

VERBATIM PROCEEDINGS

STEM CELL RESEARCH ADVISORY COMMITTEE  
COMMISSIONER DR. ROBERT GALVIN, CHAIRPERSON  
JULY 20, 2010

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MEETING RE: STEM CELL RESEARCH ADVISORY COMMITTEE  
JULY 20, 2010

1 . . .Verbatim Proceedings of a meeting of  
2 the Stem Cell Research Advisory Committee held on July 20,  
3 2010 at 1:02 p.m. at C.E.R.C., 805 Brook Street, Rocky  
4 Hill, Connecticut. . .

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8 DR. MILTON WALLACK: I think we have a  
9 quorum. Marianne, is that right?

10 MS. MARIANNE HORN: We do have a quorum.

11 DR. WALLACK: So let us begin. This is  
12 Milt Wallack speaking and I'll be temporarily in the Chair  
13 while the Commissioner -- before he arrives from another  
14 meeting.

15 Why don't we go directly to the minutes of  
16 the 7th and 8th. Gerry, I know that you had gone over  
17 them in detail. Is there a motion to accept the minutes as  
18 presented?

19 DR. MYRON GENEL: So moved.

20 DR. WALLACK: Is there a second?

21 DR. GERALD FISHBONE: I'll second.

22 DR. WALLACK: Any discussion on the  
23 approval of the minutes? If none, do I have a motion to  
24 call the question? All those in favor of accepting the

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1 minutes of the grant review meetings say aye.

2 ALL VOICES: Aye.

3 DR. WALLACK: Opposed? Thank you.

4 Unanimously accepted.

5 Marianne, can we get an update on the  
6 Ethics and Law subcommittee? I guess that was in June.

7 MS. HORN: That's correct.

8 DR. WALLACK: It was Steve Latham's last  
9 meeting.

10 MS. HORN: It was. It was a very generous  
11 last act. What happened to Steve? Steve has moved onto  
12 other endeavors, but he's still going to stay on the  
13 committee, but not chairing it and not on the advisory  
14 committee. He's going to stay on the Ethics and Law  
15 subcommittee. He's still at Yale.

16 DR. WALLACK: That's exactly, Ann, why he  
17 had to remove himself his activities at Yale are becoming  
18 more and more.

19 DR. ANN HISKES: Okay.

20 MS. HORN: I turned it up to the max. So  
21 Steve -- one of the agenda items that he put on the last  
22 Ethics and Law subcommittee was to talk about the NIH  
23 registry and the on-going approval of lines populating the  
24 NIH registry, one of which was certain human embryonic

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1 stem cell lines developed at Harvard University. These  
2 were coded as HUES 1 through 28. And they were approved  
3 by the NIH subject to the following restriction. And this  
4 was based on a detailed look back at their informed  
5 consent process.

6 And they said that NIH funded research with  
7 this line is limited to research consistent with the  
8 following language from the informed consent document.  
9 These cells will be used to study the embryonic  
10 development of endoderm with a focus on pancreatic  
11 formation. The long term goal is to create human  
12 pancreatic eyelet's that contain beta cells. The cells  
13 that produce insulin for transplantation into diabetics.

14 So this is a limitation -- hello. Somebody  
15 else joined us?

16 DR. TREENA ARINZEH: Yes, this is Treena  
17 Arinzeh.

18 MS. HORN: Hi, Treena. It's Marianne. I'm  
19 just -- we've just moved onto the -- talking about the  
20 Harvard lines and the restriction that NIH placed on them,  
21 on the registry.

22 So at our meeting it was actually May 21  
23 where the Ethics and Law subcommittee discussed whether  
24 Connecticut should continue to provide funding for

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1       unrestricted research on the HUES lines or other similarly  
2       situated lines and whether it should only fund research  
3       consistent with the NIH informed consent restrictions.  
4       Remember our lines in Connecticut are required to have  
5       informed consent as part of the process.

6                       And there was quite a bit of discussion  
7       going back and forth about the harm to the on-going  
8       research, the evolving norms of informed consent and how  
9       more attention is now being given to the informed consent.  
10      They noted the possible harm to on-going research if the  
11      funding were to be curtailed for currently funded -- for  
12      currently funded research. And they balanced the harm  
13      cause by interrupting on-going research against the  
14      consent related harm of continuing to use the lines in  
15      such research.

16                      It was interesting. They talked about these  
17      lines and the informed consent that was used and that it  
18      was these donors were not necessarily diabetics or related  
19      to people with diabetes. They were just interested in  
20      donating their embryos for research. It was the research  
21      itself that indicated that they would be used for these  
22      purposes. So it wasn't a donor imposed restriction. I  
23      think the Committee felt that that was an important  
24      distinction.

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1                   So the bottom line is that the subcommittee  
2 felt strongly that future research should not be funded if  
3 it uses the HEUS 1 through 28 lines for research that is  
4 not within the scope of the research described in the  
5 informed consent form. However, they did not recommend  
6 that on-going research be curtailed, but that if you're  
7 already using stem cells for research in a manner  
8 inconsistent with the NIH consent that they should work  
9 with their institutional escrows to insure that different  
10 lines are substituted in their research whenever and as  
11 soon as practical. And only in cases where the escrow  
12 agrees that such substitution is impossible without  
13 serious disruption of the on-going research should that  
14 research be permitted to continue without substitution of  
15 properly consented stem cell lines.

16                   So that is the recommendation of the  
17 subcommittee to this committee on the HUES cell lines. If  
18 there is any discussion I'd be happy to talk about that.  
19 And Dr. Dees is on the line. And, Ann, I don't know  
20 whether you were at that meeting or not.

21                   DR. HISKES: I was there by telephone.

22                   MS. HORN: Okay. Any additions, comments?

23                   DR. RICHARD DEES: You summarized it pretty  
24 well.

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1 DR. HISKES: I think that's a good summary.

2 MS. HORN: I guess it will be adopted by  
3 the committee. Dr. Genel.

4 DR. GENEL: The question I would ask, and  
5 maybe Ann can answer this, is there any potential research  
6 that could be impacted by the unavailability of these  
7 lines?

8 DR. HISKES: I know that some of the HUES  
9 lines were preferred for studies of male progenitors.

10 DR. GENEL: -- umm.

11 DR. HISKES: And they were very good at  
12 generating all kinds of irrions. I don't remember off --  
13 I know that some of the HUES lines were going to be  
14 banked, at one point, at the UCONN/Wesleyan core. I'm not  
15 sure whether anybody ever had access to them or not. I  
16 know Storrs' researchers were never allowed to use non NIH  
17 approved lines because we simply didn't have the means for  
18 segregating labs. The Health Center, on the other hand,  
19 did have a means for segregating labs that used non NIH  
20 approved lines. I'm not sure whether Ren-He ever actually  
21 gave any HUES lines out to researchers. I'd have to look  
22 through our records.

23 DR. DEES: I read of one that's using HUES  
24 lines, but it -- it's actually one that would be okay.

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1 They were looking at developing --

2 DR. HISKES: -- diabetes.

3 DR. DEES: Diabetes.

4 DR. HISKES: Right.

5 DR. DEES: So there are some HUES lines out  
6 there.

7 MS. HORN: I have a --

8 DR. HISKES: -- but our researchers were  
9 interested in them, if at all, for their proclivities to -  
10 -

11 DR. DEES: -- that's the kind of research  
12 that apparently these lines are good for. There are other  
13 lines out there that you can do this research with. It's  
14 not --

15 DR. GENEL: -- not quite as good.

16 DR. DEES: It's just a matter of whether  
17 these might have been better in some ways than other kinds  
18 of neural progenitors --

19 DR. GENEL: -- well, part of the reason I'm  
20 asking is that the -- a good deal of the rationale for why  
21 we're here is the unavailability of NIH lines for  
22 research.

23 DR. HISKES: Right.

24 DR. GENEL: And from what -- and I haven't

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1 looked at it carefully, but I -- my sense was that the  
2 ruling on these lines was perhaps a little unduly strict.  
3 But that's perhaps a very superficial analysis. Leaving  
4 that aside though, if, in fact, the rationale for the stem  
5 cell research funding in Connecticut is so that  
6 investigators here can use lines that are not approved for  
7 federal funding I'm not sure, I'm not sure about this.

8 DR. HISKES: I think there is a big, a big  
9 distinction here between the reasons why some of the  
10 federal lines -- some of the existing lines are not  
11 eligible because they're derived from phontogenesis or from  
12 research created embryos, or even the creation of new  
13 lines is not federally fundable. This, however, is based  
14 on the nature of the informed consent process. In  
15 writing, the donors were -- agreed or were promised that  
16 their lines would only be used for diabetes research. And  
17 so I think the sense of the committee was that if informed  
18 consent means anything it has to be honored.

19 DR. GENEL: Yes.

20 DR. HISKES: Y cell, for example, as a  
21 clause which is now being enforced nationally. It was not  
22 enforced nationally until an expose was written by Rob  
23 Shriver. The Y cell lines originally the donors were  
24 promised that their lines would not be put into embryos of

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1 animals to create certain kinds of --

2 DR. GENEL: -- um, hmmm.

3 DR. HISKES: This was not completely  
4 honored. Y cell lines were put into chick embryos, for  
5 example. But with increased sensitivity, particularly in  
6 light of the book about the HeLa cells, the public is  
7 becoming very sensitive to informed consent issues and  
8 that they be honored. And so this is not that the lines  
9 were derived unethically or by processes that the federal  
10 government cannot fund. But it rather has to do with the  
11 integrity of the informed consent process.

12 DR. GENEL: Well no, I understand that. But  
13 what do we mean by diabetes research? Research only  
14 relating to the explicit --

15 DR. WALLACK: -- beta cell regeneration.

16 DR. GENEL: And that's it?

17 DR. WALLACK: So can I comment on that  
18 also?

19 DR. GENEL: Sure.

20 DR. WALLACK: I have a different -- first  
21 of all, I applaud the action of the subcommittee in taking  
22 a stand that allows for the on-going research to continue.  
23 I'm a little surprised that the committee took the stand  
24 that it did relative to future research on these lines.

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1 It's my understanding that the couple or the couple who  
2 donated these embryonic lines did not have in mind any  
3 restrictions at all. All they wanted to do, from the  
4 information that I have and that I've read, is they wanted  
5 to contribute their embryo for research.

6 It so happened that the institution that  
7 they contributed it to was only doing stem cell diabetic  
8 related research and pancreatic research. And therefore  
9 they didn't have a broad enough vision to put in an  
10 unlimited amount of usages. The couple had no intent, at  
11 all, to limit it to those two things. That was something  
12 that happened to have had to be written down in developing  
13 the approach to this.

14 So my feeling about this is that because of  
15 the uniqueness of the lines, and the importance to  
16 research, I would hope that we, in this state, which I  
17 thought we were going to do, would be a little bit more  
18 liberal in our interpretation of this and accept not only  
19 that which is already going on, but that which could go on  
20 in the future on these lines.

21 MS. HORN: Now do you know whether they  
22 attempted to get reconsent for these? Is the couple still  
23 alive?

24 DR. DEES: They were de-identified.

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1 MS. HORN: Oh.

2 DR. WALLACK: You can't identify them.

3 MS. HORN: Oh.

4 DR. WALLACK: So in fact --

5 DR. DEES: -- I actually disagree with that  
6 because I think that we don't -- I mean there is some  
7 stories here about what their intent was, what the  
8 couple's intent was. But we don't know what their intent  
9 was. All we know is what's signed in the document and,  
10 unfortunately or whatever, they agreed to a certain line  
11 of research. And they didn't agree to anything more than  
12 that and that might be an oversight of the people who were  
13 taking the consent, but that's -- I mean I think we have  
14 to stick with what we have a document that says they  
15 consented to and not try to guess what their intentions  
16 were one way or the other.

17 DR. HISKES: And I think this was a point  
18 of consensus of the entire ethics committee.

19 DR. DEES: But I think, I mean -- I think  
20 there was some disagreement about exactly that point. I  
21 think Steve, for example, thought we could be more  
22 generous. But that was --

23 DR. HISKES: -- I don't know I'd have to  
24 read the minutes.

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1 DR. DEES: But that was what we agreed to,  
2 the subcommittee agreed to.

3 DR. GENEL: I think that's probably  
4 difficult to sort out. This is Mike Genel. But I'm not  
5 comfortable with the notion that the research has to be  
6 strictly limited, targeted to diabetes research because I  
7 don't think we necessarily know what research is going to  
8 contribute to a better understanding of diabetes.

9 MS. HORN: No. I think they'd have to look  
10 at what the informed consent says that it may be broader  
11 than that. It could be read broader than that. It doesn't  
12 just say it has to be diabetes research.

13 DR. GENEL: Well, even if it were diabetes  
14 research I don't know how you define what is necessarily  
15 absolutely relevant for diabetes research.

16 DR. DEES: Well, but you'd have to have --  
17 I mean I think in order to take that line you have to have  
18 some rational basis for thinking that it's related to the  
19 kind of research that --

20 DR. GENEL: -- well, I would say any  
21 research.

22 DR. DEES: -- well, anything that we do  
23 here is going to help us understand stem cells and so if  
24 that's related to diabetes research.

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1 DR. GENEL: Yes, that's exactly what I'm  
2 saying.

3 DR. DEES: Well, I think that that's  
4 stretching it way too far.

5 DR. GENEL: Perhaps. But it may be a  
6 stretch, but I don't think it's necessarily irrelevant.

7 DR. DEES: Well, I would say --

8 DR. HISKES: -- we have the language in the  
9 original informed consent document in the proposal from  
10 the committee that these cells will be used to study the  
11 embryonic development of endoderm with a focus on  
12 pancreatic formation.

13 DR. GENEL: Well, I guess that is more  
14 specific.

15 DR. HISKES: The long term goal, let's talk  
16 about long term goals, is to create human pancreatic cells  
17 that contain islet cells, the cells that produce insulin.

18 DR. GENEL: -- okay. All right, Ann.

19 DR. HISKES: The research will have a focus  
20 on pancreatic formation.

21 DR. WALLACK: I would have hoped that we  
22 would have been more general in our acceptance of future  
23 use. I don't know if we would have the ability to overturn  
24 the ruling of the subcommittee at this particular point

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1 nor would the entire committee have the inclination to do  
2 so. So it may be irrelevant at this time to discuss it  
3 further.

4 MS. HORN: Well, I think we could put it  
5 out for a vote. It is a recommendation of the subcommittee  
6 that this become the position of the committee. I think  
7 because Connecticut law does require informed consent and  
8 because we do have this informed consent, and I appreciate  
9 what you say about the actual intent of the couple, but we  
10 don't have anything more that would demonstrate this. And  
11 that we are required to give life to this informed  
12 consent.

13 So I think the committee split the baby.  
14 They did not go back and say we don't want to have any  
15 more of this continuing. They said, you can continue this.  
16 Try to substitute another line, if possible, and if not  
17 then carry on. But going forward we'll just stick within  
18 the parameters of the informed consent. But you can  
19 certainly cast your vote against the recommendation.

20 DR. WALLACK: Let me tell you why I said  
21 that because from the information that I have, and I'm  
22 reading from the text, these couples were sought out by  
23 the researchers who had -- the researchers had diabetes  
24 research in mind.

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1 MS. HORN: Right.

2 DR. WALLACK: They were not donors who came  
3 forward with some special intention to have impact on  
4 diabetes research and who therefore sought to limit the  
5 donors. They did not, therefore, seek to limit the  
6 research that could have been done. Now --

7 DR. DEES: -- but now we're guessing what  
8 their intent was. I mean what's true is that they were  
9 sought out by the researchers and we don't know if their  
10 intention was, oh, we would have done this for anything or  
11 it was, oh, diabetes, well, that would be a good thing to  
12 do, but really only for that. I mean we don't know one way  
13 or the other.

14 MS. HORN: Yes.

15 DR. DEES: And so we'd have to -- I think  
16 we have to stick with what's in that document because we  
17 don't even know which particular embryo ended up being  
18 these cell lines. So we don't know anything about the  
19 particular donor.

20 DR. WALLACK: So -- so you're right, we  
21 don't know, but there is nothing -- there is nothing in  
22 this -- this reminds me of the grandfathering clause of  
23 the Bush lines. And all of that which was problematic  
24 when NIH stepped in to oversee the establishment of which

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1 lines are in the registry. It was, from some of our  
2 perspective, a very narrow perception or approach to this.

3 Thank goodness some of that is now -- is now  
4 grandfathered in.

5 I approach this subject in the same exact  
6 way. And therefore I would hope that since I don't  
7 specifically know, but since I know the process that went  
8 on, only because I'm reading it, that we can be, in our  
9 state, since we are a little bit more generous in how we  
10 approach these things, that would enable to accept it.

11 DR. HISKES: We're not generous in how we  
12 approach informed consent. We're generous in the sources  
13 of the cell lines, in the types of cell lines.

14 DR. GENEL: I would --

15 DR. HISKES: -- we're quite restrictive in  
16 some sense. We don't allow eggs to be bought or sold as  
17 they've been -- they can be in New York for research  
18 purposes.

19 DR. WALLACK: And this couple, by the way,  
20 did give up all rights to any economic claims or gains.

21 MS. HORN: Dr. Genel.

22 DR. GENEL: I would suggest an insertion  
23 into the recommendations purposed by the committee. Under  
24 No. 2, and that would be Line No. 2, 4, 6, in Line No. 6

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1 where it begins, "without serious disruption of the on-  
2 going research" an insertion of the phrase or impairment  
3 of the proposed research.

4 DR. DEES: So basically that's saying -- I  
5 mean what's the import of that? That we're going to allow  
6 people to use these non approved --

7 DR. GENEL: -- well, if it were -- if this  
8 -- the case could be made to the escrow committee that the  
9 proposed -- that the proposed research would be impaired  
10 without use of this specific cell line. I think this would  
11 be acceptable in our case for funding.

12 DR. DEES: And for future funding.

13 DR. GENEL: That's right, for future  
14 funding.

15 DR. WALLACK: I'll second the motion.

16 DR. GENEL: Now, that would also require  
17 some modification of the last line, but essentially what I  
18 would put in there is simply a phrase that would allow the  
19 local escrow committee to make -- I think we would have to  
20 honor the decision of the escrow committee, but at least  
21 it provides a mechanism if the investigators are able to  
22 demonstrate that the research needs these specific lines.

23

24 DR. HISKES: But should that clause go into

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1 Point No. 1. Point No. 1 talks about future funding. Point  
2 No. 2 talks about projects already funded. So it seems  
3 that the impairment or proposed research might go more  
4 consistently in Point No. 1. So any funding from the  
5 Connecticut Stem Cell Research fund for future test  
6 research --

7 DR. GENEL: -- yes.

8 DR. HISKES: Should be limited to research  
9 that is consistent with the NIH consent related  
10 restrictions using these lines unless impairment of the  
11 proposed research can be --

12 DR. GENEL: -- yes, can be demonstrated to  
13 the escrow committee.

14 DR. WALLACK: That's fine.

15 DR. GENEL: Yes, I agree, Ann. I wasn't  
16 looking at that. I guess that -- I guess that is  
17 appropriate, but then I guess then it needs to be repeated  
18 in No. 2 as well to be consistent.

19 DR. DEES: Yes.

20 DR. GENEL: It would have to be repeated.  
21 So we would say any funding from the stem cell research  
22 fund for future reads should be limited to research  
23 consistent using these lines. Well --

24 DR. HISKES: -- No. 2 says, if a PI can

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1 show that not using the HUES lines --

2 DR. GENEL: -- yes, that's related to on-  
3 going research, right.

4 DR. HISKES: Right.

5 DR. GENEL: So No. 1 would have to be  
6 modified.

7 DR. HISKES: Right.

8 DR. GENEL: Yes, well, then I would put  
9 that in under No. 1, consistent with the NIH -- unless it  
10 can --

11 DR. DEES: -- you don't need it in No. 2 at  
12 all.

13 DR. GENEL: No, no, right.

14 DR. HISKES: No. 2 already says that.

15 DR. GENEL: Unless implementation of the  
16 proposed research would be impaired or something to that  
17 effect.

18 MS. HORN: And the fact that the informed  
19 consent -- the informed consent requires it to be used for  
20 a particular research.

