

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 <gese@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

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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.