chromatography (HIC), buffer exchange (desalting), and cation exchange. The final product of the purification is a highly purified rSAg composition satisfying clinical safety criteria and is immunogenic and protective against lethal aerosol challenge in a murine model. The methods and compositions claimed in the patent application provide possible therapeutics and prophylactics for diseases caused by bacterial SAgs, such as food poisoning, bacterial arthritis and other autoimmune disorders, toxic shock syndrome, and the potential use of SAg biowarfare agents.

Novel Peptides to a Melanoma Antigen and Their Use in Diagnostic and Therapeutic Methods

P. Hwu, R. LaPointe, S.A. Rosenberg (NCI)

DHHS Reference No. E–086–01/0 filed 22 Aug 2001

Licensing Contact: Kai Chen; 301/496–7736 ext. 247; e-mail: *chenk@od.nih.gov*

Various tumor-associated antigens are recognized by T cells, thereby eliciting an immune response. Among these tumor-associated antigens is gp100, which along with several other tumor antigens identified to date is associated with malignant melanoma. Most of the gp100 peptide epitopes identified to date are HLA–A2 (MHC Class I) restricted.

The current invention embodies the identification of a novel HLA–DRB1*0701 (MHC Class II) restricted epitope of gp100. As 16–28% of the population is HLA–DRB1*0701 positive, this peptide could represent a potential immunotherapeutic vaccine for use against melanoma in a significant percentage of the patient population. In addition, the current invention represents only the second gp100 peptide identified to date that is capable of eliciting a CD4+ helper T cell response. It is believed that administration of a peptide capable of eliciting a CD4+ T cell response may be required in order to upregulate a CD8+ T cell response against a Class I-restricted peptide. The identification of an immunogenic Class II-restricted epitope therefore could be of particular importance not only as an immunotherapeutic vaccine in and of itself, but also for use in a vaccination protocol in combination with an immunogenic Class I-restricted peptide.

Tumor Antigen Homologous to Poly(A) Polymerase

S. Topalian (NCI), M. Gonzales (NCI), J. Manley, and S. Kaneko

DHHS Reference No. E–002–01/0 filed 16 May 2001

Licensing Contact: Kai Chen; 301/496–7736 ext. 247; e-mail: *chenk@od.nih.gov*

Poly(A) polymerase (PAP) activity has long been linked to cancer, and several forms of PAP have been identified to date by various researchers. PAP is an enzyme that is required for the processing and stability of nascent RNA transcripts. The current invention embodies the identification of a new human tumor associated antigen, neo-poly(A) polymerase (neo-PAP), which shares approximately 70% amino acid and 61% nucleic acid sequence similarity with classic PAP.

Neo-PAP is overexpressed in all tumor cell lines tested, including human prostate cancers, colon cancers, and melanomas. It is expressed at low levels in normal human testis tissue as well, but is expressed only at very low levels or not at all in other normal human tissues. Thus, neo-PAP appears to be a ''cancer-testis'' antigen, which is a category of tumor-associated antigens that are recognized by cytotoxic and helper T lymphocytes as well as serum immunoglobulins. Members of this tumor antigen category, including NY–ESO–1 and MAGE–3, and currently in clinical testing as cancer vaccines. Neo-PAP therefore could represent a potential immunotherapeutic vaccine for use against cancers of various types, and could also be useful in the diagnosis/prognosis of cancer.

Dated: January 14, 2002.

Jack Spiegel,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. 02–1440 Filed 1–18–02; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Center for Complementary & Alternative Medicine; Notice of Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the National Advisory Council for Complementary and Alternative Medicine (NACCAM).

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 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/or contract proposals and the discussion could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications and/or contract proposals, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

Name of Committee: National Advisory Council for Complementary and Alternative Medicine.

Date: January 28, 2002.

Open: 8:30 am to 2:45 pm.

Agenda: The agenda includes the Opening Remarks by Director, NCCAM, Reports on FIC Activities, International Health Research Strategic Plan, New Initiatives, and other business of the Council.

Closed: 2:45 pm to adjournment.

Agenda: To review and evaluate grant applications and/or proposals.

Place: Neuroscience Conference Center, 6001 Executive Boulevard, Rockville, MD 20852.

Contact Person: Jane F. Kinsel, Ph.D. Executive Secretary, National Center for Complementary and Alternative Medicine, National Institutes of Health, 6707 Democracy Blvd., Suite 200, Bethesda, MD 20892, 301/402–7269.

The public comments session is scheduled from 1:15–1:45 pm. Each speaker will be permitted 5 minutes for their presentation. Interested individuals and representatives of organizations are requested to notify Dr. Jane Kinsel, National Center for Complementary and Alternative Medicine, NIH, 6707 Democracy Boulevard, Suite 200, Bethesda, Maryland 20892, 301–402–7269, Fax: 301–480–3519. Letters of intent to present comments, along with a brief description of the organization represented, should be received no later than 5 pm on January 18, 2002. Only one representative of an organization may present oral comments. Any person attending the meeting who does not request an opportunity to speak in advance of the meeting may be considered for oral presentation, if time permits, and at the discretion of the Chairperson. In addition, written comments may be submitted to Dr. Jane Kinsel at the address listed above up to ten calendar days (February 7, 2001) following the meeting.

