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Vol. 16, No. 16, May 8, 1987

NOTICE

DATED ANNOUNCEMENTS (RFPs and RFAs AVAILABLE)

ONGOING PROGRAM ANNOUNCEMENTS

NOTICE

CONFERENCE ON COMPLIANCE WITH NEW ANIMAL WELFARE REGULATIONS

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

Scientists Center For Animal Welfare

The Scientists Center for Animal Welfare is holding a Conference "Well Being of Laboratory Animals: How to Comply with the New Regulations" on June 3-4, in cooperation with The University of Chicago. It will be held at the Hyatt Regency Hotel in Chicago. Many current issues will be addressed including effective Animal Care and Use Committees, protocol review, public member's role on the committee, well-being of primates, training courses on humane principles, new guidelines for agricultural animals, anesthesia and post-operative care, and use of animals in education. The faculty is composed of nationally recognized experts. For more information and complete program, please contact:

Lee Krulisch
Scientists Center for Animal Welfare
4805 St. Elmo Avenue
Bethesda, Maryland 20814
Telephone: (301) 654-6390

DATED ANNOUNCEMENTS (RFPs and RFAs AVAILABLE)

NATIONAL COOPERATIVE VACCINE DEVELOPMENT GROUPS FOR THE ACQUIRED IMMUNODEFICIENCY SYNDROME

RFA AVAILABLE: 87-AI-21

P.T. 34; K.W. 0740075, 0715120, 0715125, 0760080, 0710030

National Institute of Allergy and Infectious Diseases

Letter of Intent Receipt Date: July 15, 1987
Application Receipt Date: September 15, 1987

The National Institute of Allergy and Infectious Diseases (NIAID) announces the availability of an RFA for the funding of National Cooperative Vaccine Development Groups for the Acquired Immunodeficiency Syndrome (NCVDG). The RFA (available on request) invites applications aimed at the development of effective vaccines for the prevention of AIDS. Scientific approaches to the development of effective AIDS vaccines appropriate to the RFA may range from research on whole virus vaccines, through the production of preparations with recombinant DNA techniques and synthetic approaches, to the use of viral vectors to deliver antigenic materials. Applications directed towards vaccine development for AIDS associated opportunistic infections are not invited. Otherwise, scientific approaches to the development of effective vaccines appropriate to the RFA are broad and limited only by the creativity and ability of the applying group to exploit leads from basic studies in virology, molecular biology, and immunology.

Each NCVDG will be assembled by the Principal Investigator to form a multidisciplinary consortium representing the various skills needed to successfully design and evaluate vaccine entities and strategies for the prevention of AIDS. Inasmuch as it is unlikely that all of the outstanding talents required to exploit fundamental leads from various scientific disciplines will be found in a single institution, each Group is envisioned as being multi-institutional as well. Thus each NCVDG will be assembled by the Principal Investigator and may consist of a number of Laboratory Projects representing the scientific disciplines required to attain the Group's goal and objectives. The various Laboratory Projects, including that of the Principal Investigator, may be mobilized from academic or research institutions, and industry. It is expected that the rationale for design of potential vaccines, the synthesis or production of specific candidates, and the models for evaluation will originate within the Group and be based on leads from their own and others' fundamental research.

Awards will be made as Cooperative Agreements. Assistance via a Cooperative Agreement differs from the research grant in that the Government component (in this instance, the NIAID) awarding the Cooperative Agreement anticipates substantial involvement during performance. The nature of NIAID staff participation is described in the RFA. However, the applying Group must define its objectives in accord with its own interests and perceptions of approaches to vaccines for AIDS prevention.

The proposed applicant institution will be responsible for the Group's application. Awards will be made to the applicant institution on behalf of the group as a whole and not to individual Laboratory Projects within the Group. The applicant institution will provide a Central Operations Office for the Group. The applicant institution will be responsible for the performance of the entire Group and will be accountable for the funds awarded. The participation of the Government through the NIAID extramural staff is aimed at facilitating a concerted effort by the Group. The interaction of academic and non-profit research institutions with commercial organizations and Government is expected to favor efficient development of AIDS vaccines and will facilitate their subsequent refinement and evaluation in clinical trials.

