# NIH Guide for Grants and Contracts

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

Vol. 13, No. 6, April 27, 1984

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The NIH Guide is published at irregular intervals to announce scientific initiatives and to provide policy and administrative information to individuals and organizations who need to be kept informed of opportunities, requirements, and changes in grants and contracts activities administered by the National Institutes of Health.

Two types of supplements are published by the respective awarding units. Those printed on yellow paper concern contracts; solicitations of sources and announcement of availability of requests for proposals. Those printed on blue paper concern invitations for grant applications in well-defined scientific areas to accomplish specific program purposes.

#### Have You Moved?

If you present address differs from that shown on the address label, please send your new address to: Grants and Contract Guide Distribution Center, National Institutes of Health, Room B3BN10, Building 31, Bethesda, Maryland 20205, and attach your address label to your letter. Prompt notice of your change of address will prevent your name from being removed from our mailing list.

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## ERRATUM

# NOTICE

# INTERNATIONAL NUCLEIC ACID SEQUENCE COMPENDIUM AVAILABLE

P.T. 32; K.W. 1200920, 1201190, 1200490, 1004008

A line was omitted in the first paragraph of the above cited Notice published in the NIH Guide for Grants and Contracts Vol. 13, No. 4, March 30, 1984. The text of the corrected paragraph should read as follows:

Nucleotide Sequences 1984, the first international compendium of nucleic acid sequences, will be published as a supplement to the May 1984 issue of Nucleic Acids Research. The compendium, which represents the databases of GenBank(tm), the Genetic Sequence Data Bank, and the European Molecular Biology Laboratory (EMBL) Nucleotide Sequence Data Library, contains information on over 4000 nucleic acid sequences, representing nearly 3 million base pairs. This includes virtually all sequences reported between 1967 and late 1983.

# SMALL BUSINESS INNOVATION RESEARCH (SBIR) PROGRAM

P.T. 34, 14; K.W. 0701029, 0404000, 0404001, 0404003, 0414000, 0502002, 0502011, 1200080

NATIONAL INSTITUTES OF HEALTH

# ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION

## I. FUTURE RECEIPT DATES FOR SBIR APPLICATIONS

Effective August 1984, there will be three dates a year for the receipt of SBIR grant applications. These dates will be August 15, December 15 and April 15. Both Phase I and Phase II applications will be accepted on any of these dates, provided that the Phase II application is submitted by a small business that has completed a Federally funded Phase I.

## II. NO-COST TIME EXTENSIONS

No-cost time extensions to complete the Phase I effort are permissible. However, no application may be submitted for Phase II support until the Phase I project is completed. Requests for such extensions must be made in writing to and approved by the Grants Management Officer of the awarding component. Requests must state the reason(s) for the extension and be submitted before the expiration of the Phase I budget period.

### III. UNOBLIGATED GRANT FUNDS AT CONCLUSION OF PHASE I

Unobligated (unspent) funds remaining at the end of a Phase I budget period of an NIH SBIR grant will not be carried over to or used as an offset (deduction) against a Phase II grant. ADAMHA will generally follow the same policy with respect to unobligated balances.

# ADDENDUM TO NIH GUIDE FOR CONTRACTS AND CONTRACTS

# VOL. 13, NO. 4, MARCH 30, 1984

## **ANNOUNCEMENT**

## STUDIES ON OBESITY

P.T. 34; K.W. 1200930, 0202022, 1200460, 1002019, 1200890, 0404000

NATIONAL INSTITUTE OF ARTHRITIS, DIABETES, AND DIGESTIVE
AND KIDNEY DISEASES
NATIONAL CANCER INSTITUTE
NATIONAL HEART, LUNG, AND BLOOD INSTITUTE
NATIONAL INSTITUTE ON AGING
NATIONAL INSTITUTE OF CHILD HEALTH AND HUMAN DEVELOPMENT
NATIONAL INSTITUTE OF NEUROLOGICAL AND COMMUNICATIVE DISORDERS
AND STROKE
NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM
NATIONAL INSTITUTE ON DRUG ABUSE
NATIONAL INSTITUTE OF MENTAL HEALTH

