

Epidemiology and Genetics Epidemiology and Genetics

Research Program

Web Site: epi.grants.cancer.gov

The Epidemiology and Genetics Research Program (EGRP) manages a comprehensive program of grant-supported, population-based research to increase our understanding of cancer etiology and prevention. EGRP supports epidemiologic research in four areas: (I) methods and technologies for epidemiologic studies; (2) modifiable risk factors (e.g., diet and nutrition, alcohol, physical activity and energy balance, tobacco, infectious diseases, physical and chemical agents, and medical exposures, including medications and treatments); (3) host susceptibility factors (e.g., genetic, epigenetic, immunological, hormonal, and biological pathways; and social, cultural, and race/ethnic factors); and (4) clinical and translational research (e.g., clinical factors that influence development of cancer among persons with underlying diseases and conditions; the progression, recurrence, and mortality from cancer; and new primary cancers). EGRP also provides investigators several research services and resources—facilitation of cancer epidemiology consortia; the Breast and Colon Cancer Family Registries (CFRs); the Cancer Genetics Network (CGN); and the Geographic Information System for Breast Cancer Studies on Long Island (LI GIS), which also can be used for research on other diseases.

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EGRP-Sponsored Funding Opportunities

EGRP is sponsoring or cosponsoring the following Requests for Applications (RFAs) and Program Announcements (PAs)/ Program Announcements with Special Review (PARs). Search the *NIH Guide for Grants and Contracts* to access the full RFA and PA/PAR listings at *grants.nih.gov/grants/ guide* by announcement number.

Note: Key to the grant mechanism numbers listed below: R01—Research Project Grant, R03—Small Research Grant,

R21—Exploratory/Developmental Grant, R41/R42—Small Business Technology Transfer Grant, R43/R44—Small Business Innovation Research Grant, P01—Research Program Project, P50—Specialized Center, and U01—Research Project Cooperative Agreement, U19—Research Program Cooperative Agreement, U54—Specialized Center Cooperative Agreement.

 ∇ = new opportunity.

Rare Diseases Clinical Research Consortia for the Rare Diseases Clinical Research Network RFA-OD-08-001 for U54 This Request for Applications (RFA) invites new and renewal cooperative agreement applications for Rare Diseases Clinical Research Consortia (RDCRC). Proposals are sought for RDCRCs that individually focus on a subset of related rare diseases. Required components include a minimum of two clinical research projects (at least one of which must be a longitudinal study), a training (career development) component, at least one pilot/demonstration project, a Web site for educational and research resources in rare diseases, collaboration with patient support organization(s), and an administrative unit. The National Institutes of Health (NIH) Office of Rare Diseases (ORD) announced this RFA, which is cosponsored with several NIH Institutes. In general, budget requests should be limited to \$1.25 million in total cost. Applicants must request a project period of 5 years. Letters of Intent are due July 20, and applications are due by August 20, 2008.

Contact: Elizabeth Read-Connole, Ph.D., National Cancer Institute (NCI) Representative to the Office of Rare Diseases Committee, email *bconnole@mail.nih.gov*

▼ Comparative Systems Genetics of Cancer RFA-CA-08-017 for R01 This RFA solicits grant applications for research projects focused on the development and application of comparative (cross-species) systems genetics approaches to address key cancer-relevant problems. Proposals are sought for research projects that will use these approaches to enhance the understanding of the mechanisms that underlie (1) human cancer susceptibility and (2) heterogeneity of human tumors. To meet these goals, proposed projects are expected to involve appropriate interdisciplinary collaborations providing expertise in such areas as human genetics, statistical genetics, model organism genetics, systems biology, mathematical or computational modeling of biological processes, and computer sciences. All projects are required to propose use of two species, one of which must be human, and the projects must adhere to the cancer Biomedical Informatics Grid (caBIG™) standards (cabig.cancer.gov). This RFA is cosponsored with the NCl's Division of Cancer Biology (DCB) and the National Institute of Environmental Health Sciences (NIEHS).

NCI intends to commit approximately \$3 million per year for up to 5 years to fund four to six individual multidisciplinary research programs. Letters of Intent are due April 14, and applications are due May 14, 2008.

Contacts: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov; Cheryl Marks, Ph.D., Associate Director, DCB, e-mail: marksc@mail.nih.gov; and Kimberly McAllister, Ph.D., NIEHS, e-mail: mcallis2@niehs.nih.gov

Administrative Supplements for Gene Identification Efforts: Replication and Fine-Mapping Studies: The Genes, Environment, and Health Initiative (GEI)

NOT-CA-08-011

Various mechanisms

These administrative supplements for NIH-funded genetic association studies were developed as part of the NIH-wide Genes, Environment, and Health Initiative (GEI, www.gei.nih.gov) to provide support for replication studies (with or without fine-mapping) of genetic regions putatively associated with the studied complex trait(s) (primarily those identified by genome-wide association studies, GWAS) to maximize the productivity of NIH-funded GWAS. This opportunity is open to all current NIH awardees of R01, P01, and P50 grants, and U01, U19, and U54 cooperative agreements, provided specific conditions are met. Budget requests must not exceed \$400,000 in total costs for funding not to exceed 12 months. **Requests are due by May 1, 2008**.

Contact: Elizabeth (Liz) Gillanders, Ph.D., Program Director, Host Susceptibility Factors Branch, e-mail: *lgilland@mail.nih.gov*

