The FY17 Defense Appropriations Act provides $15 million (M) to the Department of Defense Peer Reviewed Alzheimer’s Research Program (PRARP) to support research which addresses the long-term consequences of traumatic brain injury (TBI) as they pertain to Alzheimer’s disease (AD) and related dementias (ADRD). The research impact will benefit the military, Veteran, and civilian communities. The PRARP’s mission is devoted to (1) understanding the association between traumatic brain injury (TBI) and Alzheimer’s disease (AD)/Alzheimer’s disease-related dementias (ADRD) and (2) reducing the burden on affected individuals and caregivers, especially in the military and Veteran communities.

FY17 PRARP Program Announcements and General Application Instructions for the following award mechanisms are anticipated to be posted on Grants.gov in July 2017. Pre-application and application deadlines will be available when the Program Announcements are released. This pre-announcement should not be construed as an obligation by the Government, and funding of research projects received in response to these Program Announcements is contingent on the availability of Federal funds appropriated for the PRARP.

As directed by the Office of the Assistant Secretary of Defense for Health Affairs, the Defense Health Agency J9, Research and Development Directorate, manages the Defense Health Program Research, Development, Test, and Evaluation appropriation. The managing agent for the anticipated Program Announcements/funding opportunities is the Congressionally Directed Medical Research Programs (CDMRP).

**FY17 PRARP Overarching Challenges and Focus Areas:**

All applications for the FY17 PRARP funding opportunities must address at least one of the following FY17 Overarching Challenges. The FY17 Overarching Challenges may be mechanism-specific.

The PRARP FY17 Overarching Challenges are listed below.

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<th><strong>PRARP FY17 Overarching Challenges</strong></th>
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<tr>
<td><strong>Paucity of Research Resources:</strong> The paucity of research resources to examine the interrelationship between TBI and subsequent AD/ADRD for the military, Veteran, and civilian communities.</td>
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**Paucity of Clinical Studies:** The paucity of clinical studies to examine the interrelationship between TBI and subsequent AD/ADRD for the military, Veteran, and civilian communities. This includes research into risk factors which may predispose individuals to AD/ADRD subsequent to TBI.

**Diagnostic Technologies, Tests, Biomarkers, or Devices:** The need for technologies, tests, or devices to detect or prognose the progression to AD/ADRD subsequent to TBI. This includes research into risk factors which may predispose individuals to AD/ADRD subsequent to TBI.

**Quality of Life:** The need for technologies, assessments, interventions, or devices to benefit individuals living with the common symptoms or deficits of TBI and AD/ADRD.

**Caregiver Burden:** The need for technologies, assessments, interventions, or devices with the goal of reducing burden for caregivers of individuals living with the common symptoms or deficits of TBI and AD/ADRD.

**Epidemiology:** The paucity of epidemiological research to examine the interrelationship between TBI and subsequent AD/ADRD for the military, Veteran, and civilian communities. This includes research into risk factors which may predispose individuals to AD/ADRD subsequent to TBI.

In addition to addressing one or more of the specified FY17 Overarching Challenges, applications should also address at least one of the following FY17 Focus Areas in support of the FY17 Overarching Challenges. An application that proposes research outside of the FY17 Focus Areas is acceptable, as long as the applicant provides a strong rationale. The Focus Areas will be mechanism-specific.

The PRARP FY17 Focus Areas are listed below.

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<td><strong>Genomics/Proteomics:</strong> Studies or technologies (e.g., genetic, proteomic, bioinformatics and epigenetic strategies) intended to characterize neurological change(s) associated with TBI and subsequent AD/ADRD. In addition, relevant technologies or tests may be considered under this focus area.</td>
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<tr>
<td><strong>Mechanisms of Pathogenesis:</strong> Identification of contributing mechanisms (e.g., pathology of Tau, non-neuronal cells, inflammatory factors, and vascular contributions) associated with TBI and subsequent AD/ADRD pathogenesis.</td>
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### Quality of Life

Research intended to alleviate, stabilize, or characterize the symptoms, or deficits, common to TBI, Alzheimer’s disease (AD) and Alzheimer’s disease-related dementias (ADRD). Examples of research in this Focus Area include: Identification and management of co-morbidities and modifiable risk factors (e.g., sleep apnea, obesity); cognitive training interventions; studies of health and wellness and behavioral interventions.

### Caregiver Support

Research intended to reduce the burden of care on the caregiver for individuals living with the common symptoms or deficits of TBI and AD/ADRD. Examples of research in this focus area include: Caregiver training, home-based support, behavioral interventions, and relationship interventions.

### Biomarkers

Development of strategies to diagnose, prognose, or characterize neurological changes or risk factors associated with TBI and subsequent AD/ADRD (e.g., fluid based, imaging, physiological, and clinical approaches).

### Novel Target Identification

Basic research (non-human) directly leading to the identification of new targets for the development of existing or new investigational medicines, drugs, or agents.

### Epidemiological Research

Research focusing on the incidence, distribution, and other factors relating to the health of individuals affected by TBI and subsequent AD/ADRD.

The following is a summary of the FY17 PRARP Program Announcements. Four award mechanisms will be offered for FY16. This pre-announcement should not be construed as an obligation by the Government.