The RFA label obtained from the NIH staff person named below 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.

The RFA is available from:

Dr. John E. Nutter
Chief, Prevention Branch
AIDS Program
National Institute of Allergy
and Infectious Diseases
Westwood Building, Room 3A-07
Bethesda, Maryland 20892
Telephone: (301) 496-8200

SPECIAL INTERNATIONAL POSTDOCTORAL RESEARCH PROGRAM IN ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS)

RFA AVAILABLE: 87-TW-01

P.T. 22; K.W. 0715120, 0710030

Fogarty International Center

Application Receipt Date: September 15, 1987

The Fogarty International Center invites applications from U.S. institutions with interest in developing multi-disciplinary postdoctoral fellowship programs in AIDS research for U.S. and foreign scientists. Funds will be awarded to encourage basic and clinical research in all biomedical and behavioral disciplines related to AIDS. Applications received in response to this request will be reviewed and considered for funding in a single competition.

BACKGROUND

According to the World Health Organization, 100 nations from all continents have reported AIDS cases in their countries. The current doubling time of new cases reported in the United States is approximately 15 months. Research into this disease has been significant. The causative agent, Human T-Lymphotropic Virus Type III/Lymphadenopathy-Associated Virus (The name Human Immunodeficiency Virus (HIV) has been proposed for these viruses by the International Committee on the Taxonomy of viruses.) has been identified; the virus has been shown to severely impair the immune system and the central nervous system; the associated risk factors and major modes of transmission are known; and the epidemiologic patterns and modes of transmission have been shown to vary between men and women and among countries. Until the disease can be prevented, cures are found, or an effective vaccine is developed, AIDS will continue to be an increasingly global public health problem.

International cooperation is important in understanding and preventing AIDS. It is in this context that the Fogarty International Center, NIH, is initiating a Special International Postdoctoral Research Program in AIDS.

OBJECTIVES AND SCOPE

The objectives of the special institutional research fellowship program are (1) to support collaborative research between U.S. and foreign scientists who wish to enhance their knowledge and skills in the epidemiology, diagnosis, prevention, and treatment of AIDS and (2) to stimulate scientists from nations affected by AIDS to cooperate and to share research knowledge in combatting this global problem.

It is expected that the program director will be a recognized scientist in AIDS research, interested in both the basic and clinical aspects of the syndrome, and able to attract as preceptors basic and clinical scientists in his or her institution who are experts in other biomedical and behavioral disciplines related to AIDS.

Under this award the program director will make fellowship appointments to U.S. and foreign scientists varying from 3-24 months. Scientists who are appointed must have an earned doctoral degree (M.D., Ph.D., D.V.M., D.D.S.) or the equivalent in a health science field, be actively engaged in AIDS research, not be employed by a for-profit institution, and if foreign, must have a permanent position in his/her home institution. Postdoctoral scientists at all career levels are eligible for appointment. It is expected that appointments will cover the full range of scientific disciplines related to AIDS research.

U.S. scientists from the grantee institution will be limited to collaborative study in foreign institutions only. The U.S. appointees must have a letter of invitation from the foreign hosts accepting the fellows and committing the resources of the foreign institutions to the research effort. Foreign scientists will be required to conduct their research at the awardee institution only; each appointee will be assigned to a preceptor from among the participating faculty. Sixty (60) months of appointments will be permitted each budget year.

The RFA label obtained from the NIH staff person named below 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.

STAFF CONTACT:

For further information and a copy of the RFA contact:

Bettie J. Graham, Ph.D.
Chief
International Research and Awards Branch
Building 38A, Room 613
Fogarty International Center
National Institutes of Health
Bethesda, Maryland 20892
Telephone: (301) 496-6688

ONGOING PROGRAM ANNOUNCEMENTS

RESEARCH ON THE ETIOLOGY AND FUNCTIONAL CONSEQUENCES OF NONMALIGNANT ENDOCRINE TUMORS

P.T. 34; K.W. 0785050, 0755030, 1002004, 1002019, 1002021, 1003002, 0785055

National Institute of Diabetes and Digestive and Kidney Diseases

PURPOSE

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) invites investigator-initiated research grant applications to advance understanding of the etiology and natural history of benign tumors of the thyroid, parathyroid, pituitary, adrenal and other endocrine glands.

