Medications Research a Priority for NIAAA

Scientific advances have accelerated the development of alcohol medications in recent years. In July 2004, acamprosate became the first new drug in a decade to be approved by the Food and Drug Administration to treat alcohol dependence.

NIAAA was involved in testing acamprosate, and the Institute continues to place a priority on discovery of other new drugs. Researchers point to a number of potential medications on the horizon.

“We’re currently supporting more than 30 clinical trials with promising compounds,” says Dr. Mark Willenbring, Director of NIAAA’s Division of Treatment and Recovery Research (DTRR). “We are testing many different types of drugs that target a number of receptors in the brain.”

Some of the drugs in clinical trials for alcohol use disorders already are being investigated or have won FDA approval as treatments for other medical conditions. These include gabapentin and topiramate, which are used to treat people with epileptic seizures.

Rimonabant, currently under investigation as an antiobesity treatment, also shows promise in treating alcohol dependence.

At NIAAA, a multidisciplinary team from several divisions provides input on medications development. The team, led by Dr. Raye Litten, Associate Director for DTRR, and Dr. Mark Egli of NIAAA's Division of Neuroscience and Behavior, recently spearheaded a comprehensive review of the medications development portfolio. In February, the team submitted its report to NIAAA's Extramural Advisory Board, which will make recommendations for future research priorities to the National Advisory Council on Alcohol Abuse and Alcoholism.

NIAAA also works to bridge research and practice by getting the latest information about new drug treatments to health practitioners. The Institute will include a special section on medications in its next update of Helping Patients With Alcohol Problems: A Clinician’s Guide. The new guide is expected to be released in April 2005.

New Council Members Appointed

In February, NIAAA welcomed several new members to the National Advisory Council on Alcohol Abuse and Alcoholism. From left to right, seated: Dr. Cheryl Cher pitel, Dr. Victor Hesselbrock; standing: Dr. Hidekazu Tsukamoto, Dr. Jan B. Hoek, Dr. Mack C. Mitchell, and NIAAA Director Dr. Ting-Kai Li.
Appointments

Howard Moss, M.D., was named Associate Director for Education and Career Development. Dr. Moss, an addiction psychiatrist, comes to NIAAA from the University of Pennsylvania School of Medicine in Philadelphia, where he served as professor of psychiatry and director of the Substance Abuse Fellowship Training Program. Dr. Moss will advise the NIAAA Director on all areas related to science education and the training and development of scientists participating in alcohol research activities in both the extramural and intramural programs. Among Dr. Moss’s duties will be responsibility for the development of educational programs for physicians and graduate and undergraduate students. He also will serve as Acting Director of the Office of Research Translation and Communications.

Michael E. Hilton, Ph.D., was appointed Associate Director of the Division of Epidemiology and Prevention Research. Previously he worked in the Office of Collaborative Research and the Division of Clinical and Prevention Research.

Retirements/Resignations

Barbara Smothers, Ph.D., has left NIAAA to take the position of Director of the Division of Extramural Affairs with the National Institute of Nursing Research. Dr. Smothers joined NIAAA in 1988. She worked as a member of NIAAA’s extramural review staff and in the Division of Epidemiology and Prevention Research.

Roberta Wilhelm, Chief of NIAAA’s Contracts Management Branch since 1987, has retired. In 2003, she received the fourth annual Martin K. Trusty Excellence in Management Award.

Surgeon General Updates Warning About Alcohol Use During Pregnancy

U.S. Surgeon General Richard Carmona recently advised pregnant women and women who may become pregnant to abstain from drinking alcohol to eliminate the chance of giving birth to a baby with Fetal Alcohol Spectrum Disorders (FASD)—the collection of birth defects caused by prenatal alcohol exposure.

FASD may range from mild or subtle birth defects, such as slight learning disabilities, to full Fetal Alcohol Syndrome, which includes severe learning problems, growth deficiencies, abnormal facial features, and central nervous system impairment. The advisory updates a 1981 advisory suggesting that pregnant women limit the amount of alcohol they drink.

The new advisory is based on current research, and states:

- A pregnant woman should not drink alcohol during pregnancy.
- A pregnant woman who already has consumed alcohol during her pregnancy should stop in order to minimize further risk.
- A woman who is considering becoming pregnant should abstain from alcohol.
- Recognizing that nearly half of all births in the United States are unplanned, women of childbearing age should consult their physician and take steps to reduce the possibility of prenatal alcohol exposure.
- Health professionals should routinely inquire about alcohol consumption by women of childbearing age, inform them of the risks of alcohol consumption during pregnancy, and advise them not to drink alcoholic beverages during pregnancy.

“We must prevent all injury and illness that is preventable in society, and alcohol-related birth defects are completely preventable,” Dr. Carmona said.

Visit www.hhs.gov/surgeongeneral/pressreleases/sg02222005.html to read the full advisory.
New Research Initiatives

**Community Participation in Research (PAR-05-026).** NIAAA joins the Agency for Healthcare Research and Quality in announcing a new program supporting research on health promotion, disease prevention, and health disparities that is jointly conducted by communities and researchers. More information is available at http://grants.nih.gov/grants/guide/pa-files/PAR-05-026.html. The NIAAA contact is Dr. Robert Freeman, 301/443–8820, rfreeman@mail.nih.gov.

