

Tyi from the NHLBI

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NHLBI Hosts 10th Annual PIO Meeting

The NHLBI will hold its Tenth Annual Public Interest Organization (PIO) meeting on June 8–9, 2009, at the Bethesda Marriott on Pooks Hill Road in Bethesda, Maryland. Previous annual meetings have received glowing reviews by PIO attendees. This tenth annual meeting, with its focus on timely, important topics, promises not to disappoint. This year’s meeting program will again encourage significant networking time with members of fellow PIOs as well as with NHLBI staff.

The meeting begins Monday afternoon, June 8, with registration at 4 pm and a keynote address that will be offered by Dr. Lawrence Tabak. Dr. Tabak is Director of the National Institute of Dental and Craniofacial Research and also serves as Acting Deputy Director of NIH. His talk will include a discussion of the role of NIH in the American Recovery and Reinvestment Act of 2009.

Registration resumes at 7:30 am on Tuesday, June 9. The program will begin at 9 am with a presentation by Dr. Elizabeth G. Nabel, Director, NHLBI, and will feature an array of speakers from PIOs, the NHLBI, and the NIH. A program highlight that is certain to be of interest to everyone is a discussion led by PIO representatives on how to maintain effectiveness during tough economic times. Another presentation will discuss how specific areas of research needs are identified by the Institute and eventually translated into research efforts and clinical practice.

Dr. Elaine Ostrander of the National Human Genome Research Institute, NIH, will give a presentation on how discoveries in dog genetics are relevant to human diseases. Dr. Lana Skirboll of the Office of the Director, NIH, will join Dr. John Thomas of the Division of Blood Diseases and Resources, NHLBI, to discuss the new stem cell policy as it applies to the NIH. The meeting will close with an opportunity for PIO representatives to meet NHLBI staff members who have expertise in heart development and diseases, vascular diseases, lung diseases, airway diseases, blood diseases and resources, and sleep and sleep disorders.

The American Recovery and Reinvestment Act

The American Recovery and Reinvestment Act of 2009 (Recovery Act or ARRA) was signed into law by the President on February 17, 2009. The ARRA is an unprecedented stimulus and investment effort designed to jump-start the economy and to create or save millions of jobs. A portion of ARRA funds will be used to invest in biomedical innovation and improve public health.

The Recovery Act provides a one-time 34 percent budget increase of \$10.4 billion to the NIH. Of that amount, the NHLBI will receive approximately 10 percent of the \$7.4 billion (an amount proportional to the NHLBI’s appropriation level) that is to be invested by the NIH Institutes and Centers to support scientific research.

Dr. Nabel has affirmed that the NHLBI intends to invest its ARRA funding in research to advance basic discoveries of the causes of diseases, promote the translation of basic discoveries into clinical practice, and foster training and mentoring of emerging scientists and physicians. The funding plan strikes an important balance between the Institute’s commitment to investigator-initiated research grants and “signature” projects.

A section of the NHLBI website is dedicated to providing detailed information about the Institute’s participation in the ARRA. Please visit <http://www.nhlbi.nih.gov/recovery> for more information.

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Upcoming NHLBI Workshops and Working Groups*

Workshop or Working Group	Date / Location	Contact for More Information
NHLBI Workshop COPD 2009: Assessment of the Current State-of-the-Art for Basic and Clinical Research	June 29-30, 2009 Bethesda, MD	Antonello Punturieri, M.D., Ph.D. punterieria@nhlbi.nih.gov 301-435-0202
Clinical Research in the Critically Ill Patient: Beyond Mortality	August 5-6, 2009 Bethesda, MD	Andrea Harabin, Ph.D. harabina@nhlbi.nih.gov 301-435-0222

* PIO representatives will be accommodated on a space-available basis and will be responsible for their own travel and lodging expenses.

Science Advance from the NHLBI: New Mechanical Ventilation Strategy Improves Outcomes for ARDS Patients

Acute respiratory distress syndrome (ARDS) is a serious lung injury that is characterized by pulmonary edema and high mortality. The only effective therapy is mechanical ventilation. In recent years, a significant clinical breakthrough was achieved when investigators determined that mechanical ventilation using a small breath size, or tidal volume, is clearly superior to using large volumes. Although this approach significantly improved the survival of ARDS patients, the mortality rate still exceeds 30 percent — and subsequent efforts to improve the survival rate have been unsuccessful.