DISCIPLINES AND EXPERTISE

Interdisciplinary approaches may be needed for this study with expertise required in several of the following areas: endocrinology, cell biology, histology, genetics, epidemiology, and peptide and/or steroid biochemistry.

BACKGROUND

Nonmalignant endocrine tumors are a widespread and important problem in endocrinology. These tumors occur particularly frequently in the thyroid, parathyroid, pituitary and adrenal glands. In unselected autopsy series in North America the incidence of goiter is 5 percent and half the thyroids sectioned at autopsy contain nodules of at least 1 cm in diameter. In unselected autopsy series in which the pituitary is examined, the incidence of clinically unrecognized pituitary adenomas is 22 percent and in large neurosurgical series pituitary tumors account for 6 to 18 percent of all brain operations. It is estimated that 30,000 to

100,000 new cases of primary hyperparathyroidism are diagnosed each year in the United States and over 80 percent of these are due to benign parathyroid adenomas. Benign nonfunctioning adenomas are present in 5 percent of adrenals in autopsy series and adrenal adenomas are frequently discovered as adventitious findings when computerized tomographic scans of the abdomen are performed. The etiology of these commonly occurring nonmalignant endocrine tumors is unknown. The long term functional consequences and the natural history of these tumors if left untreated are also unknown. It is unclear how often these tumors have sufficient endocrine function to produce clinically significant disease. Answers to questions about the etiology and functional consequences of benign endocrine tumors would shed light not only on appropriate strategies for their prevention or therapy but also on fundamental questions regarding regulation of cell growth and replication.

OBJECTIVES

This solicitation is intended to stimulate research that will result in new understandings of the regulation of growth and proliferation of endocrine cells and of the pathogenesis of endocrine hyperplasia and nonmalignant neoplasia. It is also intended to stimulate investigation of the natural history and optimal clinical management of nonmalignant endocrine tumors.

SCOPE

Some examples of research topics that would be considered responsive to this solicitation include the following:

- o studies on the regulation of growth and proliferation of endocrine cells and of homeostatic restraints on growth and function
- o biological properties that cause the behavior of benign neoplasms to differ from that of normal tissue
- o determinations of the incidence of adenomas or hyperplasia in endocrine tissue and of the incidence of clinically significant effects from these adenomas
- o studies of the natural history of nonmalignant tumors of endocrine tissues
- o identification of determinants of functionality of benign endocrine tumors and of factors predictive of the development of functional characteristics
- o identification of elements predisposing to neoplasia common among the tissues involved in Multiple Endocrine Neoplasia (MEN) syndromes
- o studies elucidating the heterogenity of pathologic response to the MEN stimulus ranging from hyperplasia to adenoma to carcinoma
- o studies addressing the question of whether adenomas arise de novo or as a consequence of a stimulus to hyperplasia
- o identification of underlying inherent impairments in efficiency of hormone synthesis that may result in excessive trophic stimulation of endocrine tissue and tissue hyperplasia
- o characterization of responsiveness of neoplastic endocrine tissue to secretagogues or inhibitors
- o studies useful in defining the optimal clinical approach to diagnosis of newly discovered endocrine tumors
- o evaluation of indications for therapeutic intervention in patients with benign endocrine tumors
- o evaluation of therapeutic modalities for benign endocrine tumors requiring treatment

These areas of interest are not listed in any order or priority. They are only suggested examples of areas of research. Applicants are encouraged to propose other areas which are related to the objectives and scope described above.

