followed by a rapid decline in CD4+ T cells and progression to AIDS.

This invention describes the mechanism of the coreceptor switch from CCR5 to CXCR4 as HIV infection progresses. The study of the interaction between human herpes virus 6 (HHV–6) and HIV has shed light on this coreceptor switch. The inventors observed that HHV–6 affects HIV replication by suppressing CCR5-tropic but not CXCR4-tropic HIV–1. The inventors demonstrate that HHV–6 upregulates the production of RANTES, a CC chemokine that is known to inhibit infection by CCR5-tropic HIV–1. RANTES interferes with the interaction of the CCR5-tropic HIV–1 thereby allowing the CXCR4-tropic HIV–1 variants to emerge.

This observation may lead to new HIV–1 therapies and vaccines. For example, an attenuated HHV–6 or the use of other compounds to stimulate RANTES production could be used as an HIV vaccine while a drug effective against HHV–6 could be used as an HIV therapeutic. Once HHV–6 is eradicated from the body or rendered nonfunctional the conversion from CCR5-tropic HIV–1 to CXCR4-tropic HIV–1 cannot take place.

Human Papilloma Virus Immunoreactive Peptides

Samir N. Khleif , David Contois, and Jay Berzofsky (NCI)
DHHS Reference No. E–126–01/0 filed 23 Mar 2001
Licensing Contact: Sally Hu; 301/496–7056 ext. 265; *e-mail: hus@od.nih.gov.*

This invention provides immunogenic peptides from the HPV–18E6 protein that comprise class I restricted T cell epitopes and discloses methods of administering these peptides to individuals, and a method for monitoring or evaluating an immune response to HPV with these peptides. The HPV–18E6 peptide cross-reacts immunologically with both HPV type 16 and HPV type 18. HPV 16 and HPV 18 are the most common HPV types involved in cervical cancer, which is the second most common cause of cancer deaths in women worldwide. This invention demonstrates that the HPV–18E6 peptide has a higher affinity for the most common human lymphocyte antigen (HLA), HLA–A2 than the homologous peptide from HPV 16. Thus, this invention provides a potential prophylactic or therapeutic vaccine against cervical cancer caused by HPV16 and 18, and a targeted therapy for cervical cancer and other diseases that are caused by HPV including other genital cancers, head and neck cancers, and upper digestive tract cancers. It could also be potentially used in the treatment of patients presenting with pre-malignant cervical disease, especially in underdeveloped countries with no access to surgical treatment or to completely avoid surgical treatment.

Parallel Measurements of Multiple Macromolecules Using a Cryoarray

Robert Star (NIDDK), Takehiko Miyaji (NIDDK), Stephen Hewitt (NCI), and Lance Liotta (NCI)
DHHS Reference No. E–064–01/0 filed 31 Aug 2001
Licensing Contact: Cristina Thalhammer-Reyero; 301/496–7056 ext. 263; e-mail: *ThalhamC@od.nih.gov.*

Available for license is a new improved technique for the creation of biological arrays of 25–100 biological samples per slide, for use in parallel molecular screening in medical research and clinical diagnostics. Recent advances in genomics, including serial analysis of gene expression, and DNA microarrays have allowed researchers to perform high throughput analysis of gene expression. These experiments generate large amounts of information that must be validated independently, one gene at a time. In particular, there is an increasing demand for protein arrays in order to measure changes in protein expression or post-translational modification of proteins. Current techniques to create protein arrays are deficient because the proteins stick to the arraying pins, and array fabrication at room temperature may destroy the protein structure and function. The CryoArray technology, based on the creation of the arrays at subzero temperature, preserves the stability and functionality of the biological samples, including proteins, and is flexible with respect to the molecular probes it can accommodate. Wells made in a frozen block of embedding material are filled with biological samples, which freeze and bond to the surrounding block. The loaded block is cut in a cryostat to produce up to 800 replicate 4–10 microns thin sections. The samples can include DNA, RNA, and proteins such as antibodies or receptors. Recombinant or native tissue proteins are detected using antibodies; however, the system can be extended for other types of biological assays.

The ability to make multiple (i.e., up to 800) cryosections from one cryoblock enables parallel analysis of many identical arrays. Unlike other proteomic techniques, cryoarrays are easy to use, economical, efficiently use samples with little waste, require only a small volume of sample, and are protein friendly because samples are kept frozen during production. The cryoarray method allows small laboratories without access to expensive arraying equipment to produce many identical arrays with moderate numbers of precious samples. Proteins can be detected in their native configuration, without SDS or formalin. Cryoarrays may be useful for screening small samples of precious biological fluids or tissues for new biomarkers or for rapid screening of monoclonal antibodies. It may be possible to use cryoarrays to also measure protein function and protein-protein interactions.

