

**DIRECTOR'S
STATUS REPORT
TO COUNCIL**

February 1999

National Institute on Aging

DIRECTOR'S STATUS REPORT

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DIRECTOR'S STATUS REPORT

BUDGET and APPROPRIATIONS

The FY 1999 appropriation for the NIA is \$596,521,000, an increase of \$40,163,000 (7.2 percent) from the amount of \$556,358,000 requested in the FY 1999 President's budget as amended, and \$79,439,000 (15.4 percent) more than the actual obligations of \$517,082,000 for FY 1998.

Research Project Grants

The FY 1999 appropriation provides for a total of 1,247 research project grants at a funding level of \$373,300,000. Within this overall amount, 486 competing research project grants will be supported. This year the NIH is encouraging institutes to pay close to levels recommended by review groups and councils for competing research project grants. Over the past year, NIA has funded new and competing research project grants close to recommended levels. Health science administrators examine their research application portfolio and review the science proposed for the funds requested. NIA will continue this policy in FY 1999. Also, NIA will continue to examine avenues for controlling future year commitments to maintain out-year flexibility.

The significant funding increase in FY 1999 will permit substantial growth of the NIA's research efforts. This amount reflects the allocation to NIA of approximately \$24 million in Special Emphasis funds that will support research on biology of the brain, pathogenesis, and preventive strategies against disease (including demographic studies). The NIA, in collaboration with the National Cancer Institute, is launching a new initiative to expand studies of older patients in clinical trials. In addition, the increase will permit expanded efforts in such areas as cardiovascular disease, genetics of aging, exercise and strength, osteoporosis, the biology of menopause, and behavioral and social research.

Research Centers/Other Research/Training/Contracts

The FY 1999 appropriation provides significant increases for the Institute's centers and research and development contract programs. The increase in the career mechanism includes funding to strengthen new training mechanisms for clinical researchers and support for outstanding researchers in the field of demography of aging. In addition, funds have been provided for a 25 percent stipend increase within the training program.

Intramural Research/Research Management and Support

The increase in the Intramural Research mechanism will allow NIA's Gerontology Research Center to expand its clinical program significantly by creating a clinical research unit to develop interventions for age-related disorders. Also, the Intramural Program will now be able to build upon its research momentum in genetic influences on aging and age-related diseases. The increased level of funding for Research Management and Support will be used to provide scientific oversight to assure integrity of applications funded, to develop research initiatives within the scientific community, and to improve information technology infrastructure in support of scientific staff.

FY 2000 PRESIDENT'S BUDGET

The administration is currently planning to submit the official FY 2000 President's Budget to Congress during the first week in February 1999. (Contact: Ms. Karyn Ross, FMISB, 301/496-9147)

LEGISLATIVE UPDATE

Significant Legislation (Enacted)

The 105th Congress, which officially adjourned in December 1998, passed 14 bills (including Labor, Health and Human Services, and Education Appropriations Acts), that were signed into law and affected either indirectly or directly the National Institutes of Health. Three of these bills, which were enacted in the closing months of the 105th Congress, had direct relevance to the National Institute on Aging.

The Federal Reports Elimination Act of 1998 (P.L. 105-362)

On November 10, 1998, President Clinton signed into law the Federal Reports Elimination Act. This legislation, which was introduced by Senator John McCain (R-AZ), eliminated numerous Federal reports to Congress that had been judged unnecessary, wasteful, or redundant by the Federal agencies required to produce them. The final version of the law included an NIA-supported provision eliminating the Council on Alzheimer's Disease and its annual report.

The Women's Health Research and Prevention Amendments of 1998 (P.L. 105-340)

On October 31, 1998, the President signed into law S. 1722, the Women's Health Research and Prevention Amendments of 1998 (P.L. 105-340). S. 1722 was introduced by Senator William Frist (R-TN), and a companion measure, H.R. 4683, was introduced by Representative Michael Bilirakis (R-FL). In his introductory remarks, Senator Frist explained that the goal of this legislation was to enhance awareness of women's health issues and highlight the critical role that the National Institutes of Health (NIH) and the Centers for Disease Control and Prevention (CDC) play in addressing women's health issues. The legislation extends the authorization of appropriations from fiscal year 1999 through 2003 for several women's health programs at the NIH and CDC that are focused on research, screening, health data management, prevention, treatment, and health education activities. Appropriations for two areas of NIA research were reauthorized by this legislation: (1) research on osteoporosis, Paget's disease, and related bone disorders; and, (2) research into the aging processes of women.