MECHANISM OF SUPPORT

The mechanism of support for this program will be the grant-in-aid. The regulations (Code of Federal Regulations, Title 42, Part 52 and, as applicable to the state and local governments, Title 45, Part 74) and policies which govern the research grant programs of the National Institutes of Health will prevail. Although this solicitation is included in the sponsoring Institute's funding plans for Fiscal Year 1988, support is contingent upon receipt of funds for this purpose. Since a variety

of approaches would represent valid responses to this solicitation, it is anticipated that there will be a range of costs among individual grants awarded. With respect to post-award administration, the current policies and requirements that govern the regular research grant programs of the NIH will prevail.

REVIEW PROCEDURES AND CRITERIA

Assignment of Applications

Applications will be received by the NIH, Division of Research Grants (DRG), referred to an appropriate Initial Review Group (IRG) for scientific merit review, and assigned to individual Institutes for possible funding. Referral decision will be governed by normal programmatic considerations as specified in the Referral Guidelines of the NIH, DRG. Some applications may receive dual assignment.

Review Procedures

Applications in response to this solicitation will be reviewed on a nationwide basis and in accord with the usual National Institutes of Health peer review procedures. Applications will first be reviewed for scientific and technical merit by an Initial Review Group composed primarily of non-Federal scientific consultants, and then by the National Advisory Council of the appropriate Institute(s). The review criteria customarily employed by the National Institutes of Health for regular research grant applications will prevail.

Review Criteria

The factors to be considered in the evaluation of scientific merit of each application will be similar to those used in the review of traditional research project grant applications, including the novelty, originality, and feasibility of the approach; the training, experience, and research competence of the investigator(s); the adequacy of the experimental design; the suitability of the facilities; and the appropriateness of the requested budget to the work proposed.

METHOD OF APPLYING

Format for Applications

Applications should be submitted on form PHS 398, which is available from an applicant institution's Office of Sponsored Research or from the NIH Division of Research Grants (DRG). Use the conventional format for research project grant applications and ensure that the points identified in this PA in the section on "Review Procedures and Criteria" are fulfilled. To identify the application as a response to this PA, check "yes" on item two of page one of the application and enter the title "Research on the Etiology and Functional Consequences of Nonmalignant Endocrine Tumors".

As in the case with regular research project grant applications, applicants are requested to furnish their own estimates of the time required to achieve the objectives of the proposed research project. At the end of the initial award period, renewal applications may be submitted for further competitive review through the regular research grant program of the NIH.

Deadline

Applications will be accepted in accordance with the announced receipt dates for new applications (see receipt dates and review schedule in application kits).

Application Procedure

The original and six copies of the application should be sent or delivered to:

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

Inquiries

For further information, investigators are encouraged to contact the following individual:

Robert A. Tolman, Ph.D.
Endocrinology Research Program Director
Division of Diabetes, Endocrinology and Metabolic Diseases
National Institute of Diabetes and Digestive and Kidney Diseases
Westwood Building, Room 605
Bethesda, Maryland 20892
Telephone: (301) 496-7504

This program is described in the Catalog of Federal Domestic Assistance 13.846, Arthritis, Bone and Skin Diseases Research and No. 13.847, Diabetes, Endocrinology, and Metabolism, No. 13.855. 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 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.

RESEARCH GRANTS PROGRAM - BIOMEDICAL CENTERS FOR DRUG ABUSE RESEARCH

P.T. 04, 34; K.W. 0404009, 0710030, 0710085, 0745020, 0745055, 0415000, 0760010

National Institute on Drug Abuse

INTRODUCTION

The National Institute on Drug Abuse (NIDA) provides grant support for Biomedical Centers to conduct interdisciplinary research on biological and neurobiological factors in drug abuse. These grants are typically for a five-year period and are intended to encourage research by providing stable support of multi-disciplinary studies on the nature, causes, diagnosis, treatment, control, prevention and consequences of drug abuse. Applications will be supported to the extent that funds are available. Before preparing an application potential applicants are advised to seek more specific information by telephoning Dr. Stephen Szara, Chief, Biomedical Branch, at (301) 443-6300. Applications received in response to the announcement will be assigned for review and funding consideration in accordance with established Public Health Service (PHS) guidelines.

