

This is an interview with Dr. Eleni Kousvelari of the NIDR extramural program on AIDS work. The interview is part of the NIH AIDS project and the NIDR history project. This interview is taking place on March 16, 1998, at the NIH. The interviewers are Dr. Ruth Harris and Dr. Victoria Harden.

Harden: Dr. Kousvelari, please tell us what motivated you to take up biomedical research.

Kousvelari: I will make it more specific, the question. What motivated me to take up biomedical research related to oral, craniofacial, and dental disease. By the time I was studying at the University of Athens—this is quite a few years ago—I felt like there were more that we can do about caries, periodontal disease, and different disorders such as cleft palate, for example. I particularly thought that saliva is an extremely beneficial medium that have good components for health, and, after all, the teeth are butting into this medium. So my first little research project when I was at the University of Athens was really on collecting saliva and do some analysis then. So my motivation, you can say, about me being in biomedical research is always to be able to understand, and somehow this understanding of the basic mechanisms that underlie oral, craniofacial, dental disease can one day actually give us the tools that we need to combat those diseases.

Harden: When you were at the University of Athens, had you started out in dentistry or in biomedical science? That's not on the questions.

Kousvelari: I have started out in the dental school of the University of Athens, yes. And I did some, as I said, research as a student out of my curiosity in saliva.

Harris: Now, at NIDR, you specialized in salivary gland research in the intramural program. What do you consider your most important finding in that area?

Kousvelari: It shouldn't be a surprise to you why I continued to do research in salivary glands and salivary gland secretions, actually. What I consider to be my most important findings in that area? I believe that I will start with salivary secretions and that were my contributions and understanding the functions of the group of proteins which called _____ proteins, and I did that when I was doing my doctorate of science degree with Dr. Frank Oppenheim at Boston University.

And lately, I will like to mention my studying in understanding of the development of the salivary gland. In other words, how the salivary glands are developed in the rat. I used rats as models. And what is the contribution of the extracellular matrix components and the receptors of those components in salivary _____ cell development.

Harden: What influenced you to come to work at the National Institutes of Health?

Kousvelari: That's an awkward question. Well, I came at the National Institutes of Health, and particularly at the National Institute of Dental Research. I see myself as a dental scientist, and although I like the academic environment, I thought I will like much better the concentration that being at NIH or NIDR _____ gives you into your particular field of research. And another

thing that is quite attractive is you can do that as a full time and you do not really write grant applications, which is good, and that's why.

Harden: When did you come to the NIH and the NIDR?

Kousvelari: Well, I have to see my CV. I don't quite remember. But I think it was summer of 1982. And I should add that I was fascinated when I came of the campus and the amazing opportunities that you have to excel in network with scientists in other institutes. And I had quite a few collaborations that were quite beneficial to me starting on the molecular aspects, for example, of salivary gland development in disease. It's a magnificent place, particularly NIH, that is, and NIDR in particular for young, new investigators, and they want to spend some time and concentrate and somehow craft or pave the way that they will follow for the rest of their life maybe.

Harden: When did you start working on the AIDS extramural project, and how did you come about to work on that?

Kousvelari: I don't know what you mean, how did I come to work. I never worked. I am an administrator in the AIDS program. Is that your question?

Harden: Well, how did you come about to administer the extramural program on AIDS? How did that materialize?

Kousvelari: I came to the extramural program. The programs that I am administer, and that's when I joined the Division of Extramural Research, where the AIDS and the salivary gland programs were. It was one of the responsibilities given to me. And when I was in the laboratory of Dr. Bruce Baum,

together with Dr. Phil Fox and C.K. Yeh and others that I don't remember right now, I had started working to understand the role of saliva in HIV infection, and I believe—and I have to, again, check my publication, my reprints here—that they were the first to see that saliva has an antiviral, anti-HIV role. So I was somehow starting with them when the epidemic, starting to understand what is HIV, what is AIDS, and I really enjoyed when I was given the responsibility to administer the AIDS program.

Harden: Is there some coordination between the intramural and the extramural research on AIDS in the NIDR?

