

The American Recovery and Reinvestment Act of 2009 (ARRA)

NIAID Plans for ARRA Funds

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Director

National Institute of Allergy and Infectious Diseases

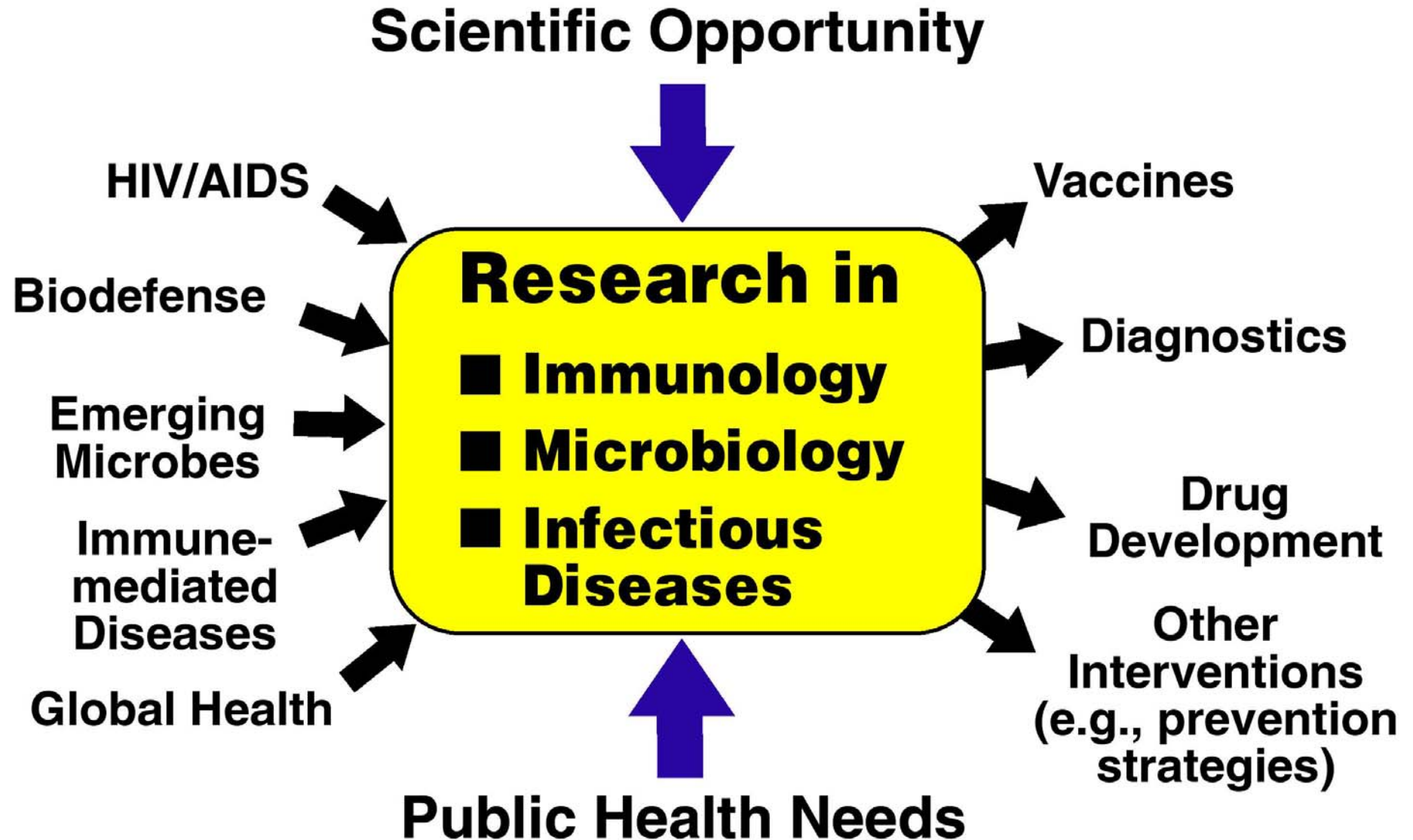
National Institutes of Health

June 1, 2009



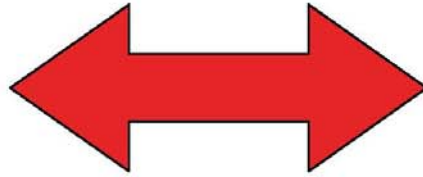
National Institute of Allergy and Infectious Diseases (NIAID)

National Institutes of Health (NIH)



NIAID Research: A Dual Mandate

Maintain and “grow” a robust basic and applied research portfolio in microbiology, infectious diseases, immunology and immune-mediated diseases



Respond rapidly to new and emerging disease threats



New/Improved Interventions

American Recovery and Reinvestment Act of 2009 (ARRA): Funding Goals

- **Stimulate the economy**
- **Create and preserve jobs**
- **Advance biomedical research**

NIH Plans for ARRA Funds

- **\$10.4B to be spent over two years (FY 2009/FY 2010)**
- **NIH will distribute among 27 ICs/Offices**
 - **\$7.4B - ICs for scientific research priorities**
 - **\$800M - NIH Office of the Director (includes \$200M for Challenge Grants)**
 - **\$1.0B - NCRR for extramural construction, repairs, and alterations**
 - **\$300M - NCRR for shared instrumentation and other capital equipment**
 - **\$500M - NIH buildings and facilities**
 - **\$400M - Comparative Effectiveness Research**