Results from a new trial indicate that clinical outcomes for ARDS patients can be significantly improved over results achieved through standard ventilator therapy by adjusting the level of mechanical ventilation pressure to account for characteristics of an individual patient's lung and chest wall, which are determined by pressure readings measured in the esophagus. Investigators used a balloon catheter to measure the esophageal pressure for each patient, then either slightly increased or decreased the amount of ventilation pressure applied to the lungs at the end of each breath depending on whether the esophageal pressure was high or low, respectively. The study designers initially believed that 100 patients per treatment group would be necessary to detect a statistically relevant difference between standard ventilator therapy and the esophageal-pressure-guided approach; however, lung oxygenation, a predictor of ARDS survival, was improved so significantly by the new approach that treatment of only 60 patients with the new method was sufficient to validate its efficacy, and the study was halted early.

If confirmed in larger clinical trials, this new strategy of determining a patient's esophageal pressure and then adjusting the mechanical ventilator pressure accordingly may lead to a substantial improvement in ARDS survival.

NHLBI Director Named as Member of the Federal Coordinating Council for Comparative Effectiveness Research

On March 19, 2009, NHLBI Director Elizabeth G. Nabel, M.D., was named by the U.S. Department of Health and Human Services as one of 15 members of the Federal Coordinating Council for Comparative Effectiveness Research. The new council, authorized by the American Recovery and Reinvestment Act of 2009 (ARRA), will help agencies of the federal government coordinate research and guide investments in comparative effectiveness research.

Mark Your Calendar . . .

May	Better Sleep Month (www.bettersleep.org)
	Tuberous Sclerosis Awareness Month (www.tsalliance.org)
June	National Scleroderma Awareness Month (www.scleroderma.org)
July	Hemochromatosis Awareness Month (www.irondisorders.org)

NHLBI Research Initiatives

From time to time, the NHLBI invites investigators to submit grant applications or contract proposals for specific research programs. We are soliciting applications for the following new programs. Please visit the URL listed with each program to obtain information about important application dates and deadlines. For full descriptions of these and other current research initiatives, visit www.nhlbi.nih.gov/funding/inits/index.htm.

Biomedical Research on the International Space Station (BioMed-ISS) (UH2/UH3) (PAR-09-120)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-120.html>

Objective: Use the unique microgravity and radiation environment and resources of the International Space Station to test innovative hypotheses relevant to the NHLBI mission.

Career Enhancement Award for Stem Cell Research (K18) (PA-09-110)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-110.html>

Objective: Provide investigators with the opportunity to acquire new research capabilities in the use of human or animal embryonic, adult, or cord blood stem cells.

Centers for AIDS Research: D-CFAR, CFAR (P30) (PAR-09-103)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-103.html>

Objective: Provide infrastructure and promote basic, clinical, behavioral, and translational AIDS research activities at institutions that receive significant AIDS funding from multiple NIH Institutes or Centers.

Childhood Obesity Prevention and Treatment Research Consortium (U01) (HL-10-004/005)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HL-10-004.html>

Objective: Test the efficacy of interventions to prevent excess weight gain in normal-weight children ages 1-10 years, prevent additional weight gain in obese youth ages 11-18, and/or facilitate weight loss in obese youth ages 11-18.

Community-Based Partnerships for Childhood Obesity Prevention and Control: Research to Inform Policy (R21) (PA-09-141)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-141.html>

Objective: Enhance childhood obesity research by forming local, state, or regional teams of researchers, policymakers, and other relevant stakeholders such as community representatives, public health practitioners, and educators.

Exploratory/Developmental Clinical Research Grants in Obesity (R21) (PA-09-124)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-124.html>

Objective: Conduct exploratory/developmental clinical studies that will accelerate the development of effective interventions for prevention or treatment of overweight or obesity in either adults or children.

NHLBI Career Transition Award (K22) (PAR-09-102)

<http://grants.nih.gov/grants/guide/pa-files/PA-09-102.html>

Objective: Enable outstanding students with three to five years of postdoctoral training to obtain research training experience in the NHLBI Division of Intramural Research and facilitate their successful transition to an extramural environment as independent researchers.

NHLBI Progenitor Cell Biology Consortium Research Hubs (U01) and Consortium Administrative Coordinating Center (U01) (HL-09-004/005)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HL-09-004.html>

Objective: Identify and characterize progenitor cell lineages, direct the differentiation of stem and progenitor cells to desired cell fates, and develop new strategies to address the challenges presented by transplantation of these cells.