21 DR. GENEL: No, no, I'm just saying that in  
22 the -- the essence of this is that funding would be  
23 permitted if the local escrow committee was convinced that  
24 use of this specific line was necessary in order to carry

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1 out the proposed research.

2 MS. HORN: No, I'm just pointing out that  
3 then the research trumps the actual wording of the  
4 informed consent in that model. I'm not sure that that's  
5 what -- I think the subcommittee was concerned about that  
6 happening for future research.

7 DR. DEES: Yes, that's what we were  
8 concerned about. That's why we were saying, okay, well,  
9 we thought it would be bad to say -- to make somebody stop  
10 in midstream.

11 DR. GENEL: Well, yes.

12 DR. DEES: We didn't want to have any more  
13 of these.

14 DR. GENEL: Yes, I understand that. I  
15 understand what you wanted.

16 DR. DEES: Okay. So you're saying the  
17 research should trump the consent.

18 DR. GENEL: I think if it can be  
19 demonstrated to an escrow committee that the research  
20 proposed would be impaired without using the cell line,  
21 yes.

22 DR. HISKES: And this is for all cell  
23 lines? You don't want to violate the Y cell informed  
24 consent because they really, really need to create some

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1 kinds of (indiscernible) that would be okay.

2 MS. HORN: -- yes, I think it really opens  
3 the door and I think legally we have to look at what the  
4 Connecticut law --

5 DR. HISKES: -- you're on a slippery slope.

6 MS. HORN: Says -- I mean this is -- the  
7 Connecticut law uniformly we would look at informed  
8 consent for stem cell lines that were derived. Now, we  
9 actually have the informed consent on these lines, which  
10 we didn't have access to before. And I think it really  
11 speaks very clearly about what the kind of research it's  
12 allowed to do. And for this committee to say, well, we  
13 think that's okay if the research is really necessary to  
14 use a line despite what the informed consent says.

15 DR. WALLACK: So, Marianne, correct me if  
16 I'm wrong, are you saying there is precedent already for  
17 this? I alluded before to the grandfathering in of the 17  
18 Bush lines. There was no way for anybody to go back and  
19 confirm if both partners had given informed consent.

20 MS. HORN: Correct.

21 DR. WALLACK: Which they need to do now.  
22 Yet we created a mechanism where those lines, I don't know  
23 if all of the lines, but a good number of those 17 lines  
24 have now been accepted for research.

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1 MS. HORN: Yes.

2 DR. WALLACK: So I mean why is this any  
3 different?

4 MS. HORN: Because we now have the informed  
5 consent language. On those lines we didn't they were just  
6 -- the rationale there was, heh, we're using them let's  
7 not waste them.

8 DR. WALLACK: But I would argue that  
9 similar to what happened in 2001, whenever it was, that  
10 these two folks had no intent -- I mean somebody said  
11 before we don't know and you're right.

12 DR. DEES: We don't know one way or the  
13 other.

14 DR. WALLACK: We don't know. We don't  
15 know. I agree with that. But I think the way the process  
16 evolved is that it happened to be Doug Milton's lab who  
17 was interested in this type of research wrote it up that  
18 way.

19 MS. HORN: I understand.

20 DR. GENEL: I'm going to withdraw my  
21 motion, but I would ask that this be looked at or perhaps  
22 put on the agenda for future. If you could bring us the  
23 language from the Connecticut law.

24 MS. HORN: Sure.

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1 DR. GENEL: And, you know, what I'm -- what  
2 I'm --

3 MS. HORN: -- I have it right here.

4 DR. GENEL: What I'm looking for is a -- is  
5 a mechanism so or at least a statement that we are not  
6 necessarily bound by the NIH criteria, but I -- I  
7 understand that we have to be very careful in defining the  
8 circumstances, if we can. If we can't, well then I guess  
9 then I'm comfortable living with this. But that's what I'm  
10 -- that's really what I'm looking for and it's not the  
11 sort of thing we can clearly do in a 15-minute discussion.

12  
13 MS. HORN: I agree. We have a very -- very  
14 packed agenda.

15 DR. HISKES: I think there are other cell  
16 lines out there now. People --

17 DR. GENEL: -- yes.

18 DR. HISKES: Have been getting new cell  
19 lines that are good.

20 DR. GENEL: Well, I think that's true which  
21 is why I -- and I think that's how the escrow committee  
22 might come at it if we did. But then I do understand we've  
23 got to be very, very careful about what language we  
24 approve, but I would like to have it put -- kept on the

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1 agenda for future discussion.

2 MS. HORN: We can do that. I think the  
3 escrows will have a sense from this discussion because  
4 remember they're in the middle now of approving 2010 lines  
5 that may have some of these issues coming before them.  
6 And they'll have a sense of what the subcommittee is  
7 thinking about and, perhaps, steer clear of areas that  
8 would be problematic for them. They were, I think, hoping  
9 for some definitive sense today about a recommendation  
10 from the committee, but I appreciate that you can -- I can  
11 write something up and --

12 DR. GENEL: I think probably on an interim  
13 basis we ought to approve the recommendations of the  
14 subcommittee with the caveat that we'd like to reevaluate  
15 these to look for, however you want to phrase it.

16 MS. HORN: Yes, and I can write up what the  
17 informed consent says in the law and the National  
18 Academy's requirements for informed consent because I  
19 think clearly it makes us pay attention to what the  
20 informed consent language is.

21 DR. HISKES: I would like to point out that  
22 in the actual grant proposals I've read over the past four  
23 years, five years, none of them specifically mention what  
24 cell lines they're going to use. That comes at a later

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1 date.

2 MS. HORN: Right.

3 DR. HISKES: They are appealing to their  
4 escrow, and it's basically used, the rationale is what  
5 cells are readily at hand. And so if they have a friend  
6 with certain cells or their core supplies certain cells,  
7 they'll go with those. And I think with the NIH cabash on  
8 the HUES line, there is going to be fewer and fewer people  
9 who are using them. So they won't all be readily  
10 available because Harvard will give them out I think under  
11 very limited circumstances, if at all. Are they still  
12 giving them out?

13 MS. HORN: I can't recall from anything  
14 I've seen this year for this year's grants. But we  
15 certainly would --

16 DR. HISKES: The thing is, it may end up  
17 being a nonissue.

18 MS. HORN: So we can either defer any kind  
19 of vote on the recommendation or we can do a conditional  
20 recommendation based on further information at our next  
21 meeting and then do a full ratification at that time.

22 DR. WALLACK: Well, the conditional  
23 acceptance could mean that we accept the recommendation  
24 that allows for the current research to be going forward.

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1 And for any further use of the lines that will be  
2 dependent upon a reevaluation that we will have after  
3 we've received, Marianne, your summary of where we are  
4 vis-a-vis this issue. I mean is that a fair statement?

5 MS. HORN: I think that's rewriting what we  
6 have in front of us a little bit.

7 DR. PAUL PESCATELLO: Let me say something  
8 directly to the issue, it doesn't set up a black and white  
9 test. I mean the last sentence gives the escrow  
10 discretion --

11 MS. HORN: -- for on-going research, yes.  
12 The question was for new research, they were wanting to  
13 put in a sentence there that would say that you could  
14 still fund new research with using these lines beyond what  
15 the informed consent appeared to allow. So amending No.  
16 1 there in the recommendation.

17 DR. FISHBONE: Could I ask a question?

18 DR. GENEL: Well, all I was asking, saying  
19 was let's approve these recommendations with the caveat  
20 that we would -- with the agreement that we would  
21 reevaluate these of the lines for new proposed research  
22 under the --

23 DR. WALLACK: -- Ann might know the answer  
24 to the question. Are the HUES lines from Harvard being

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1 distributed by the Harvard Stem Cell Institute? Do you  
2 know?

3 DR. ANN KIESSLING: Yes.

4 DR. WALLACK: The 20?

5 DR. KIESSLING: Yes.

6 DR. WALLACK: They are being.

7 DR. KIESSLING: Yes.

8 DR. FISHBONE: For other purposes than what  
9 was in the original informed consent.

10 DR. KIESSLING: Yes.

11 DR. FISHBONE: Yes.

12 DR. KIESSLING: Harvard IRB revisited that  
13 -- the Harvard IRB revisited that issue a number of times  
14 and I don't know have you a copy of the consent form?

15 MS. HORN: We have an excerpt from it in  
16 our recommendation.

17 DR. KIESSLING: There is a paragraph in  
18 that consent form that describes diabetes research. The  
19 consent form, as a whole, describes research. And so the  
20 IRB decided that that paragraph was an example of the type  
21 of research. Now, I think if you look at it to the fine  
22 tooth it would be kind of difficult. It was really, at the  
23 time, a remarkably good consent form. And it had  
24 everything in it the patients knew they were donating

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1 embryos for permanent cell lines. That these cell lines  
2 could be distributed widely. And that, as an example, of  
3 research they were going to look at pancreas development  
4 and endoderm development in Dr. Milton's lab.

5 So I think it's very open to interpretation  
6 and in some ways it was a little unfortunate that the NIH  
7 took such a strict view. But if you are studying those  
8 lines, and I think it's only Lines 1 through 28.

9 MS. HORN: Yes.

10 DR. KIESSLING: 1 through 23. I actually  
11 sit on a Harvard escrow so we just reviewed this the other  
12 day. So it's only lines 1 through 23. And then there are  
13 some other lines that have another -- one other one that  
14 has another issue. But if you are studying stem cells in  
15 general, it isn't difficult to qualify for that even the  
16 diabetes. When I read this report I know I talked with  
17 this committee about it and I think that it was a  
18 practical matter that they thought practically speaking it  
19 didn't make sense to fund research that was not federally  
20 eligible.

21 MS. HORN: That was part of the  
22 determination.

23 DR. KIESSLING: All right.

24 MS. HORN: That it might be limiting the

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1 life of it if --

2 DR. FISHBONE: Did we not do that  
3 initially? I mean from the start we did fund research  
4 that was not NIH eligible.

5 DR. KIESSLING: Right.

6 DR. FISHBONE: And what has changed that  
7 scenario? Is it just that the NIH have come out with  
8 guidelines?

9 MS. HORN: And there is more funding.

10 DR. FISHBONE: Yes.

11 DR. KIESSLING: Well, the NIH allows  
12 funding for those lines. It's just that it has to be for  
13 the research described in that paragraph.

14 DR. FISHBONE: For?

15 DR. DEES: It's important that, you know,  
16 it's not about NIH in general, it's about NIH consent  
17 issues. It's limited to that. But if that's what we're  
18 saying we're going along with the NIH form.

19 MS. HORN: Yes.

20 DR. DEES: It's just that the --

21 DR. KIESSLING: -- so if somebody were  
22 doing diabetes research those lines would be NIH fundable.

23 DR. FISHBONE: Right, but not for anything  
24 else.

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1 DR. KIESSLING: Well, that's how they've  
2 interpreted the consent form, right.

3 MS. HORN: Well, I think in the interest of  
4 time maybe we need to table this until the next meeting.  
5 We're 40 minutes into a very packed agenda. And I think we  
6 need some time to think about it and we can come back.  
7 I'll do some further -- some further language on the  
8 consent in Connecticut.

9 DR. HISKES: Is there anything you would  
10 like the Ethics committee to do or discuss?

11 DR. WALLACK: Well, unless, Ann, you felt  
12 that there was reason because of the conversation that  
13 you, we've been in for the last 40 minutes, there was  
14 reason to reexamine your position on the second part. The  
15 first part, I think, we're all in agreement with going  
16 ahead with the research that's already underway. I don't  
17 know if you feel moved to reopen that discussion on the  
18 second part or not.

19 DR. DEES: I think we covered it pretty  
20 well.

21 DR. HISKES: I think we're pretty committed  
22 to the decision we made.

23 DR. DEES: Yes, I would see there is no  
24 reason to remeet for that.

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1 MS. HORN: Right. Okay, so we'll table  
2 that. Thank you. The only other thing I wanted to mention  
3 on a little legal issue was that the -- there was some  
4 question from a Yale attorney about whether the NIH  
5 approved line would fall within the acceptably derived  
6 standard for Connecticut stem cell lines. And the -- that  
7 was under the NAS guidelines. And the NAS did put out  
8 their final guidelines in 2010 and it makes clear to me  
9 and the Yale attorney agreed that these NIH lines do fall  
10 within the acceptably derived standard for Connecticut  
11 lines. So they could just be deemed to be acceptably  
12 derived. But there was some concern that they didn't meet  
13 all of the language that was in the NAS acceptably derived  
14 standards so they amended it. It looks fine to me. And so  
15 we're going to move on with that issue.

16 CHAIRPERSON COMMISSIONER ROBERT GALVIN:  
17 Item No. 4, 2010 contract updates, Chelsey Sarnecky.

18 MS. CHELSEY SARNECKY: So, as you know, you  
19 all approved the 22 - 24 2010 grants for this round of  
20 funding. Just to give you a quick update where we are  
21 with the contract, Dan and I have sent it over to our  
22 attorney to review the contract to make sure that it's  
23 consistent with the new RFP that we put out this year.  
24 There were some differences in the reporting requirements

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1 and the way the PI's had to report on some things. So we  
2 wanted to make sure that that was consistent in the  
3 contract.

4                   Once that's all set, CI is going to work  
5 with DPH to smooth out the last few issues and then once  
6 that's all set we will show the Advisory Committee the  
7 contract. And then once that's all set we will begin  
8 contracting with the universities for the grants.

9                   CHAIRPERSON GALVIN: Okay, thank you. Any  
10 questions?

11                   MR. WARREN WOLLSCHLAGER: Just in terms of  
12 the time frame then, this committee still has to sign off  
13 on that contract or no?

14                   MS. SARNECKY: In the past --

15                   MR. WOLLSCHLAGER: -- we may not be meeting  
16 for several months.

17                   MS. SARNECKY: In the past I don't believe  
18 that the committee has signed off. I think the committee  
19 signed off on the first contract.

20                   MR. WOLLSCHLAGER: Right.

21                   MS. SARNECKY: But in the past I don't  
22 think the committee has necessarily signed off. We've just  
23 given the committee the contract just so they're aware of  
24 what the contract says.

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1 MS. HORN: I think if there was any major  
2 change that was recommended we'd bring it back for the  
3 committee to sign off.

4 MS. SARNECKY: It's somewhat like the RFP.  
5 We had the major changes in the RFP last year so we  
6 brought it to the committee for approval.

7 MR. WOLLSCHLAGER: Okay, good. Thanks.

8 CHAIRPERSON GALVIN: Any further questions  
9 of Chelsey? If not, we'll move onto Item No. 5 and Mr.  
10 Wollschlager.

11 MR. WOLLSCHLAGER: So we shared a copy of  
12 the 2010 annual report, a draft copy. Thank you to all of  
13 you who pointed out that the committee membership lists  
14 that were attached as Appendix B were actually cut and  
15 pasted from last year. It didn't accurately reflect the  
16 current membership of either committee actually. But with  
17 that exception I am soliciting input from -- or edits or  
18 comments or anything from anybody on this committee. We'd  
19 like to get this report into the General Assembly by the  
20 end of this month, if possible. So I'm looking,  
21 hopefully, to get a vote from this committee to approve  
22 the report with the committee rosters being amended and  
23 then the other comments being included sometime up through  
24 the end of the month.

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1 DR. WALLACK: I'll move the acceptance of  
2 the annual report and give the author the liberty to make  
3 any appropriate edits that's necessary.

4 CHAIRPERSON GALVIN: Do we have a second on  
5 that motion?

6 DR. DEES: Second.

7 CHAIRPERSON GALVIN: Okay. Thank you. And  
8 all in favor -- and once, again, would you read that  
9 through?

10 MS. HORN: Oh, yes. We have a motion to  
11 accept.

12 MR. WOLLSCHLAGER: Motion to accept with  
13 giving DPH authority to make the minor edits necessary.

14 CHAIRPERSON GALVIN: The minor edits  
15 including the committee roster and some other minor  
16 editing effects. That's the motion on the floor. All in  
17 favor?

18 ALL VOICES: Aye.

19 CHAIRPERSON GALVIN: Opposed? The motion is  
20 carried.

21 Okay, No. 6, 2006 annual reports, Ms.  
22 Sarnecky.

23 MS. SARNECKY: So I think the easiest way  
24 to do this is just for me to read off the title of the

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1 grant and then hand it over to the two reviewers. I can  
2 speak to who the reviewers are and at that point if the  
3 reviewers can make a recommendation for the next year of  
4 funding. I think that would be the easiest way to go about  
5 this.

6 CHAIRPERSON GALVIN: Okay. So the reviewers  
7 are going to say yea or nay for a next year of funding.  
8 Is that all it requires or do we have to vote?

9 MS. SARNECKY: I think -- the entire  
10 committee needs to vote.

11 MS. HORN: We do.

12 CHAIRPERSON GALVIN: Individually or on --  
13 if they're all approved by the reviewers, can we vote en  
14 block?

15 MS. HORN: We can vote en block.

16 CHAIRPERSON GALVIN: Perfect, let's go.

17 MS. SARNECKY: Okay. The first one up,  
18 06SCA26, this is a UCONN grant, Dr. Carter. The reviewers  
19 are Mr. Mandelkern and Dr. Kiessling.

20 MS. SARNECKY: Mr. Mandelkern isn't here  
21 today so if Dr. Kiessling --

22 DR. KIESSLING: I didn't review this.

23 MS. SARNECKY: Okay.

24 DR. KIESSLING: I actually didn't get a

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1 reviewers list. So I reviewed most of the grants, but I  
2 didn't review this one.

3 MS. SARNECKY: Okay.

4 DR. KIESSLING: What should I do? If I can  
5 get on line I can look at it.

6 CHAIRPERSON GALVIN: Well, who were the  
7 reviewers, Chelsey?

8 DR. KIESSLING: Myself and Mandelkern.

9 MS. HORN: And Bob is sick.

10 MR. WOLLSCHLAGER: Do we have hard copies  
11 of each of these?

12 MS. HORN: I do have a hard copy.

13 MR. WOLLSCHLAGER: And, Dr. Kiessling,  
14 perhaps we could provide you with a hard copy and as we're  
15 doing other ones you could take a look at it.

16 DR. KIESSLING: Yes.

17 CHAIRPERSON GALVIN: Chelsey, why don't you  
18 read through just these other grants and see if we have  
19 the reviewer here, a reviewer here.

20 MS. SARNECKY: Okay.

21 CHAIRPERSON GALVIN: Unless you know that  
22 information already.

23 MS. SARNECKY: I do.

24 CHAIRPERSON GALVIN: Being the smart young

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1 woman that you are.

2 MS. SARNECKY: Thank you.

3 CHAIRPERSON GALVIN: Do we have reviewers  
4 there for the other --

5 MS. SARNECKY: -- I believe we're all set  
6 for all the rest of them, I believe, for the 2006 I  
7 believe we're all set.

8 CHAIRPERSON GALVIN: Okay. Why don't you  
9 do Nishiyama.

10 MS. SARNECKY: Okay. 06SCB03, Nishiyama,  
11 the reviewers are Arinzeh and Fishbone.

12 DR. ARINZEH: Chelsey, I just sent you an  
13 email and I cc'd Marianne and Warren on it, and actually  
14 it's all my -- it's all my reports with any comments and  
15 approvals because I actually need to get off the phone.  
16 Unfortunately, I have another meeting at 2:00 that I need  
17 to walk to. But this particular -- I can briefly say for  
18 this one I approve of it. I don't know if there is any  
19 comments that I need to make about it. Should I --

20 MS. SARNECKY: -- I do have your email  
21 here. It just came into my phone.

22 DR. ARINZEH: Okay.

23 CHAIRPERSON GALVIN: Okay. Get to your  
24 next meeting.

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1 DR. FISHBONE: I also reviewed it and I  
2 think they're making very good progress and only a one  
3 percent variation in the budget.

