



National Institute of  
Diabetes and Digestive  
and Kidney Diseases

# RFA-DK-20-022 Toward Elucidating Mechanisms of HIV Pathogenesis within the Mission of the NIDDK (Pathogenesis TEAMS)

## Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

### Application Submission Contacts

eRA Service Desk (Questions regarding ASSIST, eRA Commons, application errors and warnings, documenting system problems that threaten submission by the due date, and post-submission issues)

Finding Help Online: <http://grants.nih.gov/support/> (preferred method of contact)

Telephone: 301-402-7469 or 866-504-9552 (Toll Free)

General Grants Information (Questions regarding application instructions, application processes, and NIH grant resources)

Email: [GrantsInfo@nih.gov](mailto:GrantsInfo@nih.gov) (preferred method of contact)

Telephone: 301-945-7573

Grants.gov Customer Support (Questions regarding Grants.gov registration and Workspace)

Contact Center Telephone: 800-518-4726

Email: [support@grants.gov](mailto:support@grants.gov)

### Scientific/Research Contact(s)

*For Division of Digestive Diseases and Nutrition-related inquiries:*

Peter J. Perrin, Ph.D.



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# Background

- Research on HIV comorbidities, coinfections, and complications is an NIH HIV research priority
  - Antiretroviral therapy (ART) does not improve CCCs
  - Chronic infection, long term ART use and aging all contribute to CCCs
- Important CCCs fall within NIDDK's mission
  - Enteropathy and disruption of GI homeostasis, noncommunicable liver disease and viral hepatitis
  - Kidney, urologic, and hematologic diseases
  - Obesity, diabetes, associated complications
  - NIDDK-relevant processes may contribute to HIV pathogenesis in other tissues
- Underlying biological mechanisms in the setting of HIV

# Purpose

To support **multidisciplinary research teams** with complementary expertise in in HIV and pathobiology, pathophysiology, and/or metabolism in organs, tissues, and/or biological systems of specific interest to the NIDDK. These **teams** will comprehensively interrogate fundamental mechanisms underlying HIV-associated CCCs relevant to the mission of the NIDDK.

# Examples of Topic Areas

- Pathophysiological and metabolic pathways where HIV or its treatment contribute to CCCs in NIDDK's mission
- Interaction of HIV or its treatment with biological processes within NIDDK's mission
  - Metabolism, endocrine function, erythrocyte biology and hematopoiesis, development and progression of kidney disease, GI mucosal homeostasis
- Impact of HIV or its treatment on the GI or penile microbiome, pathogenic enteric microbes, male genital tract infections, or viral hepatitis co-infection
- Response of tissues within NIDDK's mission to HIV and HIV-associated inflammation

# RFA-DK-20-022: MPI Structure Required

- Requires a Multiple PD/PI structure
  - At least one PD/PI with expertise in HIV science
  - At least one PD/PI with expertise in physiology, pathobiology, pathobiology and/or metabolism
  - May include additional expertise as required
  - Projects lacking this structure will be withdrawn and not reviewed
- Previous publications or extensive collaboration not expected

# RFA-DK-20-022: Additional Instructions

## Approach:

- Include a brief description of each PD/PI's contribution to the preliminary data with its presentation
  - Design, execution, or interpretation

## Multiple PD/PI Leadership Plan:

- Include one or more examples of how development of specific aspects of the research plan benefited from interactions between the PDs /PIs.
- Describe how each PD/PI will participate in aspects of the project primarily led by the other PD(s)/PI(s)
  - How will the combined expertise of the Multiple PD/PI team be leveraged?

**Note:** There are corresponding review criteria

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- Nonresponsive projects:
  - One or more components ineligible for the use of HIV/AIDS-designated funds
  - Do not use MPI format
  - Clinical trials designed to answer questions about the clinical effect of an intervention
  - Rely primarily on epidemiological approaches
  - Projects that deal predominantly with HIV reservoirs
  - Studies primarily focused on HIV CCCs outside of the NIDDK's mission

# RFA-DK-20-022

## RFA-DK-20-022: Toward Elucidating Mechanisms Contributing to HIV Reservoirs in NIDDK-relevant Tissues (Cure TEAMS) (R01 Clinical Trial Optional)

Trans-NIDDK RFA

Issued: September 2, 2020

**Due: March 3, 2021**

Council: October 2021

**Due: November 17, 2021**

Council: May 2022

Budget max: \$500,000 DC/year

Duration max: 5 years

\$3M/year (5-6 awards)

Resubmission (A1) applications are allowed for the November 2021 receipt. A0 must have been submitted to RFA-DK-20-023

# Frequently Asked Questions

- Can I include a substantial component, such as and Aim or sub-Aim, addressing related mechanisms that do not include HIV or its treatment?
  - No, the RFA requires that 100% of the research plan addresses NIH priority research and is eligible for the use of HIV/AIDS-designated funds
- Can the Multiple PD/PI team consist of individuals who have published previously?
  - Yes, Although previous collaboration is not expected, it is allowed
- Is a study addressing the impact of a CCC on the HIV reservoir appropriate?
  - It depends. If a project's primary focus is on how a CCC effects the HIV reservoir, it is not responsive, and you should consider RFA-DK-20-023. If the overall focus is on mechanisms of CCC initiation or progression, you may include studies on the reservoir related to your overarching hypothesis.

Please type in your questions using the Q&A tool to ask questions (access at the bottom of your screen)

Questions will be answered verbally