**Decision Making in Health: Behavior Maintenance (PA-05-016).** Under this new initiative, NIAAA and the National Cancer Institute invite applications for research projects that will expand our knowledge of basic decision-making processes underlying the initiation and long-term maintenance of lifestyle behaviors which may reduce one’s risk of cancer and other chronic diseases, such as cardiovascular disease, diabetes, and addiction. More information is available at http://grants.nih.gov/grants/guide/pa-files/PA-05-016.html. The NIAAA contact is Dr. Robert Freeman, 301/443–8820, rfreeman@mail.nih.gov.

**Research on Sleep and Sleep Disorders (PA-05-046).** NIAAA joins a trans-NIH initiative inviting submission of grant applications proposing research to advance biomedical knowledge related to sleep or sleep disorders, improve understanding of the neurobiology or functions of sleep over the life span, enhance timely diagnosis and effective treatment for individuals affected by sleep-related disorders, or implement and evaluate innovative community-based public health education and intervention programs. More information is available at http://grants.nih.gov/grants/guide/pa-files/PA-05-046.html. The NIAAA contact is Dr. Robert Freeman, 301/443–8820, rfreeman@mail.nih.gov.

**Molecular Approaches to Diet and Pancreatic Cancer Prevention (PA-05-040).** NIAAA and the National Cancer Institute announce a new program to research how dietary energy intake and bioactive food components, including alcohol, influence pancreatic cancer development and prevention. The PA invites innovative preclinical and clinical R01 applications. More information is available at http://grants.nih.gov/grants/guide/pa-files/PA-05-040.html. The NIAAA contact is Dr. Vishnu Purohit, 301/443–2689, vpurohit@mail.nih.gov.

**Secondary Analysis of NESARC and NSPY Datasets (DA-05-005).** This RFA requests applications for grants to study the epidemiology and etiology of alcohol and drug abuse, the prevention of these behaviors, and the use of alcohol and drug abuse services. Data are to be drawn from the National Epidemiologic Survey on Alcohol and Related Conditions (NESARC) or the National Survey of Parents and Youth (NSPY). More information is available at http://grants2.nih.gov/grants/guide/rfa-files/RFA-DA-05-005.html. Dr. Robert Freeman is the NIAAA contact, 301/443–8820, rfreeman@mail.nih.gov.

**New Publications**

**Drinking and Your Pregnancy**
NIAAA has adapted this popular brochure to specifically appeal to women of American Indian and Alaskan Native heritage. The six-page brochure explains how drinking can hurt a developing fetus, what problems children born with FASD encounter, what women can do to stop drinking, and where to go for help. The updated edition was field-tested with several American Indian tribal organizations.

**New Alcohol Alert**
The latest *Alcohol Alert* examines the stages of alcoholic liver disease (ALD), a serious and potentially fatal consequence of drinking alcohol, and describes methods of treating it, including lifestyle changes, pharmacological and nutritional therapy, and, in the case of severe liver damage, transplantation.

To order: These publications are available at no charge from NIAAA’s Web site. Print copies can be ordered through the Web site, or by contacting NIAAA at 301/443–3860, or by writing to: National Institute on Alcohol Abuse and Alcoholism, Publications Distribution Center, P.O. Box 10686, Rockville, MD 20849–0686.

**Federal Policy Will Allow Multiple Principal Investigators**
White House Office of Science and Technology Policy (OSTP) Director John H. Marburger III recently announced new steps to promote multidisciplinary and collaborative research.

According to a January 11 news release, OSTP has advised the National Institutes of Health and other Federal departments and agencies to establish “appropriate policies to acknowledge more than one principal investigator (PI) when there is more than one collaborating investigator working on a Federally funded research project.”

The change in policy “will provide recognition for scientists who are working on multidisciplinary or interdisciplinary projects within their institutions, or with collaborators at other institutions.”

To view the full press release, visit www.ostp.gov/html/RBMpressrelease.pdf.
Calendar of Events

NIAAA will participate in or exhibit at meetings and conferences listed below. For additional information or updates on these events, consult the sponsoring organization.

**March**

- **March 14 and 15**
  Alcohol Research Center Directors’ Meeting
  Scripps Research Institute
  La Jolla, CA
  Contact: Lisa Maturin, 858/784–7241; fax 858/784–7405; maturin@scripps.edu

**April**

- April 6–9
  PRIDE 2005 World Drug Prevention Conference—Annual Conference of PRIDE Youth Programs
  Cincinnati, OH
  Contact: www.prideyouthprograms.org/PRIDE2005.html; 800/668–9277

**May**

- **May 25**
  RSA Satellite Symposium: “Molecular Mechanisms of Alcohol-Induced Hepatic Fibrosis” (Ron Thurman Symposium)
  Rockville, MD
  Contact: Ida Nestorio, 301/443–4376; inestorio@mail.nih.gov

**June**

- **June 25–29**
  Research Society on Alcoholism (RSA) Annual Scientific Meeting
  Santa Barbara, CA
  Contact: www.rsoa.org

April is Alcohol Awareness Month.

- **April 7**
  National Alcohol Screening Day
  Contact: www.NationalAlcoholScreeningDay.org; 800/253–7658; nasd@mentalhealthscreening.org

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