PURPOSE AND BACKGROUND

New methodologies of molecular cloning have enabled investigators to identify and to sequence the genetic precursors for the peptide ligands and the genetic precursors for the receptors are beginning to be identified. Numerous immunocytochemical studies have localized the receptors and peptides in various areas of the brain and in other tissues and established the notion that the physiologically relevant occupants of opioid receptors are produced by discrete neuronal circuits that use opioid peptides as intercellular messengers. However, before we could delineate the roles of these processes in any behavioral state, such as addiction, a new conceptualization of the complexity of intermediate level of intercellular signaling and the involvement of multiple chemical types of signals in a single functional process will have to be developed.

One of the peptide-precursors, the ACTH/endorphin system, is clearly involved in natural analgesia and appears to be an important common link between vital functions of the brain and the endocrine system. Opiate receptors have been found not only in the brain but in many other peripheral organs including the endocrinologically important adrenals and the immunologically important lymphocytes. Exogenous opiates such as heroin have been shown to bind to these receptors and other drugs of abuse, such as phencyclidine (PCP), have also been shown to act on certain types of opiate receptors. Repeated administration of drugs of abuse is known to interfere with the dynamic regulation of these endogenous systems of receptors and peptides. It is not clear what the exact role of these processes is in the salient clinical problems of tolerance and dependence. It is anticipated, however, that ligands known to act on these systems may be modified to produce unique ligands (drugs) that will assist in the development of new treatments in drug abuse.

Equally impressive progress has been achieved recently in cloning some of the neurotransmitter (acetylcholine, adrenergic) receptors as well as some of the hormone (glucocorticoid, estrogen, progesterone) receptors, thus opening the way to investigate the regulation of expression of these receptors in higher eukaryotes. The role of the coupling of second messengers to these receptors in regulating various cell functions is now beginning to be understood. Specific receptor and second messenger probes are now available to investigate the molecular interactions of drugs, including drugs of abuse. Further progress in dealing with the various preventive, clinical and therapeutic problems in drug abuse will depend on our understanding of the basic biological processes with which drugs of abuse interact and thereby modulate these systems.

An increasing body of evidence indicates that opiates, opioid peptides and opiate addiction modify the responsivity of the immune system. A complete regulatory loop between the immune and neuroendocrine systems has been suggested by some investigators to account for clinical and experimental data on altered responsivity of the immune system in opiate addiction and in certain stress producing situations. A multidisciplinary exploration of the molecular mechanisms involved in these interactions should produce valuable information for therapeutic management and preventive interventions in substance abuse problems.

Stress and analgesia had long been known to be correlated at the clinical levels and the biological bases for this relationship has been uncovered in the simultaneous release of ACTH and beta-endorphin-precursors after stressful experience. Animal experiments showed that perceived control over one's actions in stressful situations have wide ranging biological correlates in endocrine functions, neurotransmitter turnover and receptor regulation. The issue of perceived control may be a key element in maintaining substance abuse behavior and may have biological bases.

ELIGIBILITY REQUIREMENTS

Any domestic public (non-Federal) or private institution may apply for a Center grant. However, the proposed Center must be affiliated with an institution that has the resources to sustain a long-term, coordinated research program around a central theme relating to drug abuse problems. An applicant institution must show the ability to attract high quality scientists from biomedical, neuroscientific, behavioral, and/or environmental science disciplines who are willing to make a long-term commitment to drug abuse research. An applicant must also have a detailed five-year plan for a proposed research program and must assure that drug abuse related research training opportunities will be available.

APPLICATION REQUIREMENTS

An application for a Biomedical Center for Drug Abuse Research grant must include the following features:

