

# NIH GUIDE

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## For Grants and Contracts

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The NIH Guide announces scientific  
initiatives and provides policy and  
administrative information to indi-  
viduals and organizations who need to  
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requirements, and changes in extra-  
mural programs administered by the  
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NOTICES

NIH REGIONAL WORKSHOPS ON IMPLEMENTATION OF THE PHS POLICY ON HUMANE CARE AND USE OF LABORATORY ANIMALS

P.T. 42; K.W. 0201011, 1014003

National Institutes of Health

The National Institutes of Health, Office for Protection from Research Risks, is continuing to sponsor a series of workshops in implementing the Public Health Service Policy on the Humane Care and Use of Laboratory Animals. The workshops are open to institutional administrators, members of animal care and use committees, laboratory animal veterinarians, investigators and other institutional staff who have responsibility for high-quality management of sound institutional animal care and use programs.

Date: January 28-29, 1988

Location: Albuquerque, New Mexico

Contact:

Ms. Rynda Gibbs  
University of New Mexico School of Medicine  
Continuing Medical Education  
815 Vassar N.E.  
Albuquerque, New Mexico 87131  
Telephone: (505) 277-3942

Date: March 22-23, 1988

Location: Durham, North Carolina

Contact:

Ms. Sandy Huskins or  
Ms. Pat McAdams  
Duke University  
Creative Conference Planners  
2900 Harriman Avenue  
Durham, North Carolina  
Telephone: (800) 845-1054 or (919) 782-1905

Date: May 17-18, 1988

Location: Albany, New York

Contact:

Ms. Madelyn Cicero  
Office for Research  
State University of New York at Albany  
Albany, New York 12222  
Telephone: (518) 442-3510

Other workshops are being planned and will be announced in future issues of the NIH Guide for Grants and Contracts.

For additional information contact:

Ms. Roberta Garfinkle  
Executive Assistant for Animal Welfare Education  
National Institutes of Health  
Office for Protection from Research Risks  
Building 31, Room 4B09  
Bethesda, Maryland 20892

INDIVIDUAL POSTDOCTORAL FELLOWSHIP (F32) APPLICATIONS - LETTERS OF REFERENCE

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

National Institutes of Health

The NIH is working to reduce the time required for completion of the receipt, referral, review, and award of individual postdoctoral fellowship (F32)

applications. The goal is to cut the current time of eight to nine months in half. Accomplishing this goal would benefit candidates and their sponsors by giving them more time for planning future research training activities.

To help expedite the review process, NIH is now requiring that at least three completed, sealed letters of reference be submitted with each individual fellowship application.

Four copies of the reference forms are included in each fellowship application kit. Candidates should:

1. Send these forms to their referees well in advance of the application submission date, and advise the referees to complete the form and return it to the candidate in a sealed envelope as soon as possible;
2. Request reference reports only from individuals who will be able to return them in time for the application submission. Consider any factor (e.g., illness or overseas sabbatical, etc.) that might cause an inordinate delay;
3. Choose individuals, other than the sponsor of the application, who can make the most meaningful comments about the candidate's qualifications for a research career;
4. If applicable, include a reference from the current mentor or immediate supervisor. If not submitting a reference from the thesis advisor or chief of service, explain why in Item 23 of the application;
5. Where possible, select at least one respondent who is not in the candidate's current department; and
6. Select graduate or medical school referees rather than those from undergraduate schools.

To protect the utility and confidentiality of reference letters, candidates are asked not to open the envelopes. The sealed envelopes should be attached to the original application.

Applications with fewer than three references will be returned. Candidates reapplying (competing continuations or revised applicants) must submit new reference forms to facilitate the expedited review process.

#### DATED ANNOUNCEMENTS (RFPs AND RFAs AVAILABLE)

#### EVALUATION OF CHEMOPREVENTION AGENTS BY IN VIVO SCREENING ASSAYS

MASTER AGREEMENT RFP AVAILABLE: NCI-CN-85073

P.T. 34; K.W. 0740000, 0755010, 0745055

National Cancer Institute

The required services will be defined by Master Agreement Orders issued during the three-year period of performance. This is a recompetition of the entire pool of Master Agreement Holders. ALL Master Agreement Holders must requalify to be eligible to compete for future Master Agreement Order (MAO) RFP's.

Pursuant to the Master Agreement Orders (MAOs) the Contractor shall conduct in vivo screening studies in laboratory animals (primarily rats and mice) using gavage and other routes of administration to administer the designated chemopreventive agents in animal models using any carcinogenic mechanism (that is consistent with the Evaluation Criteria), such as the administration of carcinogens, promoters, hormones, irradiation, cells, or other carcinogenic agents.

This research will be provided under cost-reimbursement and/or fixed-price MAOs. Offerors will not be considered eligible for award unless they can conduct specific individual MAOs in accordance with FDA Food Laboratory Practice Regulations in facilities that are operated in compliance with the NIH Guide for the Care and Use of Laboratory Animals, the Animal Welfare Act as administered by the USDA, and the U.S. Government Principles for Utilization and Care of Vertebrate Animals Used for Testing Research and Training.