Please add to the list of institutes and individuals to be contacted for further information the following:

# NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM

Tina Vanderveen, Ph.D.
Chief, Clinical and Psychosocial Branch
National Institute on Alcohol
Abuse and Alcoholism
Parklawn Building - Room 14C-17
5600 Fishers Lane
Rockville, Md. 20857 (301) 443-4223

# NATIONAL INSTITUTE ON DRUG ABUSE

Theodore Pinkert, M.D., J.D.
Clinical and Behavioral Pharmacology Branch
Clinical Research Division
National Institute on Drug Abuse
Parklawn Building - Room 10A16
5600 Fishers Lane
Rockville, Md. 20857 (301) 443-1263

# HEALTH SCIENTIST ADMINISTRATOR TRAINING THROUGH THE GRANTS ASSOCIATE PROGRAM

P.T. 44; K.W. 1200180, 0901026

## **PUBLIC HEALTH SERVICE**

Scientists in health research interested in an administrative career with Federal programs supporting research, training, and services in health-related fields may wish to consider the Grants Associates Program of the U.S. Public Health Service (PHS). The program is governed by the Grants Associates Board and is administered by the Office of Extramural Research and Training (OERT), Office of the Director (OD), National Institutes of Health (NIH).

The program prepares each Grants Associate for a responsible position in health science administration in the Federal government. For a 12-month period, the Grants Associate participates in an individually structured training experience including on-the-job assignments, courses, and seminars. The program provides opportunities for participation in the development and administration of policies in Federal support of health related research, and in the fundamentals of effective management. The program also attempts to develop a sensitivity to the consequences of program decisions on other Federal health programs, research institutions, and national health needs.

Admission to the program is very highly competitive for the few positions available per year. Motivation for a career in science administration, good interpersonal skills, and evidence of executive potential are important. If you are a U.S. citizen and hold a doctorate or equivalent in a discipline related to the biomedical or behavioral sciences, have significant independent research experience beyond the doctorate (but need not have administrative experience) and are attracted to health science administration as a profession, you should inquire about the Grants Associates Program.

Grants Associates must be appointed from a U.S. Office of Personnel Management registered at grade levels General Schedule (GS) 12 (\$30,402), GS-13 (\$36,152), or GS-14 (\$42,722).

The NIH does not discriminate in employment on grounds of race, color, sex, national origin, age, religion or handicap.

For further information write to:

Director
Grants Associates Program
Office of Extramural Research and Training
Building 31 - Room 1B-55Z
National Institutes of Health
Bethesda, Maryland 20205

## **RELEASE OF SUMMARY STATEMENTS**

P.T. 22, 34, 44; K.W. 1014002

ALCOHOL, DRUG ABUSE, AND MENTAL HEALTH ADMINISTRATION NATIONAL INSTITUTE ON ALCOHOL ABUSE AND ALCOHOLISM NATIONAL INSTITUTE OF MENTAL HEALTH

The Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) has established procedures whereby each awarding Institute will send research and research training grant, fellowship, and cooperative agreement application summary statements, with priority scores, to the principal investigators (PIs) and program directors (PDs) promptly following Initial Review Group (IRG) meetings and before the subsequent National Advisory Council meetings.

PIs and PDs have been receiving summary statements through two procedures. Summary statements have been available through Privacy Act requests, under which they have been provided without priority scores when requested prior to Council meetings. They have also been sent automatically following the Council meetings, at which time the priority scores were displayed.

The new procedures for release of summary statements with priority scores will be effective with applications assigned to the September 1984 round of National Advisory Council meetings. Awarding components will thereupon discontinue the routine practice of sending IRG summary statements to PIs and PDs after Council meetings. Additional communications regarding Council action will be sent only when necessary (e.g., change in IRG recommendation).

Applicant investigators should address all inquiries regarding review to the Executive Secretary whose name appears on the summary statement. Inquiries on funding prospects and resubmission procedures should be directed to appropriate program officials.

