NIH GUIDE

For Grants and Contracts

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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. 17, No. 20
June 10, 1988

Vol. 17, No. 20, June 10, 1988

NOTICES

DATED ANNOUNCEMENTS (RFPs AND RFAs)

ERRATUM

NOTICES

NATIONAL COOPERATIVE VACCINE DEVELOPMENT GROUPS FOR THE ACQUIRED IMMUNODEFICIENCY SYNDROME

RFA AVAILABLE: 88-AI-06 (Extension of Due Date)

P.T. 34; K.W. 0740075, 0715120, 1002008, 0710070, 1002045

National Institute of Allergy and Infectious Diseases

Revised Application Receipt Date: August 25, 1988

An RFA for the National Cooperative Vaccine Development Groups for the Acquired Immunodeficiency Syndrome appeared in the NIH Guide for Grants and Contracts, Vol. 17, No. 11, March 25, 1988, with an originally announced due date of July 15, 1988.

The National Institute of Allergy and Infectious Diseases announces the extension of the due date for these applications to August 25, 1988. The RFA (general description and Guidelines) and consultation may be obtained from:

Dr. Wayne C. Koff
AIDS Program
6003 Executive Blvd., Rm. 234P
National Institute of Allergy
and Infectious Diseases
National Institutes of Health
Bethesda, Maryland 20892
Telephone: (301) 496-8200

REMINDER: REFERENCE LETTERS AND FELLOWSHIP APPLICATIONS

P.T. 22; K.W. 0720005, 1014002

Division of Research Grants

At least three completed, sealed letters of reference must be included with each individual fellowship application when the application is submitted to the NIH. Otherwise, the application will be returned to the applicant.

This new procedure, which was announced in the previous issues of the NIH Guide for Grants and Contracts (March 18, 1988 and April 1, 1988), was introduced to help expedite the review of fellowship applications. It was effective beginning with the May 10, 1988, receipt date. This procedure pertains to individual postdoctoral fellowship (F32) applications, individual predoctoral fellowship (F31) applications, senior fellowship (F33) applications, international fellowship (F05-Fogarty International Center) applications, and senior international fellowship (F06-Fogarty International Center) applications.

GUIDELINES FOR FEDERAL STATISTICAL ACTIVITIES

P.T. 34; K.W. 1014002

National Institutes of Health

On January 20, 1988, the Office of Management and Budget published in the Federal Register proposed guidelines for Federal statistical activities. To date, OMB has received few comments from the public and has, therefore, extended the public comment period from April 18, 1988, to July 15, 1988. Interested grantees/contractors are encouraged to comment. Federal agencies have already responded, being required to do so within the original comment period.

TRANSFUSION TRIAL TO PREVENT PLATELET ALLOIMMUNIZATION

RFAs AVAILABLE: 88-HL-12B (Clinical Centers)
88-HL-13B (Coordinating Center)

P.T. 34; K.W. 0750010, 0755015, 0785070, 0710070

National Heart, Lung, and Blood Institute

Application Receipt Date: August 26, 1988

The Blood Resources Branch of the Division of Blood Diseases and Resources, National Heart, Lung, and Blood Institute (NHLBI), announces the availability of a Request for Applications (RFAs - Cooperative Agreement) on the above subject. Copies of the RFAs, NIH-88-HL-12B (Clinical Centers) and NIH-88-HL-13B (Coordinating Center), may be obtained from staff of the NHLBI.

The program will determine the best clinically useful technique(s) to prevent or minimize alloimmunization as a cause of poor response to platelet transfusion. In some locales, as few as 8 percent of patients receive 35 percent of the platelet transfusions, often because of poor response due to alloimmunization. Methods for overcoming this poor response, such as by providing HLA-matched single-donor pheresis platelets, may be cumbersome and not completely successful. Hence, prevention of alloimmunization is desirable.

The successful completion of this study is expected to require 6-8 cooperating clinical centers, each able to enroll at least 20 patients each year for three years.

A Central Coordinating Center will also be needed to ensure smooth functioning of the study and to provide data management, reporting services and data analysis.