NIAID Plans for ARRA Funds

- **NIAID allocation of ARRA Funds: \$1.11B**
- **Support unfunded RPGs from FYs 2008-2009**
- **1-2 years of funding**
- **R01 or Bridge Award**
 - 12th to 25th percentile
- **R21/R03**
 - 200 priority score
- **Participation in NIH-wide ARRA programs**
- **NIAID Signature Projects**

NIAID Participation in NIH-wide ARRA Programs

■ Challenge Grants

- Explore the earliest events in HIV infection**
- Develop diagnostics and drugs for MDR/XDR TB**
- Develop drugs for neglected tropical diseases**
- Explore novel methods in mucosal immunology**
- Characterize human immune response to infection/immunization**

■ Grand Opportunities (“GO” Grants)

- Develop medical countermeasures for radiological/nuclear threats**

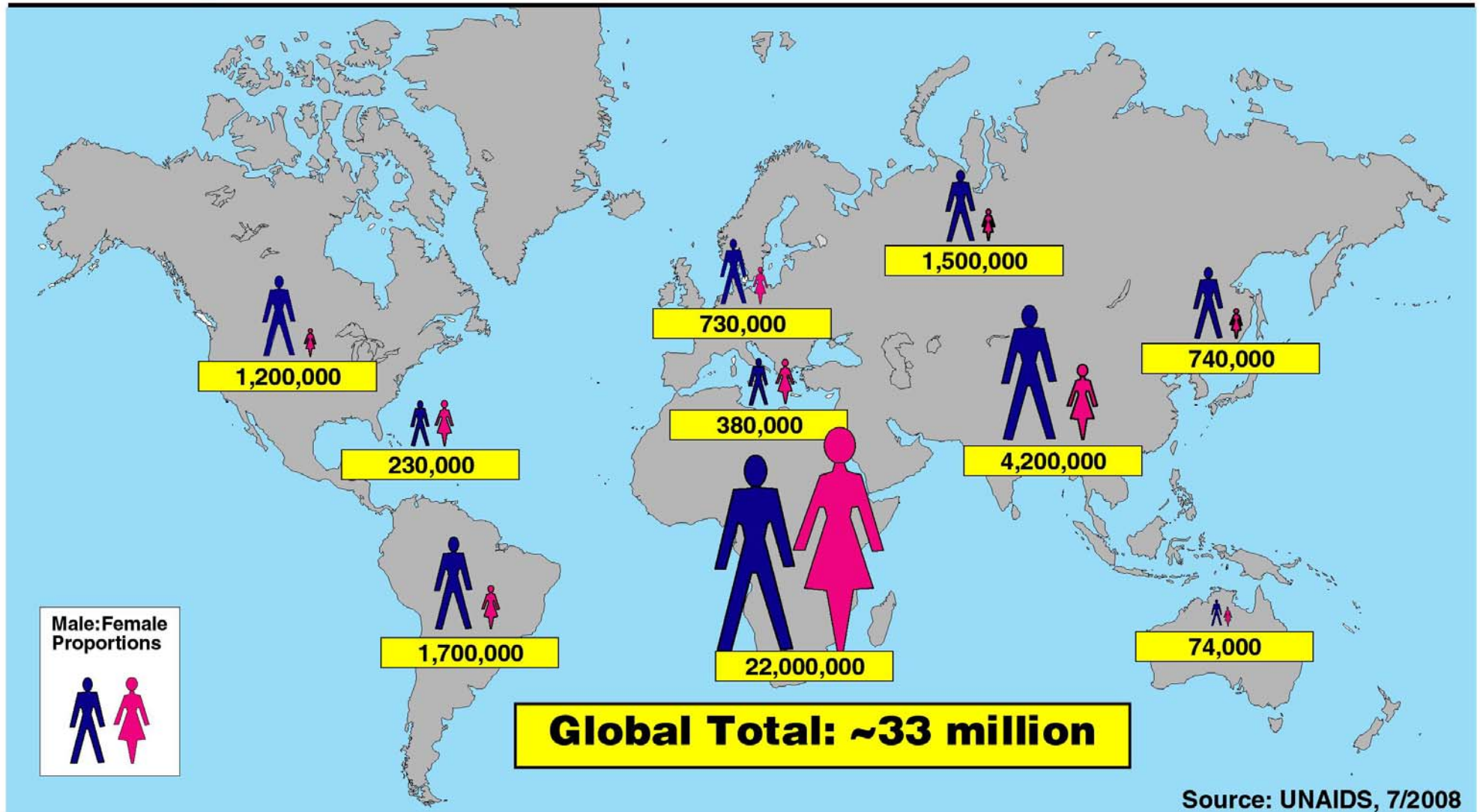
NIAID Signature Projects

- **Stopping the HIV Pandemic**
- **Protection of Human Health by Immunology and Vaccines**
- **Biodefense and Emerging Infectious Diseases:**
 - **Expanding Research Capacity through the Regional Centers of Excellence**
 - **Developing Partnerships to Translate Research into Products**