Omnibus Consolidated & Emergency Supplemental Appropriations Act, 1999 (P.L.105-277)—Report Language Highlights

1. Alzheimer's Disease Prevention Initiative

Both the House and Senate versions of the FY 99 appropriations act, as well as the final version that was signed into law, contained language encouraging the NIH to continue its research on Alzheimer's Disease (AD) and launch a full-scale prevention initiative. Congress asked that the initiative include coordination with other Federal agencies and the private sector. The AD Prevention Initiative will be coordinated by the NIA in collaboration with the National Institute on Neurological Disorders and Stroke, National

Institute on Nursing Research, and the National Institute on Mental Health, and will involve other Federal agencies, such as the Health Care Financing Administration, and private industry. Specifically, the initiative will expand present basic biologic and epidemiologic research, increase focus on drug discovery and development, improve methods for early identification of people at risk of developing AD, and facilitate movement of treatments and preventative strategies for testing in clinical trials. NIA will report on this initiative at the FY 2000 appropriations hearing.

2. FOIA provision

The Fiscal Year 1999 appropriations act included a provision added by Senator Richard Shelby (R-AL) requiring Federal awarding agencies to ensure that all data produced under a Federal award or grant be made available to the public via the Freedom of Information Act. The provision requires the Director, Office of Management and Budget (OMB) to implement this provision by making necessary changes to the OMB Circular A-110. In the near future, OMB will be issuing a Notice of Proposed Rule Making, which will be followed by a 60-day public comment period.

Hearings, Briefings, Congressional/Advocacy Organization Visits

Senate Special Committee on Aging Briefing—John Glenn Space Mission

On Wednesday, November 18, 1998, at the request of Ms. Gina Falconio, Legislative Aide, Senate Special Committee on Aging (majority staff), Dr. Richard Hodes, Director, NIA, and Dr. Andrew Monjan, Chief, Neurobiology of Aging Branch, NIA, briefed Ms. Falconio and other Committee staffers on issues related to the recent "Glenn" space mission. They discussed research on sleep disorders, osteoporosis, and loss of muscle mass, stressing the importance of considering this particular flight in the context of other missions.

Briefing for Representatives of the Ad Hoc Group for Medical Research

On Tuesday, December 1, Dr. Hodes met with individuals representing the various organizations comprising the Ad Hoc Group for Medical Research to discuss the Institute's research priorities and respond to questions from individuals who advocate on behalf of the NIH on Capitol Hill and in the research community.

STAFF CHANGES

Dennis Robert Taaffe, Ph.D., was recently appointed as a Research Fellow in the Geriatric Epidemiology Office of the Epidemiology, Demography, and Biometry Program. Dr. Taaffe received his Ph.D. in 1989 from the University of Oregon in exercise physiology. He completed postdoctoral training at Stanford University School of Medicine on the effects of exercise on bone and muscle metabolism among elderly men and women. Dr. Taaffe has expertise in using dual energy x-ray absorptiometry as a tool for studying body composition. During his appointment Dr. Taaffe will investigate such questions as how changes in body composition, muscle strength and activity levels alter functional status in adults living in the community, in

people who are recovering from illness, and in individuals who are immobilized. He will also examine the role of anabolic and catabolic hormones in somatic and functional changes. He will work predominantly as a member of a multi-disciplinary team in the analysis of data available from the HEALTH ABC Study.

Lenore Launer, Ph.D., will join NIA as an investigator (tenure-track) and Chief, Neuroepidemiology in the Epidemiology, Demography, and Biometry Program. Dr. Launer will provide leadership in analysis and conceptualization of research in the area of AD. She will work with the investigative team for the Honolulu-Asia Aging Study in helping to set the future direction of this study of dementia and cognitive impairment in the Honolulu Heart Program cohort and other cohorts as well. Dr. Launer received her Ph.D. in 1987 from Cornell University in nutritional epidemiology. This background in nutrition positions Dr. Launer to contribute to the epidemiology of neurodegenerative disease, since there is likely a genetic-environmental interaction that results in early life experiences affecting late life diseases. Most recently, Dr. Launer has held positions with Erasmus University Medical School and the National Institute for Public Health in The Netherlands. She has worked extensively with the EURODEM Study, a collaborative study of risk factors for dementing diseases in Europe and the AMSTEL study of cognitive function and dementia in community-dwelling elderly in Amsterdam. With her knowledge of the current frontiers, we believe Dr. Launer will contribute significantly to research progress in aging and AD in the next century.

Jerry Hartman has joined NIA as our new Budget Officer. Mr. Hartman is a former employee of the Army Corps of Engineers where he was Chief, Resources and Analysis, in the Directorate of Real Estate. He has 20 years experience in the budget arena, and brings to NIA a broad background in finance and management.

