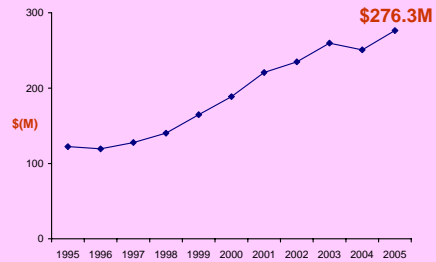


## Funding History and Opportunities

### NIDDK Funding History and Opportunities

The National Institutes of Health (NIH) comprises 27 separate Institutes and Centers and is the largest biomedical research center in the world. The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) was established by Congress in 1950. Within the NIDDK, the Division of Kidney, Urology and Hematology (KUH) manages programs in Kidney research.

#### In FY05, the NIDDK awarded \$276.3M for Kidney research



### Changes to the Exploratory Research (R21) Program

The evolution and vitality of biomedical science requires constant infusion of new ideas, techniques, and points of view. These innovations may differ substantially from current thinking or practice, and may not yet be supported by substantial evidence. The NIDDK R21 program provides a mechanism dedicated to:

- Innovative, high pay-off, paradigm-shifting projects
- Novel technology and tool development
- Applications of existing methods, technologies, or conceptual approaches from outside biomedical science to a problem in the NIDDK mission
- Pilot clinical trials or clinical studies

The following projects are NOT suitable for the R21 mechanism:

- Projects of limited scope or cost that use widely accepted approaches and methods within established fields are NOT appropriate for an R21 application.
- A proposal designed to generate preliminary data for a longer-term project in a well-established research area is NOT appropriate for an R21 application.
- R21s should NOT be used by new PIs to gather preliminary data for an R01.
- R21 proposals submitted by new PIs will NOT be given special priority for funding.

Most R21 applications can be submitted in response to:

- **NIH Exploratory Research Grant Program (NIH Parent R21)**  
<http://grants.nih.gov/grants/guide/pa-files/PA-06-181.html>

However, this NIH Parent R21 announcement does not cover pilot clinical studies or secondary analyses. These can be submitted in response to:

- **Pilot & Feasibility Clinical Research Grants in Kidney/Urologic Diseases (R21)**  
<http://grants.nih.gov/grants/guide/pa-files/PA-06-113.html>
- **Secondary Analyses in Obesity, Diabetes, Digestive and Kidney Diseases (R21)**  
<http://grants.nih.gov/grants/guide/pa-files/PA-06-151.html>

### Current NIDDK Initiatives

- **Development of Disease Biomarkers**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-098.html>
- **Secondary Analyses in Obesity, Diabetes, Digestive and Kidney Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-094.html>
- **Targeting Diseases Caused by Protein Mis-folding or Mis-processing**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-056.html>
- **Animal Models of NIDDK-Relevant Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-049.html>
- **Non-Invasive Methods for Diagnosis and Progression of NIDDK Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-088.html>
- **Proteomics: NIDDK Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-081.html>
- **Ancillary Studies to Major Ongoing NIDDK Clinical Research Studies**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-078.html>
- **Health Disparities in NIDDK Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-074.html>
- **Development of Assays for High Throughput Drug Screening**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-068.html>
- **Research Grants for Studies of Hepatitis C in the Setting of Renal Disease**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-043.html>
- **Ubiquitin and Ubiquitin-Like Modifications Regulating Disease Processes**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-145.html>
- **Basic Research in the Bladder and Lower Urinary Tract**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-136.html>
- **Transmission of Human Immunodeficiency Virus (HIV) in Semen**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-116.html>
- **Ancillary Studies of Kidney Disease Accessing Information from Clinical Trials, Epidemiological Studies, and Databases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-091.html>
- **Basic and Clinical Studies of Congenital Urinary Tract Obstruction**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-076.html>
- **Advances in Polycystic Kidney Disease**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-073.html>
- **Calcium Oxalate Stone Diseases**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-065.html>
- **Tools for Zebrafish Research**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-080.html>
- **NIH Support for Conferences and Scientific Meetings (R13)**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-176.html>
- **Academic Research Enhancement Award (AREA; R15)**  
<http://grants.nih.gov/grants/guide/pa-files/PA-03-053.html>
- **Small Grant Program for NIDDK K08/K23 Recipients**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-070.html>
- **Supplements to Promote Diversity in Health-Related Research**  
<http://grants.nih.gov/grants/guide/pa-files/PA-05-015.html>
- **Supplements to Promote Re-Entry into Biomedical and Behavioral Research Careers**  
<http://grants.nih.gov/grants/guide/pa-files/PA-04-126.html>

