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March 2013 Connection

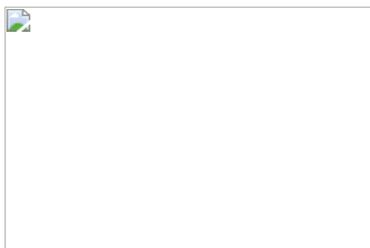
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Ezekiel Emanuel is Featured Speaker at Translational Science 2013!

Translational Science 2013 will be held in Washington, DC from April 17-19. Dr. Ezekiel Emanuel, a visionary and spokesperson for the future of medicine, is a featured speaker on Friday, April 19, along with Dr. Chris Austin, the newly-appointed Director for the National Center for Advancing Translational Science (NCATS). Don't miss this outstanding opportunity to hear from and network with these leaders in the field. The meeting also features a session outlining alternative approaches for translational research funding, including Foundations, Patient Groups and the Department of Defense. For more program information, visit the [meeting website](#). Register before April 5 to take advantage of discounted meeting registration before rates increase. Can't get away for the whole meeting? Daily registration is available for each day of the program. Additionally, we are now offering a half-day registration for Friday, April 19, which includes the plenary talks by Dr. Emanuel and Dr. Austin, for only \$50! This special half-day registration rate is **only available on the ACTS website until April 12, 2013.**



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News from ACTS

ACTS Completes Reorganization!

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COMMUNITY SEARCH

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The Association for Clinical and Translational Science (ACTS) has completed the reorganization with the Association for Clinical Research and Training (ACRT) and the Association for Patient-Oriented Research (APOR). The latter two organizations have dissolved and transferred their assets to ACTS. ACTS leadership and staff are working hard on the joint ACTS-Association for Medical Research (AFMR) meeting, Translational Science 2013. More information on the new ACTS and future activities will be presented at the meeting. Welcome to the new ACTS!

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Washington Update

Dale P. Dirks and Dane R. Christiansen

The federal government, including clinical and translational research and research training programs, is currently operating under a temporary stop-gap funding measure known as a continuing resolution or "CR". Congress passed a CR that essentially funds federal programs at their FY12 levels when the fiscal year began last October due to the fact that lawmakers could not reach agreement on Fiscal Year 2013 (FY13) funding for federal programs. At the end of March, the current CR will expire, which is presently forcing lawmakers to revisit this issue and finalize FY13 appropriations for the remainder of the fiscal year.

The House of Representatives was the first to take action by passing a comprehensive FY13 funding measure, H.R. 933. This bill would serve as a year-long CR for federal programs funded through most of the annual appropriations bills, including the Labor-HHS-Education bill and the Agriculture-FDA bill, by funding them near their FY12 levels for the rest of FY13. H.R. 933 inserts finalized FY13 appropriations bills for 1) the Department of Defense (DoD) and 2) Military Construction and Veterans Affairs (VA), which address DoD and VA research programs. H.R. 933 includes a cut of .098% that is necessary to keep the spending level in the bill under the mandated budget cap.

The Senate began taking action on H.R. 933 shortly after the measure was passed by the House. The Senate is working to adopt key changes to the House-passed bill, including inserting additional completed appropriations bills for 1) Agriculture-FDA; 2) Commerce, Justice, and Science; and 3) Homeland Security. The Senate's CR for all other federal programs also has a modest, but meaningful, \$70 million funding increase for the National Institutes of Health. The House and Senate are expected to iron out their differences and enact a finalized FY13 appropriations measure in the near future.

At the beginning of the month, automatic, across the board funding cuts to nearly every federal program, commonly referred to a "sequestration," took effect. Lawmakers and the Administration are presently working to address these cuts. House Republicans have put forth a plan that focuses solely on cutting federal spending, mainly to offset the impact on the military of sequestration. Senate Democrats and the White House have been advocating for a balanced approach that raises new revenue and cuts federal spending in equal measure. It is important to note that FY13 appropriations action may incorporate some measure of congressional action on sequestration. In fact the House-passed version of H.R. 933 reduces funding for applicable federal programs by 5.1% due to sequestration. The sequestration cut is in addition to the aforementioned 0.98% reduction.

Despite the current focus on FY13 and sequestration, congressional appropriators have already begun to take action on the FY14 budget and appropriations. Further, the President is expected to release his FY14 budget request to Congress in April. Many key funding decisions for critical clinical and translational research and research training programs will be made over the next few weeks. The only way to ensure that lawmakers understand the value of these activities and the importance of maintaining federal support is to reach out to them, advocate, and explain their local and national impact.

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NIH Cuts - What's Happening and What Can You Do?