4 CHAIRPERSON GALVIN: Okay. Let's go on to  
5 the Carmichael grant.

6 MS. SARNECKY: Okay. 06SCB08, UCONN Health  
7 Center, Carmichael, the reviewers are Hart and Wallack.

8 CHAIRPERSON GALVIN: Dr. Wallack.

9 MR. HART: All you want is a recommend  
10 approval. Is that it?

11 CHAIRPERSON GALVIN: Is that Ron?

12 MR. HART: Yes.

13 CHAIRPERSON GALVIN: And any other comments  
14 you might care to make?

15 MR. HART: Okay.

16 CHAIRPERSON GALVIN: About the grant not  
17 about other topics.

18 MR. HART: On the Carmichael project, it  
19 looks like excellent progress on this and some very good  
20 productivity. I certainly recommend approval.

21 CHAIRPERSON GALVIN: Thank you.

22 DR. WALLACK: Second.

23 CHAIRPERSON GALVIN: Okay. Next is the  
24 Graveley grant.

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1 MS. SARNECKY: Okay. 06SCB09, UCONN Health  
2 Center, Graveley, Dees and Genel.

3 DR. DEES: Yes, I -- this is the one I had  
4 some trouble with. The goals of this grant were kind of  
5 complicated and they ended up having to redo the way they  
6 were thinking about it. But that was really in the first  
7 two years. I mean the third year they've been making some  
8 real progress. But I don't think the report gave me a  
9 clear indication of how they were meeting their specific  
10 goals. They were going on with the general project, but I  
11 would recommend approval.

12 DR. GENEL: Yes.

13 CHAIRPERSON GALVIN: Okay.

14 MS. SARNECKY: The next one is the Wesleyan  
15 grant, Grabel, Pescatello and Goldhamer.

16 DR. PESCATELLO: We didn't get a budget  
17 report. It wasn't included in the -- I mean from what I  
18 see right now I see no budget.

19 MS. SARNECKY: Okay.

20 DR. PESCATELLO: I don't know that one  
21 existed. It wasn't --

22 MS. SARNECKY: -- there was one. I actually  
23 had sent it to Therese.

24 DR. FISHBONE: There was a budget. I mean

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1 I have a 16 percent variance.

2 MR. WOLLSCHLAGER: We have a copy of it.

3 DR. FISHBONE: Do you want the copy of it,  
4 Paul? I got it here.

5 DR. PESCATELLO: Sure.

6 CHAIRPERSON GALVIN: Do you want to go on  
7 while we're doing that?

8 MS. SARNECKY: Yes.

9 CHAIRPERSON GALVIN: Onto B-11.

10 MS. SARNECKY: B-11, UCONN, Latericko,  
11 Fishbone and Pescatello.

12 DR. FISHBONE: One second. Yes, they did a  
13 lot of good things. They had some problems, I think, in  
14 the second year and their milestones for the third year  
15 were adjusted to solve the problems, which they did. And  
16 their budget was a 10 percent variance. So I recommend  
17 approval.

18 MS. SARNECKY: Okay.

19 CHAIRPERSON GALVIN: Okay, let's go on to  
20 the Xu grant that -- 06SCD02.

21 MS. SARNECKY: So this is actually -- if I  
22 should have included this in the notes, but this grant  
23 asks for a no-cost extension until September 30th. So,  
24 this is an annual report, but they will be submitting a

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1 final report after their no-cost extension period. So  
2 they're not essentially asking for more money whereas the  
3 other grants are. So the reviewers here were Dr. Wallack  
4 and Dr. Dees.

5 DR. WALLACK: I would recommend that we  
6 accept the information and continue funding it. It's one  
7 of those that, the core grant, that led to some wonderful  
8 progress. I believe that it's out of this core that the  
9 four stem cell lines originally originated, came from  
10 originally. So I would recommend that we accept it and  
11 continue.

12 DR. DEES: Yes, they're doing great.

13 CHAIRPERSON GALVIN: Okay, next, 06SCE01  
14 Yale/Snyder.

15 MS. SARNECKY: The reviewers were Arinzeh  
16 and Hiskes. I have Dr. Arinzeh's comments here just saying  
17 sufficient progress is being made with a number of  
18 publications per project. She approves.

19 CHAIRPERSON GALVIN: Okay, we're going to  
20 go -- Ann, have you had a chance to review it?

21 DR. HISKES: I have reviewed it and they  
22 are ending up their fourth year. They have a no-cost  
23 extension as well. And it's a four projects and a group  
24 project. Everybody seems to be doing what they're

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1 supposed to be doing. They have achieved a number of  
2 results, have a number of publications that came from the  
3 grant. And so I would approve or rather recommend.

4 CHAIRPERSON GALVIN: Thank you. And now  
5 we're going to go back to -- Paul, have you had a chance  
6 to --

7 DR. PESCATELLO: -- that's fine, I  
8 recommend.

9 CHAIRPERSON GALVIN: Which grant were you  
10 doing?

11 DR. PESCATELLO: The Laura Grabel,  
12 Wesleyan.

13 CHAIRPERSON GALVIN: Okay. And the only  
14 one left is, I believe, the Carter grant.

15 MR. WAGNER: She's reviewing it.

16 CHAIRPERSON GALVIN: Okay, we'll come back.

17

18 MS. SARNECKY: Okay.

19 CHAIRPERSON GALVIN: Chelsey, let's move to  
20 the '06 final reports.

21 MS. SARNECKY: Okay. So I made a mistake in  
22 this agenda item here. The 06SCB14 is actually an annual  
23 report. So we'll have to review that at the meeting that  
24 we'll probably have to have to review some of these other

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1 reports.

2 CHAIRPERSON GALVIN: Okay.

3 MS. SARNECKY: In here. But the 06SCC04,  
4 the Rowe grant, the reviewer -- oh, I'm sorry, these  
5 reports are on line. I put them up on the web for  
6 everyone. If anyone wants to review them they don't need  
7 to be voted on. They're all set, but I think it might be a  
8 good idea for the committee to review and see the progress  
9 of the grants for the past few years.

10 CHAIRPERSON GALVIN: Okay. So noted. Now,  
11 we're going down to -- are you ready to do Item G or do  
12 you need a rest, or a walk around the block, or something?

13 MS. SARNECKY: I could do the next one.

14 CHAIRPERSON GALVIN: Can you handle it?

15 MS. SARNECKY: I think I can.

16 CHAIRPERSON GALVIN: All right.

17 DR. FISHBONE: Can I ask a question about  
18 the Rowe grant?

19 CHAIRPERSON GALVIN: Sure.

20 DR. FISHBONE: They finished their complete  
21 project now. Do we have any idea what's happening to the  
22 members of that project including Dr. Rowe? Did they  
23 submit for other potential --

24 MS. SARNECKY: -- I haven't reviewed their

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1 annual report or their final report so I don't know if  
2 Isolde has any comments on where Dr. Rowe's grant co-PI's  
3 are at this point.

4 DR. ISOLDE BATES: Isolde Bates, UCONN Stem  
5 Cell Institute. Dr. Rowe is going heavily into NIH  
6 funding. He just got a DOD EMR grant which is ready again  
7 for more. Some of his investigators on the project put in  
8 grants, like Dr. Daily. She didn't get funded. Evila  
9 Colacheck didn't get funded. Igela, he does have two stem  
10 cell grants with us, with the state, and they are  
11 pursuing. You know, Dr. Daily was able to get a -- is in  
12 the process of getting a patent. And Dr. Sheehan from  
13 UCONN Storrs also needed a patent.

14 CHAIRPERSON GALVIN: Okay, thank you.

15 DR. BATES: So, yes, they are -- I think  
16 they're doing very well.

17 CHAIRPERSON GALVIN: Thank you.

18 DR. FISHBONE: Dr. Rowe made some  
19 interesting comments about the difficulty of getting some  
20 of the researchers, although this was a combined project  
21 type thing, some of them did not want to get into the  
22 meetings and the sharing of data.

23 DR. BATES: I think what happened is with -  
24 - you know, you have a lot of egos working together.

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1 DR. FISHBONE: Yes.

2 DR. BATES: And there was a -- I mean they  
3 did work together, but I think some of the PI's had  
4 different ideas how the project should come together. I  
5 mean in the end he did pull them together with some  
6 difficulties.

7 DR. FISHBONE: Yes. Okay, thank you.

8 CHAIRPERSON GALVIN: Okay. Thank you.  
9 Chelsey, I think we're at Item No. 8.

10 MS. SARNECKY: Okay. The first no-cost  
11 extension I have here 08SCA UCHC33, Shoottery. He has  
12 requested a no-cost extension till December 31 of 2010.  
13 The original end date was August 31 of this year. He  
14 discusses the different aims that they'll be working on  
15 for the additional four months. And the total unobligated  
16 balance that they have now that they'd like to carry over  
17 to this four month period is about \$36,000. So we would  
18 just need an approval to extend the -- essentially the  
19 length of the grant.

20 MS. HORN: These ones we should vote on  
21 individually since they'll be different requests.

22 MS. SARNECKY: Yes.

23 CHAIRPERSON GALVIN: So you need a vote?

24 MS. HORN: Yes.

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1 DR. HISKES: I will abstain from all these  
2 votes because they're all from UCONN.

3 DR. FISHBONE: But they're just no-cost  
4 extensions.

5 MS. HORN: Right, right. I think you're  
6 okay to vote.

7 DR. FISHBONE: I move approval of the no-  
8 cost extension.

9 CHAIRPERSON GALVIN: Second.

10 MS. HORN: All in favor?

11 ALL VOICES: Aye.

12 MS. HORN: Opposed? Okay.

13 MS. SARNECKY: Okay, the next one we have  
14 08SCA UCHC009, Dr. Lay would like to extend the grant for  
15 an additional six months until February 28 of 2011. The  
16 unobligated balance is about \$22,000. And the researcher  
17 is also requesting a reduction in effort from six person  
18 months to 1.2 person months during this six-month  
19 extension. That's it. There were no reviewers. These  
20 are just --

21 DR. FISHBONE: -- I move acceptance.

22 CHAIRPERSON GALVIN: Second. All in favor?

23 ALL VOICES: Aye.

24 CHAIRPERSON GALVIN: Opposed? Go ahead,

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1 next. The Carter grant?

2 MS. SARNECKY: Yes, Dr. Carter from UCONN,  
3 08SCA UCONN 40, he wishes to request a no-cost extension  
4 of about 38,000 dollars. The original expiration date is  
5 September of this year and he'd like to extend it till  
6 July of 2011. He goes into some detail about why he  
7 wishes to extend for this additional ten months. And  
8 explains the different research that he's going to be  
9 doing during that time.

10 CHAIRPERSON GALVIN: Do we have to approve  
11 his annual report first?

12 MS. HORN: A different grant.

13 CHAIRPERSON GALVIN: A different grant.

14 MS. SARNECKY: Yes.

15 CHAIRPERSON GALVIN: Okay.

16 MS. HORN: Yes.

17 CHAIRPERSON GALVIN: So this is -- we need  
18 a vote to approve -- and the extension is when? September  
19 until --

20 MS. SARNECKY: -- July of 2011, so it's  
21 about ten months.

22 CHAIRPERSON GALVIN: Ten months. And the  
23 dollar amount, again, Chelsey, I'm sorry. I thought you  
24 said --

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1 MS. SARNECKY: -- no, that's okay. About  
2 38,000 dollars.

3 CHAIRPERSON GALVIN: 38,000 dollars. Okay.  
4 Can I have a motion to accept this?

5 DR. FISHBONE: So moved.

6 DR. WALLACK: Second.

7 CHAIRPERSON GALVIN: A second from Dr.  
8 Wallack. All in favor?

9 ALL VOICES: Aye.

10 CHAIRPERSON GALVIN: Opposed? It passes  
11 and next Igela, okay.

12 MS. SARNECKY: Okay. Dr. Igela wants to  
13 extend the flow systromity core currently ending on August  
14 31 for an additional six months which would end February  
15 28 of 2011. The remaining estimated balance is about  
16 87,000 dollars. He notes in here that they had difficulty  
17 finding qualified personnel for this grant, which I think  
18 is something that the committee had known about through  
19 other communication with the PI. And that's it.

20 CHAIRPERSON GALVIN: Okay. Motion?

21 DR. FISHBONE: Approve.

22 DR. WALLACK: Second.

23 CHAIRPERSON GALVIN: All in favor?

24 ALL VOICES: Aye.

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1 CHAIRPERSON GALVIN: Approved. Now, we're  
2 down to Item No. 9.

3 DR. FISHBONE: Can I ask a question about  
4 these no-cost extensions? If we don't approve them, which  
5 we have approved, what happens to the remaining 87,000?

6 CHAIRPERSON GALVIN: Take it back?

7 MS. HORN: They would have to come back to  
8 CI, to the state.

9 CHAIRPERSON GALVIN: Okay. We're going to  
10 start Item No. 9 now. Item No. 8 is complete and voted  
11 on. Item No. 7 doesn't need a vote and we can vote on Item  
12 No. 6 when Ann Kiessling is ready to give us a run down on  
13 that particular grant.

14 MS. SARNECKY: Are you ready to do that?

15 DR. KIESSLING: Yes, I can do that.

16 CHAIRPERSON GALVIN: Okay.

17 DR. KIESSLING: This is -- the bottom line  
18 is that this grant, this should be approved and gone. This  
19 group has done really well. This is their first grant and,  
20 obviously, they're asking for a no-cost extension for a  
21 second grant.

22 CHAIRPERSON GALVIN: Um, hmm.

23 DR. KIESSLING: But according to their  
24 progress report and the publications they listed they're

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1 fine. So the -- I move that we approve to continue  
2 funding for the Carter grant, which is CA26.

3 CHAIRPERSON GALVIN: Okay. Can we vote that  
4 entire slate?

5 MS. HORN: Again, Chelsey, did you just say  
6 something about a no-cost extension for Xu that was all  
7 done, the second to the last one that was approved?

8 MS. SARNECKY: Oh, yes.

9 MS. HORN: Yes, okay. So we can just vote  
10 these as a slate.

11 MS. SARNECKY: Yes.

12 CHAIRPERSON GALVIN: We're going to vote  
13 that the slate of all those items under -- where it says  
14 six -- 2006 annual reports, there is eight I believe.  
15 Okay? And can I have a motion to accept that entire slate  
16 as approved?

17 DR. WALLACK: So moved.

18 CHAIRPERSON GALVIN: And a second?

19 DR. FISHBONE: Second.

20 CHAIRPERSON GALVIN: All in favor? We're  
21 voting on Item No. 6 to accept all those annual reports.  
22 All in favor?

23 ALL VOICES: Aye.

24 CHAIRPERSON GALVIN: Opposed? Okay, it is

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1 carried. So we have done six, seven, and eight, and we're  
2 working on nine.

3 MR. WOLLSCHLAGER: Just for the record, on  
4 No. 7 though we still have Kraus on the bulletin board  
5 that is needing review because that was the one, Chelsey,  
6 that you said actually was an annual report.

7 MS. SARNECKY: It's the one right below it  
8 actually.

9 MS. HORN: It's Xu.

10 MR. WOLLSCHLAGER: Oh, Xu, okay.

11 CHAIRPERSON GALVIN: Okay. So we did not  
12 vote on Item No. 7.

13 MR. WOLLSCHLAGER: Right.

14 CHAIRPERSON GALVIN: So --

15 MS. HORN: -- 7-3.

16 CHAIRPERSON GALVIN: Yes. We've completed  
17 our agenda. Now, are we going to take the other one? Rowe  
18 and Kraus -- or do we have to go back to those?

19 MS. SARNECKY: Those are --

20 MS. HORN: -- those are --

21 MS. SARNECKY: -- they're all set.

22 CHAIRPERSON GALVIN: Okay. So No. 9 --

23 DR. WALLACK: -- can I ask you a question  
24 on No. 7?

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1 CHAIRPERSON GALVIN: yes.

2 DR. WALLACK: So, Rowe is completed. And  
3 the original intent of that research was to regenerate  
4 bone, specifically to regenerate limbs if I'm not  
5 mistaken. And with specific reference, I remember, in the  
6 original discussion there was reference to Iraqi war  
7 veterans and so forth. I don't think I'm making that up.  
8 So my -- but my serious question is, so he's finished with  
9 his research supposedly. In June we saw some off shoots  
10 of that research where people wanted on an individual  
11 basis to pick up certain elements of it. Dr. Rowe is the  
12 moving force behind this whole initiative and the group  
13 grant. Where are we now vis-a-vis Dr. Rowe and the on-  
14 going research that will emanate out of this because if  
15 not, as I sit here, I have a little bit of a concern. I  
16 think we gave him, if I remember correctly, 3.1 million or  
17 3.2 million dollars.

18 DR. FISHBONE: He gave us the answer while  
19 you were out of the room.

20 DR. WALLACK: I'm sorry, I shouldn't have  
21 left the room.

22 DR. FISHBONE: Could you repeat the --  
23 could you repeat what's happening with Dr. Rowe?

24 DR. BATES: Dr. Rowe is going heavily into

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1 federal funding. He got a DOD grant.

2 DR. WALLACK: What kind of funding?

3 DR. BATES: Federal, federal funding. He  
4 got a DOD grant. He also is into NIH. He is doing a co-  
5 investigators from some of the projects, tried to apply  
6 for additional stem cell funding with no luck. But I know  
7 some of them also got federal money. I don't -- I can't  
8 remember the name of -- but actually Dr. Acrila just got  
9 one -- got a challenge grant. And Dr. Daily and Dr.  
10 Sheehan both ended up with patents and going -- going  
11 forward trying to get federal NIH or other federal agency  
12 money.

13 DR. WALLACK: So, do you have any idea at  
14 all about the level of money, grant money that Dr. Rowe is  
15 receiving from NIH or --

16 DR. BATES: -- I don't right now, but I can  
17 find out what his funding is like. That's not a big --

18 CHAIRPERSON GALVIN: -- he got a lot from  
19 the Department of Defense.

20 DR. BATES: I know the Department of  
21 Defense was an earmark. I don't know the amount of money,  
22 but I'm sure -- but I can -- I mean if you need to I'd be  
23 happy to find out.

24 DR. WALLACK: If it's not too much trouble.

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1 DR. BATES: No, it's not too much trouble.  
2 I can get back to you.

3 DR. WALLACK: Because that would reaffirm  
4 what we initially set out to do and it would be, from my  
5 own personal perspective, a confirmative statement about  
6 what we can accomplish here.

7 DR. BATES: Okay, I will get you the names  
8 of his grants and the amounts associated with it. Okay?

9 CHAIRPERSON GALVIN: Okay, thank you.

10 DR. HISKES: Can I add something?

11 CHAIRPERSON GALVIN: Sure.

12 DR. HISKES: It seems to me that there is a  
13 real need in terms of PR and otherwise that we know and be  
14 able to present what the off shoots of this grant program  
15 have been. So, Rowe is certainly a major PI here from the  
16 very beginning with a humongous group grant and it would  
17 be great to know what the fruits of that funding have  
18 been. But I think it's true for all the others as well,  
19 you know, for Krause and for these other 2006 projects  
20 that are ending up.

21 DR. WALLACK: So in that regard, if I  
22 might, there -- and I really endorse exactly what Ann said  
23 and I think that we, as a group, ought to accept the  
24 challenge of getting that information out.