It is estimated that up to four (4) Task Orders per year will be issued pursuant to the Master Agreement Contracts. The RFP will be available on or after January 19, 1988. The proposal due date will be approximately 45 days later.

Copies of the RFP may be obtained by sending a written request to:

Mr. Charles Lerner, Contract Specialist  
Prevention Contracts Section, RCB  
National Cancer Institute  
Blair Building, Room 2A07  
Bethesda, Maryland 20892  
Telephone: (301) 427-8745

PRECLINICAL PHARMACOLOGY INVESTIGATIONS OF ANTI-TUMOR AGENT

RFP AVAILABLE: NCI-CM-97552-72

P.T. 34; K.W. 0740020, 0710100

National Cancer Institute

The Developmental Therapeutics Program (DTP), Division of Cancer Treatment, National Cancer Institute (NCI), is interested in organizations having the necessary experience, scientific and technical personnel and facilities to conduct a series of preclinical pharmacokinetic and other pharmacology studies of antitumor drugs in non-disease bearing animals. The studies may involve: the development of methodology for the quantitative measurement of drugs and/or metabolites in animal biological milieu; determination of the most effective mode of drug administration to achieve tumor inhibitory concentrations in body fluids and tissues; bioavailability studies following administration of drug by various routes, tissue distribution, excretion and thorough pharmacokinetics profile studies; and structural determination of metabolites and transformation products of the parent drug and mechanisms of action. The Government will supply all animals (mice, rats, dogs), drugs, radiolabeled drugs, etc. Contractors will be expected to provide all equipment, solvents, reagents and animal facilities needed to conduct this type of work. It is anticipated that three awards will be made, each for a three-year incrementally funded period. Only one award will be made to an institution. Officers may submit separate proposals for either one or both levels of effort.

This request for proposal represents a recompetition of the three current contracts for the proposed effort: Ohio State University, N01-CM-67903; Mayo Foundation, N01-CM-67904; and Southern Research Institute, N01-CM-67905.

For our convenience, please include two return labels with all requests. The RFP is scheduled to be available on or before January 15, 1988 and the deadline for receipt of proposals on or about March 11, 1988. All responsible offerors may submit proposals for consideration by the National Cancer Institute.

Copies of the RFP may be obtained by sending a written request to:

Jacqueline Ballard, Contract Specialist  
Treatment Contracts Section, RCB  
National Cancer Institute  
Blair Building, Room 224  
Bethesda, Maryland 20892  
Telephone: (301) 427-8737

ANALYSIS OF FIBER COMPONENTS IN FOOD

RFP AVAILABLE: NCI-CN-85069

P.T. 34; K.W. 0710095, 1003008

National Cancer Institute

The major goal of this initiative is support the analysis of dietary fiber components in foods. The major objectives of the procurement will be the following:

1. Design and execute a statistically valid food sampling plan of fiber-containing foods which would be representative of foods in the US diet by food type, geographical region and season.
2. Analyze these foods for total dietary fiber, soluble and insoluble fractions and the major fiber components: cellulose, hemicellulose, pectin and lignin.

The RFP is tentatively scheduled for release on February 3, 1988, and responses will be due on March 30, 1988.

It is anticipated that two awards will be made and that a three year incrementally funded cost-reimbursement (completion) type contract will be awarded to each of the successful offeror's. Copies of the RFP may be obtained by sending a written request to:

Diana L. Wheeler, Contract Specialist  
Research Contract Branch, PCCS  
Blair Building, Room 2A07  
National Cancer Institute  
National Institutes of Health  
Bethesda, Maryland 20892  
Telephone: (301) 427-8745

PRODUCTION OF MONOCLONAL ANTIBODIES FOR TREATMENT OF HUMAN DISEASE

MASTER AGREEMENT ANNOUNCEMENT: NCI-CM-87253-48

P.T. 34; K.W. 0760045, 0715035

National Cancer Institute

Master Agreement Announcement for Production of Monoclonal Antibodies for Treatment of Human Disease, RFP NCI-CM-57253-48. The Master Agreement (MA) is certification of eligibility awarded to more than one organization judged to be technically and scientifically qualified to compete for future Master Agreement Order (MAO) RFPs. The National Cancer Institute (NCI) is seeking to identify those institutions with the capacity and expertise to generate cell clones capable of large-scale production of murine-human monoclonal antibodies.

RFP NCI-CM-87253-48 will be available on or about January 20, 1988, and responses will be due on March 18, 1988.

Request for RFP should be sent to the attention of:

Thompkins Weaver, Jr.  
Contract Specialist  
Treatment Contracts Section, RCB  
National Cancer Institute, NIH  
Blair Building, Room 212  
Bethesda, Maryland 20892  
Telephone: (301) 427-8737

CANCER PREVENTION RESEARCH UNIT PROGRAM

RFA AVAILABLE: 88-CA-06

P.T. 34; K.W. 0715035, 0745055, 0404019, 0745035, 0785055

National Cancer Institute

Application Receipt Date: August 24, 1988  
Letter Of Intent Date: March 30, 1988

INTRODUCTION AND BACKGROUND INFORMATION

The Division of Cancer Prevention and Control (DCPC) of the National Cancer Institute (NCI) invites grant applications from interested investigators for the establishment and support of Cancer Prevention Research Units (CPRU).