In a letter to NIH-funded institutions, Sally Rockey, Ph.D., NIH Deputy Director for Extramural Research, detailed the latest news on the sequestration's effect on research funding. According to Dr. Rockey, "based on our initial analysis, it is possible that your grants or cooperative agreement awards may be affected. Examples of this impact could include: not issuing continuation awards, or negotiating a reduction in the scope of your awards to meet the constraints imposed by sequestration. Additionally, plans for new grants or cooperative agreements may be re-scoped, delayed, or canceled depending on the nature of the work and the availability of resources." The full letter can be read [here](#).

ACTS wants to hear your voice regarding the impact that the across-the-board budget cuts will create on medical research. Help us remind Congress that America needs more investment in medical research by participating in advocacy efforts. Share your personal examples of how the sequestration directly impacts your research, or your ability to perform research, in or new [forum](#) on our website. The most effective stories will include very specific information and show importance and or meaning that is accessible to people without a scientific background. The more specific your story is the better. Please include your state and institution in all posts. You may also include your name and position if you feel comfortable doing so. We plan to use these discussions to enhance our advocacy related to NIH funding.

Finally, a coalition of over 100 organizations and businesses have come together for a "Rally for Medical Research" to be held on April 8 on the steps of the Carnegie Library in Washington DC. Thousands of concerned people are expected to attend. ACTS supports this effort. For more information, see: <http://rallyformedicalresearch.org/Pages/default.aspx>

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In Memoriam - Dr. Rodney Ulane

Dr. Rodney Ulane, who generously served as a senior liaison for the NIH at the Translational Science "Meetings with Program Officers" sessions, died unexpectedly on Thursday, March 7. Dr. Ulane received early scientific training at the NIH, and went on to serve as Associate Dean and Director of the MD/PhD Programs at the New York University School of Medicine and at the University of Texas Southwestern Graduate and Medical School in Dallas. He returned to the NIH in 2009 to serve as the NIH Training Officer for the Division of Scientific Programs at the NIH Office of Extramural Research. His advice and guidance helped many trainees to become successful researchers. He will be greatly missed.

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Translational Science News

Legendary Drug Industry Executives Warn U.S. Science Cuts Endanger the Future

In an essay in Forbes, three research leaders warn that cuts to scientific research in the United States are a real threat to the future. The essay was written by Marc Tessier-Lavigne, president, The Rockefeller University and former chief scientific officer, Genentech; P. Roy Vagelos, chairman, Regeneron Pharmaceuticals, and retired chairman and CEO, Merck & Co.; and Elias Zerhouni, president R&D Sanofi and former director of the National Institutes of Health (NIH). They wrote, "As current and former leaders of major commercial and academic life science institutions, the three of us know that to retain that competitiveness, we can't afford to shrink our basic science investment at a time when other countries like India and China are rapidly increasing theirs. ... America's last century has been a story of leadership and innovation. Our future, our health, and our competitiveness all depend on the work of NIH and other science agencies. These institutions remain the backbone of U.S. scientific preeminence and competitiveness. Congress and the Administration must act quickly and assertively to renew our investment in basic scientific research."

From "Legendary Drug Industry Executives Warn U.S. Science Cuts Endanger the Future"

Forbes (03/06/13) Tessier-Lavigne, Marc; Vagelos, P. Roy; Zerhouni, Elias

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Center for Translational Transplant Medicine Explores New Approach in Transplantation

Georgetown University Medical Center (GUMC) has announced the formation of a Center for Translational Transplant Medicine. The center brings to bear the expertise of a wide variety of laboratory scientists at GUMC--immunologists, cell biologists, biostatisticians and a host of others, to collaborate with physicians at the MedStar Georgetown Transplant Institute (MGTI). The center's co-directors are Thomas Fishbein, MD, executive director of the MGTI, and Michael Zasloff, MD, PhD, director of surgical immunology and scientific director at MGTI.

From "Center for Translational Transplant Medicine Explores New Approach in Transplantation"

Georgetown University Medical Center (03/07/13)

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The Coming R&D Crash

Though Republicans and Democrats agree that the government should increase spending for basic scientific research, federal R&D spending is set to stagnate in the coming years. The National Institutes of Health's budget is slated to decline more than 7 percent over the next five years, with energy, agriculture, and defense research programs set to decrease by similar amounts as well. Scientists and technology analysts have cautioned that the nation's lagging government investment in R&D threatens its edge in scientific research. "If you look at total R&D growth, including the corporate and government side, the U.S. is now at the low end," says Rob Atkinson, president of the Information Technology and Innovation Foundation. "We're seeing other countries, from Germany to Korea to China, make much bigger bets. And if that persists for long enough, it's going to have an impact." Atkinson also notes that corporate R&D in the United States has stagnated, while other countries are seeing increases, due in part to unfavorable tax policies and impatient investors.