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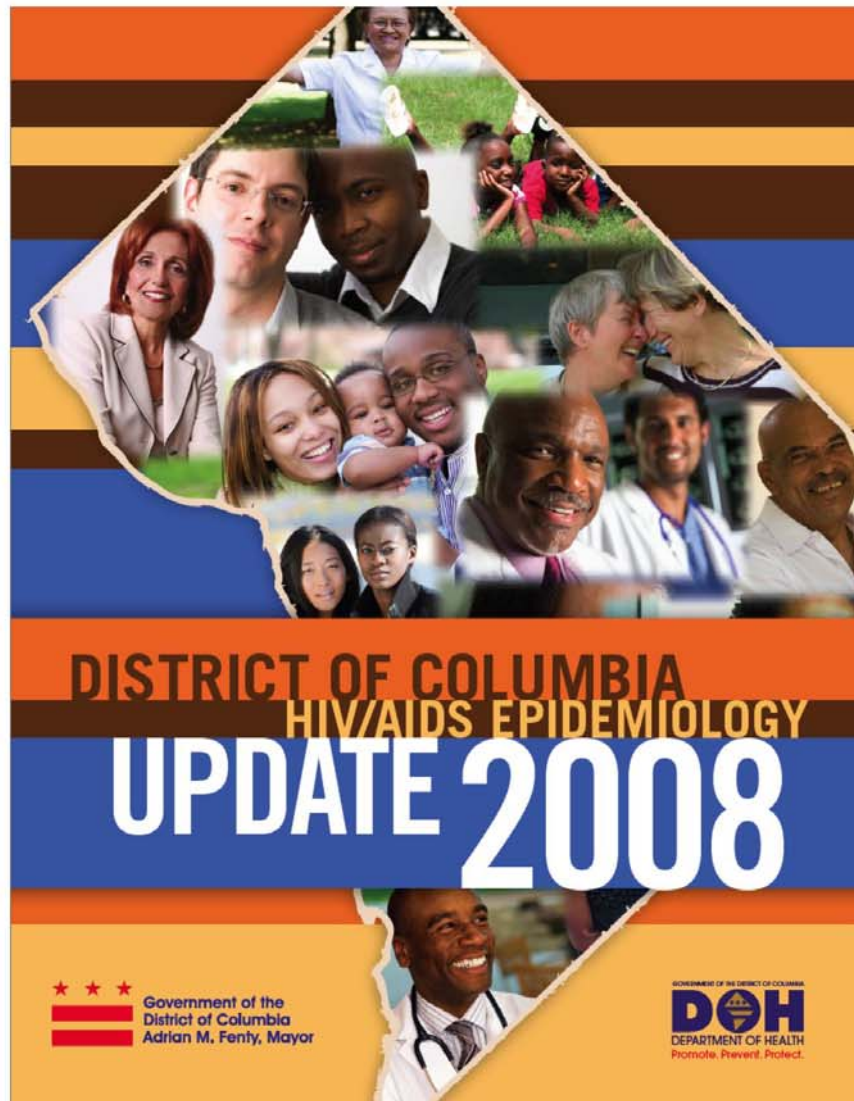
Adults and Children Estimated to be Living with HIV, 2007



HIV/AIDS in the United States

- **562,793 cumulative deaths**
- **~1.1 million living with HIV**
 - **21% unaware of their infection**
- **~56,300 new infections in 2006**
 - **53% male-to-male sexual contact, 31% heterosexual contact**
 - **45% blacks, 35% whites, 17% Hispanics**
 - **incidence rate among blacks 7 times higher than whites**