Richard (Dick) Woodbury, Ph.D. will be working with the demography and economic unit of the Behavioral and Social Research Program (BSR) on a part-time IPA assignment through June 1999. Dr. Woodbury will be developing new Demography and Population Epidemiology and cross-BSR initiatives, working on issues in database development and research dissemination, and will be helping to revitalize the Federal Forum on Aging-Related Statistics. Dr. Woodbury received a Ph.D. in economics from Harvard University in 1991, was Managing Director of the Aging and Health Programs at the National Bureau of Economic Research (NBER) from 1989 to 1997 and was Executive Director of the NBER Aging Center from 1994 to 1997. He continues to direct the Research Dissemination Core of the NBER Demography Center while serving as Executive Director of the Maine Center for Policy Research.

Minoru S. H. Ko, M.D., Ph.D., has joined the Intramural Research Program's (IRP) Laboratory of Genetics as head of the Developmental Genomics and Aging Section. Before coming to NIA, he was a tenured Associate Professor at the Center for Molecular Medicine & Genetics, Department of Internal Medicine at Wayne State University, Detroit, Michigan. Dr. Ko received his M.D. and Ph.D. at Keio University School of Medicine, Tokyo, Japan in 1986 and 1991, respectively. Dr. Ko has developed novel methods for systematic analyses of many genes and

has directed a program for isolating, sequencing, and mapping many thousands of previously unknown mouse genes. He studies early mammalian development in the mouse as a model system, particularly focusing on the differentiation of immortal embryonic cells to mortal cells and on germ cell and early organ development.

Mary Jo Hoeksema is NIA's new Legislative Officer. Ms. Hoeksema holds an M.P.A. from George Washington University and a B.A. from the University of New Mexico. She has worked at NIH since 1995, serving first as a Presidential Management Intern and then as Special Assistant to the Director in the NIH Office of Policy for Extramural Research Administration. She has also worked as a Congressional staff person in both the House and Senate.

INSTITUTE-SPONSORED MEETINGS, WORKSHOPS, CONFERENCES AND PUBLIC INFORMATION ACTIVITIES

A NIA Biospecimen Repository Policy Meeting

A NIA Biospecimen Repository Policy meeting was held on November 13, 1998. Several extramural investigators, including Dr. Gerry McClearn and NACA member Dr. William Hazzard, participated in a policy discussion in which various recommendations were made for the establishment and operation of a NIA biospecimen repository, and for encouraging biospecimen repositories for appropriate NIA-supported clinical or epidemiological studies. (Contact: Dr. Frank Bellino, BAP, 301-496-6402)

Conference: Can Managed Care Help Older Persons Live Well With Chronic Conditions?

As the number of Americans aged 65 and older grows, their health concerns are beginning to put pressure on health care systems to prevent and better manage potentially costly chronic conditions. In anticipation of increased demand for effective behavioral programs and services to increase older patients' collaboration in the management of their conditions, the National Institute on Aging, in partnership with the Health Care Financing Administration and the Center for the Advancement of Health, convened a meeting in October 1998 to examine the current science and practice of self-management interventions for older persons with chronic conditions. The meeting brought together behavioral scientists, managed care decision-makers, clinicians, and clinical quality improvement experts to discuss strategies to enhance the effectiveness and availability of self-management programs for older people with chronic conditions. A major focus was identifying the tools and techniques of behavioral self-management that could improve outcomes and prevent or reduce costly health care.

Participants addressed three questions: 1) What do we know about the effectiveness of self-management interventions with respect to health care outcomes, patient satisfaction, and cost-effectiveness? 2) What is needed to facilitate the integration of self-management programs in managed care settings? and 3) Are there models and approaches to self-management that are ready for testing in managed care settings? Conference participants made specific recommendations about needed research. A conference report will be forthcoming in 1999. (Contact: Dr. Marcia Ory, BSR, 301-402-4156)

Symposium: Genetics of Aging: Advances and Trends

The NIA held an inaugural symposium, "Genetics of Aging: Advances and Trends" on September 11 to mark the opening of new facilities for its Laboratory of Genetics. Eight geneticists discussed a variety of approaches to analyze the genetic basis for aging.

The program included discussions on the development of predictive theories of cellular and organismal aging, approaches to human premature aging syndromes and to aging in model organisms, and the impact of the new genomics on the understanding of the interplay of human development and aging. The presentations spanned the range of modern studies of gerontology. The field is young enough to be within living memory of premier practitioners, and two of them, Drs. Robin Holliday and Leonard Hayflick, gave a historical perspective in their comments on meiosis, recombination, and cellular senescence in relation to cancer and physiology, and the limited lifespan of fibroblasts. The program continued with presentations by six investigators funded by NIA. Dr. David Schlessinger, Chief of the NIA Laboratory of Genetics, concluded with some of the recent studies of "Developmental Genomics and Aging" in the Laboratory.