From "The Coming R&D Crash"

Washington Post (02/26/13) Plumer, Brad

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Mice Fall Short as Test Subjects for Humans' Deadly Ills

New research suggests that while still useful for research, the mouse model has been misleading for at least three conditions. The study, which spanned a decade and involved more than three dozen researchers across the country, found that mice had different responses for sepsis, burns, and trauma. The findings help explain why nearly 150 drugs tested on patients with sepsis have failed. The tests were all based on mouse studies, and it turns out that while mice can have a condition that looks like human sepsis, it is actually very different from the human condition. The researchers, led by Dr. Ronald W. Davis of Stanford University, concluded that there was no connection between the genetic responses of mice and those of humans. The findings are published in Proceedings of the National Academy of Sciences.

From "Mice Fall Short as Test Subjects for Humans' Deadly Ills"

New York Times (02/11/13) Kolata, Gina

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Grant Opportunities

The AAMC Early Career Women Faculty Professional Development Seminar

The AAMC Early Career Women Faculty Professional Development Seminar, a three-and-a-half-day program designed for women at the assistant professor or instructor level, is now accepting applications. The program goal is to provide an introduction to the knowledge and skills needed to follow the path to leadership in academic medicine. The seminar, which runs from July 13-16, 2013, is targeted at physicians and PhD scientists holding medical school appointments and considering leadership positions within their discipline, department, or institution. The online application period will be open until April 1, 2013.

From "The AAMC Early Career Women Faculty Professional Development Seminar"

Association of American Medical Colleges (03/07/13)

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Three NIH Common Fund Opportunities

The National Institutes of Health has posted three new funding opportunity announcements (FOAs) responding to the recommendations from workforce and

diversity working groups of the NIH Advisory Committee to the Director. The FOAs are: Broadening Experiences in Scientific Training (BEST) (DP7); Planning Grants for the NIH Building Infrastructure Leading to Diversity (BUILD) Initiative (P20); and, Planning Grants for the NIH National Research Mentoring Network (NRMN) (P20). All three initiatives are being funded by the NIH Common Fund. Letters of intent for all three are due by April 10, 2013. More information is available at Planning Grants for the NIH Building Infrastructure Leading to Diversity (BUILD) Initiative (P20); Planning Grants for the NIH National Research Mentoring Network (NRMN) (P20); and NIH Director's Biomedical Research Workforce Innovation Award: Broadening Experiences in Scientific Training (BEST) (DP7)

From "Three NIH Common Fund Opportunities"
NIH Grants (03/07/13)

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NIH Director's Biomedical Research Workforce Innovation Award: Broadening Experiences in Scientific Training (BEST) (DP7)

The National Institutes of Health (NIH) has posted a new Funding Opportunity Announcement (FOA) on the "NIH Director's Biomedical Research Workforce Innovation Award: Broadening Experiences in Scientific Training (BEST) (DP7)." According to NIH, "The purpose of this FOA is to seek, identify and support bold and innovative approaches to broaden graduate and postdoctoral training, such that training programs reflect the range of career options that trainees (regardless of funding source) ultimately may pursue and that are required for a robust biomedical, behavioral, social and clinical research enterprise." NIH said, "This program will establish a new paradigm for graduate and postdoctoral training; awardee institutions will work together to define needs and share best practices." Letters of intent are due by April 10, 2013, and applications by May 10.

From "NIH Director's Biomedical Research Workforce Innovation Award: Broadening Experiences in Scientific Training (BEST) (DP7)"
NIH Grants (03/04/13)

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DDCF: Innovations in Clinical Research Award

The Doris Duke Charitable Foundation (DDCF) has announced the Doris Duke Innovations in Clinical Research Award (ICRA) for 2013. The DDCF is seeking proposals for clinical research that could lead to innovative breakthroughs in sickle cell disease. The award will provide \$150,000 per year for three years to support direct research expenses including salary support, plus \$12,000 for indirect costs. It is anticipated that up to 10 awards will be made this year. Proposals are due on May 13, 2013.

From "DDCF: Innovations in Clinical Research Award"
Doris Duke Charitable Foundation (02/21/13)

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Morton Cure Paralysis Fund

The Morton Cure Paralysis Fund is announcing funding as part of its biannual application cycle. The fund, which has a particular focus on placing projects in the research pipeline that enable scientists to develop the proof concept data necessary to apply for larger grants from the National Institutes of Health and other organizations, is committed to developing effective therapies for paralysis associated with spinal cord injury and other central nervous system disorders. The application deadline for the next grant is April 30, 2013.