Research Program - A detailed plan for the research program of the Center; must include specific information on plans of scientists to be affiliated with the Center as well as on the overall plans for the Center and be organized around a central theme; must include at least three components of interrelated studies to be conducted by scientists from molecular, genetic, immunological, endocrinological, neurological, behavioral, and/or environmental disciplines. The nature and mix of investigators will be dependent on the theme selected and the areas of strength of the institution. Each component should describe background, objectives, experimental design and methods and how the project will interrelate with other research center activities. A separate budget page for each component should be provided. Examples of possible central research themes include: molecular mechanisms related to individual variability of tolerance and dependence; neurobiology of pleasure and pain; new therapeutic strategies based on ligand interaction with molecular regulatory processes; mechanistic studies in exploring the environmental and social factors in drug seeking behavior in animals and effects on social interaction; brain-immune system interaction and the role of peptides as immune regulators; studies on the roles of behavioral, genetic and environmental (including nutritional) factors in the addictive process; research on new biological prevention strategies; endocrine concomitants of drug abuse and their potential role in pregnancy; multidisciplinary program studying inhalation of drugs utilizing neurological, biochemical, behavioral, pharmacological, and other appropriate disciplines. It should be reemphasized that these are but examples of centers.

Core Support: Applications should include a separate section devoted to core support. This should include a description of program management, integration, coordination, and communication among all components of the Research Center and a description of salaries and facilities for the Center Director and his administrative staff; support for promising investigators; support for pilot projects without independent support; support for facilities (e.g., laboratory

space, equipment, research inpatient beds, tests) not contained in the individual research project budgets but shared by a number of research projects. Core support requirements vary widely and will depend upon the nature of the Center research and the collective needs of the investigators. These needs must be specifically identified and substantiated.

Organization and Administration: An applicant must designate an institutional official to serve as principal investigator for the Center grant and as Director of the Center. This person must be an experienced professional and must be an institutional official with sufficient authority to allocate space, manpower, and other resources. In the case of a university-based Center, such a person should usually be a dean or person of higher academic rank. The Director of the Center will have responsibility for planning and coordination of the Center program, preparation of the budget and oversight of expenditures, staff appointments, space allocation, and other aspects of administration and operation of the Center. The applicant also may designate a Scientific Director who will provide direct supervision of the scientific and operational aspects of the research. Such a person should be an individual who has eminent scientific credentials and who is capable of assuring collaboration among scientists conducting research within the Center in order to promote a concerted approach to the research theme. He/she also will be responsible for the direct monitoring of ongoing research activities. A Center must be an identifiable organizational unit and it must have an administrative structure and lines of authority which will facilitate coordination among Center personnel and assure maximum efficiency in Center operations.

Training: While the primary function of each Center is the conduct of research, an important component is the training of research and clinical personnel. The applicant institution must therefore demonstrate that it has the capacity to train predoctoral and/or postdoctoral students for careers in research on drug abuse problems, the capacity to conduct courses on drug abuse problems, the facilities and personnel to provide training in prevention and treatment; and the capacity to conduct programs of continuing education in the medical, legal and service fields. While the Center need not necessarily have formal training programs of its own, there must be specific provision for coordination between the Center and the training programs of the applicant institution and/or affiliated institutions. Center grant funds may not be used to pay stipends or other trainee costs; however, Center staff may participate in the development of training programs and Center resources may be made available for the use of trainees. Centers are encouraged to apply for research training grants provided by the National Service Award programs of ADAMHA.

TERMS AND CONDITIONS OF SUPPORT

Research Center grant funds may be used only for costs which are necessary to carry out the Research Center program and must be in conformance with HHS cost principles. Center grant funds may be requested for support of core resources and individual research projects associated with the Center program as provided for under HHS regulations. For the complete detailed text of this announcement, contact:

NIDA Grants Management Branch
5600 Fishers Lane
Rockville, Maryland 20857
Telephone: (301) 443-6710

Support will be provided for a period of up to five years (renewable to subsequent periods) subject to continued availability of funds and scientific/technical merit review. An amount for allowable indirect costs of the institution will be added to the direct costs of the grant award. Centers will be required to submit detailed annual progress reports (including substantive information about research results to date, status of ongoing research, research plans for the next year, and any modifications in long-term research plans). Grants will be administered in accordance with the PHS Grants Policy Statement (DHHS Publication No. (OASH) 82-50-000 GPO-017-020-0090-1 (rev.) December 1, 1982, available for $5.00 from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402). Title 42 of the Code of Federal Regulations, Part 52, "Grants for Research Projects," is applicable to these awards. In addition, the applicant should be aware that portions of the regulations on Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR 2, may be relevant and applicable.