The NIA Laboratory of Genetics was established in September 1997. The goals of the lab are based on the view that aging has genetic determinants as an integrated part of human development. Units headed by Drs. David Schlessinger, Minoru Ko, Weidong Wang, and Ramaiah Nagaraja are studying transitions between immortal and mortal cells; cohorts of genes involved in the specification of selected "nonrenewable" systems, including skin appendage and pronephros-kidney development; and genes involved in embryonic events that prefigure aging-related phenomena like premature ovarian failure. (Contact: Dr. David Schlessinger, GRC, 410-558-8337)

Symposium: Glial Cells in Aging and Neurodegeneration

The Neuroscience and Neuropsychology of Aging Program sponsored a symposium on "Glial Cells in Aging and Neurodegeneration" on November 7, 1998. This symposium was an ancillary event to the 28th Annual Meeting of the Society for Neuroscience held in Los Angeles, California. Glial cells have been implicated in a variety of adaptive functions in the nervous system, and changes in glial cell function may contribute to the vulnerability of brain cells to excitotoxicity and age-related neuronal dysfunction. The symposium featured six speakers who presented recent research findings on glial cell death, myelin deterioration, neuroinflammatory processes, astroglial glutamate transporters, and the involvement of glia in the pathogenesis of AD, frontotemporal dementia, and amyotrophic lateral sclerosis. (Contact: Dr. Bradley Wise, NNA, 301-496-9350)

Conference: What is Sleep? What is it Good For?

The NIA, along with the NHLBI, NIMH, and NSF, cosponsored a conference on "What is Sleep? What is it Good For?", November 30-December 2, 1998. The goals of this conference were to further our understanding of (1) the physiological processes at genetic, molecular, cellular, and systems levels that underlie sleep and wakefulness, and (2) the reasons why sleep is important for the health and survival of the organism. (Contact: Dr. Andrew Monjan, NNA, 301-496-9350)

Workshop: Biology of Noise-Induced Hearing Loss

The NIA, along with the NIDCD, NIEHS and NIOSH, cosponsored a workshop on “Biology of Noise-Induced Hearing Loss”, December 10 and 11, 1998. The current state of knowledge of the basic physiological, anatomical and biochemical mechanisms underlying noise-induced hearing loss was assessed, and recommendations for further areas of study were made. Some of the issues raised include: the relationship between aging per se and noise exposure through the lifespan, factors determining individual susceptibility to noise-induced hearing loss (e.g., genes, environmental toxins, medical history), protection by neurotrophic factors, and use of animal models and in vitro systems. (Contact: Dr. Judith Finkelstein, NNA, 301-496-9350)

Public Information Activities (contact PIO at 301-496-1752)

Discovery Crew Visits NIH

The “Magnificent Seven” – also known as the crew of Space Shuttle Discovery – packed the house (and several overflow rooms) at NIH on January 8, 1999 for a video and slide show presentation chronicling their October 29-November 7 journey. U.S. Secretary for Health and Human Services, Secretary Donna Shalala delivered the event’s opening remarks saying that 37 years ago astronaut and former Senator John Glenn “showed us the way to the heavens. Now he is helping show us the way to age.” The event was coordinated by the NIA Public Information Office and hosted by NIA Director, Dr. Richard Hodes.

Science Writers Seminar on Dementia and Alzheimer’s Disease

On October 14, 1998, the NIA teamed up leading researchers on dementia and AD with top science and health writers for a day-long seminar. Journalists from *Science*, *Nature*, *The Economist*, and *The Los Angeles Times*, among others, heard the latest thinking in the field from: Dr. Marcelle Morrison-Bogorad of NIA, Dr. Marilyn Albert of Harvard Medical School, Dr. Thomas Bird of the Veterans Administration Puget Sound, Dr. Stanley Prusiner of the University of California at San Francisco, Dr. Dennis Selkoe of Harvard Medical School, Dr. Leon Thal of the University of California at San Diego, Ms. Lisa Gwyther of Duke University, and Ms. Judith Riggs from the Alzheimer’s Association.

NIA Information Center

The NIA Information Center is in its third contract year. The call volume over the last four months has increased dramatically with the production of our exercise guide. During this time, the IC has distributed 64,204 copies of the exercise guide with the highest daily volume reached on October 15 when the Center responded to 1,692 publications requests on one day.

Alzheimer’s Disease Clinical Trials Database-Demo Site Operational

The Public Information Office, in cooperation with the Food and Drug Administration’s Office of Special Health Issues, has created a unique, clinical trials database of promising compounds to treat AD. The database is designed and will be developed to help encourage research participation by the public. It is expected to attract participation of drug developers in both the public and private sectors. A searchable, prototype version containing 11 protocols funded by the National Institutes of Health (NIH) is online at <http://test.jbs1.com/newadear>. You are invited to visit the site and give us your comments and suggestions.

Progress Report on Alzheimer's Disease, 1998

The *Progress Report on Alzheimer's Disease, 1998* highlights findings from AD research at NIA and eight other NIH Institutes. Research falls into three overlapping areas: causes/risk factors, diagnosis, and treatment/caregiving. The report summarizes information about genetic factors in AD and advances in understanding, diagnosing, treating, and preventing AD. It includes a research outlook for the coming year and lists 95 references.