The objective of this program effort is to establish a group of multidisciplinary cancer prevention research programs as a national long-term resource in cancer prevention research. These CPRUs will conduct primary and secondary prevention, health promotion and preventive services research aimed at 1) developing new intervention approaches in all areas of cancer prevention or (2) applying proven or state-of-the-science interventions in the smoking and screening areas identified in the "Cancer Control Objectives for the Year 2000" (see below).

The CPRU concept envisions a multidisciplinary environment of scientists interacting closely in the research program. These can include new as well as experienced investigators in relevant fields and disciplines, such as disease prevention and control, medicine, public health, health education, health promotion, epidemiology, nutrition sciences, health policy and economics, health services research, behavioral and social sciences, community organization, communications, and biostatistics.

A total of \$4 million has been set aside from FY 1989 funds for this RFA. Up to five awards will be made under this RFA, subject to availability of funds. Awards will be for up to five years each.

#### DEFINITIONS OF CANCER PREVENTION RESEARCH

The National Cancer Institute has announced a goal and objectives for achieving a 50 percent reduction in the cancer mortality rate by the Year 2000 (Greenwald P, Sondik EJ. Cancer Control Objectives for the Nation: 1985-2000. NCI Monograph No. 2, 1986).

The cancer control objectives include:

- Reducing smoking prevalence to 16 percent;
- Increasing the percentage of women who have a Pap smear every 3 years to 90 percent (ages 20-39) and to 80 percent (ages 40-70);
- Increasing the percentage of women aged 50-70 to 80 percent who have an annual physical breast examination coupled with mammography.

For this RFA, the DCPC cancer control definition will be limited to cancer prevention research: research in the areas of primary and secondary prevention, health promotion, and preventive services aimed at developing new human intervention approaches, or applying proven interventions in these areas. This definition places primary emphasis on the inclusion of a cancer control intervention in proposed studies. A 5-phase classification system is used for cancer control studies (Greenwald P & Cullen J. JNCI 1985;74:543-551).

Areas of research interest in DCPC relevant to this RFA are summarized as follows:

- Cancer primary prevention research in chemoprevention, diet and nutrition.
- Smoking and tobacco prevention and cessation (Phase IV-V studies only).
- Secondary prevention. All areas are eligible; however, if breast and cervical cancer screening studies are proposed, they must be Phase IV-V.
- Health promotion sciences, applications research and research on health services, since the latter impacts on the application of the interventions in community studies.
- Linkages between laboratory research and applied cancer prevention and control research are encouraged.
- Applied epidemiology studies also are allowed.

The CPRU requires a major program theme to focus the research effort and form the basis for multidisciplinary and inter-institutional collaboration and synergism. Themes previously used in large cancer control program grants have varied, from single cancer site (breast cancer prevention), to risk factor focus (tobacco reduction in an HMO), to intervention focus (educational intervention; adherence to cancer control regimens; improving early detection methods; chemoprevention; community intervention for cancer prevention).

#### COMPONENTS OF THE CANCER PREVENTION RESEARCH UNIT

The Cancer Prevention Research Unit should include the following components or elements:

- A qualified leader with an appropriate time commitment.
- A multidisciplinary group of prevention oriented scientists who can conduct this type of research.
- A rationale for why the CPRU method is appropriate for the intended research program.
  
- An emphasis on cancer prevention and health promotion and prevention services research as noted above.
- One major specific research theme to focus the CPRU efforts, and at least three research projects within the theme area. Other themes are optional.
- Research in breast and cervical screening and in smoking prevention and control is optional, but if included, will be required to be Phase IV or V studies.
- Applied epidemiology projects are optional.
- Specific developmental projects are allowed as an optional category for up to 15 percent of the direct costs of the CPRU. These

projects will undergo peer review as part of the overall CPRU application review process.

- Research or administrative core units or shared resources necessary to more efficiently conduct the research program. These are optional.
- Evidence of collaborative arrangements with the appropriate organizations or population groups necessary to conduct the studies.
- Advisory committees for program planning and monitoring are allowed.

#### ELIGIBILITY AND MECHANISM OF SUPPORT

Applications must be responsive to this RFA, in the sense of being directed toward the attainment of the stated program goals, and must meet the application requirements described in the full RFA. Ineligible institutions include the two CCRU institutions and foreign institutions.

This RFA will use the NIH Grant-in-Aid. Nonprofit and for-profit institutions within the United States may apply. All grants submitted in response to this announcement will be new program project grants (P01s).

#### PROGRAM CONSULTATION

Prospective applicants are strongly encouraged to consult with the the Program Director before and during the preparation of their letters of intent and grant applications on questions of policies, procedures and guidelines.

#### LETTER OF INTENT

For this RFA, prospective applicants are requested to submit a letter of intent to the NCI not later than March 30, 1988. The purpose of the letter of intent is to establish communications between potential applicant groups and the appropriate NCI administrative and program staff concerning the scientific content and objectives appropriate for DCPC sponsorship, the theme or focus, and the size and organization of the application. Prospective applicants are reminded that letters of intent are not mandatory, are not a pre-condition for applying under this RFA, and are not part of the formal review process.

