



## Australian Centre for HIV and Hepatitis Virology Research (ACH2)

### CALL FOR EXPRESSIONS OF INTEREST

#### **Flyer & Formatting Requirements**

The Australian Centre for HIV and Hepatitis Virology Research (ACH<sup>2</sup>) has funds available for 2020 to support virology and immunology translational research projects that clearly address the research priorities of the Second National Hepatitis B Strategy 2014–2017; Third National Sexually Transmissible Infections Strategy 2014–2017; Fourth National Aboriginal and Torres Strait Islander Blood-borne Virus and Sexually Transmissible Infections Strategy 2014–2017; Fourth National Hepatitis C Strategy 2014–2017 and the Seventh National HIV Strategy 2014–2017. In 2020 ACH<sup>2</sup> will support HIV, hepatitis B (HBV), hepatitis C (HCV) and HTLV-1 translational research co-infections with these viruses.

ACH<sup>2</sup> is seeking expressions of interest (EoI) in applied research from qualified scientists to fund research projects aimed at: i) developing vaccine candidates for HIV, HBV subtypes, HCV or HTLV-1; ii) developing preventatives such as HIV microbicides and pre-exposure prophylaxis (PrEP); iii) cure and treatment interventions for HIV, HBV, or HTLV-1, including immunotherapy iv) novel diagnostics and prognostics for HIV, HBV, HCV, HTLV-1 or hepatitis B/C/HIV/HTLV-1 co-infection; v) molecular tools for tracking epidemics caused by these viruses; and vi) development of new tests for supporting vaccine and antiviral trials. Basic research is not eligible, and grants aimed at development of new direct-acting antivirals against HCV are also not eligible. Applications not supported include those: not dealing primarily with HIV, hepatitis B or hepatitis C itself – notably those focussed primarily on complications of the disease, such as hepatocellular carcinoma or glomerulonephritis associated with hepatitis B or C infection; or such as lymphoma, cardiovascular disease, or opportunistic infections associated with HIV infection.

Research projects based on clinical data and specimens from patients with HIV, HCV and HBV stored by the Immunovirology Research Network (IVRN) are encouraged. These projects include samples from several HIV and HCV clinical trials and cohort studies, as well as HIV/HBV and HIV/HCV co-infection cohorts. A complete list of stored specimens is available [here](#) or on request from Joanne Reidy, phone: (02) 8627 3004 or email: [joanne.reidy@sydney.edu.au](mailto:joanne.reidy@sydney.edu.au)

The grants are intended to complement and translate basic research projects in the virology and immunology of HIV, HBV, HCV and HTLV-1 that are already funded by other granting bodies, but not for the basic research itself.

Funding is available for 9 months from 1 January 2020, in line with the agreement with the Commonwealth Government (but with potential extension to 31 December 2020), for grants up to \$100,000.

The format for the submission of such progress reports is available at <http://www.ach2.org.au/apply>

**Expressions of Interest close at 5:00 pm AEDT on Monday 28 October 2019**

**Areas of Research: HIV, Hepatitis B, Hepatitis C and HTLV-1**

The areas of research of highest priority for support in 2020 are listed below. Collaboration with other National Centres for HIV and hepatitis research are strongly encouraged.



### **In relation to HIV**

- Development of *vaccine candidates* up to the stage of clinical trials or commercial development;
- *Development of assay systems* to measure immunological and virological outcomes in vaccine trials;
- Development of *preventatives* such as microbicides, and pre-exposure prophylaxis (PreP) and post-exposure prophylaxis (PEP) regimes;
- *Development of assay systems* to monitor effectiveness of microbicides, and pre-exposure prophylaxis (PreP) and post-exposure prophylaxis (PEP) regimes;
- Development of *cure interventions* up to the stage of clinical trials or commercial development;
- Development of antiviral targets and drug strategies, including immunotherapy;
- Development of tests for antiviral drug resistance and toxicity;
- *Development of assay systems* to measure appropriate immunological and virological outcomes in clinical trials of cure interventions;
- Development of *diagnostics and prognostics* for the HAART era, such as point-of-care tests;
- Development of *molecular virology* tools for tracking the HIV epidemic.

### **In relation to HCV**

- Development of *vaccine candidates* up to the stage of clinical trials or commercial development;
- *Development of assay systems* to measure immunological and virological outcomes in vaccine trials;
- Development of *preventatives* such as disinfectants for cleansing of injecting apparatus;
- *Development of assay systems* to monitor effectiveness of disinfectants for cleansing of injecting apparatus;
- Development of *diagnostics and prognostics* for the direct-acting antiviral (DAA) era, such as point-of-care tests and drug resistance tests;
- Development of *molecular virology* tools for tracking the HCV epidemic.