Two New Fact Sheets

Estrogen and Alzheimer's Disease and *Ginkgo Biloba* are the latest fact sheets in the ADEAR Center's series, written for the public. Because each of these naturally occurring substances has been mentioned in the popular press as potentially offering protective effects against the development of AD, NIA released these fact sheets to summarize what researchers know so far and where the public can seek further information.

Alzheimer's Disease Update: New Thinking on Risks, Causes, and Treatments

An information package, based on eight presentations at NIA's Briefing for Health Journalists on October 14, is available from the ADEAR Center. The package contains background papers, reading lists, and edited, videotaped presentations in which NIA staff and leading investigators briefed science and health writers from national print publications. The areas discussed are: Introduction–Alzheimer's Disease Update; Clinical Aspects of Dementia; Genetic Factors; Prions and Implications for Neurodegenerative Disease; Etiology and Mechanisms; Clinical Trials; Behavioral and Social Aspects–Focus on Families; and A Look at the Future. These print materials will be packaged with three 90-minute VHS cassettes and priced for use in training settings and libraries.

GENERAL INFORMATION

Modular Grant Application and Award Procedures

NIH is expanding the use of modular grant application and award procedures. The modular initiative is designed to streamline the application, review, and award process, and to concentrate the focus of investigators, their institutions, reviewers, and NIH staff on science.

In applications following the modular procedure, total direct costs up to \$250,000 will be requested in \$25,000 increments. Budget requests will no longer be presented in detailed categories. Types of mechanisms that are affected include: Small Business Technology Transfer grants Phase 1 and Small Business Innovation Research grants Phase 1 (beginning April 1999), Academic Research Enhancement Awards (beginning with May 25, 1999 receipt date), and all competing individual research project grants, small grants, and exploratory development grants (beginning with June 1, 1999 receipt date). RFAs requesting applications of \$250,000 or less will also follow modular procedures. Therefore, beginning with the January 2000 Council round the majority of applications being considered for funding will use the modular format.

Typically an application will request the same number of modules for each year, with no escalation for future years. However, budget changes (such as equipment purchases or large

subcontracts) can be accommodated by varying the number of modules requested in different years. Review groups will evaluate the overall budget, suggest budget issues to be handled by NIH staff, or recommend budgetary changes in modules.

REQUESTS FOR APPLICATIONS/PROPOSALS AND PROGRAM ANNOUNCEMENTS

Initiatives with Targeted Receipt Dates

Alzheimer's Disease Core Centers AG-99-002

January 29, 1999

Contact: Dr. Creighton Phelps (301) 496-9350

Alzheimer's Disease Core Centers (ADCCs) are designed to provide core resources to facilitate research in AD. They will enhance ongoing research by bringing together biomedical, behavioral, and clinical science investigators in a manner that will enrich the effectiveness of research on the etiology, pathogenesis, diagnosis, treatment, and prevention of AD, and ultimately improve health care delivery. The ADCCs will also foster the development of new lines of research and provide a suitable environment for fellows and junior faculty to acquire research skills and experience in interdisciplinary AD research. ADCCs are required to include administrative, clinical, neuropathological, and information transfer cores. Other cores can be proposed. ADCCs will fund, in addition, at least two pilot research projects per year. Core support for research projects funded by other mechanisms will be provided.

Application Receipt Date: May 14, 1999

Centers for Mind/Body Interactions and Health OD-99-005 (Announced with NCI, NHLBI, NIAAA, NIAMS, NICHD, NIDCR, NIDA, NIGMS, NIMH, NINDS, NINR & OBSSR)

January 22, 1999

Contact: Dr. Marcia Ory (301) 402-4156

Invites applications for Specialized Center Grants (P50) grants to encourage behavioral, psychological, social, and biomedical research on the interrelationships among cognition, emotion, biological processes, and physical health. Applications are encouraged to foster interdisciplinary research on the interactions among the mind and body in health and disease, and to propose research topics ranging from basic research to those involving clinical applications.

Application Receipt Date: April 23, 1999

Phenotyping the Mouse Nervous System and Behavior MH-99-006 (Announced with NIAAA, NIDA, NIDCD, NEI, NIMH & NINDS)

January 22, 1999

Contact: Dr. Bradley Wise (301) 496-9350

Solicits applications for research projects to develop objective and standardized criteria and new, cost-effective, high-throughput phenotyping tools and methods to assess specific components of nervous system function and complex behaviors in the laboratory mouse. This RFA is part of a

broader NIH initiative to support large-scale functional genetic studies and characterize the murine nervous system and behavior. Techniques and data generated under this RFA will be available to support this broader initiative.

