ongoing studies involving the determination of the efficacy and identification of most promising vaccines, preparing the vaccine for a clinical trial, and assisting in the conduct of such a trial. The collaborator may also be expected to contribute financial support under this CRADA for personnel, supplies, travel and equipment to support these projects.

CRADA capability statements should be submitted to Ms. Lili Portilla, Technology Transfer Manager, National Heart, Lung, and Blood Institute (NHLBI), Technology Transfer Service Center, 31 Center Drive MSC 2490, Building 31/Room 1B30, Bethesda, MD 20892–2490, Phone: (301) 402–5579, Fax: (301) 594–3080, E-mail address <LILIP@gwgate.nhlbi.nih.gov>. Capability statements must be received by the NHLBI on or before May 1, 1998.

The NIDCD has applied for patents claiming the core of the technology. Non-exclusive and/or exclusive licenses for these patents covering core aspects of this project are available to interested parties.

Licensing inquiries regarding this technology should be referred to Ms. Elaine Gese, M.B.A., Licensing Specialist, NIH Office of Technology Transfer, Suite 325, 6011 Executive Blvd., Suite 325, Rockville, MD 20852, Phone: (301) 496–7735, Ext. 282, Fax: (301) 402–0220, E-mail address<gesee@od6100ml.od.nih.gov>

Dated: March 5, 1998.

Sheila E. Merritt,

Executive Officer, NHLBI.

[FR Doc. 98–6788 Filed 3–16–98; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by agencies of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by writing to the indicated licensing contact at the Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804; telephone: 301/496–7057; fax: 301/402–0220. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications.

A Novel Adipose Seven Transmembrane Domain Protein

C Montrose-Rafizad, H Yang (NIA)

OTT Reference No. E–213–97/0 filed 19 Jun 97

Licensing Contact: Stephen Finley, 301/496–7056, ext. 215

A new seven transmembrane protein and cDNA clone has been isolated from mouse adipose tissues. The new clone is differentially expressed in several mouse and human tissues, but is overexpressed in the epididymal tissues of diabetic mice and in the epididymal tissues of older mice. It is thought this new clone may have important implications in aging and diabetes and may be helpful for studying aging and diabetes.

Human Papilloma Virus Inhibition by Anti-Sense Oligonucleotides

JA DiPaolo, L Alvarez-Salas (NCI)

Serial No. 08/929,140 filed 05 Sep 97

Licensing Contact: Carol Salata, 301/496–7735, ext. 232

The present invention relates to the use of antisense oligonucleotides to inhibit a Human Papilloma virus (HPV). The invention derives from the observation that an inhibited ribozyme, which bound to a specific sequence of the HPV16 E6 gene, but whose cutting ability had been destroyed, still inhibited HPV16. This leads to the conclusion that antisense molecules which bind to the same section of the E6 gene would be useful in the treatment of HPV infection. The antisense molecules have the advantage of being less expensive to manufacture than ribozymes. The antisense oligonucleotides have phosphorothioate backbone structure and sequences complimentary to portions of human papilloma virus 16.

Dated: March 7, 1998.

Barbara M. McGarey,

Deputy Director, Office of Technology Transfer.

[FR Doc. 98–6891 Filed 3–16–98; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Government-Owned Inventions; Availability for Licensing

AGENCY: National Institutes of Health, HHS.

ACTION: Notice.

SUMMARY: The inventions listed below are owned by agencies of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 207 to achieve expeditious commercialization of results of federally-funded research and development. Foreign patent applications are filed on selected inventions to extend market coverage for companies and may also be available for licensing.

ADDRESSES: Licensing information and copies of the U.S. patent applications listed below may be obtained by contacting Elaine Gese, M.B.A., Technology Licensing Specialist, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, Maryland 20852–3804; telephone: 301/496–7056 ext. 282; fax: 301/402–0220; e-mail: eg46t@nih.gov. A signed Confidential Disclosure Agreement will be required to receive copies of the patent applications. Information on additional chemokine receptor technologies is also available.

STRL33, A Human Fusion Accessory Factor Associated With HIV Infection

J Farber, F Liao, G Alkhatib, EA Berger (NIAID)

DHHS Reference No. E–087–97/0 filed 31 Mar 97

STRL33 is a seven transmembrane domain G protein coupled receptor which appears to be a novel chemokine receptor-like protein functioning as a fusion cofactor for both macrophage-tropic and T cell-trophic HIV–1. Cells expressing STRL33 along with CD4 are capable of fusing with cells expressing the envelope glycoprotein (env) of M-tropic and T-trophic HIV–1 variants, thereby mediating fusion with a wider range of variants than other cofactors identified to date. As the STRL33 protein appears to be directly related to the development of HIV infection and progression to AIDS, agents which are capable of blocking the STRL33 receptor may represent valuable tools for use in the prevention or treatment of HIV–1/AIDS. Polynucleotides and polypeptides are provided by the invention.

Therapeutic approaches and pharmaceutical compositions are claimed, as are research uses, and are available for licensing.

