NEUROSCIENCES CONNECT:

HUMAN RESEARCH NEWSLETTER

WINTER 2024
Volume 1, Issue 2

Department of Neurosciences
Published by the Office of the
Vice Chair of Human Clinical Research

Vice Chair of Human Clinical Research
Dr. Jennifer Graves

Department Chair
Dr. James Brewer

Dear Colleagues,

As the holiday season surrounds us, it offers a good moment to pause and reflect on the journey of the past year, recognizing the extraordinary progress we have made in human research. Through all the experiences and milestones - both the hurdles and the achievements - your unwavering commitment to advancing scientific discovery continues to inspire and drive meaningful change.

This season also reminds us of the importance of community, of the participants who trust us with their stories, the teams who bring research to life, and the collaborators who help turn ideas into solutions. Together, we are not only pushing the boundaries of knowledge but also creating a lasting impact on the lives of those we serve.

In this issue, we reflect on key achievements, share insights from ongoing studies, and look ahead to the opportunities the New Year will bring. We've also included some winter-themed features to keep the spirit of the season alive as we embark on another chapter of innovation and discovery.

Thank you for your dedication, passion, and collegiality. Let's continue to make a difference, one breakthrough at a time. Wishing you a warm and productive Holiday season!

With gratitude,

Jennifer Graves, MD, PhD, MAS
Vice Chair of Human Clinical Research

In This Issue

Submit content to

News Spotlight

Irene Litvan, M.D.

Douglas Galasko, M.D.

UC San Diego Ranks 9th in the World for Most Influential Researchers

UC San Diego has solidified its position as a global leader in research, ranking 9th worldwide and the highest-ranked public university in the United States on Clarivate's 2024 **Highly Cited Researchers** list. This prestigious recognition highlights the influence and impact of the university's faculty, with 56 researchers named among the top 1% in their respective fields based on citation records over the past decade.

Neurosciences Highlights:

- **Irene Litvan**, a distinguished neuroscientist in the **Neuroscience and Behavior** category, is renowned for her work on movement disorders, including Parkinson's disease and progressive supranuclear palsy, bridging clinical care with cutting-edge research.
- **Douglas Galasko**, recognized under the cross-field category, contributes significantly to both clinical and translational research, with a focus on Alzheimer's disease and other neurodegenerative conditions.
- **Don W. Cleveland,** another honoree, is recognized for his groundbreaking work in Neuroscience and Behavior, focusing on the molecular mechanisms of neurodegenerative diseases such as ALS and frontotemporal dementia.

Institutional Excellence:

This recognition underscores UC San Diego's robust innovation ecosystem, which fosters interdisciplinary collaborations. The inclusion of neuroscientists such as Drs. Cleveland, Galasko and Litvan demonstrates the university's commitment to advancing the understanding of complex neurological disorders, improving patient outcomes, and shaping the future of neuroscience research.

This year's recognition reflects not only academic excellence but also the practical application of groundbreaking research. These honorees continue to shape the global research landscape, contributing to advancements in healthcare, biotechnology, and neurotherapeutics.

To learn more about this achievement, visit Clarivate's Highly Cited Researchers list.

Feature Events

Digital and Wearable Technology Workshop

We are thrilled to announce an exciting opportunity coming your way in 2025! Join us for the ***Digital and Wearable Technology Workshop***, a forward-thinking event designed to explore the cutting edge of innovation in research.

This workshop will delve into the transformative potential of wearable devices and digital tools in advancing research and clinical outcomes. From leveraging wearable technology for real-time data collection to integrating digital platforms in clinical trials, this event promises to inspire new ideas and foster interdisciplinary collaborations.

What to Look Forward to:

- **Engaging Session**: Learn from thought leaders and innovators in wearable technology and other digital solutions.
- **Hands-On Demonstrations**: Get up close with the latest technologies being used by your colleagues.
- **Collaborative Networking**: Connect with fellow faculty passionate about advancing technology in human research.

