Translational Science 2016 Call for Abstracts & Meeting Registration Opening December 21

Mark Your Calendars! The Call for Abstracts for Translational Science 2016 and Registration for Translational Science 2016 will open **Monday, December 21st**. Register before February 24 for the best rates and book your hotel today! For details about Translational Science 2016 registration and hotel booking, please click here.

The Call for Abstracts will remain open through **Friday, January 29**. Start preparing your abstract for submission today! You must register to attend Translational Science 2016 in order to have your poster accepted.

The Translational Science 2016 abstract requirements will be:

1. Title
2. Objectives
3. Methods/Study Population
4. Results/Anticipated Results
5. Discussion/Significance of Impact
6. If funded, list grant numbers or other funding source

Translational Science 2016 Awards for Career Achievement and Contributions Submissions Now Open through January 4

The Translational Science 2016 Awards Committee is pleased to recognize investigators and educators who have made outstanding contributions in the field of translational science through four different awards to be given during Translational Science 2016, April 13-15 in Washington, D.C. Nominations are being accepted for the following awards:

1. **Edward H. Ahrens, Jr. Distinguished Investigator Award**: This award is named in honor of Edward H. (Pete) Ahrens, Jr., recognizing a senior investigator whose innovative research has had a major impact on clinical practice and health care for the benefit of the public.

2. **Clinical and Translational Research Distinguished Educator Award**: This award recognizes an investigator who has distinguished him or herself as a researcher, mentor and academic leader. Students and trainees are also invited to submit nominations.

3. **AFMR Outstanding Investigator Award**: This Award recognizes an investigator’s pathway to excellence in achieving an independent research career in biomedical research. The recipient will be required to present his/her research at the AFMR Henry Christian Dinner.

4. **Team Science Award**: This award recognizes the importance of interdisciplinary teams to the translation of research discoveries into clinical applications and eventually widespread clinical practice.
**The Deadline to submit is January 4, 2016.** For a full list of requirements and selection criteria for each award, please click here.

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**ACTS Announces New and Improved Website**

The Association of Clinical and Translational Science (ACTS) is pleased to announce the launch of our new and improved website! You will discover a new layout, easy to use navigation, and enhanced functionality.

**New Features Include:**

- Improved design and navigation: user-friendly, making it easy to find information you need
- ACTS Internal Member Homepage: an internal homepage you can customize for direct access to the ACTS information and resources you use most often
- New Layout for ACTS Connection: Find easy access to past issues and subscribe to our Member Highlights blog to be notified when we share new stories, delivered right to your mailbox
- ACTS Blogs: Centralized access to the latest in ACTS member highlights from the ACTS Connection and a new Grants Blog
- Member Search: Easier to use and more targeted to help you find contact information for your ACTS colleagues easily
- Special Interest Group (SIG) community sites: New SIG-specific blogs and discussion forums designed to help you stay in touch and share news with other chapter members

To login to our new website, use your current user name already on file. Select "forgot password" and a temporary password will be sent the email associated with your account.

You will use the temporary password to enter the new site. After logging in you will be required to create a new permanent password.

Please contact ACTS with feedback on the new site or with any questions. We are available by email at info@actscience.org or by phone at 202-367-1119.

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**From the Hill: ACTS Advocacy News**

**Congress Releases FY 2016 Omnibus Appropriations Package**

Congress passed a $32 billion package for NIH, a $2 billion increase over FY 2015. The agreement provides a significant increase to the IDEAS program in recognition of its success. The Research Centers in Minority Institutions (RCMIs) agreement continues to support RCMIs and expects the RCMIs to receive no less than $56,758,601, which is the fiscal year 2015 level plus the proportional share of the general increase provided to NIMHD. The Clinical and Translational Science Awards (CTSA) agreement provides $500,000,000 for the CTSA program, an increase of $25,254,000 above fiscal year 2015, to implement the recommendations from the 2013 Institute of Medicine report on CTSA.

To read more details of the Appropriations Package, click here.

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**News from ACTS**

**ACTS Member Highlight: Share Your Exciting News Stories with Us!**

**Translational Science News**

Bringing the Common Rule Into the 21st Century
NIH Isn't Ensuring That Clinical Trials Account for Different Outcomes by Sex
Scientists Debate How Far to Go in Editing Human Genes
Grant Opportunities

NIH Blueprint for Neuroscience Research Short Courses in Neurotherapeutics Development (R25)
Data Coordinating and Operations Center for the IDeA States Pediatric Clinical Trials Network (U24)
Clinical Sites for the IDeA States Pediatric Clinical Trials Network (UG1)
Research Grants for Preventing Violence and Violence Related Injury (R01)

News from ACTS

ACTS Member Highlight: Share Your Exciting News Stories with Us!

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 emailing us at info@actscience.org. Your news may be shared on the ACTS website, and other ACTS social media sources!

Translational Science News

Bringing the Common Rule Into the 21st Century

Earlier this year, U.S. federal agencies proposed revisions to the regulations governing the ethical conduct of human research, known as the Common Rule. As study volunteers expect to become research partners, and as studies involve increasingly sophisticated information from biospecimens, there is a need for greater respect for research participants and their security, write Kathy L. Hudson, deputy director for Science, Outreach, and Policy at the National Institutes of Health (NIH), and Francis S. Collins, director of NIH. Key changes to the Common Rule would include a requirement for consent to research involving biospecimens, broad participant consent for future use of such data, stronger privacy safeguards for participants' data, and streamlined operations of institutional review boards. Such reforms, the authors write, would update the Common Rule to the 21st century and encourage "the scientific community take a giant leap forward in showing respect for research participants, without whom the biomedical research enterprise would cease to exist."