Requests for copies of the RFA should be addressed to:

Paul R. McCurdy, M.D.
DBDR, NHLBI
Federal Building, Room 518
National Institutes of Health
Bethesda, Maryland 20892

CELLULAR GROWTH FACTORS AND ONCOGENES IN DEVELOPING LUNG

RFA AVAILABLE: 88-HL-17-L

P.T. 34; K.W. 0760020, 0705065, 1002059, 1002004, 1002008, 1003002, 0710030

National Heart, Lung, and Blood Institute

Application Receipt Date: December 9, 1988

The Structure and Function Branch of the Division of Lung Diseases, National Heart, Lung, and Blood Institute (NHLBI), announces the availability of a Request for Applications (RFA) on the above subject. Copies of the RFA are currently available from staff of the NHLBI.

This program will support basic research on the mechanisms by which polypeptide growth factors and oncogenes regulate cell growth and proliferation in normal developing lung during the prenatal and early postnatal period. The use of molecular biologic approaches is strongly encouraged. It is expected that research applications will encompass a variety of approaches and require expertise from a wide range of disciplines including pulmonary cell biology, biochemistry, molecular biology, cancer biology, developmental biology, and pulmonary physiology and medicine.

It is anticipated that six grants will be awarded under this program. The specific amount to be funded, however, will depend on the merit and scope of the applications received and the availability of funds.

A letter of intent is requested by September 15, 1988, and the deadline for receipt of applications is December 9, 1988. The earliest award date for successful applications will be in July 1989. Awards will be made to foreign

institutions only for research of very unusual merit, need, and promise. Request for copies of this RFA should be addressed to:

Dorothy Berlin Gail, Ph.D.
Chief, Structure and Function Branch
Division of Lung Diseases, NHLBI
5333 Westbard Avenue, Room 6A07
Bethesda, Maryland 20892
Telephone: (301) 496-7171

CELLULAR MECHANISMS OF 02-SENSING BY THE CAROTID BODY

RFA AVAILABLE: 88-HL-16-L

P.T. 34; K.W. 0705065, 1002004, 0710085, 1003002, 1002019, 0785115

National Heart, Lung, and Blood Institute

Application Receipt Date: December 9, 1988

The Division of Lung Diseases invites grant applications for a single competition for support of research on the cellular and subcellular mechanisms associated with oxygen chemoreception by the carotid body.

The main objective of this RFA is to stimulate basic research to determine the cellular, subcellular, and biophysical mechanisms involved in oxygen (hypoxic) sensing, chemoreception, and transduction within the carotid body. A secondary objective is to compare these mechanisms with other known hypoxic sensing systems. Among the disciplines and expertise that may be appropriate for this research program are respiratory physiology, neurophysiology, neuropharmacology, morphology, cell biology, biochemistry, molecular biology, genetics, and pulmonary medicine.

It is anticipated that six grants will be awarded under this program. The specific amount to be funded, however, will depend on the merit and scope of the applications received and the availability of funds.

A letter of intent is requested by September 15, 1988, and the deadline for receipt of applications is December 9, 1988. Awards in connection with this announcement will be made to foreign institutions only for research of very unusual merit, need, and promise, and in accordance with Public Health Service policy governing such awards.

Requests for copies of this RFA should be addressed to:

James P. Kiley, Ph.D.
Structure and Function Branch
Division of Lung Diseases, NHLBI
Westwood Building, Room 6A07
National Institutes of Health
Bethesda, Maryland 20892
Telephone: (301) 496-7171

RETROVIRUS ANIMAL MODELS AND HIV PATHOGENESIS

RFA AVAILABLE: 88-CA-14

P.T. 34; K.W. 0755020, 0715120, 1002045, 0715035

National Cancer Institute

Application Receipt Date: September 19, 1988

I. INTRODUCTION

The Biological Carcinogenesis Branch, Division of Cancer Etiology, National Cancer Institute, invites grant applications from interested investigators to develop and utilize appropriate animal models to mimic the infections of humans by the human immunodeficiency virus (HIV-1). HIV is associated with Kaposi's sarcoma and other neoplastic sequelae such as B-cell non-Hodgkin's lymphomas, and Hodgkin's Disease. Investigations of the mechanisms of HIV-host interactions will help in understanding the properties of the virus and the characteristics of the host response that may predispose the host to viral pathogenic processes leading to acute disease and carcinogenesis. Animal models can also provide useful models for basic research leading to prototype vaccine development and preclinical evaluation. The present RFA

announcement is for a single competition with a deadline of September 19, 1988, for receipt of applications, and August 22, 1988, for receipt of letter 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 in section IV below.

