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| Applicant’s last name, first initial | Abbreviated title | Submission deadline |

# INTERVENTIONS TESTING PROGRAM (ITP)

## − COVER PAGE −

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| --- | --- |
| **Name of Intervention** |  |
| **Applicant, Degree(s):** |  |
| **Institution:** |  |
| **Address:** |  |
| **Phone:** |  |
| **Email:** |  |
| **Co-Applicant, Degree(s):** |  |
| **Institution:** |  |
| **Address:** |  |
| **Phone:** |  |
| **Email:** |  |
| **Submission** | **[ ] Original** *or* **[ ] Re-submission** *{previous submission date}* |

**Instructions:** This application form is to suggest specific interventions for consideration by the ITP. Individuals or groups who wish to propose more than one intervention must use separate application forms for each proposed intervention. Applications are evaluated for scientific merit, including the potential of the proposed intervention to increase lifespan and delay diseases of aging, and the feasibility of incorporating the agent into rodent chow, safely administering it to mice continuously for approximately 3 years, and obtaining it at a reasonable cost. **Applications must be submitted as a single Adobe Acrobat® PDF file to Dr. Jennifer Fox (**[**jennifer.fox@nih.gov**](mailto:jennifer.fox@nih.gov)**).**

**For Resubmissions:**The resubmission should follow the same instructions as above, but also include responses to the comments from the scientific reviews and explain how the application has been modified and strengthened. Please put your responses on the cover page(s). New data from any work completed since the original application was submitted should be described in the main body of the application, if deemed essential to support the concept.

## − APPLICATION −

### Background and Rationale

*This section should describe concisely the reason why the proposed intervention deserves to be evaluated for potential effects on longevity and aging. Ideally, the rationale should include preliminary data showing the ability of the agent to extend lifespan in mice, prevent disease in mice or humans, or extend lifespan in another model organism. Data showing that the proposed agent affects biochemical or physiological systems thought to be of high relevance to aging biology will also be carefully considered. If this section includes unpublished data, include enough information (i.e., figures, tables, protocols) to permit its evaluation. If this section includes published data, include similar information and a reference citation to the publication(s) from which the data are derived. There is no length limit, but it is recommended that this section be no longer than five pages (including figures and tables).*

#### Suggested Treatment Protocol

*This section should provide a detailed description of the proposed intervention and the rationale for the proposed treatment protocol. The following should be addressed:*

* *Can the substance be given in rodent chow? How stable is the test agent when incorporated into food? Should the preparations be protected from light or heat?*
* *What dose should be used?*
  + *Please state your recommendation as concentration as parts per million (ppm) in food; this is milligrams of agent per kilogram of food.*
  + *Please do not state recommended concentrations or doses as “mpk”, "mg/kg" or "milligrams per kilogram," because these formats do not distinguish clearly between concentration versus dose: i.e. “mg/kg of food” [concentration] versus "mg/kg mouse body weight per day" [dose]. Do not state drug dose as mg/kg of body weight per day. Instead, convert the dose into ppm, i.e. milligrams of drug per kilogram of food.*
  + *Tip: if a drug is dosed at 1 milligram per kilogram of mouse body weight per day, this is the same as a concentration of 6 ppm in food.  A drug used at X milligrams per kilogram of mouse body weight per day is being prepared as 6X ppm in food.  This conversion factor, 1:6, reflects the ITP assumptions that the average adult mouse weighs 30 grams and consumes 5 grams of food each day.*
* *What is the best way to monitor treated mice to ensure that the intake of the agent produces the expected physiological or pharmacological effects? Will this require blood tests or skin samples, or will it require that some of the mice be sacrificed to obtain internal tissues? If a blood test is required, how much blood is needed? At what age, or at what time after treatment initiation, should the test be performed? How expensive is the test to conduct? If the test requires specialized expertise or equipment, is this available in the sponsor's laboratory?*
* *Is there a reason to initiate feeding of the intervention at an age other than 4-6 months? If so, at what age should the treatment be initiated? Is there a range of ages that would be acceptable?*

#### Safety Information

*This section should describe any harmful side effects the treatment might have on mice and humans. If the applicant knows of any existing data based on either short-term or long-term exposure of rodents, humans, or other mammals to any dose of the proposed agent or related agents, the application should state this and describe any toxicities noted in the studies. If, for example, there is a published study in which mice were given the drug at a stated dose for a period of weeks or months without ill effects, please provide this information.*

#### Costs

*The ITP provides all costs for animal acquisition, animal housing, testing, and statistical analysis. It also includes a limited budget for the purchase, or cost-shared purchase, of test substances. The following should be addressed in this section:*

* *The applicant should indicate whether the test agent can be obtained commercially, or whether it must be obtained from the applicant. If the drug is available only from the applicant, state whether it can be provided free of charge, or whether the ITP would be expected to pay some or all of the cost. In making this assessment, assume that the ITP will need to prepare 2100 kg of food over the course of the entire study.*
* *If the compound can be purchased commercially, the applicant should indicate which supplier(s) are recommended and why, and the projected cost of the treatment (in dollars per year of treatment), assuming 2,100 kg of food over the course of the study.*

#### References

*Insert a list of References*

#### Applicant (and Co-Applicant) Biosketch or CV

*Insert the biosketches or CVs of all applicants/co-applicants.*

## − STATEMENT OF UNDERSTANDING −

In submitting this proposal, I agree to the following:

* I understand that all information presented in the proposal can be freely shared with members of the ITP Steering Committee and Access Panel during their evaluation of proposals but will otherwise be considered confidential.
* If my proposal, or a modification of it (such as altered dosage or frequency of administration), is accepted for inclusion in a research protocol, I will be asked to help evaluate the data and to prepare the data for written and oral publications, on each of which I will be offered co-authorship. I understand the ITP intends to submit the results of all ITP-supported studies for publication – regardless of whether they produce data showing positive or negative effects on health status in mice.
* I understand that data generated by ITP-supported experiments using the compound/diet proposed will be made publicly available and can be used by anyone in applications for further research support. I also will be free to use ITP-generated data in the context of my applications for research support or for any other purpose.
* **If applicable:** The compound/diet proposed makes use of materials that are not yet freely available and whose production depends on proprietary or unpublished methods. If my application is approved for incorporation in the ITP, a mutually acceptable Materials Transfer Agreement that would permit me to provide the ITP with the compound(s) needed for the experimentation will be developed with the Institutions involved in this program.

Applicant Signature

Co-Applicant Signature