Pharmacogenomics Research Network (U01/U19) (GM-10-001)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-GM-10-001.html>

Objective: Conduct research to understand the genetic basis of variable drug responses, both therapeutic and adverse.

Phase II Clinical Trials of Novel Therapies for Lung Diseases (U01) (HL-10-003)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HL-10-003.html>

Objective: Conduct phase II clinical treatment trials of innovative agents for lung diseases and sleep disorders.

Prematurity and Respiratory Outcomes Program (PROP) (U01) (HL-10-007)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-HL-10-007.html>

Objective: Develop strategies to phenotype premature infants ready for discharge from the neonatal intensive care unit in order to identify functional and molecular biomarkers of respiratory disease risk.

Recovery Act Limited Competition for NIH Grants: Research and Research Infrastructure "Grand Opportunities" (RC2) (RFA-OD-09-004)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-OD-09-004.html>

Objective: Undertake large, specific biomedical and biobehavioral research endeavors that will benefit from significant 2-year funds without the expectation of continued NIH funding beyond two years.

Recovery Act Limited Competition: Supporting New Faculty Recruitment to Enhance Research Resources through Biomedical Research Core Centers (P30) (RFA-OD-09-005)

<http://grants.nih.gov/grants/guide/rfa-files/RFA-OD-09-005.html>

Objective: Augment and expand Biomedical Core Centers through the hiring of newly independent investigators.

National Heart, Lung, and Blood Advisory Council Meeting

February 10, 2009

Dr. Nabel welcomed members to the 233rd meeting. She announced two changes in NIH leadership: Dr. Raynard S. Kington was named Acting Director of the NIH on October 31, 2008, following the departure of Dr. Elias Zerhouni, and Dr. Lawrence Tabak, Director of the National Institute of Dental and Craniofacial Research, is now also serving as Acting Deputy Director, NIH.

Dr. Nabel announced two changes in the NHLBI leadership: Dr. Keith Hoots joined the Institute in January as the Director of the Division of Blood Diseases and Resources. He was previously Professor of Pediatrics and Division Head of Pediatric Hematology at the University of Texas Medical School at Houston, Section Head of Pediatric Hematology at the University of Texas M.D. Anderson Cancer Center, and Medical Director of the Gulf State Hemophilia and Thrombophilia Treatment Center. Additionally, Ms. Sally McDonough accepted the position of Director of the new NHLBI Office of Communications and Legislative Activities. She recently served as Director of Communications and Press Secretary to former First Lady Laura Bush.

Dr. Nabel announced that the NIH is operating on a Continuing Resolution through March 6, 2009. She

reviewed the FY 2009 NHLBI budget and issues regarding the funding of competing and noncompeting research project grants during tight budgetary times. Dr. Nabel also discussed aspects of the American Recovery and Reinvestment Act of 2009 that would affect the NIH.

Dr. Nabel discussed the NIH policy for New and Early Stage Investigators and how recent data indicate that the Institute is successfully supporting New and Early Stage Investigators.

Dr. Salim Yusuf, Director of Population Health Research Institute at McMaster University and Hamilton Health Sciences in Hamilton, Canada, shared his insights on global health and chronic diseases. He addressed the future of epidemiologic investigation in cardiovascular disease.

Dr. Michael Lauer, Director of the Division of Prevention and Population Sciences, NHLBI, discussed the NIH role in comparative effectiveness research (CER), which is defined as a rigorous evaluation of the impact of different options that are available for treating a given medical condition for a particular set of patients. CER is prominent in the current national political debate, as policy makers recognize the

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News from Capitol Hill and the White House

American Recovery and Reinvestment Act

On February 17, 2009, the President signed into law the American Recovery and Reinvestment Act (Recovery Act or ARRA). The Recovery Act provides a one-time 34 percent budget increase of \$10.4 billion to the NIH. Of that amount, the NHLBI will receive approximately 10 percent of the \$7.4 billion to be invested by the NIH Institutes and Centers to support scientific research; an amount that is proportional to the NHLBI's appropriation level.

Appropriations for Fiscal Year (FY) 2009

On March 11, 2009, the President signed into law H.R. 1105 (P.L. 111-8), the FY 2009 Omnibus Appropriations Act. The law includes the nine appropriations measures covered by the Continuing Resolution through March 11, 2009, providing funding to the NIH for the remainder of FY 2009. The HHS portion of H.R.1105 includes more than \$30 billion for the 26 accounts that constitute the NIH total appropriation.