### **In relation to HBV**

- Development of *novel vaccine candidates* for therapeutic use or for non-responders to the existing vaccine up to the stage of clinical trials or commercial development;
- *Development of assay systems* to measure immunological and virological outcomes in vaccine trials;
- Development of *cure interventions* up to the stage of clinical trials or commercial development,
- Development of antiviral targets and drug strategies, including immunotherapy;
- Development of tests for antiviral drug resistance and toxicity;
- *Development of assay systems* to measure appropriate immunological and virological outcomes in clinical trials of cure interventions;
- Development of *diagnostics and prognostics* for the modern era, such as point-of-care tests;
- Development of *molecular virology* tools for tracking the HBV epidemic.

### **In relation to HTLV-1**

- Development of *diagnostics and prognostics*;
- Development of *molecular virology* tools for tracking the HTLV-1 epidemic.
- Development of antiviral targets and drug strategies, including immunotherapy;



## FORMAT FOR EXPRESSION OF INTEREST (EOI)

*One EOI per CIA will be considered*

**A maximum of four A4 pages.**

**Information exceeding page requirements WILL NOT be considered.**

**Please follow the below instructions:**

<b>Font:</b> Calibri, 12 point
<b>Margins:</b> 2 cm
<b>Save document as:</b> PDF
<b>Save your file as:</b> ACH2_2020 APP_SURNAME
<b>PLEASE INCLUDE: CIA last name at the top right hand corner of each page</b>

### **Page 1**

- Administering Institution.
- Administering Institution Research Office contact details.
- Application Title.
- Confirmation of Australian residency / Visa status.
- Area of research (Vaccines, Antiviral Strategies or Diagnostics/Prognostics).
- Details of all Chief Investigators (names and titles, positions, institutional address and contact details).
- Details of grant funding for all HIV, Hepatitis B, Hepatitis C and HTLV-1 in 2019 and 2020 (current and pending).
- Proposed budget for 2020 ACH<sup>2</sup> grant, together with no more than 3 lines of justification. (Note: funds can be used for salaries and consumables, however these grants do not fund travel).
- A short paragraph describing the project in lay terms.
- Details of ethics approval requirements. Please indicate whether Human and/or Animal ethics and/or OGTR/IBC licenses are required to undertake the research. If human and/or animal ethics approval is required and/or OGTR/IBC licenses for dealing with GMO's are required please indicate whether these approvals/licenses have already been obtained. It should be noted that work cannot commence any funded project until the appropriate approvals/licenses have been obtained and copies provided to ACH<sup>2</sup>.

### **Pages 2 and 3**

- Brief synopsis of proposed research project, comprising:
- Introduction (including background, hypotheses and specific aims);



- Research plan, including planned samples (if any) to be studied;
- Significance (with particular reference to translation into health care outcomes outlined in the ACH<sup>2</sup> strategic plan and the relevant National Strategies 2014-2017 and the timelines for those outcomes); and
- References (you should cite no more than 6 references).

**Page 4** (½ page maximum)

- Discuss translation into health care outcomes according to the HIV, Hepatitis and Indigenous Health National Strategies.
- Paragraph on justification as CIA.

Expressions of interest will be evaluated by an expert panel of virologists, immunologists and biologists, including clinician-scientists with expertise in translation of basic research into clinical practice and biotechnology. Projects will be graded, prioritised and a decision made on funding according to the Second National Hepatitis B Strategy 2014–2017; Third National Sexually Transmissible Infections Strategy 2014–2017; Fourth National Aboriginal and Torres Strait Islander Blood-borne Virus and Sexually Transmissible Infections Strategy 2014-2017; Fourth National Hepatitis C Strategy 2014–2017 and the Seventh National HIV Strategy 2014–2017 being met and available budget.

Expressions of interest can be submitted via your Institute Director or Research Office to [joanne.reidy@sydney.edu.au](mailto:joanne.reidy@sydney.edu.au) or mailed to:

Joanne Reidy  
Administration Officer, ACH<sup>2</sup>  
The Westmead Institute for Medical Research  
PO Box 412  
Westmead NSW 2145  
Phone: (02) 8627 3004

**Expressions of Interest close at 5:00 pm AEDT on Monday 28<sup>th</sup> October 2019**

*Executive of the Australia Centre for HIV and Hepatitis Virology Research (ACH<sup>2</sup>)*

Professor Anthony Cunningham AO (Director);  
Professor Andrew Lloyd AM (and Chair, IVRN Steering Committee);  
Associate Professor Damian Purcell  
Professor Gilda Tachedjian  
Associate Professor Heidi Drummer  
Associate Professor Peter Revill  
Associate Professor David Anderson