| Development, Application, and Evaluation of Prediction Models for Cancer Risk and Prognosis PA 07-021 for R01 PA 07-022 for R21 | These PAs are to encourage researchers working in the field of cancer control and prevention to: (I) improve existing models for cancer risk and prognosis by developing innovative research projects that use existing data, (2) develop new models for cancer risk and prognosis, and (3) validate new models and evaluate their utility in research and clinical settings. The PAs provide a mechanism of support for investigators to address two major challenges in model development: integrating diverse types of data and ensuring adequate validation. The PAs are not for applications that focus on the identification and characterization of prognostic/diagnostic markers. They are cosponsored with NCI's Applied Research Program (ARP), Division of Cancer Control and Population Sciences (DCCPS), and the Division of Cancer Treatment and Diagnosis (DCTD). Contact: Isis Mikhail, M.D., M.P.H., Dr.P.H., Program Director, Clinical and Translational Epidemiology Branch, e-mail: mikhaili@mail.nih.gov | | |
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| Small Grants Program for Cancer Epidemiology PAR-06-294 for R03 | This PAR invites applications relating to cancer epidemiology with a primary focus on etiologic cancer research. These are short-term awards intended to provide support for pilot projects, testing of new techniques, or development of innovative projects that could provide a basis for more extended research. Note that this PAR stipulates a 10-page limit to the research plan, including tables and figures. Contact: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov | | |
| Epigenetic Approaches in Cancer Epidemiology PA-07-298 for R0 I PA-07-299 for R2 I | These PAs are to stimulate population-based epidemiology research on the roles of DNA methylation markers in cancer. The objectives are for researchers to evaluate determinants of methylation patterns, risks of cancer associated with DNA methylation, and markers and modifiers of cancer risk using epidemiologic approaches in existing human population studies. Contact: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov | | |
| Occupational Safety and Health Research PA-07-318 for R01 | This PA is to encourage research that develops an understanding of the risks and conditions associated with occupational diseases and injuries, explores methods for reducing risks and for preventing or minimizing exposure to hazardous conditions in the workplace, and translates significant scientific findings into prevention practices and products that will effectively reduce work-related illness and injury. Of special interest to NCI is basic, applied, methodological, and statistical research that can advance cancer control activities, including surveillance, dissemination of public health information, and elucidation of susceptibility factors associated with cancer risk in individuals and population subgroups. NCI priority areas include applicable research approaches and methods (e.g., exposure and risk assessment, biomonitoring and surveillance techniques, analysis of cancer risk factors, and characterization of possible carcinogens in mixed exposures). The National Institute for Occupational Safety and Health (NIOSH) of the Centers for Disease Control and Prevention (CDC) announced this PA, which is cosponsored with several NIH Institutes. Contact: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov | | |
| Pilot Studies in Pancreatic Cancer PA-06-314 for R03 PA-06-303 for R21 | These trans-NCI PAs are to encourage innovative research across multiple disciplines for better understanding of the biology, etiology, detection, prevention, and treatment of pancreatic cancer. Inquiries about cancer control, epidemiology, and survivorship research proposals are handled by EGRP. Please refer to the PAs for the complete list of contacts. Contact: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov | | |
| Research on Malignancies in the Context of HIV/AIDS PA-07-455 for R0 I PA-07-454 for R2 I | These PAs are to encourage research that will improve our understanding of the biological basis of development and progression of cancer in the context of Human Immunodeficiency Virus (HIV) infection and Acquired Immune Deficiency Syndrome (AIDS) or acquired immune suppression not associated with HIV infection, such as organ transplantation. Novel approaches to discovery and preclinical development of novel therapeutic agents and biomarkers for early diagnosis and monitoring of disease progression are encouraged. Note that the role of chronic latent viruses and their interaction with one another or with environmental factors in the context of acquired immune suppression or HIV infection leading to the development of tumors or lesions with oncogenic potential also are of interest. These PAs are cosponsored with NCI's Division of Cancer Biology (DCB), DCTD, and the Office of AIDS Malignancies Program, and with the National Institute of Dental and Craniofacial Research (NIDCR). Contacts: Mukesh Verma, Ph.D., Chief, Methods and Technologies Branch, and Acting Chief, Host Susceptibility Factors Branch, e-mail: vermam@mail.nih.gov; and Vaurice Starks, Program Director, Modifiable Risk Factors Branch, e-mail: starksv@mail.nih.gov | | |

Studies of Energy Balance and Cancer These PAs invite investigator-initiated research to define factors affecting energy balance and mechanisms influencing cancer risk, prognosis, and quality of life. These studies may range from PA-07-176 for R01 new analyses of existing datasets to additional collection of data and biological specimens in PA-06-405 for R2 I ongoing investigations. To be eligible for these PAs, an applicant previously must have collected measures from human subjects on two or more of the following exposures: diet, physical activity, body composition, and/or related biomarkers (such as blood, urine, exfoliated cells, and/or tissue samples). The knowledge gained is anticipated to provide additional information to better understand the relationships among energy balance, cancer risk, and prognosis. These PAs are cosponsored with NCI's Office of Cancer Survivorship (OCS), DCCPS, and the Division of Cancer Prevention (DCP). Contact: Leah Sansbury, Ph.D., M.S.P.H., Program Director, Modifiable Risk Factors Branch, e-mail: sansburl@mail.nih.gov Exfoliated Cells, Bioactive Food These PAs invite researchers to critically evaluate the use of exfoliated cells to monitor the physio-Components, and Cancer logical effects of dietary bioactive food components thought to be involved with cancer preven-PA-08-030 for R01 tion. The aim is to encourage interdisciplinary collaborations between scientists using exfoliated PA-08-031 for R21 cells in research and those conducting nutrition research related to cancer prevention. This research will help determine the use of exfoliated cells as a model system to monitor both the absorption and retention of bioactive food components and the concomitant alterations in genomic and epigenetic events that occur in intact cells. Contact: Britt Reid, D.D.S., Ph.D., Chief, Modifiable Risk Factors Branch, e-mail: reidbr@mail.nih.gov These PAs invite research on the ethical, legal, and social implications (ELSI) of the discovery and Ethical, Legal, Social Implications of Human Genome Research use of new information and technologies resulting from human genomic research. Areas of inter-PA-08-012 for R01 est include: (1) translation of genomic information to improved human health; (2) conduct of PA-08-013 for R03 genomic research; (3) intellectual property issues surrounding access to and use of genomic information; (4) nonmedical applications of genomic technologies and information; (5) impact of genomics on concepts of race, ethnicity, kinship, and individual and group identity; (6) implications of uncovering genetic contributions to not only disease, but also "normal" human traits and behaviors; and (7) ethical boundaries for the uses of genomics. The National Human Genome Research Institute (NHGRI) is the lead sponsor of the PAs; several other NIH Institutes also are cosponsors. Please refer to the PAs for more details and for the complete list of contacts. Contact: Carol Kasten, M.D., Project Officer, Cancer Genetics Network, Clinical and Translational Epidemiology Branch, e-mail: kastenca@mail.nih.gov **Small Business Grants** Small businesses and their partners may obtain support from EGRP through the Small Business SBIR: R43/44 Innovation Research (SBIR) and the Small Business Technology Transfer (STTR) Programs. These STTR: R41/42 programs support innovative research that has the potential for commercialization. The STTR Program encourages partnerships between small businesses and research institutions. The small business is to conduct at least 40 percent of the research project, and the single partner research institution conducts at least 30 percent of the work. EGRP is interested particularly in supporting research on tools for assessment of exposures and biomarkers and tools for cancer epidemiology studies. See the article on page 5 about EGRP's topics of interest in these areas. In addition, on page 6, read about opportunities available to small businesses for funding through NCI's Innovative Molecular Analysis Technologies (IMAT) Program. The Omnibus Solicitations for SBIR and STTR Grant Applications for Fiscal Year 2008 are newly announced in the NIH Guide for Grants and Contracts: SBIR—PA-08-050 and STTR—PA-08-051. See grants.nih.gov/grants/funding/sbir.htm for further information. Contact: Jay Choudhry, M.S., Program Director, Methods and Technologies Branch, e-mail: choudhri@mail.nih.gov

Have an Idea for a Research Tool Appropriate for Commercialization? Funding Possible Through a Small Business-Research Partnership



Jay Choudhry, M.S.

Are you a cancer epidemiologist with an idea for a research tool that might be appropriate for commercialization? If so, you may be eligible to obtain funding to pursue your idea through NIH's Small Business Grants Programs. The Small Business Technology Transfer (STTR) Program requires close collaboration between a small business and a

research partner at a university or other nonprofit research institution. The small business is to conduct at least 40 percent of the research project, and the single partner research institution conducts at least 30 percent of the work. Funding usually is provided for up to 1 year and \$100,000 total cost for Phase I feasibility studies, and for up to 2 years and \$750,000 for Phase II projects.

