# For Grants and Contracts

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## U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

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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.

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#### NOTICES OF AVAILABILITY (RFPs AND RFAs)

#### MAINTENANCE OF CHIMPANZEES FOR HEPATITIS OR AIDS RESEARCH

RFP AVAILABLE: NIH-NHLBI-HB-92-01

P.T. 34; K.W. 0715008, 1002002

National Heart, Lung, and Blood Institute

The National Heart, Lung, and Blood Institute (NHLBI) plans to continue the maintenance of a colony of chimpanzees to be utilized in nondestructive experiments judged most likely to advance hepatitis or acquired immune deficiency (AIDS) research. The chimpanzees are presently located at the site of the incumbent contractor, the Southwest Research Foundation for Biomedical Research in San Antonio, Texas. The NHLBI colony currently consists of 51 experimental animals (adult and juvenile). The contractor shall furnish housing and veterinary medical support to maintain and feed 51 NHLBI-owned chimpanzees.

This is an announcement of the availability of a Request for Proposals (RFP) that will be available on September 10, 1991. Proposals are due October 31, 1991. One award is anticipated by the Government. Written requests for the RFP must include three labels, self-addressed with the mailing address, and must cite RFP No. NHLBI-HB-92-01.

Requests for copies of the RFP are to be sent to:

Jack E. Jackson Contracting Officer Blood Resources Branch, BDR Contracts Section National Heart, Lung, and Blood Institute Federal Building, Room 5C14 Bethesda, MD 20892

#### TRANSPORT OF SUBSTANCES IN THE OLFACTORY SYSTEM

RFA AVAILABLE: DC-92-05

P.T. 34; K.W. 0705070, 0710085

National Institute on Deafness and Other Communication Disorders Application Receipt Date: November 27, 1991

The National Institute on Deafness and Other Communication Disorders (NIDCD) announces the availability of a Request for Applications (RFA) for research project grant (RO1) applications focused on the transport of organic and inorganic substances into the peripheral and central olfactory system and the effects of these substances on the olfactory system. Both basic and clinical studies of the olfactory system are applicable to the present RFA.

#### **BACKGROUND**

The olfactory receptor neurons of the olfactory neuroepithelium are in direct contact with the external environment, and they are at risk to potentially harmful infections and toxic agents. It has been shown that various organic and inorganic substances can be taken up by the olfactory receptor neurons and transported by a vigorous axoplasmic transport system into the olfactory bulb of the brain. These substances include dyes, amino acids, colloidal gold, and lectins. Some of these substances are transported transneuronally from the bulb into other parts of the forebrain. For example, recent studies have demonstrated that a lectin conjugate (wheat germ agglutinin-horseradish peroxidase) can be transported from the olfactory nerve to the olfactory bulb and subsequently to other areas of the forebrain. In addition, the olfactory neuroepithelium has been shown to be one of the portals of entry of neurotropic viruses into the brain. Certain arboviruses enter the olfactory bulb through the olfactory nerve and spread to other parts of the brain. Herpes simplex virus type 1 has been observed in the olfactory bulb. Certain viruses appear more likely to infect the olfactory neuroepithelium than the respiratory epithelium, whereas the reverse is true of other viruses. According to some investigators, the olfactory deficits expressed in the early stages of a number of disorders may result from substances that entered the brain through the olfactory nerve. Studies of the axoplasmic transport process of the olfactory nerve also have important implications for improved pharmacotherapy of the olfactory system. For example, this transport system potentially can provide a route for administration of pharmacotherapeutics to specific targets in the brain, avoiding the blood-brain barrier, which ordinarily prevents such access.

#### RESEARCH GOALS AND SCOPE

The research is to advance the understanding of olfactory mechanisms in health and disease. Both basic and clinical studies are applicable to the purpose of this RFA. Examples of research areas of interest include but are not limited to:

- o For any suspected toxin or pathogen, proof of the causal relationship to observed findings of damage to the olfactory system.
- o Neurophysiological and histopathological studies that determine the localization of the insults within the olfactory system.
- o Investigations into the molecular mechanisms triggered by insults to the olfactory system.
- o Defense mechanisms of the olfactory neuroepithelium against inhaled substances; xenobiotic metabolism, immune defense, secretions, and odorant binding proteins; xenobiotic metabolism and glial cells in olfactory bulb.
- o Abnormalities of axoplasmic transport in the olfactory nerve.
- o Retrograde transport in the olfactory nerve.
- o Active and passive mechanisms of uptake of substances into the olfactory neuroepithelium.
- o Comparison of effects of pathogens on olfactory and nasal trigeminal nerves.
- o Interactions between olfactory nerve and brain tissue.
- o Transneuronal transport of substances from olfactory bulb to other parts of the forebrain.

