



**American Brain Foundation  
Research Advisory Committee Meeting  
October 1, 2021**

**3:00 p.m. ET / 2:00 p.m. CT / 1:00 p.m. MT / 12:00 p.m. PT  
Conference Call**

**Meeting Minutes**

**In Attendance:** Robert Griggs, MD, Chair; Raymond Roos, MD, Vice Chair; Jose Biller, MD; Carsten Bonnemann, MD; Na Tosha N. Gatson, MD, PhD; Mark Mehler, MD; Bruce Ovbiagele, MD, MSc, MAS; Ralph Sacco, MD; Ira Shoulson, MD; Gordon Smith, MD; Reisa Sperling, MD; Phyllis C. Zee, MD, PhD; David Dodick, MD

**Staff:** Jane Ransom; Julia Miglets-Nelson, PhD; Lisa Dahlberg

**Excused:** Jose E. Cavazos, MD; Jacqueline French, MD; James Grotta, MD; Walter Koroshetz, MD; Ron Petersen, MD, PhD; Eugene Scharf, MD; Mary Post, MBA, CAE; Christy Phelps; Natalia Rost, MD

The meeting was called to order by Dr. Robert Griggs at 2:00 p.m. CT. The meeting minutes of August 6, 2021 were approved.

1. **Cure One, Cure Many Award in LBD Update:** John Morris, MD provided an update on the ABF's 2022 Cure One, Cure Many Award in LBD. Representatives from ABF, Alzheimer's Association, Michael J. Fox Foundation, and American Academy of Neurology worked together to develop the RFA, which went out in the summer 2021. The RFA was international in scope, and was open to researchers at both academic institutions and industry. The selection committee was comprised of representatives appointed by the ABF, AAN, Alzheimer's Association, and Michael J. Fox Foundation. Members of the committee are: John Morris, MD (Chair); Alice Chen-Plotkin, MD; Chadwick Hales, MD, PhD; Allan Levey, MD, PhD; Irene Litvan, MD; Oscar Lopez, MD; Karen Marder, MD, MPH; Ian McKeith, MD; Ronald Petersen, MD, PhD; Tanya Simuni, MD; Heather Snyder, PhD.

The committee received 21 Letters of Inquiry by the July deadline, and met at end of August to determine which applicants would be invited to submit a full application for the \$3M award. Ten of the 21 applicants were invited to submit full applications, which are due on October 29, 2021. The selection committee will meet at the end of the November to determine which application will receive the funding, and the selected individual will be notified by mid-December. The committee did consider making more than one award from the \$3M pool of funds, but ultimately decided to make one major impact award through one \$3M, 3-year investment, which was highlighted in the award announcement. The selection committee will discuss recipient reporting and monitoring at its December meeting.

Dr. Morris advised that engaging a committed and knowledgeable panel of experts to design the award and review applications will be key for future Cure One, Cure Many initiatives.

Reisa Sperling, MD inquired about the rationale for the 3-year time frame of the award and whether this would be enough time for the recipient to complete the work. Dr. Morris noted that the award was constrained in part because of the ABF's desire to make a single, high impact award that would attract additional philanthropy that would lead to future awards. The RFA for this award was very clear about the three-year time frame for funding so that investigators could budget accordingly, but the ABF would like to raise more money to extend the length of the award, and to make additional awards.

Raymond Roos, MD suggested that the NINDS might be interested in partnering with the ABF to extend the duration of the award or to offer an additional award. Dr. Morris noted that the ABF has embarked on this initiative independently of NINDS in part to establish the ABF's major research initiatives and to ensure that the award is a flagship for the ABF to promote. However, it may be prudent to partner with the NINDS in the future.

- 2. Health Disparities Discussion:** Bruce Ovbiagele, MD, MSc, MAS summarized the work of the Health Disparities Subcommittee to date, and asked for the committee's help in developing a prospect list to generate additional support for disparities initiatives. The key questions for developing a prospect list are: who could be funders? How can the ABF attract funders? Who are potential ABF point people, and who can help connect the ABF to prospective funders? What existing networks might the ABF be able to utilize? How much money is needed to advance these efforts? Is the ABF's focus on healthcare disparities, or workforce diversity?

Jose Biller, MD recommended that the ABF consider approaching mega corporations that utilize resources from developing countries for funding for disparities and diversity initiatives.

Gordon Smith, MD emphasized the need to align the work of the ABF with that of the AAN to create a program of support that can be built around the ABF's current Next Generation Research Grant scholarships. Joseph Sirven, MD, Nimish Mohile, MD, and Jeffrey McClean II, MD are leading the AAN's diversity, equity, and inclusion efforts.

Jane Ransom noted that the ABF is working to collaborate with the AAN on DEI programs, and that there has been interest from Genentech in funding a program that provides support to researchers who are underrepresented in medicine.

Ralph Sacco, MD added that the AAN's Academic Subcommittee is overseeing many of the AAN's diversity efforts, and that multiple pharmaceutical companies are interested in supporting diversity in the neurology pipeline.

Na Tosha N. Gatson, MD, PhD encouraged the subcommittee to also look at the work being done by Yazmin Odia, MD.

- 3. Next Generation Discussion:** Gordon Smith, MD outlined the challenges within the Next Generation Research Grants Program, specifically the need to engage additional funders and partners to support awards, while also bringing in awards that are broad enough to satisfy the AAN Science Committee's request for awards that are not restricted to specific disease areas. There is also concern that some prospective applicants for ABF-funded awards are unable to apply because their institutions will not support the 70% protected time currently required to accept a Next Generation grant. So far, the Next Generation Subcommittee has discussed strategies to address the misalignment between applicants and award opportunities, by better educating and marketing these opportunities, and redeveloping current awards to fill the gap, and generating new funding opportunities.

Reisa Sperling, MD suggested that there may be ways to define what is expected from 70% protected time, that the requirement is for research time that may include clinical duties, but that the award is not expected to cover 70% of a recipients' salary.

Robert Griggs, MD proposed that ABF start a discussion with the AAN about protected time in the Next Generation program for consideration before the RFAs for the 2023 awards are finalized.

4. **Special Initiatives Discussion:** Raymond Roos, MD updated the committee on the outlines of the ABF's proposed multi-million dollar research initiative in neuroinflammation, a topic which encompasses a number of related diseases. One approach may be to focus on diseases with inflammation that have not been researched as closely with regard to the immune system, such as stroke. Other contemporary issues, like COVID-19 and CAR-T therapy, are also promising targets, as is artificial intelligence. The Research Advisory Committee now needs to narrow down the target of the proposed initiative to the specific diseases and immunological parameters of focus.

Na Tosha N. Gatson, MD, PhD asked for the committee's input on her draft of a Letter of Inquiry that outlines the proposed scope of a neuroinflammation for prospective funders. The LOI emphasizes the need to understand both the reparative and pathogenic effects of inflammation.

Robert Griggs, MD requested that the committee think about the research targets and potential funders for a major research initiative in neuroinflammation before the committee's next meeting in December, which will be focused around fleshing out the parameters of the initiative.

**Adjourned 2:57 p.m. CT.**