### Convergence Science Research Award

Principal Investigators (PIs), at or above the level of Assistant Professor (or equivalent), from any field or discipline, who seek to bring their expertise to address the PRARP’s mission; the research team must demonstrate TBI/AD experience.

**Intent:** Support efforts to generate research resources, tools, or novel research efforts for researchers and/or practitioners in health sciences.

**Applications must address one or more of the following FY17 PRARP Overarching Challenges:**

- Paucity of Research Resources
- Paucity of Clinical Studies
Diagnostic Technologies, Tests, Biomarkers, or Devices

Epidemiology

Applications should address at least one of the following FY17 PRARP Focus Areas:

- Genomics/Proteomics
- Mechanisms of Pathogenesis
- Biomarkers
- Novel Target Identification
- Epidemiological Research

Research considering pharmacologic interventions is specifically discouraged under this mechanism.

Preliminary data, while not required, are encouraged.

- Maximum funding is $500,000 for direct costs (plus indirect costs).
- Maximum period of performance is 3 years.

Indirect costs may be proposed in accordance with the institution's rate agreement.

Quality of Life Research Award

PIs at or above the level of Assistant Professor (or equivalent), from any field or discipline, who seek to bring their expertise to address the PRARP’s mission; the research team must demonstrate TBI/AD experience.

**Intent:** The intent of the research funded through this award is to (1) support research to alleviate, stabilize, or characterize the symptoms or deficits common to TBI, AD, and ADRD and (2) reduce the burden of care on the caregiver for individuals living with the common symptoms of TBI and AD/ADRD. Research may be proposed to either facet of the intent. Both are equally important.

Applications must address one or more of the following FY17 PRARP Overarching Challenges:

- Paucity of Clinical Studies
- Epidemiology
- Quality of Life
Applications should address at least one of the following FY17 PRARP Focus Areas:

- Caregiver Burden

Research considering pharmacologic interventions is specifically discouraged under this mechanism.

Preliminary data, while not required, are encouraged.

- Funding limit is $500,000 in direct costs.
- Maximum period of performance is 3 years.
- Indirect costs may be proposed in accordance with the institution's rate agreement.

**New Investigator Award**

PIs within 3 years of their first independent faculty position, from any field or discipline, who seek to bring their expertise to address the PRARP’s mission; the research team must demonstrate TBI/AD experience.

**Intent:** Support early-career investigators interested in novel research efforts or new technologies within TBI and AD/ADRD.

Applications must address one or more of the following FY17 PRARP Overarching Challenges:

- Paucity of Research Resources
- Paucity of Clinical Studies
- Diagnostic Technologies, Tests, Biomarkers, or Devices
- Epidemiology
- Quality of Life
- Caregiver Burden

Applications should address at least one of the following FY17 PRARP Focus Areas:
• Genomics/Proteomics
• Mechanisms of Pathogenesis
• Biomarkers
• Quality of Life
• Caregiver Support
• Epidemiological Research
• Novel Target Identification

**Preliminary data, while not required, are encouraged.**

- Funding limit is $225,000 in direct costs.
- Maximum period of performance is 3 years.

Indirect costs may be proposed in accordance with the institution’s rate agreement.

**Research Partnership Award**

PIs at or above the level of Assistant Professor (or equivalent), from any field or discipline, who seek to bring their expertise to address the PRARP’s mission; the research team must demonstrate TBI/AD experience.

**Intent:** To create an avenue for partnerships between investigators to address a research problem or question in a manner that would be unachievable through separate efforts.

Supports the development of translational research collaborations between two independent, faculty-level (or equivalent) investigators.

Must include clearly stated plans for interactions between the PIs and the institutions involved. The plans must include communication, coordination of research progress and results, and data transfer.

**Clinical trials are not allowed.**

Applications must address one or more of the following FY17 PRARP Overarching Challenges:

- Paucity of Research Resources
- Paucity of Clinical Studies
- Diagnostic Technologies, Tests, Biomarkers, or Devices
Applications should address at least one of the following FY17 PRARP Focus Areas:

- Genomics/Proteomics
- Mechanisms of Pathogenesis
- Biomarkers
- Quality of Life
- Caregiver Support
- Epidemiological Research
- Novel Target Identification

Research considering pharmacologic interventions is specifically discouraged under this mechanism.

**Preliminary data are required.**

- Funding limit is $1.3 million in total costs.
- Maximum period of performance is 3 years.

Indirect costs may be proposed in accordance with the institution’s rate agreement.

A pre-application is required and must be submitted through the electronic Biomedical Research Application Portal (eBRAP) at [https://eBRAP.org](https://eBRAP.org) prior to the pre-application deadline. All applications must conform to the final Program Announcements and General Application Instructions that will be available for electronic downloading from the Grants.gov website. The application package containing the required forms for each award mechanism will also be found on Grants.gov. A listing of all CDMRP funding opportunities can be obtained on the Grants.gov website by performing a basic search using CFDA Number 12.420.

Applications must be submitted through the Federal Government’s single-entry portal, [Grants.gov](http://grants.gov). Submission deadlines are not available until the Program Announcements are released. For email notification when Program Announcements are released, go to the CDMRP website (http://cdmrp.army.mil) and select Subscribe to Funding Opportunities & Program Communications.
Congressionally Directed Medical Research Programs

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