Kousvelari: Yes, there is. And I have the absolute pleasure to always consult with my mentor, Dr. Sharon Wahl. She's working, as you may know, on SLPI, which is secretory leukocyte protease inhibitor, which is another component that's found in saliva and has an anti-HIV activity. And Dr. Wahl is one of the first, actually the first, to allude to some mechanism and discovered this particular proteases in saliva. I fully enjoyed working with her. And we also, together, would co-chair a task force, as you like to call it, interest group, NIDR's interest group, in AIDS, and we had two meetings already. And that is, we include every intramural and extramural person from NIDR, that they are doing the actual research, bench research, or administering the AIDS programs. And somehow we update each other on the progress or get to know each other, what everybody's doing, and things like that.

Harris: In this collaboration with Dr. Wahl and the extramural researchers on AIDS, do you set up workshops or meetings? Could you please elaborate on how you get them to communicate with each other?

Kousvelari: I already talked about one of them.

Harden: The task force.

Kousvelari: Well, I don't know if the task force is an interest group, NIDR interest group, that we all get together. Could you repeat your question?

Harris: I wanted to know if you sponsor workshops or special... Aside from the task force, do you have workshops where you get extramural researchers and the intramural researchers together to compare notes?

Kousvelari: Me personally, no, I did not. We had a workshop, actually, and that was being put together by the NIDR, by the Institute. But I don't think that's what are you talking. And it was a conference that Dr. Sharon Wahl had together with NIAID in which, of course, the NIDR as a whole supported and participated in that conference, and, sure, we exchanged, you know, information during the conference. But we have not put a workshop together, if that's your question.

Harris: When did the task force start its first meeting?

Kousvelari: I don't remember. I'm sorry. I have to look in my notes.

Harris: How frequently will the task force be...

Kousvelari: Well, it's an interest group. I don't know if that is the same like a task force. What do you mean task force?

Harris: Well, whatever you want to call it, an interest group or a task force. How often are you planning to have these get-togethers?

Kousvelari: Well, we were planning to have these at least quarterly, and we plan to also invite extramural scientists when they're in the area, administrators like myself, health scientists from NIAID, and maybe Dr. Sarah Wahl we'd like to invite from her perspective, some people _____.

Harden: May I interrupt one minute and clarify. I think we probably are talking about two different things. I think of a task force as being something organized to coordinate a response, to say, "We have a problem. How are we going to solve it?" I think—and correct me if I'm wrong—an interest group is like the other interest groups at NIH that are organized to promote people from different institutes and to come together...

Kousvelari: To come together, exactly.

Harden: ...and discuss it. So it's more like an ongoing problem.

Kousvelari: Process.

Harden: Set up to solve something new.

Kousvelari: Right.

Harden: So it is, in that sense it's different from some of the older task force we've talked about.

Kousvelari: That's why I...

Harris: Okay. A task force has one specific target, so to speak, whereas an interest group has a broader mission. Is that...

Harden: Well, it's less administrative. It's more scientific, I think, too. They're discussing scientific problems, not how to organize to do something, as it were, but who's doing what research and keeping everybody informed. It's more like a symposium that we would say, I believe.

Kousvelari: It's not really like a symposium. It's exactly as you said, informing each other of what kind of research, what kind of initiative. That's why I keep saying it's an interest group, it's not a task force.

Harris: In the interest group, who... Can you give us the names of the people in the interest group and their affiliations and what they're doing?

Kousvelari: Sure. I can e-mail that to you.

Harris: Okay.

Kousvelari: Sure.

Harris: You can provide us with that information.

Kousvelari: Mm-hmm, yeah.

Harris: Now, please describe the response of the dental research community to the NIDR AIDS research that you're associated with.

Kousvelari: Sorry.

Harris: What is the response of the dental research community to the NIDR extramural AIDS research program? In other words, do you have a lot of applications to do research for AIDS from the dental research community? Let's rephrase the question.

Kousvelari: Sure.

Harris: What kinds of AIDS research is predominant in the applications that you administer?

Kousvelari: All kinds, I will say, and that have oral manifestations. For example, it can be opportunistic infections like reoccurrence of candida albicans infections, EBV, and other viruses, that they have oral manifestations, including Kaposi's sarcoma. Another area is the components of saliva, that people investigating both antifungal activities and antiviral activities. The immune system, host immune system or responses. I'm thinking. What else? Epidemiological studies. And it's a big group. And I'm sorry, you mentioned Dr. Maryann Redford will speak to you about the Women's Interagency AIDS Study. Am I missing something? Behavioral aspects of AIDS. That is a few. So you can see it is actually a spectrum, and if you ask me where do we have most—I have to look at my notes... Mostly I will say at this point the AIDS program has HIV and opportunistic infections as they present to the oral cavity. We have the most grants in that area.

