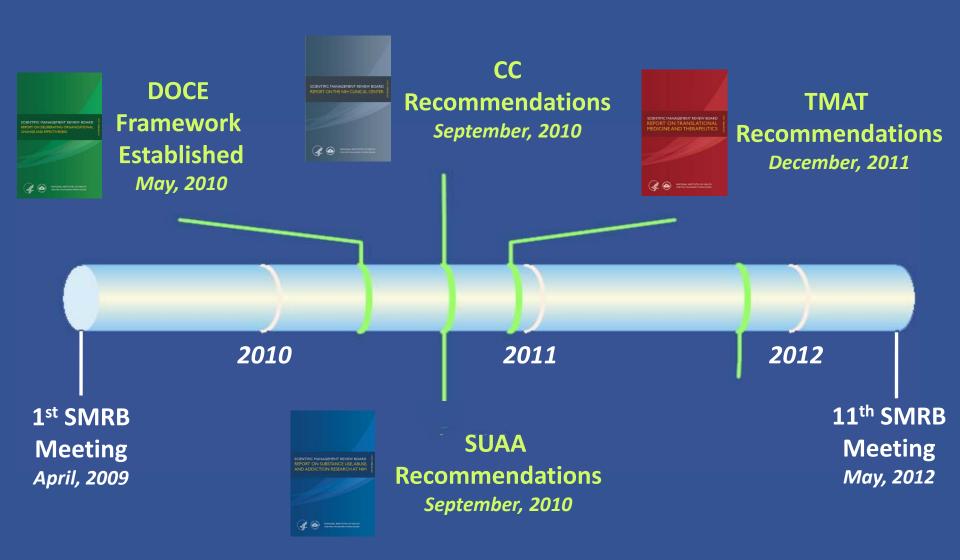
Implementing the Recommendations of the SMRB: NIH Update

Francis S Collins, MD, PhD

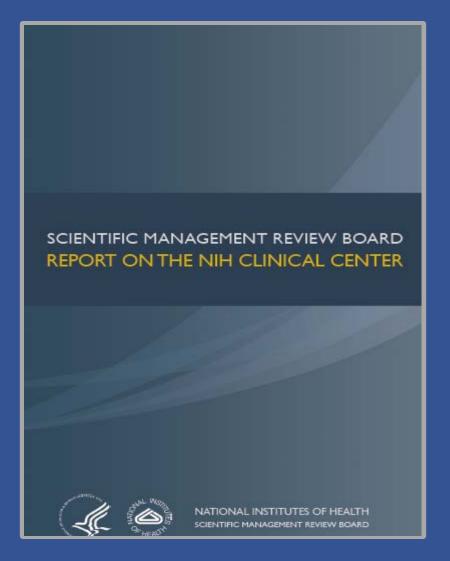
Director, NIH



SMRB RECOMMENDATIONS TO DATE



SMRB Recommendations: NIH Clinical Center



CHARGE: Provide an analysis of and recommendations regarding the fiscal sustainability and utilization of the NIH Clinical Center.

RECOMMENDATIONS: The NIH
Clinical Center [should] have an
expanded vision and role; a
streamlined governance
structure; and a stable,
adequate budget for fiscal
viability and sustainability.

Available at http://smrb.od.nih.gov/

SMRB Recommendations: NIH Clinical Center

Clinical Center Governing Board

- Charged with serving as a Board of Trustees to provide:
 - Strategic and operational oversight with the objective of facilitating high quality, cost effective clinical research
 - Budget recommendations that promote stable funding, consistent with the intent of the SMRB



SMRB Recommendations: NIH Clinical Center

CC-Extramural Collaborations Committee

- Charged with developing a FOA that promotes clinical research collaborations between intramural and extramural investigators
- June, 2012: Issued Notice of Intent to published
- August 2012: FOA to be published
- November, 2012: Scheduled receipt date for applications
- July-August, 2013: Awards to be issued

SMRB Recommendations: Substance Use, Abuse, and Addiction Research at NIH

CHARGE: Consider whether changes within NIH could further optimize research into substance use, abuse, and addiction.

RECOMMENDATIONS: Establish a new institute that encompasses all substance use, abuse, and addiction-related research and dissolve the independent existence of NIAAA and NIDA.

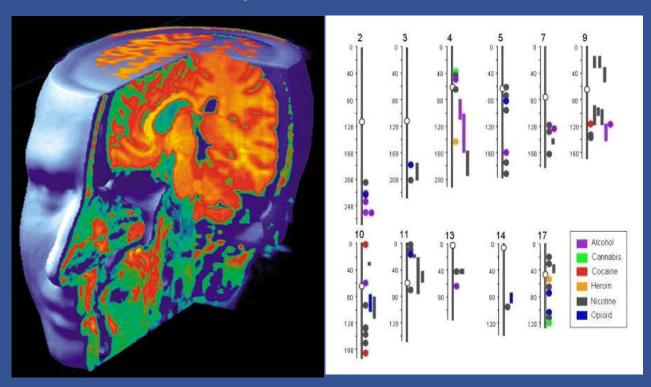


Available at http://smrb.od.nih.gov/

NIH Update: Substance Use, Abuse, and Addiction Research at NIH

"The formation of a single, new Institute devoted to such research makes scientific sense and would enhance NIH's efforts to address the substance abuse and addiction problems that take such a terrible toll on our society."