From "Morton Cure Paralysis Fund"
Morton Cure Paralysis Fund (02/14/13)

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High Impact Neuroscience Research Resource Grants (R24)

The National Institute of Neurological Disorders and Stroke has issued a funding opportunity announcement in support of high impact efforts to provide resources for neuroscience research. Projects should focus on the compelling needs of broad communities of neuroscience researchers or should offer unique services that otherwise would be unavailable. Applications can propose new tools, reagents or services, innovative approaches to scaling and/or economizing existing resources, or introduction of resources to wider user groups. A letter of intent is due on April 16, 2013, and the application is due on May 16, 2013.

From "High Impact Neuroscience Research Resource Grants (R24)"
NIH Grants (02/11/13)

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Collaborative Spine Research Foundation Announces Intent to Publish Grant Solicitations for Clinical Spine Research

The Collaborative Spine Research Foundation has announced a new funding opportunity. The foundation is seeking research grant applications for clinical spine research, providing up to \$10 million for original research projects that address the 10 topics included in Collaborative Spine's research agenda. These topics can be found at www.csrfoundation.net/CSRFresearchagenda.html. Areas of research include assessment, methods, and processes of spine care. Funding will be for projects of one to three years in length, with up to \$300,000 annually. A second-round funding opportunity announcement, for high-priority research topics, is expected later this year. Applications are due by May 1, 2013.

From "Collaborative Spine Research Foundation Announces Intent to Publish Grant Solicitations for Clinical Spine Research"
Collaborative Spine Research Foundation (02/11/13)

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High-End Instrumentation Grant Program (S10)

The Office of Research Infrastructure Programs at the National Institutes of Health (NIH) has announced the High-End Instrumentation Grant program. The program encourages applications from groups of NIH-supported investigators to buy a single major item of equipment to be used for biomedical research that costs at least

\$750,000. The maximum award is \$2 million. Applications for the program are due by Sept. 13, 2013.

From "High-End Instrumentation Grant Program (S10)"
NIH Grants (02/01/13)

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Notice of Intent to Publish a Funding Opportunity Announcement (FOA) for The Rare Diseases Clinical Research Consortia (U54)

The National Institutes of Health has issued a notice of intent to publish a Funding Opportunity Announcement (FOA) to continue the Rare Diseases Clinical Research Network (RDCRN) Program and to alert potential applicants of the objectives of this cooperative agreement program. This FOA will be open to current Rare Diseases Clinical Research Consortia (RDCRC) as well as to new applicants. The FOA is expected to be published in Spring 2013 with an expected application due date in Fall 2013. Each RDCRC must include a consortium of clinical investigators, institutions, and relevant organizations for the study of a subgroup of a minimum of three rare diseases. This cooperative program will facilitate identification of biomarkers for disease risk, disease severity/activity, and measures of clinical outcome. Specifically, the cooperative research program seeks to facilitate clinical research in rare diseases through support for collaborative clinical research in rare diseases; training of clinical investigators in rare diseases research; a test bed for distributed clinical data management that incorporates novel approaches and technologies for data management, data mining, and data sharing across rare diseases, data types, and platforms; and access to information related to rare diseases for basic and clinical researchers, academic and practicing physicians, patients, and the public.

From "Notice of Intent to Publish a Funding Opportunity Announcement (FOA) for The Rare Diseases Clinical Research Consortia (U54)"
NIH Grants (02/01/13)

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Patient-Centered Outcomes Research Institute Seeks Applications for Advisory Panels

The Patient-Centered Outcomes Research Institute (PCORI) is accepting applications for the first four PCORI Advisory Panels as part of its ongoing efforts to engage healthcare stakeholders as partners in its research agenda. PCORI is seeking patients, caregivers, clinicians, researchers, and the general public to serve on advisory panels on Assessment of Prevention, Diagnosis, and Treatment Options; Improving Healthcare Systems; Addressing Disparities; and Patient Engagement. The panels will have 12 to 21 members each, and will assist PCORI's staff, Board of Governors, and Methodology Committee in modeling full and meaningful patient and stakeholder engagement efforts. The panels will refine and prioritize specific research questions, provide scientific or technical expertise, and provide input on questions that may arise relevant to the Institute's mission and work. The Patient Engagement panel will advise on processes and methods to ensure the highest standards for patient-centeredness in all aspects of PCORI's work, while the other three panels will identify and prioritize research questions for possible funding within each panel's corresponding priority area from PCORI's National Priorities for Research and Research Agenda.

From "Patient-Centered Outcomes Research Institute Seeks Applications for Advisory Panels"
PR Newswire (01/29/13)

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