#### INQUIRIES

For program information and consultation, contact:

Carlos E. Caban, Ph.D.  
CPRU Program Director  
Cancer Control Applications Branch  
DCPC, NCI, NIH  
Blair Building, Room 4A01  
9000 Rockville Pike  
Bethesda, Maryland 20892-4200  
Telephone: (301) 427-8735

The RFA label (found in the 9/86 revision of application form PHS 398) must be affixed to the bottom of the face page of the original copy of the application. Failure to use this label could result in delayed processing of your application such that it will not reach the review committee in time for review.

#### PROGRAM PROJECTS ON MECHANISMS OF IMMUNOLOGIC DISEASES

RFA AVAILABLE: 88-AI-04

P.T. 34; K.W. 0710070, 0715120, 0755030, 0705055, 0785045, 0710030

National Institute of Allergy and Infectious Diseases

Application Receipt Date: June 15, 1988

#### BACKGROUND INFORMATION

The Clinical Immunology and Immunopathology Branch of the Immunology, Allergic and Immunologic Diseases Program of the National Institute of Allergy and Infectious Diseases (NIAID) supports research on the cellular and molecular mechanisms of immunologic diseases and the application of this knowledge to clinical problems. This request for applications (RFA) is intended to



encourage the development of applications from collaborative basic science and clinical investigative groups, and to co-ordinate the submission of new and renewal program project applications providing equitable opportunity for both to compete for funds currently available for existing programmatic activities concerned with the study of mechanisms of immunologic diseases. Fourteen such program projects are currently funded and support for five is scheduled to conclude in FY 89.

#### RESEARCH GOALS AND SCOPE

Realizing that immunologic and inflammatory disorders constitute major areas of endeavor of the Clinical Immunology and Immunopathology Branch, the goals of these program projects are aimed at understanding the underlying mechanisms of disease and the development of diagnostic measures and approaches to effective prevention, control and treatment of a wide variety of immunologic diseases.

The scope of these program projects are intended to include studies on all aspects of immunologic responses aimed at defining etiologic factors and pathogenetic mechanisms. Research approaches may include clinical immunology studies of acquired and inherited diseases associated with dysfunctions of the immune system, as well as basic immunopharmacology studies of the immune system and its disorders.

Of special interest to NIAID are program projects with an emphasis on one of several areas of investigation which appear to be particularly promising in terms of elucidation of basic immune mechanisms and their application to clinical disorders. Thus in addition to program projects which may approach a wide variety of immunologic disorders, we wish to encourage the development of program projects which have a central research theme. Included among these "thematic approaches" are the following:

##### Childhood Immunodeficiency Diseases:

Major advances have occurred in our understanding of childhood immunodeficiency disorders. Investigators are encouraged to devise studies which further our understanding of basic mechanisms, as well as develop new approaches to diagnosis, treatment and prevention of these disorders.

##### Acquired Immunodeficiency Diseases:

Basic studies of immune mechanisms regulating host defense and host inflammation are encouraged in a wide variety of acquired immunodeficiency diseases. Such studies may include not only the investigation responses of differing cell populations (lymphocytes, monocytes/macrophages and neutrophils) but also how immune modulators may influence cellular responses. They may range in emphasis from basic studies to clinical application of appropriate agents.

##### Dermatologic Diseases Modulated by Immune Mechanisms:

There have now been a wide variety of dermatologic disorders described in which immune mechanisms play an important role in their pathogenesis. Basic studies of the immunopathogenesis, the diagnosis and the therapy of these disorders are encouraged.

#### MECHANISM OF SUPPORT

Program project grants are awarded to an institution on behalf of a program director for the support of a broadly based, multidisciplinary, long-term research program which has a specific major objective or basic theme. A program project generally involves the organized efforts of groups of investigators, members of which conduct research projects related to the overall program objective. The grant can provide support for the projects and for certain core resources shared by individuals in a program where the sharing facilitates the total research effort. Each component project supported under a program project grant is expected to contribute to and be directly related to the common theme of the program; they should demonstrate an essential element of unity and interdependence. At least five awards are planned for FY 1989.

ELIGIBILITY  
ONLY DOMESTIC INSTITUTIONS ARE ELIGIBLE TO APPLY.

#### METHOD OF APPLYING

Applications may be submitted by any domestic public or private nonprofit or profit-making organizations. Before preparing an application, the prospective applicant should request a copy of the NIAID Information Brochure on Program

Projects from:

Dr. Nirmal Das  
Executive Secretary  
Allergy, Immunology and Transplantation  
Research Committee  
National Institute of Allergy and  
Infectious Diseases  
National Institutes of Health  
Westwood Building, Room 706  
Bethesda, Maryland 20892  
Telephone: (301) 496-7966

STAFF CONTACT

A more detailed RFA may be obtained from:

Robert A. Goldstein, M.D., Ph.D.  
Chief, Clinical Immunology and  
Immunopathology Branch, IAIDP  
National Institute of Allergy  
and Infectious Diseases  
Westwood Building, Room 757  
Bethesda, Maryland 20892  
Telephone: (301) 496-7104

THE RFA LABEL AVAILABLE IN THE 6/86 REVISION OF APPLICATION FORM 398 MUST BE AFFIXED TO THE BOTTOM OF THE FACE PAGE. FAILURE TO USE THIS LABEL COULD RESULT IN DELAYED PROCESSING OF YOUR APPLICATION SUCH THAT IT MAY NOT REACH THE REVIEW COMMITTEE IN TIME FOR REVIEW.