Lara Labarta-Bajo, PhD
Allen lab, Salk Institute
"Aging-associated programs in astrocytes impair motor control"

Yuhui (Sunny) Luo, PhD candidate
Zuniga Lab & Root Lab, UCSD
"CD8 T cells activation of brainstem neurons promotes sickness behavior and survival in a chronic viral infection"

Date: January 23, 2025

Time: 4-5 PM

Place: Liebow Auditorium BSB

To be added to the distribution list please contact: Tamara Shabi at trshabi@health.ucsd.edu

Research Highlights: Publications

2024 Publications from PubMed Search Featuring Faculty and Staff from our Department

Misfolded alpha-synuclein in amyotrophic lateral sclerosis: Implications for diagnosis and treatment

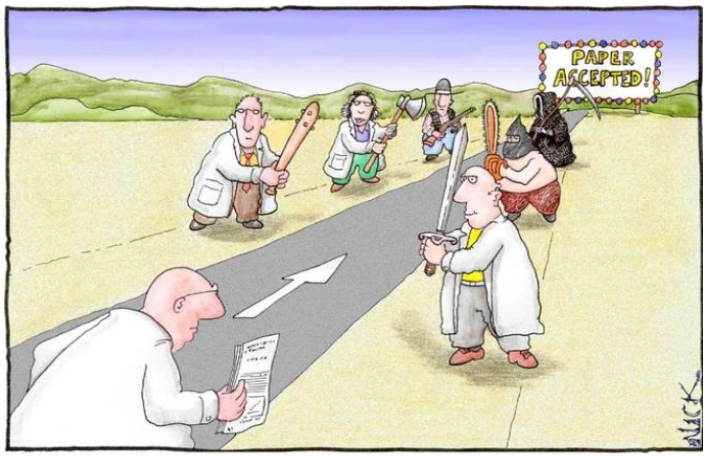
Richard Smith[1], Hanna Hovren[2], Robert Bowser[3], Nadine Bakkar[3], Ralph Garruto[4], Albert Ludolph[5], **John Ravits**[6], Lia Gaertner[7], Davan Murphy[1], Russ Lebovitz[2]

A recent study titled "Misfolded Alpha-Synuclein in Amyotrophic Lateral Sclerosis: Implications for Diagnosis and Treatment" explores the role of toxic alpha-synuclein (α-Syn) species in amyotrophic lateral sclerosis (ALS). Using a validated seed amplification assay, researchers detected seed-competent α-Syn in the cerebrospinal fluid (CSF) of 18 out of 127 ALS patients, including both familial and sporadic cases as well as five Guamanian patients. Interestingly, the assay was negative for superoxide dismutase type 1 ALS patients and unaffected controls. These findings highlight a potential sub-group of ALS where α-Syn contributes to pathogenesis, offering new insights into diagnostic approaches and targeted therapeutic strategies for this devastating neurodegenerative disease.

Normative data for the Digit Symbol Substitution for diverse Hispanic/Latino adults: Results from the Study of Latinos-Investigation of Neurocognitive Aging (SOL-INCA)

Alejandra Morlett Paredes[1], Wassim Tarraf[2], **Kevin Gonzalez**[1], Ariana M Stickel[3], Lisa V Graves[4], **David P Salmon**[1], Sonya S Kaur[5], Linda C Gallo[3], Carmen R Isasi[6], Richard B Lipton[7], Melissa Lamar[8,9], Zachary T Goodman[10], **Hector M González**[1]

A recent study from the Study of Latinos-Investigation of Neurocognitive Aging (SOL-INCA) provides much-needed normative data for the Digit Symbol Substitution (DSS) test, a key tool in assessing executive functioning and processing speed. The study analyzed data from 6177 Hispanic/Latino adults across six heritage backgrounds, with an average age of 63.4 years and mean education of 11 years. Findings revealed that factors such as age, education, sex, heritage, and language preference significantly influence DSS scores. These insights can enhance the accuracy of neurocognitive disorder diagnoses and reduce biases in cognitive assessments. To aid clinicians, the researchers developed an online dashboard offering accessible DSS norms tailored to Hispanic/Latino adults: DSS Dashboard -DSS Norms



Most scientists regarded the new streamlined peer-review process as "quite an improvement."

