engineered commensal bacteria compositions that secrete HIV infectivity interfering peptides with the aid of co-expressed translocation mediators such as *HylB, HylD* or *tolC* gene products. The bacteria can be, for example, *Escherichia coli* and are preferably those that colonize the gastrointestinal or genitourinary tracts. The secreted anti-HIV peptide can be a functional inhibitory fragment from the C-terminus of HIV, SHIV or SIV, or an inhibitory peptide derived from the N-terminus receptor-binding domain of SIV gp41, HIV–1 gp41, or HIV–2 gp41. The secreted anti-HIV peptide can also be a peptide from the allosteric domain of gp120, an extracellular loop of CCR5, an anti-CD4 immunoglobulin, a mimetic of CD4, an alpha-defensin or theta-defensin, a CD38 fragment homologous to the V3 loop of gp120, polphemusin II (a CXCR4 antagonist), a RANTES peptide that binds to CCR5 or an HIV surface binding peptide such as cyanovirin.

Method of Assessing Ischemia in a Patient

Steven Warach, Lawrence Latour (NINDS).

U.S. Provisional Application No. 60/381,611 filed 17 Mar 2002 (DHHS Reference No. E–082–2002/0–US–01); PCT Application No. PCT/US03/15368 filed 16 May 2003 (DHHS Reference No. E–082–2002/0–PCT–02).

Licensing Contact: Michael Shmilovich; 301/435–5019; *shmilovm@mail.nih.gov.*

Hyperintense acute reperfusion marker (HARM) is well correlated with reperfusion and is a precursor to or concomitant with reperfusion injury. The inventors have developed a novel technique of assessing injuries associated with ischemia, stroke, or reperfusion injury in a patient by administering a contract agent to the patient, acquiring a fluid-attenuated inversion-recovery (FLAIR) image, and observing the presence or absence of HARM on the acquired image. The technique can also be used to determine the effectiveness of a therapeutic protocol for the treatment or prevention of reperfusion injury in a patient that has previously suffered an ischemic event.

This research has been described, in part, in Latour *et al.*, ''Early Blood-Brain Barrier Disruption in Human Focal Brain Ischemia,'' Ann. Neurol. 2004 56:568–477.

Dated: November 4, 2004.

Steven M. Ferguson,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 04–25278 Filed 11–12–04; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by an agency of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by writing to the indicated licensing contact at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804; telephone: 301/496–7057; fax: 301/402–0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

Infectious Clone of Human Parvovirus B19 and Methods of Use

Ning Zhi *et al.* (NHLBI).

U.S. Patent Application No. 10/887,770 filed 09 Jul 2004 (DHHS Reference No.E–178–2004/0–US–01 and corresponding Canadian patent application (DHHS Reference No. E–178–2004/0–CA–02).

Licensing Contact: Susan Ano; 301/435–5515; *anos@mail.nih.gov.*

This technology described in this patent application relates the first reported infectious human parvovirus B19 clone, methods of cloning the parvovirus B19 genome as well as other viral genomes that have secondary DNA structures that are unstable in bacterial cells. The infectious clone and methods of producing the same would be useful in producing infectious virus, which can in turn be used, among other things, to identify and develop therapeutic agents for treatment and/or prevention of human parvovirus B19 infections. The infectious parvovirus B19 clone is also available for licensing. Additional information about this invention can be found in Virology 2004, 318(1), 142–152.

Immunogenic Compositions for Eradication of Latent HIV

Genoveffa Franchini *et al.* (NCI).

U.S. Provisional Application No. 60/536,467 filed 13 Jan 2004 (DHHS Reference No. E–072–2004/0–US–01); U.S. Provisional Application No. 60/536,976 filed 16 Jan 2004 (DHHS Reference No. E–072–2004/1–US–01).

Licensing Contact: Susan Ano; 301/435–5515; *anos@mail.nih.gov.*

HIV infects CD4+ cells and, after incorporation of the viral genome into the host genome, can either produce infectious virus or remain latent. HIV that is latent presents a challenge for complete removal of the virus in infected individuals and is becoming an increasingly important consideration in the identification of potential therapeutics or treatment regimens. This patent application describes immunogenic compositions based on inhibiting the function of $p28^{TEV}$ protein, the first protein expressed during HIV infection, for treatment of latent HIV infection. Specifically, these compositions include the $p28^{TEV}$ polypeptide, a polypeptide with significant sequence homology to $p28^{TEV}$, or immunogenic fragments of these polypeptides. Additional compositions include antibodies and other compounds that act to inhibit $p28^{TEV}$ activity. This technology can also be utilized to detect latent HIV in biological samples. These compositions and methods offer a potential solution for complete virus eradication in therapeutic treatment of HIV infected individuals.

Accelerated Vaccination Strategies To Provide Protection Against Viral Infections

Gary J. Nabel *et al.* (NIAID).

U.S. Provisional Application No. 60/491,933 filed 01 Aug 2003 (DHHS Reference No. E–317–2003/0–US–01); PCT Application filed on 01 Aug 2004 (DHHS Reference No. E–317–2003/0-PCT–02).