# NIH/FDA REGIONAL WORKSHOPS-PROTECTION OF HUMAN SUBJECTS

## P.T. 42; K.W. 0701028

# NATIONAL INSTITUTES OF HEALTH FOOD AND DRUG ADMINISTRATION

The National Institutes of Health (NIH) and the Food and Drug Administration (FDA) are sponsoring a series of workshops on responsibilities of researchers, institutional review boards, and institutional officials for the protection of human subjects in biomedical and behavioral research. The workshops are open to everyone with an interest in research. The meetings should be of special interest to those persons currently serving or about to begin serving as a member of an Institutional Review Board (IRB).

For specific program and registration information, contact one of the individuals listed below or write to:

> Roberta H. Garfinkle Office for Protection from Research Risks National Institutes of Health Building 31 - Room 4B09 9000 Rockville Pike Bethesda, Maryland 20205

> > Telephone: (215)898-7293

## NIH/FDA REGIONAL WORKSHOPS FY 1984

DATE	LOCATION	CONTACT		
April 9	The Hyatt Regency New Orleans 500 Poydras Plaza New Orleans, Louisiana 70140 Telephone: (504) 561-1234	Dr. William Gibson Chairman, IRB Office for Research LSU School of Dentistry 1100 Florida Avenue New Orleams, Louisiana 70119		
		Telephone: (504) 948-8526		
April 25	Sheraton Inn 36th and Chestnut Streets Philadelphia, Pennsylvania 19104 Telephone: (215) 387-8000	Ms. Ruth Clark Research Administrator University of Pennsylvania 3451 Walnut Street Philadelphia, Pennsylvania 19174		

April 27

Mariott Inn

4277 W. 150th Street & I-71

Cleveland, Ohio 44135

Telephone: (216) 252-5333

Dr. Dale Cowan Clinical Professor of

Epidemiology and Community

Health

Department of Oncology Marymount Hospital 12300 McCracken Road Garfield Heights, Ohio 44125

Telephone: (216) 581-0500

May I

Dana Farber Cancer Institute

44 Binney Street

Boston, Massachusetts 02115

Mrs. Joan Rachlin **Executive Director** 

Public Responsibility in Medicine

and Research (PRIM&R)

132 Boylston Street

Boston, Massachusetts 02116 Telephone: (617) 423-4112

or 423-1099

May 11

Cherry Creek Inn Conference

Center

600 South Colorado Blvd. Denver, Colorado 80222

Telephone: (303) 757-3341

Ms. Beverly Childress

Director, Office for Continuing

Medical Education

University of Colorado Health

Sciences Center

4200 E. Ninth Avenue, C-295 Denver, Colorado 80262

Telephone: (303) 623-2069

May 21-22

Sheraton-Midway Hotel

400 N. Hamline

St. Paul, Minnesota 55104

Telephone: (612) 642-1234

Dr. Jane Boyajian

President

Work Ethics

2023 Milwaukee Avenue

Minneapolis, Minnesota 55404

Telephone: (612) 623-2069

or

Ms. Elaine S. Levine

Coordinator, IRB

St. Paul Ramsey Medical Center

640 Jackson

St. Paul, Minnesota 55101

Telephone: (612) 221-2757

Ms. Phyllis S. Hall

Human Subjects Coordinator

Stanford University

Encina Hall

Stanford, California 94305

Telephone: (416) 497-3638

September (First or Second Week)

# AVAILABILITY OF REQUEST FOR APPLICATIONS: RFA

## 84-CA-11

## OBESITY AND CANCER RISK IN WOMEN

P.T. 34; K.W. 1200930, 1002014, 0411005, 1200790, 0701013, 0202022

## NATIONAL CANCER INSTITUTE

Application Receipt Date: July 27, 1984

#### I. BACKGROUND

Obesity has been consistently associated with risk of endometrial cancer. Epidemiologic studies of breast cancer suggest that obesity may be associated with breast cancers, especially those diagnosed during post-menopausal years. Some other neoplasms have been related to obesity in women, such as renal carcinoma. These studies have generally used simple measures of fatness, such as weight at various ages, or height/weight ratios which may not be accurate indices of body fat for short women. Fat distribution varies and recent reports indicate that risk of diabetes is increased in women with a "masculine" fat distribution. Cancer epidemiologic studies have not considered body fat distribution in relation to risk of specific cancers.