SPECIAL INSTRUCTIONS TO APPLICANTS REGARDING IMPLEMENTATION OF NIH POLICIES CONCERNING INCLUSION OF WOMEN AND MINORITIES IN CLINICAL RESEARCH STUDY POPULATIONS

For projects involving clinical research, NIH requires applicants to give special attention to the inclusion of women and minorities in study populations. If women or minorities are not included or adequately represented in the study population for clinical studies, a specific justification for this exclusion or inadequate representation must be provided. Applications without such documentation will not be accepted for review.

#### MECHANISM FOR SUPPORT

This RFA will use the National Institutes of Health (NIH) individual research project grant (R01). Applicants will be responsible for the planning, direction, and execution of the proposed project. All policy requirements that govern the grant programs of the Public Health Services apply.

Up to three meritorious applications will be funded. The earliest possible start date for the initial award will be July 1, 1992. Funding for these grants beyond the initial period will be subject to competitive renewal.

Applicants from institutions that have a General Clinical Research Center (GCRC) funded by the NIH National Center for Research Resources may wish to identify the GCRC as a resource for conducting the proposed research. In such a case, a letter of agreement from either the GCRC program director or Principal Investigator may be included with the application.

#### REVIEW PROCEDURES AND CRITERIA

Applications will be evaluated by Institute staff to determine responsiveness to the RFA. Responsive applications will be evaluated for scientific/technical merit as stated in form PHS 398 by a review committee convened by the Scientific Review Branch of NIDCD solely for this purpose. A second level review will be by the National Deafness and Other Communication Disorders Advisory Council.

#### LETTER OF INTENT

Prospective applicants are asked to submit by October 25, 1991, a letter of intent that includes a descriptive title of the proposed application, the name, address, and telephone number of the Principal Investigator, the names of other key personnel, the participating institutions, and the number or title of this RFA.

Although a letter of intent is not required, is not binding, and does not enter into the review of subsequent applications, the information that it contains is extremely helpful in planning for the review of applications. It allows Institute staff to estimate the potential review workload and to avoid possible conflict of interest in the review.

The letter of intent is to be sent to Dr. Jack Pearl at the address below.

#### METHOD OF APPLYING

The RFA, which contains important information for the applicant, may be obtained from the Program Administrator listed below. Applications must be submitted on form PHS 398 (rev. 10/88) using the instructions included in the application kit. These kits are available from the NIDCD Program Administrator (address cited below) and from the Division of Research Grants, National Institutes of Health, Westwood Building, Room 449, Bethesda, MD 20892, telephone (301) 496-7441.

On page 1 of form PHS 398, check "yes" in item 2 and type: DC-92-05, Transport of Substances in the Olfactory System.

The RFA label available in the 10/88 revision of application form PHS 398 must be affixed to the bottom of the face page. Failure to use this label could result in delayed processing of the application such that it may not reach the review comittee in time for review.

Send the original and four copies of the application to:

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

To expedite the review, send two copies of the application to:

Dr. Earleen Elkins
Chief, Scientific Review Branch
National Institute on Deafness and Other Communication Disorders
National Institutes of Health
Executive Plaza South, Room 400-B
6120 Executive Boulevard
Rockville, MD 20892

#### INQUIRIES

The complete RFA describing the research goals and scope, the review criteria, and other application requirements may be obtained from the E- Guide and from:

Jack Pearl, Ph.D.
Program Administrator
Division of Communication Sciences and Disorders
National Institute on Deafness and Other Communication Disorders
Executive Plaza South, Room 446
6120 Executive Boulevard
Rockville, MD 20892
Telephone: (301) 496-5061
FAX: (301) 402-6251

NIH Guide for Grants and Contracts Volume 20, Number 33, Part II of II September 6, 1991 For questions concerning budget and fiscal matters, contact:

Sharon Hunt
Grants Management Officer
Division of Extramural Activities
National Institute on Deafness and Other Communication Disorders
Executive Plaza South, Room 400-B
6120 Executive Blvd.
Rockville, MD 20892
Telephone: (301) 402-0909
FAX: (301) 402-6251

This program is described in the Catalog of Federal Domestic Assistance No. 93.173, Research Related to Deafness and Communication Disorders. Awards will be made under the authority of the Public Health Service Act, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grants policies and Federal Regulations 42 CFR Part 52 and 45 CFR Part 74. The program is not subject to review by a Health Systems Agency or Executive Order 12372.

