

represents a valid approach to inhibit tumor growth.

The present invention discloses the identification and characterization of a fully human monoclonal antibody designated m708.5 that has been affinity matured against IGF-I and IGF-II and displays extremely high affinities for IGF-I and IGF-II in the pM range. The m708.5 antibody potently inhibited signal transduction mediated by the IGF-1R interaction with IGF-I and IGF-II and blocked phosphorylation of IGF-IR and the insulin receptor. Further, this antibody inhibited migration in the MCF-7 breast cancer cell line at the pM range. Therefore, this antibody can be used to prevent binding of IGF-I and/or IGF-II to its concomitant receptor IGFIR, consequently, modulating diseases such as cancer.

*Potential Commercial Applications:*

- Therapeutic for the treatment of various human diseases associated with aberrant cell growth and motility such as breast, prostate, and leukemia carcinomas.
- Research reagent to study IGF-I and/or IGF-II binding and its association with tumor growth.

*Competitive Advantages:*

- Antibodies against the ligands IGF-I and IGF-II, such as this invention, inhibit the interaction with IGF-IR yet likely do not have the type of toxicity associated with IGF-1R antibodies.
- High concentrations of IGF-II are found in cancer patients, on average several fold higher than IGF-I, thus this cross-reacting IGF-I/IGF-II antibody could be more effective than existing IGF-IR and/or IGF-I currently in the clinic.

- This novel IGF antibody may provide therapeutic intervention for multiple carcinomas.

*Development Stage:*

- Pre-clinical.
- In vitro data available.

*Inventors:* Dimiter Dimitrov, Zhongyu Zhu, and Qi Zhao (NCI).

*Publications:*

1. Zhao Q, *et al.* Human monoclonal antibody fragments binding to insulin-like growth factors 1 and 2 with picomolar affinity. *Mol Cancer Ther.* 2011 Jul 12; Epub ahead of print. [PMID 21750218].

2. Feng Y, *et al.* Novel human monoclonal antibodies to insulin-like growth factor (IGF)-II that potently inhibit the IGF receptor type I signal transduction function. *Mol Cancer Ther.* 2006;5(1):114-120. [PMID 18283605].

3. Kimura T, *et al.* Targeting of bone-derived insulin-like growth factor-II by a human neutralizing antibody suppresses the growth of prostate cancer

cells in a human bone environment. *Clin Cancer Res.* 2010 Jan 1;16(1): 121-129. [PMID 20028742].

*Intellectual Property:* HHS Reference No. E-068-2011/0—U.S. Provisional Application No. 61/474,664 filed 12 April 2011.

*Related Technologies:*

- HHS Reference No. E-336-2005/0—U.S. Patent Application No. 12/296,328 filed 07 Oct 2008; Antibody Compositions and Methods for Treatment of Neoplastic Disease.
- HHS Reference No. E-217-2005/0—U.S. Patent No. 7,824,681 issued 02 Nov 2010; Human Monoclonal Antibodies that Specifically Bind IGF-II.

*Licensing Contact:* Whitney Hastings; 301-451-7337; [hastingw@mail.nih.gov](mailto:hastingw@mail.nih.gov).

*Collaborative Research Opportunity:* The NCI CCR Nanobiology Program, Protein Interaction Group, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize this technology. For collaboration opportunities, please contact John Hewes, PhD at [hewesj@mail.nih.gov](mailto:hewesj@mail.nih.gov).