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1                   In that same regard, I'd like to, if I can,  
2                   announce to this group that Dr. Haifan Lin was just  
3                   awarded a very prestigious award. Paula, you can maybe  
4                   elaborate on the name of it. My understanding it's called  
5                   the -- it comes from NIH. It's called the Pioneer award.  
6                   It's given to approximately five or six researchers a year  
7                   and in Dr. Haifan Lin's case it was accompanied by a 2.5  
8                   million dollar grant for research. His institution, from  
9                   what I understand, was awarded a 1.7 million dollar grant  
10                  for indirect funding, indirect funds. And I may have this  
11                  slightly off, but the main thrust of it, as I think that  
12                  you can see is one of the highest awards that NIH can  
13                  bestow upon a researcher. And certainly from a monetary  
14                  standpoint similar -- a similar statement can be made.

15                  This would not have occurred, this is Dr.  
16                  Linn speaking, if it were not for our state initiative.  
17                  And for the things that we were able to provide Yale and  
18                  Dr. Linn to get to the point where NIH can recognize him  
19                  in this manner.

20                  Am I close to being accurate on this,  
21                  Paula?

22                  A VOICE: Right on.

23                  CHAIRPERSON GALVIN: Well, Warren, I think  
24                  what we need to do is maybe prepare a report for the

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1 membership of the committee and interested others about  
2 these three grants, and what's happened, and how the money  
3 has been used with a little stuff to make the State of  
4 Connecticut and the administration look good.

5 MR. WOLLSCHLAGER: We'll reach out to the -  
6 - to Dr. Linn and to Dr. Rowe and others.

7 CHAIRPERSON GALVIN: Well, their  
8 institutions can probably give you enough background. So  
9 we can crow a little bit about without us it wouldn't have  
10 happened.

11 MR. WOLLSCHLAGER: Okay.

12 DR. PESCATELLO: That would be great.

13 DR. KIESSLING: Do you know what institute  
14 that came from?

15 DR. WALLACK: NIH.

16 DR. KIESSLING: But which institute?

17 DR. WALLACK: I asked him more specifics on  
18 it and I don't want to draw the parallel too closely, but  
19 he said, Milt, it's like the Nobel prize. We didn't get --  
20 I think we got it on a phone call.

21 DR. KIESSLING: That was great.

22 DR. WALLACK: But I was pretty impressed  
23 and I'm pretty happy for all of us that we were able to be  
24 a part of what he's gotten to.

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1 CHAIRPERSON GALVIN: In this business when  
2 the sun shines it shines on everybody. When it rains it  
3 rains on the committee.

4 DR. PESCATELLO: On the new contract that's  
5 something actually you might want to add to the next  
6 contract going out some provision that they agree to make  
7 -- to comply with reasonable requests for information even  
8 after the grant is over for some period of time.

9 CHAIRPERSON GALVIN: That's a good idea.  
10 Chelsey, are you ready to continue with Item No. 9.

11 MS. SARNECKY: I am. I actually wanted to  
12 know is there anyway we could go back to No. 6. Dr.  
13 Kiessling actually has reviewed --

14 DR. KIESSLING: -- no, it's B-14 I  
15 reviewed.

16 MS. SARNECKY: Yes, B-14.

17 DR. KIESSLING: Okay.

18 MS. SARNECKY: That one grant that we were  
19 planning on doing.

20 MS. HORN: No. 7, B-14.

21 MS. SARNECKY: Yes, B-14, if we could go  
22 back to that quickly that would be good.

23 CHAIRPERSON GALVIN: Okay.

24 DR. KIESSLING: This is the final report

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1 for this grant, right, as I understand it.

2 MS. SARNECKY: This is an annual.

3 DR. KIESSLING: So he's got one more year.  
4 Okay. So this is from Ren-He Xu's group. This is his own  
5 grant as opposed to the core grant that he runs. And this  
6 has been -- this group is remarkably productive. So I  
7 really recommend that we accept this and support them for  
8 at least another -- I think they have one more year of  
9 support. They have published in three years six articles  
10 and they have one in press.

11 CHAIRPERSON GALVIN: Terrific.

12 DR. KIESSLING: So, yes, this is a very  
13 productive group.

14 DR. GENEL: I think that's the same as  
15 their annual report that we're going to review under No.  
16 9.

17 DR. KIESSLING: Maybe.

18 CHAIRPERSON GALVIN: It's the same grant,  
19 Mike?

20 DR. WALLACK: Well, no, the one under No. 9  
21 is a new -- is a new grant, but it's a continuation of the  
22 same stem cell report. It just happens to be the grant  
23 year. It's a new grant because the old grant ran out.

24 CHAIRPERSON GALVIN: Got it. Does that

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1 finish us up with Item No. 6?

2 MS. SARNECKY: Yes.

3 CHAIRPERSON GALVIN: And the item that was  
4 underneath Dr. Krause's grant is finished as well.

5 MS. SARNECKY: Um, hmm.

6 MS. HORN: So we just need a vote on that.

7 CHAIRPERSON GALVIN: On the block.

8 MS. HORN: On Xu, no, just on the one.

9 CHAIRPERSON GALVIN: Okay. So a motion?

10 DR. KIESSLING: So I'll move.

11 DR. WALLACK: I'll second that.

12 CHAIRPERSON GALVIN: All in favor?

13 ALL VOICES: Aye.

14 CHAIRPERSON GALVIN: Opposed? It is passed.

15 Now, we'll move down to No. 9. Now, I see  
16 on the second page a lot of, at least in my copy,  
17 notations, ink notations on stuff.

18 MS. HORN: That was me last night trying to  
19 print all these things out and having a little difficulty  
20 with the printer. So, they're not significant.

21 CHAIRPERSON GALVIN: Okay.

22 MS. HORN: I'm sorry, I didn't give you a  
23 clean copy.

24 CHAIRPERSON GALVIN: Oh, okay. So, all

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1 right. I see part missing.

2 MS. HORN: Part missing, right.

3 CHAIRPERSON GALVIN: Go ahead.

4 MS. SARNECKY: The first one we have here  
5 09SCA UCONN 02, Dr. Wang, was reviewed by Dr. Arinzeh and  
6 Mr. Mandelkern. I do have Dr. Arinzeh's comments here.  
7 But, Marianne, I don't know if I -- if I could just read  
8 those into the record and then --

9 MS. HORN: -- yes, please.

10 MS. SARNECKY: That would be her  
11 recommendation. Sufficient progress is being made based  
12 on preliminary data and findings to date, but no  
13 publications reported for their first year of funding.  
14 The budget looks fine with appropriate justification for  
15 adjusting post doc salary. She would recommend approval.

16 MS. HORN: So, again, we want to do these  
17 as individual.

18 CHAIRPERSON GALVIN: As a block.

19 MS. HORN: As a block, okay. So this is  
20 approved by the reviewer.

21 MS. SARNECKY: Yes.

22 MS. HORN: Okay.

23 MS. SARNECKY: The next one 09 SCA Yale 10,  
24 Dr. Kwang, Dr. Dees and Dr. Hart reviewed this one.

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1 CHAIRPERSON GALVIN: Are you out there,  
2 Ron?

3 MR. HART: Yes, I am. I'm sorry, I lost my  
4 place. Which one are we on?

5 CHAIRPERSON GALVIN: You can't lose your  
6 place in this business. That's one of the big no, no's.  
7 This is 09 SCA Yale 10.

8 MR. HART: All right. Yang.

9 MS. HORN: Yes.

10 MR. HART: Looked fine to me. I mean there  
11 was no real major issues here. It was not a huge  
12 productivity, but, again, it was good progress.

13 DR. DEES: They're making good progress.

14 CHAIRPERSON GALVIN: Good.

15 DR. DEES: Budget is pretty good, you know,  
16 two and a half percent.

17 CHAIRPERSON GALVIN: All right, that's  
18 fine. Move to accept it. A motion to accept this?

19 MS. HORN: We'll do --

20 CHAIRPERSON GALVIN: -- oh, we're going to  
21 do them all, sorry. Why don't we do them all down this  
22 side, this bunch and then we'll go do the bunch on the far  
23 side next.

24 MS. HORN: Sure.

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1 CHAIRPERSON GALVIN: So we're going to do  
2 Yale 11 -- 09SCA Yale 11, Dr. Massaro.

3 MS. SARNECKY: These were reviewed by Dr.  
4 Goldhamer and Dr. Hiskes.

5 DR. HISKES: Right.

6 MS. SARNECKY: Dr. Hiskes, do you have a  
7 comment?

8 DR. HISKES: Is David there?

9 MS. HORN: David is not here, no. You're  
10 on your own.

11 DR. HISKES: Okay. So this is a first year  
12 of a two year grant. And she obtained the samples she  
13 needed, optimized the method to recapitulate embryonic  
14 development of the appropriate cells, has been doing a lot  
15 of fact sorting of various types. And has one publication  
16 from her first year and one in print. And so I think  
17 that's pretty good for a single year. Budget is very  
18 modest. She had a cost adjustment on her own salary, which  
19 was under budget. Didn't do any traveling. She had a  
20 minute budget of 2500 for supplies and she only spent  
21 about 395 of that. And so that's an 89 percent under  
22 spending. And the numbers are so small I don't think it  
23 matters. So I would recommend continuation.

24 MS. HORN: Okay.

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1 CHAIRPERSON GALVIN: Motion?

2 MR. WOLLSCHLAGER: No.

3 CHAIRPERSON GALVIN: I'm sorry.

4 MR. WOLLSCHLAGER: You did it again.

5 CHAIRPERSON GALVIN: See, I just yelled at  
6 Ron for losing his place and I lost mine. So both of us  
7 will be absent at the next meeting.

8 MS. SARNECKY: The next grant Yale 12, Dr.  
9 Rowland, reviewed by, I think, Dr. Dees actually offered  
10 to review this this morning.

11 DR. DEES: Yes, I did.

12 CHAIRPERSON GALVIN: Okay. Would you care  
13 to comment, sir?

14 DR. DEES: Let's see, yes, they're making  
15 pretty good progress. They have -- they're looking at a  
16 couple of different pathways, control pathways and they  
17 were having trouble with one of the two pathways that they  
18 were looking at, but they were looking at an alternative  
19 and making really good progress on the other one. So, I  
20 recommend going forward.

21 CHAIRPERSON GALVIN: Okay. And we'll do  
22 this one, Dr. Antic, and then we'll vote on this five and  
23 then flip over.

24 MS. SARNECKY: Okay. The next one, Dr.

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1 Antic, reviewed by Kiessling and Pescatello.

2 DR. KIESSLING: I'd like to read the first  
3 sentence of this report. "My seed grant had a lucky and  
4 successful start." And this investigator goes on to the  
5 next paragraph to say how lucky everything happened, her  
6 department gave her -- I don't know if it's a her or a he.

7 MS. SARNECKY: He.

8 DR. KIESSLING: Gave him space. Anyway  
9 they're actually making remarkable progress for a seed  
10 grant. So I recommend.

11 CHAIRPERSON GALVIN: Good.

12 DR. PESCATELLO: I agree.

13 CHAIRPERSON GALVIN: Good. Okay, we're  
14 going to take a vote now on the five items underneath No.  
15 9 on the front side of the paper. May I have a motion to  
16 accept those as a block?

17 DR. DEES: I so move.

18 CHAIRPERSON GALVIN: Okay. And a second?

19 DR. PESCATELLO: Second.

20 CHAIRPERSON GALVIN: Paul, okay? All in  
21 favor of accepting the five motions under 2009 annual  
22 report approvals, Item No. 9, indicate by saying aye.

23 ALL VOICES: Aye.

24 CHAIRPERSON GALVIN: Motion has carried.

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1 And now we're on the second sheet of paper beginning with  
2 Dr. Chamberlain's grant, which will now be discussed by  
3 the charming Chelsey Sarnecky.

4 MS. SARNECKY: You're going to make me  
5 blush. Dr. Kiessling and Dr. Pescatello again.

6 DR. KIESSLING: I recommend we renew this.  
7 This is a post doc who is actually quite productive and  
8 she's working on an interesting neuro stem cell line. So  
9 they're doing fine.

10 DR. PESCATELLO: Good progress, yes.

11 DR. KIESSLING: She's plugging along.

12 CHAIRPERSON GALVIN: Okay. And how about  
13 doing Dr. Chang's, C16.

14 MS. SARNECKY: Dr. Kiessling reviewed this  
15 one and Dr. Hart.

16 CHAIRPERSON GALVIN: We're working you  
17 pretty hard, Dr. Kiessling.

18 DR. KIESSLING: Well, I really --

19 CHAIRPERSON GALVIN: -- there will be a  
20 little something extra in your pay.

21 DR. KIESSLING: I'm going to get a raise.

22 CHAIRPERSON GALVIN: No, I'm thinking about  
23 your year end bonus as well.

24 DR. KIESSLING: This is also -- I mean do

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1 you -- Ron, do you want to do this one?

2 MR. HART: I can. It's actually very  
3 closely related to --

4 DR. KIESSLING: -- Hi, Ron.

5 MR. HART: The earlier Carmichael grant, it  
6 looks like a post doc fellowship.

7 DR. KIESSLING: Yes.

8 MR. HART: And just like with the  
9 Carmichael grant it's very nice progress. Nice  
10 publication, very nice model, it looks great.

11 CHAIRPERSON GALVIN: Good. Let's go down  
12 to Yale 30 Valerie Horsley.

13 MS. SARNECKY: Dr. Wallack, do you want to  
14 take this one?

15 DR. WALLACK: I think they're making good  
16 progress, a good researcher, and I recommend that we  
17 continue moving forward with this.

18 CHAIRPERSON GALVIN: The second reviewer  
19 is, who is the second?

20 MS. SARNECKY: Dr. Goldhamer.

21 CHAIRPERSON GALVIN: Okay. He's not  
22 available. We can down to C34, Dr. Shumaker.

23 MS. SARNECKY: Dr. Fishbone and Dr. Dees.

24 DR. FISHBONE: Well, they seem to be making

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1 fair progress in their research. There was one problem  
2 with the budget and the time available to her, which I  
3 didn't quite understand. And that is that they have a lot  
4 of unobligated funds due to the PI delaying her effort in  
5 order to assist and finalizing her mentor's project before  
6 effort was changed onto her stem cell award. So in other  
7 words, she lost several months, is that sort of a routine  
8 kind of thing? I don't know.

9 CHAIRPERSON GALVIN: I don't know about  
10 that. Who is the other reviewer? Dr. Dees?

11 DR. DEES: Yes.

12 CHAIRPERSON GALVIN: What do you think?

13 DR. DEES: Well, it seemed okay to me. I  
14 mean there were some delay in getting started, but then  
15 they're kind of -- might otherwise be, they seem to be  
16 doing all right was my take on it.

17 CHAIRPERSON GALVIN: Okay. That's good  
18 enough for me.

19 DR. GENEL: May I ask because I think there  
20 is something systematic that we're seeing here. When did  
21 these grants contracts get awarded, Chelsey?

22 MS. SARNECKY: Um --

23 DR. GENEL: Because almost all of the ones  
24 that I saw had a -- under spent by about three months. Was

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1 there about a three month delay in getting --

2 CHAIRPERSON GALVIN: -- easily. Closer to  
3 five.

4 MS. SARNECKY: The contracts started in  
5 June of last year and I want to say September they got the  
6 funding to the universities.

7 DR. GENEL: Okay. So what we're seeing is  
8 a pretty consistent pattern, which reflects that.

9 MS. HORN: Right.

10 CHAIRPERSON GALVIN: We had a lot of  
11 slippage unfortunately.

12 DR. FISHBONE: Yes. Did we correct that  
13 this year by the time frame of getting annual reports and  
14 so forth?

15 MS. SARNECKY: I think we improved.

16 MR. WAGNER: We had annual reports due at  
17 month 10 so we have a two month window.

18 CHAIRPERSON GALVIN: But it's not the fault  
19 of these good people.

20 DR. GENEL: No, no, no. I understand it.  
21 But I mean consistently there is about a three month --

22 CHAIRPERSON GALVIN: -- it takes --

23 DR. GENEL: -- 25 percent --

24 CHAIRPERSON GALVIN: -- if you get a late

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1 start it takes a long time for the system to spool up, as  
2 we say.

3 DR. GENEL: Well, that's it. Yes.

4 CHAIRPERSON GALVIN: Okay. Yale 35, Dr.  
5 Harold.

6 MS. SARNECKY: Dr. Harold reviewed by  
7 Pescatello and Dees.

8 DR. PESCATELLO: Yes, this is the project  
9 to produce insulin cells. They had a delay getting the  
10 lines from Harvard, but I think making very good progress.

11  
12 DR. DEES: Yes, this is the lines you were  
13 talking about.

14 CHAIRPERSON GALVIN: Yes.

15 DR. DEES: It would have been approved by  
16 the NIH. But, yes, they're doing very fine.

17 CHAIRPERSON GALVIN: Good. Yale 39, Dr.  
18 Li.

19 MS. SARNECKY: Dr. Li reviewed by Dr.  
20 Wallack and Dr. Dees.

21 DR. WALLACK: Richard, do you want to go?

22 DR. DEES: I can as soon as I can get my  
23 notes.

24 DR. WALLACK: While you're looking for

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1 that, I read it just today and it seemed -- everything  
2 seemed in order as I read it. I would recommend that we  
3 continue it. Richard, if you have anything else.

4 DR. DEES: I don't have anything to add.  
5 They're making good progress.

6 CHAIRPERSON GALVIN: Okay. Yale 45, Dr.  
7 Garcia Castro.

8 MS. SARNECKY: Reviewed by Dr. Hiskes.

9 DR. HISKES: Okay. So this, again, is a  
10 second year of a seed grant. He has published what he  
11 claims is a complete and the most comprehensive analysis  
12 of human neuro -- development to date. So that's great  
13 self promotion.

14 CHAIRPERSON GALVIN: Yes.

15 DR. HISKES: And he seems to be making  
16 progress. Things are placed to move on for the second  
17 year. I have a question about the budget concerning costs  
18 for materials. He budgeted 24,200, but only spent 8,500.  
19 So, he's about 60 percent under spent and there is -- he  
20 requested a transfer to some other category or to the next  
21 year. And I'm just wondering about the reason for that.  
22 If it was because he spent a lot of time doing literature  
23 review to have the most comprehensive survey, or if he  
24 just got a late start like many of the other PI's. 64

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1 percent under spending of materials and supplies.

2 CHAIRPERSON GALVIN: Do we want to ask him?

3 DR. HISKES: I think so.

4 CHAIRPERSON GALVIN: Yes.

5 DR. HISKES: For due diligence.

6 CHAIRPERSON GALVIN: Yes, let's pull that  
7 one out and not vote on it and ask him what's happening.

8 DR. HISKES: Okay.

9 CHAIRPERSON GALVIN: Okay. How about 09  
10 SCB UCHC01, Dr. Barrish Shien.

11 MS. SARNECKY: Dr. Arinzeh and Dr. Genel. I  
12 can read Dr. Arinzeh's comments.

13 CHAIRPERSON GALVIN: Go ahead.

14 MS. SARNECKY: Sufficient progress with two  
15 publications in press. No issues with the budget.  
16 Appropriate expenditures for year one, approve.

17 CHAIRPERSON GALVIN: Okay. How about --

18 DR. GENEL: -- well, a commentary on the  
19 papers in press. This has a 27 percent variance. In other  
20 words, there is a three month delay in getting started.  
21 And in that period of time he wrote a comprehensive  
22 review. I would wonder are these -- do we know whether  
23 these publications actually cite the Connecticut, the stem  
24 cell research program for funding?

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1 CHAIRPERSON GALVIN: Are you talking about  
2 Garcia Castro's?

3 DR. GENEL: Well, I'm seeing this with a  
4 number of the publications, which I suspect that they're  
5 tangentially related to the stem cell funding.

