IX. Reference

1. U.S. Department of Health and Human Services, Departmental Appeals Board, Civil Remedies Division, Kremers Urban Pharmaceuticals, Inc. Proposal to Withdraw Approval of an Abbreviated New Drug Application for Extended Release Methylphenidate Tablets, Case Development Order [Civil Remedies Division Procedures, March 28, 2016], August 13, 2026.

George Warren,

Director of the Office of Scientific Integrity.

[FR Doc. 2026–16536 Filed 8–12–26; 8:45 am]

BILLING CODE 4164–01–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 to achieve expeditious commercialization of results of federally-funded research for the benefit of the public health.

FOR FURTHER INFORMATION CONTACT: Licensing information may be obtained by communicating with Vidita Choudhry, Ph.D., National Heart, Lung, and Blood, Office of Technology Transfer and Development, 31 Center Drive Room 4A25, MSC2479, Bethesda, MD 20892–2479; telephone: 301–594–4095; email: *vidita.choudhry@nih.gov*. A signed Confidential Disclosure Agreement may be required to receive any unpublished information.

SUPPLEMENTARY INFORMATION: Technology description follows.

Novel Spironolactone Analogues as Anti-Inflammatory Therapeutics

Available for licensing and commercial development are patent rights covering a new class of spironolactone anti-inflammatory drugs, pharmaceutical compositions thereof, and their uses in treating inflammation. These new compounds present treatment options for treating a broad range of chronic inflammatory conditions such as atherosclerosis, autoimmune diseases, and chronic inflammatory lung disease.

Inflammation contributes to many forms of acute and chronic diseases such as cardiovascular disease and chronic respiratory disease, which result in a substantial percent of mortality worldwide. There is still need for clinically approved therapeutic strategies that effectively reduce pathologic inflammation. One promising candidate is Spironolactone (SPL), a mineralocorticoid receptor antagonist that was originally utilized by NIH investigators against pulmonary arterial hypertension. It has become recently elucidated that SPL suppresses inflammation by promoting proteasomal degradation of xeroderma pigmentosum type B (XPB), an integral subunit of the transcription factor TFIIH that activates inflammatory genes. Researchers at the National Heart, Lung, and Blood Institute (NHLBI) have developed twenty-nine (29) different SPL-based analogues, all of which demonstrate an effective potency at safe dosage levels, making them advantageous compared to known SPLs. Several lead compounds demonstrate potent, dose-dependent XPB degradation and inhibition of key inflammatory signaling pathways, including AP–1 and NF–kB, at concentrations significantly lower than those required for SPL. These analogs may be useful for treating multiple inflammatory disease and related conditions without deleterious side effects.

Potential Commercial Applications:

A class of novel anti-inflammatory drugs (long-term immunosuppressants) for the treatment for a wide variety of inflammatory disorders, such as (but not limited to):

- Pulmonary arterial hypertension
- Atherosclerosis
- Lupus erythematosus
- Rheumatoid arthritis
- Chronic obstructive pulmonary disease (COPD)
- Asthma

Development Stage:

- *Early Stage*
- *In vitro data available*

Inventors: Jason Elinoff (NHLBI), Li-Yuan Chen (NHLBI), Rolf Swenson (NHLBI), and Venkatareddy Sabbasani (NHLBI).

Intellectual Property:

- NIH Reference No. E–029–2026–0–US–01; U.S. Provisional Patent Application 64/044,506 filed April 20, 2026.

Licensing Contact: Vidita Choudhry, Ph.D.; 301–594–4095; *vidita.choudhry@nih.gov*. This notice is made in accordance with 35 U.S.C. 209 and 37 CFR part 404.

Dated: August 11, 2026.

Michael A. Shmilovich,

Acting Director, Office of Technology Transfer and Development, National Heart, Lung, and Blood Institute.

[FR Doc. 2026–16544 Filed 8–12–26; 8:45 am]

BILLING CODE 4167–05–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Eye Institute; Notice of Meeting

Pursuant to section 1009 of the Federal Advisory Committee Act, as amended, 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 open session will be videocasted and can be accessed from the NIH Videocasting website (*https://videocast.nih.gov/watch/c4dbedd4-901a-11f1-82c0-124f0a52e769*). Registration is not required to access the videocast.

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: September 25, 2026.

Open: 9:00 a.m. to 2:30 p.m.

Agenda: Presentation of the NEI Director's report, discussion of NEI programs, and concept clearances.

Address: National Eye Institute, Building 31, 31/C Room F and G 31 Center Drive, Bethesda, MD 20892.

Meeting Format: In-Person and Virtual.

Closed: 2:45 p.m. to 4:30 p.m.

Agenda: To review and evaluate grant applications.

Address: National Eye Institute, Building 31 31/C, Room F and G, 31 Center Drive, Bethesda, MD.

Meeting Format: In-Person and Virtual.

Contact Person: Hyo-Jung Anna Han, Acting Director, Division of Extramural Activities, National Eye Institute, 6700B