Harris: Now, my question on this phase is, who are—which institutions predominate in doing this kind of research? Is it dental schools, or are they private institutes or are they university academic departments?

Kousvelari: I will try to address your question. I will say the dental schools, the private, as you call it, and perhaps the research done in dental school may at this point predominate.

Harris: Okay.

Kousvelari: Okay?

Harris: All right, fine.

Now, what is your relationship with the Centers for Disease Control and Prevention on AIDS oral research?

Kousvelari: Particularly, other than communications and knowing some of the people in discussions, I don't think I have any other relations. What do you mean by relations?

Harris: Well, for instance, have you had any connection with investigating the transmission of AIDS in a dental office, between health care workers and...

Kousvelari: As I said, those come through the grant applications. Me personally, I administer the program, and I may have discussions and we get together. If we find in meetings, for example, with Dr. Marianos, I believe, before he left, but I don't do the research. I hope I understood your question.

Harden: Well, I think she wondered, too, if, of the people who are doing the research that you're administering, can you point to particular issues that have been very hot for the public, like the transmission of AIDS from dentist to... Is there anybody working on this?

Kousvelari: Yes, there are.

Harden: And what kinds of information is coming out of this _____ work?

Kousvelari: Let's put it this way. We have issued an RFA. That's where I thought our discussions would go. And that RFA is the role of the oral environment in

HIV transmission and pathogenesis. I'm not sure if you have all this information.

Harris: No.

Harden: No. That's good.

Kousvelari: Okay. And this is a very important issue, and it involves CDC and people that work there. They apply through this RFA. That is the relation that we have.

Harden: Can we get a copy of that? That is one of the wonderful things that _____.

Kousvelari: This is for you.

Harris: Thank you.

Kousvelari: And also, I give you all the _____ since I came to the program. I have the program for two years.

Harris: Oh, thank you.

Kousvelari: Yes. It's all for you. I have the program for two years, and...

Harris: Now, are these ongoing projects?

Kousvelari: Okay. The deadline, as you see here, for applications, March 12th, was last Thursday. This is not ongoing. The applications are coming in this year. Okay? This is the role of the oral environment in HIV transmission and pathogenesis. The other is _____ oral dimensions of HIV transmission, therapies, and outcomes. And this, the deadline is March 26th. And this, the application, will come in. They're not grant, they're grant applications. Okay? Yeah, please.

Harris: Go ahead. Well, what I wanted to find out was, with respect to the CDC, do... The CDC also has a research component or components. Is there any coordination between what you're doing here and what the CDC is doing in the way of research on the pathogenesis and transmission of HIV?

Kousvelari: Only, as I said, I know people... No. I have to say no in general.

Harris: Okay.

Kousvelari: Other than information, discussions, identify areas, and etc., I mean...

Harris: What about within the NIH with other institutes, especially with NIAID?

Kousvelari: Yes. We always discuss. Sometimes... For example, NIAID is a good one, but in this RFA, we are partner with the Mental Health Institute. So we always get together, and it is a process when you do an RFA. It becomes, first, before it's published, has to be in the—I forgot exactly. Well, it has to be in such a system that every institute will look. Okay? And then the ones that have an interest, they will ask you to send a copy of the RFA and they may decide to come as part of the RFA, like in here the Mental Health Institute decided to put about one _____ to support some research coming out of this RFA. And this, however, does not do RFAs. They do PAs. And you want me to explain what is RFA?

Harris: Yes.

Kousvelari: RFA is a request for applications, and the Institute usually has to have set-aside funds. A PA is a program announcement, and you don't have to have set-aside funds. So NIAID, for example, did not participate in this, and the competitive supplement RFA, it's actually, we asked researchers

that had active grants with NIAID, with other institutes, and they were thinking about their research going into areas that have to do with, let's call it oral AIDS, to write a supplement, to supplement and do research in those areas, which is actually listed in here.

So, yes, we always are in contact with our colleagues, particularly at the opportunistic infections part of NIAID, of AIDS, and we have participated in some of their program announcement BPAs.

Harris: Is there any formal organization within the NIH that brings all of the Institute extramural people working on AIDS together?

Kousvelari: If it is, I do not know.

Harris: Okay. So, in other words, this coordination is something that you do because you feel that you have to do it. It's beneficial to everyone.

Kousvelari: It is not, and it is the networking that one has. But I may ask if there is, as I say, something central, I do not know.

