Changes in Research Project Offerings at NEI and in Cost Management at NIH

Several major events at both the National Eye Institute and at the National Institutes of Health will affect researchers. These include changes in existing NEI research programs and a proposed change in some aspects of cost management at the NIH as a whole.

After an evaluation by the Program Planning Subcommittee of the National Advisory Eye Council, NEI has decided to terminate the Small Grant Program for Pilot Projects (R03). This program provided seed money for innovative or high-risk research proposals by newly trained investigators or those coming into vision research from another field. The evaluation suggested that too few long-term research grant proposals developed from pilot projects of this program. Funds that were set aside for these projects will fund First Independent Research Support and Transition (FIRST) awards and Physician Scientist Awards, and will expand initiatives for minorities in biomedical research.

Major changes have been made in NEI National Research Service Award (NRSA) training grants. Over one year ago, the review process for individual (F32) NRSA submissions was transferred from the Vision Research Review Committee to an initial review group that reviews all NIH F32 applications. In addition, institutional training grants (T32 programs) must now emphasize predoctoral training in either a single discipline or in several areas, particularly cell biology, immunology, molecular biology, molecular genetics, epidemiology, and biostatistics. Limited numbers of postdoctoral training positions within institutional training programs are to be used for only one year to attract promising candidates toward a transition to other support mechanisms, such as individual NRSA or Physician Scientist awards. This change will affect T32 programs presently supported as they reach competitive renewal.

Furthermore, in the Physician Scientist Awards there may be increases in allowed salary levels and shortening of the training period from 5 to 3 years. It is anticipated that MD candidates seeking research training will avail themselves of this mechanism or the individual NRSA (F32) award.

On a broader scale, NIH Deputy Director for Extramural Research, John W. Diggs, PhD announced proposed changes in NIH management of research funding. In its appropriations committee hearings, Congress directed NIH to implement more aggressive cost management measures. The proposed changes were discussed at a public forum on December 17 and a final version is expected soon. The major components of the plan are:

1. The average length of research project grants will be 4 years. This reverses a trend toward 5 year awards that began several years ago.
2. The practice of “downward negotiation”, or across-the-board reductions in commitments of record for noncompeting renewals will cease. The disruptive influence of annual reductions in funded projects has been recognized.
3. To prevent downward negotiation, the initially recommended amounts for new research projects will be subject to intense scrutiny. The total budget for all new projects for each year will not be expected to exceed the total for the preceding year by more than the inflation index called Biomedical Research and Development Price Index (BRDPI). This index is constructed from the price changes in typical goods and services needed for research, rather than the broad range of consumer items in, for example, the consumer price index (CPI). It has typically risen in the last decade at a substantially greater rate than has the CPI.
4. A semantic change is planned in the present trilogy: “approved and funded”, “approved and not funded”, and “disapproved”. It is proposed that the initial review groups (IRG, also called study sections) call some grants “not recommended for further consideration”; these would presumably be those formerly called “disapproved”. The remainder would be given a score and percentile ranking and be presented to Council. Although Council might review all scored projects, it would be expected that a certain proportion would not be reviewed (due to low score), except in exceptional circumstances (eg, high program relevance). Thus, the “success” rate would be the number of awards divided by the total applications reviewed. Congress appears to have been bothered by the “approved but not funded” category that would be eliminated. The change would seemingly have no affect on...
the actual number of projects that receive funds, it would simply redefine the rate of "success" and make the definition almost identical to that in the rest of the federal government.

5. With regard to the training budget, the report is somewhat ambiguous. While stating that there is a critical need to provide increased stipends for trainees, and aiming to increase training funds by 3.5% per year for the next 3 years, it recognizes that appropriations may be insufficient to increase stipends and increase trainee number. If, as is likely, funds are inadequate to do both, it suggests the stipend increase has precedence over trainee number.

6. Center grants are discussed, but are of little relevance to the NEI, as they have never been part of our Institute's budget. For other institutes, the cost control of center grants is proposed to center on a ceiling on total dollars for centers, rather than limiting the number of centers.

ARVO members may find it interesting to read another summary of the proposed management plan in *Science* (250:1198–99, 1990).

Harry A. Quigley, MD
Secretary—Treasurer

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**Announcement**

**Final call for**

**NOMINATIONS FOR THE JIN H. KINOSHITA LECTURESHIP**

Honorarium—$10,000

The National Foundation for Eye Research, an organization dedicated to the support of cataract research, is pleased to announce a call for nominations for the first Jin H. Kinoshita Lectureship to be given in Hawaii at the US-Japan CCRG meeting, November 30–December 5, 1991. The lectures will be presented at the biennial CCRG meetings. Due to recent contributions, the honorarium has been increased to $10,000. Nominations should include a CV and supporting letter. The Nomination Committee consists of:

Suguru Fukushi, MD
Venkat N. Reddy, PhD
Abraham Spector, PhD, Chairman

Please send nominations to Abraham Spector, Department of Ophthalmology, College of Physicians and Surgeons of Columbia University, 630 West 168th Street, New York, New York 10032.

**Deadline:** June 15, 1991