Copies of the meeting agenda and the roster of members will be furnished upon request by Dr. Jane Kinsel, Executive Secretary, NACCAM, National Institutes of Health, 6707 Democracy Boulevard, Suite 200, Bethesda, Maryland 20892, 301–402–7269, Fax 301–480–3519.

Dated: January 14, 2002.

LaVerne Y. Stringfeild,

Director, Office of Federal Advisory Committee Policy, NIH.

[FR Doc. 02–1434 Filed 1–18–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

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: Clinical Trials Review Committee.

Date: February 25–26, 2002.

Time: February 25, 2002, 8:00 AM to Adjournment.

Agenda: To review and evaluate grant applications.

Place: Hilton Hotel, 8727 Colesville Road, Silver Spring, MD 20910.

Contact Person: Joyce A. Hunter, PhD, Review Branch, Room 7129, Division of Extramural Affairs, National Heart, Lung, and Blood Institute, National Institutes of Health, Bethesda, MD 20892–7924, 301/435–0277.

(Catalogue of Federal Domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: January 14, 2002.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 02–1432 Filed 1–18–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Heart, Lung, and Blood Institute; Notice of Closed Meeting

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. Appendix 2), notice is hereby given of the following meeting.

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 Heart, Lung, and Blood Institute Special Emphasis Panel Demonstration & Education Research.

Date: February 12, 2002.

Time: 10:00 AM to 6:00 PM.

Agenda: To review and evaluate grant applications.

Place: Hilton Hotel, 8727 Colesville Road, Silver Spring, MD 20910.

Contact Person: Zoe E. Huang, MD, Review Branch, Division of Extramural Affairs, National Heart, Lung, and Blood Institute, Bethesda, MD 20892–7924, (301) 435–0287, *huangz@nih.gov*.

(Catalogue of Federal domestic Assistance Program Nos. 93.233, National Center for Sleep Disorders Research; 93.837, Heart and Vascular Diseases Research; 93.838, Lung Diseases Research; 93.839, Blood Diseases and Resources Research, National Institutes of Health, HHS)

Dated: January 14, 2002.

LaVerne Y. Stringfield,

Director, Office of Federal Advisory Committee Policy.

[FR Doc. 02–1433 Filed 1–18–02; 8:45 am]

BILLING CODE 4140–01–M

DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

Prospective Grant of Exclusive License: Development of Diagnostic Tests for *Plasmodium falciparum* Caused Malaria

AGENCY: National Institutes of Health, Public Health Service, DHHS.

ACTION: Notice.

SUMMARY: This is notice, in accordance with 35 U.S.C. 209(c)(1) and 37 CFR 404.7(a)(1)(i), that the National Institutes of Health (NIH), Department of Health and Human Services, is contemplating the grant of an exclusive license concerning the inventions embodied in:

USSN 5,130,416 (USPA 07/518,299, filed 05/03/90) issued July 14, 1992

USSN 5,296,382 (USPA 07/791,392, filed 11/14/91) issued March 22, 1994

USSN 5,476,785 (USPA 08/161,406, filed 12/06/93) issued December 19, 1995

all entitled ''Recombinant DNA clone containing a genomic fragment of PfHRP–II gene from Plasmodium falciparum'' and invented by Thomas E. Wellems and Russell J. Howard, to Akers Laboratories, Inc., a diagnostic company having a place of business in Thorofare, N.J. The United States of America is an assignee to the patent rights of these inventions.

The contemplated exclusive license may be limited to the development of diagnostic tests for *Plasmodium falciparum*-caused Malaria for sales in the United States. A nonexclusive license of the present inventions to make and use in the United States but to sell in territories outside of the United States is available to other licensees.

DATES: Only written comments and/or applications for a license, which are received by the NIH Office of Technology Transfer on or before March 25, 2002, will be considered.

ADDRESSES: Requests for a copy of the patents, inquiries or comments relating to the contemplated license should be directed to: Uri Reichman, Ph.D., Technology Licensing Specialist, Office of Technology Transfer, National Institutes of Health, 6011 Executive Boulevard, Suite 325, Rockville, MD 20852–3804; Telephone: (301) 496–7056, ext. 240; Facsimile: (301) 402–0220; e-mail: *reichmau@od.nih.gov*.

SUPPLEMENTARY INFORMATION: The inventions included in the prospective license relates to the isolation of clones of DNA from the malaria-causing parasite *Plasmodium falciparum* (*P. falciparum*) that encode a histidine-rich protein (designated name PfHRP–II) from this organism. PfHRP–II is expressed on P. falciparum-infected erythrocytes, and released from the infected host erythrocytes into the body fluids. The inventions describe the cloning procedure and the characterization of the coding sequence as well as that of the encoded protein and the antibodies made against it. The inventions can be utilized in the development of diagnostic tests for malaria as contemplated by the