### VACCINES FOR HUMAN CANCERS OF VIRAL ETIOLOGY

RFA AVAILABLE: CA-91-28

P.T. 34; K.W. 0740075, 0715035, 1002045, 0785140

National Cancer Institute

Letter of Intent Receipt Date: October 11, 1991 Application Receipt Date: December 11, 1991

#### **PURPOSE**

Cancer continues to be a leading cause of death, and it has been estimated that approximately 500,000 people will die of cancer in the United States in 1991. Vaccines, which could either prevent the initial development of cancer or function therapeutically to prevent the spread or recurrence of a tumor that has been treated, should have a significant impact in reducing cancer morbidity and mortality.

The overall thrust of this Request for Applications (RFA) is to stimulate basic and applied research leading to the development of vaccines for human cancers of known, or strongly suspected, viral etiology, including cancers associated with human papillomaviruses (HPVs), Epstein-Barr viruses (EBV), and hepatitis C virus (HCV). Identification of protective viral or viral-induced antigens that form the basis for vaccine preparation, development of animal models to determine host immune response to viral-induced tumors and to test the safety and efficacy of proposed vaccines, and the development of prototype therapeutic vaccines for viruses whose malignant sequelae occur as the result of chronic infection are all encouraged. Applications will not be accepted that propose research on the hepatitis B virus, the human T-cell lymphotropic viruses (HTLV-1, HTLV-2), human immunodeficiency virus (HIV-1, HIV-2), or animal models for any of these latter agents.

The present RFA is for a single competition with a deadline of December 11, 1991, for receipt of applications and October 11, 1991, for receipt of optional letters of intent. Applications must be prepared and submitted in accordance with the aims and requirements described in the RFA.

#### **HEALTHY PEOPLE 2000**

The Public Health Service (PHS) is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2000," a PHS-led national activity for setting priority areas. This RFA, Vaccines for Human Cancers of Viral Etiology, is related to the priority area of cancer. Potential applicants may obtain a copy of "Healthy People 2000" (Full Report: Stock No. 017-001-00474-0) or "Healthy People 2000" (Summary Report: Stock No. 017-001-00473-1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402-9325 (telephone 202-783-3238).

#### ELIGIBILITY REQUIREMENTS

Non-profit and for-profit organizations and institutions, governments and their agencies are eligible to apply. Foreign institutions are also eligible.

#### MECHANISM OF SUPPORT

Support of this program will be through the National Institutes of Health (NIH) grant-in-aid (RO1). Applicants will be responsible for the planning, direction, and execution of the proposed project. 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) 90-50,000, revised October 1, 1990.

This RFA is a one-time solicitation. Generally, future unsolicited competitive continuation applications will compete with all investigator-initiated applications and be reviewed by the Division of Research Grants (DRG). However, if the NCI determines that there is a sufficient continuing program need, a request for competitive

continuation applications will be announced. The total project period for applications submitted in response to this RFA may not exceed four years. The earliest feasible start date for the initial awards will be July 1992.

#### FUNDS AVAILABLE

Approximately \$2,000,000 in total costs per year for four years will be committed specifically to fund applications submitted in response to this RFA. It is anticipated that eight to ten awards will be made. 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.

#### RESEARCH GOALS AND SCOPE

The overall thrust of this RFA is to stimulate basic and applied research leading to the development of vaccines for human cancers of known, or strongly suspected, viral etiology, including cancers associated with HPVs, EBV, and HCV. Examples of research on HPVs include: (1) determining whether polyvalent vaccines are necessary for the prevention of cancer caused by multiple HPV types; (2) development of animal models of infection and oncogenesis and development of bioassays for infectious virus. Examples of research objectives for EBV include: (1) studies of the pathogenesis of EBV-induced lymphomas in the severe combined immunodeficiency (SCID) mouse, and the use of immune reconstitution by selected human lymphocyte populations to control the lymphomas; (2) development and assessment of Epstein-Barr viral mutants and their use as inactivated vaccines for cancer. Examples of research objectives for HCV include: (1) development and/or use of sensitive and specific assays for blood-borne HCV to determine the etiologic role of this agent in primary hepatocellular carcinoma; (2) studies of pathogenesis of HCV infections and determinants of oncogenesis.