## Small Business

### Small Business Funding Opportunities

#### Why Seek SBIR/STTR Funds?

- Over \$1 billion are available across NIH
- They provide seed money for high-risk projects
- They promote and foster partnerships with collaborators - including academia.
- Intellectual property rights are normally retained by small business
- Funds are NOT a LOAN - no repayment!
- Large corporations look to small companies for initial development

#### Small Business Innovation Research (SBIR)

<http://www.zyn.com/sbir>  
<http://grants.nih.gov/grants/oeer.htm>

- The SBIR program supports innovative research conducted by small businesses to develop products for commercialization. The PI must be employed by the small business, but a research institution may be involved.

#### Small Business Technology Transfer (STTR)

<http://www.zyn.com/sbir>  
<http://grants.nih.gov/grants/oeer.htm>

- The STTR program supports innovative research for products that have the potential for commercialization. STTR projects must be conducted cooperatively by a small business and a research institution.

### Examples of Past and Present NIDDK-supported Small Business Projects

#### Devices

- Ultrasonic devices to measure access blood flow

*See Transonic Systems, Inc. at Booth #1637*

- Real-time fluorescent-activated renal monitor
- Kidney transplant storage solution
- Hemodialysis & Hemodiafiltration products

*See NovaFlux at Booth #943*

*See Ash Access Technology at Poster SA-P0075*

#### Drugs & Supplements

- Dietary supplement for augmenting renal function
- Adenosine-2A agonists for acute renal failure
- SF/HGF for renal failure
- 2CCPPA to reduce TGF-beta in diabetic nephrosclerosis
- Urinary crystal formation inhibitors

*See Litholink Corporation at Poster F-P0886*

#### Biomarkers

- Urinary marker to predict development of diabetic nephropathy
- Urinary markers to predict stone formation

#### Technology

- Clinical support technology (Internet-based learning, communication, care support) for kidney transplant patients
- Predicting kidney stones in relatives of stone formers
- Measurement of GFR

## New PIs

### [http://www2.nidddk.nih.gov/Funding/Grants/Resources\\_NewInvestigators.htm](http://www2.nidddk.nih.gov/Funding/Grants/Resources_NewInvestigators.htm)

Like all other NIH Institutes and Centers, the NIDDK has a strong interest in the training and research funding of new investigators. Both the NIH and NIDDK have resources to assist new investigators in launching independent careers, including:

- **Peer-Review**  
All NIH peer reviewers are instructed to focus more on proposed approach than track record for new Principal Investigators (PIs).
- **Differential NIDDK payline and grant duration**  
NIDDK has a 2 percentile more generous payline for new PIs and avoids making administrative reductions in grant duration.
- **Second-Level Review (NEW!)**  
All new investigator R01 applications within ten percentile points of the payline receive individual consideration for some level of support.
- **NIH High Priority, Short-Term Project Award (R56) (NEW!)**  
During second-level review, new investigators are given special consideration for a small R56 award, which provides modest support for the PI to collect more preliminary data and submit an improved application.
- **Career Development (K) awards, Small grants (R03) awards and Mentoring Workshops**  
NIDDK has a vigorous program to support training and career development (see adjacent poster).

### Important NIH News!

#### ➤ New Receipt Dates

NIH will implement new receipt dates effective January 2007 (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-001.html>). Please see hand-out below for full details.

#### ➤ Electronic Submission

NIH is currently in the process of converting to electronic submission (<http://era.nih.gov/ElectronicReceipt/>). Electronic submission for all R01 applications starts February 5, 2007.

#### ➤ Multiple PI Recognition

NIH is currently implementing a policy to recognize multiple PIs on a single grant ([http://grants1.nih.gov/grants/multi\\_pi/index.htm](http://grants1.nih.gov/grants/multi_pi/index.htm)).

#### ➤ Possible Page Limit Reductions for R01s

Voice your opinion on possible R01 page limits by January 5, 2007 at (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-014.html>).