II. RESEARCH GOALS AND SCOPE

The major emphasis of the research to be funded under this RFA is to encourage investigations to develop and exploit animal models to investigate mechanisms of HIV pathogenesis and further, in the long term to employ these models to provide appropriate systems for basic research in experimental and prototype vaccine development and preclinical vaccine evaluation. New areas of scientific research to be supported under this RFA include, but are not limited to: (1) Studies emphasizing the development of animal models using HIV, the simian immunodeficiency virus (SIV) or other appropriate retroviruses, which mimic long-term HIV infections including viremia, latency, and disease progression to immune dysfunction and possible neoplastic sequelae. (2) The use of these animal models for investigations emphasizing virus-host interactions to better define and understand viral induced pathogenic and immune function alterations. These molecular, biochemical or immunologic studies may include: (a) an analysis of the molecular interactions between viral structural and/or regulatory proteins and those of the host which define the virus' tropism for cells of the immune system; (b) the ability of the virus to evade destruction by the host; (c) the molecular mechanism by which HIV induces alterations of normal cellular and immune functions; (d) and the molecular mechanism of viral persistence, latency, and disease progression.

III. MECHANISM OF SUPPORT

Awards will be made as research project grants. Responsibility for the planning, direction, and execution of the proposed project will be solely that of the applicant. Except as otherwise stated in this RFA, awards will be administered under PHS grants policy as stated 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. All applications submitted in response to this announcement will be classified as new grants (Type 1). Generally, future unsolicited competing renewal applications will compete with all investigator-initiated applications and be reviewed by a standing DRG study section. However, should the NCI determine that there is a sufficient continuing program need, NCI may announce a request for renewal applications. Only recipients of awards under this RFA will be eligible to apply.

Approximately $1,000,000.00 in total costs per year for five (5) years will be committed specifically to fund applications which are submitted in response to this RFA. It is anticipated that three (3) to five (5) awards will be made. This funding level 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 start date for the initial awards will be no later than March 19, 1989. Although this program is provided for in the financial plans of the National Cancer Institute (NCI), the 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. Foreign as well as domestic institutions are eligible.

IV. 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:

Kenneth J. Cremer, Ph.D.
Program Director, AIDS Virus Studies
Biological Carcinogenesis Branch
Division of Cancer Etiology
National Cancer Institute
Executive Plaza North, Room 540
Bethesda, Maryland 20892
Telephone: (301) 496-6085

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. Kenneth J. Cremer at the above address. The program director welcomes the opportunity to clarify any issues or questions from potential applicants.

ARTIFICIAL INSEMINATION

RFA AVAILABLE: 88-HD-12

P.T. 34; K.W. 0413002, 0705075, 1003002

National Institute of Child Health and Human Development

Application Receipt Date: October 14, 1988

The Reproductive Sciences Branch (RSB) of the Center for Population Research (CPR) of the National Institute of Child Health and Human Development (NICHD), is inviting research grant applications for support of investigations on improving outcome in artificial insemination (AI).

BACKGROUND

AI is the most venerable of assisted reproduction technologies, and traditionally has been one of the safest. Because of the recent spread of human immunodeficiency virus (HIV), which is transmissible by semen, insemination with fresh donor semen can no longer be considered safe. The Centers for Disease Control and the Food and Drug Administration, as well as the American Fertility Society, currently recommend the use of frozen semen (1,2) so that the donor can be rechecked for delayed HIV seroconversion before the specimen is used. Although reliable data are sparse, there is general agreement that frozen semen appears to be less effective than fresh in producing pregnancies. Some donors of proven past fertility provide semen which loses fertilizing capability after freezing and thawing. Unfortunately, the science of cryopreservation of human sperm remains largely empirical. No single current sperm function test can predict fertility. The connections between sperm function test results, female factors, and ultimate fertility have not yet been well defined. The methods of basic cryobiology, reproductive tract biochemistry, and sperm physiology, need to be applied to well-founded, testable hypotheses which will lead to increased likelihood of reproductive success.

