of libraries for compounds that specifically inhibit or kill cancer stem cells.

• Research tool to optimize therapeutic regimens in preclinical models.

• Potential to support precision medicine approach by screening therapeutics for efficacy against cancer stem cells in patient-derived xenografts.

Competitive Advantages:

• Efficient visualization of cancer stem cells by functional property rather than by use of highly variable cell surface markers.

• Flexible modular Gateway cloning technology allows constructs with alternative reporters to be readily generated.

• Approach is independent of cell-of-origin of tumor.

• Cancer stem cell behavior can be monitored in real-time.

Development Stage:

• Pre-clinical.

• In vitro data available.

• In vivo data available (animal).

Inventors: Lalage Wakefield and Binwu Tang (NCI).

Publication: Manuscript under review. Text available on request.

Intellectual Property: HHS Reference No. E–141–2011/0—Research Tool. Patent protection is not being pursued for this technology.

Licensing Contact: Eggerton Campbell, Ph.D.; 301–435–5282; *eggerton.campbell@nih.gov.*

Collaborative Research Opportunity: The National Cancer Institute, Laboratory of Cancer Biology and Genetics, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate or commercialize a cancer stem cell reporter construct for use in drug screens and therapy selection. For collaboration opportunities, please contact John D. Hewes, Ph.D. at *hewesj@mail.nih.gov.*

AAV-Aquaporin-1 Gene Therapy for Sjögren's Syndrome

Description of Technology: Sjögren's syndrome is a chronic inflammatory disease affecting over 2 million Americans, whereby moisture-producing glands are attacked by the body's immune system. The disease is marked by disabling dryness of the mouth and eyes as well as fatigue and pain. Researchers at the National Institute of Dental and Craniofacial Research have developed a therapy that alleviates xerostomia in an animal model of Sjögren's syndrome. This technology consists of local delivery of adeno-associated virus (AAV) mediated aquaporin-1 (AQP1) fusion protein to salivary glands. Using a murine model that mimics Sjögren's dry mouth symptoms, it was discovered that treatment restored salivary fluid movement upon expression of AQP1. Targeted delivery of the AAV–AQP1 system makes this invention a novel and potential long-term therapeutic for restoration of exocrine gland function and prevention of xerostomia-associated pain associated with Sjögren's syndrome.

Potential Commercial Applications: Prevention of dry mouth (xerostomia) associated with salivary gland dysfunction in patients with Sjögren's syndrome.

Competitive Advantages:

• AAV gene transfer to salivary glands is highly efficient.

• AAV–AQP1 promotes de novo salivary flow.

Development Stage:

• Pre-clinical.

• In vitro data available.

• In vivo data available (animal).

Inventor: John (Jay) Chiorini (NIDCR).

Intellectual Property: HHS Reference No. E–139–2011/1—US Provisional Application No. 61/695,753 filed 31 August 2012; PCT Application No. PCT/US13/57632 filed 30 August 2013.

Related Technologies:

• HHS Reference No. E–179–2005/0—US Patent No. 8,283,151 issued 09 October 2012.

• HHS Reference No. E–087–2011/0—US Provisional Application No. 61/476,168 filed 15 April 2011.

• HHS Reference No. E–127–1998/0—US Provisional Application No. 60/087,029 filed 28 May 1998; US Patent No. 7,479,554 issued 20 January 2009; US Patent No. 6,984,517 issued 10 January 2006.

• HHS Reference No. E–142–2011/0—US Provisional Application No. 61/477,523 filed 20 April 2011.

Licensing Contact: Vince Contreras, Ph.D.; 301–435–4711; *vince.contreras@nih.gov.*

Collaborative Research Opportunity: The National Institute of Dental and Craniofacial Research, AAV Biology Section, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate or commercialize AAV-Aquaporin-1 Gene Therapy for Sjögren's. For collaboration opportunities, please contact David Bradley at *bradleyda@nidcr.nih.gov.*

Dated: December 2, 2013.

Richard U. Rodriguez,

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

[FR Doc. 2013–29096 Filed 12–5–13; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Diabetes and Digestive and Kidney 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: National Institute of Diabetes and Digestive and Kidney Diseases Special Emphasis Panel; Digestive Diseases Ancillary Study.

Date: December 17, 2013

Time: 11:00 a.m. to 12:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, Two Democracy Plaza, 6707 Democracy Boulevard, Bethesda, MD 20892, (Telephone Conference Call).

Contact Person: Thomas A. Tatham, Ph.D., Scientific Review Officer, Review Branch, DEA, NIDDK, National Institutes of Health, Room 760, 6707 Democracy Boulevard, Bethesda, MD 20892–5452, (301) 594–3993, *tathamt@mail.nih.gov.*

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

(Catalogue of Federal Domestic Assistance Program Nos. 93.847, Diabetes, Endocrinology and Metabolic Research; 93.848, Digestive Diseases and Nutrition Research; 93.849, Kidney Diseases, Urology and Hematology Research, National Institutes of Health, HHS)

Dated: November 29, 2013.

David Clary,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2013–29098 Filed 12–5–13; 8:45 am]

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