Assistance in identifying a small business partner (or a research partner) is available via NIH's Small Business Innovation Research (SBIR)/STTR Collaboration Opportunities and Research Partnerships (CORP) Web page at grants.nih.gov/grants/funding/corp.htm.

The SBIR, a second program, does not require a research partner. Funding under this program usually is provided for up to 6 months and \$100,000 total cost for Phase I feasibility studies, and for up to 2 years and \$750,000 for Phase II projects.

EGRP participates each year in the Omnibus Solicitations for the SBIR and STTR Programs and suggests topics that it is particularly interested in supporting. In the Fiscal Year 2008 Omnibus Solicitation, EGRP expresses interest in supporting:

- Tools for assessment of exposures and biomarkers:
- ▼ MicroRNA profiling in epidemiologic studies.
- Detection of mitochondrial DNA alterations for cancer epidemiologic studies.
 - Development of methods for measuring biomarkers of human exposure or susceptibility, and of nutritional status, and methods for monitoring changes in biomarkers for use in cancer epidemiologic studies.

- Development of new or improved devices for quantitative measurement of human exposure to environmental carcinogens for epidemiologic studies.
- Development of methods to evaluate potential cancer clusters for epidemiologic studies.
- Tools for cancer epidemiology studies:
 - Development of tools to model cancer risks from environmental and occupational agents.
 - Development of software for electronic capture of risk factor data for cancer epidemiologic studies.
 - Development of consumer-friendly risk prediction models from epidemiologic data.
 - Development of software for tracking biological specimens for cancer epidemiologic studies.
 - Development of software for electronic identification, screening, and recruitment of participants, especially minorities, into epidemiologic studies.
 - Development of Web-based data collection or applicable bioinformatics tools for cancer epidemiology, including three focused on rare cancers.
 - Development of software or methods for rapid case ascertainment of cancers.
 - Development of geographic information systems with special visualization techniques for the simultaneous assessment of environmental exposures and health outcomes.
 - Development of tools using publicly available data to identify population-based controls for epidemiologic studies.
 - Development of software for analysis of DNA methylation biomarkers for early detection of prostate or breast cancers with use of specimens from biorepositories.

▼ = New in the 2008 Omnibus Solicitations

Access the Omnibus Solicitations from NIH's Small Business Funding Opportunities Home Page at *grants.nih.gov/grants/funding/sbir.htm*.

EGRP Contact: Jay Choudhry, M.S., Program Director, Methods and Technologies Branch, e-mail: *choudhrj@mail.nih.gov*.

NCI Innovative Molecular Analysis Technologies (IMAT) Program RFAs

NCI's Innovative Molecular Analysis Technologies (IMAT) program supports research projects aimed at developing creative methods and tools by which to understand, prevent, diagnose, and treat cancer. It encompasses closely related Requests for Applications (RFAs) in four areas: Innovative Technologies for Molecular Analysis of Cancer, Application of Emerging Technologies for Cancer Research, Innovative Technology Solutions to Cancer Sample Preparation, and Small Business Funding Opportunities. The nine RFAs and the application due dates are listed below.

Cancer epidemiologists may be particularly interested in *Application of Emerging Technologies for Cancer Research*

(RFA-CA-08-008), which solicits grant applications proposing exploratory research projects to evaluate the performance of emerging molecular analysis technologies and develop applications for an appropriate cancer-relevant biological system. Specific areas of focus that may be of interest are:

- Technologies suitable for the analysis and characterization of large numbers of samples, including biospecimens, from defined human/patient populations; and
- Technologies for the measurement of exposures to environmental toxicants, pollutants, mutagenic factors, and/or carcinogens.

| Announcement | Funding Announcement | Grant Mechanism | Application Due Date |
|--|----------------------|-----------------|--------------------------------|
| Application of Emerging Technologies for Cancer Research | RFA-CA-08-008 | R33 | May 29, 2008 Sept. 24, 2008 |
| Innovative Technologies for Molecular Analysis of Cancer | RFA-CA-08-006 | R21 | May 29, 2008 Sept. 24, 2008 |
| Application of Emerging Technologies for Cancer Research | RFA-CA-08-007 | R21 | May 29, 2008 Sept. 24, 2008 |
| Innovations in Cancer Sample Preparation | RFA-CA-08-009 | R21 | May 29, 2008 Sept. 24, 2008 |
| Innovations in Cancer Sample Preparation | RFA-CA-08-010 | R33 | May 29, 2008 Sept. 24, 2008 |
| Innovative Technologies and Applications for the Molecular Analysis of Cancer (SBIR) | RFA-CA-08-011 | R43/44 | May 29, 2008 Sept. 24, 2008 |
| Innovative Technologies and Applications for the Molecular Analysis of Cancer (STTR) | RFA-CA-08-012 | R41/42 | May 29, 2008 Sept. 24, 2008 |
| Innovations in Cancer Sample Preparation (SBIR) | RFA-CA-08-013 | R43/44 | May 29, 2008 Sept. 24, 2008 |
| Innovations in Cancer Sample Preparation (STTR) | RFA-CA-08-014 | R41/42 | May 29, 2008 Sept. 24, 2008 |

R21 = Exploratory/Developmental Research Grant

Visit the IMAT Web site at *imat.cancer.gov* and access the *NIH Guide* Notice, NOT-CA-08-003, at *grants.nih.gov/grants/guide/index.html* to learn more about these funding opportunities.

R33 = R33 Exploratory/Developmental Grants Phase II

R41/42 = Small Business Technology Transfer (STTR) Program Grants

R43/44 = Small Business Innovation Research (SBIR) Program Grants

Take Advantage of EGRP's Research Services and Resources

EGRP invites investigators to use its services and research resources to further cancer epidemiologic research. The Program provides assistance in developing and operating cancer epidemiology consortia and supports three research resources—the Breast and Colon Cancer Family Registries

(CFRs), the Cancer Genetics Network (CGN), and the Geographic Information System for Breast Cancer Studies on Long Island (LI GIS), which also can be used for research on other types of cancer and other diseases. Learn more about them below.

Assistance in Developing Cancer Epidemiology Consortia



Daniela Seminara, Ph.D., M.P.H.

EGRP facilitates and funds consortia that can conduct the types of large-scale epidemiologic studies needed to address complex questions about the etiology of cancer. The Program provides assistance through all phases of consortia development—from conceptualization through the operation of established consortia. Assistance is provided in numerous ways, including through grant support, assistance

in identifying partners with similar research interests, advice on policies and processes that have proven successful with other cancer epidemiology consortia, participation on steering committees, and in evaluating established consortia. Daniela Seminara, Ph.D., M.P.H., is EGRP Scientific Consortia Coordinator, e-mail: seminard@mail.nih.gov.