## Training and Career Development

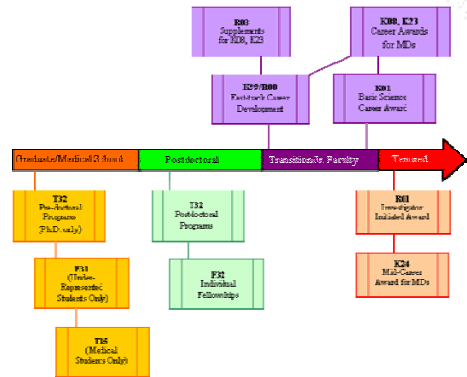
### Post-Doctoral Training

<http://www.niddk.nih.gov/fund/training/training.htm#Career>  
**Ruth L. Kirschstein National Research Service Awards (NRSA)**

➤ **Individual (F32)**  
 These awards provide support for fellows who have received their M.D., Ph.D., or other doctoral-level degree. Fellows need to identify a mentor and plan a research project before applying for 1 to 3 years of funding.  
<http://grants.nih.gov/grants/guide/pa-files/PA-00-131.htm>

➤ **Institutional (T32)**  
 In place at many major universities, these grants provide pre- and postdoctoral support to fellows at those institutions. To be appointed to a training grant, contact the director of the training program at your institution. A listing of all NIDDK-supported training programs is available at  
<http://www.niddk.nih.gov/fund/training/T32table.htm>.

### Training & Career Development Timeline



### Loan Repayment Program

The purpose of the Extramural Loan Repayment Program is to ease the debt burden clinical scientists may have incurred while attending medical school and a residency program. The NIDDK has two loan repayment programs: one for clinicians and one for pediatricians. In addition to these NIDDK programs, the NCMHD sponsors two other loan repayment programs for clinicians: one for those involved in health disparities research and another for clinical researchers from disadvantaged backgrounds. Competitive applicants must demonstrate their commitment to a research career and have a debt-to-salary ratio of at least 20 percent. The Loan Repayment Program may repay up to a maximum of \$35,000 a year toward each participant's outstanding eligible educational loan debt, depending on total eligible repayable debt. For more details about eligibility and to apply online, visit <http://www.lrp.nih.gov>.

### Career Development Awards

<http://www.niddk.nih.gov/fund/training/training.htm>

- **K01 (Mentored Research Scientist Development Awards)**  
 Support Ph.D. scientists who have at least 3 to 5 years of postdoctoral training and who need to transition to independence.
- **K08 (Mentored Clinical Scientist Development Awards)\***  
 Aimed at physician-scientists to transition them to independence.
- **K23 (Mentored Patient-Oriented Research Career Development Awards)\***  
 Aimed at clinical investigators engaged in patient-based research.
- **K24 (Investigator Awards in Patient-Oriented Research)**  
 Support mid-career physicians in patient-oriented research with funded clinical investigations and who are mentoring young clinicians.
- **K25 (Mentored Quantitative Research Career Development Awards)**  
 Available to individuals with quantitative (e.g., engineering, mathematics, computer science, etc.) backgrounds who wish to pursue biomedical research.

### K99/R00 NIH Pathways to Independence

The NIH has another opportunity for career development. This is an ideal award for talented postdoctoral candidates on the fast-track to a productive research career. Eligible applicants must have five-years or less of postdoctoral research experience and may not already have an independent faculty position. The first two years of the award, the K99 phase, are intended to be the mentored career-development phase. At the end of the second year, the applicant must have secured an independent tenure-track position to continue the final three years of the award as an R01. Unlike most career development awards, this opportunity does not require US citizenship or permanent residency status, but the applicant must be able to remain in the US to conduct the full five years of the proposed work. For additional information about this award, please see <http://grants1.nih.gov/grants/guide/pa-files/PA-06-133.html>.

*\*NIDDK-funded K08 & K23 awardees may apply for a small grant (R03) to obtain additional funding during the last 2 years of their 5-year K award.*

Note: All NIH fellowships and career development award mechanisms except the K99/R00 require U.S. citizenship or permanent resident status. Application forms and instructions are available via the NIH website. Completed applications must be submitted for specific deadlines to the NIH for evaluation by a panel of scientists. Once your application is reviewed, you will receive the written evaluation as well as a numerical "score," which rates your application. The NIH Institutes fund the best applications submitted.