6 CHAIRPERSON GALVIN: And you know about  
7 tangential thinking.

8 DR. GENEL: Well, yes, right. And I have  
9 no problem with that so long as they cite funding from the  
10 stem cell program. So I'm just asking, do we know whether  
11 or not these publications actually have a citation that  
12 says they were supported --

13 CHAIRPERSON GALVIN: -- maybe we should  
14 build this into next year's grants, but ask for -- let's  
15 ask for some of these publications.

16 DR. DEES: Is this in the contract?

17 MS. HORN: It is.

18 MR. WOLLSCHLAGER: And this is Warren, at  
19 the request of this committee we wrote back out to each of  
20 the institutions, maybe about six months ago, reminding  
21 them of the need to do this.

22 CHAIRPERSON GALVIN: Yes.

23 MR. WOLLSCHLAGER: And we do have copies of  
24 most of these articles available.

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1 DR. GENEL: Yes.

2 CHAIRPERSON GALVIN: So they are being  
3 cited.

4 DR. GENEL: It's being cited. Okay. Well,  
5 okay.

6 CHAIRPERSON GALVIN: I'd like to see kind  
7 of a cross section of those. I think it would make Mike  
8 and I a little more comfortable.

9 MR. WOLLSCHLAGER: Sure.

10 DR. FISHBONE: Are you raising an issue or  
11 a question of whether if they stop three months late and  
12 they have a publication in the first year is that  
13 publication related to the work that they're supposed to  
14 be doing or is it something from before? Is that what you  
15 were asking?

16 DR. GENEL: Well, yes, and I suspect it's  
17 probably more related to something that was done without  
18 necessarily support if it's -- but I don't have a major  
19 problem with that if they cite support. I mean one could  
20 argue that, you know, for six months I had some salary  
21 support from the state and I guess that's sufficient,  
22 that's sufficient for it. What I'm suggesting is that  
23 after nine months of work if somebody has five or six  
24 publications it's not very logical that that all derives

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1 from the -- from the research.

2 CHAIRPERSON GALVIN: Yes. Skeptical about  
3 that.

4 DR. GENEL: Yes.

5 CHAIRPERSON GALVIN: Dr. Wallack, are you  
6 skeptical too?

7 DR. WALLACK: No.

8 CHAIRPERSON GALVIN: Thoughtful.

9 DR. WALLACK: So I appreciate what Mike put  
10 on the table as far as credit for the research. And I'd  
11 have to say that when we go to retreats they're very, very  
12 generous, the researchers in identifying exactly where  
13 they're getting the money from and where -- we are always,  
14 always highlighted. Having said that, I have also seen  
15 internal memos or publications where research was done  
16 because of our funding where it's, on occasion, not been  
17 identified on those internal institutional reports. And if  
18 that's still happening, maybe it's not still happening,  
19 but if it's still happening I would want somehow the  
20 institutions to understand that we would appreciate  
21 getting cited in those internal reports as well.

22 CHAIRPERSON GALVIN: Yes, we could send out  
23 a letter asking for that.

24 DR. GENEL: I'm not so concerned about

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1 internal as I am that the external publication actually --

2 MR. WOLLSCHLAGER: I don't think that the  
3 internal --

4 DR. WALLACK: -- I understand exactly what  
5 you said, Mike, but I have to tell you that when on  
6 isolated instances I've read that I said to myself, and  
7 I've called on one occasion, I think we should be  
8 recognized. It doesn't hurt.

9 DR. GENEL: Well, the old adage is it never  
10 hurts and so we used to cite everything under the sun that  
11 was in any way relevant. I understand that.

12 MR. WOLLSCHLAGER: I guess I would suggest  
13 maybe we could put that in the contracts for this year.

14 DR. WALLACK: Right.

15 DR. GENEL: In any event, with nine months  
16 progress, nine months work they are making sufficient  
17 progress and I would --

18 CHAIRPERSON GALVIN: -- okay.

19 MR. WOLLSCHLAGER: So that's a yes?

20 DR. GENEL: Yes, yes.

21 CHAIRPERSON GALVIN: Okay. We're now on Dr.  
22 Cuskas' grant?

23 MR. WOLLSCHLAGER: Yes.

24 DR. PESCATELLO: I reviewed the Cuskas'

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1 grant so this is a stem cell -- a spinal cord project.  
2 And they had some issues with Jaron getting donor cells,  
3 but -- also they're at a surplus. So they're making good  
4 progress. I would vote for approval.

5 MS. SARNECKY: Dr. Hart was the other  
6 reviewer on this.

7 MR. HART: Yes. The only thing I could add  
8 that these are very long term experiments so we don't  
9 expect to see results during the first period anyway.

10 CHAIRPERSON GALVIN: Okay. CO 9, Dr.  
11 Shapiro.

12 MS. SARNECKY: Shapiro, Dr. Arinzeh  
13 reviewed this one as well as Dr. Wallack. Arinzeh's  
14 comments were -- I just want to make sure I'm reading the  
15 right one here. Sufficient progress with one publication,  
16 no issues with the budget, appropriate expenditures for  
17 year one. She wishes to approve it.

18 DR. WALLACK: Second.

19 MS. HORN: Okay, we're all set.

20 CHAIRPERSON GALVIN: Yes.

21 MS. HORN: That's approved. Okay, the next  
22 grant is 09 SCB Yale 13 Sutton.

23 MS. SARNECKY: Dr. Wallack and Dr. Hart.

24 DR. WALLACK: I read it and Ron, do you

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1 want to go first, go ahead. I read it and I approve going  
2 forward.

3 MS. HORN: Dr. Hart, anything to add?

4 MR. HART: Nope just kind of limited  
5 progress on some the aims and no publication yet, but,  
6 again, they're just getting started. So, yes, approve.

7 MS. HORN: Okay. The next grant is 09 SCB  
8 Yale 14, Wang.

9 MS. SARNECKY: Dr. Dees, did you get a  
10 chance to review this one?

11 DR. DEES: Well, you know I realized that,  
12 as we were sitting here, that I had looked at the wrong  
13 grant this morning. So I was trying to look at this and  
14 unfortunately I cannot call up the file.

15 MS. HORN: Yes.

16 MS. SARNECKY: Okay.

17 DR. DEES: I keep getting it -- the wrong  
18 file there, so I haven't been able to look at it.

19 MR. WOLLSCHLAGER: Is it possible that we  
20 didn't have somebody in the room here that that somebody  
21 could take a look at the hard copy?

22 MS. SARNECKY: I have a hard copy.

23 MR. WOLLSCHLAGER: We have hard copies  
24 available.

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1 MS. SARNECKY: Anyone?

2 MR. WOLLSCHLAGER: Any volunteers?

3 DR. KIESSLING: I'll do it is that the  
4 whole grant or just the budget?

5 MS. SARNECKY: It's just the annual report  
6 and the budget.

7 DR. DEES: I could get the budget, I  
8 couldn't get the technical part.

9 MS. HORN: Yes, I had the same problem.  
10 Okay. Dr. Kiessling does have a complete hard copy so  
11 she'll take a look at that and we'll pass on that for now.

12 MS. SARNECKY: Move to the next one?

13 MS. HORN: The next one is UCHC 17, Li.

14 MS. SARNECKY: Dr. Fishbone and Genel.

15 DR. FISHBONE: Okay. This is a project  
16 where he's trying to generate IPS cells from cells  
17 expressing, they're not expressing Box P-3. He had some  
18 difficulties initially due to aging problems of the cell  
19 line that he was using. So he had to go off on a  
20 different tact with two other ways around that problem.  
21 And, you know, the work is on-going he says. So I think he  
22 was delayed because of problems with cell line. He has 28  
23 percent of his budget remaining due to a variety of  
24 reasons, which he states is within the carry over amount

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1 approved by our committee. Is that true or doesn't it  
2 matter?

3 MR. WOLLSCHLAGER: 28 percent is --

4 MS. HORN: -- so it must have been approved  
5 earlier by the committee?

6 MR. WOLLSCHLAGER: He has an approved carry  
7 over.

8 DR. FISHBONE: Okay. So, I would vote for  
9 approval.

10 MS. HORN: Dr. Genel, anything to add?

11 DR. GENEL: Yes, just a comment that  
12 remarkably paper published in 2009 although he started the  
13 work and his trouble in 2009, but just a commentary.

14 DR. FISHBONE: Yes, I was going to say that  
15 the publication is on the illudillogical clinical responses  
16 against colon cancer vaccination with IPS cells against  
17 colon cancer. So I guess, you know, obviously anything  
18 written in the first year is probably not related to what  
19 we're doing.

20 DR. GENEL: I think you can make the  
21 argument somebody gets a bit of a salary support from the  
22 state and anything they do while they're getting that  
23 salary support in someway is related although you could --  
24 I won't quibble about it. I'll just make -- I just make a

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1 point, that's all.

2 MS. HORN: Okay. Let's see 18, Rasmussen.

3 DR. FISHBONE: That's me.

4 MS. SARNECKY: Yes, Dr. Fishbone, I have  
5 Dr. Arinzeh's comments here.

6 DR. FISHBONE: Okay, this is a project  
7 trying to prevent spontaneous differentiation of human  
8 embryonic cells and IPS cells. And the summary of the  
9 year's activities is quite extensive. And they've done a  
10 great number of things, and seem to be progressing very  
11 well. And budget wise it was okay, no, I don't have his  
12 budget. He seems to be making a lot of progress in what  
13 they're doing.

14 MS. SARNECKY: I have Dr. Arinzeh's  
15 comments here. I'll read, sufficient progress although  
16 preliminary findings appear to be fairly minimal. They do  
17 state that the majority of gene constructs have been  
18 produced. There was a delay in hiring of a post doc and  
19 they state that this is reflected in the budget, but no  
20 budget of expenditures was attached. No publications  
21 reported. Approve.

22 MR. WOLLSCHLAGER: Does anybody have -- was  
23 there a budget?

24 MS. HORN: I have no budget for this one.

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1 MS. SARNECKY: I can -- I don't have a hard  
2 copy. Isolde can get it and send it around. Let's see if  
3 I have it in my --

4 MR. WOLLSCHLAGER: -- do you ant to hold on  
5 that one while you see if you can get that? Otherwise I  
6 don't know that the group is going to be able to take  
7 action on this one.

8 DR. FISHBONE: Can we approve it pending --

9 MR. WOLLSCHLAGER: -- well, sure.

10 MS. HORN: And then we can send you the  
11 budget and if there are no issues --

12 DR. FISHBONE: -- yes.

13 MR. WOLLSCHLAGER: Okay, so we'll just put  
14 that with the group then.

15 MS. HORN: Okay.

16 DR. FISHBONE: Yes.

17 MR. WOLLSCHLAGER: Okay. 20, Liptor?

18 MS. SARNECKY: This Genel and Fishbone.

19 DR. GENEL: We got a lot -- we got a lot of  
20 verbiage with subscribing a host of methodological  
21 problems. The -- this is to generate IPS cells from  
22 cranio metaplapycal dysplasia, and to determine the  
23 defect in astio genesis, astio blastic activity. They  
24 have -- at least at the time this was prepared they have

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1 yet to develop an IPS line from the one fibroblast line  
2 that they have. But they have developed a technique to do  
3 this from shed teeth, which I think might be probably  
4 even more promising.

5                   Having given the fact that they've been on  
6 this specific grant for nine months I think one can be a  
7 little more patient that there is tangible progress is  
8 very hard, I think, very hard to describe that there is  
9 necessarily any. But they're certainly very candid in  
10 outlining the problems that they've encountered. I think  
11 for all of that there is a lot of verbiage.

12                   DR. FISHBONE: Well, he says that finally  
13 we have been working on ways to convert IPS cells into  
14 autoblasts. This has proved to be more difficult than we  
15 expected.

16                   DR. GENEL: Yes.

17                   DR. FISHBONE: Actually that's a common  
18 thread through a lot of grants.

19                   DR. GENEL: I would support continued  
20 funding.

21                   DR. FISHBONE: Me too.

22                   MS. HORN: Okay. Yale 21, Shue.

23                   MS. SARNECKY: Dr. Hiskes and Dr.  
24 Pescatello.

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1 DR. HISKES: Okay. This, again, is the  
2 first year of a four year grant. The PI reports the  
3 concrete progress of establishing a platform for self  
4 renewal screening. Demonstrated several new -- in  
5 particular interesting pathway for self renewal. So it's  
6 done a lot of experiments. Had an initial problem by  
7 trying one route to identify genes and mutations. It  
8 didn't work and then tried another strategy. No  
9 publications or papers reported. So maybe this is a  
10 completely honest person.

11 I do have questions about the budget.

12 DR. GENEL: Or not creative enough, Ann.

13 DR. HISKES: They spent only 40 percent of  
14 their post doc budget perhaps indicating a slow start in  
15 finding appropriate personnel although they don't mention  
16 this. They had previously revised their budget for  
17 materials by 30 percent. So it had been a 50,000 dollar a  
18 year budget and they moved, I think, 15, 16,000 in a carry  
19 over. So something is going on, probably a slow start in  
20 general. But they seemed to have come up with some  
21 concrete results that look very good to my uneducated eye.  
22 And I would recommend continuation.

23 DR. PESCATELLO: I would agree with that  
24 analysis and it's good basic research. So, I would vote

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1 for approval.

2 MS. HORN: Okay. Let's see that was 27.

3 UCHC 01, Ren Hays Xu.

4 MS. SARNECKY: I think we skipped a few,  
5 Marianne.

6 MS. HORN: Oh, we did, I'm sorry.

7 MS. SARNECKY: Wesleyan 26, Doctors Hiskes  
8 and Genel.

9 DR. HISKES: Do you want to go?

10 DR. GENEL: Go ahead.

11 MS. HORN: So anyway, this is, again, is an  
12 interesting grant. A first year of a four year grant to  
13 look at the derivation of neuro precursors and then test  
14 their capacity to arrest and suppress seizures. So the PI  
15 identified the number of concrete results, but the cells,  
16 micro plasmatic and section which he said shut down their  
17 lab time for four to six months that seems pretty  
18 significant. And it took a while to eradicate that  
19 section. Nevertheless, identified five concrete results.  
20 There is eight publications, two under revision, and one  
21 submit for a grand total of 11 in one year.

22 DR. GENEL: Yes, that's remarkable. I  
23 applaud that. That's remarkable progress.

24 DR. HISKES: That's right. But this is,

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1 again, I think her research fits in with the things she's  
2 been doing in the past and with other kinds of projects as  
3 well. So it's part of a unified research agenda.

4 The budget looks fine and already Dr.  
5 Grabel gets a summer salary from this grant. Grabel's  
6 summer salary was charged to something else. So a 20 K was  
7 transferred from Grabel to material and supply. So I  
8 recommend continuation.

9 MS. HORN: Are we at Yale 27 now?

10 MS. SARNECKY: Yes.

11 MR. WOLLSCHLAGER: Do you have any other  
12 comments?

13 DR. GENEL: The only comment I had is we  
14 might ask her to make the lay summary a little more lay in  
15 terms of its language. We might ask her if she could, if  
16 she would take a stab at --

17 MS. HORN: -- tone it down, okay.

18 DR. GENEL: Yes.

19 MS. HORN: Lou?

20 MS. SARNECKY: This next one the reviewers  
21 were Dr. Goldhamer and Dr. Mandelkern. I have a hard copy  
22 here if someone can review it. If not, we can schedule a  
23 phone conference for sometime next week maybe to approve  
24 it.

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1 MR. WOLLSCHLAGER: Did you happen to look  
2 at this, Dr. Kiessling before?

3 DR. KIESSLING: Yes, let me see if it's too  
4 complicated.

5 MS. HORN: Okay.

6 MS. SARNECKY: We can go onto the next one.

7 MS. HORN: This is the last one in No. 10?

8 MS. SARNECKY: Yes. Ren Hay, let's see  
9 Kiessling and Genel, Dr. Genel, do you want to --

10 DR. GENEL: -- I'm sorry, which one is  
11 this? I will just second basically repeat the comments  
12 that Ann made later on. I mean this is -- if you look at  
13 the accomplishments and the publications that have come  
14 out of this core laboratory I think it's precisely what we  
15 all had in mind when we provided funding to establish core  
16 laboratories. Yes, it's -- I -- I think the term you  
17 used, Ann, was remarkable progress. I would agree.

18 DR. KIESSLING: I'm still confused about  
19 the cores. I continually am confused about how we did  
20 this. So they originally applied for five years and we  
21 funded them for --

22 MR. WOLLSCHLAGER: -- two. The original, I  
23 believe, was four and we cut it to two.

24 DR. KIESSLING: And we cut it to two. And

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1 then they have come back and now we have refunded them?

2 MS. HORN: Um, hmm.

3 DR. GENEL: Yes.

4 DR. KIESSLING: For another two. So this is  
5 the first year of a two year renewal?

6 DR. GENEL: That's my understanding, it's  
7 the first year of a renewal. I don't know --

8 MR. WOLLSCHLAGER: -- yes, the renewal may  
9 have been for a three year not a two year term.

10 DR. KIESSLING: So, it's worked out so they  
11 didn't have -- they had neither overlap nor --

12 MR. WAGNER: -- they did have overlap.

13 DR. KIESSLING: Nor run out of money. They  
14 did have overlap?

15 MR. WAGNER: They did have overlap. They  
16 had a no-cost extension on the initial one and then this  
17 one started and I think we --

18 DR. GENEL: -- a 36 percent under spent in  
19 terms of salaries. And I, again -- that can't be a late  
20 start because they would have -- they would have had a  
21 continuation from the old one.

22 MR. WOLLSCHLAGER: But I think that they  
23 budgeted this extension accordingly.

24 MR. WAGNER: Yes.

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1 MR. WOLLSCHLAGER: So that -- that's why it  
2 was extended out.

3 MR. WAGNER: The cost extension ended in  
4 the middle of this last fiscal year and then this grant  
5 picked up where that one ended off so there was no drop in  
6 personnel or services.

7 DR. KIESSLING: So what percentage of our  
8 10 million dollar a year allocation are we spending on  
9 cores at Yale and UCONN? A million dollars a year, half a  
10 million dollars a year? Because at some point that has to  
11 either become something that we accept --

12 DR. WALLACK: -- it's more than that, Ann,  
13 because you got Michael Snyder's core that was like three  
14 million.

15 DR. KIESSLING: That was this time around.

16 DR. WALLACK: No, no. That --

17 DR. KIESSLING: -- oh, that's right.

18 DR. WALLACK: Right. So you have initial  
19 cores. You had Ren Hayes, 2.00 --

20 DR. KIESSLING: -- Hyfon's.

21 DR. WALLACK: I mean Hyfon and then he came  
22 back for another, when he wanted to do his IPS, how much  
23 did they come back for? Another 250,000?

24 DR. KIESSLING: They didn't want anymore

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1 money.

2 MR. WOLLSCHLAGER: The amount of cores  
3 annually has been decreasing. We'd have to break that down  
4 exactly.

5 DR. WALLACK: But it's still in place from  
6 before. There is money being --

7 DR. KIESSLING: -- I mean one of the things  
8 about cores is that they can be hugely valuable or they  
9 can become dinosaurs. And so I think we need to keep  
10 track of what percentage of our total annual budget goes  
11 to cores. I'm not -- I mean I think the cores have been  
12 very, very productive, and extremely valuable.

13 DR. WALLACK: So that's why we want to do a  
14 midterm report, if we get to it, that discussion.

15 DR. KIESSLING: Yes. Okay. But I'm always  
16 confused as to where they stand. And so far the cores have  
17 not a lot of overlap and they haven't had any gaps in  
18 funding at the two major cores. Is that right?

19 MR. WOLLSCHLAGER: Correct.

20 DR. KIESSLING: Okay.

21 DR. GENEL: I think there was -- yes, he  
22 mentions specifically that there was an overlap.

23 DR. KIESSLING: Good, okay.

24 DR. FISHBONE: But I think we've mentioned,

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1 this is Gerry Fishbone, in the last couple of years that  
2 there would be no new cores started unless under  
3 exceptional circumstances.