Harris: _____. What do you consider to be the most important result coming out of the NIDR extramural AIDS program since you took over the administration of the program?

Kousvelari: This is the result. I took the program two years ago, and, as you know, scientific and thrilling discoveries do not take two years. Everything is in the process. And I cannot—I don't think I can answer this particular question _____.

A major, I think... Some of our research is concentrated in understanding candida albicans and sequencing the trial candida albicans

genome. And by doing that, it is an amazing tool and is bringing the research in understanding candida albicans pathogenesis as in the immune-suppressed AIDS patient or other patient that had different or other disease, etc., that their immune system is suppressed. So I believe, with having the entire genome known, all the genomics, this will be an amazing discovery or... It's not really a discovery—amazing information tools that we need to understand how genes are expressed, what are genes in normal situation, and what are genes in disease, and, therefore, devise certain treatment strategies. But that will be finished by 1999.

There are tremendous research and excellent research, as I said, on salivary components. And, as I said before, Dr. Sharon Wahl, with identified, I believe, the identification of SLPI, is an amazing discovery. And I hope I'm not... So at least _____, as I said, amazing processes and really outstanding research that we support, and I believe we keep the tools to in different areas, in opportunistic infections, for example, that emerge because of the HIV infection and need to at least combat those infections and their manifestations, of course, to the oral cavity.

Harris: Aside from Dr. Wahl, whom we know is a very important figure in the research, who are some of the other very important researchers that the NIDR extramural program is funding?

Kousvelari: There is a number, and I would like to give you four pages, because everybody is contributing tremendously into understanding, as I said, the

basic mechanism, the epidemiology of the disease. I cannot just name one or two or three. That would be unfair.

Harris: Okay. If we could get that later.

Kousvelari: Yes. It is available for you.

Harris: Fine. And what about the most important institutions that are involved in this research.

Kousvelari: Again, there are many. And, again, I have it for you all together, so I can give it to you. There's Johns Hopkins, Stanford University, just to mention two of them, Maryland, Washington University in Seattle, Boston University. I cannot remember all of them, but I guess it's all over.

Harris: Can you give us a rough estimate of the percentage of awards that are granted from the applications? Is it...

Kousvelari: I'm sorry. I don't have that information, as I said before. I don't. I can tell you that we have around, I believe, 55, and I have to look up this number again, grants right now in the AIDS program. That's all I can tell you.

Harris: Okay.

Kousvelari; Yeah.

Harris: Have any patents emerged from the NIDR-funded AIDS research?

Kousvelari; Not that I know.

Harris: Okay. Well, you kind of have answered this, but can you tell us what kinds of projects dominate in the NIDR extramural program? In other words, do you have...

Kousvelari: Well, as I said before, I think, particularly the oral manifestations of opportunistic infections. They do. And, yeah, I will say that dominates, as well as the salivary components.

Harris: What about pain research? Is that a very involved?

Kousvelari: I want to say it's very involved. We have few grants.

Harris: Do any of the AIDS extramural projects of NIDR involve development of an AIDS vaccine?

Kousvelari: Not that I know, no. It's an area, actually... An AIDS vaccine—well, I don't want to go into AIDS vaccine.

Harris: What about AIDS medications?

Kousvelari: AIDS medications. Like what?

Harris: For instance, to treat the oral manifestations.

Harden: Opportunistic infections.

Harris: Opportunistic infections.

Kousvelari: Would you ask the question again.

Harris: Is there any extramural project or projects involved in developing medications to treat the opportunistic oral manifestations of AIDS?

Kousvelari: Well, as I said before, right now... I gave as an example the candida albicans genomic project. You do this basically with the hope and understanding that you will be able to devise therapeutics in the future. And, for example, a lot of people, if they try to do peptide mimetics for the histatins, which are small molecules found in saliva that they have, and the

candida activities. Others, they may do gene therapy using the histatins.

Those are a few of the things that I know.

Harris: Who is doing that particular work on histatins?

Kousvelari: Well, they are quite—they're extramural investigators and intramural, and I would like to, again, to look up those names.

Harris: I'd appreciate it.

Kousvelari: As I said, those are things very, very in their beginning.

Harris: Okay. Do you have any AIDS work group or task force or any kind of meeting records? For instance, when you're collaborating with NIMH or NIAID, do you have any memoranda about your discussions with them on grant support?