LETTER OF INTENT

In order to assist applicants in meeting program requirements, it is recommended that applicants submit a brief letter of intent to NIDA. The letter of intent should be submitted six weeks prior to the scheduled application receipt date to:

Dr. Marvin Snyder
Division of Preclinical Research
National Institute on Drug Abuse
5600 Fishers Lane, Room 10A-31
Rockville, Maryland 20857

APPLICATION PROCEDURES AND RECEIPT DATES

State and local government agencies should use form PHS-5161. All others should use form PHS-398. Application kits containing the necessary forms and instructions may be obtained from business offices or from:

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

The original and six copies of the application (two copies if using the PHS-5161 Form) should be sent to:

Application Receipt Office
Division of Research Grants, NIH,
5333 Westbard Avenue
Bethesda, Maryland 20205.

The receipt dates and review schedule are outlined in the formal announcement; the earliest receipt date is October 1, 1987. The initial review for scientific merit will emphasize two major aspects of the grant application: review of each major research component and the core unit, and review of the Center as an integrated research effort focused on a central theme.

The review criteria for major research components and core units include: scientific merit and significance of each research component and its relation to the central theme; technical merit and justification of the core; accomplishments for the projects and core unit to date, particularly for continuation applications; qualifications and percent of effort of the investigators responsible for the research components or core and their ability to devote adequate time and effort to the program; appropriateness of the budget; and where an application involves activities which could have an adverse effect upon humans, animals, or the environment, the adequacy for protecting against such effects.

The review criteria for the Center as an integrated effort include: significance of the overall research program; appropriateness of the central theme for a cooperative research effort; multidisciplinary scope and interrelation of the Center research components and core units; leadership and scientific stature of the Center Director; an effective number of experienced researchers; environment in which the research would be conducted, and the potential for interaction with other scientists; arrangement for quality control of ongoing research, the allocation of funds, day-to-day management; administrative structure; institutional support; appropriateness of the budget; training opportunities; and potential of the proposed Center to become a regional and national resource.

AWARD OF GRANTS

In Fiscal Year 1988 it is estimated that approximately $2 million will be available to support approximately 2 to 3 Centers under this announcement. However, the amount of funding available will depend on appropriated funds and program priorities at the time of award.

This program is described in the Catalog of Federal Domestic Assistance No. 13.279.

RESEARCH ON THE INTERACTION OF MENTAL DISORDER AND PHYSICAL ILLNESS IN LATE LIFE

P.T. 34; K.W. 0710010, 0715095, 0404000, 0411005.

National Institute of Mental Health
National Institute on Aging

The National Institute of Mental Health and the National Institute on Aging announce the availability of support for Research on the Interaction of Mental Disorder and Physical Illness in Late Life, MH-87-13. Applications should focus on the generation of cognitive, behavioral, and social risk factors, causes, correlates, and consequences of major chronic and/or acute physical disorders in the elderly. Studies are also invited which focus on the impact of these interacting factors on the rehabilitation process, recovery from illness or relapse, need for institutional care, and/or premature mortality. Applications in response to this announcement will be accepted in accordance with the usual Public Health Service receipt dates for new applications. Potential applicants are encouraged to contact Institute staff, preferably in writing by submitting a one- or two-page description of the research planned to:

Nancy E. Miller, Ph.D.
Mental Disorders of the Aging Branch
Division of Clinical Research
National Institute of Mental Health
5600 Fishers Lane, Room 11-C-03
Rockville, Maryland 20857
Telephone: (301) 443-1185

Fred Altman, Ph.D.
Health and Behavior Research Branch
Division of Basic Sciences
National Institute of Mental Health
5600 Fishers Lane, Room 11-C-06
Rockville, Maryland 20857
Telephone: (301) 443-4337

Marcia G. Ory, Ph.D., M.P.H.
Behavioral Science Research
National Institute on Aging
Behavioral Science Research
National Institute on Aging
Building 31-C, Room 4-C-32
Bethesda, Maryland 20892
Telephone: (303) 496-3136

*U.S. G.P.O. 1987-181-289:40041