NIH Bench-to-Bedside Awards

- Established 1999 to seed new partnerships between basic science and clinical investigators.
- Since 2006, encourages intramural/extramural partnerships.
- $150K per yr X 2 yrs (direct costs).
Bench-to-Bedside (BtB) Awards

Funding:

- Office of AIDS Research
- Office of Rare Diseases Research, NCATS
- Office of Behavioral and Social Sciences
- Office of Research on Women’s Health
- Office of Dietary Supplements
- National Institute on Minority Health & Health Disparities
- Some years ICs and DDIR
- 2016 stable funding for OCR, NIH
  - More awards
  - Top awards funded regardless of category
Review Process

- e-venue (proposalCentral) for application submissions/review
- Review Team half intramural and half extramural (R01 awardees)
- Applications scored for:
  - Alignment with the BtB criteria.
  - Uses NIH CSR scoring system
From 2006-2018 205 BtB Awards at 93 Sites

- Erasmus University Medical Center, Netherlands
- Hospital A.C. Camargo, Brazil
- Hospital for Sick Children, Canada
- Imperial College of London, UK
- International Agency for Research on Cancer, France
- Garvan Institute of Medical Health, Australia
- Makerere University, Uganda
- Sackler School of Medicine, Israel
- University of New South Wales, Australia
- University of Toronto, Canada
- University of Oxford, UK
- Zaria, Nigeria
- The University of Edinburgh, UK
BtB (1999-2018)

- 29% overall success rate
- >$70 M to 285 projects (93% IM/EM)
- 784 investigators (469 intramural, 315 extramural)
- 151 clinical protocols (143 CC, 5 extramural US, 3 Int’l)
BtB Metrics (1999-2018)

- 334 publications with 201 articles in high impact journals (rating >3)
- 26 patents
  - 16 licenses
    - 13 technologies
    - 3 drugs
- 6 INDs
The 2019 Bench-to-Bedside (and Back) application cycle has begun with the release of the 2019 Call for Proposals. Please review application instructions and deadlines.

The Bench-to-Bedside (BtB) Program funds research teams seeking to translate basic scientific findings into therapeutic interventions for patients and to increase understanding of important disease processes.

The BtB Program accomplishes this mission by addressing barriers, such as the traditional silos between basic and clinical researchers in biomedical research, which can hinder progress toward finding new therapeutics for patients in need.

BtB teams involve basic and clinical researchers, often from different NIH Institutes and Centers. In 2006, the BtB program's charge was expanded to unite the efforts of intramural and extramural NIH researchers. Intramural science refers to research that takes place on an NIH campus under the auspices of federal employees, while extramural research is funded by NIH and conducted by investigators and institutions outside of NIH.

The BtB program exemplifies the benefits associated with intramural – extramural collaborations; the extramural community gains access to the Clinical Center's unique resources, and the intramural community can pursue innovative research with extramural investigators.

Each BtB award provides up to $150,000 a year for two years. Projects, which are funded by various NIH offices and institutes, have represented several research categories: AIDS, rare diseases, behavioral and social sciences, minority health and health disparities, women's health, rare diseases drug development, pharmacogenomics, and general. These categories may change from year to year so please look at the most recent announcement for the most current funding categories.

To date, approximately 800 principal and associate investigators have collaborated on 238 funded projects with approximately $53 million distributed in total Bench-to-Bedside funding. The introduction of extramural collaborations in 2006 has resulted in 157 partnerships at 90 institutions. Ninety-seven percent of BtB awards spanning the three most recent review cycles have involved extramural partners.