EXPANSION OF THE PEDIATRIC AIDS CLINICAL TRIAL GROUP

RFA AVAILABLE: 88-AI-03

P.T. 34; K.W. 0715120, 0715125, 0755015, 0415000, 0740000

National Institute of Allergy and Infectious Diseases

Letter of Intent Receipt Date: February 15, 1988  
Application Receipt Date: April 1, 1988

The National Institute of Allergy and Infectious Diseases (NIAID) announces the availability of an RFA for the expansion of the PEDIATRIC AIDS CLINICAL TRIAL GROUP.

The purpose of this RFA (available on request) is to expand the cooperative group of NIAID-funded institutions conducting clinical trials of therapies directed against HIV infection and associated opportunistic infections and malignancies in children. Applications may be submitted by clinical research teams at a single institution or at a cluster of institutions within a tightly circumscribed geographic area. Applications may also be submitted by institutions currently members of the AIDS Clinical Trial Group (ATEU and CSG) if their currently funded pediatric efforts are not a primary focus of their ongoing clinical trial research program. If funded, the investigators within an applicant organization will join the AIDS Clinical Trial Group, which is comprised of the full complement of clinical investigators funded by NIAID to conduct clinical trials, including trials in pediatric populations. The total group of investigators performing trials with pediatric patients will be called the Pediatric AIDS Clinical Trial Group (Pediatric ACTG).

The research objective of the Pediatric ACTG is the development of effective anti-retroviral and immunomodulatory therapies for the treatment and control of HIV infection, and of specific therapies (including prophylaxis) directed against opportunistic infections and malignancies associated with HIV infection in the pediatric population. The investigations will encompass all stages of therapeutic evaluation and drug development: phase I (pharmacokinetic/safety studies), phase II (continuing safety/initial efficacy studies), and phase III (definitive efficacy studies).

The role of the Pediatric ACTG is to provide a system to evaluate the efficacy and toxicity of therapeutic interventions. Funding of sites is designed to establish an ongoing capability to develop and implement studies in a timely fashion. Therefore, applicant clinical units should demonstrate the following resources and capabilities: available patient populations; appropriate staff necessary for the establishment of a clinical trial research unit (including capabilities for maternofetal studies); expertise required to design and conduct phase I/II/III trials of investigational agents or combinations of

agents ( most large trials will be conducted in a multi-center setting); capacity to conduct appropriate virologic, immunologic and pharmacokinetic evaluations; adequate facilities in which to conduct the clinical and laboratory components of this effort; and expertise and resources for data management.

Each application should be assembled by a Principal Investigator who should demonstrate (1) his/her leadership of the proposed clinical trial unit and (2) the existence of a functioning clinical trial team. If the application is funded, the Principal Investigator shall be responsible for the clinical research conducted and data generated at that unit, which may include more than one institution.

Awards will be made as Cooperative Agreements. Assistance via Cooperative Agreement differs from the traditional research grant in that NIAID anticipates substantial involvement during performance of the project. The nature of NIAID participation in the Pediatric ACTG is detailed in the RFA. However, the applicant Pediatric ACTG participant must define its objectives in accord with its own interests and perceptions of novel and exploitable approaches and must develop the detail of the research design following the guidance given in the RFA.

NIAID has set aside \$3.8 million (total costs) for the initial year's funding and plans to make between 5 and 8 awards from this announcement. All grants will be funded for five years.

The RFA is available from:

Dr. Maureen Myers  
Chief, Treatment Branch  
AIDS Program  
National Institute of Allergy and  
Infectious Diseases  
6003 Executive Blvd., Room 200P  
Rockville, Maryland 20892

#### SKIN DISEASES RESEARCH CENTERS (SDRC)

RFA AVAILABLE: 88-AR-1

P.T. 34; K.W. 0715185, 0715015, 0785045, 0710030

National Institute of Arthritis and Musculoskeletal and Skin Diseases

Application Receipt Date: March 25, 1988

#### BACKGROUND:

The National Institute of Arthritis and Musculoskeletal and Skin Diseases (NIAMS) announces a national competition for research core centers (P30) in skin diseases. The Skin Diseases Research Centers (SDRCs) will provide resources for a number of established, currently funded investigators, often from different disciplines, to adopt a multidisciplinary approach to a common research problem in skin diseases and to assure greater productivity than from the sum of the separate projects.

