essential cells to remain unharmed. Thus, monoclonal antibodies to GPC3 (and corresponding immunotoxins) represent a novel therapeutic candidate for treatment of HCC, as well as other cancers associated with the differential expression of GPC3.

**Potential Commercial Applications:**
- Therapeutic antibodies against cancers that overexpress GPC3.
- Therapeutic immunotoxins or antibody-drug conjugates for killing cancer cells that overexpress GPC3.
- Diagnostics for detecting cancers associated with GPC3 overexpression.
- Specific cancers include hepatocellular cancer (HCC), melanoma, ovarian cancer, thyroid cancer, lung squamous cell carcinoma, Wilms’ tumor, neuroblastoma, hepatoblastoma, and testicular germ-cell tumors.

**Competitive Advantages:**
- Monoclonal antibodies create a level of specificity that can reduce deleterious side-effects.
- Multiple treatment strategies available including the killing of cancer cells with a toxic agent or by inhibiting cell signaling.
- Non-invasive and potentially non-liver toxic alternative to current HCC treatment strategies.

**Development Stage:**
- Pre-clinical.
- In vitro data available.
- In vivo data available (animal).

**Inventors:** Mitchell Ho (NCI) et al.

**Publications:**


**Licensing Contact:** David A. Lambertson, Ph.D.; 301–435–4632; lambertsond@mail.nih.gov.

**Collaborative Research Opportunity:** The National Cancer Institute, Center for Cancer Research, Laboratory of Molecular Biology, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize novel antibody or antibody-drug conjugate therapies for the treatment of liver cancer. For collaboration opportunities, please contact John Hewes, Ph.D. at hewesj@mail.nih.gov.

**Licensing Contact:** John Hewes, Ph.D. at hewesj@mail.nih.gov.

**Dated:** June 14, 2013.

**Richard U. Rodriguez,**
Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

**Dated:** June 17, 2013.

**Melanie J. Gray,**
Program Analyst, Office of Federal Advisory Committee Policy.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health**

**Center for Scientific Review; Notice of Closed Meeting**

Pursuant to section 10(d) of the Federal Advisory Committee Act, as amended (5 U.S.C. App.), notice is hereby given of the following meeting.

The meeting will be closed to the public in accordance with the provisions set forth in sections 552b(c)(4) and 552b(c)(6), Title 5 U.S.C., as amended. The grant applications and the discussions could disclose confidential trade secrets or commercial property such as patentable material, and personal information concerning individuals associated with the grant applications, the disclosure of which would constitute a clearly unwarranted invasion of personal privacy.

**Name of Committee:** Center for Scientific Review Special Emphasis Panel; RFA Panel: Molecular and Cellular Substances of Complex Brain Disorders.

**Date:** July 19, 2013.

**Time:** 8:30 a.m. to 5:30 p.m.

**Agenda:** To review and evaluate grant applications.

**Place:** Embassy Suites at the Chevy Chase Pavilion, 4300 Military Road NW., Washington, DC 20015.

**Contact Person:** Deborah L. Lewis, Ph.D., Scientific Review Officer, Center for Scientific Review, National Institutes of Health, 6701 Rockledge Drive, Room 4183, MSC 7850, Bethesda, MD 20892, 301–408–9129, lewisdeb@csr.nih.gov.


**Dated:** June 14, 2013.

**Anna Snouffer,**
Deputy Director, Office of Federal Advisory Committee Policy.

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