Research Highlights: Publications

2024 Publications from PubMed Search Featuring Faculty and Staff from our Department

Highlighting a Significant Publication in Dementia Research: Association of CSF α-Synuclein Seeding Amplification Assay Results With Clinical Features of Possible and Probable Dementia With Lewy Bodies

David G Coughlin[1], Karen R MacLeod[1], John S Middleton[1], Andrea C Bozoki[1], James E Galvin[1], David J Irwin[1], Carol F Lippa[1], Irene Litvan[1], Oscar L Lopez[1], Sarah Berman[1], Debby W Tsuang[1], Cyrus P Zabetian[1], Lawrence S Honig[1], Karen S Marder[1], Jori E Fleisher[1], Marwan Sabbagh[1], Dylan Wint[1], Angela S Taylor[1], Lynn Bekris[1], James B Leverenz[1], Douglas Galasko[1]
Neurology® 2024;103:e209656.
DOI: 10.1212/WNL.0000000000209656

A collaborative study, led by Dr. David G. Coughlin, highlights the potential of cerebrospinal fluid (CSF) α-Synuclein Seeding Amplification Assays (αSyn-SAAs) to enhance the diagnostic accuracy of Dementia with Lewy Bodies (DLB). The study, conducted through the DLB Consortium and Parkinson's Disease Biomarker Program, analyzed CSF samples from 191 individuals clinically diagnosed with DLB alongside two control cohorts. Results showed that αSyn-SAA positivity was detected in 72% of DLB participants compared to only 4% in controls. Positive αSyn-SAA results were significantly associated with worse parkinsonism, as measured by the MDS-UPDRS scale, greater cognitive impairment indicated by lower Montreal Cognitive Assessment scores, and a higher likelihood of REM sleep behavior disorder (RBD). Importantly, hyposmia, measured using the University of Pennsylvania Smell Identification Test (UPSIT), emerged as the strongest predictor of αSyn-SAA positivity, with participants scoring below the 15th percentile having 18.3 times higher odds of a positive αSyn-SAA result. The study also demonstrated longitudinal consistency, with 99% of participants showing the same αSyn-SAA result in follow-up samples. These findings suggest that hyposmia and αSyn-SAA testing could significantly improve the diagnostic process for DLB by providing objective biomarkers to complement clinical assessments. This research underscores the growing role of biomarkers in neuroscience and represents a critical step toward earlier and more accurate identification of DLB, paving the way for improved patient care and outcomes.

A multicenter, randomized, double-blind, placebo-controlled ascending dose study to evaluate the safety, tolerability, pharmacokinetics (PK) and pharmacodynamic (PD) effects of Posiphen in subjects with early Alzheimer's Disease

Douglas Galasko[1,✉], Martin R Farlow[2], Brendan P Lucey[3], Lawrence S Honig[4], Donald Elbert[5], Randall Bateman[3], Jeremiah Momper[1], Ronald G Thomas[1], Robert A Rissman[1], Judy Pa[1], Vahan Aslanyan[6], Archana Balasubramanian[1], Tim West[7], Maria Maccecchini[8], Howard H Feldman[1]

Nineteen participants with mild cognitive impairment or mild Alzheimer's disease (AD) participated in this phase 1b clinical trial evaluating the safety, tolerability, and pharmacokinetics of Posiphen, an oral drug targeting amyloid precursor protein (APP) to reduce amyloid beta (Aß) production. Under the leadership of Dr. Galasko, participants underwent 21–23 days of treatment with Posiphen or placebo, followed by advanced biomarker analysis using Stable Isotope Labeling Kinetics (SILK). Posiphen was found to be well-tolerated, with mild adverse effects primarily related to CSF catheterization. Although SILK analysis revealed no significant changes in Aß production, comprehensive modeling suggested dose-dependent reductions in APP production, consistent with Posiphen's proposed mechanism of action. Cognitive measures and CSF biomarkers remained stable throughout the study. These findings highlight Posiphen's safety profile and provide initial insights into its biomarker effects, supporting further investigation in larger-scale trials.