It is known that androstenedione, a steroid hormone of adrenal origin, is converted to estrogen in the adipose tissue of post-menopausal women and that the amount of estrogen produced in this way is higher in obese women than in thin women. It has been postulated that this extra-ovarian estrogen production explains part of the association between obesity and hormone-dependent cancers of women. Some epidemiologic studies have assessed androstenedione levels as well as blood and/or urine levels of estrogens, prolactin and progesterone in relation to breast cancer risk. The possible contribution of other endocrine substances or of enzymes has received much less attention and none of these has been studied specifically with a view to understanding the relationship between obesity and cancer risk.

In summary, although obesity may increase the risk of certain cancers in women, the association has not been well described and is only partially understood.

This program is described in the Catalog of Federal Domestic Assistance No. 13.393, Cancer Cause and Prevention Research. Awards are under authorization of the Public Health Service Act, Section 301(c) and Section 402 (Public Law 78-410, as amended; 42 USC 241; 42 USC 282) and administered under PHS grant policies and Federal Regulations, most specifically at 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to Health Systems Agency Review.

#### II. GOALS AND SCOPE

The objective of this RFA is to stimulate research to elucidate the nature of the association between obesity and cancer risk in women, including the development of new research methods which may enhance the understanding of pertinent metabolic processes or improve the measurement of informative parameters. Research questions of interest include, but are not limited to, the following examples: (1) Is the association causal? If not, what other factors might explain the observed associations between obesity and increased risk of certain cancers? (2) Is the association with obesity related to certain forms of body fat distribution? (3) Is the association explained by the conversion of adrenal hormones to estrogen, or are more complex metabolic, hormonal or enzymatic processes involved? (4) How do diet and physical activity relate to obesity and cancer risk? (5) What parameters are informative for studies of obesity and cancer risk and how can their measurement be improved? (6) Is the mobilization of fat associated with cancer risk (as by the release of substances stored in adipose cells) either in association with lactation, weight loss, or change in hormonal status? (7) How do individuals differ in the conversion of dietary constituents to adipose tissue and how do these differences relate to cancer risk?

Responses to this RFA may be analytic epidemiologic studies, biochemical epidemiologic investigations, experimental studies in humans, or pilot/feasibility studies.

## III. MECHANISM OF SUPPORT

This RFA will use the traditional National Institutes of Health (NIH) research project grant. Responsibility for the planning, direction and execution of the proposed research will be solely that of the applicant. The total project period for applications submitted in response to the present RFA should not exceed five years. The intent is to fund about five individual research project grants, with total costs amounting to approximately \$0.5 million for the first year. This funding level is dependent on the receipt of a sufficient number of applications of high scientific merit. 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. Renewal applications will compete with all other unsolicited applications received by the NCI. NIH policies governing regular research project grants, including cost sharing, apply to applications received in response to this request.

## IV. COPIES OF THE RFA MAY BE OBTAINED FROM:

Dr. Genrose D. Copley
Extramural Programs Branch
Epidemiology and Biostatistics Program
Division of Cancer Etiology
National Cancer Institute
Landow Building - Room 8C-16
Bethesda, Maryland 20205

