detecting retroviruses within a patient blood sample and discriminating HIV–1 samples within serum specimens. HIV–1 can be genetically classified into two major groups, group M (major) and Group O (outlier) with group O comprising all divergent viruses that do not cluster with group M. The identification of group O infections raised public health concerns about the safety of the blood supply because HIV–1 screening by group M-based serologic tests does not consistently detect group O infection.

The assay is based on the selective inhibition of Amp-RT reactivity of Group M viruses by nevirapine, a non-nucleoside RT inhibitor. Group O viruses can be generically identified by the resistance of their Amp-RT activity to nevirapine. The assay can be used to screening of the blood supply and to rapidly differentiate group M from group O virus.

**Potential Commercial Applications:**
- Clinical monitoring of individual patient antiretroviral therapy
- HIV/AIDS public health programs
- Surveillance of retroviral drug resistance
- Screening of blood donations

**Competitive Advantages:**
- Rapid diagnostic which greatly reduces time and labor for improved clinical monitoring of HIV treatment
- Ready for commercialization
- Easily adapted to kit format
- Assists continued usefulness of common antiretroviral therapeutics
- Useful for high-throughput serum samples screening

**Development Stage:** In vitro data available

**Inventors:** Thomas M. Folks, Walid Heneine, William Marshall Switzer, Shinji Yamamoto (all of CDC)

**Publications:**

**Intellectual Property:**

**HHS Reference No. E–232–1993/1—**
- U.S. Patent No. 6,787,126 issued 07 Sep 2004
- Various international patents issued or pending

**HHS Reference No. E–129–2013/0—**
- U.S. Patent No. 7,691,572 issued 06 Apr 2010

**Related Technologies:**
- HHS Reference No. E–232–1993/1—
  - U.S. Patent No. 7,691,572 issued 06 Apr 2010

**Licensing Contact:** Whitney Blair, J.D., M.P.H.; 301–435–4937; whitney.blair@nih.gov

**Dated:** January 31, 2014.

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

[FR Doc. 2014–02491 Filed 2–5–14; 8:45 am]

**BILLING CODE 4140–01–P**

**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 an agency of the U.S. Government and are available for licensing in the U.S. in accordance with 35 U.S.C. 209 and 37 CFR Part 404 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.

**FOR FURTHER INFORMATION CONTACT:** 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.

**Multivalent Immunogenic Peptides (Vaccines) for the Treatment of Prostate and Breast Cancer**

**Description of Technology:** The development of more targeted means of treating cancer is vital. One option for a targeted treatment is the creation of a vaccine that induces an immune response only against cancer cells. In this sense, vaccination involves the introduction of a peptide into a patient that causes the formation of antibodies to T cells that recognize the peptide. If the peptide is from a protein found selectively in/on cancer cells, those antibodies or T cells can trigger the death of those cancer cells without harming non-cancer cells. This can result in fewer side effects for the patient.

TARP (T cell receptor gamma alternate reading frame protein) is a protein that is selectively expressed on the cells of about 95% of prostate cancers and about 50% of breast cancers. This invention concerns the identification of a combination of immunogenic peptides within TARP and their use to create an anti-cancer immune response in patients. By introducing these several peptides into a patient, an immune response against these cancer cells can be initiated by the peptides, resulting in treatment of the cancer.

**Potential Commercial Applications:**
- Peptides can be used as vaccines to induce an immune response against cancer
- Treatment of any cancer associated with increased or preferential expression of TARP
- Specific diseases include breast cancer and prostate cancer

**Competitive Advantages:**
- Targeted therapy decreases non-specific killing of healthy, essential cells, resulting in fewer non-specific side-effects and healthier patients
- Use of multiple peptides permits production of a more thorough complement of T cells against the antigen

**Development Stage:**
- In vitro data available
- In vivo data available (animal)
- In vivo data available (human)

**Inventors:** Jay A. Berzofsky, et al. (NCI)

**Publications:**
Potential Commercial Applications:
- Selective killing of cells that express mesothelin, such as those seen with particular cancers.
- Specific cancers include malignant mesothelioma, pancreatic cancer and ovarian cancer.