Executive Order on Stem Cells

On March 9, 2009, the President signed an Executive Order (EO) removing restrictions on federal funding of human embryonic stem cell research. The order revokes the presidential statement of August 9, 2001, limiting federal funding for research involving human embryonic stem cells, and EO13435 of June 20, 2007, which supplements the August 9, 2001, statement. The EO requires the HHS Secretary, through the NIH Director, to review existing NIH and other widely-recognized guidelines on human stem cell research and issue new NIH guidance within 120 days.

New HHS Secretary Confirmed

On April 28, 2009, the Senate confirmed Kansas Governor Kathleen Sebelius as Secretary of the Department of Health and Human Services (HHS). She was nominated by the President on March 2, 2009.

Upcoming Events

Activity	Date/Location	More Information
NIH Office of Research on Women's Health Moving Into the Future: New Dimensions and Strategies for Women's Health Research	May 27-29, 2009 San Francisco, CA	http://www.orwhmeetings.com/movingtothefuture
Hereditary Hemorrhagic Telangiectasia 8th HHT Scientific Meeting	May 27-31, 2009 Santander, Spain	http://www.hht2009.com/GBR
Alpha-1 Association 18th Annual National Education Conference	June 5-7, 2009 San Francisco, CA	http://www.alpha1.org/education/nateduconf.php
Mended Hearts 2009 Annual Convention	June 6-10, 2009 Orlando, FL	http://www.mendedhearts.org/frame-events.htm
National Heart, Lung, and Blood Advisory Council 234th Meeting	June 10, 2009 Bethesda, MD	http://www.nhlbi.nih.gov/meetings/nhlbac/index.htm
It's My Heart National CHD Family Conference	June 26-28, 2009 Houston, TX	http://www.itsmyheart.org/get-involved/chd-conference-2009/
Platelet Disorder Support Association 2009 ITP Conference	June 26-28, 2009 Orlando, FL	http://www.pdsa.org/itp-conferences/2009-itp-conference/index.html
Aplastic Anemia & MDS International Foundation, Inc. Patient & Family Conference	July 10-12, 2009 Indianapolis, IN	http://www.aamds.org/aplastic/events/patient_and_family_c/indianapolis_2009/
American Association for Respiratory Care AARC Summer Meetings	July 16-20, 2009 Marco Island, FL	http://www.aarc.org/education/meetings/summer_forum_09/
Scleroderma Foundation National Patient Education Conference	July 17-19, 2009 St. Louis, MO	http://www.scleroderma.org/national_conference/2009/national_conference_reg.shtml
Children's Interstitial Lung Disease (chILD) Foundation 2009 chILD Conference	August 1-2, 2009 Denver, CO	http://www.childfoundation.us/conference.html
Histiocytosis Association of America National Conference on Histiocytic Disorders: Patient and Family Meeting	August 1-2, 2009 Milwaukee, WI	http://www.histio.org/site/c.kiKTL4PQLvF/b.4764623/k.9438/2009_NCHD.htm
CFC International 2009 International Conference	August 2-4, 2009 Berkeley, CA	http://www.cfcsyndrome.org/conference.shtml
Noonan Syndrome Support Group, Inc. 2009 International Conference	August 2-4, 2009 Berkeley, CA	https://www.signupmaster.com/bin/quick_signup.exe?id=280
National Marfan Foundation 25th Annual Conference on Marfan Syndrome and Related Disorders	August 6-9, 2009 Rochester, MN	http://www.marfan.org/marfan/2639/NMF-Annual-Conference
Fanconi Anemia Research Fund, Inc. Annual Family Meeting	August 7-11, 2009 Casco, ME	http://www.fanconi.org/family/FamilyMeeting.htm
Pulmonary Hypertension Association 2009 PH Resource Network Symposium	September 24-26, 2009 Arlington, VA	http://www.phassociation.org/PHRN/symposium/
Sickle Cell Disease Association of America, Inc. 37th Annual Convention	September 30 – October 3, 2009 Orlando, FL	http://www.sicklecelldisease.org/docs/37th%20annual%20convention.pdf
Sudden Cardiac Arrest Association (SCAA) 2009 Annual Meeting & Medical Education Conference	October 9-11, 2009 Chicago, IL	http://associationdatabase.com/aws/SCAA/pt/sp/annualmtg
Narcolepsy Network 24th Annual Patient Conference	October 23-25, 2009 Jacksonville, FL	http://www.narcolepsynetwork.org/?p=632
American Heart Association Scientific Sessions 2009	November 14-18, 2009 Orlando, FL	http://www.americanheart.org/presenter.jhtml?identifier=3064925

Constituents' Corner

Children's Cardiomyopathy Foundation Grant Opportunities

The Children's Cardiomyopathy Foundation (CCF) invites investigator-initiated research proposals for innovative basic, clinical, population, or translational studies relevant to the cause, diagnosis, or treatment of cardiomyopathy in children under the age of 18 years. CCF's grant program is designed to provide seed funding to investigators for the testing of initial hypotheses and collecting of preliminary data in order to help secure long-term funding by the NIH and/or other major granting institutions.