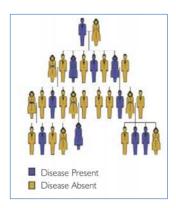
The operating definition used for a Consortium is:

A consortium in epidemiology is a group of scientists from multiple institutions who have agreed to cooperative research efforts involving, but not limited to, pooling of information from more than one population study for the purpose of combined analyses. The consortium group is able to address scientific questions that cannot otherwise be addressed through the effort of a team of investigators at a single institution due to scope, resources, population size, and need for an interdisciplinary approach. The cooperation usually involves multiple projects over an extended time. Groups participating in a consortium may partner in the writing of research grant applications, but consortia activities are not limited to a specific grant/project.

The creation of a consortium is independent from funding mechanisms and does not indicate definite grant support. However, EGRP and its staff can provide supportive activities and tools.

Learn about the types of assistance available to develop and operate consortia at *epi.grants.cancer.gov/Consortia/ support.html*. EGRP currently is facilitating and/or funding more than 30 cancer epidemiology consortia. Learn more about them at *epi.grants.cancer.gov/Consortia/table.html*.

Breast and Colon Cancer Family Registries (CFRs)



The Breast and Colon Cancer Family Registries (CFRs) are international research infrastructures for investigators interested in conducting population- and clinic-based interdisciplinary studies on the genetic and molecular epidemiology of these cancers and their behavioral implications. A central goal of the CFRs is the translation of this research

to the clinical and prevention setting for the benefit of the Registries' participants and the general public.

The Breast CFR has information and biospecimens contributed by more than 12,500 families across the spectrum of

risk for the cancer and from population-based or relative controls. The Colon CFR has information and biospecimens on more than 11,300 families across the spectrum of risk for colon cancer and from population-based or relative controls.

Of particular interest to the CFRs are identification and characterization of cancer susceptibility genes; definition of genegene and gene-environment interactions in cancer etiology; and translational, preventive, and behavioral implications of research findings.

Special features of the CFRs include population-based and clinic-based ascertainment; systematic collection of validated family history; epidemiologic risk factor data; clinical and followup data; biospecimens (including tumor blocks and Epstein-Barr Virus-transformed cell lines); and ongoing molecular characterization of the participating families.

Researchers who are interested in accessing data and/or biospecimens can learn more about the CFRs and the application process at the CFRs Web site: *epi.grants.cancer.gov/CFR*. The CFRs do not provide funding for research.

EGRP Contact: Daniela Seminara, Ph.D., M.P.H., Program Director, Office of the EGRP Associate Director, e-mail: *seminard@mail.nih.gov*.

Cancer Genetics Network (CGN)

The Cancer Genetics Network (CGN) is a national network of centers specializing in the study of inherited predisposition to cancer. The resource is available to the research community at large to support studies on the genetic basis of human cancer susceptibility; integration of this information into medical practice; and behavioral, ethical, and public health issues associated with human genetics.

The database has information on 24,000 individuals (16,000 families) with cancer and/or a family history of cancer. Data are available on cancer type, a four-generation cancer family history, genetic testing (if performed), genetic mutation if collected in a CGN special study, any known genetic syndromes in the family, biospecimens on many enrollees, annual followup on all enrollees, history of tobacco use, and sociodemographic information. More data are available on subsets of enrollees who have participated in CGN special studies. The population enrolled makes possible research on both common and uncommon tumors.

This unique infrastructure enables studies on genes of moderate and low penetrance, as well as more easily identified

high-penetrance genes. The CGN welcomes opportunities to collaborate with research groups on important studies, and/ or it can provide data and biospecimens—and a range of services and expertise—to support independent studies. Research funding is not provided.

The CGN is operated through a contract awarded by EGRP to Massachusetts General Hospital (MGH) in the fall of 2007. MGH is the Data Coordinating Center and subcontracts with 14 centers that provide the infrastructure to support studies. NCI started the CGN in 1998 through a group of EGRP-funded grants. Visit the CGN Web site at *epi.grants.cancer.gov/CGN*.

Diane M. Finkelstein, Ph.D., is MGH Program Manager/ Principal Investigator, and Nora Horick, M.S., is MGH Project Manager.

EGRP Contact: Carol Kasten, M.D., Project Officer, Clinical and Translational Epidemiology Branch (CTEB), e-mail: *kastenca@mail.nih.gov*.

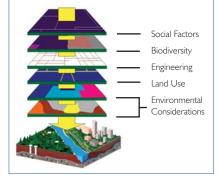
Long Island Geographic Information System (LI GIS)

The Geographic Information System for Breast Cancer Studies on Long Island (LI GIS) is an enterprise geographic information system combining an Oracle data warehouse, ESRI ArcGIS Suite, and statistical and spatial software and extensions. It is designed to study potential relationships between environmental exposures and breast cancer on Long Island (Suffolk and Nassau counties) and is available to researchers with approved protocols. The LI GIS also can be used to study other diseases.

This unique research tool offers a full suite of GIS software and extensions related to the study of breast cancer. The LI GIS warehouse has more than 80 datasets covering topographic data; demographic data; health outcome data, including relative breast cancer incidence; and environmental data for Long Island. Additional environmental data are included with less detail and geographic precision for areas 50 kilometers from the two counties, and very limited data for areas within a 100-mile radius from the midpoint of the boundary line between the two counties. The extended area includes

counties in Connecticut, New Jersey, New York, Pennsylvania, Rhode Island, and Massachusetts.

Researchers can access the LI GIS remotely or work in its laboratory, located in Reston, VA.



There is no fee to use the LI GIS or its laboratory; however, funding for research is not provided. The LI GIS was developed as part of the Long Island Breast Cancer Study Project (LIBCSP). Visit the LI GIS Web site to learn more: www.healthgis-li.com/default.jsp. Access other information about GIS at NCI at gis.cancer.gov.

Contact: Shannon Lynch, M.P.H., Co-Project Officer, Office of the EGRP Associate Director, e-mail: *lynchs@mail.nih.gov*.

Grantsmanship



DCCPS has developed two new Web pages with brief stepby-step instructions to help in preparing Progress Report Summaries and Final Reports for EGRP and other components of the Division. Principal Investigators supported through EGRP and their staffs should find these instructions helpful:

- Main DCCPS Grant Application Help Page: cancercontrol.cancer.gov/funding_info.html
- Step-by-Step Help on Completing Progress Reports: cancercontrol.cancer.gov/help-2590.html
- Step-by-Step Help for Final Reports: cancercontrol.cancer.gov/help-2590-fr.html

NIH Data Sharing Policy In Effect for Genome-Wide Association Studies

The new policy for the sharing of data obtained through NIH-supported or -conducted genome-wide association studies (GWAS) went into effect in January 2008. The policy applies to: competing grant applications that include GWAS and are submitted to NIH for the January 25, 2008, and subsequent due dates; proposals for contracts that include GWAS and are submitted to the NIH on or after January 25, 2008; and NIH intramural research projects that include GWAS and are approved on or after January 25, 2008.

The final policy was announced in the *NIH Guide*, NOT-OD-7-088, after a period of public consultation with representatives from the scientific and lay communities. A followup Notice, NOT-OD-08-013, provides guidance on implementation and instructions for applicants. Access these Notices at *grants.nih.gov/grants/guide/index.html*.