#### SPECIAL INSTRUCTIONS FOR INCLUSION OF WOMEN AND MINORITIES IN CLINICAL RESEARCH STUDIES

For projects involving clinical research, NIH requires applicants to give special attention to the inclusion of women and minorities in study populations. If women or minorities are not included in study populations for clinical studies, a specific justification for this exclusion must be provided. Applications without such documentation will not be accepted for review.

#### METHOD OF APPLYING

The RFA contains important information and should be read before applying. The most recent revision of the research grant application form PHS 389 (rev. 10/88) must be used to apply for these grants. These forms are available at most institutional business offices; from the Office of Grants Inquiries, Division of Research Grants, National Institutes of Health, Room 449, Westwood Building, 5333 Westbard Avenue, Bethesda, MD 20892, telephone (301) 496-7441; and from the NCI Program Director named below. Applications must be received by December 11, 1991. If an application is received after that date, it will be returned. If the application submitted in response to this RFA is substantially similar to a research grant application already submitted to the NIH for review, but has not yet been reviewed, the applicant will be asked to withdraw either the pending application or the new one. Simultaneous submission of identical applications will not be allowed, nor will essentially identical applications be reviewed by different review committees. Therefore, an application cannot be submitted in response to this RFA that is essentially identical to one that has already been reviewed. This does not preclude the submission of substantial revisions of applications already reviewed, but such applications must include an introduction addressing the previous critique.

#### LETTER OF INTENT

Prospective applicants are asked to submit by October 11, 1991, a letter of intent that includes a descriptive title of the proposed research, the name and address of the Principal Investigator, the names of other key personnel, the participating institutions, and the number and title of the RFA in response to which the application is being submitted.

The letter of intent is to be sent to:

Dr. Jack Gruber
Chief, Biological Carcinogenesis Branch
Division of Cancer Etiology
National Cancer Institute
Executive Plaza North, Room 540
Bethesda, MD 20892
Telephone: (301) 496-9740

#### INQUIRIES

Written and telephone requests for the RFA and inquiries concerning the objectives and scope of the RFA and whether or not specific proposed research would be responsive are encouraged and are to be directed to Dr. Gruber at the above address. Telephone communications specifically relating to proposed studies of the hepatitis C virus are to be directed to Dr. John S. Cole, III, (301) 496-1718. Inquiries about investigations of human papillomaviruses are to be directed to Dr. Tom Nightingale, (301) 496-1953. Questions on Epstein-Barr virus studies are to be directed to Dr. Gretchen Hascall, (301) 496-4533. The Program Directors welcome the opportunity to clarify any issues or questions from potential applicants.

Direct inquiries regarding fiscal matters to:

Ms. Sara Stone Grants Administration Branch National Cancer Institute Executive Plaza South, Suite 243 Bethesda, MD 20892 Telephone: (301) 496-7800, extension 66

This program is described in the Catalog of Federal Domestic Assistance Number 93.393, Cancer Cause and Prevention Research. Awards are made under the authorization of the Public Health Service Act, 301 (c) and 410, Public Law 78-410, as amended, 42 U.S.C. 241; Small Business Innovation Development Act of 1982, as amended, Public Law 97-219; Public Law 99-158, 42 U.S.C. 285, Public Law 99-500, and Report 99-711 to accompany H.R. 5233 and administered under PHS grants policies and Federal Regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

#### USE OF TROPHIC FACTORS IN PREVENTING PHYSICAL FRAILTY

RFA AVAILABLE: AG/AM-91-11

P.T. 34; K.W. 0710010, 0760020, 0760025, 0715136, 0715010

National Institute on Aging

National Institute of Arthritis and Musculoskeletal and Skin Diseases

Letter of Intent Receipt Date: November 1, 1991 Application Receipt Date: January 15, 1992

#### PURPOSE

The National Institute on Aging (NIA) and the National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) announce the availability of a Request for Applications (RFA) for exploration of the potential for use of trophic factors in the prevention of physical frailty among older persons. The acquisition of new knowledge concerning the effects of growth factors, anabolic hormones, and pharmacologic trophic agents on prevention and treatment of conditions responsible for impaired strength, mobility, balance, and endurance in older persons is the goal of this solicitation.

