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NIH Salary Cap Subject to Further Reduction ACTION ITEM: Oppose the HHS Salary Cap Cut

On June 24th, the House Appropriations Subcommittee passed a plan to reduce Executive Level III salary limit (\$168,700 in 2015), a cut of \$14,600 (8 percent; Section 203). This cut would follow a \$20,000 per year reduction from Executive Levels I to II enacted in the FY 2012 funding bill.

AAMC believes that the proposed reduction would be very difficult for academic institutions and has developed a letter that research deans and colleagues can use to contact their members of Congress and urge them not to lower the salary cap. The letter template is available at this AAMC link. Please use personal address and email in the fields provided for contact information.

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New From the Hill--ACTS Advocacy News Are federal research dollars headed for a cut?

House Appropriations Committee approved the chamber's Fiscal Year (FY) 2016 Labor-Health and Human Services-Education (LHHS) Appropriations Bill, the Senate followed suit. The Senate's proposal is slightly more generous to the National Institutes of Health (NIH) than the House bill, but both proposals take the unfortunate approach of cutting funding for many other federal medical research and public health programs.

Read all the details on the proposed cuts and find out what the key items of interest within the FY 2016 Senate LHHS Appropriations Bill are by clicking on the ACTS Advocacy page.

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ACTS Member Highlight



Coming soon in the next issue of ACTS Connection: Jonathan M. Davis Tufts Clinical and Translational Science Institute (CTSI) Director of Regulatory Affairs and Chief of Newborn Medicine at Floating Hospital for Children at Tufts Medical Center, and a multi-institution team of child health researchers instituted the Point-Person Project, a pilot study that built a national network of navigators to find investigators with the bandwidth and expertise to respond

to pediatric clinical research opportunities.

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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July 09, 2015

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June CTS Journal Now Available



The latest issue of Clinical and Translational Science are now available with abstracts from Translational Science 2015. To access the most recent edition click here.

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NIH Lasker Clinical Research Scholars Program



The NIH is excited to support early-stage, independent clinical researchers through their Lasker Clinical Research Scholars Program. The program provides 5+ years of full-time, funded research in the NIH intramural program for tenure-track level clinical investigators, followed by 3 years of NIH funds at an extramural medical center/research institute or by continuation in the NIH intramural program. NIH Lasker Scholars may be able to maintain an affiliation

with their previous institution during their time at the NIH. The deadline for applications is August 27, 2015. The general start date for the positions is summer 2016, but is flexible.

More information can be found at our website, here or by email to Dr. Chuck Dearolf here.

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Translational Science News

Why Gene-Editing Technology Has Scientists Excited 21st Century Cures: Rare Disease Incentives for Pharma Will Cost the Government \$869M

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NINDS Morris K. Udall Centers of Excellence for Parkinson's Disease Research (P50)

Translational Science News

Why Gene-Editing Technology Has Scientists Excited

A new technology for "editing" defective genes has lifted hopes for a future generation of medicines treating intractable diseases such as cancer, cystic fibrosis, and sickle-cell anemia. Pharmaceutical firms are now exploring how to make drugs using the gene-editing technology, called Crispr-Cas9. The approach offers tremendous potential for developing new treatments for diseases caused by a mutated gene. Crispr-Cas9 is not the only technology capable of editing genes, but researchers consider it easier to use than other methods, notes Dana Carroll, a professor of biochemistry at the University of Utah School of Medicine. Intellia Therapeutics Inc. CEO Nessan Bermingham says drugs based on Crispr-Cas9 promise to complement the medications and biotech drugs currently available, targeting diseases that are not well treated by existing therapies.

From "Why Gene-Editing Technology Has Scientists Excited" Wall Street Journal (06/29/15) Rockoff, Jonathan

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21st Century Cures: Rare Disease Incentives for Pharma Will Cost the Government \$869M

The 21st Century Cures legislation, a bill intended to encourage medical innovation, includes a provision that would allow the Food and Drug Administration to grant an extra six months of exclusive marketing rights to a company for treatments approved for rare diseases. A new report from the Congressional Budget Office (CBO), however, says that this provision would carry significant costs. The extension would delay generic drugs and biosimilars for about 15 percent of the brand-name medicines that would otherwise lose marketing exclusivity. A sixmonth extension of marketing exclusivity for drugs that are repurposed for a rare disease would cost the federal government about \$869 million between 2016-2025, CBO reported.