The policy's goal is to facilitate broad and consistent access to NIH-supported GWAS data to speed the translation of basic genetic research into therapies, products, and procedures that benefit the public health. NIH believes that the full value of

GWAS to the public can be realized only if the resulting genotype and phenotype datasets are made available as rapidly as possible to a wide range of scientific investigators. Rapid and broad data access are particularly important for GWAS—these studies generally require significant resources, present challenges in analyzing the large datasets, and provide extraordinary opportunities for making comparisons across multiple studies.

Refer to the NIH GWAS Web site at grants.nih.gov/grants/gwas/index.htm for guidance on implementing the policy, including on developing data-sharing plans for applications and proposals that include GWAS, peer review of GWAS grant applications, submitting data to the NIH GWAS data repository, requesting access to data in the NIH GWAS data repository, oversight of the NIH GWAS initiative, protections for research participants, points to consider for Institutional Review Boards and institutions in their review of data submission plans and institutional certifications, and frequently asked questions and answers.

NIH Revised Policy Issued on Enhancing Public Access to Archived Publications

NIH policy requires that all funded investigators submit, or have submitted for them, to the National Library of Medicine's PubMed Central (PMC) an electronic version of their final, peer-reviewed manuscripts upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication, provided that the NIH shall implement the public access policy in a manner consistent with copyright law.

Revisions to the policy were announced in the *NIH Guide* in January 2008. Specifically:

- NIH Public Access Policy applies to all peer-reviewed articles that arise, in whole or in part, from direct costs funded by NIH, or from NIH staff, that are accepted for publication on or after April 7, 2008.
- Institutions and investigators are responsible for ensuring that any publishing or copyright agreements concerning

submitted articles fully comply with this policy.

- PMC is the NIH digital archive of full-text, peer-reviewed journal articles. Its content is publicly accessible and integrated with other databases.
- The final, peer-reviewed manuscript includes all graphics and supplemental materials that are associated with the article.
- Beginning May 25, 2008, those submitting an application, proposal, or progress report to NIH must include the PMC or NIH Manuscript Submission reference number when citing applicable articles that arise from their NIHfunded research. This policy includes applications submitted to NIH for the May 25, 2008, due date and subsequent due dates.

Access the Notice, NOT-OD-08-033, at *grants.nih.gov/grants/guide/index.html*. The PubMed Central Web site is *www.pubmedcentral.nih.gov*.

Grant Applications Must Tie to Funding Opportunity Announcements

Together with implementation of electronic submission of grant applications, remember that all applications must be submitted in response to specific Funding Opportunity Announcements (FOAs). NIH has omnibus parent announcements for use in submitting what formerly were

termed "unsolicited" applications. For help in identifying appropriate FOAs for unsolicited or investigator-initiated applications, see *grants.nih.gov/grants/guide/parent_announcements.htm*, or consult your EGRP Program Director.

Paper Notification of Notice of Awards Stops

NIH no longer provides paper notification of the Notice of Award (NoA) letters as of January 1, 2008. Instead, NoAs are being sent solely via e-mail to grantee organizations and are accessible in the eRA Commons through the "Status" module. For more information, refer to the *NIH Guide* Notice, NOT-OD-08-002, at *grants.nih.gov/grants/guide/index.html*.

NIH Summarizes Policy on Late Grant Applications

NIH describes its policy on late grant applications in a Notice in the *NIH Guide*, consolidating information from previous Notices. Investigators are reminded that no NIH staff member, whether in the Center for Scientific Review (CSR) or any of the other Institutes/Centers, has the authority to give permission in advance for a late application. Contacting the Division of Receipt and Referral or any other component of the NIH will not lead to either permission to

submit late or an evaluation of the acceptability of the reasons for a delay. Inquiries may be directed to the Division of Receipt and Referral, CSR, NIH, tel.: 301-435-0715; fax: 301-480-1987. Access the Notice, NOT-OD-08-027, at grants.nih.gov/grants/guide/index.html. A list of standard receipt dates is available at grants.nih.gov/grants/funding/submissionschedule.htm.

Standing NIH Study Section Members Offered Modified Grant Application Procedures

NIH is implementing an alternate plan for submission and review of research grant applications from appointed members of chartered NIH Study Sections to recognize their outstanding service and to minimize disincentives to Study Section service. The timing of Study Section meetings and most standard due dates for grant applications overlaps. Thus, reviewers are under pressure to review applications and prepare their own applications simultaneously.

Beginning February 5, 2008, the alternate submission and review procedures described below became available for appointed members of NIH Study Sections. This alternate process is limited to (1) appointed members of chartered standing Study Sections and (2) applications that normally would be received on standard submission dates (but not

special receipt dates). Depending on the timing of the submission and the number of other similar applications received during the premeeting time window, NIH staff will decide if the application will be reviewed in a different standing Study Section or in a Special Emphasis Panel (SEP). These applications will be processed and assigned to NIH Institute Review Offices or CSR Integrated Review Groups (IRGs) using the standard referral guidelines.

The continuous submission process will enable appointed members of chartered NIH Study Sections to submit their applications as soon as they are fully developed. Applications will be reviewed no later than 120 days after receipt. For complete information, refer to the NIH Guide Notice, NOT-OD-08-026, available at grants.nih.gov/grants/guide/index.html.

NIH Issues New Application Forms: Relinquishing Grant, Noncompeting Continuation Progress Report

EGRP grantees may wish to take note of two recently revised NIH grant forms:

- Official Statement Relinquishing Interest and Rights in a PHS Research Grant (PHS 3734, rev. 11/07). The form is accepted immediately. There are no changes to the data elements or instructions in this revision of the form. Refer to NIH Guide Notice, NOT-OD-08-029.
- Noncompeting Continuation Progress Report for a DHHS
 Public Health Service Grant (PHS 2590, rev. 11/07). This
 form is accepted immediately, and all progress reports
 received on or after March 1, 2008, MUST use the new
 instructions and form. Read the instructions carefully.
 This edition of PHS 2590 implements a number of impor

tant policy changes, including the NIH Policy for Sharing of Data Obtained in NIH-Supported or Conducted Genome-Wide Association Studies, and registration of clinical trials in *ClinicalTrials.gov* as required by Public Law 110-85.

One significant change to PHS 2590 is the business process for submission of the continuation progress report. As of March 1, 2008, only the signed original continuation progress report is required to be submitted to the centralized mailing address. (No additional copies are required.) Refer to the *NIH Guide* Notice, NOT-OD-08-030, for further information.

Access the Notices at grants.nih.gov/grants/guide/index.html.

NIH Regional Seminars on Funding and Grants Administration Set for San Antonio in March, Chicago in June

This year's 2-day NIH Regional Seminars on Program Funding and Grants Administration are:

- March 25–26, San Antonio, TX, hosted by the University of Texas Health Science Center at San Antonio (www.uthscsa.edu/ogm/nih_seminar.htm)
- June 19–20, Chicago, IL, hosted by the University of Illinois at Chicago (tigger.uic.edu/depts/ovcr/research/ seminar/NIH)

These seminars provide a unique opportunity to interact with key NIH experts in extramural program funding and grants administration and cover topics ranging from opportunity identification and application preparation through postaward administration. Presentations are targeted toward research administrators, new and experienced investigators, postdoctoral scientists, and trainees.

