



WAKE FOREST
UNIVERSITY

SCHOOL of MEDICINE

Department of Pathology
Section on Comparative Medicine
Wake Forest University Primate Center

WAKE FOREST
UNIVERSITY
TRANSLATIONAL SCIENCE
INSTITUTE

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Lytic Jorgenson, Ph.D.
Office of Science Policy,
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National Institutes of Health
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Re: The National Institutes of Health (NIH) Scientific Management Review Board (SMRB) meeting of the Translational Medicine and Therapeutics (TMAT) Working Group

To Whom It May Concern:

As one of the nation's oldest programs in comparative medicine, we offer the following statement in support of maintaining both the integrity of the **Division of Comparative Medicine** (DCM, a component of the National Center for Research Resources [NCRR]) and its close affiliation with the Clinical and Translational Science Award (CTSA) consortium. We believe that the DCM has made and continues to make substantial contributions to the NIH effort to improve public health through translational research as instantiated in the CTSA consortium (also a component of the NCRR). The DCM contribution includes its support for research and training in comparative medicine. The academic discipline of comparative medicine – as represented by our program and those at other universities and medical centers – is comprised of veterinary scientists and is based on the premise that suitable animal models can be developed and used to investigate diseases of public health relevance, including the chronic, degenerative, and infectious diseases that comprise the majority of the human health burden. Comparative medicine research is therefore inherently translational because it enables the movement of hypotheses derived from basic science and clinical and epidemiological investigations into animal platforms that can model probable human outcomes. Importantly, the conduct of such research requires both veterinary medical and research training to provide individuals with the knowledge to care for and effectively apply animal models to problems in human health. Through its programs, the DCM supports the development of animal models and insures their availability to the biomedical research community. Equally important, the DCM provides support to train each new generation of veterinary scientists, whose expertise and participation are necessary to facilitate the conduct of translational research.

Our own program in comparative medicine has been in existence since 1957 and has engaged in translational research since that time. Our studies have employed a wide array of animal models that has included pigeons, rabbits, mice, rats, ferrets, pigs, and sheep. Furthermore, nonhuman primates have been at the core of our research programs for almost 50 years. In this regard we were among the first researchers to assess the appropriateness of various Old and New World monkey species for

investigating the pathogenesis of atherosclerosis. Furthermore, we were the first group to begin large scale investigations evaluating the factors affecting the progression of atherosclerosis and coronary heart disease in female monkeys and, by implication, women. The expertise required to discover these models, to apply them to research problems, and to provide for their humane care was developed with the help of a series of NIH veterinary training and animal support grants. Originally sponsored by the Institute of General Medical Sciences, the support activities for comparative medicine have now been subsumed into the DCM. Included in these activities is our T32 post-DVM research training grant that is now in its 52nd consecutive year of funding. Notably, most of our T32 graduates and those of the other major programs in comparative medicine have gone on to conduct or facilitate research at many of the nation's academic medical centers.

It should also be noted that the DCM has been critical to our continued ability to integrate comparative medicine expertise and activities into the overall translational research effort represented by the CTSA consortium. For example, investigators from our program have used support from the DCM to engage in collaborative investigations with CTSA institutes at eight institutions: the University of Pittsburgh, University of Texas Health Science Center San Antonio, Washington University, Columbia University, Duke University, the University of Pennsylvania, the University of California San Francisco, and Albert Einstein College of Medicine at Yeshiva University. Moreover, the Wake Forest Primate Center – supported in part by funds from the DCM – is one of four asset centers integrated into the Wake Forest University Translational Science Institute. As such, it facilitates translational research in comparative medicine as part of the leadership and operational structure of the Institute.

In summary, the DCM nourishes and sustains academic comparative medicine and the animal models that enable medical advances to move along a translational continuum that ultimately ends with improved patient care and disease prevention. In view of its central role in translational research, we therefore support a strategy that would maintain the integrity of the DCM and its close affiliation with the CTSA consortium. Our recommendation is that the DCM should continue to be linked to the CTSA consortium if that consortium should be moved from the NCRR to a new NIH Institute or Center.

Respectfully,



Thomas B. Clarkson, DVM, DAACLAM
Professor of Comparative Medicine

On Behalf of:

The Section on Comparative Medicine (Department of Pathology), the Wake Forest University Primate Center, and the Wake Forest University Translational Science Institute