



## Clinical Science Research and Development



U.S. Department of Veterans Affairs  
Veterans Health Administration  
Office of Research & Development

# Terri Talks

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## Message from the Director

Hello All,

In our lives right now in ORD, it is all about the money. First, I'd like to address budget execution. I wanted to talk through a few points with you to emphasize how important it remains for everyone to be highly attuned to the need to execute the valuable resources we have allocated for CSRD research. I believe you must have heard that we have suffered now through two years of mandated rescissions caused by failure to execute research budgets. Our collective focus now needs to be that everyone makes sure that project level dollars are obligated as planned for this fiscal year – *or* – to work with your facility research office to determine next steps. Next steps could include a return of funds to this office as one potential strategy, and we hope that plans are now being made to review if that is a direction for a PI to take. You will also be hearing from us if delays in startup are identified. For example, all projects that we approved from Spring 2020 should have Just in Time (JIT) requirements completed by now, as the 180-day limit to do so has passed. Delays in startup also must be brought to our attention via the local research office, or we will be taking steps to rescind funding notices. If we all work on budget management and execution together now, it will make a difference for our future.

Secondly, we do want to note that we are in the process of developing a reasonable way to move forward with field requests for project extensions. My initial projection is that we will not be able to support every request and we will have a strategy around this. Examples of what we might not be able to support: cost extensions longer than the period of the pandemic, e.g., now asking for 2-year cost extensions, and cost extensions for work that cannot be completed in a reasonable amount of time when progress for the original work was already behind. Facilities should only propose cost extensions where all rationales for such are firmly in place.

Please, as always, let us know if you have questions, *Terri*

## CSRD Purview Update

CSRD will be updating our purview statement in our Requests for Applications, and the description below is the newest/early version for your information. Shortly it will also include the potential to incorporate Million Veteran Program (MVP) data in your work as well, so look for that inclusion for the Fall 2021 round of RFAs. In particular, we draw your attention to the list of priority areas, because these also come into consideration after the merit review evaluation, when we make funding decisions.

CSRD funds clinical, behavioral, and epidemiological research on disorders and diseases of importance to the health of Veterans. Studies supported under this Program include experimental and observational studies involving human subjects for research purposes, and methodological studies focused on research with human subjects. If new data are only generated from pre-existing records, from biological samples collected using minimally invasive procedures (blood, urine, buccal swabs) or from tissues acquired without direct contact with subjects (e.g., from tissue banks or pathology material), the project should be submitted to the Biomedical Laboratory R&D Service (BLR&D) RFAs. Note that CSRD will support interventional clinical trials only if a Letter of Intent (LOI) is approved in advance and those applications are submitted only using RFA CX-20-006 or CX-20-005.

Eligible applicants are encouraged to submit innovative or highly impactful clinically relevant research with the potential to lead to significant advances in healthcare for Veterans particularly as related to translational capability. Priority areas described below are considered when funding decisions are made. Examples of priority research areas of specific interest to CSRD include focus on:

- Psychiatric, behavioral and cognitive disorders prevalent in Veterans including, but not limited to:
  - Suicide, suicidal behavior, and suicide prevention
  - Posttraumatic stress disorder (PTSD) including commonly occurring co-morbidities
  - Health-risk behaviors (e.g., substance abuse, addictive disorders)
- Pain mechanisms and treatment alternatives to opioids
- Traumatic brain injury, specifically diagnosis and treatment
- Women Veteran's health
- Military exposures research and related health consequences of military service
- Precision medicine, especially individual treatment response

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## Fall 2020 Projects Announced

The Fall 2020 Cycle of projects was announced to the field on February 19. A total of 23 projects was announced. As we have mentioned, the Fall 2020 round was greatly impacted by available funding. We do congratulate the following awardees for their successful applications:

Rajendra D Badgaiyan, MBBS, M.D., San Antonio, "Dopamine neurotransmission in Gulf War Veterans Illness"

Christine M Basmajian, Ph.D., Ann Arbor, "Regulatory T Cell Inhibition of Natural Killer Cells in COPD"

Jeffrey Louis Curtis, M.D., Ann Arbor, "VA CoronavirUs Research & Efficacy Studies (VA CURES) Infrastructure Award"

Deepak Cyril D'souza, MBBS, M.D., West Haven, "Proof of Concept Trial of Cannabis Derivatives in Neuropathic Pain"

Jiang Du, Ph.D., San Diego, "Developing MRI Biomarkers of Myelin and Iron in Veterans with Traumatic Brain Injury"

Tracy Minan Frech, M.D., Salt Lake City, "Systemic sclerosis (SSc) vasculopathy: Improved clinical monitoring and treatment"