Kousvelari: No, I do not. And that is because this RFA that I showed to you in which the Mental Health Institute is part, it's—we haven't yet received the applications, we have not reviewed, and therefore we don't know if we're going to have... You're asking about memorandum of understanding, etc.

Harris: Well, or any correspondence that you might have from another institute.

Harden: Or is it very informal, just, you call up somebody on the phone or send them e-mail or say, "Maybe we ought to talk."

Kousvelari: We communicate by e-mail, yes, and on the phone, yes.

Harris: Do you have any e-mail?

Harden: Do you print your e-mail out, or do you just leave it on the machine? This is a records issue that we have for everybody.

Harris: Yeah. This is something historians look for, written material.

Harden: Do you feel like you should print out those, when you talk to somebody, or do you just leave them on the machine?

Kousvelari: I leave it on the machine. I never print anything.

Harden: That's what I think everybody does, is the thing. So it's... But we're concerned about how people are, how we know as historians.

Kousvelari: But, while you will like something like that...

Harris: Yes, if you're...

Kousvelari: I can find it if I have saved it.

Harris: All right. Yes, we'd like that.

Kousvelari: I have to learn about history.

Harden: Yes.

Harris: If AIDS had occurred in 1955, what do you think the biomedical community would have done about it?

Kousvelari: That's an excellent question for somebody who is doing AIDS research. I am an administrator of AIDS _____, and I don't think I'm really qualified to answer this question. I don't know what to tell you about this.

Harden: That's all right.

Kousvelari: And why you're taking 1955.

Harden: Because it's before molecular biology.

Kousvelari: I see.

Harden: And that's the _____. We're just trying to see how people think physicians and scientists might have thought about this disease before they knew anything about human retroviruses or T cells or anything that _____.

Kousvelari: Yeah. As I said, I don't... I think somebody who is really into biology, who is really into doing _____, will be more qualified to answer your question than me.

Harden: May I ask just a couple of things?

Kousvelari: _____ some more.

Harris: I was just going to ask a general question. Is there anything else that you would like to tell us about your view of the work that you're doing with respect to administering the extramural AIDS projects for the NIDR?

Kousvelari: What I am doing. The main thing that I try to do is to listen to the community, and that is, the oral, cranial facial, dental community, listen also, and listen means going to workshops and conferences that, apart from the dental community, there are other communities, the biologies, the microbiologies, different communities, and somehow being able to educate myself. And by educating myself in that particular area, I believe it is better, and better means I understand the magnitude of the problem, which I think I fully understand.

SIDE B

Kousvelari: So, as I said, by going to the different workshops and conferences, that makes me more understanding, if there is an expression like this, of the magnitude of the AIDS pandemic. And what we—when I say what NIDR and NIH should put together future programs, future initiatives, that indeed help in the basic understanding, although we have pretty much a basic understanding of the disease now, but how we combat the disease.

That is important because every year, for example, I will be asked to come up with initiatives for—now I'm putting initiatives for the year 2000. I need that understanding. But I need my understanding to blend with the community, with the thought of the extramural scientists, because that's what I need. And also, I need an understanding in order to be able to do a better job in administering my program. _____ what else.

It is... Because of... I believe because of a lot of research that we do towards AIDS also has a spread in other areas, and we understand perhaps more about different disease, and that is very important too. What else I can say?

Harris: Could I just ask one more general question? As a person trained in biomedical science in general, do you think that it will be possible to conquer the disease AIDS?

Kousvelari: I think that's a question for Dr. Fauci, not for me.

Harden: We've asked Dr. Fauci that several times.

Kousvelari: It is—as I said, it's an amazing effort, concentrated effort, and amazing scientific minds have pulled together. I don't know if we will be able to cure the disease or come up with a vaccine in the future. And, as I said, that's a question for Dr. Fauci.

Harden: I have just a couple of mainly clean-up little things. Would you... I'm _____ my notice already. You were talking about Dr. Wahl's work on SLPY, and I got—I'm missing one word. It's leukocyte...

Kousvelari: Secretary leukocyte...

Harden: Secondary leukocyte...

Kousvelari: Secretary.

Harden: Oh, secretary. Yes, all right. Got it.

Harris: S-e-c-r-e-t-o-r-y.

Harden: So you know this already. Okay.

Kousvelari: Leukocyte proteases inhibitor.

Harden: Oh, okay. Got it. And you mentioned a conference that Dr. Wahl and NIAID...

Kousvelari: Yeah. _____.

Harden: When was that?