Delayed Progression to AIDS by a Missense Allele of the CCR2 Gene

M Dean, SJ O'Brien, M Carrington, MW Smith (NCI)

DHHS Reference No. E–209–97/0 filed 14 Aug 97

A specific variant of chemokine receptor CCR2, which appears to be a co-receptor for HIV–1, has been identified. This variant, CCR2–64I, is associated with delayed progression to AIDS in individuals infected with HIV–1, and is the result of a conservative amino acid substitution within the first transmembrane receptor region of CCR2. CCR2–64I is independent of but additive with CCR5–d32, an allele of chemokine receptor CCR5 which is also associated with delayed progression to AIDS. Together, these two polymorphisms are present in nearly 40% of individuals in all ethnic groups; CCR2–64I alone occurs at an allele frequency of 10–29% in all ethnic groups. Polynucleotides and polypeptides are provided by the invention. Therapeutic approaches and pharmaceutical compositions are claimed, as are research uses, diagnostic uses, and screening methods.

CC Chemokine Receptor 8 DNA, New Animal Models And Therapeutic Agents For HIV Infection

HL Tiffany, PM Murphy, G Alkhatib, EA Berger (NIAID)

DHHS Reference No. E–220–97/0 filed 29 July 97

CCR8, a known chemokine receptor, has now been shown to serve as a co-receptor for HIV–1. This receptor, a seven transmembrane region G protein coupled receptor, binds chemokine I–309, which is a potent monocyte attractant and is capable of inhibiting apoptosis in thymic cell lines. CCR8 is expressed in both monocytes and thymus, and is encoded by a gene of previously unknown function. Polynucleotides and polypeptides are provided by the invention. Therapeutic approaches and pharmaceutical compositions are claimed, as are research uses.

Functional Promoter For CCR5

F Guignard (NIAID)

DHHS Reference No. E–222–97/0

Embodied in this invention is the identification of the functional promoter sequence for CCR5. CCR5 is a known chemokine receptor which functions as a cofactor for HIV binding and is found on the cell surface of macrophages and CD4+ T cells. Blocking or suppressing the expression of CCR5 may therefore serve to inhibit HIV infection. It is postulated that this could be accomplished by inhibiting the CCR5 promoter or by administering an oligonucleotide analog of the promoter, thereby treating or preventing HIV infection. Polynucleotide sequences are provided by the invention. Therapeutic approaches and pharmaceutical compositions are claimed, as are research uses.

CCR1 Knockout Mouse

J–L Gao, PM Murphy (NIAID)

DHHS Reference No. E–234–97/0

Embodied in this invention is a CC chemokine receptor 1 (CCR1) knockout mouse, which has been made deficient (−/−) by targeted gene disruption. CCR1 normally binds chemokines MIP–1a and RANTES. The inventors have already used these knockout mice to identify a number of biological functions for CCR1, which are described in Gao et al., The Journal of Experimental Medicine 185(11): 1959–1968, June 1997. The mice are available for licensing via a Biological Materials License, and numerous research uses are anticipated.

Dated: March 9, 1998.

Barbara M. McGarey,

Deputy Director, Office of Technology Transfer.

[FR Doc. 98–6892 Filed 3–16–98; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Research Resources; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following National Center for Research Resources Special Emphasis Panel (SEP) meeting:

Name of SEP: Biomedical Research Technology (Telephone Conference Call).

Date: April 1, 1998.

Time: 10:00 a.m.

Place: National Institutes of Health, 6507 Rockledge Drive, MSC 7965, Room 6018, Bethesda, MD 20892–7965.

Contact Person: Dr. Raymond R. O'Neill, Scientific Review Administrator, 6705 Rockledge Drive, MSC 7965, Room 6018, Bethesda, MD 20892–7965, (301) 435–0820.

Purpose/Agenda: To evaluate and review grant applications.

This notice is being published less than 15 days prior to the above meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

This meeting will be closed in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Program No. 93.371, Biomedical Research Technology, National Institutes of Health, HHS)

Dated: March 5, 1998.

LaVerne Y. Stringfield,

Committee Management Officer, NIH.

[FR Doc. 98–6790 Filed 3–16–98; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Research Resources; Notice of Closed Meeting

Pursuant to Section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following National Center for Research Resources Special Emphasis Panel (SEP) meetings:

Name of SEP: Biomedical Research Technology.

Date: March 23–25, 1998.

Time: March 23, 6:00 p.m.–10:00 p.m.; March 24, 8:00 a.m.–6:30 p.m; March 25, 8:00 a.m.–2:00 p.m.

Place: Doubletree Hotel, 1750 Rockville Pike, Rockville, MD 20852, (301) 468–1100.

Contact Person: Dr. Bela J. Gulyas, Scientific Review Administrator, 6705 Rockledge Drive, MSC 7965, Room 6018, Bethesda, MD 20892–7965, (301) 435–0811.

Purpose/Agenda: To evaluate and review grant applications.

This notice is being published less than 15 days prior to the above meeting due to the urgent need to meet timing limitations imposed by the review and funding cycle.

This meeting will be closed in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5, U.S.C. Applications and/or proposals and the discussions could reveal confidential trade secrets or commercial property such as patentable material and personal information concerning individuals associated with the applications and/or proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

(Catalog of Federal Domestic Assistance Program No. 93.371, Biomedical Research, National Institutes of Health, HHS)