#### RESEARCH GOALS AND SCOPE

Research in skin diseases is at a stage where a number of areas are making broad advances that can be effectively fostered by research core centers. Examples of these areas include, but are not limited to:

- stratum corneum: biochemistry, structure, function
- epidermis: differentiation, keratinization, cellular constituents
- dermal-epidermal junction: structure, functions, diseases
- skin as an immunological organ
- autoimmune skin diseases
- dermis: structural components, diseases

The choice of research problem upon which the SDRC would focus is made by the principal and collaborating currently funded investigators. Overall, it is expected that the SDRCs will conduct and amplify research efforts of the Skin Diseases Program of NIAMS as recommended by the research community.

#### MECHANISM OF SUPPORT

The Research Core Center Grant (P30) is a mechanism for integrating, coordinating and fostering the interdisciplinary cooperation of a group of

established investigators conducting programs of active, high-quality research which relate to a common theme. The Research Core Center grant provides support for:

1. Core resources and facilities to be used by individually-supported project grantees in order to coordinate their activities. This support may include personnel, equipment, supplies, services, and facilities.
2. Limited funds for development and feasibility studies.
3. Program enrichment activities.

The NIAMS intends to fund two SDRCs in FY88, subject to the availability of resources, each with a yearly direct cost budget of about \$250,000-300,000. The funding period is five years.

#### APPLICATION GUIDELINES

Applicants must contact NIAMS staff for the detailed guidelines for the SDRC grant application. Letters of Intent are strongly encouraged. Applications should be submitted on Form PHS-398 (Rev. 9/86) which is available in the institution's collaborative research or business office. The phrase "RFA 88-AR-1, Skin Diseases Research Center" should be typed on line 2 of the first page of the application. Applications should be submitted to the Division of Research Grants. At the same time, informational copies should be sent to the NIAMS Review Branch which will review the applications.

The RFA label (found in the 9/86 revision of application form PHS 398) must be affixed to the bottom of the face page of the original copy of the application. Failure to use this label could result in delayed processing of your application such that it will not reach the review committee in time for review.

All PHS and NIH grant policies governing research project grants apply to applications received in response to this Request For Applications.

#### DEADLINES

Letter of Intent receipt date	February 12, 1988
Application receipt date	March 25, 1988
Ad Hoc Study Section review	June, 1988
NIAMS Advisory Council Review	September, 1988
Anticipated award date	September 30, 1988

Further information on the program, including the guidelines for the Skin Diseases Research Centers may be obtained from:

Julia B. Freeman, Ph.D.  
Director, Centers Programs  
National Institute of Arthritis and  
Musculoskeletal and Skin Diseases  
Westwood Building, Room 403  
Bethesda, Maryland 20892  
Telephone: (301) 496-7495

#### ONGOING PROGRAM ANNOUNCEMENTS

#### REVISED NATIONAL RESEARCH SERVICE AWARD (NRSA) FELLOWSHIP AND INSTITUTIONAL TRAINING GRANT ANNOUNCEMENTS

P.T. 22, 44; K.W. 0720005, 1014002

#### Alcohol, Drug Abuse, and Mental Health Administration

The Alcohol, Drug Abuse, and Mental Health Administration announces the availability of revised National Research Service Award (NRSA) fellowship and institutional training grant announcements. Both of these revised announcements reflect updated information including: areas in which research training will be supported, impact of the new tax law on taxability of stipends, application sources, and availability of funds. The revised institutional training grant announcement specifies that Grant Application Form PHS 398 must be used instead of Training Grant Application Form PHS 6025, defines full-time training as 40 hours per week, and elaborates on recruitment of minority individuals. Copies of the announcements may be obtained from:

National Clearinghouse for Alcohol and Drug Information  
P.O. Box 2345  
6000 Executive Boulevard, Suite 402

Rockville, Maryland 20852  
Telephone: (301) 468-2600

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

Grants Awards and Operations Section  
Grants Management Branch  
National Institute of Mental Health  
5600 Fishers Lane, Room 7C-05  
Rockville, Maryland 20857  
Telephone: (301) 443-4414

#### MOLECULAR PHARMACOLOGY OF ANESTHETIC ACTION

P.T. 34; K.W. 0710100, 0785015, 1002008, 1003002, 0790005

National Institute of General Medical Sciences

The National Institute of General Medical Sciences (NIGMS) announces its interest in receiving applications for the study of the molecular mechanisms of action of general and local anesthetics.

#### INTRODUCTION

The objective of this program is to encourage the submission of applications from individuals who have been trained either in basic or clinical research and who possess experience in research disciplines, such as the neurosciences, the pharmacological sciences, biophysics, biochemistry and cell biology, that are pertinent to answering questions germane to the understanding of anesthetic action.

It should be stressed that there is no special set aside sum of money for the support of research projects on the molecular mechanisms of action of anesthetics. Nevertheless, NIGMS wishes to underscore what it perceives to be a sparsity of research applications that specifically address problems relevant to our understanding of how both general and local anesthetics exert their activity at the molecular level. By announcing this program for the support of research on the molecular actions of anesthetics, NIGMS hopes to attract applications from both new and established investigators who wish to answer questions relevant to anesthesiology by using multidisciplinary approaches that to date have been applied infrequently toward the study of anesthetic action.