From "Bringing the Common Rule Into the 21st Century"
New England Journal of Medicine (12/10/15) Vol. 373, No. 24, P. 2293 Hudson, Kathy L.; Collins, Francis S.

NIH Isn't Ensuring That Clinical Trials Account for Different Outcomes by Sex

Women now make up more than half the participants in the clinical trials the National Institutes of Health (NIH) funds to test medical treatments, but the agency cannot tell whether researchers are examining outcomes by sex, according to a new report from the Government Accountability Office (GAO). Usable information on whether men and women are affected differently by what is being tested is important because, for example, a drug or dosage appropriate for a man might be less effective or even lead to harm when taken by a woman. NIH officials, who vowed to do better, have 60 days to formally respond to the report. Dr. Janine Clayton, head of the NIH Office of Research on Women's Health, notes that one problem is a dearth of information on differences by sex reported in major medical journals. In addition, privately funded research may not follow NIH rules.

From "NIH Isn't Ensuring That Clinical Trials Account for Different Outcomes by Sex"
Kaiser Health News (12/03/15) Rovner, Julie

Scientists Debate How Far to Go in Editing Human Genes

file:///C:/Users/jclifton/AppData/Local/Microsoft/Windows/Temporary%20Internet%20Files/Content.Outlook/00L11EVR/121715.html
Nearly 500 scientists, doctors, bioethicists, legal experts, historians, patient advocates and others recently gathered in Washington, D.C., for the International Summit on Human Gene Editing. Participants convened to debate the issue of whether scientists should be allowed to use powerful new genetic engineering techniques to edit genes in human eggs, sperm or embryos. In a statement at the end of the meeting, the organizing committee said "intensive basic" research is "clearly needed and should proceed" to explore the safety and potential benefits of editing that kind of DNA. Notably, the committee did not rule out the possibility that gene editing someday could be used to create humans, as "scientific knowledge advances and societal views evolve."

From "Scientists Debate How Far to Go in Editing Human Genes"
National Public Radio (12/03/15) Stein, Rob

Grant Opportunities

**NIH Blueprint for Neuroscience Research Short Courses in Neurotherapeutics Development (R25)**

The National Institutes of Health (NIH) has issued a funding opportunity announcement (FOA) to support creative educational activities focusing on Courses for Skills Development. This will help accomplish the goals of the NIH Research Education Program, which supports research education activities in NIH's mission areas. This FOA is soliciting Research Education Grant (R25) applications to develop and implement short courses on neurotherapeutics development for academic neuroscientists. In fiscal year 2016, the NIH Blueprint for Neuroscience Research plans to grant $300,000 to fund one award, and the National Institute of Neurological Disorders and Stroke will grant $240,000 to fund one award, with the maximum project period being five years. The next application deadline is Feb. 10, 2016.

From "NIH Blueprint for Neuroscience Research Short Courses in Neurotherapeutics Development (R25)"
NIH Grants (12/08/15)

**Data Coordinating and Operations Center for the IDeA States Pediatric Clinical Trials Network (U24)**

The National Institutes of Health (NIH) is accepting applications from investigators to participate under a cooperative agreement as the Data Coordinating and Operations Center (DCOC) in the IDeA States Pediatric Clinical Trials Network (ISPCTN). The multi-center clinical program is designed to conduct clinical research in pediatric populations. ISPCTN is being created to research conditions that affect the pediatric population, with priority given to airway disease; obesity; pre-, peri-, and postnatal outcomes; and neurodevelopment. NIH intends to commit up to $45 million in fiscal year 2016 to fund one four-year award. Applicants may request a budget for up to $2.5 million per year in direct costs plus $4.53 million per year in direct costs for capitation fees for distribution to the Clinical Sites and for other necessary activities. The application due date is April 15, 2016.

From "Data Coordinating and Operations Center for the IDeA States Pediatric Clinical Trials Network (U24)"
NIH Grants (12/07/15)

**Clinical Sites for the IDeA States Pediatric Clinical Trials Network (UG1)**

The National Institutes of Health (NIH) is accepting applications for institutional research capacity building programs from organizations in Institutional Development Award (IDeA)-eligible states that are looking to support a team to engage and implement pediatric clinical trials. The program would provide research infrastructure and supervised professional development to help institutions establish and maintain pediatric clinical trial teams. Institutions that become IDeA State pediatric clinical trials site will be integrated with a Data Coordinating and Operations Center to form a research network. Under a cooperative agreement, NIH intends to commit up to $30 million in fiscal year 2016 to fund up to 15 awards. The application due date is April
Research Grants for Preventing Violence and Violence Related Injury (R01)

The Centers for Disease Control and Prevention’s National Center for Injury Prevention and Control (NCIPC) is requesting applications for investigator-initiated research to help expand and advance our understanding of how best to disseminate, implement, and translate evidence-based primary prevention strategies, programs, and policies designed to reduce child abuse and neglect. NCIPC is also providing funds for investigator-initiated research to expand knowledge about what works to prevent violence by rigorously evaluating primary prevention strategies, programs, and policies, to address specific gaps in the prevention of injury caused by child abuse and neglect, teen dating violence, intimate partner violence, and sexual violence. Estimated total program funding is $1.05 million. Applications are due by March 1, 2016.