Repurposing Research Led by a US-Based Racial / Ethnic Minority Principal Investigator

Description / Background

Proposals are submitted on the Cures Within Reach CureAccelerator platform. Sign up as a Researcher or Clinician at https://app.cureaccelerator.org/registration or log into an existing CureAccelerator account at https://app.cureaccelerator.org/home to submit.

This Request for Proposals (RFP) from Cures Within Reach (CWR) is seeking clinical repurposing trials in any disease led by a racial / ethnic minority that is underrepresented in biomedical research (as defined by the NIH; https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html):

- Blacks or African Americans
- Hispanics or Latinx
- American Indians or Alaska Natives
- Native Hawaiians and other Pacific Islanders

CWR is interested in 1) promoting diversity, equity and inclusion in biomedical clinical research by supporting the careers of and 2) closing the NIH funding gap for underrepresented racial / ethnic groups through funding for clinical repurposing trials led by minority PIs. CWR also hopes that more representation in PIs leading clinical trials could help improve participation in clinical trials by communities of color and help address racial health disparities.

CWR is interested in both previously funded minority PIs and in supporting minority PIs who are early-stage investigators and who have received little or no extramural research funding to date. PIs who have not received extramural funding previously and/or who do not currently have their own lab should include a Letter of Support from a funded, senior researcher who will act as a mentor for the proposed clinical trial and the PI.

At least 3 grants of up to $70,000 each will be funded through this RFP. CWR also has an open RFP for repurposing research addressing racial health disparities in the Chicagoland area. For more information about this RFP, visit https://app.cureaccelerator.org/rfp/view/113.

Repurposed therapies can be used alone or in combination with other therapies or can be repurposed from an approved adult indication into a pediatric indication. Therapies must already be FDA, EMA or any other regulatory agency approved or otherwise readily available for human use.

We are interested in approved generic or proprietary drugs, devices, nutraceuticals or diagnostics that could be repurposed to create “new” treatments to:
• Reduce the symptoms, progression or incidence for; or
• Restore function lost to; or
• Reduce or eliminate severe side effects of currently used therapies for any unmet medical need

Only interventional clinical trials lasting no more than 36 months that treat patients to prevent disease progression and/or improve patient outcomes in unsolved diseases with a repurposed therapy are eligible for this round of funding. **Clinical trials focused on preventative care to prevent new disease diagnoses are not eligible for this round of funding.**

Proposals for this RFP will be reviewed, scored and ranked by an external grant review committee, and the top-rated Proposal submissions will be invited to submit a Full Grant. PIs will be contacted approximately 6-8 weeks following the Proposal submission deadline with a decision.


Clinical repurposing trials led by a racial/ethnic minority PI (as defined by the NIH; [https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html)) in any unsolved disease are eligible for this RFP. An unsolved disease is one in which one or more of the following are true:

• There is currently no effective treatment
• The current treatment is only effective for a portion of the patient population
• There is a treatment that is effective, but many patients develop resistance to the therapy
• There is a treatment that is effective for the entire patient population, but the treatment is very expensive, and therefore some patients cannot get access to the treatment
• There is a treatment that is effective for the entire patient population with significant side effects, and for some patients the negative side effects outweigh the benefits of the treatment

Many of our successes in repurposing have come from researchers and clinicians who had ideas that could impact a disease that was outside their normal therapeutic or scientific area. **Please submit your repurposing ideas, find colleagues to work with and circulate this RFP to other racial/ethnic minority PIs who you think would benefit from the research funding provided by this RFP.**

If you have eligibility questions, or if you have a repurposing idea that isn't an exact fit for this RFP, please contact Clare Thibodeaux, PhD at clare@cureswithinreach.org to discuss fit and/or submission options.

**Important Funding Information:**

All funding amounts are in US dollars.

**Funding Definitions:**

• Project Funding = total research budget (no set maximum)
• Remaining Project Funding = funding needed to reach the total research budget (no set maximum)
• Existing Project Funding = Project Funding minus Remaining Project Funding (no set maximum)
• Requested Project Funding = funding requested through this RFP (maximum = $70,000,
Budget Breakdown = breakdown of the Requested Project Funding (maximum total = $70,000, including 20% institutional match)

Estimated Overall Project Costs = Requested Project Funding (see above)

Cures Within Reach will provide no more than 80% of the REQUESTED PROJECT FUNDING, and the institution, organization or company proposing the research will match at least 20% of the REQUESTED PROJECT FUNDING. The REQUESTED PROJECT FUNDING is equal to the ESTIMATED OVERALL PROJECT COSTS in the BUDGET BREAKDOWN section of the proposal submission, and includes the 20% Institutional Match. The Institutional Match must be real dollars committed to the project, not in-kind efforts, and can include Indirect Costs. The Institutional Match can come from the Research Institution itself (including salaries, patient costs, etc.); from government or other public funders; from individuals, foundations or other private funders; or from any combination of these sources.

Up 10% of the REQUESTED PROJECT FUNDING may be used for Direct Project Administration Costs. However, the total amount of Indirect Costs and Direct Project Administrative Costs combined may not be more than 20% of the REQUESTED PROJECT FUNDING. No funds provided by CWR can be used for Indirect Costs.

Cures Within Reach will accept REQUESTED PROJECT FUNDING amounts that are within the minimum and maximum amounts indicated. We do not set an upper limit to the PROJECT FUNDING, or the EXISTING PROJECT FUNDING, but REQUESTED PROJECT FUNDING amounts to Cures Within Reach are limited to the maximum amount specified in the Funding Information section below. Proposals may be submitted for which the PROJECT FUNDING is within the Cures Within Reach maximum, and for projects that already have EXISTING PROJECT FUNDING from another source and require REMAINING PROJECT FUNDING, when this additional funding from Cures Within Reach will help speed patient impact.

