

Licensing Contact: Peter A. Soukas, J.D.; 301-435-4646; soukasp@mail.nih.gov.

A Unique Infectious Hepatitis C Virus Clone, Strain HC-TN (genotype 1a)

Description of Invention: It is anticipated that this infectious clone of hepatitis C virus (HCV) strain HC-TN (genotype 1a) will be useful for the development of vaccines and antiviral drugs that target HCV, genotype 1a. The HC-TN strain is unique because it has been shown to cause fulminant hepatitis. To date, only one other HCV strain, JFH1 (genotype 1b), has been isolated that is known to cause fulminant hepatitis. Additionally, little is known about the etiology of fulminant hepatitis C disease. Therefore, the HC-TN strain may be useful as a tool for studying the etiology of fulminant hepatitis. This invention includes the infectious clone, nucleotide sequences of the clone, and polypeptides encoded by the HC-TN clone. Methods are included for producing attenuated HCV, and for screening therapeutics against HCV and developing vaccines and diagnostics.

Apparently, no companies or other laboratories have this HC-TN strain. The availability of the pHC-TN clone will be highly useful to pharmaceutical companies since no further research is required for its commercialization into, e.g., assays for testing antiviral compounds targeting HCV.

Applications:

- Production of attenuated viruses and polypeptides.
- HCV vaccines, diagnostics, therapeutics and screening tool for anti-HCV compounds.

Advantages: There is no universally effective therapy against HCV infection. This invention enables development of vaccines, diagnostics and therapeutics that are specific for the HC-TN strain or HCV genotype 1a.

Development Status: The technology is currently in the preclinical stage of development.

Market: More than 80% of the HCV infections in North and South America, Europe, Russia, China, Japan and Australia are genotype 1. The instant technology may be transferred through biological materials licenses for territories in which no patent rights exist.

Inventors: Jens Bukh, Robert H. Purcell, Suzanne U. Emerson, Akito Sakai, Patrizia Farci (NIAID).

Publication: A Sakai et al. In vivo study of the HC-TN strain of hepatitis C virus recovered from a patient with fulminant hepatitis: RNA transcripts of a molecular clone (pHC-TN) are

infectious in chimpanzees but not in Huh7.5 cells. *J Virol.* 2007 July;81(13):7208-7219.

Patent Status: U.S. Patent Application No. 12/061,504 filed 02 April 2008 (HHS Reference No. E-249-2007/0-US-01); No foreign rights available.

Licensing Status: Available for licensing.

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Dated: July 13, 2009.

Richard U. Rodriguez,

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

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

National Institutes of Health

National Institute of Environmental Health Sciences; 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 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 Institute of Environmental Health Sciences Special Emphasis Panel. Formative Children's Center Review 2.

Date: July 24, 2009.

Time: 2 p.m. to 5 p.m.

Agenda: To review and evaluate grant applications.

Place: Washington Plaza Hotel, 10 Thomas Circle, NW., Washington, DC 20005.

Contact Person: Linda K. Bass, PhD, Scientific Review Administrator, Scientific Review Branch, Division of Extramural Research and Training, Nat. Institute Environmental Health Sciences, P. O. Box 12233, MD EC-30, Research Triangle Park, NC 27709. (919) 541-1307. malone@niehs.nih.gov.

This notice is being published less than 15 days prior to the meeting due to the timing limitations imposed by the review and funding cycle.

(Catalogue of Federal Domestic Assistance Program Nos. 93.115, Biometry and Risk Estimation—Health Risks from

Environmental Exposures; 93.142, NIEHS Hazardous Waste Worker Health and Safety Training; 93.143, NIEHS Superfund Hazardous Substances—Basic Research and Education; 93.894, Resources and Manpower Development in the Environmental Health Sciences; 93.113, Biological Response to Environmental Health Hazards; 93.114, Applied Toxicological Research and Testing, National Institutes of Health, HHS)

Dated: July 14, 2009.

Jennifer Spaeth,

Director, Office of Federal Advisory Committee Policy.

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Healthcare Infection Control Practices Advisory Committee (HICPAC)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92-463), the Centers for Disease Control and Prevention (CDC) announces the following meeting for the aforementioned committee:

Time and Date: 11 a.m.–12 p.m., July 23, 2009.

Place: The teleconference call will originate at the CDC.

Status: Open to the public. Teleconference access limited only by availability of telephone ports. To participate in the teleconference please dial 1 (800) 779-6036 and enter conference code 6417394.

Purpose: The Committee is charged with providing advice and guidance to the Secretary, HHS; the Assistant Secretary for Health; the Director, CDC; and the Director, National Center for Preparedness, Detection, and Control of Infectious Diseases (NCPDCID), regarding: (1) The practice of hospital infection control; (2) strategies for surveillance, prevention, and control of infections (e.g., nosocomial infections), antimicrobial resistance, and related events in settings where healthcare is provided; and (3) periodic updating of guidelines and other policy statements regarding prevention of healthcare-associated infections and healthcare-related conditions.

Matters To Be Discussed: The agenda will include a follow up discussion of CDC's *Interim Guidance for Infection Control for Care of Patients with Confirmed or Suspected Novel Influenza A (H1N1) Virus Infection in a Healthcare Setting*.

Agenda items are subject to change as priorities dictate. This notice is being published less than 15 days prior to the meeting due to the public health emergency declared on April 26, 2009. There is a critical need for this committee to deliberate and discuss urgent matters related to the H1N1 virus, and be actively engaged in the national preparedness and response efforts as dictated by circumstances and events.