Kousvelari: Well, I have all of this information in my office.

Harden: But was it recently or a long time ago?

Kousvelari: Yes.

Harden: Recently. All right, good.

Kousvelari: This year, 1997.

Harden: That's all I wanted, 1997. All right. So this was a recent conference.

There was another... Oh, you were talking about sequencing the candidiasis... I can't pronounce it.

Kousvelari: Candida albicans genome.

Harden: Right. And when... You said it was almost finished. Will they finish by 1999, the entire genome?

Kousvelari: That's what is my understanding, yeah.

Harden: Okay. I just wanted to verify that that's what you meant by finished, that they should have the whole genome sequenced by that time.

Kousvelari: Right.

Harden: And then I was going to ask you whether or not you have been kept aware of the situation on AIDS in Greece? Are you aware at all of that, since you are from Greece? This is just throwing this in at the last minute.

Kousvelari: No, not in Greece in particular. However, another component that I think we should mention here is the international NIDR agenda that we are building, and it doesn't matter if it's in Greece or it's Africa. I don't know if in Greece has like in Europe, for example. I don't know how big the problem is, to be honest with you.

Harden: The NIH institutes are not funding international grant proposals?

Kousvelari: Please say that again.

Harden: There are not grant proposals coming in to NIDR or to NIH.

Kousvelari: Oh, there are.

Harden: From...

Kousvelari: From England, for example. We are funding two investigators.

Harden: You are.

Kousvelari: Yes.

Harris: Oh.

Harden: That's very good to know.

Kousvelari: Yes.

Harden: All right. Talk some more about the international aspects.

Harris: Tell us about the international aspect, please.

Kousvelari: As I said, we have two people that we fund, and those people came through this particular RFA, which is about underlying mechanisms of oral manifestation of HIV infection. And not only that, there are other investigators that, like one, for example, in Senegal, using cohorts to, for epidemiological studies in periodontal disease and other oral-related disease. Then I must say it was an international AIDS workshop in 1996 in London, and I have this information to give it to you. We are designing another one to take care in Africa in the year 2000.

Harden: Are the applications that you're funding from England and Africa simply coming in from investigators themselves?

Kousvelari: The applications from England, they come from the people in England, in dental schools. The studies in Africa, they're part of an investigator here in _____ Washington, in Seattle. And I'm sure I'm forgetting some others that also have components.

Harden: But, again, it's the individual initiative. It's not that you're looking to fund any particular country or... I mean, why this country and not that country.

Kousvelari: No.

Harden: It's the individuals doing the work.

Kousvelari: Yes. That is Fogarty's, I believe, job. Yes. And they have amazing programs. And you should also talk to Dr. Lipton because lately we participated in an RFA again, request for application, that Fogarty

International had for training, and NIDR participated in that, which is another effort that one should mention, training in AIDS, that is.

Harden: Very good. What about Canada? Are you...

Kousvelari: Why specifically Canada?

Harden: Because in the NIDR work, I've noticed in the past, there have been some collaborations with the Canadian dental research. Not necessarily...

Kousvelari: There are Canadians that apply to NIDR, and we support quite a few of them. I don't know if I have one particular or two, I don't know, from Canada.

Harden: Let me ask one other question. In terms of the processing of the grants now, you're administering the program. But when the grants come in, they go out to a study section.

Kousvelari: Right. They go out to what is called now Central Scientific Review, the BRGs.

Harden: Right. The BRG is now the Center for Scientific Review. Do they all go to the same study section?

Kousvelari: No. They're AIDS-designated study sections. And, as well, they come also in different dates. Okay.

Harden: Okay. And then, after they've been to the study sections, they go to the Advisory Council, the Institute. Do you know of any particular program emphases that the Advisory Council wants you to pursue? Have they articulated any?

Kousvelari: No.

Harden: Nothing. Just...

Kousvelari: No.

Harden: ...in general.

Kousvelari: No.

Harden: Do they ever?

Kousvelari: We always go over a process, you know. In order to publish or issue the RFAs or PAs, we have a presentation to _____, and all the way support very enthusiastically the areas that we write these RFAs.

Harden: So, to get the RFA published, you write it up, you take it to the Council, and they endorse it?

Kousvelari: No. You write what is... You have a short write-up, actually, and you do a presentation. You don't give _____. _____.

Harden: I see. _____ proposal.

Kousvelari: Thanks for saying this. It's a concept clearance.

Harden: I see.