Cures Within Reach REQUESTED PROJECT FUNDING must be sole, late or final funding for the project. REQUESTED PROJECT FUNDING from Cures Within Reach cannot be the first funding raised for a project, unless the REQUESTED PROJECT FUNDING, including the 20% match from the institution, organization or company proposing the research, equals the PROJECT FUNDING.

Here are two examples of funding requests and disbursements to help investigators and institutions understand the funding opportunity.

Example A

The minimum funding request to CWR is $50,000 and the maximum is $80,000. The PI enters $80,000 for REQUESTED PROJECT FUNDING and for ESTIMATED OVERALL PROJECT COSTS in the BUDGET BREAKDOWN, which equals the PROJECT FUNDING. CWR approves this project, and will provide $64,000 (80% of the REQUESTED PROJECT FUNDING) and the investigator/institution will match the remaining $16,000 of the REQUESTED PROJECT FUNDING.

Example B

The minimum funding request to CWR is $50,000 and the maximum is $80,000. The PI enters $80,000 for REQUESTED PROJECT FUNDING and for ESTIMATED OVERALL PROJECT COSTS in the BUDGET BREAKDOWN, which will cover one-third of the $240,000 entered for PROJECT FUNDING. The other $160,000 is entered for EXISTING PROJECT FUNDING, and has already been secured by the investigator and institution. CWR approves this project, and will
provide $64,000 (80% of the REQUESTED PROJECT FUNDING) and the investigator/institution will match the remaining $16,000 of the REQUESTED PROJECT FUNDING and provide the $160,000 of the EXISTING PROJECT FUNDING.

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<thead>
<tr>
<th>Diseases/Conditions</th>
<th>Treatments</th>
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<tr>
<td>Any Unsolved Disease</td>
<td>Any repurposed drugs, devices, nutraceuticals, or diagnostics</td>
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**Project Type**

- Human Clinical Trial

**Timeline**

**Do you have a preference for where the research should take place?**
This RFP is open to PIs at any accredited academic, nonprofit and governmental research institutions and/or health systems significantly involved with medical research in the United States where good scientific research and clinical practices can be assured.

**Do you have a preference for where you would like to see patient impact?**
CWR is interested in promoting diversity, equity and inclusion in biomedical and clinical trial research by 1) supporting the careers of and 2) closing the NIH funding gap for underrepresented racial / ethnic groups through funding for clinical repurposing trials led by minority PIs (as defined by the NIH; [https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html](https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html)). CWR also hopes that more representation in PIs leading clinical trials could improve participation in clinical trials by communities of color and address racial health disparities.

CWR is interested in both previously funded minority PIs and in supporting minority PIs who are early-stage investigators and who have received little or no extramural research funding to date. PIs who have not received extramural funding previously or who do not currently have their own lab should include a Letter of Support from a funded, senior researcher who will act as a mentor for the proposed clinical trial and the minority PI.

We are hopeful that any discovery would be useful anywhere in the world where the repurposed therapy is available.

**Restrictions**
Please see any restrictions in the Description / Background section. There are no other restrictions other than those described above.

Other Information for Researchers
Cures Within Reach primarily funds proof of concept clinical trials that can determine whether a repurposed therapy can have a direct and positive impact on patients. Sometimes the clinical trials in our portfolio are open label studies with clinical endpoints that compare to the natural history of the disease. Other clinical trials are randomized, blinded and controlled studies. We are open to all clinical trial designs that have the opportunity to create a robust and well-defined outcome that will show reproducible clinical impact.

Cost effectiveness, speed and patient impact are key ranking criteria for a successful Proposal submission. Cures Within Reach expects to select a small number of Proposals to be chosen for a Full Grant submission. PIs will receive a decision on their Proposal within approximately 6-8 weeks of the RFP deadline.

While repurposing clinical trial projects are eligible for this round of funding, we welcome proposals for any research stage / type, which may be considered for future funding opportunities. If you are interested in sharing a preclinical repurposing research idea, please contact Clare Thibodeaux, PhD at clare@cureswithinreach.org.

Funding Available
Minimum $25,000
Maximum $70,000

Funding Description
See full Funding information in the Description / Background section above. Cures Within Reach will accept REQUESTED PROJECT FUNDING amounts that are within the minimum and maximum amounts indicated. Cures Within Reach REQUESTED PROJECT FUNDING must be sole, late or final funding for the project, as indicated in the Research Description. Cures Within Reach will provide no more than 80% of the REQUESTED PROJECT FUNDING, and the institution, organization or company proposing the research will match at least 20% of the REQUESTED PROJECT FUNDING. The Institutional Match must be real dollars committed to the project, not in-kind efforts, and can include Indirect Costs. The Institutional Match can come from the Research Institution itself (including salaries, patient costs, etc.); from government or other public funders; from individuals, foundations or other private funders; or from any combination of these sources. All funding amounts are in US dollars.

Open to co-funding
Co-Funding Description

Cures Within Reach is open to working with other funders who share our desire to find promote diversity, equity and inclusion in clinical research by 1) supporting the careers of and 2) closing the NIH funding gap for racial / ethnic minority PIs (as defined by the NIH; https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-031.html). We will accept projects that already have funding from another source and require additional funding, when this additional funding from CWR will help improve the chances of success of the project, and therefore increase the chance of patient impact. CWR REQUESTED PROJECT FUNDING must be sole, late or final funding for the project, as indicated in the Research Description.

Due Date for Project Proposal Summary Submissions

07-09-2021