CCF grant guidelines and application forms are available at www.childrenscardiomyopathy.org/site/grants.php.

Submitted by Lisa Yue, President
Children's Cardiomyopathy Foundation

National Anemia Action Council Launches New Tutorial for Deferred Blood Donors

The National Anemia Action Council has launched a new online tutorial *Anemia & Blood Donation* for blood donors who have been deferred because of a low blood count and the professionals who work with them. Every month at least one million people visit local blood drives and donation centers in the United States; unfortunately, about 10% of them are not allowed to donate because their blood count falls below the acceptable level set by the FDA. Deferred donors are often sent away with little or no advice on how to raise their blood counts, stay healthy, and try to donate again. The new tutorial provides this information. To view the tutorial, please visit <http://www.anemia.org/patients/blood-donation/>.

Submitted by Susan Geiger, Executive Director
National Anemia Action Council

We invite you to use this space that we reserve for you to share your successes and opinions. You may submit your ideas and articles to nhlbi.listens@nih.gov or Public Interest News, Office of Science and Technology, Building 31, Room 5A07, 31 Center Drive, MSC-2482, Bethesda, MD 20892-2482.

February 2009 Advisory Council Meeting

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serious implications of rapidly rising health care costs and the fact that higher costs do not always lead to better health outcomes.

Dr. Stephen Mockrin, Director of the Division of Extramural Research Activities, NHLBI, discussed progress in implementing the recommended actions resulting from the recent NIH-led study of the NIH peer review system. He summarized the status of key recommendations in each of four priority areas: engaging the best reviewers, improving the quality and transparency of review, ensuring balanced and fair reviews across scientific fields and career stages, and continuing review of peer review.

Ms. Victoria Pemberton, Clinical Trials Specialist in the Division of Cardiovascular Diseases (DCVD), NHLBI, demonstrated a new NHLBI web site entitled Children and Clinical Studies that offers facts and insights to help families make informed decisions about whether to enroll their children in clinical studies.

Dr. Gail Pearson, Medical Officer in DCVD, NHLBI, announced that the main 10-minute video featured on the Institute's web site has earned three Telly awards, including a silver (the highest award) in education, which she presented to Dr. Nabel. The prestigious awards honor outstanding local, regional, and cable TV commercials and programs; film and video productions; and web ads, videos, and films.

Dr. Carl Roth, Associate Director for Scientific Program Operation, NHLBI, presented the Institute's biennial report on its procedures for, and results of, implementing the NIH policy for inclusion of women and minorities in clinical studies. The biennial report is mandated by the NIH Revitalization Act of 1993. The NHLBAC found the Institute to be in compliance with the requirements of the Act.

Dr. Mockrin presented the Annual Review of Delegated Authorities from the NHLBAC report. Delegated authorities allow NHLBI staff to perform specific functions without Council involvement, thereby adding flexibility and decreasing the burden on the Council. In FY 2008, the Institute undertook 74 actions using its delegated authorities. The Council accepted the report.

Need More Information?

We are always interested in receiving comments and suggestions from the community. If you or your organization have questions for me or for the Institute, please contact me at nabele@nhlbi.nih.gov or Dr. Carl Roth at rothc@nhlbi.nih.gov.



Elizabeth G. Nabel, M.D.
Director, NHLBI

For information on specific issues, the following contacts may be helpful:

- For health-related questions, information about publications, or communications pertaining to NHLBI policies and priorities, please contact the trained information specialists of the NHLBI Information Center at 301-592-8573, or write to the Information Center at P.O. Box 30105, Bethesda, MD 20824-0105, or email inquiries to nhlbiinfo@nhlbi.nih.gov.
- For additional information regarding NHLBI events, consult the references provided or www.nhlbi.nih.gov/calendar/nhcal.htm. Most other NIH Institutes and Centers also maintain calendars on their Web sites. Links to their Web pages are at www.nih.gov/icd.