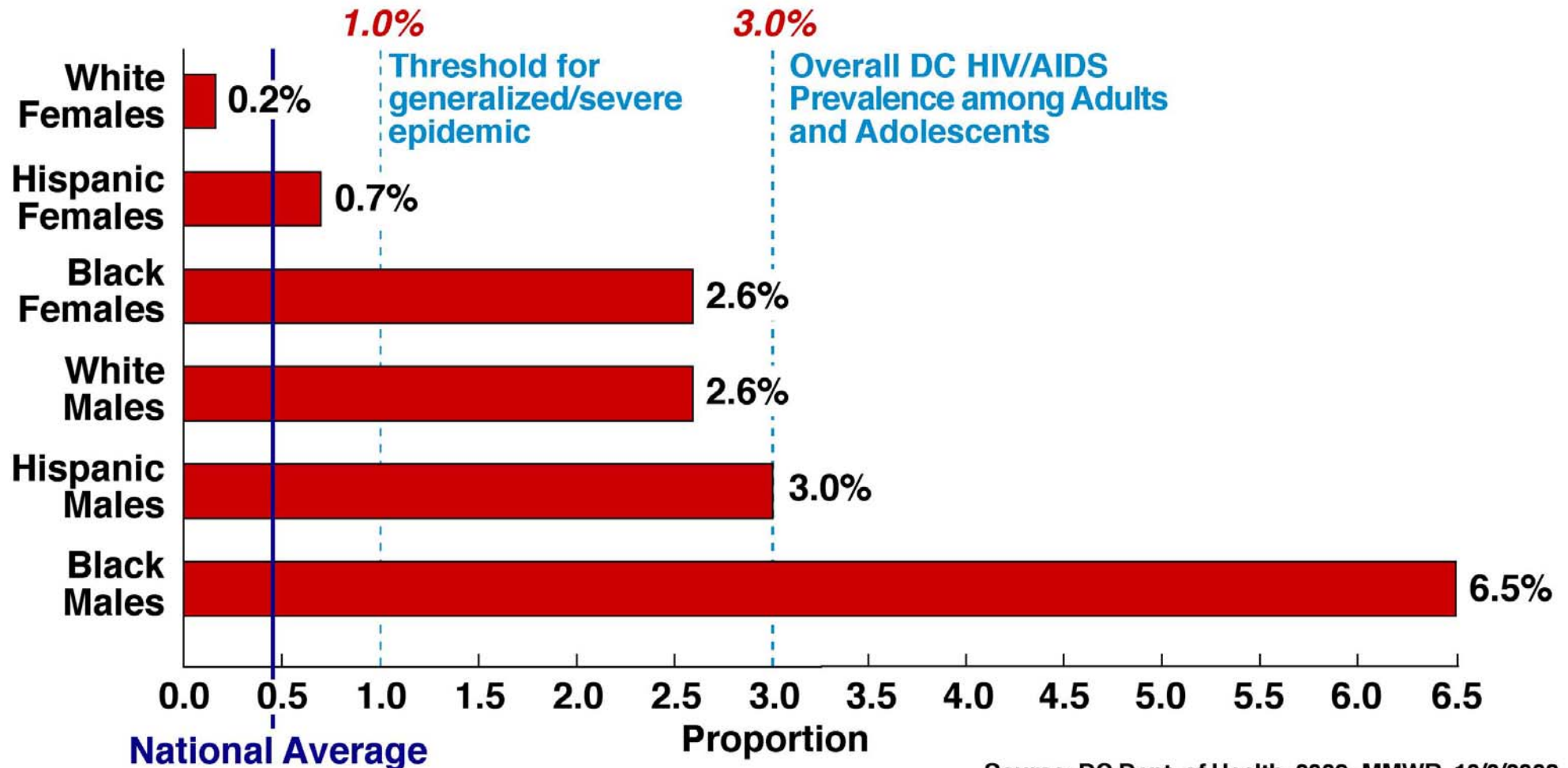
HIV/AIDS in Washington, DC



- ~3% of adults and adolescents in District living with HIV/AIDS, end-2007
- An underestimate, as between 1/3 and 1/2 of DC residents may be unaware of their HIV infection status

Report released 3/16/2009

Proportion of Washington, D.C. Adults and Adolescents Living with HIV/AIDS by Race and Sex, End-2007



Source: DC Dept. of Health, 2009; MMWR, 10/3/2008

The Washington Post

April 16, 2009

A Policy Cocktail for Fighting HIV

By Anthony S. Fauci

Three-pronged approach to curbing HIV/AIDS pandemic:

- **Pre-exposure prophylaxis of high-risk individuals with antiretroviral therapy (PrEP)**
- **Universal, voluntary testing/immediate antiretroviral therapy (“test and treat” approach)**
- **Cure/functional cure research**

The Promise of Pre-Exposure Prophylaxis (PrEP)

- **Well-established tool for preventing other infectious diseases, e.g. malaria**
- **ARVs proven to prevent mother-to-child HIV transmission, and as post-exposure prophylaxis**
- **Generally positive NHP data with tenofovir +/- emtricitabine, drugs with long-half lives, good safety profiles, high genetic barrier to resistance (tenofovir)**
- **Promise of good acceptability -- PrEP inhibits HIV without requiring change in sexual habits**



Voluntary “Test and Treat” Concept

THE LANCET

Available online November 27, 2008

Universal Voluntary HIV Testing with Immediate Antiretroviral Therapy as a Strategy for Elimination of HIV Transmission: a Mathematical Model

RM Granich et al.

- **Model indicates that universal and annual voluntary HIV testing followed by immediate antiretroviral therapy treatment (irrespective of clinical stage or CD4 count) could reduce new HIV cases by 95% within 10 years**
- **Concerns: feasibility, protection of individual rights, drug resistance, toxicity, financing**

The Main Obstacles to a Cure for HIV Disease

- **HIV hides from the immune system**
- **HIV forms a latent reservoir protected from drug therapy**