Licensing Contact: Susan Ano; 301/435–5515; *anos@mail.nih.gov.*

The technology described in this patent application relates to recombinant viruses for use as vaccines. These viruses contain a single or plurality of sequences encoding antigens from pathogenic viruses

heterologous to the recombinant virus. The antigenic sequences from pathogens such as influenza, RSV, measles, HPV, Epstein-Barr, Lassa, Polio, West Nile, Dengue, HIV–1 and 2, HTLV, herpes simplex virus, hepatitis viruses A, B, C, D, and E, Marburg, Ebola, and SARS are inserted into non-essential regions of either replication-competent or replication-defective adenovirus, adeno-associated virus (AAV), SV40 virus, herpes simplex virus, or vaccinia virus vectors that retain elements necessary for infectivity but are devoid of any pathogenic sequence elements. In these recombinant viruses, the antigenic sequences are operably linked to viral control elements. Thus, these recombinant viruses are capable of infecting a host and mounting an immune response specific to a given virus(es) without eliciting pathogenicity. In addition to the above, the technology also describes methods of accelerated pre-exposure or post-exposure vaccination comprising single-dose administration. The attractive features of this invention include the broad applicability of the recombinant viruses against a number of common pathogens and the potential of using them against other emergent infectious viruses; the ability of the vaccines to stimulate both cellular and humoral immune responses in humans and other hosts; and the ease of administration in single dose form via a number of routes. This technology is now available for licensing. Some fields of use may not be available.

Dated: November 9, 2004.

Steven M. Ferguson,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 04–25279 Filed 11–12–04; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the meeting of the National Cancer Advisory Board.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

A portion of the meeting will be closed to the public in accordance with the provision set forth in section 552b(6), as amended. The discussion could disclose personal information concerning NCI Staff and/or its contractors, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Cancer Advisory Board.

Open: November 30, 2004, 8:30 a.m. to 5:30 p.m.

Agenda: Program reports and presentations; Business of the Board.

Place: Name Cancer Institute, 9000 Rockville Pike, Building 31, C Wing, 6th Floor, Conference Room 10, Bethesda, MD 20892.

Contact Person: Dr. Paulette S. Gray, Executive Secretary, National Cancer Institute, National Institutes of Health, 6116 Executive Boulevard, 8th Floor, Room 8001, Bethesda, MD 20892–8327, (301) 496–5147.

Name of Committee: National Cancer Advisory Board.

Open: December 1, 2004, 8:30 a.m. to 10:30 a.m.

Agenda: Program reports and presentations; Business of the Board.

Contact Person: Dr. Paulette S. Gray, Executive Secretary, National Cancer Institute, National Institutes of Health, 6116 Executive Boulevard, 8th Floor, Room 8001, Bethesda, MD 20892–8327, (301) 496–5147.

Name of Committee: National Cancer Advisory Board.

Closed: December 1, 2004, 10:30 a.m. to adjournment.

Agenda: Review intramural program site visit outcomes; Discussion of confidential personnel issues.

Contact Person: Dr. Paulette S. Gray, Executive Secretary, National Cancer Institute, National Institutes of Health, 6116 Executive Boulevard, 8th Floor, Room 8001, Bethesda, MD 20892–8327, (301) 496–5147.

Any interested person may file written comments with the committee by forwarding the statement to the Contact Person listed on this notice. The statement should include the name, address, telephone number and when applicable, the business or professional affiliation of the interested person.

Information is also available on the Institute's/Center's home page: *deainfo.nci.nih.gov/advisory/ncab.htm,* where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: November 5, 2004.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 04–25271 Filed 11–12–04; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Diabetes and Digestive and Kidney Diseases; Notice of Closed Meetings

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meetings.

The meetings will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, Urinary Infection.

Date: December 7, 2004.

Time: 8 a.m. to 5 p.m.

Agenda: To reveiw and evaluate grant applications.

Place: Courtyard By Marriott, 2899 Jefferson Davis Highway, Arlington, VA 22202.

Contact Person: Maxine A. Lesniak, MPH, Scientific Review Administrator, Review Branch, DEA, NIDDK, National Institutes of Health, Room 756, 6707 Democracy Boulevard, Bethesda, MD 20892–5452, (301) 594–7792, *lesniakm@extra.niddk.nih.gov.*

Name of Committee: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, Diabetes.

Date: December 13, 2004.

Time: 8 a.m. to 5 p.m.

Agenda: To reveiw and evaluate grant applications.

Place: Hyatt Regency—Crystal City, 2799 Jefferson Davis Highway, Arlington, VA 22202.

Contact Person: Maxine A. Lesniak, MPH, Scientific Review Administrator, Review Branch, DEA, NIDDK, National Institutes of Health, Room 756, 6707 Democracy Boulevard, Bethesda, MD 20892–5452, (301) 594–7792, *lesniakm@extra.niddk.nih.gov.*

Name of Committee: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel, Clinical Studies of Kidney Disease.

Date: December 16, 2004.