Research Highlights: Publications

2024 Publications from PubMed Search Featuring Faculty and Staff from our Department

Analysis of Evusheld safety and efficacy in multiple sclerosis patients

Emilie N Liu[1], Marcos Real[2], Jennifer H Yang[3], Ashley Fair[2], Natalie Whitmire[2], Allyssa Perez[2], Carolyn Wilder[2], Shauna Rosengren[2], Revere P Kinkel[2], Jennifer S Graves[3]

This recent study conducted at the UCSD MS Center investigated the safety and efficacy of Evusheld (tixagevimab and cilgavimab), a monoclonal antibody combination authorized for COVID-19 pre-exposure prophylaxis, in multiple sclerosis (MS) patients receiving B-cell depleting therapies. Among 79 MS patients offered Evusheld, 61% accepted the injection. In a cohort of 42 participants, 33 received Evusheld, with 30.3% reporting mild side effects such as injection site pain and fatigue. Over six months post study, 21.2% of Evusheld recipients tested positive for COVID-19, compared to 55.6% of those who declined the injection. Evusheld was associated with a reduced risk of infection; however, statistical significance was not achieved due to the small sample size. These findings suggest Evusheld is well-tolerated and may benefit MS patients at high risk of insufficient antibody response. Insights from this study may inform future infection prevention strategies for MS patients on immunomodulatory therapies.

Innovative Framework for N-of-1 Trials in Neurological Genetic Diseases

Olivia Kim-McManus 1,2 , Joseph G. Gleeson 1,2,3, Laurence Mignon3 , Amena Smith Fine4,5, Winston Yan6 , Nicole Nolen 6 , Scott Demarest7 , Elizabeth Berry-Kravis 8 , Richard Finkel 9 , Stefanie Leonard6 , Samuel Finlayson10, Erika Augustine4 , Gholson J. Lyon 11,12, Rebecca Schule13 & Timothy Yu 6,14,15

This recent publication introduces a groundbreaking framework for conducting **N-of-1 clinical trials**, focusing on individualized gene-targeted therapies for patients with ultra-rare genetic disorders. These trials offer a personalized approach to treating complex conditions, including neurodevelopmental and neurodegenerative diseases, by tailoring therapies such as antisense oligonucleotides (ASOs) and gene editing to the patient's unique genetic profile.

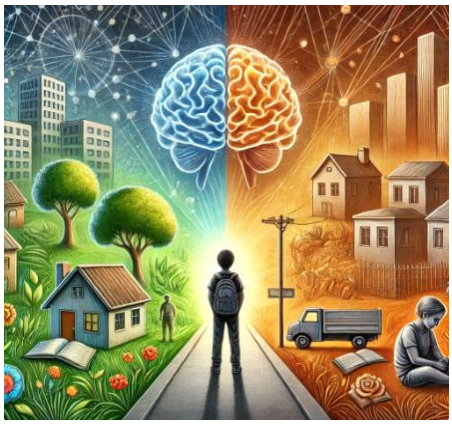
The framework addresses key challenges in designing and executing these trials, including the development of personalized clinical outcome assessments, biomarker utilization, and rigorous safety monitoring. It also highlights the use of innovative tools, such as wearable biometric sensors, to track neurological symptoms and assess therapeutic efficacy.

This approach holds significant promise for advancing personalized medicine in the neurosciences field, paving the way for effective, patient-specific treatments while fostering collaboration among researchers, regulatory agencies, and patient advocacy groups. The framework exemplifies how precision medicine can reshape the future of therapeutic development for rare and complex neurological conditions.

Early Adversity and Socioeconomic Factors in Pediatric Multiple Sclerosis: A Case-Control Study

Sarah K G Jensen[1], Susana Camposano[1], Anne Berens[1], Michael Waltz[1], Lauren B Krupp[1], Leigh Charvet[1], Anita L Belman[1], Gregory S Aaen[1], Leslie A Benson[1], Meghan Candee[1], Theron C Casper[1], Tanuja Chitnis[1], **Jennifer Graves**[1], Yolanda S Wheeler[1], Ilana Kahn[1], Timothy E Lotze[1], Soe S Mar[1], Mary Rensel[1], Moses Rodriguez[1], John W Rose[1], Jennifer P Rubin[1], Jan-Mendelt Tillema[1], Amy T Waldman[1], Bianca Weinstock-Guttman[1], Lisa F Barcellos[1], Emmanuelle Waubant[1], Mark P Gorman[1]; US Network of Pediatric Multiple Sclerosis Centers[1]

A comprehensive study conducted as part of the Environmental and Genetic Risk Factors for Pediatric Multiple Sclerosis Study sheds light on the potential role of socioeconomic adversity in the development of pediatric-onset multiple sclerosis (POMS). Using data collected from 17 sites across the United States, the study included 381 children and adolescents aged 3-21 years diagnosed with POMS or a clinically isolated demyelinating syndrome, and 611 frequency-matched controls. Researchers explored the relationship between socioeconomic factors, psychosocial adversity, and POMS risk, as well as secondary outcomes such as age at onset, relapse rate, and disability progression.