NIAID Signature Projects

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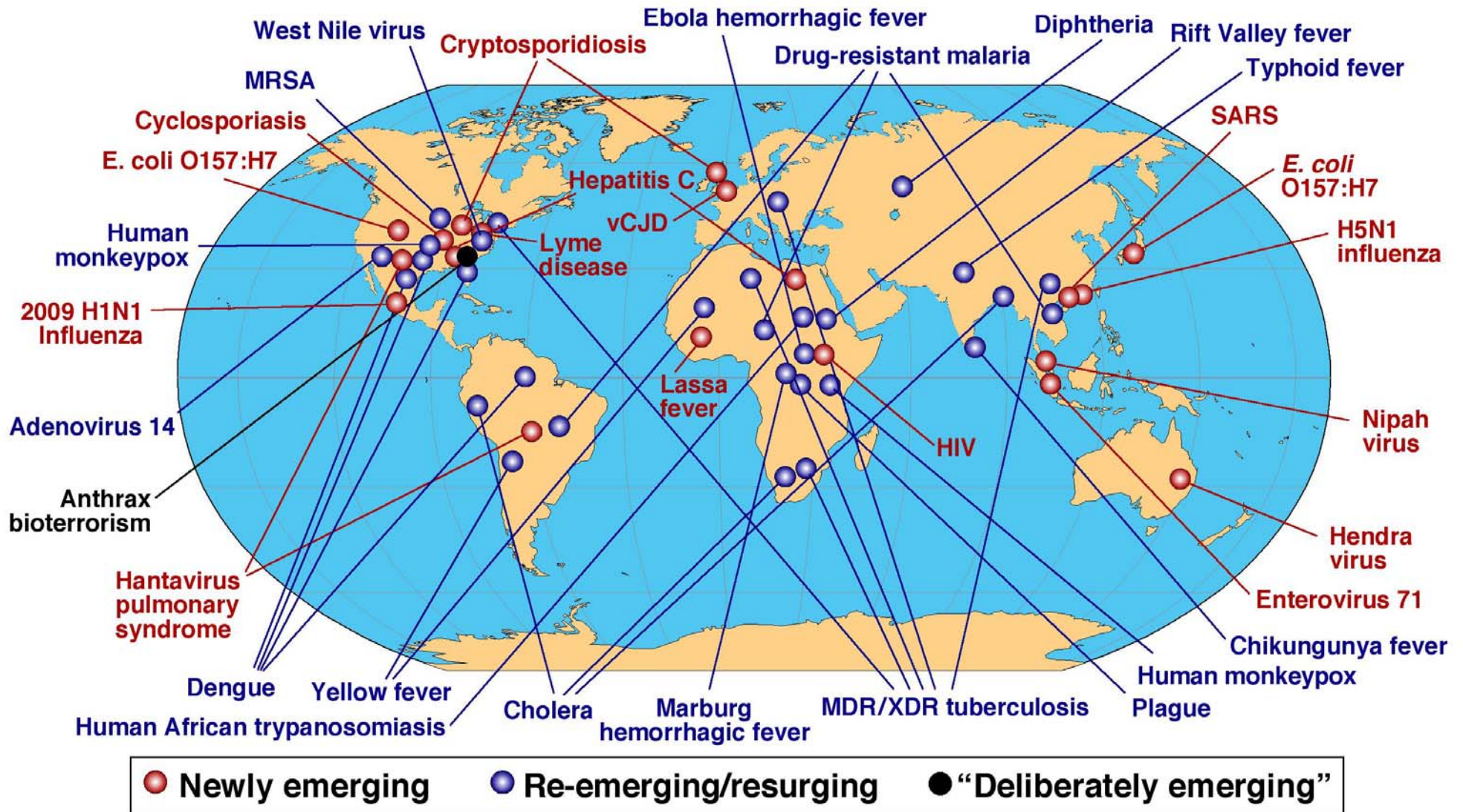
Protection of Human Health by Immunology and Vaccines

- **New collaborative consortium of Human Immunology Research Centers**
- **Research to characterize the protective immune response in humans using modern tools (e.g., genomics and proteomics) and other modern technologies, including systems biology approaches**

NIAID Signature Projects

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Global Examples of Emerging and Re-Emerging Infectious Diseases



Examples of Human Disease Outbreaks, 2006-2009

- H5N1 avian influenza
- Chikungunya fever
- Dengue
- *E. coli* O157:H7
- *Fusarium* keratitis
- Poliomyelitis
- Rift Valley fever
- XDR-TB
- Ebola hemorrhagic fever
- Marburg hemorrhagic fever
- Methicillin-resistant *Staphylococcus aureus* (MRSA)
- Adenovirus Serotype 14
- Yellow fever
- *Salmonella*
- 2009 H1N1 influenza

NIAID Regional Centers of Excellence for Biodefense and Emerging Infectious Diseases



PI – Dr. Samuel Miller
University of Washington
Seattle, WA



PI – Dr. John Belisle
Colorado State University
Fort Collins, CO



PI – Dr. Olaf Schneewind
University of Chicago
Chicago, IL



PI – Dr. Dennis Kasper
Harvard Medical School
Boston, MA



PI – Dr. W. Ian Lipkin
Columbia University
New York, NY



PI – Dr. Jay A. Nelson
Oregon Health & Science
University
Portland, Oregon



PI – Dr. Myron Levine
University of Maryland
Baltimore, MD



PI – Dr. Alan G. Barbour
University of California
Irvine, CA



PI – Dr. David Walker
University of Texas Medical Branch
Galveston, TX

PI – Dr. Samuel Stanley
Washington University
St. Louis, MO



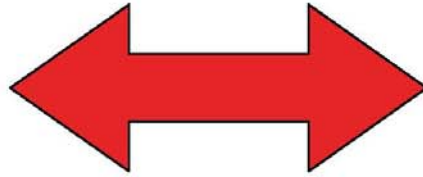
PI - Dr. Fred Sparling
University of North Carolina
Chapel Hill, NC

Biodefense and Emerging Infectious Diseases: Developing Partnerships to Translate Research into New Products

- **Expansion of NIAID initiative to support collaborative projects with academia and industry to advance promising products, including vaccines, therapeutics, and medical diagnostics, e.g.:**
 - **new tools for influenza diagnosis, treatment and prevention**
 - **a vaccine that protects against multiple viral hemorrhagic fever viruses**