Telephone: (301) 496-9600

## REQUEST FOR AVAILABILITY FOR APPLICATIONS: RFA

# 84-AI-07

## PROGRAM PROJECTS ON THE BIOLOGY OF THE IMMUNE SYSTEM

P.T. 34; K.W. 1002004, 1002008, 1002023, 1200010, 1200060, 1200610, 1200620, 1200630, 1200660, 1200820

## NATIONAL INSTITUTE OF ALLERGY AND INFECTIOUS DISEASES

Application Receipt Date: August 1, 1984

## I. BACKGROUND INFORMATION

The Immunobiology and Immunochemistry Branch of the Immunology, Allergic and Immunologic Diseases Program of the National Institute of Allergy and Infectious Diseases (NIAID), supports fundamental studies on the structure and function of the immune system to gain an understanding of the immune response mechanisms at their basic cellular and molecular levels as they function in health and disease. Program Projects on the Biology of the Immune System are intended to expand the scope of, and eventually replace, the current Program Projects in Lymphocyte Biology which utilize an integrated multidisciplinary approach for basic biologic studies of immunologically-functional lymphocyte populations. Seven such program projects are currently funded although support for one is scheduled to conclude in 1985. This request for applications (RFA) is intended to encourage the development of applications from collaborating investigators and to coordinate the submission and review of new and renewal program project applications.

#### II. RESEARCH GOALS AND SCOPE

The goals of these Program Projects are the attainment of a complete understanding of the structure and function of the immune system and its products, its interaction with other body systems, and full knowledge of the genetic and other factors which regulate its development and function. An ultimate practical application of this information is the use of selected cloned cells of the system or their products for the clinical care or reconstitution of immunodeficient individuals, to alleviate allergic states, to provide resistance to life-threatening infections and to correct aberrant or defective immunoregulatory mechanisms.

The scope of these program projects includes studies of every facet of the immune response, ranging from the initial step of antigen recognition to the final elaboration of immunologically distinctive products of specific immunocytes. Research currently supported by this mechanism was designed to greatly expand knowledge of the morphologic and functional heterogeneity of lymphocyte populations and to develop the capability for identification and selection of lymphocyte subpopulations with specific immune reactivity or antigenic



composition, for hybridization of such populations and for selective production of specific, biologically-active, lymphocyte products. Continuation of such studies is anticipated and appropriate, as are similar studies of macrophages, other accessory and effector cells, and activation, differentiation and regulation of the immune system. Also relevant are investigations on interactions and influences of other body systems with the immune system.

## III. 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 a common theme; the projects should demonstrate an essential element of unity and interdependence.

## IV. STAFF CONTACT

A more detailed RFA may be obtained from:

John F. Finerty, Ph.D.
Immunobiology and Immunochemistry Branch, IAIDP
National Institute of Allergy and Infectious Diseases
Westwood Building - Room 757
National Institutes of Health
Bethesda, Maryland 20205

Telephone: (301) 496-7551

Prospective applicants are encouraged to submit a one-page letter of intent that includes a brief synopsis of the proposed research and identification of any other participating institutions. The Institute requests such letters by June 1, 1984, for the purpose of providing an indication of the number and scope of applications to be received. A letter of intent is not binding. It will not enter into the review of any application subsequently submitted and is not a necessary requirement for application. Letters of intent and inquiries should be directed to Dr. Finerty at the address shown above.

# AVAILABILITY OF REQUEST FOR APPLICATIONS: RFA

84-HL-14P

## MINORITY SUMMER PROGRAM IN PULMONARY RESEARCH

P.T. 44; K.W. 1200170, 1201210

**DIVISION OF LUNG DISEASES** 

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: August 15, 1984

The Division of Lung Diseases, National Heart, Lung, and Blood Institute (NHLBI) announces the availability of a request for applications (RFA) for a summer training program in pulmonary research. The objective of this program is to provide opportunities for minority school faculty members and graduate students to gain experience and exposure to ongoing pulmonary research projects in established pulmonary training centers.

Training grants will be awarded to pulmonary training centers for a 5 year period. Trainee participation in a program will be for one or more summers, and total support for any individual may not exceed 9 months. Trainees will be selected by a joint panel which will be composed of members from the pulmonary training center and from the minority school(s).

A review group convened by Division of Extramural Affairs (DEA) NHLBI, will review all applications. This will be followed by a second level of review by the National Heart, Lung, and Blood Advisory Council in February 1985. The earliest start date is May 1985.

