Projects may be submitted under this announcement that address issues in common with the National Institute on Alcohol Abuse and Alcoholism. Joint funding of such projects is possible; however, preapplication consultation is strongly encouraged. Applications are considered for acceptance and assigned according to standing Institute referral guidelines. Referencing this announcement does not guarantee assignment to NIDA.

ERRATA

NCI/MARC SUMMER TRAINING SUPPLEMENT

P.T. 42, FF; K.W. 0720005, 0715035, 1014006

National Cancer Institute

Application Receipt Date: February 1, 1990

In the above captioned Program Announcement published in the December 1, 1989 issue of the NIH Guide for Grants and Contracts (Vol. 18, No. 43), a portion of the first paragraph was omitted. The correct version appears below:

The Comprehensive Minority Biomedical Program (CMBP) of the Division of Extramural Activities (DEA), National Cancer Institute (NCI), invites interested grantee institutions that have Minority Access to Research Careers (MARC) grants to apply for CMBP support of MARC scholars interested in obtaining laboratory research experience at the NCI. This program announcement will be issued on an annual basis.

INVESTIGATIONS INTO METHODS THAT REPLACE OR REDUCE VERTEBRATE ANIMALS USED IN RESEARCH, OR LESSEN THEIR PAIN AND DISTRESS

P.T. 34; K.W. 0755020, 0780010, 0780015, 0780020

National Institutes of Health
Alcohol, Drug Abuse, and Mental Health Administration

The following is a correction in the NIH-wide Program Announcement entitled, "Investigations Into Methods That Replace Or Reduce Vertebrate Animals Used In Research, Or Lessen Their Pain And Distress" published in the NIH Guide for Grants and Contracts, Volume 18, No. 39, November 3, 1989. The National Institute on Deafness and Other Communication Disorders (NIDCD) was inadvertently omitted from the list of participating Institutes. The contact person for NIDCD is the following:

Dr. Ralph F. Naunton
Acting Director, Extramural Programs
National Institute on Deafness and
Other Communication Disorders
Federal Building, Room 1C-11
7550 Wisconsin Avenue
Bethesda, Maryland 20892
Telephone: (301) 496-1804

**THE MAILING ADDRESS GIVEN FOR SENDING APPLICATIONS TO THE DIVISION OF RESEARCH GRANTS OR CONTACTING PROGRAM STAFF IN THE WESTWOOD BUILDING IS THE CENTRAL MAILING ADDRESS FOR THE NATIONAL INSTITUTES OF HEALTH. APPLICANTS WHO USE EXPRESS MAIL OR A COURIER SERVICE ARE ADVISED TO FOLLOW THE CARRIER'S REQUIREMENTS FOR SHOWING A STREET ADDRESS. THE ADDRESS FOR THE WESTWOOD BUILDING IS:

5333 Westbard Avenue
Bethesda, Maryland 20816

*U.S. GOVERNMENT PRINTING OFFICE:1990-261-138:00031