



# AMERICAN SOCIETY OF HEMATOLOGY

2021 L Street, NW, Suite 900, Washington, DC 20036 **ph** 202.776.0544 **fax** 202.776.0545 **e-mail** ASH@hematology.org

## 2010

### President

Hal Broxmeyer, PhD  
Walther Oncology Center  
Indiana University School of Medicine  
950 W. Walnut Street, Room 302  
Indianapolis, IN 46202  
phone 317-274-7510  
fax 317-274-7592  
hbromx@iupui.edu

### President-Elect

J. Evan Sadler, MD, PhD  
Washington University Medical School  
660 South Euclid Avenue, Box 8125  
Saint Louis, MO 63110-1093  
phone 314-362-9029  
fax 314-454-3012  
esadler@wustl.edu

### Vice President

Armand Keating, MD  
Princess Margaret Hospital  
610 University Avenue, Suite 5-303  
Toronto, ON M5G 2M9  
CANADA  
phone 416-946-4595  
fax 416-946-4530  
armand.keating@uhn.on.ca

### Secretary

Charles Abrams, MD  
University of Pennsylvania  
School of Medicine  
421 Curie Boulevard, #912  
Philadelphia, PA 19104-6140  
phone 215-573-3288  
fax 215-573-7400  
abrams@mail.med.upenn.edu

### Treasurer

Linda Burns, MD  
Division of Hematology,  
Oncology, and Transplantation  
University of Minnesota  
420 Delaware Street, SE  
Mayo MC 286/Room 14-154A Moos Tower  
Minneapolis, MN 55455-0341  
phone 612-624-8144  
fax 612-625-9988  
burns019@umn.edu

### Councillors

Kenneth Anderson, MD  
Thomas Bensinger, MD  
David Bodine, PhD  
Stephanie Lee, MD, MPH  
Elaine Muchmore, MD  
Mohandas Narla, DSc  
Marilyn Telen, MD  
David Williams, MD

### Editors-in-Chief

Cynthia Dunbar, MD, *Blood*  
Roy Silverstein, MD, *The Hematologist*

### Executive Director

Martha L. Liggett, Esq.  
mliggett@hematology.org

Susan Shurin, MD  
Acting Director  
National Heart, Lung, and Blood Institute  
National Institutes of Health  
Building 31, Room 5A52  
31 Center Drive MSC 2486  
Bethesda, MD 20892

January 12, 2010

Dear Dr. Shurin:

On behalf of the American Society of Hematology (ASH), I write to provide comments to the National Heart, Lung, and Blood Institute (NHLBI) on the recent announcement "Funding Strategies for Translating NIH Peer Review Changes into Funding Policies" that contains the new FY 2010 payline schedule for A0 (new submission), A1, and A2 (resubmission) applications.

As you know, ASH represents over 16,000 clinicians and scientists committed to the study and treatment of blood and blood-related diseases. These areas include anemia (including sickle cell and thalassemia), thrombosis (including venous thrombosis, heart attack and stroke), bleeding disorders, transfusion medicine, and gene therapy, as well as the malignant hematologic leukemia, lymphoma, and myeloma. In addition, hematologists have been pioneers in the fields of bone marrow transplantation and stem cell research. A significant amount of research that fuels the continuous and remarkable progress of understanding and treating hematological diseases is funded by the NHLBI, and changes in NHLBI funding policies affect a significant number of our members all over the world.

ASH applauds the NIH-wide efforts to enhance the peer review process by reducing the need to resubmit applications, a practice that creates additional burdens for applicants, study section members, and NIH staff. While ASH understands the goal of tailoring strategies for funding R01 applications in order to restore the historic funding levels of A0 applications, the Society is concerned that the NHLBI prioritized the funding of A0 submissions at higher paylines than A1 and A2 applications, beginning October 1, 2009.

ASH believes that different paylines for A0 vs. A1 proposals may be counter-productive to the peer review process. Peer review has been fundamental to the success of the American scientific enterprise. The plan to fund A1 proposals at paylines lower than A0 discounts the peer review by dedicated scientists because a proposal judged to be superior to another will be not funded simply because it went through a round of review and response. While ASH understands and supports the goal of lessening the burden on peer reviewers and limiting the amount of time investigators spend re-writing and refining applications, the iterative process of expert peer review followed by revision of proposals, although somewhat labor-intensive, has clearly served the NIH well and led to significant improvement in thousands of funded proposals. The new policy could eliminate this effective developmental process.

ASH is also concerned that this new policy may result in unintended consequences that can potentially create a bigger burden for the study sections. For example, investigators likely will avoid submitting A1 applications because of the low paylines and instead “adjust” their applications to meet the requirements for an A0 application. This will, undoubtedly, significantly increase the number of A0 submissions while simultaneously decreasing the number of A1 submissions and eliminating the insights gained from the first round of review. It will also make it more difficult for reviewers to assess whether applicants have responded to prior concerns. As a result, study sections will need to review and score a substantially greater number of A0 applications as investigators learn that those are more likely to be funded. This may create a similar backlog of unfunded A0 applications, thereby clogging the “pipeline” as study sections adjust to “fit” highly meritorious applications into different paylines.

In addition, the post-hoc adjustment of paylines that occurred after the recent round of review will negatively affect a significant number of A1 and A2 applications that were already in the “pipeline.” For many years, applicants have recognized that it often took two or more submissions to get a high quality grant funded, and unfortunately fell into the habit of often submitting the A0 proposal before it was ready just to get feedback to help with a competitive A1 proposal. We agree this practice should be discouraged, but applicants should be aware of such changes prior to submission of their grants. As the study sections were unaware of this coming change, many applications that were scored favorably are now not fundable post-hoc, which has negatively affected many junior investigators.

While ASH commends the NHLBI on the most recent adjustment of paylines following the comments it received from the concerned scientific community, the Society urges the NHLBI to continue to review this policy change and its unintended consequences. ASH believes that providing incentive in the form of different paylines for different submissions will ultimately create a bigger backlog in the NHLBI application “pipeline” and may actually result in a greater proportion of highly meritorious applications not being funded at the A0 stage. ASH recommends that the NHLBI reassess this policy and maintain payline levels independent of whether an application is an A0, A1 or A2.

ASH will be happy to provide further information and discuss this issue with you. Please have your staff contact ASH Scientific Affairs Manager, Ulyana Vjugina, PhD, at (202) 776-0544 or [uvjugina@hematology.org](mailto:uvjugina@hematology.org) for any additional information.

Sincerely,

A handwritten signature in black ink that reads "Hal E. Broxmeyer". The signature is written in a cursive, flowing style.

Hal E. Broxmeyer, PhD

President