Competitive Advantages:
- Targeted therapy decreases non-specific killing of healthy, essential cells, resulting in fewer non-specific side-effects and healthier patients.
- Use of human IL12 as the payload may reduce formation of neutralizing antibodies against the molecule, increasing therapeutic effectiveness.

Development Stage:
- In vitro data available
- In vivo data available (animal)

Inventors: Mitchell Ho, et al. (NCI)
Publication:

Inventors at the NIH have created an immunocytokine for use in cancer therapy. This immunocytokine, IL12–SS1(Fv), is designed to specifically target malignant mesothelioma, reducing the toxic effects seen with systemic IL12 administration. The immunocytokine is able to inhibit the growth of malignant mesothelin-expressing cells in xenograft models, suggesting it has significant potential as a cancer therapeutic.
**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute on Drug Abuse; Notice of Closed Meetings**

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 meetings.

The meetings 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 materials, 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 on Drug Abuse Special Emphasis Panel; R13 Conference Grant Review (PA12–212).

**Date:** March 4, 2014.

**Time:** 11:00 a.m. to 1:00 p.m.

**Place:** To review and evaluate grant applications.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1432, liangm@nida.nih.gov.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; Non-Clinical ADME Studies (8016).

**Date:** March 11, 2014.

**Time:** 10:00 a.m. to 2:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1432, liangm@nida.nih.gov.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; Data, Statistics, and Clinical Trial Support (2237).

**Date:** March 13, 2014.

**Time:** 10:00 a.m. to 12:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1439, f33c@nida.nih.gov.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; National Institutes of Health, Clinical Center (1152).

**Date:** March 20, 2014.

**Time:** 10:00 a.m. to 3:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1432, liangm@nida.nih.gov.

**Program Analyst:** Whitney A. Hastings; 301–451–7337; hastingsw@mail.nih.gov.

**Dated:** January 31, 2014.

**Richard U. Rodriguez,**

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

[FR Doc. 2014–02490 Filed 2–5–14; 8:45 am]

**BILLING CODE 4140–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute on Drug Abuse; Notice of Closed Meetings**

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 meetings.

The meetings 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 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, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; Non-Clinical ADME Studies (8016).

**Date:** March 11, 2014.

**Time:** 10:00 a.m. to 2:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1432, liangm@nida.nih.gov.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; Data, Statistics, and Clinical Trial Support (2237).

**Date:** March 13, 2014.

**Time:** 10:00 a.m. to 12:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1439, f33c@nida.nih.gov.

**Name of Committee:** National Institute on Drug Abuse Special Emphasis Panel; National Institutes of Health, Clinical Center (1152).

**Date:** March 20, 2014.

**Time:** 10:00 a.m. to 3:00 p.m.

**Place:** To review and evaluate contract proposals.

**Contact Person:** Minna Liang, Ph.D., Scientific Review Officer, Grants Review Branch, Office of Extramural Affairs, National Institute on Drug Abuse, NIH, DHHS, 6001 Executive Blvd., Room 4226, MSC 9550, Bethesda, MD 20892–9550, 301–435–1432, liangm@nida.nih.gov.

**Program Analyst:** Whitney A. Hastings; 301–451–7337; hastingsw@mail.nih.gov.

**Dated:** January 30, 2014.

**Michelle Trout,**

**Program Analyst,** Office of Federal Advisory Committee Policy.

[FR Doc. 2014–02460 Filed 2–5–14; 8:45 am]

**BILLING CODE 4140–01–P**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**National Institute of Biomedical Imaging And Bioengineering; 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 Biomedical Imaging And Bioengineering Special Emphasis Panel; P41 BTRC Review.

**Date:** March 13, 2014.

**Time:** 10:00 a.m. to 12:00 p.m.

**Place:** To review and evaluate grant applications.

**Contact Person:** Whitney A. Hastings; 301–451–7337; hastingsw@mail.nih.gov.

**Program Analyst:** Whitney A. Hastings; 301–451–7337; hastingsw@mail.nih.gov.

**Dated:** January 30, 2014.

**Michelle Trout,**

**Program Analyst,** Office of Federal Advisory Committee Policy.

[FR Doc. 2014–02461 Filed 2–5–14; 8:45 am]

**BILLING CODE 4140–01–P**