Take advantage of this opportunity to meet experts from the NIH SBIR/STTR Programs, Division of Grants Policy, Office of Laboratory Animal Welfare, Office of Human Subject Protections, Program Officers from several different NIH Institutes/Centers, Grants Management Officers, and many

others—including a team of experts who will be available to answer specific Commons and electronic submission questions at the eRA booth.

In addition to the 2-day seminars, attendees also have the opportunity to register for an additional day of eRA Workshops in the areas of:

- eRA Commons Administration Basics (targeted for Account Administrators)
- eRA Commons Status for Administrators
- xTrain (targeted for Administrators and Program Directors of training grants)
- eRA Commons for Principal Investigators and their delegates.

Register at *grants.nih.gov/grants.seminar.htm*. Direct inquiries to Ms. Cynthia Dwyer, Communications and Outreach Specialist, Office of Extramural Research (OER), Office of the Director, NIH, e-mail: dwyerc@mail.nih.gov.

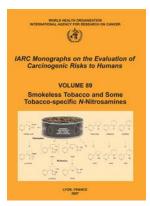
Access the NIH Guide Notice, NOT-OD-07-076, at grants.nih.gov/grants/guide/index.html.

NIH Small Business Grants Conference Set for Atlanta in July

The annual NIH Small Business Innovation Research/Small Business Technology Transfer (SBIR/STTR) Programs Conference is scheduled for July 22–23, 2008, in Atlanta, GA,

and will be hosted by the Georgia Tech Enterprise Innovation Institute. For details, visit the conference Web site at *www.gabio.* org/SBIRconference2008.

New Publications and e-Tools



IARC Monographs on the Evaluation of Carcinogenic Risks to Humans, Volume 89: Smokeless Tobacco and Some Tobacco-specific N-Nitrosamines. This volume from the International Agency for Cancer Research (IARC) contains monographs on smokeless tobacco and some tobacco-specific *N*-Nitrosamines. It describes smokeless tobacco practices, reviews studies of cancer in humans and in

experimental animals related to smokeless tobacco products and tobacco-specific *N*-nitrosamines, as well as other data relevant to carcinogenicity and its mechanisms. Several scientists from our Division of Cancer Control and Population Sciences (DCCPS) participated in preparation of the monographs: Deborah (Debbie) M. Winn, Ph.D., EGRP Acting Associate Director; Cathy L. Backinger, Ph.D., M.P.H., Chief, Tobacco Control Research Branch (TCRB); and Mirjana V. Djordjevic, Ph.D., TCRB, Behavioral Research Program (BRP). The volume can be viewed at *monographs.iarc.fr*.



Colorectal Cancer Mortality
Projections. NCI's Cancer
Intervention and Surveillance
Modeling Network (CISNET)
developed this Web site
(cisnet.cancer.gov/projections/
colorectal/index.php) to help cancer
control planners, program staff,
and policymakers consider the
impact of risk factor reduction,
increased early detection, and
increased access to optimal treat-

ment on future colorectal cancer mortality rates.

This site shows the results of simulation modeling—computer simulations of colorectal disease progression in a population with the characteristics of the U.S. population. Use this information to:

- See how **policy** options to increase cancer prevention, screening, and access to state-of-the-science treatment can affect future mortality trends;
- Help determine cancer control program priority areas for new intervention investments; and
- Identify research questions and opportunities.

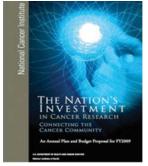


Cancer Trends Progress Report: 2007 Update. This report, which spans the cancer control continuum from prevention through end of life, summarizes our nation's progress against cancer in relation to the Healthy People 2010 targets developed by the U.S. Department of Health and Human Services (HHS). This online report, first issued in 2001 as the *Cancer Progress Report*, is released every

other year. The report, intended for policymakers, researchers, clinicians, and public health service providers, offers updated national trends data in a user-friendly format. Report features include:

- Quick tutorial to ease navigation and downloading of materials within the report
- Updated "Trends-at-a-Glance" snapshot
- Links to NCI's State Cancer Profiles' state- and countylevel data
- Links to colorectal cancer mortality projections
- Links to Healthy People 2010 materials
- · Data, graphs, and slides that are easy to download
- · Custom report features
- Open text search capability
- Fully accessible to persons with disabilities

The report can be viewed online at *progressreport.cancer.gov*.



The Nation's Investment in Cancer Research: An Annual Plan and Budget Proposal for Fiscal Year 2009. This publication describes NCI's strategic objectives and plans for decreasing the burden of cancer. It highlights scientific accomplishments and opportunities, from broad analyses of research trends to examples of tar-

geted projects, trends affecting current and future research, progress on NCI objectives, and a proposed budget for Fiscal Year 2009. This report is available online at *plan.cancer.gov*. Print copies can be ordered from NCI's Publications Locator at https://cissecure.nci.nih.gov/ncipubs.

EGRP Visiting Scholars Seminar Series

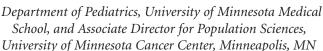
The EGRP Visiting Scholars Seminar Series brings outstanding scientists in the extramural population sciences community to NCI to share the latest research and facilitates an exchange of ideas on ways to continue moving the sciences forward. If you are visiting NCI on the day of a seminar, you are welcome to join us.

The following seminars will be held from noon to 1 p.m. in Executive Plaza North (EPN), 6130 Executive Boulevard, Conference Rooms D, E, F, Rockville, MD. To obtain a visitor's pass, prior to the seminar, please contact Leah Sansbury, Ph.D., M.S.P.H., Visiting Scholars Seminar Series Coordinator, and Program Director, Modifiable Risk Factors Branch (MRFB), tel.: 301-496-9600, e-mail: sansburl@mail.nih.gov.

Monday, March 24, 2008

Julie A. Ross, Ph.D.
Epidemiology of Childhood Cancer:
A Transdisciplinary Approach
Professor and Director of the Division

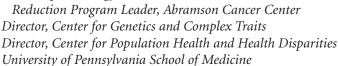
Professor and Director of the Division of Pediatric Epidemiology & Clinical Research



Monday, April 7, 2008

Timothy R. Rebbeck, Ph.D. Seven Snobberies in Molecular Epidemiology in the Post-Genome Era

Professor of Epidemiology Cancer Epidemiology and Risk



Monday, May 12, 2008

John S. Witte, Ph.D.
Design, Analysis, and
Interpretation of GenomeWide Association Studies
(GWAS)

Professor, Division of Cancer Epidemiology

Associate Director, Institute for Human Genetics Co-Leader, Cancer Center Program in Cancer Genetics Institute for Human Genetics University of California, San Francisco



EGRP Staff News

Britt Reid and Mukesh Verma Appointed Branch Chiefs

EGRP has two new Branch Chiefs: **Britt Reid, D.D.S., Ph.D.,** has been named to head the Modifiable Risk Factors Branch (MRFB), and **Mukesh Verma, Ph.D.,** has been named to head the Methods and Technologies Branch (MTB). These positions were established last year when EGRP reorganized and changed from a two- to a four-branch structure.