Application Receipt Date: April 28, 1999

Innovative Approaches to Prevention of Obesity DK-99-010 (Announced with NHLBI, NICHD, NIDDK, NRWH & ODP)

January 22, 1999

Contact: Dr. Chhanda Dutta (301) 435-3048

Invites applications for pilot studies to explore interventions for prevention of obesity in high risk individuals or populations. Applications incorporating unique cultural or social features specific for women or for special populations defined by race/ethnicity and/or socioeconomic status are encouraged.

Application Receipt Date: April 27, 1999

NIA Pilot Grant Program Announcement PA-99-049

January 22, 1999

Contact: Dr. Robin Barr (301) 496-9322

The NIA is seeking small grant (R03) applications in specific areas to: (1) stimulate and facilitate the entry of promising new investigators into aging research, or (2) encourage established investigators to enter new targeted, high priority areas in this research field. This program provides support for pilot research that is likely to lead to a subsequent individual research project grant (R01) and/or significant advancement of aging research.

Application Receipt Date: March 16, July 17, November 17, 1999

January 22, 1999

Contact: Dr. Creighton Phelps (301) 496-9350

Alzheimer's Disease Research Centers (ADRCs) are designed to serve as shared research resources to facilitate research in AD. ADRCs are expected to provide core resources which will enhance ongoing research by bringing together biomedical, behavioral, and clinical science investigators in a manner that will enrich the effectiveness of research on the etiology, pathogenesis, diagnosis, treatment, and prevention of AD, and ultimately improve health care delivery. The ADRCs will also foster the development of new lines of research and provide a suitable environment for fellows and junior faculty to acquire research skills and experience in interdisciplinary AD research. ADRCs are required to include administrative, clinical, neuropathological, and information transfer cores. Other cores can be proposed. ADRCs will fund, in addition, full research projects (equivalent to small R01 grants) and at least two pilot research projects per year.

Application Receipt Date: May 19, 1999

Research on Care at the End of Life NR-99-004 (Announced with NCI, NCCAM, NIAID, NIDCR, NIMH, NINDS, NINR & AHCPR)

January 22, 1999

Contact: Dr. Sidney Stahl (301) 402-4156

Invites research applications that will generate scientific knowledge to lead to improved care for those at the end of life. Applications may include basic, clinical, or health care studies focused on the clinical management of physical and psychological symptoms, patient-provider and patient-family communication, ethics and clinical decision-making, caregiver support, or the context of care delivery for those facing life-limiting illnesses. The purpose of this initiative is to generate research that will improve the quality of dying for Americans and decrease the distress for their caregivers.

Application Receipt Date: May 21, 1999

Phenotypic Characterization of Sleep in Mice HL-99-001 (Announced with NHLBI, NIMH & NINDS)

December 18, 1998

Contact: Dr. Andrew Monjan (301) 496-9350

The primary goal of this initiative is to advance our understanding of sleep and wakefulness by developing improved molecular, cellular, and systems approaches to investigate sleep and circadian phenotypes in mice. Better and more extensively-characterized mouse models will help determine the genetic underpinnings of sleep and wakefulness, elucidate the physiological role of sleep, and develop new directions for the treatment of sleep disorders. Establishing inbred mice strains as a platform for sleep studies will advance our understanding of normal sleep phenotypes, and facilitate the use of targeted and transgenic gene modification approaches. Application Receipt Date: February 26, 1999

Technologies for Gene Expression Analysis in the Nervous System NS-99-003

(Announced with NCCR, NEI, NHGRI, NIAAA, NICHD, NIDCD, NIDA, NIEHS, NIMH & NINDS)

December 11, 1998

Contact: Dr. Bradley Wise (301) 496-9350

The purpose of this Request for Applications (RFA) is to solicit applications for research grants to develop new technologies or refine established technologies for gene discovery and gene expression analysis in the nervous system. Methods of interest include, but are not limited to: 1) isolation of mRNA from single cells or small cell populations; 2) creation of high quality cDNA libraries from small amounts of tissue; 3) high throughput methods for quantifying the expression of large numbers of genes; 4) methods for quantifying multiple spliced or edited variants of a given transcript; 5) methods for comparing protein levels to corresponding mRNA levels for a given transcript within a cell or tissue sample; and 6) techniques for visualizing RNA distribution within cells and tissues.

