DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Eunice Kennedy Shriver National Institute of Child Health and Human Development; 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 section 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 Child Health and Human Development Special Emphasis Panel Improving Health through Rehabilitation Robotic Technology.

Date: August 19, 2015.

Time: 1:00 p.m. to 3:00 p.m.

Agenda: To review and evaluate grant applications.

Place: National Institutes of Health, 6100 Executive Boulevard, Rockville, MD 20852 (Telephone Conference Call).

Contact Person: Sathasiva B. Kandasamy, Ph.D., Scientific Review Officer, Scientific Review Branch, Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, 6100 Executive Boulevard, Room 5B01, Bethesda, MD 20892–9304, (301) 435–6680, *skandasa@mail.nih.gov.*

(Catalogue of Federal Domestic Assistance Program Nos. 93.864, Population Research; 93.865, Research for Mothers and Children; 93.929, Center for Medical Rehabilitation Research; 93.209, Contraception and Infertility Loan Repayment Program, National Institutes of Health, HHS)

Dated: July 17, 2015.

Michelle Trout,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2015–18093 Filed 7–23–15; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute on Aging; Amended Notice of Meeting

Notice is hereby given of a change in the meeting of the National Institute on Aging Special Emphasis Panel, August 13, 2015, 12:00 p.m. to August 13, 2015, 4:00 p.m., National Institute on Aging, Gateway Building, 7201 Wisconsin Avenue, 2C212, Bethesda, MD 20892 which was published in the **Federal Register** on July 21, 2015, 80 FR 43101.

The meeting notice is amended to change the date of the meeting from August 13, 2015 to August 12, 2015. The meeting is closed to the public.

Dated: July 21, 2015.

Melanie J. Gray,

Program Analyst, Office of Federal Advisory Committee Policy.

[FR Doc. 2015–18191 Filed 7–23–15; 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.

SUPPLEMENTARY INFORMATION: Technology descriptions follow.

Bispecific Chimeric Antigen Receptors to CD22 and CD19 for Treating Hematological Cancers

Description of Technology: Chimeric antigen receptors (CARs) are hybrid proteins that have antibody binding fragments fused to protein signaling domains that activate T cells. The antibody binding fragments allow the CAR to recognize specific cell types, thereby activating the T cell through the protein signalling domain. Once activated, the T cells selectively eliminate the cells which they recognize. By engineering a T cell to express CARs with antibody binding fragments which are specific for cell surface proteins that are associated with diseased cells, it is possible to treat the disease. This is a promising new therapeutic approach known as adoptive cell therapy.

CD22 and CD19 are cell surface proteins that are expressed on a large number of B cell lineage hematological cancers, such as leukemia and lymphoma. CD19 CAR T cells have demonstrated potent activity against leukemia in early clinical trials. However, some of these patients will relapse with leukemia that no longer expresses the CD19 protein. This technology concerns the use of two high affinity antibody binding fragments as the targeting moieties of a CAR: One to CD22 (m971), and one against CD19 (FMC63). The resulting CAR can be used in adoptive cell therapy treatment for cancers which express either CD22 or CD19.

Potential Commercial Applications:

- Treatment of diseases associated with increased or preferential expression of CD22 or CD19.
- Specific diseases include hematological cancers such as chronic lymphocytic leukemia (CLL), hairy cell leukemia (HCL) acute lymphoblastic leukemia (ALL) and lymphoma.

Competitive Advantages:

- High affinity of the m971 and FMC63 antibody binding fragments increases the likelihood of successful targeting.
- Targeted two antigens expressed on the same type of diseased cells may increase efficacy relative to targeting a single antigen.
- Targeted therapy decreases non-specific killing of healthy, essential cells, resulting in fewer non-specific side-effects and healthier patients.
- Hematological cancers are susceptible to cytotoxic T cells because they are present in the bloodstream.

Development Stage:

- In vitro data available.
- In vivo data available (animal).

Inventors: Terry J. Fry, et al. (NCI).

Publications:

1. Haso W, et al. Anti-CD22-chimeric antigen receptors targeting B-cell precursor acute lymphoblastic leukemia. Blood. 2013 Feb 14;121(7):1165–74. [PMID 23243285]
2. Lee DW, et al. T cells expressing CD19 chimeric antigen receptors for acute lymphoblastic leukaemia in children and young adults: a phase 1 dose-escalation trial. Lancet. 2015 Feb7;385(9967):517–