Did you miss Translational Science 2015? Here are some Meeting Highlights!

Did you miss Translational Science 2015? Take a look at our Program Guide for descriptions of sessions and list of speakers from the annual meeting.

See below for more session highlights!

Friday Plenary Speaker: Geoffrey Smith, JD

Translational Science 2015 showcased a variety of sessions focusing on the latest discoveries in the field of translational science. We brought together leading minds in the field to update you on hot topics and teach you how to take your research to the next level.
Geoffrey Smith, JD, Managing Director, Mars Grand Challenge Ventures, focused on entrepreneurial success and how important a scale is to achieving success. Do the laws of scaling observed in biology and social networks provide any lessons for entrepreneurs? This talk explored various paths to entrepreneurial success and which one you can take to further your career.

To view slides from this and other plenary sessions from Translational Science 2015, click here.

For Your Information: Quick Facts from Translational Science 2015

Thanks to over 800 of our members and attendees for making Translational Science 2015, held in Washington, DC on April 16 - 18, such a success!

Quick Facts from Translational Science 2015:

- 484 abstracts
- 434 posters
- 84 oral presentations
- 24 breakout sessions
- 61 speakers

Select speaker slides from the plenary sessions are now available to view from Translational Science 2015. If you attended the meeting, you received an email with a direct link to all available speaker slides. If you attended the meeting and did not receive this email, please contact info@actscience.org

Did you attend Translational Science 2015 and need to claim your CME credit? All attendees should have received an email from Duke University Office of CME. For questions related to your CME, please contact Gloria Huang directly.

Save the Date: Translational Science 2016

Mark Your Calendars! Translational Science 2016 will take place April 13-15 at the Omni Shoreham Hotel in Washington, DC. Registration for Translational 2016 is expected to open in December 2015.

From the Hill--ACTS Advocacy News
The 114th Congress has accomplished one of the key items on its legislative agenda for 2015 by enacting legislation to overhaul the flawed Medicare Physician Reimbursement system known as the Sustainable Growth Rate (SGR). This action follows years of advocacy by patient and physician organizations, and most stakeholders applauded the legislation that was ultimately passed and signed into law. Read more.

For more advocacy news, visit ACTS Advocacy.

News from ACTS

ACTS Member Highlight

Translational Science News

Push to Boost Medical Research Gains Traction
FDA Exercising 'Extraordinary' Flexibility on Drugs for Rare Diseases, New Study Finds
FDA's Woodcock Calls to Cut Clinical Costs Via New Efficiencies

Grant Opportunities

Translational Research to Improve Outcomes in Kidney Diseases (R18)
T1 Translational Research: Novel Interventions for Prevention and Treatment of Age-Related Conditions (R21)
T2 Translational Research: Research Leading to New Health Care Practices, Community Programs and Policies Affecting Older Persons (R21)

News from ACTS

ACTS Member Highlight

Coming soon in the next issue of the ACTS Newsletter:
Emily Rogalski, PhD, and the NUCATS Institute team award $2.28 M in NIH Grant Funding. Look for the full story in the next issue!

Share Your Exciting News Stories With Us! Does your institution have news you want to share with the ACTS Connection readership? Do you have an investigator doing something innovative? Let us know! From innovative projects, star scholars and trainees, to award winning faculty, help us share the news that is important to you by submitting it through our online form.

Your news may be shared on the ACTS website, and other ACTS social media sources!

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Translational Science News

Push to Boost Medical Research Gains Traction

Lawmakers have introduced a bill that would provide funding for medical research at the National Institutes of Health (NIH). The 21st Century Cures bill would provide about $35 billion to the NIH by 2018, a $5 billion increase from current funding levels. The bill would set aside $10 billion over five years for an innovation fund at NIH. Those funds would help support young emerging scientists and back precision medicine initiatives.

From "Push to Boost Medical Research Gains Traction"
The Hill (05/02/15) Sullivan, Peter; Ferris, Sarah

FDA Exercising ‘Extraordinary’ Flexibility on Drugs for Rare Diseases, New Study Finds

A new study published in the journal Therapeutic Innovation and Regulatory Science concludes that the Food and Drug Administration is a reasonable regulator when it comes to approving new drugs for rare diseases. Under the Orphan Drug Act, if a company develops a new drug or therapy for a rare disease, it is eligible for a seven-year period of marketing exclusivity, shielded from competition from generic drugs. This is important, experts note, because rare diseases often have a serious lack of investment. The study looked at 27 orphan drugs approved between July 2010 and June 2014 for non-cancer indications, finding that eight of the 27 drugs were held to "conventional" standards of evidence to obtain approval, while the other 19 were approved using a "flexible" regulatory approach.