Inquiries regarding this announcement may be directed to the program administrator:

Research Training and Development Officer Prevention, Education and Manpower Branch Division of Lung Diseases National Heart, Lung, and Blood Institute National Institutes of Health Westwood Building - Room 6A12 Bethesda, Maryland 20205

Telephone: (301) 496-7668

This program is described in the Catalog of Federal Domestic Assistance, No. 13.838, Lung Disease Research. Awards will be made under the authority of the Public Health Service Act, Section 472,42 USC 2891-1, and administered under the PHS grant policy and Federal Regulations 42 CFR Part 66. This program is not subject to Health Systems Agency Review.

# AVAILABILITY OF REQUEST FOR APPLICATIONS: RFA

84-NS-01

MULTIDISCIPLINARY RESEARCH CENTER(S) FOR THE STUDY OF THE NEURO-LOGICAL BASIS OF DISORDERS OF LANGUAGE, BEHAVIOR AND LEARNING DURING INFANCY AND EARLY CHILDHOOD

P.T. 04, 34; K.W. 1200220, 1200180, 0404004, 0414000, 1200380, 1201010, 0701038

NATIONAL INSTITUTE OF NEUROLOGICAL AND COMMUNICATIVE DISORDERS AND STROKE - IN COSPONSORSHIP WITH THE NATIONAL INSTITUTE OF MENTAL HEALTH

Application Receipt Date: October 1, 1984

## I. PROGRAM OBJECTIVES AND SCOPE

The NINCDS, in cosponsorship with the NIMH, intends to establish a multidisciplinary center(s) to conduct investigations of both a clinical and basic nature aimed at determining patterns of brain development and function in language, behavior, and learning disorders during infancy and early childhood. Investigators are encouraged to assemble multidisciplinary investigative expertise in appropriate fields to conduct such research. Infants and children may manifest specific problems in language, learning and behavior or in association with a serious disease or syndrome. Differences in brain development across the spectrum of normal development, specific disorders of language, behavior and learning and in serious diseases and syndromes need to be examined.

Advancing technologies in neuroimaging present new investigative opportunities. Neuroanatomic studies utilizing NMR are desirable to relate to the results of behavioral investigations in various disordered groups for examining brainbehavior relationships. Neurophysiological studies employing such techniques as positron emission tomography during rest and during specific task-oriented activity might be aimed at understanding brain-behavior relationships in those cases with serious diseases and syndromes. Adults with persistent residual developmental disorders may also be appropriate subjects for positron emission tomography studies during syndrome-specific task challenges. When appropriate, histopathological studies of brains made available through autopsy (including neurochemical studies of fresh brain tissue) would provide correlative data as well as a strong basic research component leading to a better understanding of the relationships between patho-physiology and language, behavior, and learning disorders. When effective treatment is being sought for some serious diseases and syndromes, neuropharmacologic trials may be justified. For example, neurochemical effects on brain metabolism and language functioning may be studied to determine how language learning is changed by neuropharmacologic modification of brain Experimental learning studies, studies, as another example, could examine the differences in language, learning, and behavior occurring in different patterns of brain development and in different brain dysfunction disorders. Similar studies of attention, perception, memory, and communicative and motor skills could also be addressed.

When children with serious neurological or neuropsychiatric diseases and syndromes undergo diagnostic procedures for their own medical benefit and such children manifest well-defined learning, behavior and language disorders in the context of serious diseases or syndromes, a rare opportunity presents for intensive study of brain mechanisms not permissible in children with less serious handicaps. Studies of language, behavior and learning in children with serious diseases and syndromes would be supported as one end of the investigative spectrum.

### II. ELIGIBILITY

For-profit and non-profit organizations or institutions in the U.S. are eligible to apply. Applications will be reviewed for scientific and technical merit by an NINCDS special review committee and for program relevance by the National Advisory Neurological and Communicative Disorders and Stroke Council, and in cases of joint support with NIMH, by the National Advisory Mental Health Council.