**Transgenic Mice Expressing Human Arginase II Gene in Endothelium: Useful for Studying Atherosclerosis and Other Vasculopathies**

*Description of Technology:*

Cardiovascular disorders associated with endothelial dysfunction, like atherosclerosis, have decreased endothelial nitric oxide (NO) bioavailability. L-arginine, the primary substrate for endothelial nitric oxide synthase (eNOS), is important in the regulation of NO production. Arginase competes with eNOS for L-arginine and has been implicated in the endothelial dysfunction. NIH investigators have generated transgenic mice with human ArgII (hArgII) gene under control of endothelial-specific Tie2 promoter. In these mice, hArgII was expressed at very high levels in all tissues except liver. Analysis has shown that expression of hArgII was endothelium-specific. Overexpression of hArgII neither led to significant changes in plasma level of arginine, citrulline, NOHA, ADMA, SDMA and ornithine, nor to changes in plasma lipid levels. Level of arginase activity in peritoneal macrophages isolated from the transgenic mice also was also unchanged. However, ArgII overexpression induced signs of endothelial dysfunction. In apoE-knockout mice hArgII led to 2-fold increasing in aortic area with atherosclerotic lesions. The Tie2hArgII transgenic mouse can be useful as a new model for investigating the role of ArgII

in endothelial function and development of atherosclerosis.

*Potential Commercial Applications:*

- Useful to study the role of arginase II gene in endothelium.
- Useful for testing the drugs for treatment of the endothelial dysfunction related to eNOS insufficiency, including hypertension.
- Useful to study mechanisms of atherosclerosis.

*Competitive Advantages:* Better model system to study functional significance of arginase II.

*Development Stage:*

- Early-stage.
- Pre-clinical.
- In vivo data available (animal).

*Inventors:* Boris L. Vaisman and Alan T. Remaley (NHLBI).

*Publication:* Vaisman BL, *et al.* Abstract 3636: The Effects of Arginase II Overexpression on Endothelial Function in Transgenic Mouse Model. *Circulation.* 2008 Oct 28;118:S 455.

*Intellectual Property:* HHS Reference No. E-255-2010/0—Research Tool. Patent protection is not being pursued for this technology.

*Licensing Contact:* Suryanarayana (Sury) Vepa, PhD; 301-435-5020; [vepas@mail.nih.gov](mailto:vepas@mail.nih.gov).

Dated: August 29, 2011.

**Richard U. Rodriguez,**

*Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.*

[FR Doc. 2011-22694 Filed 9-2-11; 8:45 am]

**BILLING CODE 4140-01-P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Center for Complementary & Alternative Medicine; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the National Advisory Council for Complementary and Alternative Medicine (NACCAM) meeting.

The meeting will be open to the public as indicated below, with attendance limited to space available. Individuals who plan to attend and need special assistance, such as sign language interpretation or other reasonable accommodations, should notify the Contact Person listed below in advance of the meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections

552b(c)(4) and 552b(c)(6), Title 5 USC, as amended. The grant applications and/or contract Proposals and the discussions could disclose confidential trade secrets or commercial property such as patentable materials, and personal information concerning individuals associated with the grant applications and/or contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

*Name of Committee:* National Advisory Council for Complementary and Alternative Medicine.

*Date:* October 14, 2011.

*Closed:* October 14, 2011, 8:30 to 10:30 a.m.

*Agenda:* To review and evaluate grant applications and/or proposals.

*Place:* National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

*Open:* October 14, 2011, 11 a.m. to 4 p.m.

*Agenda:* Opening remarks by the Director of the National Center for Complementary and Alternative Medicine, presentation of a new research initiative, and other business of the Council.

*Place:* National Institutes of Health, Building 31, 31 Center Drive, Conference Room 6, Bethesda, MD 20892.

*Contact Person:* Martin H. Goldrosen, PhD, Executive Secretary, Director, Division of Extramural Activities, National Center for Complementary and Alternative Medicine, National Institutes of Health, 6707 Democracy Blvd., Suite 401, Bethesda, MD 20892, (301) 594-2014.

The public comments session is scheduled from 3:30 to 4 p.m. on October 14, 2011, but could change depending on the actual time spent on each agenda item. Each speaker will be permitted 5 minutes for their presentation. Interested individuals and representatives of organizations are requested to notify Dr. Martin H. Goldrosen, National Center for Complementary and Alternative Medicine, NIH, 6707 Democracy Boulevard, Suite 401, Bethesda, Maryland 20892, 301-594-2014, Fax: 301-480-9970. Letters of intent to present comments, along with a brief description of the organization represented, should be received no later than 5 p.m. on October 6, 2011. Only one representative of an organization may present oral comments. Any person attending the meeting who does not request an opportunity to speak in advance of the meeting may be considered for oral presentation, if time permits, and at the discretion of the Chairperson. In addition, written comments may be submitted to Dr. Martin H. Goldrosen at the address listed above up to ten calendar days (October 24, 2011) following the meeting.