The study found that children from socioeconomically disadvantaged neighborhoods had a higher likelihood of developing POMS, with neighborhood disadvantage scores showing a modest but significant association with POMS risk. Conversely, higher parental education—specifically, having a mother with a bachelor's degree or higher—appeared to be protective, significantly reducing the odds of POMS diagnosis. Interestingly, the study did not find associations between prenatal or postnatal adversities, such as maternal stress during pregnancy or early caregiver separation, and POMS outcomes, nor were these factors linked to disease severity, relapse rate, or disability as measured by the Expanded Disability Status Scale (EDSS).

These findings highlight the importance of socioeconomic factors, particularly neighborhood-level disadvantage and parental education, in shaping pediatric neurological health. While no direct associations were observed between other early-life adversities and POMS, the study underscores the need for further research into how social determinants of health may interact with genetic and environmental risk factors to influence neuroinflammatory diseases like multiple sclerosis. By identifying these relationships, this research opens avenues for targeted interventions aimed at reducing risk in socioeconomically disadvantaged populations, ultimately paving the way for a more equitable approach to neurological healthcare.

Other Highlights:

Milestone REVEAL Study in Rett Syndrome and Abstract Presentation on PSP-Parkinsonism

REVEAL Pediatric Study: Children with Rett Syndrome

Exciting Progress in Rett Syndrome Gene Therapy Research

The Safety and Efficacy Study of TSHA-102 in adolescents and adult females with Rett Syndrome has successfully enrolled twelve participants in this complex trial. The first participant was dosed on November 12th and is doing very well on treatment. To date, she is one of 8 girls given this gene therapy in North America.

Dr. Richard Haas and his dedicated team of coordinators—**Karen Ditslear, Ruth Fernández, and Carolina Ruiz**—completed an extensive set of screening and baseline procedures in just five weeks. These included blood draws, EKGs, EEGs, neurological and physical exams, PSG testing, brain MRIs, DEXA scans, and lumbar punctures performed in collaboration with interventional radiology at Jacobs Hospital.

We extend our sincere gratitude to all the departments involved in this effort, we are especially grateful to Kim McConnell, our inpatient pharmacist, for her role in coordinating dosing and administration. The subject and her family demonstrated incredible resilience and optimism throughout the process, expressing hope that this gene therapy will bring meaningful improvements to her life.

This milestone reflects the outstanding teamwork, dedication, and cross-departmental collaboration that drive our mission forward.

Abstract Presentation

Inclusion of PSP-Parkinsonism Phenotype in Clinical Trials: Power Calculation

Nahid Olfati [1], Saeed Akhlaghi, [2,3] Ali Shoeibi[4] and **Irene Litvan**[1], for the TAUROS Investigators

Researchers from UC San Diego and collaborating institutions conducted a power analysis to support the inclusion of PSP-Parkinsonism (PSP-P), the second most common PSP phenotype, in clinical trials. Using longitudinal data from the TAUROS study, they assessed the progression of PSP-P and calculated sample size requirements for detecting significant reductions in symptom progression. Findings showed that while PSP-P progresses more slowly than the classic PSP-Richardson syndrome, sample sizes of 70, 109, and 193 participants per group would be needed to detect 50%, 40%, and 30% reductions, respectively, in PSP Rating Scale (PSPRS) scores.

This work highlights the importance of tailored sample size estimations to address the unique progression patterns of atypical PSP phenotypes, facilitating their inclusion in future therapeutic trials.

Other Highlights (cont.):

International Collaboration with Smith-Magenis Syndrome Australia Group

Supporting Families with Smith-Magenis Syndrome

Collaborating to Support Families with Smith-Magenis Syndrome

From November 3-16, a dedicated nurse from UCSD's Movement Disorders Center and Pediatric Neurology partnered with the Smith-Magenis Syndrome (SMS) Australia group to support children and families impacted by this rare genetic disorder. This collaborative effort, sponsored by SMS Australia, brought together renowned experts to share knowledge, provide care, and strengthen support systems for the SMS community.