The role of growth factors, anabolic hormones, and pharmacologic trophic agents in the prevention or treatment of conditions responsible for physical frailty (disabling impairments in strength, mobility, balance, and endurance) deserves increased attention. This field has progressed to the point at which preliminary clinical studies are possible in many cases in addition to continued basic studies. The potential impact of such factors on increasing muscle strength and mobility, preventing osteoporosis and osteoarthritis, and improving the healing of fractures, leg ulcers, and decubiti are among the most promising benefits that may result in and lead to significant improvements in the health of older persons. Because the frail older population has a very high proportion of women, there is a particular need to determine the effects of gender on the actions of trophic factors in older persons. In addition, more knowledge is needed on the potential role of ovarian hormonal replacement therapy in countering degenerative conditions responsible for frailty. This RFA solicits research on the effects of trophic factors in preventing or reversing processes or conditions responsible for physical frailty. Inclusion of ancillary studies to determine mechanisms responsible for tissue responsiveness or nonresponsiveness is strongly encouraged. All applications must include studies on human subjects, but additional laboratory animal studies or in vitro studies may also be included if appropriate (e.g., for tests not feasible in humans).

#### **ELIGIBILITY REQUIREMENTS**

Applications may be submitted by domestic and foreign, for-profit and nonprofit, organizations, either public or private, such as universities, colleges, hospitals, laboratories, units of State or local governments, and eligible agencies of the Federal Government. Applications from minority individuals and women are encouraged.

#### MECHANISM OF SUPPORT

Support of this program will be through the Public Health Service grant-in-aid. Only the RO1 grant mechanism may be used. Awards will be administered under PHS grants policy as stated in the Public Health Service Grants Policy Statement, DHHS Publication No. (OASH) 90-50,000, revised October 1, 1990. This RFA is a one-time solicitation. Future unsolicited competing renewal applications will compete with all investigator-initiated applications and be reviewed by the Division of Research Grants. FUNDS AVAILABLE

This RFA is a one-time solicitation. Up to \$2.5 million (total cost) for first-year expenses, and additional approved expenses for up to five years, will be committed to fund applications submitted in response to this RFA. This funding level is dependent on the receipt of a sufficient number of applications of high scientific merit. It is anticipated that approximately ten awards will be made. The NIAMS is expected to award up to \$500,000 for one or two applications that receive primary assignment to NIAMS.

#### RESEARCH OBJECTIVES

Specific topics of interest include:

- o The role of replacement therapy with hormones and other trophic factors (such as growth hormone, IGF-1, testosterone, or estrogens) or pharmacologic agents with trophic effects, in preventing or reversing atrophic or dystrophic degenerative changes responsible for conditions such as osteoporosis, osteoarthritis, loss of muscle mass, and others.
- o Effects of interventions that may increase endogenous levels of trophic factors (e.g., administration of pharmacologic agents, pituitary or hypothalamic factors, or exercise and other lifestyle factors that may affect production of trophic factors) in older persons.
- o The role of local tissue factors in modulating degenerative or atrophic changes in bone, muscle, and cartilage in older persons.
- o Studies on factors that may accelerate healing of wounds, fractures, pressure sores, and other ulcerative skin conditions in older persons.
- o Effects of age-related physiologic changes and age- related diseases on responses to trophic factors, including studies of mechanisms mediating these effects.
- o Systemic effects of trophic factor administration (e.g., on cardiovascular function, metabolism, renal function, pulmonary function, immune function) in older persons.

#### STUDY POPULATIONS

It is NIH policy that women and minorities must be included in clinical study populations unless there is a good reason to exclude them, and the study design must seek to identify any pertinent gender or minority population differences.

#### SPECIAL INSTRUCTIONS FOR INCLUSION OF WOMEN AND MINORITIES IN CLINICAL RESEARCH STUDIES

For projects involving clinical research, NIH requires applicants to give special attention to the inclusion of women and minorities in study populations. If women or minorities are not included in the study populations for clinical studies, a specific justification for this exclusion must be provided. Applications that fail to comply with this policy will be returned without review. Gender and racial/ethnic issues should be addressed in developing a research design and sample size appropriate for the scientific objectives of the study.

#### APPLICATION PROCEDURES

A copy of the full RFA may be obtained from Stanley L. Slater, M.D. (address below).