Method for Non-Invasive Identification of Individuals at Risk for Diabetes

Anthony J. Durkin, Marwood N. Ediger, Michelle V. Chenault (FDA)
DHHS Reference No. E–091–98/2 filed 17 May 2001
Licensing Contact: Dale Berkley; 301/496–7735 ext. 223; e-mail: *berkleyd@od.nih.gov*

The invention is a non-invasive technique for the detection of ocular pathologies, including molecular changes associated with diabetes. Raman spectra emitted from an eye that is subject to a laser probe provides information regarding early markers of diabetes or diabetes-induced ocular pathologies. The invention compares spectra taken from the subject under study to spectra from a normal subject. Multivariate statistical methods are used to obtain predictive information based on the detected spectra, and to diagnose or predict the onset or stage of progression of diabetes-induced ocular pathology.

Dated: January 4, 2002.

Jack Spiegel,

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

[FR Doc. 02–744 Filed 1–10–02; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Cancer Institute; 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 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 Cancer Institute Special Emphasis Panel, Signal Transduction in Oscogenesis.

Date: January 11, 2002.

Time: 10:00 AM to 2:00 PM.

Agenda: To review and evaluate grant applications.

Place: 6116 Executive Blvd., Rockville, MD 20892, (Telephone Conference Call).

Contact Person: Virginia P. Wray, PhD, Scientific Review Administrator, National Cancer Institute, DEA GRB, 6116 Executive Boulevard, Room 8125, Rockville, MD 20895–7405, 301–496–9236, *vw8z@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. 93.392, Cancer Construction; 93.393, Cancer Cause and Prevention Research; 93.394, Cancer Detection and Diagnosis Research; 93.395, Cancer Treatment Research; 93.396, Cancer Biology Research; 93.397, Cancer Centers Support; 93.398, Cancer Research Manpower; 93.399, Cancer Control, National Institutes of Health, HHS)

Dated: January 4, 2002.

Anna Snouffer,

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 02–746 Filed 1–10–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Eye Institute; Notice of 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 a meeting of the National Advisory Eye Council.

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 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 Advisory Eye Council.

Date: February 14, 2002.

Closed: 8:30 a.m. to 1 p.m.

Agenda: To review and evaluate grant applications.

Place: 6130 Executive Boulevard, Room G, Rockville, MD 20852.

Open: 1:15 p.m. to 5 p.m.

Agenda: Following opening remarks by the Director, NEI, there will be presentations by the staff of the Institute and discussions concerning Institute programs and policies.

Place: 6130 Executive Boulevard, Room G, Rockville, MD 20852.

Contact Person: Lore Anne McNicol, Director, Division of Extramural Research, National Eye Institute, National Institutes of Health, Bethesda, MD 20892, 301–496–9110.

Information is also available on the Institute's/Center's homepage: *www.nei.nih.gov*, where an agenda and any additional information for the meeting will be posted when available.

(Catalogue of Federal Domestic Assistance Program Nos. 93.867, Vision Research, National Institutes of Health, HHS)

Dated: January 4, 2002.

Anna Snouffer,

Acting Director, Office of Federal Advisory Committee Policy.

[FR Doc. 02–753 Filed 1–10–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Human Genome Research Institute; Notice of 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 a meeting of the National Advisory Council for Human Genome Research.

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 U.S.C., as amended. The grant applications and/or contract proposals 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 and/or contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Advisory Council for Human Genome Research.

Date: February 11–12, 2002.

Open: February 11, 2002, 8:30 AM to 1 PM.

Agenda: To discuss matters of program relevance.

Place: National Institutes of Health, Natcher Building, Conference Rooms E1 & E2, 45 Center Drive, Bethesda, MD 20892.

Closed: February 11, 2002, 1 PM to Adjournment on 02/12/2002.

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

Place: National Institutes of Health, Natcher Building, Conference Rooms E1 & E2, 45 Center Drive, Bethesda, MD 20892.

Contact Person: Elke Jordan, PhD, Deputy Director, National Human Genome Research Institute, National Institutes of Health, PHS, DHHS, 31 Center Drive, Building 31, Room 4B09, Bethesda, MD 20892, 301 496–0844.

In the interest of security, NIH has instituted stringent procedures for entrance into the building by non-government employees. Persons without a government I.D. will need to show a photo I.D. and sign-in at the security desk upon entering the building.

(Catalogue of Federal Domestic Assistance Program Nos. 93.172, Human Genome Research, National Institutes of Health, HHS)

Dated: January 7, 2002.

Anna Snouffer,

Deputy Director, Office of Federal Advisory Committee Policy.

[FR Doc. 02–754 Filed 1–10–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Allergy and Infectious Diseases; Notice of 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 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.