## III. MECHANISM OF SUPPORT

Awards will be made as research grants. The total project period for applications submitted in response to the present RFA should not exceed five years.

## IV. ANTICIPATION OF NUMBER OF AWARDS

The NINCDS, in cosponsorship with the NIMH, intends to fund up to two research centers for an initial period of up to five years. The NINCDS has a maximum direct cost guideline of \$600,000 per year on any award action.

## V. APPLICATION RECEIPT DATE

Applications prepared on Form PHS 398 must be received in the Division of Research Grants (DRG) NIH, on or before October 1, 1984.

## VI. REQUEST FOR COPIES OF RFA AND INFORMATION

To obtain a copy of the RFA and/or for further information please contact:

Joseph S. Drage, M.D.
Chief, Developmental Neurology Branch
Convulsive, Developmental, and Neuromuscular
Disorders Program
National Institute of Neurological and
Communicative Disorders and Stroke
Federal Building - Room 816
Bethesda, Maryland 20205

Telephone: (301) 496-6701

# RESEARCH IN SICKLE CELL DISEASE: PAIN MANAGEMENT IN SICKLE CELL DISEASE

P.T. 34; K.W. 1200240, 1200080, 0701036, 0414003, 1200120, 1200270

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: July 1, November 1, March 1

The National Heart, Lung, and Blood Institute (NHLBI), Division of Blood Diseases and Resources, supports programs designed to reduce the mortality and morbidity of sickle cell disease by improving diagnostic and treatment methodologies and providing resources for biomedical research, both at the basic and clinical levels.

The purpose of this program announcement is to encourage well-conceived research efforts to investigate alternative approaches to the treatment and/or prevention of painful episodes. These painful episodes occur throughout the patient's life and constitute the major reason for seeking medical care. Presently, there is no specific treatment for painful episodes, and management is limited to symptomatic and supportive measures which are frequently unsatisfactory and frustrating to both the patient experiencing the pain and to the physician who can only help through increasing analgesic administration with attendant concern about increasing the risk of drug dependence.

To date, there has been little information related to effective pain management in this disease reflecting perhaps the problems surrounding effective pain management in general. Similarly, techniques of drug administration and dose delivery have not changed significantly over the past several decades, even though investigators have repeatedly addressed the inadequacies inherent in conventional analgesic regimens. Therefore, we wish to stimulate research studies to evaluate more effective management of pain in this disease.

The NHLBI encourages interested investigators to submit research grant applications to investigate the effectiveness of alternative behavioral modalities for pain management and/or document the pharmacokinetics and bioavailability of analgesics in sickle cell disease patients.

Potential studies might involve documentation of the ability of various self-regulatory techniques to: (a) reduce the frequency, severity, and duration of painful episodes; and

This program is described in the Catalog of Federal Domestic Assistance No. 13.839, Blood Diseases and Resources. Grants will be awarded under the authority of the Public Health Service Act, Section 301 (42USC 241) and administered under PHS grant policies and Federal Regulations, most specifically at 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to Health Systems Agency review.

(b) change pain-related behavior, i.e., the frequency of emergency room visits, the frequency and length of hospital admissions, absenteeism, and the use of analgesics. Specifically, evaluation of the use of relaxation techniques, self-hypnosis, guided imagery, cognitive behavior modification, and other self-regulatory techniques are encouraged as treatments or adjuncts to pharmacological agents of pain management. It is anticipated that proposals will reflect interdisciplinary research teams involving algologists or behavioral specialists, as well as the primary care physicians providing care and support for the patients.

Support for this research is available through investigator initiated research grants. Application receipt dates are July I, November I, and March I. Applications should be submitted on form PHS 398; these forms are available in the business or grants and contracts office at most academic and research institutions or from the Division of Research Grants (DRG) NIH. In order to identify the application as a response to this announcement, check "yes" on Item 2 of the application face page with the title PAIN MANAGEMENT IN SICKLE CELL DISEASE. The original and six copies should be submitted to:

Division of Research Grants National Institutes of Health Westwood Building - Room 240 Bethesda, Maryland 20205

Other PHS components share interest in studies of pain management. Applications received in response to this Program Announcement will be assigned by the DRG. Assignment for program responsibility and funding will be according to established referral guidelines; assignment for review will be to study sections according to the NIH process for regular research grant applications. Funding for this activity is in competition with all regular competing grant applications.