Application Receipt Date: March 18, 1999

Educational Workshops in Interdisciplinary Research OD-99-004

(Announced with NICHD, NIDCD, NINR & OBSSR)

November 25, 1998

Contact: Dr. Ronald Abeles (301) 594-5943

This request invites applications for educational project (R25) grants to develop and conduct short-term (1-2 weeks) educational workshops in interdisciplinary research aimed at social, behavioral, and biomedical researchers. Grant applications are requested that propose as their educational objective the integration of health research across various levels of analysis. These levels can include environmental, social, individual, organ system, cellular, and molecular levels. Application Receipt Date: March 12, 1999

Centers for Complementary and Alternative Medicine Research OD-98-008

(Announced with NCI, NHLBI, NIAMS, NIDR, NINDS & OAM)

September 25, 1998

Contact: Dr. Marcia Ory (301) 402-4156

Applications are invited for Centers for Complimentary and Alternative Medicine (CAM) research using the Specialized Center (P50) grant mechanism. Such Centers will provide the resources necessary for the rigorous scientific investigation of CAM. It is expected that research conducted at these Centers will examine their effect on major disease, health and wellness; the potential efficacy, effectiveness, safety and validity of CAM practices; and the physiological or psychological mechanisms underlying these practices.

Application Receipt Date: January 22, 1999

NEW ONGOING INITIATIVES

NIA and NINDS Alzheimer's Disease Clinical Trials Planning Grant PA-99-039

January 14, 1999

Contact: Dr. Neil Buckholtz (301) 496-9350

The purpose of this initiative is to stimulate the development of research grant applications for clinical trials planning grants directed toward the treatment of the cognitive and behavioral symptoms of AD.

NIA and NINDS Alzheimer's Disease Pilot Clinical Trials PA-99-038

January 14, 1999

Contact: Dr. Neil Buckholtz (301) 496-9350

The purpose of this initiative is to stimulate the development of research grant applications for pilot clinical drug trials directed toward the treatment of the cognitive and behavioral symptoms of AD.

Drug Discovery for the Treatment of Alzheimer's Disease PAS-99-034

January 8, 1999

Contact: Dr. Neil Buckholtz (301) 496-9350

The purpose of this initiative is to stimulate research directed toward the discovery of novel compounds for the treatment of the cognitive impairment and behavioral symptoms associated with AD.

Impact of Aging on Development of Atrial Fibrillation PA-99-035

January 8, 1999

Contact: Dr. Andre Premen (301) 496-6761

The goal of this initiative is to foster research that will enhance our understanding of age-related structural and functional changes in the atria and their impact on the development of atrial fibrillation (AF) in older persons. This initiative is intended to foster clinically-related research, including integrative biomedical research, some of which may incorporate the tools of molecular and cell biology in the study of function and clinical outcomes. A long-term goal of this program is to provide the groundwork for the primary prevention of AF.

Aging as a Risk Factor for Multiple Primary Tumors PA-99-030 (Announced with NCI)

December 18, 1998

Contact: Dr. Rosemary Yancik (301) 496-5278

This announcement is for grant applications for studies to define the magnitude and nature of the problem of multiple primary tumors and their association with advancing age and to develop biostatistical and etiologic methodologies for assessment of multiple primary tumors, with special emphasis in older-aged cancer patients. This program announcement encourages investigators to conduct research in epidemiology, methodology of disease classification, biostatistical methodology, gerontology, carcinogenesis, genetics, and environmental causes emphasizing the high-risk potential for people previously diagnosed with cancer to develop second primary tumors.

Jointly Sponsored NIH Predoctoral Training Program in the Neurosciences PAR-97-007

(Announced with NICHD, NIDCD, NIGMS, NIMH, NINDS & NINR)

November 6, 1998

Contact: Dr. Bradley Wise (301) 496-9350

This notice is to remind the scientific community of the ongoing Jointly Sponsored NIH Predoctoral Training Program in the Neurosciences (see PAR-97-007).

Request for Competing Applications from the NCI Clinical Trials Cooperative Groups to Conduct Clinical Studies on Older Cancer Patients (Announced with NCI)

October 23, 1998

Contact: Dr. Rosemary Yancik (301) 496-5278

This initiative solicits competitive cooperative agreement (U10) applications for up to 5 years of support from the adult NCI Clinical Trials Cooperative Groups to conduct clinical studies that promote the development of a knowledge base to produce new treatment strategies for older patients (65 years and older) with cancer. Investigators are encouraged to develop information on the complexities of treating patients who are likely to have concomitant age-related conditions and other diseases, and, on how these clinical challenges can be resolved to improve the care and treatment of older patients.

Biobehavioral Pain Research PA-99-021 (Announced with NCI, NCCAM, NIAMS, NICHD, NIDA, NIDCR, NHLBI, NIMH, NINDS & NINR)

November 27, 1998

Contact: Dr. Judith Finkelstein (301) 496-9350

The purpose of this program announcement is to stimulate and foster a wide range of basic and clinical studies on pain as they relate to the missions of these institutes. Applications are encouraged to study individual differences in pain responses which may be due to factors such as genetic differences, endocrine activity, neural activity, immune function, psychological state, disability state, age, gender, and cultural background.