1 The American Fertility Society. Revised New Guidelines for the Use of Semen-Donor Insemination. Fertil Steril 49:211, 1988

2 Centers for Disease Control. Semen Banking, Organ and Tissue Transplantation, and HIV Antibody Testing. MMWR 37:57-58, 1988

RESEARCH GOALS AND SCOPE

The purpose of this RFA is to encourage research directed at improved outcome in AI, with emphasis on, but not limited to, scientific progress in cryopreservation technology. Because there are profound species differences in fertilization success after AI, as well as tolerance of cryopreservation, the proposed research should consist wholly or in part of human studies.

It is expected that advances in the practical aspects of AI would also incorporate better knowledge of basic reproductive physiology with potential for broader impact on diagnosis and treatment of human infertilty.

Some areas of high relevance to the RSB include:

1. Define the nature of cryopreservation injury.

2. Characterize the loss of fertilizing ability after freezing.

3. Define functional endpoints for in vitro sperm function.

4. Elucidate further the steps normally occurring as sperm acquire fertilizing ability, such that manipulations of the semen for storage can be placed on a rational basis.

5. Minimize the survival of HIV and other sexually transmitted pathogens under cryopreservation conditions.

In general, the proposals sought should involve improving pregnancy rate, decreasing sexually transmitted disease risk, or both. Some specific areas are:

1. Improved donor selection
2. Improved semen quarantine protocols for pathogens
3. Improved sperm function after freeze-thaw
4. Improved survival and fertilization in the female tract

MECHANISM OF SUPPORT

Applications in response to this RFA will be funded in accord with the traditional grant-in-aid research project award (R01) and extant policies guiding the research grant program of the NICHD.

APPLICATION AND REVIEW PROCEDURES

Applications responding to this RFA may not be identical to any already submitted to NIH and pending review or funding. In the event of duplication, one must be withdrawn. Applications will be reviewed by NIH staff for responsiveness to the RFA. Non-responsive applications will be returned to the applicant. Responsive applications may be subjected to triage by a peer-review group to determine their scientific merit relative to the other applications received in response to this RFA. NIH will withdraw from competition those applications judged to be noncompetitive and notify the applicant and institutional official. Those applications judged competitive will be further evaluated for scientific/technical merit by a review convened solely for this purpose by the Scientific Review Program, NICHD.

Criteria for evaluation by the IRG will be the same as for other research grant proposals. They are as follows: scientific merit - the significance of proposed questions, research design, methodology, data analysis and interpretation; research experience and competence of the applicant(s); adequacy of time and effort dedicated to the project by investigators and staff; adequacy of collaborative relationships, if applicable; adequacy of existing and proposed facilities and resources; and costs in relation to scope of the project. Funding decisions will be based on IRG and National Advisory Child Health and Human Development Council recommendations, program relevance, and availability of funds.

It is anticipated that four (4) grants will be awarded under this program, contingent upon the receipt of a sufficient number of meritorious proposals and the availablity of funds.

Applications should be submitted on form PHS 398, which is available in most institutional business offices or from the Division of Research Grants, NIH. Applications should be identified by checking the "yes" box in Item Number 2 on the face page of the application, and typing in the words, "In Response to RFA-88-HD-12." In addition, the RFA label available in the 9/86 revision of Application Form 398 must be affixed to the bottom of the face page and placed on top of your entire package. Applications should be recieved by DRG no later than October 14, 1988. The original and four (4) copies should be sent or delivered to:

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

Two (2) copies of the application should be sent to:

Laurance Johnston, Ph. D.
Scientific Review Program
National Institute of Child Health
and Human Development
National Institutes of Health
Executive Plaza North, Room 520
Rockville, Maryland, 20892 (Courier Zip Code 20852)

INQUIRIES

Inquiries regarding the content of this RFA should be directed to:

Dr. Donna L. Vogel
National Institute of Child Health
and Human Development
National Institutes of Health
Executive Plaza North, Room 603
Rockville, Maryland 20892
Telephone: (301) 496-6515

This program is described in the Catalog of Federal Domestic Assistance number 13.864, Population Research. Awards will be made under the authority of the Public Health Service Act, Title X, Section 1004 (Public Law 92-572, as amended; 42 USC 241) and Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grant policies and Federal

Regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to A-95 or Health Systems Agency review.