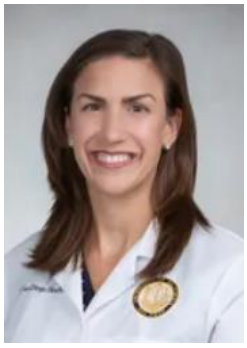
Key contributors included: **Gail Reiner, DNP, FNP-C, UCSD Research Nurse Practitioner,** Ann Smith, co-discoverer of SMS and member of the NHGRI/NIH and Gail Kopp, BSN, RN, a psychiatric nurse with expertise in neurodevelopmental conditions.

The collaboration focused on both deletion and RAI1 mutation cases, offering comprehensive care strategies, counseling, and education tailored to the unique needs of families affected by SMS. By combining expertise in genetics, psychiatry, and family-centered care, the team aimed to improve quality of life and empower families with resources and guidance.

Images reproduced with the explicit consent of the patients/parents in compliance with ethical guidelines and privacy standards.

Clinical Research Studies: Open Clinical Trials

Enrolling, referrals welcome!



Dr. Katherine Longardner has started recruitment for TEV-52286: A multi-centered, double-blind, randomized, placebo-controlled study of TEV-56286 for the treatment of Multiple System Atrophy.

- For more information please contact: Christina Addington at caddington@health.ucsd.edu

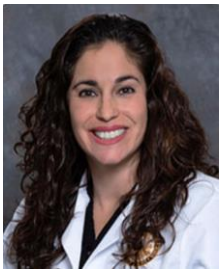
Inclusion Criteria

- Male or female ≥30 years old diagnosed within the past 5 years with clinically possible or clinically probable MSA as determined by the Gilman criteria (Gilman et al 2008).
- Able to ambulate 10 meters without (cane is allowed, walker not allowed).
- Able to swallow 10 capsules whole (willing to do this daily for 48 weeks).

screening period.

Exclusion Criteria

- Has any clinically significant uncontrolled medical or psychiatric condition (treated or untreated). Examples include, but not limited to: severe depression, substance abuse, severe renal or hepatic impairment, malabsorption syndrome, etc.
- Suspected of having a neurodegenerative disease other than MSA.
- Has 2 or more relatives with history of MSA.



Dr. Natalie Guido-Estrada is the Principal Investigator for the **Qudexy XR®** study, a Phase 4, randomized, double-blind of Qudexy XR® in the Prevention of Migraine in Children 6 – 11 years of age.

- For more information please contact: Sophie Zacharek at szacharek@health.ucsd.edu

Inclusion Criteria

- Subjects is female or male 6-11 years of age, inclusive.
- Weight of at least 17.0 kg. and less than 50.0 kg. at screening based on 95 percentile weight for the age range.
- At least 6-months history of headaches consistent with a diagnosis of migraine with or without aura.

Exclusion Criteria

- Continuous migraines, defined as an unrelenting headache for a 28-day period.
- Currently receiving treatment or has used Botulin toxin (Botox®) within 3 months prior to visit 1.
- Currently receiving migraine prevention medication and has initiated or changed the dose within 28 days of screening or is unwilling to avoid making a change duration of study

Updates: ACTRI Pharmacy and Clinic:

Important update from IDS!

Updated Fees

The Investigational Drug Services (IDS) has implemented an updated fee structure for 2025, which will take effect on **January 1, 2025**, for all new studies. This update reflects a 5–6% increase in fees to align with service demands and operational costs.

Please note:

- **Existing studies**: Any studies currently in progress or those for which a budget estimate has already been provided the IDS will continue to be charged under the current fee structure.
- **New studies**: The updated fees will apply to studies initiated on or after January 1, 2025.

For further details, please refer to the updated IDS 2025 Fee Structure document or visit the UCSD ACTRI Research Compass Investigational Drug Service for questions.

Steps for Opening a Research Study at ACTRI La Jolla Main or Rady's

Submit the Clinical Research Services Request Form Service Request Form (select location)

- Concurrently, submit the In-Service Request Form.
- Important Note: Chart strings are not required at the time of the In-Service request. You can still submit the In-Service request even if contracts are pending—just indicate this in the chart string field.