Copies of the meeting agenda and the roster of members will be furnished upon request by contacting Dr. Martin H. Goldrosen, Executive Secretary, NACCAM, National Center for Complementary and Alternative Medicine, National Institutes of Health, 6707 Democracy Boulevard, Suite 401, Bethesda, Maryland 20892, 301-594-2014, Fax 301-480-9970, or via e-mail at [naccames@mail.nih.gov](mailto:naccames@mail.nih.gov).

In the interest of security, NIH has instituted stringent procedures for entrance onto the NIH campus. All visitor vehicles, including taxicabs, hotel, and airport shuttles will be inspected before being allowed on campus. Visitors will be asked to show one form of identification (for example, a government-issued photo ID, driver's license, or passport) and to state the purpose of their visit.

Information is also available on the Institute's/Center's home page: <http://www.nccam.nih.gov/about/naccam>, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.701, ARRA Related Biomedical Research and Research Support Awards; 93.213, Research and Training in Complementary and Alternative Medicine, National Institutes of Health, HHS)

Dated: August 30, 2011.

**Jennifer S. Spaeth,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2011-22695 Filed 9-2-11; 8:45 am]

**BILLING CODE 4140-01-P**

## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### National Institutes of Health

#### National Institute of Allergy and Infectious Diseases; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

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

*Name of Committee:* Microbiology, Infectious Diseases and AIDS Initial Review Group, Microbiology and Infectious Diseases Research Committee.

*Date:* October 4, 2011.

*Time:* 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Hilton Washington/Rockville, 1750 Rockville Pike, Rockville, MD 20852.

*Contact Person:* Michelle M. Timmerman, PhD, Scientific Review Officer, Scientific Review Program, DEA/NIAID/NIH/DHHS, Room 2217, 6700B Rockledge Drive, MSC-7616, Bethesda, MD 20892-7616, 301-451-4573, [timmermann@niaid.nih.gov](mailto:timmermann@niaid.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.855, Allergy, Immunology, and Transplantation Research; 93.856, Microbiology and Infectious Diseases Research, National Institutes of Health, HHS)

Dated: August 30, 2011.

**Jennifer S. Spaeth,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2011-22697 Filed 9-2-11; 8:45 am]

**BILLING CODE 4140-01-P**

## 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. App.), notice is hereby given of the following meeting.

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

*Name of Committee:* National Center for Research Resources Special Emphasis Panel, COBRE III.

*Date:* October 25-26, 2011.

*Time:* 8 a.m. to 5 p.m.

*Agenda:* To review and evaluate grant applications.

*Place:* Gaithersburg Marriott Washingtonian Center, 9751 Washingtonian Boulevard, Gaithersburg, MD 20878.

*Contact Person:* Steven Birken, PhD, Scientific Review Officer, Office of Review, National Center for Research Resources, National Institutes of Health, 6701 Democracy Blvd., Dem. 1, Room 1078, MSC 4874, Bethesda, MD 20892-4874, 301-435-0815, [birkens@mail.nih.gov](mailto:birkens@mail.nih.gov).

(Catalogue of Federal Domestic Assistance Program Nos. 93.306, Comparative Medicine; 93.333, Clinical Research; 93.371, Biomedical Technology; 93.389, Research Infrastructure, 93.306, 93.333; 93.702, ARRA Related Construction Awards, National Institutes of Health, HHS)

Dated: August 30, 2011.

**Jennifer S. Spaeth,**

*Director, Office of Federal Advisory Committee Policy.*

[FR Doc. 2011-22700 Filed 9-2-11; 8:45 am]

**BILLING CODE 4140-01-P**