Britt Reid, D.D.S., Ph.D.



Dr. Reid came to NCI in 2007 as a Program Director in the Modifiable Risk Factors Branch (MRFB). Prior to joining EGRP, he was an Assistant Professor in the Department of Health Promotion and Policy at the University of Maryland Dental School, where he was director of the graduate course Applied Scientific

Evidence, an epidemiology consultant for the NIH-funded Data Resource Center, and global data director for the Special Olympics oral health program. Dr. Reid also was a Principal Investigator for two NIH-funded grants addressing head and neck cancers and co-Investigator for two additional NIH-funded grants addressing the impact of comorbid conditions on health outcomes. He served as a reviewer of epidemiology and cancer content for seven scientific journals and two NIH Study Sections, and he has authored or coauthored 27 manuscripts in peer-reviewed scientific journals since the year 2000.

Prior to his academic career, Dr. Reid practiced clinical dentistry in Washington, DC, and as a Naval Officer in support of the Fleet Marine Force in Japan. He received his D.D.S. from the University of Michigan and Ph.D. in epidemiology from The Johns Hopkins Bloomberg School of Public Health.

MRFB focuses on supporting and stimulating research on cancer factors that may be modifiable, such as diet and nutrition, alcohol, physical activity and energy balance, tobacco, infectious diseases, physical and chemical agents, and medical exposures.

Mukesh Verma, Ph.D.



Dr. Verma joined EGRP as a Program Director in 2004. In 2005, he was appointed Acting Chief of the former Analytic Epidemiology Research Branch (AERB). When EGRP reorganized, Dr. Verma was appointed Acting Chief of both the Methods and Technologies Branch (MTB) and the Host Susceptibility Factors Branch

(HSFB). He continues to serve as Acting Chief of HSFB.

Dr. Verma is responsible for developing EGRP's initiative to stimulate research on epigenetic approaches in cancer epidemiology and has been instrumental in developing epigenetic research for NIH as a whole. He helped to develop an RFA on *Environmental Influences on Epigenetics* with the National Institute of Environmental Health Sciences (NIEHS) and represents the Division of Cancer Control and Population Sciences (DCCPS), of which EGRP is a part, in NIH's Roadmap Initiative on epigenetics.

He is known within the extramural research community as an EGRP Program Director for PAs on *Small Grants for*

Cancer Epidemiology and Pilot Studies in Pancreatic Cancer, and is a co-Program Director for initiatives in gene-environment interactions in cancer etiology. He was, and continues to be, a co-Program Director for initiatives in gene-environment interactions in cancer etiology, including the Breast and Prostate Cancer and Hormone-Related Variants Cohort Consortium (BPC3), which is a collaborative project to pool data and biospecimens from a group of large prospective cancer epidemiology cohorts. He also organized a workshop to explore developing a concept for a research initiative on mitochondrial DNA and cancer epidemiology.

Before joining EGRP, Dr. Verma was a Program Director in NCI's Division of Cancer Prevention (DCP), where he worked in the areas of biomarkers, early detection, risk assessment, and prevention. He also was Coordinator of DCP's SBIR and STTR Programs. Dr. Verma holds an M.Sc. from Pantnagar University, a Ph.D. in the field of host-virus interaction from Banaras Hindu University, and did postdoctoral research at George Washington University.

MTB focuses on developing and improving methods for epidemiologic data collection, study design, and analysis; on modifying approaches developed in the context of other research endeavors for cancer epidemiologic settings; and on methods to increase understanding of cancer susceptibility. The Branch also manages EGRP's SBIR/STTR Programs. Additional information about EGRP's reorganization is available at *epi.grants.cancer.gov/reorganize.html*.

Other EGRP Staff News



Elizabeth Gillanders, Ph.D.

Elizabeth (Liz) Gillanders, Ph.D., has joined EGRP as a Program Director in its Host Susceptibility Factors Branch (HSFB) from the National Human Genome Research Institute (NHGRI). At NHGRI, she was a senior research fellow and earlier headed its Genetic Epidemiology Unit within the Cancer Genetics Branch. Her research at NHGRI centered on family-based studies of cancer susceptibili-

ty, with an emphasis on melanoma, prostate cancer, and breast cancer. Recently, Dr. Gillanders has been involved in a genome-wide association study of melanoma supported by a Research Training Fellowship in the genetic epidemiology of the cancer.

Dr. Gillanders received her B.A. from The College of William and Mary; B.S. in Molecular Genetics from The Johns Hopkins University; and Ph.D. in Genetic Epidemiology from The Johns Hopkins Bloomberg School of Public Health, where she investigated genetic factors contributing to melanoma susceptibility. She is an Adjunct Assistant Professor

at The Johns Hopkins Bloomberg School of Public Health, where she teaches an introductory human genetics course.



Christiine Kaefer, M.B.A., R.D.

Christine (Christie) Kaefer, M.B.A., R.D., is EGRP's new Communications Coordinator and will be writing and disseminating information about NCI and the Program for investigators working in the field of cancer epidemiology. Prior to joining EGRP, Ms. Kaefer was a Scientific Information Analyst in NCI's Office of Centers, Training, and Resources (OCTR), where she assisted the Cancer Centers Branch with commu-

nications activities related to NCI-designated Cancer Centers. Ms. Kaefer first joined NCI in 2005 as a Presidential Management Fellow (PMF) after completing her M.B.A. at Virginia Tech. As a PMF, she developed communications materials for DCCPS' Behavioral Research Program (BRP), co-authored publications with the Division of Cancer Prevention's (DCP) Nutritional Sciences Research Group and reviewed nutrition education materials for the U.S.

Department of Health and Human Services' (HHS) Office of Disease Prevention and Health Promotion.

In addition, Ms. Kaefer is a Registered Dietitian, has a B.S. in Nutritional Sciences from Cornell University, and completed a dietetic internship at Walter Reed Army Medical Center. For 8 years, she served on Active Duty in the U.S. Army in a variety of clinical and management roles.



Adrienne Overton

Adrienne Overton has joined EGRP as a Program Analyst in MTB. She comes to EGRP from the NIH Clinical Center Department of Anesthesia and Surgical Services. For the past 10 years, she has held various administrative positions in the medical field. Ms. Overton holds a B.S. in Health Care Management from Potomac College, Washington, DC, and is near completion of her work to

obtain an M.P.A. in Health Services from Walden University, Baltimore, MD.



Damali Martin, Ph.D., M.P.H.

Damali Martin, Ph.D., M.P.H., has joined EGRP as an NCI Cancer Prevention Fellow. She is learning the responsibilities of a Program Director under the direction of Isis Mikhail, M.D., M.P.H., Dr.P.H., Clinical and Translational Epidemiology Branch (CTEB).