The application receipt date is January 15, 1992. Information about application procedures may be obtained from the Division of Research Grants, telephone (301) 496-7441. Applications will be received by the NIH Division of Research Grants. Applications will be assigned to a special review group organized by NIA. Following this review, applications will be considered by the assigned Institute national advisory countil.

#### LETTER OF INTENT

A letter of intent to submit an application, while not required, is requested by November 1, 1991. This letter is to be sent to Stanley L. Slater, M.D. (address below). The letter of intent is to include a descriptive title, the name and address of the Principal Investigator and any other participating institutions.

#### INQUIRIES

Written and telephone inquiries concerning this RFA are encouraged. The opportunity to clarify any issues or questions from potential applicants is welcome.

Direct inquiries for the NIA regarding programmatic issues to:

Stanley L. Slater, M.D. Geriatrics Program National Institutes of Health National Institute on Aging Building 31, Room 5C27 Bethesda, MD 20892 Telephone: (301) 496-6761

Direct inquiries for the NIAMS regarding programmatic issues to:

Dr. Stephen L. Gordon National Institute of Arthritis and Musculoskeletal and Skin Diseases 5333 Westbard Avenue Room 407 Bethesda, MD 20892

Telephone: (301) 496-7326

Direct inquiries for the NIA regarding fiscal matters to:

Barbara Cunningham Grants and Contracts Management Office National Institutes of Health National Institute on Aging Building 31, Room 5CO7 Bethesda, MD 20892 Telephone: (301) 496-1472

Direct inquiries for the NIAMS regarding fiscal matters to:

Ms. G. Carol Clearfield National Institute of Arthritis and Musculoskeletal and Skin Diseases 5333 Westbard Avenue Room 403 Bethesda, MD 20892 Telephone: (301) 496-6529

AUTHORITY AND REGULATIONS

This program is described in the Catalog of Federal Domestic Assistance No. 93.866. Awards are made under authorization of the Public Health Service Act, Title IV, Part A (Public Law 78-410, as amended by Public Law 99-158, 42 USC 241 and 285) and administered under PHS grants policies and Federal Regulations 42 CFR 52 and 45 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

#### PROGRAM PROJECTS IN TRANSPLANTATION IMMUNOLOGY

RFA AVAILABLE: AI-91-14

P.T. 34; K.W. 0745065, 0710125, 0710065

National Institute of Allergy and Infectious Diseases

Letter of Intent Receipt Date: October 25, 1991 Application Receipt Date: February 11, 1992

#### BACKGROUND INFORMATION

The Genetics and Transplantation Branch of the Division of Allergy, Immunology and Transplantation of the National Institute of Allergy and Infectious Diseases (NIAID) supports fundamental studies and applied research in immunogenetics and transplantation immunology. Program Projects in Transplantation Immunology are intended to stimulate collaboration between transplant clinicians and basic immunologists to evaluate the immune response to organ allografts, elucidate the important cellular and molecular events of both the induction and effector phases of the alloimmune response and to develop improved therapeutic procedures to ensure long-term graft survival. This notice announces the availability of a Request for Applications (RFA) that encourages the development of applications from collaborating investigators and to coordinate the submission and review of program project applications. The RFA may be obtained from the contact listed below.

#### RESEARCH GOALS AND SCOPE

Applications must heavily emphasize collaboration in research between transplant clinicians and immunologists, and the application of the most up-to-date concepts and techniques of immunology to the evaluation of the immune system of recipients in all circumstances attendant to the transplantation. The application must describe a multidisciplinary research program that has a well-defined central research focus or objective. As with other program projects, the individual projects of which they consist must be interrelated, all contributing to the program objective.

The major objective of the research is to elucidate methods to induce long- term organ graft survival by manipulation of the immune system to induce specific tolerance. Specifically, must should involve the characterization of the status of the immune system, specifically the immunoregulatory balance, including studies (1) prior to transplantation in its "normal" state or, if the transplant is occasioned by a disturbance of the immune state, in the causative disordered state; (2) in the course of transplant preparation, which consists of the induction of tolerance; (3) postoperatively during maintenance immunosuppression as the graft becomes established; (4) during rejection episodes; and/or (5) during treatment of rejection. Also, studies on the modulation of immunological activity using the information obtained from the above studies are advantageous.