4 DR. KIESSLING: Right.

5 DR. FISHBONE: And the other thing that you  
6 bring up, I thought that at some point we had hoped that  
7 the cores would be taken over by the institutions.

8 DR. KIESSLING: Or they would become fee,  
9 more fee for service. I don't see any fee for service  
10 component yet. But that may take a little while.

11 DR. GENEL: I think that's a discussion we  
12 need to have, but I don't know -- I think in terms of  
13 approving this by all means --

14 MS. HORN: -- okay, so this one is  
15 approved. Now, we need to -- has Dr. Kiessling had an  
16 opportunity -- it doesn't look like it.

17 MR. WOLLSCHLAGER: So we have that two that  
18 are still on hold, Marianne, those --

19 MS. SARNECKY: -- I think just as a note  
20 the Garcia Castro grant, the Rasmussen grant, and the  
21 Naegele grant one from Yale, UCONN, and Wesleyan we had  
22 said that each of these different grants needed a certain  
23 component brought back to the committee. Is it in the  
24 best interest of the grant to approve their annual reports

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1 and begin that process, and have them submit these things  
2 to CI very quickly and I can forward that onto the  
3 committee? Just so we don't have any issues with gaps in  
4 funding and lag time for approvals, and stuff like that. I  
5 think that might be in the best interest of the grants.  
6 But I put that up to the committee.

7 MS. HORN: With Naegele we just wanted the  
8 lay report to be a little bit toned down.

9 MS. SARNECKY: Yes.

10 MS. HORN: So I don't think there is  
11 anything that needs to come that would hold up approval on  
12 that.

13 DR. GENEL: No, no. I wouldn't hold up  
14 approval.

15 MS. HORN: Okay. And on Rasmussen we  
16 approved it pending an okay of the budget, which we didn't  
17 see. Now, the -- the Castro grant, Chelsey points out  
18 that's a very small percentage of the entire budget and  
19 we're wondering if we could do an approval pending  
20 justification of that. And if that's the case then it's  
21 just a cleaner way to do it rather than not approving that  
22 one grant. So I'm getting nods around the table, would  
23 that be acceptable?

24 CHAIRPERSON GALVIN: I think that's

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1 acceptable. And if Chelsey and Dan have any problem  
2 getting the stuff from them we'll tell them that we, you  
3 know, we want this in a couple of weeks.

4 MS. HORN: Absolutely. And then we just  
5 had one grant that Dr. Kiessling was doing her best to  
6 review.

7 DR. KIESSLING: Lou. I guess I have two  
8 then?

9 MS. SARNECKY: No, just the Lou grant.

10 DR. DEES: Well, there is the Wong grant.

11 MS. HORN: There is the Wong grant too.

12 MR. WOLLSCHLAGER: The Wong grant is still  
13 on hold.

14 MS. SARNECKY: Oh, it is.

15 DR. KIESSLING: Yes, because nobody could  
16 download it or something.

17 MS. SARNECKY: Okay.

18 DR. KIESSLING: Now, the Lou grant is a  
19 year one of four years. So, this is a senior investigator  
20 award. This is the very first year of it. And they are  
21 doing fine. I mean they've taken off a challenging  
22 project and they're doing fine with it. They've run into  
23 supply money, but evidently the Department is picking up  
24 some of the slack. That might be the other grant.

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1 MS. HORN: This is Lou you're working on?

2 DR. KIESSLING: Yes, this is Lou. I think  
3 this is the one. Ran into problems with HR to get people  
4 hired. This is fine. I vote to accept this report.

5 MS. HORN: Okay.

6 DR. KIESSLING: So this is the first year  
7 of a four year project.

8 MR. WOLLSCHLAGER: That's Yale 27 Lou,  
9 right?

10 MS. HORN: Yes.

11 DR. KIESSLING: Yes.

12 MR. WOLLSCHLAGER: Okay.

13 MS. SARNECKY: This grant is the -- Yale  
14 14.

15 DR. KIESSLING: Right. And this is actually  
16 the one I was thinking actually ran into -- so this grant,  
17 Wong, is also the first year of a four year project. And  
18 this is the group that's run into supply money trouble,  
19 but they have -- their department has made up for it.  
20 They've actually listed three publications in the first  
21 year which seems kind of remarkable. And they've tackled  
22 a tricky problem and they're doing fine. So I recommend  
23 that be accepted and renewed or approved, whatever we're  
24 doing especially since Yale is going to pick up their

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1 slack.

2 MS. SARNECKY: Do we need to take a vote on  
3 --

4 CHAIRPERSON GALVIN: -- we can now vote on  
5 everything under Item No. 9 that's on the first page, on  
6 the front part of the second page. And we're -- Dr. Garcia  
7 Castro is going to clarify some things for us and we're  
8 pending Rasmussen has a pending budget item.

9 MS. HORN: Um, hmm.

10 CHAIRPERSON GALVIN: Otherwise they're  
11 clear.

12 MS. HORN: And Dr. Naegele was going to  
13 tone down the lay language.

14 CHAIRPERSON GALVIN: So we have some fine  
15 tuning.

16 MS. HORN: Yes.

17 CHAIRPERSON GALVIN: Otherwise, we can vote  
18 on this -- on this slate en block. And may I have a  
19 proposal to vote.

20 DR. WALLACK: Moved.

21 CHAIRPERSON GALVIN: And a second?

22 DR. FISHBONE: Second.

23 CHAIRPERSON GALVIN: All in favor?

24 ALL VOICES: Aye.

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1 CHAIRPERSON GALVIN: Opposed? The vote is  
2 carried.

3 MS. SARNECKY: Okay.

4 CHAIRPERSON GALVIN: Let's see if we do  
5 these revised budgets. And I'm going to see if perhaps if  
6 I can bring Dr. Wallack up a little bit earlier for, part  
7 midpoint comment before people start to drop out.

8 MS. SARNECKY: Okay. So, again, to Item No.  
9 10 these are two revised budgets that the committee had  
10 approved, these two grants at the grant review meetings in  
11 June and decreased the budgets of these two particular  
12 grants. There should be a budget -- let's see, the first  
13 one Kyhung Key, 10 SCB 19 is a three year grant. So we  
14 would just need approval on the budget in front of you,  
15 please.

16 CHAIRPERSON GALVIN: Okay. Does everybody  
17 have that budget? Okay. If so, I'll entertain a proposal  
18 to accept it, the budget that we have in front of us, can  
19 I -- somebody make that motion, please?

20 DR. WALLACK: So moved.

21 CHAIRPERSON GALVIN: And a second.

22 DR. GENEL: Second.

23 CHAIRPERSON GALVIN: From Mike. Okay, any  
24 discussion on Dr. Key's grant 10 CSB 19. With that, all

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1 in favor of accepting the budget submitted?

2 ALL VOICES: Aye.

3 CHAIRPERSON GALVIN: Opposed?

4 DR. FISHBONE: I had one question about  
5 that.

6 CHAIRPERSON GALVIN: Yes.

7 DR. FISHBONE: Did we reduce it from a  
8 million to 750?

9 MS. SARNECKY: Yes.

10 DR. FISHBONE: And did the amount of work  
11 that they were going to do remain the same or did they  
12 change?

13 MS. SARNECKY: I think that was the request  
14 of the committee that they approve the scope of work, but  
15 they'd have to -- PI would have to reduce the budget.

16 DR. FISHBONE: Okay.

17 CHAIRPERSON GALVIN: The last one, Chelsey.  
18 Thank you for all your good work.

19 MS. SARNECKY: You're welcome.

20 CHAIRPERSON GALVIN: You did a great job.

21 MS. SARNECKY: Dr. Antick, this is a two  
22 year grant. It was cut from almost 600,000 dollars down  
23 to 500,000 dollars. And Dr. Antick provides a  
24 justification in the back outlining what he did.

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1 DR. WALLACK: So he was able to do the  
2 project.  
3 MS. SARNECKY: Yes.  
4 DR. WALLACK: Okay. So I'll move  
5 acceptance.  
6 CHAIRPERSON GALVIN: Second?  
7 DR. FISHBONE: Second.  
8 CHAIRPERSON GALVIN: All in favor?  
9 ALL VOICES: Aye.  
10 CHAIRPERSON GALVIN: Opposed? Motion is  
11 carried and I'm going to skip over committee membership to  
12 I'd like to hear Milt's comments about our halfway point.  
13 DR. WALLACK: Okay. Can I --  
14 CHAIRPERSON GALVIN: -- don't take more  
15 than an hour and a half.  
16 DR. WALLACK: No, I won't.  
17 CHAIRPERSON GALVIN: No.  
18 DR. WALLACK: So I'll pass this around.  
19 These are -- it's an outline of what I sent to the  
20 committee. And, Bob, I want to put it in context, please,  
21 if I might, and that is that my comments about asking for  
22 a midway, a midpoint reevaluation is within the context  
23 that I think that we're doing remarkably well. If you go  
24 to national meetings you certainly see more, most clearly

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1 -- and Warren and Marianne are at some of these meetings,  
2 that we're looked upon as a model in what can be done and  
3 should be done. So it's all positive.

4           Having said that, there is possibly --  
5 there is possibly some tweaks that we can consider that  
6 would make it even better than we can ever imagine. And  
7 so with that in mind I was driven to share with you the  
8 thoughts that I have on what's being passed out now, which  
9 you received about a month ago almost to the day.

10           So I don't know if -- how you want to  
11 handle it, Bob. I mean we can do it point by point. The  
12 first point was written -- we started off by wanting to  
13 fund best basic science. That was almost five years ago.  
14 We then moved to wanting to consider translational  
15 considerations, and then we moved to wanting to consider  
16 translational research that would lead to therapeutic  
17 work. Some states, well California for example Ann  
18 reminds us, has gotten to a point where I believe, if I'm  
19 right, they're more disease directed in their research. It  
20 seems to me that we planted the tree, if you will. We  
21 planted the tree. The tree is sprouting. But we are half  
22 way through the program and as someone who is 71 years old  
23 and contemplates where I might be in the next number of  
24 years I would like to hopefully see some therapies that

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1 are out there.

2                   So, the first thing I would want to at  
3 least have us consider is if we want to take one more step  
4 along the way and consider whether or not in our RFP, for  
5 example, we can consider asking the researchers or  
6 directing the researchers to think more in terms of  
7 disease directed research. So that's what drives that  
8 first recommendation.

9                   CHAIRPERSON GALVIN: Well, I think that's a  
10 very -- an interesting comment. And I think bearing in  
11 mind that we have an entirely new administration coming in  
12 on the first of January would we be better served, would  
13 the people be better served if we were more interested in  
14 aligning ourselves with things that show a potentiality  
15 for amelioration or change on the basis of products or  
16 techniques that are produced with this program. And I can  
17 imagine somebody saying, well, you know, you already spent  
18 50 million bucks and when are you going to cure  
19 Parkinson's disease, and rheumatoid arthritis, and  
20 diabetes. And maybe this is the time based on the judgment  
21 of some others. I think we need input from everybody who  
22 is on the committee about do we change our thinking a  
23 little bit about that's great, we got the cores. We got  
24 all the groups. We got all this going and do we need to

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1 become more interested in applied science.

2                   Certainly the grants we get from the  
3 tobacco funding, the biomedical grants are -- those grants  
4 are so esoteric that even my lab director, who has a Ph.D.  
5 and is a researcher says he doesn't understand what  
6 they're trying to do. So I think we certainly -- not that  
7 there is anything wrong with those grants and with anybody  
8 associated with them including good Senator Crisco, but I  
9 think that, you know, I read through them and I can't --  
10 I'm not quite sure -- I can't even get the language. And I  
11 think -- I don't think that's the direction we want to  
12 move. I think that's a direction we would like to move  
13 towards applied science.

14                   DR. WALLACK: Just one other element in the  
15 first two items, the first two bullets I certainly think  
16 we ought to be considering together, but one aspect of the  
17 second bullet identifies a special category for specific  
18 disease related research especially this work as  
19 collaborative elements with biomedical and pharmaceutical  
20 companies. So, I mean we can make it more interesting,  
21 hopefully, for the research community to really consider  
22 moving in the direction. And I'm saying that to pick up on  
23 some of the things that you just put on the table. We can  
24 -- there are methods for us to do that if we are committed

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1 to it.

2 CHAIRPERSON GALVIN: And I've read several  
3 remarks from people who are commenting about our midpoint.  
4 I think once again we'll probably have a struggle to get  
5 the ten million dollars depending on who is sitting in the  
6 big leather chair in the Governor's office. But I would  
7 think very pragmatically we'd have a better -- I don't  
8 want to say anything to hurt the tobacco fund, biomedical  
9 stuff, but I think we'd be in a lot better position to  
10 secure our ten million if we could present something where  
11 something tangible was up over the horizon a bit rather  
12 than beyond the line of sight.

13 As I read through some of the comments, I  
14 began to think about what are we doing to develop young  
15 investigators? And if you're not on the Yale staff or on  
16 the Wesleyan or University of Connecticut staff including  
17 UCHC is there somebody out there at Western or someplace  
18 or Trinity or some other place who, a small grant might  
19 get them in the ballgame. Or at least on the subway  
20 leading to Fenway park. And right now I think a lot of  
21 these varied efforts are -- they aren't competitive.

22 DR. KIESSLING: One -- Commissioner, one of  
23 my questions about the core and our responsibilities to  
24 the cores is that part of their responsibility is

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1 teaching. And it seems to me as though you could reach out  
2 to all of the investigators that have been funded by  
3 Connecticut funds and challenge those investigators and  
4 those institutions to partner with a smaller institution  
5 in some way either as an exchange or bring some of their  
6 younger investigators into the core activities, or -- I  
7 don't know how -- even how much it would cost, but it  
8 seems to me as though as sort of a call to responsibility  
9 for especially the cores, all the cores that have been  
10 funded should certainly be statewide have a statewide  
11 access. All institutions should have access to those.

12 But there also needs to be kind of an  
13 educational outreach. And I know we've talked about this  
14 before. I mean Ann Hiskes -- what was that a stem cell  
15 coffee klatch, Ann?

16 DR. HISKES: Yes.

17 DR. KIESSLING: At Starbucks or whatever.  
18 It's that sort of --

19 DR. HISKES: -- I've been a speaker with --  
20 if you want me to talk, I can talk.

21 DR. KIESSLING: Well, even just the fact  
22 somebody held stem cell meetings at Starbucks or  
23 something, right, on Sunday afternoon or something.

24 DR. HISKES: Chemistry did something that

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1 the Discovery channel had promoted and that the Chemists  
2 Society funded. So a stem cell discussion group at  
3 Starbucks was one event. Something about the environment  
4 was another event.

5 DR. KIESSLING: Most of the professional  
6 societies, like the American Society for Biologists, most  
7 of those have summer stipend money available for like high  
8 school teachers.

9 DR. HISKES: Sure.

10 DR. KIESSLING: So I think somehow the  
11 people who are funded by state funds need to kind of form  
12 some kind of a reach out network. And I don't know what  
13 it's going to do. Bob Klein reminded us in California  
14 that 90 percent of science writers have been let go from  
15 all the major newspapers. So the only way science  
16 information is now going to be really distributed widely  
17 through media is for scientists to pick up that gap. And  
18 I don't know how to do that because we're very bad at  
19 that.

20 DR. WALLACK: Can I -- I think we have to  
21 come back to -- can I sort of try to ask you if we can get  
22 a more specific direction to this conversation. So, for  
23 example, we had a nod of heads on disease directed  
24 research in the next RFP. We have a quorum here. Can I

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1 then, with your permission, make a motion that the next  
2 RFP include the idea that we're asking the researchers to  
3 commit themselves to more disease related research.

4 CHAIRPERSON GALVIN: Right. You certainly  
5 can make the motion.

6 DR. WALLACK: I would make that motion.

7 CHAIRPERSON GALVIN: I will second that  
8 motion so we can discuss it.

9 DR. WALLACK: Okay.

10 CHAIRPERSON GALVIN: And I think Paul has  
11 some comments.

12 DR. PESCATELLO: Yes. I have a couple of  
13 comments. I mean, you know, you can't force cures. I  
14 mean it's -- we're funding basic research. I think there  
15 is a huge economic development value to create a center of  
16 excellence in Connecticut and I would hate to see us  
17 dilute what we do by funding marginal research based on a  
18 lot of hope. I mean every time I go to talks on this  
19 subject and I ask people how many drugs were approved last  
20 year by the FDA. I don't know if anybody knows here.  
21 People usually think there are hundreds of drugs. There  
22 are about 25 last year. It's really hard work.

23 I mean Pfizer today just announced two  
24 failures in the Phase III trials. So, obviously, these

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1 researchers want to find cures for Parkinson's disease. I  
2 mean that's why they're in the business of what they do.  
3 But you can't force them to do it and I mean I think  
4 they're already working as hard as they can. We already  
5 have the power to fund a project if it comes before us  
6 that is translational. There just aren't any. So,  
7 artificially forcing it or funding something that's  
8 probably pretty marginal we're doing great research. And  
9 I would hate to see some of the stuff going on down at  
10 Yale and UCONN not be done because we're funding some wish  
11 that really doesn't exist.

12                   And the last thing I would say, look at the  
13 war on cancer. Nixon in 1968 started a war on cancer on  
14 the same thing, let's go to the cure. Let's go directly  
15 to the cures. 2010 we don't have cures for cancer. And  
16 the reason we're as far along as we are with cancer  
17 treatments is because of basic research not by funding  
18 things that really aren't far along and pretending that  
19 they are.

20                   CHAIRPERSON GALVIN: That's certainly a  
21 good point. Mike.

22                   DR. GENEL: Well, I was going to make a  
23 similar point, but I think -- but I don't think it's all  
24 or nothing. Milt, I think the mechanism you proposed of a

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1 special category in the RFP is not unreasonable. We can  
2 judge the value of that depending upon what comes in, but  
3 it does make a statement.

4           The other is that just from the grants that  
5 we reviewed today many of them are disease related it's  
6 just that they're doing disease related research in a  
7 basic setting. And to some extent this is just a matter of  
8 public relations. We have the lay reviews. One could  
9 easily pull these together and put out a statement about  
10 disease related research that's being funded by the state.  
11 I mean -- any number of them here.

12           DR. WALLACK: I think that's exactly to the  
13 point. And certainly I remember being a major proponent  
14 at this table of doing the best basic research, and I  
15 still believe in that concept. That's -- so I'm not at  
16 all saying that we should abandon that approach. All I'm  
17 saying as we did, what we put in translational and then we  
18 put in translational towards therapy, I think that it's  
19 appropriate at this time to light a bulb like they did in  
20 California and it has been productive. Sometimes you would  
21 have to -- you have to put in front of somebody the idea,  
22 oh, yes, maybe I should be doing more of this. It doesn't  
23 mean that we're taking away from anything else. And maybe,  
24 Mike, the way we do it is by that special category. And if

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1 you want to amend the motion to say, and there should be a  
2 special category of consideration, I certainly would be  
3 amendable to that.

4 DR. KIESSLING: Dr. --

5 MR. HART: -- can I jump in at some point?

6 This is Ron Hart on the phone.

7 CHAIRPERSON GALVIN: Yes, I was waiting for  
8 you.

9 MR. HART: As a tried and true basic  
10 researcher that really knows very little about  
11 translational, unfortunately, let me just throw in a few  
12 comments to address some of the discussion that's gone on  
13 so far. One is having also been to the ISSCR meeting and  
14 seeing first hand how productive the California model has  
15 been, the one limitation there is that we're talking a --  
16 you know, orders of magnitude of scope when you talk about  
17 the California model. It's huge compared to the  
18 Connecticut budget. And they are very successful because  
19 they are so large, in large part.