#### BACKGROUND INFORMATION

Since the introduction of anesthetics into clinical practice over a century ago, the fundamental mechanisms underlying the actions of therapeutic agents capable of ablating pain and of rendering a patient temporarily unconscious have eluded investigators. In part, the lack of progress in elucidating the dynamics of anesthetic action has been due to the formidable nature of the scientific problem, as it has been difficult to assign a direct correlation between molecular events that are influenced by anesthetics and the physiological effects that subsequently occur.

Recent developments in the biological sciences now offer the opportunity to address problems fundamental to our understanding of anesthetic action in a manner that was extremely difficult even a decade ago. Advances in recombinant DNA technology and molecular biology, in biophysics and structural biology, in the neurosciences, and in pharmacology and biochemistry now provide an opportunity for investigators in varied fields of research to channel their expertise and knowledge toward elucidating the actions of compounds that exhibit anesthetic properties. Coupled to what is perceived as an increasing number of investigators who are interested in basic research problems related to anesthetic action, the ability to incorporate recent methodological and conceptual developments into anesthesia research offers the possibility of gaining new insights about anesthetic action that were hardly possible in the recent past.

#### RESEARCH GOALS AND SCOPE

Presumably, a wide variety of approaches and model systems could be employed to study anesthetic action at the molecular level. These model systems would include but not be limited to artificial membranes; ion channels, receptors and other macromolecules in reconstituted membranes; electrophysiological

measurements and biochemical determinations in isolated whole membrane systems; studies of whole cell responses to anesthetics; and actions of anesthetics on integrated systems such as brain slices and spinal cord. Additionally, experimental designs utilizing recombinant DNA and molecular biological techniques, immunological approaches and biophysical procedures whose aims are to elucidate structural features of anesthetic interactions with components of biological systems would also be of interest.

Hence, there are no limiting features to the types of approaches that may be proposed to answer questions relevant to anesthetic action, so long as those approaches emphasize clarification of molecular aspects of anesthetic pharmacodynamics. Ideally, the ultimate goal of this research would be to develop hypotheses that might explain the relationship between molecular actions and physiological effects of general and local anesthetics.

#### MECHANISM OF SUPPORT

Applications may be submitted for support through the traditional research project grant (R01) mechanism, the First Independent Research Support and Transition (FIRST) award (R29) mechanism, the program project grant (P01) mechanism and the research center grant (P50) mechanism. Applications will be accepted in accordance with the dates for new applications on an indefinite basis: February 1, June 1, and October 1. Individuals who are considering submission of program project or research center grant applications should contact the appropriate Institute official to explore the suitability of these large grant mechanisms for the support of their research program. Initial inquiries may be directed to the program representative listed below.

Research project and FIRST award applications submitted in response to this program announcement will be reviewed in the usual manner by initial review groups in the Division of Research Grants. Both program project and research center applications will be reviewed by review groups convened by the Institute to which the application is assigned for potential funding. Secondary review of all applications submitted in response to this program announcement will be conducted by an appropriate National Advisory Council or Board.

The award of grants pursuant to this program announcement is contingent upon receipt of applications of high scientific merit and upon the availability of appropriated funds.

#### METHOD OF APPLYING

All applications in response to this program announcement must be submitted on Application Form PHS 398 (revised 9/86). Forms are available at most institutional business offices or from offices of sponsored research. These forms may also be obtained from:

Office of Grant Inquiries  
Division of Research Grants, NIH  
Westwood Building, Room 448  
Bethesda, Maryland 20892

Applicants should make certain that they specify that their application is being submitted in response to this program announcement by including pertinent information on the face page of Form PHS 398 (item 2).

#### INQUIRIES

Any questions concerning this program announcement should be addressed to:

Dr. Paul A. Velletri  
Pharmacological Sciences Program Branch  
Westwood Building, Room 919  
National Institute of General Medical Sciences, NIH  
Bethesda, Maryland 20892  
Telephone: (301) 496-7707

#### NEUROLOGICAL AND NEUROMUSCULAR ASPECTS OF SWALLOWING

P.T. 34; K.W. 0715140, 0785110, 0785120, 0411005

National Institute of Neurological and Communicative Disorders and Stroke

The Division of Communicative and Neurosensory Disorders of the National Institute of Neurological and Communicative Disorders and Stroke (NINCDS) encourages the submission of individual research grant and program project grant applications for the support of studies of the neurological and

neuromuscular aspects of dysphagia associated with neurological disorders.

## BACKGROUND

The neurological control of the swallowing process and the factors influencing it have yet to be described in detail. Dysphagia, or difficulty in swallowing is symptomatic of a variety of diseases and structural abnormalities. Dysphagia is often associated with neurologic disorders in which there is interference with the oral and pharyngeal phases of swallowing. These neurologic disorders include stroke, multiple sclerosis, Parkinson's disease, amyotrophic lateral sclerosis, cerebrovascular dementia, and head trauma. The prevalence of dysphagia at specific points following the onset of these conditions remains uncertain and there is a paucity of information about the neuropathology of dysphagia, its diagnosis, and the effectiveness of treatment.

The purpose of this announcement is to encourage applications for the support of studies of the neurologic control of swallowing and of dysphagia in neurological disorders, with reference to pathophysiology, neuropathology, diagnosis, treatment, and neuroepidemiologic information.