## Contacts

### Kidney, Urology & Hematology (KUH) Staff

[http://www.niddk.nih.gov/welcome/org/tables/kuh\\_table.htm](http://www.niddk.nih.gov/welcome/org/tables/kuh_table.htm)  
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### NIDDK Review Branch

[http://www.niddk.nih.gov/welcome/org/tables/dea\\_table.htm#RB](http://www.niddk.nih.gov/welcome/org/tables/dea_table.htm#RB)

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 Francisco O. Calvo, Ph.D.  
[calvof@extra.niddk.nih.gov](mailto:calvof@extra.niddk.nih.gov)

**Deputy Chief**  
 Neal A. Musto, Ph.D.  
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### NIH Center for Scientific Review (CSR)

<http://www.csr.nih.gov>

The **Renal and Urological Sciences (RUS) IRG** is comprised of 3 study sections:

- **Cellular and Molecular Biology of the Kidney [CMBK]**  
 Reviews basic and applied aspects of normal and abnormal renal physiology, epithelial biology, cell biology, transport biology (including osmoregulation and osmosensing), hormone action and signal transduction, vascular biology, genetic disorders, cell-matrix interactions, biophysics, and bioenergetics.
- **Pathobiology of Kidney Disease [PBKD]**  
 Reviews basic and clinical studies of kidney disease including pathophysiology, diagnosis, consequences and treatment of acute and chronic disorders of the kidney, and consequences of kidney disease and failure, as well as studies of the normal structure and function of the glomerulus.
- **Urologic and Kidney Development and Genitourinary Diseases [UKGD]**  
 Reviews normal and abnormal development of kidney, urinary tract, and male genital system, and physiologic and pathophysiologic processes of cells and tissues of the bladder, prostate, ureter, urethra, male reproductive organs, penis, and male and female pelvic floor.

### RUS IRG Staff

<http://www.csr.nih.gov/review/RUSIRG.htm>

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### Important NIH News!

- **New Receipt Dates**  
 NIH will implement new receipt dates effective January 2007 (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-001.html>). Please see hand-out below for full details.
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- **Multiple PI Recognition**  
 NIH is currently implementing a policy to recognize multiple PIs on a single grant ([http://grants1.nih.gov/grants/multi\\_pi/index.htm](http://grants1.nih.gov/grants/multi_pi/index.htm)).
- **Possible Page Limit Reductions for R01s**  
 Voice your opinion on possible R01 page limits by January 5, 2007 at (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-014.html>).

## Clinical and Translational Research

## Repository

### Clinical Trials and Epidemiological Studies

NIDDK supports a wide range of clinical trials and epidemiological studies on chronic kidney disease. While many of these programs are solicited by NIDDK through initiatives, investigators may also develop their own ideas.

#### Areas of General Interest

- Clinical trials to prevent or slow chronic renal disease
- Epidemiology, prevention, and treatment of acute kidney injury
- Epidemiologic and genetic studies of ESRD patients
- Clinical trials to reduce mortality and morbidity in ESRD patients
- Epidemiology of chronic renal insufficiency, including CV disease

#### Mechanisms of Support

- Investigator-initiated (R01, R03, R21)
- Institute-initiated research solicitations (U01, N01)

### Ongoing Studies/Currently Recruiting

#### *If you have patients with Focal and Segmental Glomerulosclerosis (FSGS):*

#### \* Clinical Trial of FSGS in Children and Young Adults

A multi-center, prospective, controlled, open label randomized trial designed to determine if treatment with mycophenolate mofetil (MMF) in conjunction with pulse steroids is superior to treatment with Cyclosporine-A (CsA). The primary outcome is remission from proteinuria after 1 year, and the main secondary outcome is persistence of remission after withdrawal of immunosuppressive therapy.

#### Study Population:

Children and adults between the ages of 2-40 yrs with steroid resistant FSGS and an estimated GFR > 40 ml/min/1.73 m<sup>2</sup>

#### For more information:

- See [www.ClinicalTrials.gov](http://www.ClinicalTrials.gov) identifier CT00135811
- See [www.fsgsrial.org](http://www.fsgsrial.org) to find all of the study's 140+ participating clinical centers.

#### The three Core Coordinating Centers are:

- SUNY at Stony Brook (NAPRTCS), Richard Fine, M.D. and Howard Trachtman, M.D.
- University of North Carolina, Debbie Gipson, M.D.
- Montefiore Medical Center, Rick Kaskel, M.D.

