

NIH Expands CTSA Consortium

NIH has expanded a national consortium of academic health centers across the country that is transforming how clinical and translational research is conducted. The goal of the consortium, which grew out of the NIH Roadmap for Medical Research initiative, is to speed the translation of laboratory discoveries into treatments for patients.

Funded through NCRR's Clinical and Translational Science Award (CTSA) program, the consortium adds 12 more academic health centers to the 12 that were announced last October. When fully implemented in 2012, the consortium will include 60 institutions, linked together to energize the discipline of clinical and translational research.

The new consortium members are:

- Case Western Reserve University (Cleveland, Ohio).
- Emory University (Atlanta, Ga.), partnering with Morehouse School of Medicine.
- Johns Hopkins University (Baltimore, Md.).
- University of Chicago (Chicago, Ill.).
- University of Iowa (Iowa City, Iowa).
- University of Michigan (Ann Arbor, Mich.).
- University of Texas Southwestern Medical Center (Dallas, Tex.).
- University of Washington (Seattle, Wash.).
- University of Wisconsin (Madison, Wis.).
- Vanderbilt University, partnering with Meharry Medical College (both in Nashville, Tenn.).

- Washington University (St. Louis, Mo.).
- Weill Cornell Medical College, partnering with Hunter College (both in New York, N.Y.).

The new grantees will further strengthen the consortium's goal of providing enriched environments to educate and train the next generation of clinical and translational researchers, design improved clinical research informatics tools, support outreach to communities, assemble interdisciplinary teams of researchers, and forge new partnerships with private and public health organizations.

In addition, the new grantees offer unique features and enrich the CTSA program in the following ways:

- Three of the new institutions have formed partnerships with research centers in minority institutions: Morehouse School of Medicine, Meharry Medical College, and Hunter College.
- The CTSA at three of the new institutions have female principal investigators, helping to increase the role of women in leadership positions.
- The University of Washington is partnering with academic institutions in states supported by NCRR's Institutional Development Award program to create greater opportunities to reach underserved populations.
- The consortium is integrated with other NCRR and NIH programs. For example, six of the eight National Primate Research Centers are now located at institutions with CTSA. In addition, 19 of the 24 institutions with CTSA also have National Cancer Institute-funded cancer centers.

Total funding for these new awards will be approximately \$574 million. This total represents a nearly five-year budget period. A third funding opportunity announcement for CTSA has been issued, calling for the next round of applications to be submitted by November 7, 2007, with the awards expected in June 2008.

This funding announcement and other information about the CTSA program are available on the CTSA consortium web site at www.CTSAweb.org.



■ Samuel Klein and Jennifer McCrea offer health and nutrition tips to ten-year-old Van Carter at the Adams Park Elementary School Wellness Fair. Klein is the director of the Clinical Interactions Resources Core at the Washington University Institute of Clinical and Translational Sciences.

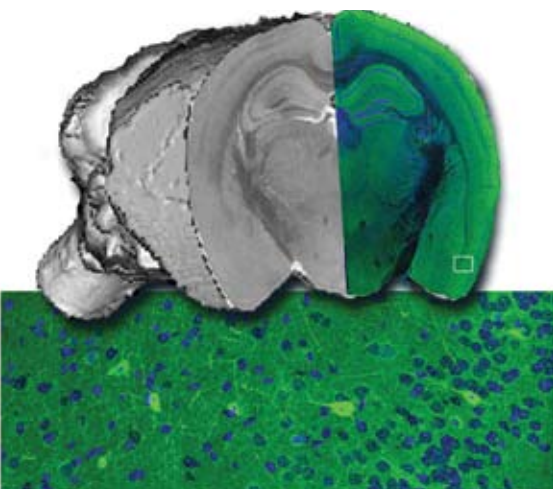
Funding Opportunity for Data-Sharing Projects

NIH will be supporting new projects that encourage biomedical researchers to use the Biomedical Informatics Research Network (BIRN) and the cancer Biomedical Informatics Grid (caBIG), two major programs for data and tool sharing.

BIRN, an NCRR-funded initiative, aims to foster large-scale collaborations that use high-speed networks, high-performance computing, and integrated software. First used in neuroimaging, BIRN has now matured and could serve a broad range of biomedical research groups. Similarly, caBIG, launched by the National Cancer Institute, offers infrastructure and tools applicable beyond the cancer community.

To increase these tools' impact, NIH has announced a funding opportunity for projects that facilitate wider use. One of the key factors for allowing BIRN's use by many researchers is the "federation" of data. A federated infrastructure removes some of the complexities of how the data were obtained or where they are located. The user simply asks and the data are made available. Similarly, federated software tools allow researchers to access bioinformatics and other tools from different sources.

This funding opportunity is affiliated with the NIH Blueprint for Neuroscience Research, a collaborative effort to accelerate the pace of discovery and understanding in neuroscience research (for details visit <http://neuroscienceblueprint.nih.gov>). The opening date for applications is December 18, 2007.



■ The Biomedical Informatics Research Network (BIRN) infrastructure has been used extensively in neuroimaging. A new NIH funding opportunity would increase its use in new areas.

Interdisciplinary Consortia Will Tackle Complex Health Issues

NIH will fund nine new research consortia focusing on areas ranging from obesity and aging to organ design and genome-based drug discovery. These areas represent complex biomedical problems that have been resistant to solutions using traditional research approaches.

Each consortium consists of independent but linked research projects. Many consortia also have core research support facilities and training, career development, and education programs. Whereas various components of each consortium will be funded and administered by different NIH institutes and centers, NCRR and the Office of Portfolio Analysis and Strategic Initiatives will oversee the program as a whole.

Part of the NIH Roadmap for Medical Research, an NIH-wide initiative to speed the progress of medical research, the consortia will develop novel ways to think about challenging health issues by creating and supporting interdisciplinary teams of researchers.

As opposed to multidisciplinary research, which involves teams of scientists approaching a scientific question from their own disciplines, interdisciplinary research integrates elements of disciplines, creating novel approaches for tackling problems. "Interdisciplinary research involves large team interactions and a blending of minds," says Greg Farber, who spearheaded the effort at NCRR. "The synthesis is really key."

The consortia will be funded at a level of \$210 million over five years. Each consortium has an overall principal investigator responsible for coordinating the efforts of the individual grant components. The interdisciplinary consortia, overall principal investigators, and their institutions are:

- Consortium for Neuropsychiatric Phenomics (Robert Bilder, University of California, Los Angeles).
- Interdisciplinary Research Consortium in Geroscience (Dale Bredesen, The Buck Institute for Age Research, Novato, Calif.).
- NeuroTherapeutics Research Institute (Paul Hagerman, University of California, Davis).
- Taskforce for Obesity Research at Southwestern (Jay Horton, University of Texas Southwestern Medical Center at Dallas).
- SysCODE: Systems-Based Consortium for Organ Design and Engineering (Richard Maas, Brigham and Women's Hospital, Boston, Mass.).
- Northwest Genome Engineering Consortium (Andrew Scharenberg, Children's Hospital and Regional Medical Center, Seattle, Wash.).
- Genomic-Based Drug Discovery (Edward Scolnick, Broad Institute of MIT and Harvard University, Cambridge, Mass.).
- Interdisciplinary Research Consortium on Stress, Self-Control, and Addiction (Rajita Sinha, Yale University, New Haven, Conn.).
- The Oncofertility Consortium: Fertility Preservation for Women (Teresa Woodruff, Northwestern University, Chicago, Ill.).