From "FDA Exercising ‘Extraordinary’ Flexibility on Drugs for Rare Diseases, New Study Finds"
RAPS (05/04/2015) Gaffney, Alexander

FDA’s Woodcock Calls to Cut Clinical Costs Via New Efficiencies

With the cost of clinical trials on the rise, Janet Woodcock, director of the Center for Drug Evaluation and Research at the Food and Drug Administration, recently told U.S. senators that trial efficiency and costs could be improved with the use of master protocols and real-world data. Drug developers spend millions of dollars planning a trial and developing complex infrastructure that is usually disassembled when the study is complete. Woodcock is calling for an examination of ways to create master protocols to be used for clinical studies instead. She has also called for improvements in the science of identifying and evaluating biomarkers to predict and examine the effects of proposed pharmaceuticals before they undergo testing in people.

From "FDA’s Woodcock Calls to Cut Clinical Costs Via New Efficiencies"
OutSourcing-Pharma.com (04/30/15) Brennan, Zachary

Grant Opportunities

Translational Research to Improve Outcomes in Kidney Diseases (R18)

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) has issued a funding opportunity announcement for Translational Research to Improve Outcomes in Kidney Diseases (R18). NIDDK is seeking NIH Research Demonstration and Dissemination Project grant applications from institutions and organizations for effective strategies or approaches to prevent and treat kidney disease. Projects should focus on the prevention or improved care of kidney disease, or the prevention or delay or the complications of the disease. NIDDK is committing $1.5 million to fund 3-5 awards in fiscal year 2016. The maximum project period is two years, with direct costs limited to $225,000 annually. Letters of intent are due by Oct. 18, 2015, with the full application due on Nov. 18, 2015.

From "Translational Research to Improve Outcomes in Kidney Diseases (R18)"
NIH Grants (05/05/15)
T1 Translational Research: Novel Interventions for Prevention and Treatment of Age-Related Conditions (R21)

A funding opportunity announcement from the National Institute on Aging seeks applications for exploratory/developmental research projects that increase the pace of development for novel therapeutics for preventing and treating key health issues that affect older adults. For this funding announcement, T1 translational research is the application of basic and clinical biomedical findings towards the development of new strategies for prevention and treatment of age-related pathologies. Possible T1 projects include development of interventions to improve specific physical functional deficits in the elderly, testing of existing anti-inflammatory drugs for age-related pathologies, testing of factors that affect stem cell-or progenitor cell-based repair or rejuvenation of damaged tissues, studies to rejuvenate the aging immune system to improve immune system function and vaccine efficacy in elderly individuals, and development and application of human in vitro systems to identify potential new clinical indications for existing drugs. The maximum project period is two years, and the combined budget costs may not exceed $275,000. Applications for the next cycle of funding are due by July 16, 2015.

From "T1 Translational Research: Novel Interventions for Prevention and Treatment of Age-Related Conditions (R21)"
NIH Grants (04/28/15)

T2 Translational Research: Research Leading to New Health Care Practices, Community Programs and Policies Affecting Older Persons (R21)

The National Institute on Aging has issued a funding opportunity announcement (FOA) for exploratory/developmental research projects on translational research (T2) focused on the development of health care practices, community programs, and policies. For this FOA, T2 translational research on aging is considered research to collect information needed to develop or evaluate methods of translating results from clinical studies into everyday clinical practice and health decision making. Potential topics for T2 research projects include clinical or population-based strategies to improve appropriate medication prescribing and administration in older adults, improving our understanding of risk/benefit profiles of therapeutic interventions for older adult patients, hospital- and community-based strategies for pain management delivery for older adults, late stage effectiveness or implementation individual or institutional behavior change intervention development research, and translation of recent advances in biomedical science or technology. Direct costs for the two-year project may not exceed $275,000. Applications for the next cycle of funding are due by July 16, 2015.

From "T2 Translational Research: Research Leading to New Health Care Practices, Community Programs and Policies Affecting Older Persons (R21)"
NIH Grants (04/28/15)