## RESEARCH GOALS AND SCOPE

The NINCDS encourages both basic and clinical investigations in oral, pharyngeal, and laryngeal components of swallowing disorders in patients with neurological disorders. Investigators are encouraged to develop single investigator or collaborative studies in the following areas, which are not exclusive:

- o Basic studies of the neurological control of the swallowing process and its components.
- o The effects of CNS and neuromuscular damage on swallowing.
- o The objective assessment of effectiveness of specific treatments (for example, prosthetic devices, medication, surgery, compensatory strategies, and training).
- o Studies of the incidence, prevalence and risk factors contributing to dysphagia in particular neurologically disordered segments of the population.
- o Development and validation of new or existing instrumentation or imaging techniques for diagnosis and assessment of treatment of dysphagia.

## MECHANISM OF SUPPORT

The support mechanism for grants in this area will be the individual research grant (R01), the FIRST award (R29), and the program project grant (P01). Under these mechanisms, the principal investigator and any participating investigators will plan, direct, and perform the research. (Applicants for program project grants should request, from the address below, a copy of the NINCDS GUIDELINES FOR THE PREPARATION OF A PROGRAM PROJECT GRANT APPLICATION.)

## APPLICATION AND REVIEW PROCEDURES

Applications must be prepared on form PHS 398 (Rev. 9/86) using the instructions included in the application kit. These kits are available from the address cited below or from the Division of Research Grants, National Institutes of Health.

Receipt dates for new research project grant and FIRST award applications and for program project grant applications are February 1, June 1, and October 1.

On page 1 of form PHS 398, check "yes" in item 2 and type: "NINCDS Announcement: Neurological and Neuromuscular Aspects of Swallowing." For research project grant and FIRST award applications, use the mailing label provided in the application kit and mail the signed original and six exact copies of it to the Division of Research Grants (DRG). For program project grant applications, send the original and four copies to DRG; send two copies to the NINCDS at the address cited below.

Research project grant and FIRST award applications will be reviewed for scientific and technical merit by an appropriate study section in the Division of Research Grants. Program project grant applications will be reviewed by an appropriate review group in the NINCDS. Secondary review will be by the National Advisory Neurological and Communicative Disorders and Stroke Council. Applications judged to be within the purview of other Institutes of NIH will be assigned accordingly, and, for the program project grant application, reviewed according to that Institute's prevailing practice. For further information, potential applicants are encouraged to call or write to:

Judith A. Cooper, Ph.D

Division of Communicative and Neurosensory Disorders  
National Institute of Neurological and Communicative Disorders and Stroke  
Federal Building, Room 1C-06  
7550 Wisconsin Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-5061

This program is described in the Catalog of Federal Domestic Assistance No. 13.854, Biological Basis Research in the Neurosciences and Communicative Sciences. Awards will be made under the authority of the Public Health Service Act, Section 301 (42 USC241) and administered under PHS grant policies and Federal Regulations 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to review by a Health Systems Agency.

#### PROGRESSIVE HEARING IMPAIRMENT

P.T. 34; K.W. 0715050, 0765035, 0745020, 0745055

National Institute of Neurological and Communicative Disorders and Stroke

The Division of Communicative and Neurosensory Disorders (DCND) of the National Institute of Neurological and Communicative Disorders and Stroke (NINCDS) invites applications for support of research to increase our knowledge and understanding of progressive hearing impairment.

Approaches considered to be appropriate for support by NINCDS may include studies directed towards:

- o pathophysiological bases of progressive hearing impairment including the interaction of time, severity and noise exposure;
- o related changes in auditory system neurotransmitters;
- o animal model studies of disordered cochlear blood flow related to such factors as exposure to ototoxic agents, and to noise;
- o methods of prevention, detection, diagnosis, treatment and remediation.

Applicants are encouraged to address one or more of the areas presented above. In addition, the NINCDS would be receptive to research grant applications that offer other innovative approaches to the study of progressive hearing impairment.

#### APPLICATION PROCEDURE

Applications should be on research grant application form PHS 398 (Rev. 9/86), available in the business or grants and contracts offices of most academic and research institutions, or from the Division of Research Grants, NIH. Applications must be received on or before the regular receipt dates of February 1, June 1, or October 1. Send the original and six (6) copies of the application to:

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

Type the statement "PROGRESSIVE HEARING IMPAIRMENT PROGRAM ANNOUNCEMENT" in item 2 of the coverage (page 1).

#### REVIEW PROCEDURES

The initial review of applications for scientific and technical merit will be by an appropriate study section of the Division of Research Grants; a second review will be by the National Advisory Neurological and Communicative Disorders and Stroke Council.

STAFF CONTACT - Inquiries may be directed to:

Ralph F. Naunton, M.D., F.A.C.S.  
Division of Communicative and Neurosensory Disorders  
National Institute of Neurological and Communicative Disorders and Stroke  
Federal Building, Room 1C-11, 7550 Wisconsin Avenue  
Bethesda, Maryland 20892  
Telephone: (301) 496-1804

This program is described in the Catalog of Federal Domestic Assistance, number 13.854, Communicative Disorders Research. Grants will be awarded 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 grant 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.