ACTRI Notification for In-Service In-Service Request

- ACTRI will notify study teams if an In-Service is required.
- Reminder: Submitting an In-Service request does not automatically build your study.

Complete the Pre-Build Checklist

- This step is critical. Submit the Pre-Build Checklist to David Marrufo (dmarrufo@health.ucsd.edu), to assist with the study build.
- If this step is not completed, your study has not been built.
- Please do not begin patient recruitment until you confirm the study has been built or is in progress within Clinical Conductor- a clinical trial management system used for organizing, tracking, and managing clinical trial study visits.

For Questions: Bernadette Cale, RN, MSN | (858)-822-1717| bcale@health.ucsd.edu

Rady's ACTRI Satellite: The ACTRI satellite clinic at Rady's Children's Hospital is scheduled for a soft launch starting December 17th and will serve pediatric participants. The UCSD ACTRI clinic in La Jolla remains open to all ages and will serve as the preferred site for handling complex trials, including those requiring infusions.

The process for setting up a study at the Rady's clinic mirrors that of the main La Jolla ACTRI clinic. The system will allow you to designate either or both sites for the same study, with Clinical Conductor configured to differentiate two different types of visits – Rady's or La Jolla Main. All protocols conducted at the Rady's site will be managed by UCSD team members, including PIs, Sub-Is, and coordinators. Investigators will be required to hold UCSD privileges and Pediatric patients seen at Rady's will also need UCSD MRNs.

For questions about utilizing the Rady's clinic or participating in the soft launch, please contact Bernadette

Other News from the ACTRI:

UC San Diego ACTRI Vouchers: Supporting Clinical Research

UC San Diego ACTRI Vouchers: Supporting Neuroscience Research

The UC San Diego Altman Clinical and Translational Research Institute (ACTRI) is pleased to offer **ACTRI Vouchers** to support early-stage projects and federally funded studies in neuroscience and related fields. These vouchers are **not cash awards** but provide in-kind services essential for research development, such as clinic support, biostatistics, bioinformatics, coordination, and lab services. The goal is to enable researchers to gather preliminary data for future grant applications or supplement ongoing federally funded studies.

- **Eligibility:**
  - Unfunded projects aimed at gathering preliminary data for grant submissions.
  - NIH-funded studies requiring supplementary services.
  - ACTRI Pilot Projects, Career Development Awards (K-series, UC San Diego only), and KL2 awardees.
- **Usage:**
  - **Type I**: Supplement NIH-approved funds for clinical services.
  - **Type II**: Expand research to collect new data for renewals or new grant submissions.

Voucher Levels and Categories

Vouchers provide various levels of support, depending on the service, including:

1. **Category B:** Clinical Research Services – Up to $5,000/year.

Eligibility Prioritization

- **First Priority:** Junior faculty (assistant/early associate professors).
- **Second Priority:** Clinicians and scientists transitioning into research.
- **Third Priority:** Trainees (grad students, post-docs) sponsored by eligible faculty.

Application Guidelines

- Applications can be submitted any time during the year.
- Projects requiring IRB/IACUC approval must submit voucher applications alongside their IRB/IACUC proposals.
- Direct patient-contact studies (excluding Pilot Projects and Type I NIH studies) require ACTRI Scientific Review Committee evaluation.
- Only one voucher per investigator is allowed within a 12-month period.

How to Apply: Submit the **ACTRI Voucher Request Form** to request a voucher. For further inquiries, contact the CTRI Finance Team at ctri-fin-recharges@health.ucsd.edu. For more information go to: Funding and Support.

Holiday Fun: Join the Department for an evening filled with joy and camaraderie as we come together to celebrate and close out the year!
December 19 | 5:30-8:30 | MET 141-145 SOM

If you find yourself in need of a little help, the solution to the word search can be found at the end of this issue. Happy sleuthing!