20 However, in the context of the probable  
21 budget next year for the Connecticut program, I don't  
22 think it wouldn't be a bad idea -- I don't think it would  
23 be a bad idea to use a carrot rather than a stick to  
24 encourage some researchers that think they have some ideas

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1 that may lead toward a clinic to force them to interact  
2 with physicians and/or pharmaceuticals to set up kind of  
3 the bridge project to get to the next step. Is that clear  
4 or was that confusing?

5 DR. WALLACK: No, that was very clear.

6 CHAIRPERSON GALVIN: Ann?

7 DR. KIESSLING: I want to respond to some  
8 things that Paul said as a basic scientist, all right.  
9 One of the things that basic scientists don't do well is  
10 design their experiments to provide the groundwork for the  
11 FDA to judge the safety of what they're doing. And the  
12 sooner you get that thought into the basic science lab it  
13 doesn't really change much of the basic science that's  
14 being done. But now you provide data that the FDA can  
15 actually use to begin to assess safety.

16 And I think a really good example of this  
17 is the only stem cell trial that's been FDA approved by  
18 Jeron for spinal cord injury is hampered by the fact that  
19 it was all the basic science data was developed in a rat  
20 model for -- which doesn't mimic that human disease very  
21 well. So had that rat model and had the investigators  
22 that were doing that had they been to the FDA before they  
23 even started their basic science they would have done a  
24 different rat model.

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1                   So, I think that what you want to -- what I  
2 would love to see in Connecticut, because I think this is  
3 going so well, is some category in which you have to have  
4 both clinicians and basic scientists bring forth a project  
5 that they think will be ready for FDA review in four or  
6 five years. And that focuses everybody. It focuses the  
7 clinicians. It focuses the scientist. It focuses  
8 everybody. And if we don't get something that makes sense  
9 or that looks like it's going to be successful it doesn't  
10 have to get funded. But it really focuses everybody from  
11 the very beginning. If I want to --

12                   MR. HART: -- I agree with that 100  
13 percent.

14                   DR. KIESSLING: Do you, Ron? Okay. But if  
15 I want to study this disease my animal model has to be X.

16                   CHAIRPERSON GALVIN: Very good. And I  
17 think that this year is a struggle to get the funding or  
18 get it back. Next year there will all be new players. I  
19 doubt if Mr. Wollschlager will be here, he may be.

20                   DR. WALLACK: We need Mr. Wollschlager.

21                   CHAIRPERSON GALVIN: Yes, I resign at the  
22 end of this gubernatorial term. And I have no idea what  
23 the new administration might do or who will be sitting in  
24 this seat. It may -- and I -- as you've all heard me say,

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1 I was not a research scientist from the beginning. I'm a  
2 hands on aerospace medicine guy. But you may be  
3 conceivable that you get somebody who just has a medical  
4 degree or a dental degree. And who doesn't really  
5 understand all the stuff that we've gone through to get --  
6 four and a half years, Warren?

7 MR. WOLLSCHLAGER: No, a little over five  
8 now.

9 CHAIRPERSON GALVIN: Over five. And I think  
10 it's that approach that Ann has as something that you can  
11 take somebody who is relatively not tutored or a new  
12 governor who thinks it's a great idea but has a business  
13 or politics background and that's the kind of thing I  
14 think that will help us ensure we get our ten million next  
15 year.

16 DR. WALLACK: Can we, going back to, can we  
17 vote the sense of the motion and ask Ann as part of the  
18 motion if she would write out for us exactly what she just  
19 said. And that will become part of what we vote today.

20 CHAIRPERSON GALVIN: Well, I think maybe it  
21 would be -- and Marianne has to help me with that, we  
22 could ask her to outline the procedures that would lead us  
23 to developing a category such as Ann described. And I  
24 think what Ann's comments, the most telling comment is

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1 that if you know what you're trying to do from the  
2 beginning you can design your initial work so that it  
3 leads towards substantiating that effort.

4 MS. HORN: Is there a comparable NIH type  
5 of category of grant?

6 DR. KIESSLING: No, it's really sad. Can I  
7 -- I think they call them disease teams and I think that  
8 RFP is on their website. No, the NIH is very bad at this.

9 MR. WOLLSCHLAGER: Just taking what we call  
10 the group project and defining who has to be part of the  
11 group and where you have to be at the end of the group  
12 project.

13 DR. KIESSLING: Right.

14 DR. WALLACK: So, Bob, I would --

15 CHAIRPERSON GALVIN: -- I think -- excuse  
16 me, Milt. I think maybe that would need a little work for  
17 us to get the phrasing and make sure that all members of  
18 the committee have seen -- have seen this.

19 DR. KIESSLING: I mean I think the key is  
20 to make sure that part of the team has to be clinical.

21 CHAIRPERSON GALVIN: Right. And so maybe  
22 we should defer a vote on that until we've had a chance to  
23 sort of develop this thing. We've got -- we've all got to  
24 understand it, but Gerry has got to be understanding it

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1 and be able to hand it to Governor whoever and say, this  
2 is what this means.

3 DR. WALLACK: So we're tabling this with  
4 the idea that we'll come back --

5 CHAIRPERSON GALVIN: -- develop the idea.

6 DR. WALLACK: With an expanded motion  
7 specifically including some of the points that Ann alluded  
8 to and that you and Marianne will then be putting  
9 together.

10 CHAIRPERSON GALVIN: Yes.

11 MS. HORN: Yes, I could take a look at the  
12 California site. I'll run it by Ann.

13 DR. WALLACK: Good.

14 CHAIRPERSON GALVIN: We can --

15 MR. HART: -- why don't we actually go one  
16 step further than that and actually ask for a beginning of  
17 a written document to be formally passed among the  
18 community for review before bringing it up at the next  
19 meeting for a real vote.

20 CHAIRPERSON GALVIN: That's what I thought.  
21 Thank you. You said that better than --

22 MS. HORN: -- so something that would  
23 appear in the RFP we'll just mock up something like that.  
24 Okay.

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1 CHAIRPERSON GALVIN: So what do we do with  
2 Milt's motion?

3 MS. HORN: We'll just have to let -- it  
4 wither on the vine.

5 DR. WALLACK: It's tabled.

6 CHAIRPERSON GALVIN: It's tabled.

7 DR. WALLACK: It's tabled in lieu of that.

8 CHAIRPERSON GALVIN: Okay.

9 MR. WOLLSCHLAGER: Maybe we can have Dr.  
10 Hart in the review, in the early review of the document.

11 MS. HORN: That would be great.

12 CHAIRPERSON GALVIN: And I still think we  
13 need to do something to encourage -- I'm not sure how to  
14 do it. We're building a new lab which will be 18 months  
15 in building. But, you know, one of the things we want to  
16 do is encourage young people. We're going to actually have  
17 a classroom there. But I think maybe in some of our grants  
18 we are -- I think we need to find a way to build in some  
19 talent scouting. I mean suppose you were some really,  
20 really bright -- well, you are a really, really bright  
21 kid, but a really, really bright kid at Western State  
22 University.

23 DR. KIESSLING: Right.

24 CHAIRPERSON GALVIN: And maybe you're there

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1 because of free tuition or maybe you're there because you  
2 live at home and that's the only one you could afford, for  
3 whatever reason, but theoretically since you're not part  
4 of the Yale, Wesleyan, UCONN group, that you could kind of  
5 get passed by and end up --

6 DR. KIESSLING: -- yes, that's why I think  
7 this should be a geographical catch man area and  
8 institutions that have received state funds have an  
9 obligation to reach out to whoever is in their  
10 geographical area and say, would you like to come to  
11 seminars. Does anybody want to do, whatever.

12 CHAIRPERSON GALVIN: And maybe, excuse me,  
13 there are some great people down at Quinnipiac and we  
14 could do some co-funding things with them.

15 DR. KIESSLING: I don't think that's asking  
16 -- I don't think that putting a lot on anybody.

17 CHAIRPERSON GALVIN: No.

18 DR. KIESSLING: To try to do that.

19 MR. WOLLSCHLAGER: I think you know,  
20 Commissioner, but the committee may not know that Dr.  
21 Fontana who is the head of our -- of our public health  
22 laboratory, a great scientist, relatively new to  
23 Connecticut though, we're setting up a series of  
24 discussions with the core labs between Dr. Fontana and Ren

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1 and the folks, Haifan Lin, just to begin to engage in  
2 those types of discussions.

3 CHAIRPERSON GALVIN: And Dr. Fontana is  
4 really the only true research scientist in the department  
5 and a very good one.

6 MR. WOLLSCHLAGER: Yes.

7 DR. KIESSLING: What is our indirect cost  
8 rate?

9 MR. WOLLSCHLAGER: On?

10 DR. KIESSLING: On grants? Is it 25  
11 percent? I mean at some level maybe --

12 MR. WOLLSCHLAGER: -- it's capped at --

13 CHAIRPERSON GALVIN: -- it's capped at 25.

14 DR. KIESSLING: Is it capped? So maybe the  
15 institution could use some of their indirect costs  
16 recovery. I know that's a popular idea.

17 DR. HISKES: That would not go over well.

18 DR. WALLACK: Bob, can we go onto the  
19 second bullet?

20 CHAIRPERSON GALVIN: Yes, sure.

21 DR. WALLACK: And the second bullet is  
22 driven at, I think, a little bit about what Ann is trying  
23 to say in expanding the pool of people and what you're  
24 saying and this -- it was -- it was -- I wrote it with the

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1 idea of reflecting on what we did this past session in  
2 June when we distributed our funds. And the idea here is  
3 by modifying the amounts that we're awarding we expand, I  
4 think, potentially at least the pool of researchers that  
5 we can find. And certainly you see the highlight with  
6 seed grants of possibly an expansion of that. The core  
7 grants can be included to do what Ann's suggesting and  
8 then the special category that we just talked about  
9 previously that you and Marianne will be talking about is  
10 also included.

11 So certainly the wording of some of this  
12 may not be exactly like we all would like to see it, but I  
13 think you get the sense that by readdressing our thinking  
14 about how much we want to provide for each category and  
15 each grant and so forth we come closer, at least, to an  
16 ability to increase more people bring more researchers  
17 into the pool.

18 CHAIRPERSON GALVIN: I think perhaps those  
19 suggestions need to be more formalized and circulated to  
20 the membership so we can then get comment because they're  
21 really multi issue statements. And I'd like everybody,  
22 including a couple of people who haven't been able to make  
23 it on line or here today, to look at all those and then  
24 see if we can have an in-depth discussion over that. And I

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1 know we get tangled around the core grant issue of yes,  
2 no, no, yes, yes, no. And I think we kind of get a  
3 consensus from the members and have some great thoughtful  
4 people who are not physically present here today. And I  
5 think it's really very hard to contribute by telephone and  
6 when you're not actually in the room. So maybe we could  
7 submit some of those questions and then solicit comments  
8 and then maybe collate those comments and kind of reflect  
9 the will of the committee and then see where we're going  
10 to take that.

11 DR. KIESSLING: That's right.

12 CHAIRPERSON GALVIN: In a formal way.

13 DR. FISHBONE: If I can make one comment, I  
14 made a remark to Warren last year that it's funny how when  
15 you say you'll award up to a 1,000 -- up to a million  
16 dollars all the grants come in for a million dollars. And  
17 I said that to Warren and he said, duh. It's like what do  
18 you think is going to happen?

19 And one of the things that struck me in  
20 looking at the reviews of a number of the grants was they  
21 would put in like four aims of which three got very high  
22 remarks and -- high marks and the fourth was kind of like  
23 an add on in order to fill out the application to reach  
24 that goal. And so it may be that if one could be more

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1 focused by, you know, not trying to do so many things  
2 because you have a million dollars, but to focus in on  
3 what you're really trying to do and maybe for less time or  
4 less money. And, you know, I'm embarrassed to say this  
5 with our basic researchers, some on the phone, but it just  
6 seems to me whatever money you have available the work  
7 expands to fill that amount. I don't know who's law that  
8 is.

9 DR. KIESSLING: At some level the  
10 institution promotes that.

11 DR. FISHBONE: Is that right?

12 DR. KIESSLING: I mean if you can apply for  
13 a million dollars why would you not?

14 DR. FISHBONE: Yes.

15 DR. WALLACK: Some of this addresses  
16 exactly that point.

17 DR. KIESSLING: Right.

18 DR. WALLACK: And the next bullet was  
19 something frankly that Gerry Fishbone points out, I'd  
20 defer to Gerry, about the -- you brought that up.

21 DR. FISHBONE: Well, it was a problem I  
22 think we had in last -- in the recent reviews is that when  
23 we approved a grant it was almost assumed by those present  
24 that that meant it would get funded. And I just wondered

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1 if there is a different wording that we can use that says  
2 something is approvable or fundable so that on the evening  
3 of the first day people don't go home and call their  
4 research and say, your grant was approved when that's not  
5 quite what we meant. What we meant is that it's approved,  
6 approved for possible funding.

7 And maybe there is some word that would not  
8 be so definitive and couldn't give people the wrong  
9 impression that, you know, their grant was approved and  
10 therefore they'll be funded. So I don't know I just  
11 thought of a word fundable meaning you're in the fundable  
12 group. And then on the second day out of that we will pick  
13 the ones who actually will get the money. So just some  
14 mechanism.

15 DR. GENEL: I think that's a  
16 misunderstanding of the process rather than -- I mean  
17 basically all we're doing is putting in essentially a rank  
18 order and we're dropping off those that are clearly not  
19 going to make the pay line, if you will.

20 DR. FISHBONE: Right.

21 DR. GENEL: To say that they're funded or  
22 approved is not -- is -- I think that's a  
23 mischaracterization of what we were doing.

24 DR. FISHBONE: That's the category that we

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1 had.

2 DR. GENEL: Yes.

3 DR. FISHBONE: The language that we had,  
4 but I'm just saying is there a better language.

5 DR. GENEL: If the language is clarified  
6 then I'm fine with it.

7 DR. FISHBONE: Yes, it's not the process,  
8 it's just the language because I think some people were  
9 called at the end of the first night and told they had  
10 been approved.

11 MS. HORN: Well, I think when you put  
12 something in the yes category they tend to think that --

13 DR. FISHBONE: -- yes.

14 MS. HORN: But fundable makes it a little  
15 less clear that that's actually happened. I think that's  
16 good.

17 DR. FISHBONE: They've made it into that  
18 cut.

19 DR. KIESSLING: Can I offer one more  
20 comment on Milt's letter? One other point he makes is to  
21 consider the establishment of a scientific oversight  
22 committee or something like that. The California projects  
23 are actually rather heavily monitored. Somebody from CIM  
24 tries to visit each project, especially the big ones, once

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1 a year. Now that's kind of an onerous task, but Allen  
2 Townsend like to travel so he kind of dad flies all over  
3 the state.

4 DR. WALLACK: Who does their flying?

5 DR. KIESSLING: Pardon me?

6 DR. WALLACK: Who does their flying?

7 DR. KIESSLING: Allen Townsend, who is  
8 president of CIM. Yes, he's a -- I think he was born in  
9 an airplane. But -- because he travels more than anybody  
10 I know. But, that, I think, we've had a few people come  
11 and talk to us and I think one of the things you get from  
12 this presentation is how much they enjoyed talking to us  
13 about what they're doing. So, I don't know how to  
14 implement this. I mean I certainly can't make very many  
15 more trips to Connecticut every year. But I think to try  
16 to come up with some plan where somebody that represents  
17 the committee or some subcommittee or something visits  
18 each of the projects once a year, once every couple of  
19 years. I think we would learn a lot.

20 CHAIRPERSON GALVIN: I think that's an  
21 excellent suggestion. Our plan, as you know, and we're  
22 here in town we're building a brand new state medical  
23 laboratory and we mentioned about Dr. Fontana. He will  
24 eventually be the chief of research and development for

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1 the organization when Warren goes to the happy --

2 MR. WOLLSCHLAGER: -- hunting grounds.

3 CHAIRPERSON GALVIN: The happy hunting  
4 grounds in Providence and becomes governor and all those  
5 things. And -- but as we move out of our facility at 10  
6 Clinton Street, which any of you who haven't been there,  
7 please don't go there because it's not very -- it's a  
8 dangerous building. But as we do that we're trying to  
9 make our lab into much more of a research vehicle than  
10 into what it is now is there is some research. We do all  
11 of the neonate screening and Dr. Fontana does some  
12 interesting thing with DNA foot printing. But we spend a  
13 lot of time doing things like water samples. You know my  
14 wall doesn't smell very good will you analyze this. So we  
15 do bathing water for 26 different beaches. And these are -  
16 - I'm not saying that these are not important and  
17 desirable things. But is it really -- if we had a county  
18 system most of those things would be done in the county  
19 system, but we don't.

20 But certainly do they belong into a brand  
21 new state of the art state laboratory. I mean should we --  
22 should we be spending our time doing some of those things  
23 or very low volume, anti viral types that have nothing to  
24 do with the stuff, like West Nile stuff or Eastern Equine,

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1 stuff we're really concerned about. But I would think that  
2 Dr. Fontana would be the guy to convene a committee and  
3 have -- and as part of this director of research and  
4 development make sure he goes out and -- or get somebody  
5 to change the flavor it may be Ann goes out once and Paul  
6 goes out once a year. What do you think of that, Warren?

7 MR. WOLLSCHLAGER: Well, if I can, we  
8 talked about this if you remember, the committee remember,  
9 Milt. We brought it back to the committee ourselves after  
10 dealing with CIRM. And heard from fairly significant  
11 objections from one member of this committee.  
12 Nevertheless, we did pursue it. We actually contacted CIRM  
13 about entering into a NMO where their reviewers would come  
14 here under contract with the state and serve as on our  
15 site reviewers. We don't have the expertise inside and we  
16 didn't think we'd be putting that onus on you and it's  
17 really not what our peer review committee signs up to do.

18 CIRM has real concerns about doing it from  
19 a liability perspective. They're covered as state  
20 employees at CIRM. It wouldn't be here. And they were  
21 concerned about the liability and protection we could give  
22 them. But it's something that we have talked about. We  
23 would like to do it. It's a question of we've got to get  
24 somebody likely either who has got state liability

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1 protection or from out of state. And so we have  
2 administrative funds that could support something like  
3 that.

4 DR. WALLACK: So, Bob, part of the reason  
5 that this is -- today was an exact example of why I think  
6 we need this kind of oversight. We went through maybe 30  
7 projects. I don't know about all of you, I have to tell  
8 you that I'm not sure that we really dug deep in any of  
9 those projects. If we had, as they do in California --and  
10 one of the benefits of the ISSCR is that we learned about  
11 what they're doing there. If we had some of us  
12 volunteering even maybe under Dr. Fontana's umbrella, I  
13 know I personally would not mind being part of that team  
14 because I think it is so important and you get a different  
15 presentation and a different sense. And you can ask the  
16 questions differently just like different from the phone.  
17 When we are in the room with a Marc Volane or Hyfon Lynn  
18 or whomever it or Renee Schuler, whomever, and that's why  
19 I think that it is so important going forward that we  
20 consider implementing --

21 CHAIRPERSON GALVIN: -- I think it's very  
22 important, but with professional and personal respect  
23 towards you you're not the guy who should be doing that.  
24 I'm not the guy who should be doing that.

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1 DR. WALLACK: I'm only offering the idea  
2 that --

3 CHAIRPERSON GALVIN: -- Willy Lensch, Ann  
4 Kiessling.

5 DR. WALLACK: Right.

6 CHAIRPERSON GALVIN: Somebody has to go  
7 out, Mike -- if you and I go out they'll say, you know,  
8 this is a lamb doddy work. It makes this that or the other  
9 thing go.

10 DR. WALLACK: It would be beneficial  
11 though. Don't overlook this or think that this isn't  
12 important. If a Willy Lensch went out and if one of us  
13 went out with a Willy Lensch.

14 CHAIRPERSON GALVIN: Yes.

15 DR. WALLACK: I think that becomes a very,  
16 very interesting powerful possibility.

17 CHAIRPERSON GALVIN: That's okay, but I  
18 mean you and I would go out there they could tell us that  
19 the guy's chicken sandwich was something that came out of  
20 the incubator and we probably wouldn't know the  
21 difference.