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New/Improved Interventions

The New York Times

April 24, 2009

Unusual Strain of Swine Flu Is Found in People in 2 States

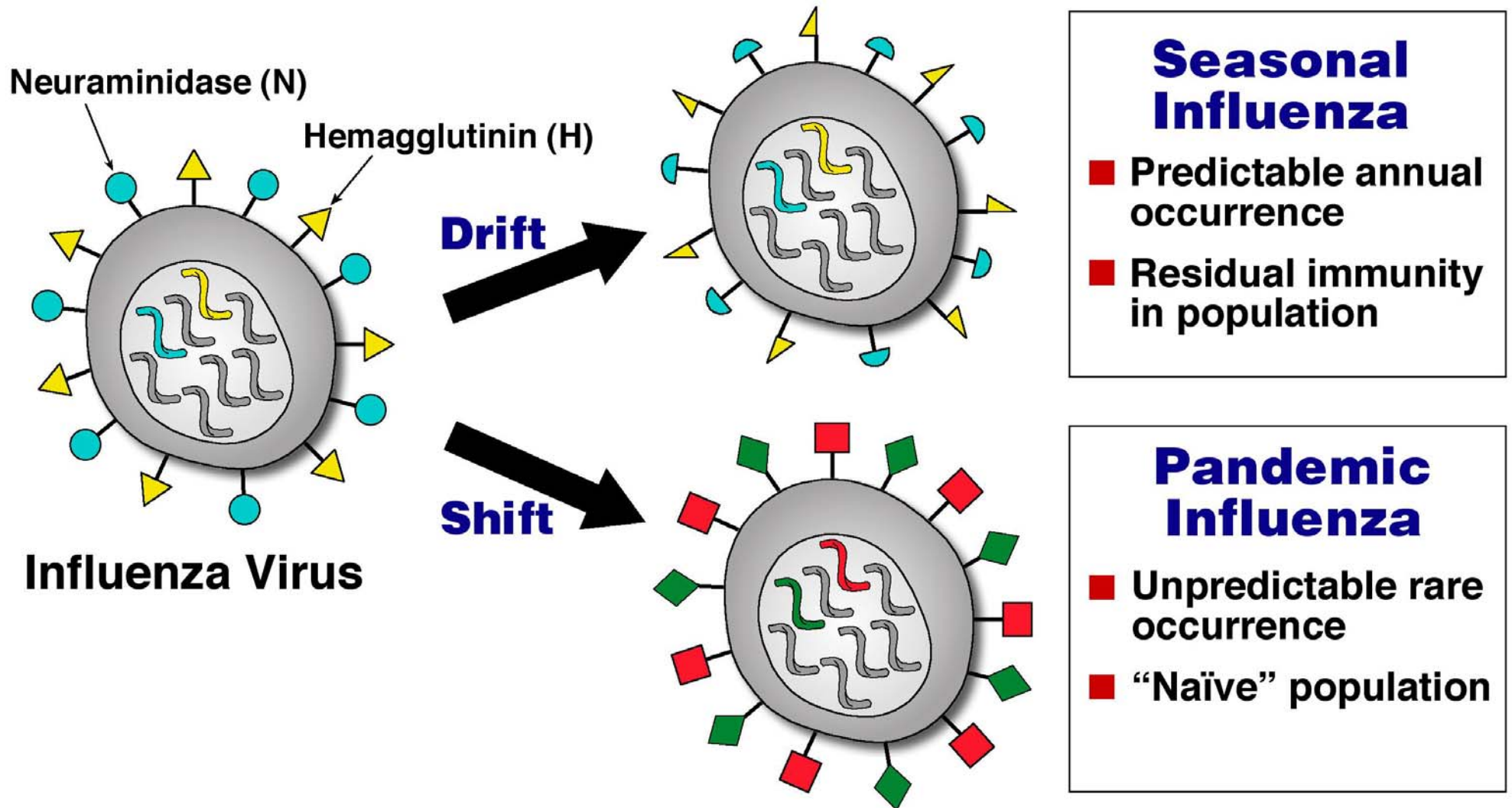
Associated Press

April 26, 2009

Swine Flu Empties Mexico City's Churches, Streets



Seasonal vs. Pandemic Influenza



Influenza Pandemics in the 20th Century

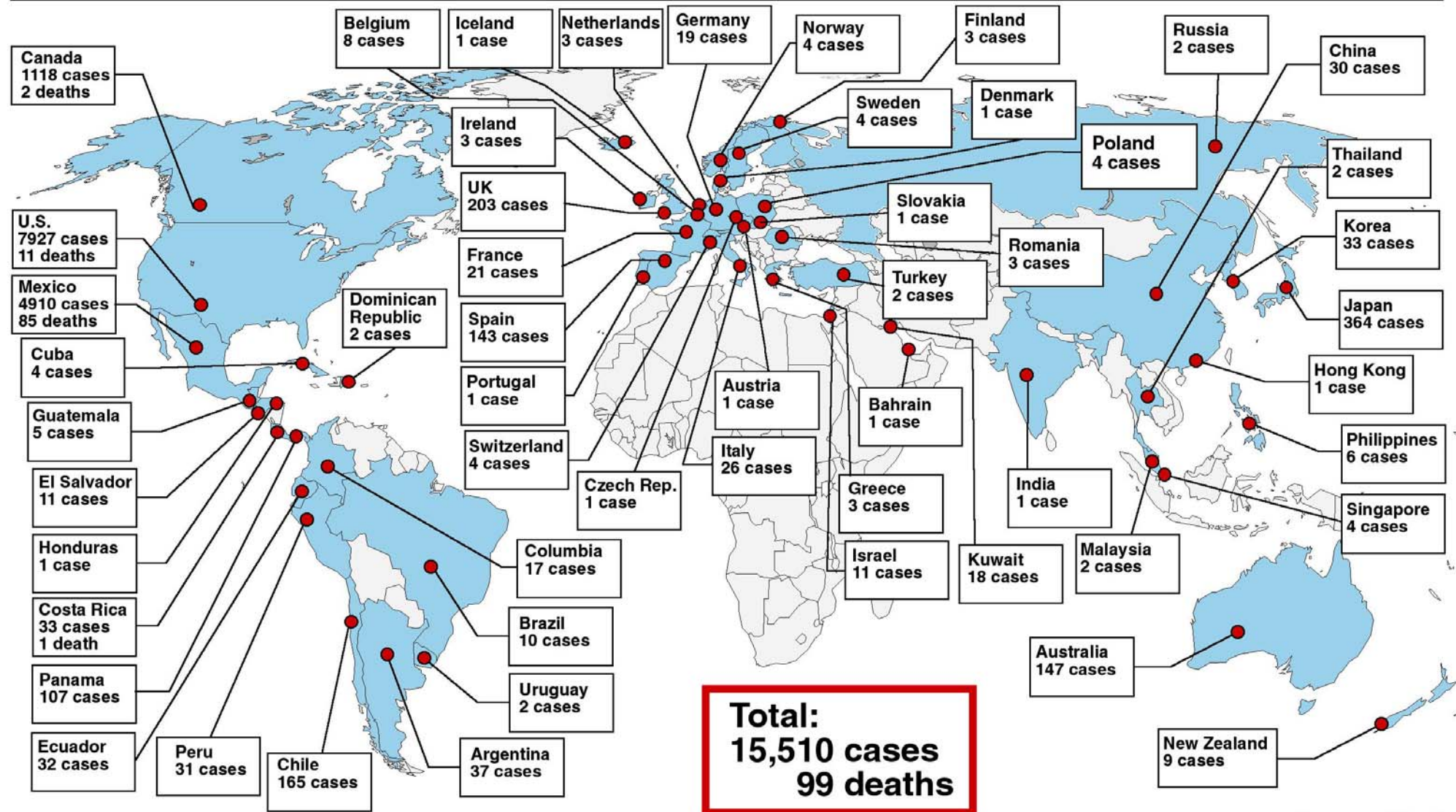
1918	H1N1	“Spanish Flu”	>50 million deaths
1957	H2N2	“Asian Flu”	1-2 million deaths
1968	H3N2	“Hong Kong Flu”	700,000 deaths

Influenza A (H1N1): Confirmed Cases in the United States, as of May 29, 2009



Source: Centers for Disease Control and Prevention (CDC)

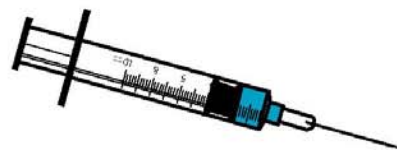
Global Influenza A (H1N1) Laboratory-Confirmed Cases and Deaths, as of May 29, 2009