Noam Jacob, M.D., Los Angeles, "Microbiomal Mediators of TL1A-induced-Fibrosis"

Michael George Kemp, Ph.D., Dayton, "Mapping DNA Repair and Error-Prone DNA Synthesis in Geriatric Skin"

Matthew Klein, M.D., Ph.D. Bronx, "Identifying neurobiological vulnerabilities in reward processing associated with suicidal behavior in Veterans"

Suthat Liangpunsakul, M.D., Indianapolis, "Mechanism-based serum biomarkers and validation of ensemble model for excessive alcohol use"

Chen Lin, M.D., Birmingham, "A randomized placebo-controlled trial of methylphenidate in Veterans with a diagnosis of posttraumatic stress disorder and recent cerebral stroke"

Dragana Lovre, M.D., New Orleans, "Effects of Novel Estrogens on Glucose and Lipids in Postmenopausal Prediabetic Women Veterans"

Bruce Montgomery, M.D., Seattle, "High-dose Testosterone in Men with Metastatic Castration-resistant Prostate Cancer and ATM or CDK12 deficiency"

Alan Ross Morrison, M.D., Ph.D., Providence, "Reprogramming Macrophages to Improve Vascular Healing in Diabetes"

Stefan M Schieke, M.D., Madison, "A metabolic decision point in the progression of lymphoid malignancies"

Shilpa Sharma, Los Angeles, "Dynamic Changes in Erythrocyte 2,3 DPG as a Driver of Cardiac Dysfunction in End Stage Kidney Disease"

Brian N Smith, Ph.D., Boston, "Long-Term Health Impact of Vietnam Era Service: Examining Gender Differences in Risk of Mortality and Chronic Disease"

Scott Francis Sorg, Ph.D., San Diego, "Novel Neuroimaging and Neuropsychological Methods Sensitive to Cerebral Disruption in Veterans with Mild Traumatic Brain Injury"

Edith Tzeng, M.D., Pittsburgh, "Metformin Benefits Lower Extremities with Intermittent Claudication (MOBILE\_IC)"

Amin Zand Vakili, M.D., Ph.D., Providence, "Developing Computational Nosologies of Posttraumatic Stress Disorder (PTSD)"

Emily S Wan, M.D., Boston, "Quantitative Imaging Analysis to Identify Chronic Respiratory Disease"

Robert L White, M.D., Ph.D., St. Louis, "Diffusion Basis Spectrum Imaging for Measurement of Neuroinflammation in Parkinson Disease"

Jonathan R Young, Durham, "Neuroimaging correlates and feasibility of transcranial magnetic stimulation (TMS) to improve smoking cessation outcomes in veterans with comorbid PTSD"

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## Department of Veterans Affairs, Office of Research and Development, Research Supplements to Support Diversity Applications due June 1

- Supplement to **funded VA Merit Awards. Eligible PIs with VA Merits with at least 2 years remaining may apply.**
- Supports mentored research experiences for early career scientists from underrepresented populations\*
- Individuals from racial and ethnic groups that have been shown by NSF to be underrepresented in health-related sciences on a national basis
- Individuals with disabilities
- U.S. Veterans

\*The above criteria are intended to increase the applicant pool but will not be used as a determinative factor in selecting participants in this program.

- **Budget:** \$85,000/yr for mentee salary, \$12,000/yr for supplies and \$3,000/yr to attend scientific meetings.
- **Duration:** Up to 2 years
- **Due:** June 1, 2021
- **For more information or to receive a copy of the announcement, email [Carol.Fowler@va.gov](mailto:Carol.Fowler@va.gov).**

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## DMC Members Needed

CSRD's centralized Data Monitoring Committee is currently seeking members for two panels – Medical/Surgical (M/S) and Psychiatric, Behavioral Health and Neurologic Disorders (PBN). Qualifications for membership include funding history, academic position of associate professor or above, a solid publications record and review experience. For more information, please contact Tamara Paine ([Tamara.Paine@va.gov](mailto:Tamara.Paine@va.gov)).



## **CSRD Staff Highlight: Annette Jackson**

Annette supports the CSRD Director and staff in her role as secretary. Current projects include tracking correspondence for submitted project modification requests and assisting with Records Management. Annette is critical to keeping our CSRD schedules and calendars straight. She began her VA career in 2008 as a medical support assistant at the Washington DC VAMC. She hails from Woodbridge, VA, and has a 4-year-old son, Landon. Annette is in outlook as: [Janet.Jackson5@va.gov](mailto:Janet.Jackson5@va.gov) should you have a meeting invitation or request of us.

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## **CSRD Contact Information**

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