NCI's Cancer Prevention Fellowship Program (CPFP) provides postdoctoral training opportunities in cancer

prevention and control, including training toward an M.P.H. degree. Dr. Martin holds a Ph.D. in Cell Biology and Molecular Genetics from the University of Maryland at College Park. She received an M.P.H. in Epidemiology and Biostatistics from The Johns Hopkins Bloomberg School of Public Health, where she investigated human papillomavirus (HPV) viral load and its association with stage of cervical neoplasia.

Through the CPFP, Dr. Martin has worked in the Breast and Prostate Study Group in the Laboratory of Human Carcinogenesis, NCI Center for Cancer Research. Her research focused primarily on studying the association between DNA polymorphisms and risk for breast cancer, and molecular epidemiology related to the study of health disparities. In particular, she focused on elucidating whether differences in tumor biology between African-American and European-American breast cancer patients contribute to lower survival and higher mortality in African-American women. In addition, she examined how biological determinants could affect survival in African-American and European-American breast cancer patients, with the goal of understanding mechanisms of the disease that could be used to identify targets for new prevention and treatment efforts.



Virginia Hartmuller, Ph.D., R.D.

Virginia (Ginny) Hartmuller, Ph.D., R.D., retired from Federal government service in November 2007. She had been the chief Program Director responsible for managing EGRP's grant portfolio on diet and nutrition research and for stimulating new initiatives in these areas. In addition, Dr. Hartmuller served as Acting Chief of the Modifiable Risk Factors Branch (MRFB) until her departure.

Dr. Hartmuller was known for working long hours to help prospective grant applicants and grantees and, at the same time, finding time to participate in many activities to advance diet and nutrition cancer epidemiology. Among her most recent contributions, she helped organize the NCI conference *Vitamin D and Cancer: Current Dilemmas and Future Needs* this past spring, and spearheaded the subsequent funding of a pooled analysis of serum samples from 10 cancer epidemiology cohorts to determine whether low levels of Vitamin D are associated with increased risk of rare cancers.

In addition, she helped write the NCI PA *Studies of Energy Balance and Cancer in Humans*, first issued in 2004, through which EGRP funds four of the grants. Last fall, she was delighted to be able to witness the culmination of that earlier work when the four investigative teams gave presentations on their progress at a meeting of the Transdisciplinary Research on Energetics and Cancer (TREC) Centers, another DCCPSfunded initiative and with which the teams collaborate.

Dr. Hartmuller has used her background in health education, in which she has her Ph.D., and as a Licensed Dietitian and Certified Diabetes Educator to carve out an interesting and varied career. Before joining EGRP in 2001, her Federal government service included working as a Patient Educator in NCI's Office of Cancer Communications; Coordinator of the Food and Nutrition Information Center at the U.S. Department of Agriculture's (USDA) National Agricultural Library (1999–2001); and as a Research Policy Officer in NIH's Office of Research on Women's Health (1999–2001). For several years while working for the Federal government, she also was an Adjunct Assistant Professor with the University of Maryland's Department of Nutrition and Food Science.

Before her Federal career, Dr. Hartmuller worked at The Johns Hopkins University (JHU) Medical Institutions for more than 20 years and was affiliated with The JHU Lipid Clinic, as a nutrition researcher and chief nutritionist, and The JHU Diabetes Center, as a nutrition educator and chief nutritionist. She also was an instructor in pediatrics. During these years, Dr. Hartmuller designed and conducted nutrition classes for health professionals and individual clients.

Among her other accomplishments, Dr. Hartmuller is a Fellow of the American Dietetic Association and in 2006 was installed into the Hall of Fame at Purdue University, from which she has an M.S. in Institutional Management.

For her next career, Dr. Hartmuller is starting her own business as a nutrition consultant. She most enjoys being a nutrition educator and counselor and the satisfaction of develop-

ing creative solutions to helping others—dietitians and other health professional groups and individual clients—achieve their nutritional goals.

Epidemiology and Genetics Research Program (EGRP) Staff

■ Epidemiology and Genetics Research Program

Telephone: 301-496-9600; Fax: 301-435-6609 Web site: *epi.grants.cancer.gov*

Office of the Associate Director

Deborah M. Winn, Ph.D., EGRP Acting Associate Director Diane Horn-Cruder, Program Analyst Christine (Christie) Kaefer, M.B.A., R.D., Communications Coordinator

Shannon Lynch, M.P.H., Program Analyst Scott Rogers, M.P.H., Program Analyst Daniela Seminara, Ph.D., M.P.H., Scientific Consortia Coordinator and Program Director

■ Host Susceptibility Factors Branch

Mukesh Verma, Ph.D., Acting Chief Elizabeth (Liz) M. Gillanders, Ph.D., Program Director Sheri Dixon Schully, Ph.D., Program Director ■ Modifiable Risk Factors Branch

Britt C. Reid, D.D.S., Ph.D., Chief Chinonye (Nonye) Harvey, M.P.H., Program Analyst Leah Sansbury, Ph.D., M.S.P.H., Program Director Vaurice Starks, Program Director

■ Methods and Technologies Branch

Mukesh Verma, Ph.D., Chief Jay Choudhry, M.S., Program Director Adrienne Overton, Program Analyst

Clinical and Translational Epidemiology Branch

Deborah M. Winn, Ph.D., Acting Chief Carol Kasten, M.D., Medical Officer, Geneticist, and Project Officer

Damali Martin, Ph.D., Cancer Prevention Fellow Isis S. Mikhail, M.D., M.P.H., Dr.P.H., Program Director

Sources of Information on Grant Policies and Funding

- Our NCI Division of Cancer Control and Population Sciences (DCCPS) Home page: cancercontrol.cancer.gov for grant policy alerts and information on funding opportunities.
- NCI Division of Extramural Activities (DEA): deainfo.nci.nih.gov
- Grants.gov (central resource to find and apply for U.S. grants)
- Research Resources
 - NCI directory of more than 100 products: resresources.nci.nih.gov
 - DCCPS Public Use Data Sets: cancercontrol.cancer.gov/cr-dataset.html
- Subscribe to:
 - NCI Cancer Bulletin (bi-weekly newsletter): cancer.gov/ncicancerbulletin
 - NIH Guide for Grants and Contracts: grants.nih.gov/grants/guide/listserv.htm
 - NIH Inside eRA for Partners (Electronic Research Administration or "The Commons") (occasional updates): era.nih.gov/eranews
 - NIH Extramural Nexus (bimonthly newsletter for grantees): grants.nih.gov/grants/nexus.htm
 - EGRP's Listserv (occasional Bulletins, News Flashes) contact: kaeferc@mail.nih.gov
- Everything you wanted to know about the NCI Grants Process...but were afraid to ask (2005).

Access online at www.cancer.gov/admin/gab or order a print copy via NCl's online Publications Locator: https://cissecure.nci.nih.gov/ncipubs. (The publication does not include information about NIH's mandatory transition to electronic submission of applications and the new form; see: era.nih.gov/ElectronicReceipt/index.htm.)