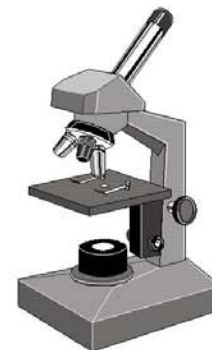
Source: WHO



Therapeutics



Vaccines



Diagnostics



**Basic
Research**

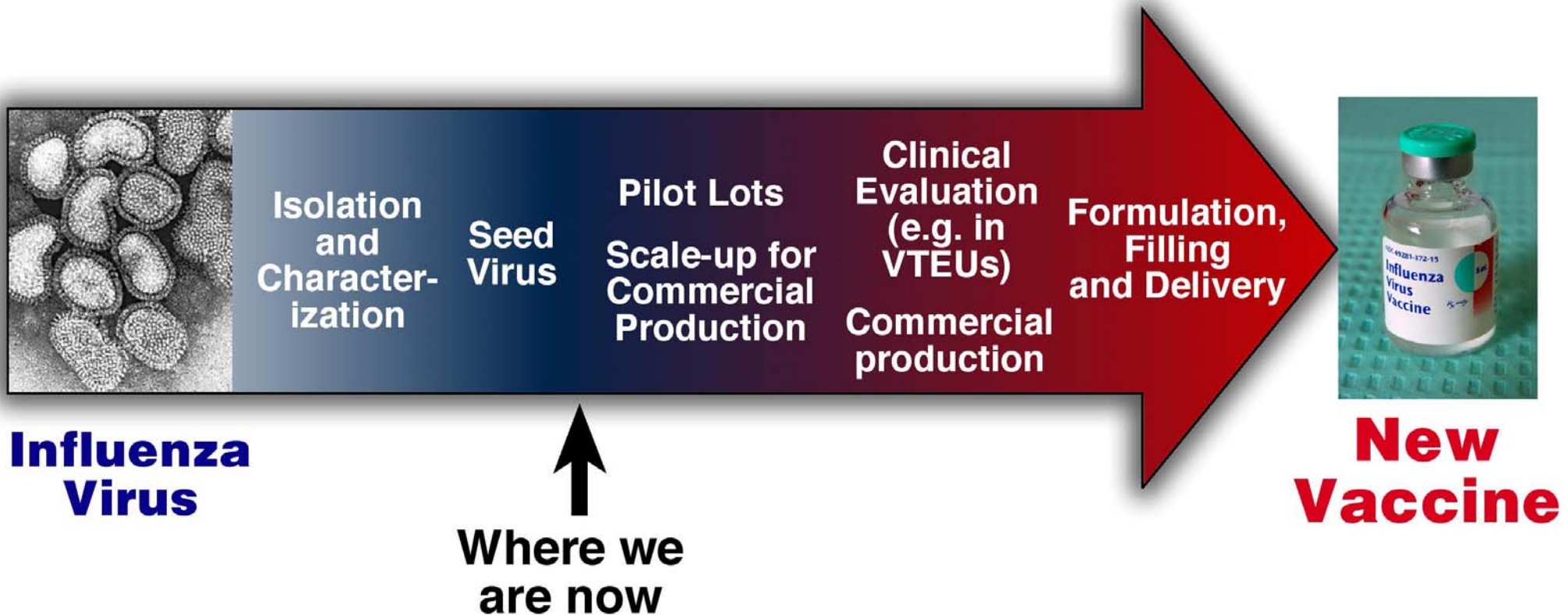


Research Resources

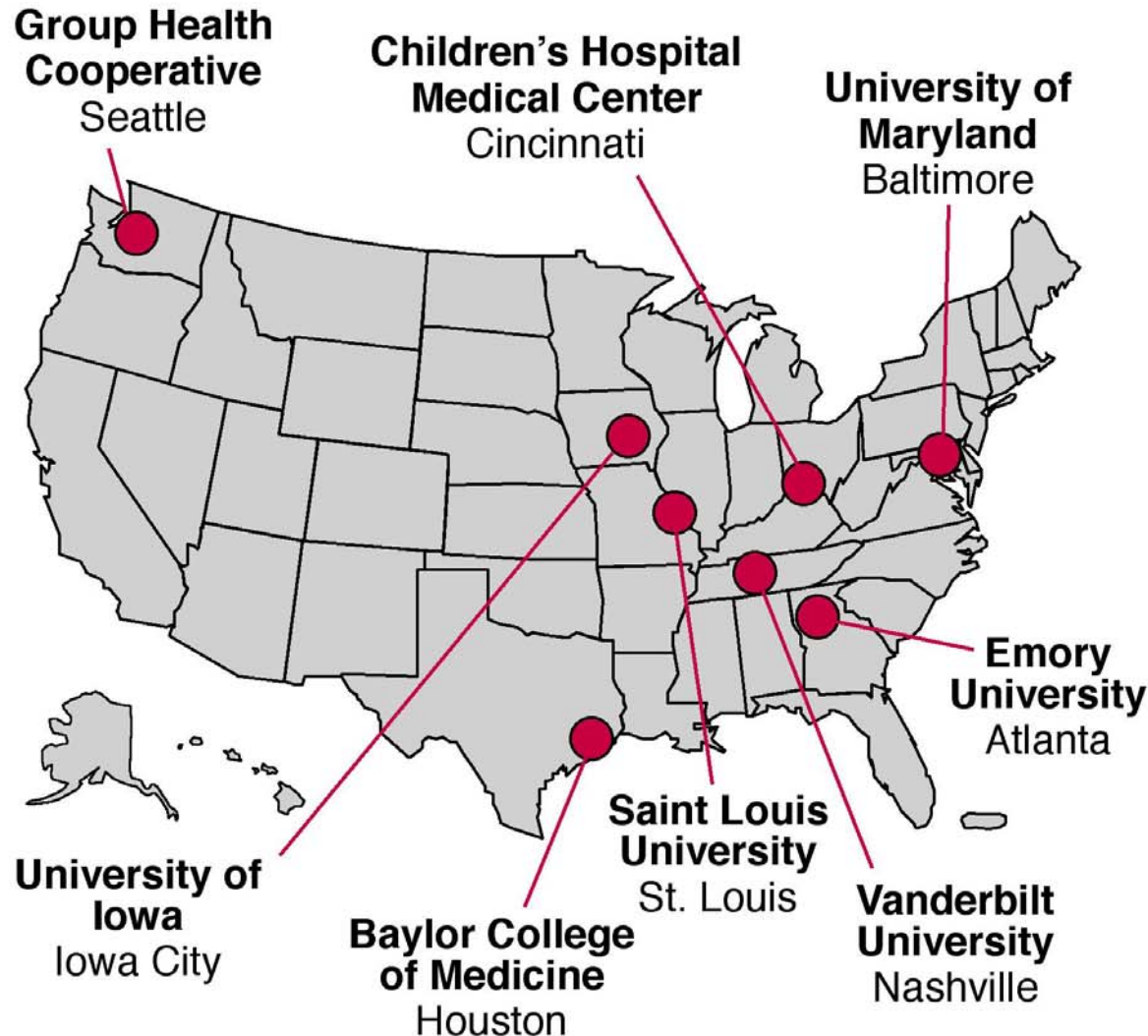


**Field and
Clinical
Research**

H1N1 Influenza Vaccine Development: A Collaborative Process



NIAID's Network of Vaccine and Treatment Evaluation Units (VTEUs)



- Established in 1962
- >160 Phase I, II, and III clinical trials since 1995
- Trials of
 - Seasonal vaccines
 - Pre-pandemic vaccines
 - Antivirals

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