- Statement of NIH Director Francis Collins, MD, PhD, November 18, 2010



NIH Update: Substance Use, Abuse, and Addiction Research at NIH

- January–March, 2011: NIH Task Force formed to gather data and consult with IC scientific staff
- April 2011: NIH Task Force developed draft principles to guide reorganization
- By Fall, 2012: NIH Task Force & Strategic Planning Committee:
 - Complete SUAA portfolio analysis and develop a portfolio integration plan for public comment
 - Develop Scientific Strategic Plan including input from stakeholders
 - February, 8 2012 to May 11, 2012: Requests for Information (RFI)
 - Received 494 responses
 - April 2, 2012: Conducted a Web Meeting on the RFI
 - June/July 2012: Meetings with targeted sets of stakeholders

NIH Update: Substance Use, Abuse, and Addiction Research at NIH

- Fall, 2012
 - Release of Portfolio Integration Plan and public comment period
 - Release of Scientific Strategic Plan and public comment period
- December 2012: Final Recommendations to NIH Director
- January/February 2013:
 - Include in President's FY 2014 Budget
 - Begin implementing portions of Scientific Strategic Plan that are not dependent on reorganization
- October 2013 (FY 2014): Launch the new National Institute of Substance Use and Addiction Disorders (working name)

SMRB Recommendations: Translational Medicine and Therapeutics



CHARGE: Design a NIH network
 including a description of its
 attributes, activities, and
 functional capabilities - for
 advancing therapeutics
 development

RECOMMENDATIONS: Create a new NIH Center with the mission of supporting and strengthening translational medicine; evaluate its impact on other relevant programs at NIH, including NCRR.

Available at http://smrb.od.nih.gov/

NIH Update: Translational Medicine and Therapeutics - NIH NCRR Task Force

- Task Force concurred with SMRB, concluding that many programs remaining in NCRR following the CTSAs transfer would benefit from enhanced scientific adjacency in other ICs
- January, 2011: Straw model, informed by input from NCRR leadership and NCRR subject matter experts – released for comment
- February, 2011: Task Force reported results of its analysis to the SMRB
- March, 2011: Final recommendations issued to NIH Director
- December, 2011: NCRR officially dissolved by the enactment of the Consolidated Appropriations Act of 2012 (P.L. 112-74)

NIH Update: Translational Medicine and Therapeutics – NIH NCRR Task Force

PLACEMENT	PROGRAM
NCATS	Clinical and Translational Science Awards (CTSA)
NHLBI	Gene Vector Repository
NIBIB	 Imaging and Point-of-Care Biomedical Technology Research Centers (BTRC) grants Biomedical Imaging and Point-of-Care research grants for Technology Research and Development and SBIR/STTR grants
NIGMS	 Institutional Development Awards (IDeA) All other BTRC grants All other research grants for Technology Research and Development, and the SBIR/STTR and BIRN network grants
NIMHD	Research Centers in Minority Institutions program (RCMI)
OD - Office of Research Infrastructure Programs	 Comparative Medicine Program Extramural Construction and Animal Facilities Improvement Shared and High-End Instrumentation Science Education Partnership Awards (SEPA)

NIH Update: Translational Medicine and Therapeutics

Creation of the new National Center for Advancing Translational Sciences (NCATS)

- Established on December 23, 2011
- Part of Consolidated Appropriations Act 2012 (PL 112-74)





NCATS: Pursuing Opportunities for Disruptive Innovation



"To catalyze the generation of innovative methods and technologies that will enhance the development, testing, and implementation of diagnostics and therapeutics across a wide range of human diseases and conditions."

http://ncats.nih.gov/

NCATS: Imported Programs and Initiatives

Clinical and Translational Science Activities

Clinical and Translational Science Awards

Rare Diseases Research and Therapeutics

- Therapeutics for Rare and Neglected Diseases
- Office of Rare Diseases Research

Re-engineering Translational Sciences

- NIH Chemical Genomics Center
- Bridging Interventional Development Gaps
- Toxicology in the 21st Century

NCATS: New Initiatives Underway

Tissue Chip for Drug Screening



- Constriction Point: Low concordance between animal-human tox.
- Innovative Approach: Develop chip mimicking human physiology for better prediction of drug safety and efficacy

Rescuing and Repurposing

- Constriction Point: Lengthy, complex process for gaining access to compounds
- Innovative Approach: Match pharma compounds with NIH scientists' ideas for new uses



Target Validation



- Constriction Point: No systematic process for identifying targets
- Innovative Approach: Develop new tools and methods to efficiently identify druggable targets

NCATS: Moving Forward

- Replace Acting Leadership
- Convene Advisory Council and CAN Board
- Issue new RFAs in June for
 - CTSAs
 - Therapeutic Discoveries Program
- Conduct IOM studies:
 - CAN review by Drug Development Forum (June 4-5, 2012)
 - CTSA review (late 2012)

SMRB Recommendations











Turning Discovery Into Health