Research on Tissue Engineering PA-99-024 (Announced with NIAMS, NICHD, NIDCD, NIDCR, NIDDK, NIGMS, NIMH, NINDS, NHLBI & NCRR)

December 4, 1998

Contact: Dr. Chhanda Dutta (301) 435-3048

The purpose of this Program Announcement is to stimulate and foster a wide range of basic and translational studies to: (1) develop optimal materials/designs for matrices/scaffolds; (2) better understand how matrices/scaffolds interact with cells and their surrounding tissues; (3) develop better animal models; and (4) validate and standardize the criteria for a successful repair/replacement of tissues and organs.

Mechanisms Underlying Individual Variations in Drug Responses PA-99-016

(Announced with NCI, NIGMS, NICHD, NIEHS, NIMH & NIAAA)

November 18, 1998

Contact: Dr. Stanley Slater (301) 496-6761

The purpose of this program announcement is to stimulate research into identifying the critical candidate proteins and/or genes that play essential roles in determining individual variations in drug responses. Pharmacogenetic/pharmacogenomic variation presents opportunities to a wide

range of researchers, working at levels ranging from the most molecular to the most clinical, in the fields of pharmacology, genetics, genomics, medicine, epidemiology, statistics, and computer science.

Bioengineering Research Grants PAR-99-009 (Announced with NCI, NCRR, NEI, NHGRI, NHLBI, NIAAA, NIAID, NIAMS, NICHD, NIDA, NIDCD, NIDCR, NIDDK, NIEHS, NIGMS, NIMH, NINDS, NINR & NLM)

October 30, 1998

Contact: Dr. Evan Hadley (301) 435-3044

This program is to support basic bioengineering research whose outcomes are likely to advance health or health-related research within the mission of the NIH. The application should propose to apply basic bioengineering design-directed or hypotheses-driven research to an important medical or biological research area. Bioengineering Research Grant (BRG) applications differ from Bioengineering Research Partnership (BRP) applications in that BRG applications will be funded as R01 awards, with the research generally to be performed in a single laboratory or involving a small number of investigators.

Bioengineering Research Partnerships PAS-99-010 (Announced with NCI, NCRR, NEI, NHGRI, NHLBI, NIAAA, NIAID, NIAMS, NICHD, NIDA, NIDCD, NIDCR, NIDDK, NIEHS, NIGMS, NIMH, NINDS, NINR & NLM)

October 30, 1998

Contact: Dr. Evan Hadley (301) 435-3044

This announcement is for basic bioengineering research applications that address important biological or medical research problems. A bioengineering research partnership is a multidisciplinary research team applying an integrative systems approach to developing knowledge and/or methods to prevent, detect, diagnose, and treat disease and understand health and behavior. The team must include bioengineering expertise in combination with basic and/or clinical investigators. Bioengineering Research Partnership (BRP) applications differ from the Bioengineering Research Grant (BRG) applications in that the BRP applications will be funded as R24 awards that support an interdisciplinary group of Partners who work together applying an integrative, multidisciplinary, systems approach to a significant area of basic bioengineering research.

NATIONAL INSTITUTE ON AGING
FY 1998 Actual / FY 1999 Appropriation / FY 2000 President's Budget
(Dollars in Thousands)

INCLUDES AIDS	FY 1998 Actual *		FY 1999 Appropriation *		FY 2000 President's Budget	
	No.	Amount	No.	Amount	No.	Amount
Research Grants						
Research Projects						
Noncompeting	693	\$236,397	761	\$235,534	784	\$273,643
Admin. Suppl	(113)	6,481	(110)	7,000	(110)	7,000
Competing	373	81,562	486	130,796	387	104,184
Subtotal	1,066	324,440	1,247	373,330	1,171	384,827
SBIR/STTR	52	11,731	58	13,110	59	13,485
Subtotal, RPG	1,118	336,171	1,305	386,440	1,230	398,312
Research Centers	59	63,916	61	70,400	61	70,400
Other Research:						
Research Careers	131	12,296	156	15,016	156	15,016
Cooperative Clin Rsch	0	147	3	1,139	3	1,139
MBRS		984		1,131		1,131
Other	21	1,615	25	2,059	25	2,059
Subtotal, Other	152	15,042	184	19,345	184	19,345
Total, Rsch Grants	1,329	415,129	1,550	476,185	1,475	488,057
Training:						
Individual	44	1,251	44	1,444	44	1,444
Institutional	505	12,940	495	14,875	495	14,875
Total, Training	549	14,191	539	16,319	539	16,319
R&D Contracts	48	21,662	53	28,089	53	29,089
Subtotal, EXTRAMURAL		450,982		520,593		533,465
Intramural Research		49,234		58,292		59,597
RMS		20,038		21,441		21,655
TOTAL		520,254		600,326		614,717

*FY 1998/FY 1999 made comparable to reflect budget neutral adjustment for change in clinical center assessment in FY 2000

Date: 2/1/99