- **Prospective Study of Chronic Kidney Disease in Children (CKiD)**  
Cooperative agreement-supported clinical study; 2 centers and 1 DCC

- **Frequent Hemodialysis Network (FHN)**  
Cooperative agreement-supported clinical study; 3 centers and 1 DCC

The FHN is conducting two trials. The first will compare 6 times per week in-center hemodialysis with conventional 3 times per week in-center hemodialysis. The second will compare 6 times per week home nocturnal hemodialysis with 3 times per week conventional at home hemodialysis. Both trials will randomize a total of 250 patients with a one year follow-up. The two co-primary outcomes of both studies are first, composite of 1-year mortality and change in SF-36 Physical Health Composite score, and second, composite of 1-year mortality and change in left-ventricular mass index by cine-MR.

### Ongoing Studies/Currently Recruiting (cont.)

#### *If you have patients with Polycystic Kidney Disease (PKD):*

#### \* HALT PKD (the PKD Clinical Trials Network)

Will compare the impact of ACE monotherapy with ACE + ARB therapy on slowing cyst growth, preserving kidney function and decreasing cardiovascular complications in patients with autosomal dominant Polycystic Kidney Disease.

#### Study population:

- Individuals between 15-64 years of age with PKD and
  - High blood pressure (currently under treatment)
  - Blood pressure consistently greater than 130/80 mmHg (untreated)
  - Generally preserved kidney function (serum creatinine 3.6 mg/dL or less)

#### For more information:

- See [www.ClinicalTrials.gov](http://www.ClinicalTrials.gov) identifier NCT00067977
- Contact the Data Coordinating Center at 1-314-362-1318
- See <http://www.pkdwest.edu/pkd-cln>

#### Participating sites:

- Tufts-New England Medical Center, Boston, MA 1-866-846-2735
- Beth Israel Deaconess Medical Center, Boston, MA 1-866-650-1815
- Emory University, Atlanta, GA 1-404-686-8280
- Mayo Clinic, Rochester, MN 1-888-630-2616
- Cleveland Clinic Foundation, Cleveland, OH 1-800-223-2273, x44860
- Kansas University Medical Center, Kansas City, KS 1-913-588-7609
- University of Colorado Health Sciences Center, Denver, CO 1-877-765-9297

#### ➤ Dialysis Access Clinical Trials Consortium (DAC)

AV Graft Trial, randomized placebo-controlled study examining the protective role of Aggrenox therapy on early access thrombosis. 15 recruitment centers and 1 DCC (Cleveland Clinic Foundation, 216-444-9927)

#### ➤ Live Kidney Donor & Sibling Follow-up Study

This multi-center prospective cohort study will address whether kidney donation increases the risk of developing ESRD and/or increases the risk of developing CV disease. (Bertram Kasiske, University of Minnesota)

#### ➤ Intensive vs. Conventional Renal Support in Acute Renal Failure

Joint VA/NIDDK funding, 18 VA-funded centers, 9 NIH-funded centers and 1 VA-funded DCC (VA Pittsburgh Healthcare System, 412-688-6000, x5932)

#### ➤ Angiotensin II Blockade in Chronic Allograft Nephropathy (ABCAN)

NIDDK-sponsored multi-center randomized trial to assess the impact of chronic losartan therapy on preventing delayed kidney allograft loss (Hassan Ibrahim, University of Minnesota)

### Ongoing Studies/NOT Currently Recruiting

#### ➤ African American Study of Kidney Disease and Hypertension (AASK)

Cooperative agreement-supported clinical trial; 21 centers and 1 DCC

#### ➤ Consortium for Radiologic Imaging Studies in PKD (CRISP)

Cooperative agreement-supported clinical study; 4 centers and 1 DCC

#### ➤ Renin Angiotensin System Blockade - Diabetic Nephropathy

Folic Acid for Vascular Outcome Reduction in Transplantation (FAVORIT)

Cooperative agreement clinical trial; 20 centers and 1 DCC

#### ➤ Family Investigation of Nephropathy and Diabetes (FIND)

Cooperative agreement-supported clinical study; 8 centers and 1 DCC

#### ➤ Chronic Renal Insufficiency Cohort (CRIC) Study

Cooperative agreement-supported prospective epidemiological study; 7 centers and 1 DCC

### New Studies to Start Recruiting Soon

#### ➤ Nocturnal Hypertension Study in Type 1 Diabetics

A multi-center placebo-controlled trial assessing the impact of chronic ACE therapy on development of microalbuminuria in children and young adult diabetics that do not exhibit typical diurnal variation in blood pressure. (Daniel Battie, Northwestern University)

#### ➤ Randomized Intervention for Vesicoureteral Reflux (RIVUR)

A multi-center trial of antimicrobial prophylaxis compared to placebo in children with VUR. Age range 2 months – 6 years. Outcome measures will include frequency of UTI, changes in scarring measured by DMSA scan and development of antimicrobial resistance.