Kousvelari: And you discuss your concept clearance, what is the purpose, why, how, and how much research you have or you don't have, and etc. You put it in that context.

Harden: And what the scientific opportunities are that you see.

Kousvelari: Oh, yeah. We have different...

Harden: And then, once they endorse it, you take it back and write it up and it gets issued.

Kousvelari: Right.

Harris: Who writes the concept?

Kousvelari: Me.

Harris: You do. Okay. Could you just walk us through a typical AIDS RFA?
Could you just...

Harden: _____. Let's just go back. Where do you get the idea? Does it come—do people, say, “We ought to do this”?

Kousvelari: I somehow alluded to you from where I get it, by listening to the extramural community, by having workshops that the NIDR initiates, and we did have one, and that was last April, in which extramural scientists and intramural and extramural scientists were, extramural scientists were present, brought here to somehow discuss what we have and give us their vision into the future. So they made recommendations about where they see the AIDS program in NIDR going and why, and etc. So that's another way. Okay?

Harden: Mm-hmm.

Harris: Mm-hmm.

Kousvelari: And you somehow put all this together, you write the concept clearance based, as we say, on what will be the purpose of the RFA, how is needed compared to what the program supports, is it going to be in a new area, what opportunities in science we try to capture—a lot of things. And you do your presentation, and then you get concurrence from the NIDR Advisory Council. Once you get that, you develop the RFA.

Harden: And to whom do you circulate it usually?

Kousvelari: You circulate it to your colleagues to get feedback.

Harden: The extramural...

Kousvelari: You circulate it... The RFA is, how should I say, a document that shouldn't go to the intramural. I mean, it's...

Harden: Right. I understand.

Kousvelari: You know...

Harris: Which colleagues get it?

Harden: Yeah, which colleagues?

Harris: My colleagues is the other HSAs, the other health scientists.

Harden: Okay.

Kousvelari: Extramural. I'm talking always...

Harris: It doesn't go to Sharon Wahl, for instance.

Kousvelari: No.

Harris: But it would go to, say, Maryann Redford.

Kousvelari: Absolutely.

Harris: Oh, okay.

Kousvelari: Yeah. So when you get their comments, and then it goes to my supervisor, which is Dr. Norman Braveman.

Harden: Now, what—where does Dr. Braveman fit in? What is his title? Because I know Dr. Lois Cohen is...

Kousvelari: Is his boss.

Harris: Okay. She's the _____?

Kousvelari: Then it goes—it goes to Dr. Braveman, which is my immediate supervisor, and he approves it because he's the assistant director for program development. So it goes to my boss. My boss has to _____. And then it goes to Dr. Wayne Wray, who is the review and the grant management kind of director, assistant director. It goes to Dr. Hausch, who is going to do the review. It goes to Mr. Martin Rubinstein for funds and etc. It goes to Dr. Cohen. It goes to Earlene Taylor. It goes to Dr. Dushanka Kleinman and Dr. Slavkin.

And maybe I forgot something. When you give me the write-up, I will put all this in. Don't worry about it.

Harris: I need spelling of some of the...

Kousvelari: Right.

Harden: Let's come back and get the spelling because I have a couple of things that I need to have spelled too.

Kousvelari: And then you have to put what we call early notification, and the early notification gives the title of the RFA and papers and who the contact is. And it's put in the system for the _____RA, only the _____ extramural program directors to see. And some _____ one of them, the Mental Health Institute, had an interest, and we got together, we discussed it, and they are putting additional funds for this RFA. So...

Harden: Is there any other part of this process that you think we ought to be aware of that we might not be.

Kousvelari: Right now, doesn't come to mind.

Harris: Well, how do you advertise it to the biomedical...

Kousvelari: And then it goes to the NIH Guide.

Harden: And they put it up on the Web and they...

Kousvelari: Yes, World Wide Web, and everybody has access. And what we also do is we put it in the NIDR home page so everybody—it's everywhere. Also, we send it to every dental school, everybody. For example, we have list serves, and we put it in the perio list serve, salivary list serve, training list serve, everywhere. And we, as I said, mail it also to dental schools, medical schools, everywhere. We have it available in meetings _____.

Harden: All right. Anything else you think _____.

Harris: I need some spelling help.

Harden: All right. We'll just say thank you very much for talking with us.

Kousvelari: Oh, thank you for allowing me to... I have such an interesting conversation of the program that really I'm blessed to administer.

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