Holiday Neuro-Mystery Word Search

O Q A X J W W N X Q I C H P S G J K D L Y G Y V
F J U F X Z Z D H I P P O C A M P U S T G N Z J
Q B D M N C E I O P G D H R L C L G I T L N A D
X J Y A E K S K B X V M O E G K Z C X R X E D K
W E O P U I R O F W Q Y R N W V I I H X T U M K
P H G M R X D O P A M I N E C T R Z C B H R O M
P A F O O V L S W L N K H J S Y Y T L D V O I U
N L W S G V R T X U Q P G A A D R J C M W T S G
V A F P E O X F X F A U L X F D S Z P U H R G O
Z D M X N Z F J S H H P L F B K N W V L Y A H Z
E G L Q E O T J Q J O K I E R T A U X L S N M Y
A Y E D S L E I H R Z J U A D A J U V E Z S G P
H M X H I K M N U P H N I C O T Y X O B X M C U
S A Q K S W O E B F E G S E E J P C A E D I A U
L M O Z Q W N U O B X D O F K E W F G R G T W E
H P D P L C Q T O I D N L T C I M J E E G T S U
G V W D D V D L B A B Q C T J T W X C C W E A Y
S K Y S M J L S X D U T A B S A F R A E A R H Y
E Z B K Y A R W P Q M K J Y J G H R G G F E T R
H F J R T H B J D I H K N N T G U F C O E J D Y
I N M N Z G V C L I F A Q X Z A F B R N W U T Q
C D O F U B O O I Q P Z Q B V N U O S W J O A X
T R G E S Y F N G S T A Z S Q D D H F V W T E U
F H G I U C A Y E K F O V M B V V H X Q Y I T U

1. The brain's gift of change
2. Connections, like holiday cheer
3. Where memories of holidays are stored
4. The joy of neurotransmitter
5. For holiday decision-making
6. For gracefully hanging ornaments
7. The brain's messaging magic
8. New year, new neurons
9. The bonding hormone, perfect for family gatherings
10. Home of emotions, like holiday stress and joy

Upcoming Conferences:

Stay informed about neurology related conferences and other programs that may be of interest.

American Stroke Association.
A division of the American Heart Association.

International Stroke Conference
February 4-7, 2025
Los Angeles Convention Center
Sign in or Create an Account - American Heart Association

77th Annual Meeting of the American Academy of Neurology
April 5-9, 2025
San Diego, CA and Online
Registration for the 2025 Annual Meeting in San Diego and online will be available in the fall of 2024

INSAR
International Society for Autism Research

International Society for Autism Research
April 30 – May 3, 2025
Seattle Convention Center
e. info@autism-insar.org

International MSA CONGRESS
Presented by MISSION MSA

Mission Multiple System Atrophy
May 9 – May 10, 2025
Hyatt Regency Cambridge, MA
info@missionmsa.org

Conferences (cont.):

Stay informed about neurology related conferences and other programs that may be of interest.

International Parkinson and Movement Disorder Society
May 1-7, 2025
New York City, NY
www.iaprd-world-congress.com

Alzheimer's Association
July 27-31, 2025
Metro Toronto Convention Centre
aaic@alz.org

Amyotrophic lateral sclerosis Association
August 11-14, 2025
The Gaylord Texan Resort and Convention Center
Corporateinfo@als.org

Research Administration Contacts:

Office of the Vice Chair of Human Clinical Research

General Inquiries: irubio@health.ucsd.edu
Tuesdays 9:00 am to 11:00 am - Zoom Meeting Link
Fridays 9:00 am to 11:00 am – in person/4w-217

UCSD Office of IRB Administration (OIA)

General Inquiries: IRB@ucsd.edu | 858-246-4777
Reliance Inquiries: IRBRely@ucsd.edu
Office of IRB Administration – **Office Hours** **https://ucsd.zoom.us/s/97241891068** - December 12, 2024 from 11 am to 12 pm

Office for Human Research Protections (HHS)

OHRP offers this comprehensive training on human research protections based on the requirements of the revised Common Rule (or 2018 Requirements) HHS Human Research Training. A printable completion certificate is available at the conclusion of each lesson.

Key to Holiday Fun:
1. ʎʇᴉɔᴉɟᴉsǝlpoɹnǝu
2. ǝsdǝuʎs
3. sndɯɐɔoddᴉɥ
4. ǝuᴉɯǝdop
5. ǝqol lǝɥonɟ
6. ɯnllǝqǝɹǝɔ
7. ɹǝʇɟᴉɯsuɐʇɹoɹnǝu
8. sᴉsǝuǝgoɹnǝu
9. uᴉɔoʎʇxo
10. ǝlǝpƃɯɐ