### Central NIDDK Repositories Data, Biosamples and DNA for your research!

<http://www.NIDDKrepository.org>

The NIDDK Central Repositories store samples and data from large NIDDK-funded clinical studies, which are made available to the research community at the end of the study or when an interim phase is completed. There are 3 Central Repositories:



#### ➤ Biosample Repository

Receives and stores many types of biosamples.

#### ➤ Genetics Repository

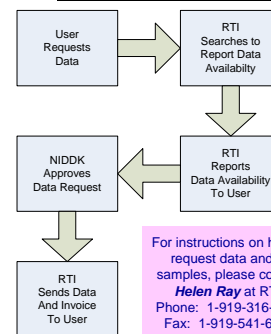
Receives and processes blood samples to extract DNA, cryopreserve blood cells, or create immortalized cell lines.

#### ➤ Data Repository

Receives, archives, maintains and distributes databases or parts of databases from studies. In addition, the Data Repository analyzes stored data in response to inquiries, maintains a single inventory for the three Central Repositories, and maintains the Central Repositories website.

**More than 15 Data and Sample requests filled already!**

#### Data Repository Flow Chart



### Data and Samples are now available from:

- **Epidemiology of Diabetes Interventions and Complications (EDIC)**  
EDIC is a follow-up to DCCT (Diabetes Control and Complications Trial). The DCCT demonstrated the efficacy of glycemic control for slowing the onset and progression of eye, kidney and nerve complications and long-term diminution of CV complications. In 1994, 96% of the participants were enrolled in EDIC for regular observational follow-up of metabolic and complications status. DCCT and EDIC family studies have collected data, DNA, and other biosamples from over 4000 probands and relatives.
- **Several diabetes studies, including the Diabetes Prevention Program (DPP) and the Diabetes Prevention Trial (DPT-1)**

### Data are now available from:

- **Modification of Diet in Renal Disease (MDRD)**  
MDRD is a multi-center cooperative clinical study designed to determine whether restriction of dietary protein and phosphorus, and/or reduction of blood pressure below 140/90 reduces the rate of progression of chronic renal disease irrespective of the nature of the primary underlying process. Patients with renal disease were screened, and the severity of their disease assessed by measuring GFR. Patients were randomized to either normal diet, a low protein/low phosphorus diet, or a very low diet supplemented with keto amino acids. They were also randomized to a regimen to reduce blood pressure. Diabetics taking insulin were excluded from this trial.
- **National Analgesic Nephropathy Study (NANS)**  
NANS assesses the relationship between analgesic use and ESRD to learn if a non-contrasted CT scan can detect analgesic nephropathy. This is a case control study with detailed questionnaire and CT scan to > 200 incident ESRD patients and questionnaire to > 200 matched non-ESRD controls.
- **African American Study of Kidney Disease and Hypertension (AASK)**  
AASK compared the effectiveness of various antihypertensive regimens to slow or prevent progressive renal dysfunction in 1094 African-Americans with a clinical diagnosis of hypertensive renal disease. AASK was designed to determine what level of blood pressure control prevents a loss of renal function, and whether antihypertensive agents might slow the loss of renal function independent of their effect on blood pressure.
- **Several other diabetes and liver disease studies**

### Data and samples will be available soon from:

- **Consortium for Radiological Imaging Studies of PKD (CRISP)**
- **Hemodialysis Study (HEMO)**

### Important NIH News!

#### \* New Receipt Dates

NIH will implement new receipt dates effective January 2007 (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-001.html>). Please see hand-out below for full details.

#### \* Electronic Submission

NIH is currently in the process of converting to electronic submission (<http://eas.nih.gov/ElectronicReceipt/>). Electronic submission for all R01 applications starts February 5, 2007.

#### \* Multiple PI Recognition

NIH is currently implementing a policy to recognize multiple PIs on a single grant ([http://grants1.nih.gov/grants/multi\\_pi/index.htm](http://grants1.nih.gov/grants/multi_pi/index.htm)).

#### \* Possible Page Limit Reductions for R01s

Voice your opinion on possible R01 page limits by January 5, 2007 at (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-07-014.html>).