DATA-BASED INTERVENTION RESEARCH FOR PUBLIC HEALTH AGENCIES

RFA AVAILABLE: 88-CA-12

P.T. 34; K.W. 1010013, 0745055, 0403004

National Cancer Institute

Letter of Intent Receipt Date: June 30, 1988
Application Receipt Date: September 7, 1988

The Division of Cancer Prevention and Control (DCPC) of the National Cancer Institute (NCI), invites applications for cooperative agreements in support of projects that will serve as models of data use in the planning and evaluation of statewide cancer prevention and control programs.

RESEARCH GOALS AND SCOPE

This RFA is designed to stimulate the development of cancer prevention and control intervention programs on the state and local level based on a thorough analysis and evaluation of the variety of data sources related to cancer control that exist in the state. The four-phased project includes: (1) identification, appraisal, and analysis of existing population-specific data sources related to cancer control; (2) the development or modification of a cancer control plan; (3) initiation of new or modification of existing cancer prevention and control programs as specified in the plan; and (4) a period for evaluation of process and outcome.

ELIGIBILITY

Applicants must be state or territorial health departments (including the District of Columbia). Local health departments or agencies within the jurisdiction with primary responsibility for cancer control activities may apply through the state or territorial health department. Health departments currently funded under the NCI grants "Cancer Control Technical Development in Health Agencies" or "Data-based Interventions for Cancer Control" are not eligible to apply for this grant. Prospective applicants are asked to submit a letter of intent.

MECHANISM OF SUPPORT

Awards will be made as cooperative agreements. Funding is limited to a maximum of seven years. Approximately ten awards are anticipated depending on the quality of applications and the availability of funding.

INQUIRIES

Copies of the complete RFA and additional information may be obtained from:

Dr. Leslie Boss, Program Director
Cancer Control Applications Branch
National Cancer Institute
Blair Building, Room 4A01
9000 Rockville Pike
Bethesda, Maryland 20892-4200
Telephone: (301) 427-8684

ERRATUM

MASTER AGREEMENT FOR CEREBROVASCULAR CLINICAL RESEARCH

MAA/RFP AVAILABLE: NIH-NINCDS-88-13

P.T. 34; K.W. 0715200, 0785035, 0745055

National Institute of Neurological, Communicative Disorders and Stroke

Correction: In Vol. 17, No. 18, May 20, 1988, under RFP-NIH-NINCDS-88-13, Master Agreement for Cerebrovascular Clinical Research, the NINCDS at this time estimates that four Master Agreement Orders will be awarded in FY'89 for a total cost of $750,000 for that year.

GENDER AND AGING: RELATION TO HEALTH AND LONGEVITY

P.T. 34, CC, II; 0710010, 0404000, 0413001, 1010013, 0705040, 1002019

National Institute on Aging

This program announcement in the NIH GUIDE FOR GRANTS AND CONTRACTS on May 20, 1988 (Vol. 17, No. 18) contained the incorrect Institute staff contacts. The following individuals should be contacted regarding this program announcement:

For behavioral and social aspects:

Behavioral Sciences Research Program
National Institute on Aging
Building 31, Room 5C32
Bethesda, Maryland 20892
Telephone: (301) 496-3136

For endocrine, physiologic and medical epidemiologic aspects:

Geriatrics Branch, BRCM
National Institute on Aging
Building 31, Room 5C27
Bethesda, Maryland 20892
Telephone: (301) 496-1033

For genetic aspects:

Molecular and Cell Biology Branch, BRCM
National Institute on Aging
Building 31, Room 5C21
Bethesda, Maryland 20892
Telephone: (301) 496-6402

For neuroscience and neuropsychologic aspects:

Neuroscience and Neuropsychology of Aging Program
National Institute on Aging
Building 31, Room 5C35
Bethesda, Maryland 20892
Telephone: (301) 496-9350

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5333 Westbard Avenue
Bethesda, Maryland 20816

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