Requests for additional information or questions regarding this program should be directed to

Marilyn H. Gaston, M.D.
Sickle Cell Disease Branch
Division of Blood Diseases and Resources
National Heart, Lung, and Blood Institute
Federal Building - Room 504
7550 Wisconsin Avenue
Bethesda, Maryland 20205

Telephone: (301) 496-6931

or

Dr. Katrina Johnson
Behavioral Medicine Branch
Division of Heart and Vascular Diseases
National Heart, Lung, and Blood Institute
Federal Building - Room 604
7550 Wisconsin Avenue
Bethesda, Maryland 20205

Telephone: (301)-496-9380

# TRANSFUSION MEDICINE ACADEMIC AWARD

P.T. 10, 34, 44; K.W. 1200170, 1200180, 1200200, 0502024

DIVISION OF BLOOD DISEASES AND RESOURCES

NATIONAL HEART, LUNG, AND BLOOD INSTITUTE

Application Receipt Date: October 15, 1984

The Transfusion Medicine Academic Award (TMAA) was initiated in January 1983, to (1) encourage the development of curricula in transfusion medicine, and (2) allow the awardee to broaden his or her expertise in transfusion medicine so as to contribute more effectively to the teaching, research, and clinical needs of this discipline. The term "transfusion medicine" is used to define a multidisciplinary area concerned with the proper use or removal of blood and its components in the treatment or prevention of disease states (other than in renal hemodialysis). Each school of medicine or osteopathy in the United States or its possessions and territories is eligible for one 5-year TMAA (nonrenewable) which provides salary, fringe benefits, supporting costs, and indirect costs to well-trained investigator-faculty members who are skilled organizers and negotiators. The number of awards made each year will depend on the availability of funds.

The Division initiated the TMAA program to encourage the development of teaching programs in transfusion medicine. At present, teaching, research, and clinical responsibilities in transfusion medicine are rarely coordinated into a definable program but are dispersed among basic and clinical science disciplines and among activities of the local transfusion services or blood center facility. It is important to note that establishing a transfusion medicine curriculum may not require additional curriculum time; existing teaching materials (components of other disciplines) may be coordinated into an overall program and organized to focus on emerging and important areas of transfusion medicine. Some schools may find it desirable to assemble the appropriate components into a specific unit. Others may wish to retain the transfusion medicine discipline as part of another major clinical or laboratory department.

The program is described in the Catalog of Federal Domestic Assistance No. 13.839, Blood Diseases and Resources. Awards will be made under the authority of the Public Health Service Act, Title III, Section 301 (42 USC 241) and administered under PHS grant policies and Federal regulations, most specifically 42 CFR Part 52 and 45 CFR Part 74. This program is not subject to Health Systems Agency Review.

## This award is also intended to:

- attract to the field of transfusion medicine outstanding students and promising young physicians and scientists who can serve the teaching, research, and clinical aspects of transfusion medicine;
- encourage the development of faculty capable of providing appropriate instruction in the field of transfusion medicine;
- facilitate interchange of information, and evaluation and educational techniques among research, medical, and blood service communities; and
- enable the grantee institution to develop a continuing transfusion medicine program, using local support, when this Award terminates.

Applications must be received by October 15, 1984, for review at the May 1985 meeting of the National Heart, Lung, and Blood Advisory Council. Awards will be made in September 1985, depending on the availability of funds. Requests for the TMAA Program Guidelines should be directed to:

Fann Harding, Ph.D. National Heart, Lung, and Blood Institute Federal Building - Room 5A08 Bethesda, Maryland 20205

Telephone: (301) 496-1817

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