#### SPECIAL INSTRUCTIONS FOR THE INCLUSION OF WOMEN AND MINORITIES IN CLINICAL RESEARCH STUDIES

The following is a brief statement of the NIH and ADAMHA policy regarding the inclusion of women and minorities in study populations. The inclusion of women and minorities must be addressed in applications submitted in response to this RFA.

For projects involving clinical research, NIH requires applicants to give special attention to the inclusion of women and minorities in study populations. If women or minorities are not included or adequately represented in the study populations for clinical studies, a specific justification must be provided. Applications without such documentation will not be accepted for review.

#### MECHANISM OF SUPPORT

Program project (P01) grants are awarded to an institution on behalf of a Principal Investigator for the support of a broadly based, multidisciplinary, long-term research program with a specific major goal or basic theme. A program project generally involves the organized efforts of groups of investigators who conduct research projects related to the overall program goal. The grant can provide support for the projects and for certain basic resources shared by individuals in the program project if sharing facilitates the total research effort. Each project supported by a program project grant is expected to contribute to and be directly related to the common theme of the program. The projects, under the direction of a project leader, must demonstrate an essential element of unity and interdependence. In Fiscal Year 1992, the NIAID plans to award at least two program project grants submitted in response to this RFA and, depending on availability of funds and scientific merit, more than two. First-year budget requests must be limited to no more than \$500,000 direct costs.

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ONLY DOMESTIC INSTITUTIONS ARE ELIGIBLE TO APPLY. Applications may be submitted by any public or private, nonprofit or profit-making, organizations.

#### METHOD OF APPLYING

Prospective applicants are asked to submit by October 25, 1991, a letter of intent that includes a descriptive title of the overall proposed research, the name of the Principal Investigator, and a list of the names of key investigators and their institution(s). The letter of intent is requested in order to provide an indication of the number and scope of applications to be reviewed so as to allow early preparations for review. The letter of intent is not binding and does not commit the sender to submit an application, nor is it a requirement for submission of an application. Applicants are strongly encouraged to contact Dr. Stephen Rose prior to preparing an application.

The letter of intent is to be sent to Dr. Mark Rohrbaugh and a copy to Dr. Stephen Rose at the addresses noted below.

Before preparing an application, the prospective applicant may request a copy of the NIAID Information Brochure on Program Project and Center Grants from:

Mark L. Rohrbaugh, Ph.D.
Scientific Review Administrator
NIAID/PPRB
Control Data Building, Room 406-S
6003 Executive Boulevard
Bethesda, MD 20892 (20852 if using overnight delivery services)
Telephone: (301) 496-8424

#### STAFF CONTACT

The RFA contains important information for applicants and may be obtained from:

Stephen M. Rose, Ph.D.
Chief, Genetics and Transplantation Branch
Division of Allergy, Immunology and Transplantation
National Institute of Allergy and Infectious Diseases
National Institutes of Health
5333 Westbard Avenue, Room 754
Bethesda, MD 20892
Telephone: (301) 496-5598
Telefax: (301) 402-0175

Inquiries regarding fiscal matters may be addressed to:

Mr. Jeffrey Carow Chief, Immunology Grants Management Section GMB, DEA, NIAID, NIH Westwood Building, Room 726 Bethesda, MD 20892 Telephone: (301) 496-7075 Ms. Marietta Robinson Grants Management Specialist GMB, DEA, NIAID, NIH Westwood Building, Room 706 Bethesda, MD 20892 Telephone: (301) 496-7075

This program is described in the Catalog of Federal Domestic Assistance No. 93.855, Immunology, Allergic and Immunologic Diseases Research. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (Public Law 78-410, as amended; 42 USC 241) and administered under PHS grants policies and Federal Regulation 42 CFR Part 74. This program is not subject to the intergovernmental review requirements of Executive Order 12372 or Health Systems Agency review.

#### SPECIALIZED RESEARCH CENTER PROGRAMS AND CENTER CORE GRANTS TO SUPPORT RESEARCH IN REPRODUCTION

RFA AVAILABLE: HD-92-01

P.T. 04; K.W. 0413002, 0710110, 0710115, 0710030

National Institute of Child Health and Human Development

Letter of Intent Receipt Date: January 1, 1992 Application Receipt Date: May 15, 1992

The Reproductive Sciences Branch (RSB), Center for Population Research (CPR), National Institute of Child Health and Human Development (NICHD), supports research on reproduction that relies on a variety of approaches in biomedical sciences. Among the grant mechanisms used to provide research support, the RSB uses:

- (1) Specialized Research Centers (P50s) that are integrated groups of research projects and supporting core service facilities. The research activities included in such project grants must comprise, by definition, a multidisciplinary approach to biomedical problems in reproduction. Although these research programs may have more than one theme, focus, or emphasis, all of the projects must be responsive to one or more of the specific areas of reproductive research that constitute the mission of the RSB, CPR, NICHD.
- (2) Center Core Grants (P30s) that support Center Core facilities designed to enhance existing federally supported research projects within the purview of the RSB, CPR, NICHD. Such Center awards require a critical mass of individual, reproductive-oriented awards whose productivity and quality would be increased by support from central technical facilities.

At present, the RSB supports a fixed number of centers with a commitment of five years of support that is competitively renewable for additional five-year periods. Support for one P50 Center and two P30 Centers ends in FY 1993, and it is anticipated that these Centers will submit renewal applications. Although there are no new Center awards available at this time, new groups of investigators are invited to compete with the current awardees for the existing three awards.

Potential applicants must contact the RSB staff for the Request for Applications and for further information regarding reproductive sciences center grants (P50s and P30s). It is strongly recommended, but not mandatory, that potential applicants send a letter of intent to the RSB staff at the address listed below by January 2, 1992. This letter is to include a list of the titles of the relevant research projects to be associated with it, and provide the names of the relevant key investigators and any other participating institutions. The letter of intent is to be received by the RSB no later than January 2, 1992, but applicants are encouraged to send it as soon as they decide to apply for the grant so that the RSB staff can be of maximum assistance in the application process. Center grant applications must be structured in accord with policy and formatting guidelines presented in the publications entitled "P50 Specialized Research Center Grant Guidelines" and "P30 Center Core Grant Guidelines" that are available from the NICHD office listed below. Such guidelines require, for example, certain tabulations in addition to the usual instructions for the grant application form PHS 398 (rev. 10/88) used to prepare these applications. The current policies and requirements that govern the research grant programs of NIH will prevail (Code of Federal Regulations, Title 42, Part 52 and Title 45, Part 75). Applications prepared for this competition may not propose multi- institutional consortiums.

Although this solicitation is included in the plans for FY 1993, support for these center grants is contingent upon the receipt of funds for these purposes by the NICHD. The number of grants to be awarded is also contingent upon a sufficient number of applications receiving a high enough level of merit to be considered for an award. It is expected that up to three awards will be made as a result of this announcement.

SPECIAL INSTRUCTIONS FOR INCLUSION OF WOMEN AND MINORITIES IN CLINICAL RESEARCH STUDIES

For projects involving clinical research, NIH requires applicants to give special attention to the inclusion of women and minorities in study populations. If women or minorities are not included in the study populations for clinical studies, a specific justification for this exclusion must be provided. Applications without such documentation will not be accepted for review.

New Specialized Research Center Grant (P50) applications may not request more than \$600,000 in direct costs for the first year. New Center Core Grant (P30) applications may not request more than \$500,000 in direct costs for the first year. Renewal applications from existing P30 or P50 centers may not request initial year direct costs exceeding 120 percent of the Council recommended direct costs for the final year of the preceding project period. Unless prior written approval of the NICHD has been obtained, applications with requests exceeding these guidelines will be administratively withdrawn by the NICHD and returned to the applicant.

For further information and a copy of the full RFA, contact:

Julia Lobotsky, M.S.
Reproductive Sciences Branch
Center for Population Research
National Institute of Child Health and Human Development
National Institutes of Health
Executive Plaza North, Suite 603
Bethesda, MD 20892
Telephone: (301) 496-6515

To obtain copies of the NICHD Policy and Formatting Guidelines for P30 and P50 center grant applications, contact:

Laurance Johnston, Ph.D.
Scientific Review Program
National Institute of Child Health and Human Development
National Institutes of Health
Executive Plaza North, Suite 520
Bethesda, MD 20892
Telephone: (301) 496-1696

For information on budget and fiscal matters, contact:

Melinda Nelson National Institute of Child Health and Human Development Executive Plaza North, Room 505 Bethesda, MD 20892 Telephone: (301) 496-5481

This program is described in the Catalog of Federal Domestic Assistance No. 93.864, Population Research. Awards will be made under the authority of the Public Health Service Act 301 (42 USC 241) and 441 (USC 289d) and administered under PHS Grants 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.