From "21st Century Cures: Rare Disease Incentives for Pharma Will Cost the Government \$869M"

MedCity News (06/26/15) Keshavan, Meghana

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Orphan Disease Research Continues

The Orphan Drug Act, passed in 1983, has encouraged pharmaceutical research and development for rare diseases, allowing companies that develop an orphan drug to market and sell it exclusively for seven years. There are now 494 Food and Drug Administration (FDA)-approved treatments for orphan diseases, and the National Institutes of Health (NIH) is supporting 9,400 projects with \$3.6 billion dedicated to advancing progress in this area. Patients and their families in recent years have led fundraising efforts and communicated directly with NIH, FDA, and scientists to push the research on rare diseases. President Obama's Precision Medicine Initiative and the 21st Century Cures Act also are meant to encourage collaboration, patient involvement, and more precise treatment.

From "Orphan Disease Research Continues" Newsweek (06/24/15) Firger, Jessica

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How 'Organs-on-Chips' Could End Animal Testing

Researchers at Harvard's Wyss Institute for Biologically Inspired Engineering have developed "organs-on-chips" that could eventually end animal testing. This technology imitates on a microscale the functions of human organs and allows scientists to test drugs and cosmetics with less time and cost than the use of animals. Each chip is about the size of a computer memory stick, on which microfluidic channels lined with living human cells simulate the functions of those organs. The researchers have founded a startup, Emulate, that is working with companies on pre-clinical trial testing.

From "How 'Organs-on-Chips' Could End Animal Testing" Christian Science Monitor (06/24/15) Mendoza, Jessica

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Grant Opportunities

Opportunities for Collaborative Research at the NIH Clinical Center (U01)

The National Institutes of Health (NIH) has issued a funding opportunity announcement for collaborative research projects at the NIH Clinical Center. The goal of the program is to broaden and strengthen translational research collaborations between basic and clinical researchers within and outside NIH to accelerate and enhance translational science by promoting partnerships between NIH intramural investigators and extramural investigators. To be eligible for the program, the application must include at least one intramural scientist as Program Director/Principal Investigator or collaborator, and at least some of the research must be conducted at the NIH Clinical Center. Applications are due by April 11, 2016.

From "Opportunities for Collaborative Research at the NIH Clinical Center (U01)" NIH Grants (06/24/15)

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Pre-application: Opportunities for Collaborative Research at the NIH Clinical Center (XO2)

A funding opportunity announcement (FOA) from the National Institutes of Health (NIH) is seeking XO2 pre-applications for Opportunities for Collaborative Research at the NIH Clinical Center. Though not required, the XO2 pre-application is the recommended first step in the application process for the Opportunities for Collaborative Research at the NIH Clinical Center FOA. Pre-applications for the next cycle are due by Dec. 15, 2015.

From "Pre-application: Opportunities for Collaborative Research at the NIH Clinical Center (X02)"

NIH Grants (06/24/15)

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NINDS Morris K. Udall Centers of Excellence for Parkinson's Disease Research (P50)

The National Institute of Neurological Disorders and Stroke (NINDS) has issued a funding opportunity announcement (FOA) seeking applications for the Morris K. Udall Centers of Excellence for Parkinson's Disease Research program. The goal of the program is to establish a network of Centers that work both collaboratively and independently to define the causes of and discover improved treatments for Parkinson's disease. Requirements include a minimum of three research projects; research cores that are each essential to achieve the goals of at least two of the proposed research projects, plus an Administrative Core; a mission statement and plan for career enhancement of researchers at the Center; and an outreach plan to the local patient community. Applications are due by Dec. 15, 2015.

From "NINDS Morris K. Udall Centers of Excellence for Parkinson's Disease Research (P50)"

NIH Grants (07/01/15)

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