22 DR. WALLACK: But the combination works.

23 CHAIRPERSON GALVIN: Absolutely.

24 DR. PESCATELLO: I have an idea that this

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1 sort of addresses a lot of the things we're talking about  
2 in having some kind of subcommittee or advisory  
3 subcommittee of venture capitalists would be very valuable  
4 because -- this is something that they're not going to  
5 invest -- my earlier comments, but this is basic research  
6 and even if it becomes more than basic research it's still  
7 so far from venture capital funding you're not going to  
8 run into a conflict issue. But I go to a lot of venture  
9 capital meetings and I mean they go right to the heart of  
10 whether something is -- something can be translated. And  
11 they're -- and frankly they're right they have -- they  
12 know a lot of scientists. They're usually M.D.'s, Ph.D.'s,  
13 and they go right to the heart of the science and could  
14 probably tell a lot better than a lot of us, including  
15 myself.

16 DR. KIESSLING: I think that's a really  
17 good idea.

18 DR. PESCATELLO: And I think they do it  
19 because as long as they don't have to participate in a lot  
20 of the administrative work that we all do then they're  
21 just doing sort of almost hearing the pitch of the  
22 researchers and then making their - -

23 CHAIRPERSON GALVIN: -- that's a great  
24 idea.

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1 DR. KIESSLING: Yes. And it would be --  
2 they could come back and report to us. One of the  
3 interesting things that's come out of the California kind  
4 -- I don't think they just drop in. I think these people  
5 know they're coming and it isn't considered a site visit  
6 and it's sort of considered a friendly, you know, how is  
7 it going and whatever visit -- is they can pick up on  
8 things that they see that are being duplicated because  
9 investigators are not always really good to communicate.  
10 So, all of a sudden they'll realize that they've got three  
11 groups or four groups that may be doing something really  
12 similar or one group is stuck on something that another  
13 group has already solved. So it really makes the state  
14 funding a lot more efficient if you can help kind of get  
15 around some of the road blocks that other people have --  
16 so, and especially when you're dealing with the kind of  
17 budget that Connecticut -- I mean the fact that this great  
18 work is coming out of this ten million dollars a year I  
19 think is just mind boggling. But that would be great.

20 MR. WOLLSCHLAGER: That's right.

21 DR. KIESSLING: And venture capitalist  
22 people would be really good at that.

23 MR. WOLLSCHLAGER: Because it -- they do  
24 take a non regulatory approach to the site visits.

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1 DR. KIESSLING: Right.

2 MR. WOLLSCHLAGER: They're very strict with  
3 them.

4 MR. HART: I've got to sign off and go to  
5 another meeting. But thanks very much.

6 CHAIRPERSON GALVIN: Thank you.

7 MS. HORN: Thank you.

8 MR. WOLLSCHLAGER: They're very tight on  
9 the money, the audits, but not -- it's more of a  
10 consultant type of visit from what I understood.

11 DR. KIESSLING: Yes. It's just a drop in  
12 visit, how is it going.

13 CHAIRPERSON GALVIN: This is another point  
14 that we need the entire memberships to ponder at least by  
15 email.

16 MR. WOLLSCHLAGER: I will say we have like  
17 three meetings where the record is on this thing. We've  
18 talked about this before. This is a great --

19 CHAIRPERSON GALVIN: -- well, I think we  
20 should --

21 MR. WOLLSCHLAGER: -- option for maybe  
22 addressing it.

23 CHAIRPERSON GALVIN: I think we should  
24 operationalize it. So we'll work on that. Won't you?

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1 MR. WOLLSCHLAGER: I will. I will work  
2 closely with Dr. Pescatello on it.

3 MS. HORN: So I heard an idea for, you were  
4 mentioning a specific kind of subcommittee, but would this  
5 proposal that you're -- all the idea, Milt, that you're  
6 talking about fit into a subcommittee and then --

7 DR. WALLACK: -- sure.

8 MS. HORN: And then you could come back to  
9 this committee with it fully, more fully formed.

10 DR. WALLACK: And we can populate the  
11 subcommittee. I mean --

12 DR. KIESSLING: -- it sounds more like an  
13 advisory group.

14 DR. WALLACK: Right. And if Paul is able  
15 to put together that committee it doesn't mean that some  
16 of us wouldn't sit --

17 DR. PESCATELLO: -- yes, sure. I mean  
18 you'd hear the kind of questions and you hear the response  
19 and when you -- it's amazing when you go to these VC  
20 meetings they literally limit it to five minutes  
21 sometimes. And you've got to make your most -- the most  
22 distilled pitch in five minutes.

23 DR. KIESSLING: Your elevator speech.

24 DR. PESCATELLO: Your elevator -- of

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1 course, sometimes it's 15 minutes, but -- and then it's  
2 over the questions from them. And it's amazing what they  
3 can ferret out in 15 minutes.

4 CHAIRPERSON GALVIN: Warren, as we begin to  
5 move forward can we -- do you think we could include Dr.  
6 Fontana?

7 MR. WOLLSCHLAGER: Sure.

8 CHAIRPERSON GALVIN: In some of these  
9 discussions because --

10 DR. WALLACK: -- that would be fantastic.

11 CHAIRPERSON GALVIN: Yes. He's a terrific  
12 person besides being a great scientist.

13 MR. WOLLSCHLAGER: We're going out to visit  
14 the core facility at UCONN on Friday.

15 CHAIRPERSON GALVIN: Okay. Good. All  
16 right, Dr. Wallack, are you okay?

17 DR. WALLACK: I think that picking up on  
18 Paul's point and bringing it back full circle and that is  
19 the last point that I would hope that we start  
20 considering, and some of us have been at the table where  
21 we've tried to do this in the past, we brought together  
22 Pfizer, and that is begin to look very seriously at where  
23 we can establish better partnerships with pharmaceutical  
24 companies, start up companies and so forth. And putting

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1 together that kind of initial step enables us to be able  
2 to have a relationship that we can build upon. So that's  
3 --

4 CHAIRPERSON GALVIN: -- that's terrific.  
5 That's a terrific idea because one of the first questions  
6 whoever the new governor is going to say, where does this  
7 fit in with business things?

8 DR. WALLACK: Part --

9 DR. PESCATELLO: -- bear in mind the VC  
10 world is just going to -- the VC idea is very different  
11 from Pfizer, industry. So the VC's are investors and they  
12 just have a completely different view.

13 DR. WALLACK: I understand. But it's an  
14 extension of that and I would want us to be beginning to  
15 in part focusing, again, on the need. And to your point,  
16 Warren, we talked about getting out in the field. We  
17 talked about doing this kind of relationship building  
18 also. We've been busy with other things. So now hopefully  
19 we come back to this -- so that would be my recommendation  
20 for, through the Chair, coming up with some type of an  
21 approach that would enable us to be able to have these  
22 kinds of relationships.

23 CHAIRPERSON GALVIN: Okay.

24 MR. WOLLSCHLAGER: I don't really see the

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1 department putting together those kinds of relationships  
2 with the Pfizer's and this group.

3 DR. WALLACK: No, but we --

4 MR. WOLLSCHLAGER: -- if we had a committee  
5 where you were out there --

6 DR. WALLACK: -- so Chelsey, it's CI. So,  
7 CI was involved in the University of Bridgeport in an  
8 enterprise, what did they call it?

9 MS. SARNECKY: The --

10 MR. WAGNER: -- an incubator?

11 DR. WALLACK: Right. So just yesterday the  
12 Governor came out with this statement that she wants to  
13 now expand it to the University of Connecticut and connect  
14 with businesses in the state. We should be -- and she  
15 identifies stem cell research in that statement that she  
16 made yesterday as one opportunity. Well, we're sitting  
17 here being the overseers of stem cell.

18 CHAIRPERSON GALVIN: Um, hmm.

19 DR. WALLACK: What I'm suggesting is that  
20 we can be at the table and try to help to move that  
21 forward and bringing the universities up close and in  
22 person with these people also.

23 CHAIRPERSON GALVIN: I think we need to  
24 develop some sort of an idea about what we want to do and

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1 how it would be done.

2 MR. WOLLSCHLAGER: Maybe we need to develop  
3 that a little bit more. I don't understand what you're  
4 talking about and I really don't know what the department  
5 would be doing here.

6 CHAIRPERSON GALVIN: Yes, it's difficult --

7 MR. WOLLSCHLAGER: -- it's very, very soft  
8 to me.

9 CHAIRPERSON GALVIN: It's difficult, it  
10 would be difficult, it is difficult for us to go out and  
11 talk to certain entities. You know, we can form  
12 memorandum of understanding and align with the state  
13 university, but they're very, very separate. And we can --  
14 I think we could certainly help the committee develop the  
15 concept.

16 MR. WOLLSCHLAGER: I mean if you think how  
17 many conversations we had with G.E. and with all these  
18 other entities, big major players on --

19 DR. WALLACK: -- so we can certainly  
20 discuss this away from the table today. But just an  
21 example, in Cheshire you have Alexon. So I had contact  
22 with one of the founders of Alexon over the years and  
23 they've not been interested in doing anything with stem  
24 cell research up until this point. Low and behold, this

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1 year now, as we speak, they are at least thinking -- they  
2 are agreeable to seeing if they can partner in the  
3 statewide effort, maybe partner with Yale University,  
4 which is in their neighborhood. We can have the capacity,  
5 I think, to help bring companies like that into what we're  
6 trying to do. That's all I'm trying to say.

7 DR. GENEL: Is this something that's more  
8 in the mission of Connecticut Innovations?

9 MS. SARNECKY: I'm sorry, I wasn't  
10 following.

11 DR. GENEL: No?

12 MR. WAGNER: No.

13 DR. GENEL: No.

14 MR. WAGNER: I mean we administer this fund  
15 from a --

16 DR. GENEL: -- so you are --

17 MR. WAGNER: -- we have no funding for  
18 other responsibilities that we wish to assume.

19 DR. GENEL: So you receive you don't go out  
20 and initiate.

21 DR. PESCATELLO: Is an investor and then  
22 this -- the administration of this fund was put on them --  
23 I'm a Board member so --

24 CHAIRPERSON GALVIN: -- the Connecticut

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1 development --

2 DR. PESCATELLO: -- but they don't get any  
3 funding.

4 MR. WOLLSCHLAGER: But there are economic  
5 development agents out there within quasi and executive  
6 branch agencies who do that stuff.

7 CHAIRPERSON GALVIN: But we went around and  
8 we made -- we made the treks and we sat with the GE's and  
9 the big business people and, of course, they're very  
10 polite and very interested, but kind of bottom line on  
11 this stuff is don't you guys work for the State of  
12 Connecticut? And we go, um, huh. Why don't you go back to  
13 the governor and the legislative people and ask them,  
14 don't come down here and ask me to give you money. Go the  
15 legislature and ask them to give you money. And then --

16 MR. WOLLSCHLAGER: -- and our money we'll  
17 give directly to Yale. Why should we go through you?

18 CHAIRPERSON GALVIN: Yes, if we wanted get  
19 research done at Yale we give the money to Yale. We don't  
20 want you to give it to Yale.

21 DR. PESCATELLO: So what I was saying is  
22 more like a VC committee.

23 CHAIRPERSON GALVIN: Yes.

24 DR. KIESSLING: Yes.

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1 DR. PESCATELLO: After sort of the first  
2 cut has been made by peer reviewers, the scientific peer  
3 review, you show it to a VC committee to have that  
4 translational --

5 DR. KIESSLING: -- that's good. Or just go  
6 out after two years and say, how is it going.

7 DR. PESCATELLO: Yes.

8 CHAIRPERSON GALVIN: We need to develop  
9 some ideas and get just kind of a consensus and get  
10 everybody in the group involved.

11 DR. KIESSLING: Scientists are very bad  
12 business people even the ones who think they're very good  
13 business people are very bad business people except for  
14 Craig Ventnor.

15 CHAIRPERSON GALVIN: I have one, several  
16 thoughts that have been already articulated by Dr. Wallack  
17 and others. But I found this year that there was a lot of  
18 backing and filling on these better grants. If you stop  
19 with -- start with the very best grant and go down ten  
20 you're out of money. If you start with like a 4.2 and go  
21 up, by the time you get to two you're out of money. And  
22 I'm not sure how we remedy that.

23 I wonder if we want -- we have -- we're  
24 going to have to have a new chairman of the review,

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1 external review committee because our friend from  
2 California is not going to do it anymore.

3 MR. WOLLSCHLAGER: And none of the current  
4 have agreed.

5 CHAIRPERSON GALVIN: What's that?

6 MR. WOLLSCHLAGER: None of the current  
7 remaining peer reviewers are willing to do it.

8 DR. KIESSLING: Warren, if you need some  
9 suggestions let me know.

10 CHAIRPERSON GALVIN: With a new  
11 chairperson, would we want that person to be in attendance  
12 at our two day meeting, paid attendance so that we could  
13 say to him, so we can sit there at a nice little desk and  
14 a chair and we can say to him, tell us what the three  
15 reviewers thought of this. Because I know sometimes we're  
16 kind of trying to divine exactly what the -- what did he  
17 mean? I think this -- we spend a lot of time going back  
18 and forth and we got into some issues this time about  
19 diversity. I mean I don't know what -- I mean making sure  
20 every applying university gets at least one grant. Well,  
21 that's kind of foolish.

22 But maybe we would want that person there  
23 as the guy who has talked to the reviewers and said, you  
24 know, we thought this was really because of this. We

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1 thought this was really not quite so good because of that.  
2 So that's something you might think about.

3 MR. WOLLSCHLAGER: I'm not sure that will  
4 make it any easier to recruit a chair, but maybe it would.  
5 I don't know. I just don't know the model.

6 CHAIRPERSON GALVIN: Yes. I don't know  
7 that's just something I thought of.

8 DR. GENEL: I would look very, very  
9 cautiously because I think it mixes up what are intended  
10 to be two separate processes. I mean our job as an  
11 overview review committee is to make judgments as to where  
12 funding should go not to necessarily second guess the peer  
13 review. I think we have to go by that. And it also puts  
14 the chair, I think, in a very difficult position. I would  
15 be very, very cautious about that.

16 CHAIRPERSON GALVIN: Well, those are  
17 certainly very --

18 DR. GENEL: -- aside from the issue as to  
19 whether or not recruiting a chair and then saying in  
20 addition to everything else we'd like you to come and  
21 spend two days with the --

22 MS. HORN: -- that would be a problem.

23 CHAIRPERSON GALVIN: I know that Ron Hart  
24 and I -- Ron had a conversation when he got stuck there

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1 about why do we ask these people to spend all this time  
2 doing the grants and give them scores and then start  
3 saying, well, you know, I don't think is that. And I know  
4 good old so and so used to work for good old such and  
5 such. And I still think we get into a lot of personal  
6 stuff on these grants which I'd like to avoid.

7 DR. GENEL: No argument with that. But I do  
8 think we have to make -- we have to make policy type  
9 judgments and sometimes that has to mean that you go in  
10 the face of a peer review.

11 CHAIRPERSON GALVIN: Yes.

12 DR. GENEL: In other words, I think --

13 CHAIRPERSON GALVIN: -- absolutely.

14 DR. GENEL: That's our job is to make those  
15 judgments.

16 CHAIRPERSON GALVIN: I agree.

17 DR. DEES: Sometimes what we value is not  
18 justified on its merit of a project but also the  
19 scientific merit combined with other goals that we have  
20 like promoting --

21 CHAIRPERSON GALVIN: -- exactly. Agreed.

22 Can we go to Item No. 11, are you prepared, Mr.  
23 Wollschlager?

24 MR. WOLLSCHLAGER: Uh --

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1 CHAIRPERSON GALVIN: -- you're always  
2 prepared, I know that.

3 MR. WOLLSCHLAGER: You brought it up  
4 actually, Dr. Kiessling, two things. There are openings  
5 now on peer review and a bunch of openings on this  
6 committee. Again, Dr. Latham is gone now. And so I'm  
7 going to ask, as a first step, to begin to think again and  
8 nominate to the department folks that you might think  
9 would be good in either one of those capacities. I will  
10 say that Dr. Gary Stein, who is a current peer reviewer,  
11 is very -- up to UMASS, wants to come down here, and has  
12 wanted to but we begged him to stay on as a peer reviewer  
13 just so we had enough people. So that's one scientist.  
14 But we're looking for scientists. We'd be looking for  
15 ethicists. We're looking for a whole slew of folks.

16 DR. KIESSLING: Yes, I was going to say --  
17 you need scientists, ethicists, lay people? I mean this  
18 committee could use some more lay people.

19 MR. WOLLSCHLAGER: And for peer review it's  
20 scientists.

21 DR. KIESSLING: Is there a defined number  
22 of lay people to be on this committee?

23 MR. WOLLSCHLAGER: I can send you the --

24 DR. KIESSLING: -- the charter.

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1 MR. WOLLSCHLAGER: There is a chart of  
2 openings and what type of background they have to have.

3 DR. KIESSLING: Okay.

4 MR. WOLLSCHLAGER: I'll send that out to  
5 the whole committee.

6 CHAIRPERSON GALVIN: I think there is only  
7 one opening for somebody who is not an ethicist or a  
8 scientist.

9 MR. WOLLSCHLAGER: Yes, there is not really  
10 a good -- there is a business person, two business people,  
11 I think, we're up to now.

12 DR. KIESSLING: Is Dr. Mandelkern, he's  
13 still part of the committee.

14 MS. HORN: He is.

15 MR. WOLLSCHLAGER: He's not as a consumer  
16 or an advocate.

17 DR. KIESSLING: Yes, he's a business  
18 person, okay.

19 CHAIRPERSON GALVIN: Okay, any --

20 DR. KIESSLING: -- how many peer reviewers  
21 do you need?

22 MR. WOLLSCHLAGER: I anticipate needing as  
23 many as four or five.

24 DR. KIESSLING: And they can be anywhere in

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1 the world?

2 MR. WOLLSCHLAGER: Yes. They've got to be  
3 willing to do it for using a very different system and  
4 very little compensation.

5 CHAIRPERSON GALVIN: What's the  
6 compensation?

7 MR. WOLLSCHLAGER: It can't go above 20, I  
8 think this year we got it up to 2750 for, 2,750 for  
9 literally 89 reviews.

10 DR. KIESSLING: Wow that's a lot more than  
11 NIH pays.

12 CHAIRPERSON GALVIN: It's how much per  
13 review?

14 MR. WOLLSCHLAGER: 2,900 dollars total per  
15 reviewer.

16 CHAIRPERSON GALVIN: Okay.

17 MR. WOLLSCHLAGER: For hundreds of hours of  
18 work.

19 CHAIRPERSON GALVIN: Yes.

20 DR. KIESSLING: NIH pays 250 a day. And I  
21 think we need maybe neuro psych.

22 MR. WOLLSCHLAGER: Yes, and anybody with a  
23 particular background in neuro is helpful as well.

24 CHAIRPERSON GALVIN: Okay. Look through

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1 the colleges to have some people who were in neuro science  
2 there. One of my former patients, but she's moved onto  
3 the west coast.

4 DR. GENEL: I presume you would prefer not  
5 to have people who are a Yale or UCONN employee.

6 MR. WOLLSCHLAGER: Right. In fact, we've  
7 made a policy decision not to use anybody with Yale or  
8 UCONN. No one is from the state.

9 DR. KIESSLING: For peer review?

10 MR. WOLLSCHLAGER: Right. Of all the  
11 current committee members and the openings --

12 DR. DEES: -- how many applicants do you  
13 need?

14 MS. HORN: I think we just need one right  
15 now to replace --

16 DR. DEES: -- to replace Steve.

17 MS. HORN: Yes.

18 MR. WOLLSCHLAGER: Assuming that Dr. Dees  
19 is going to --

20 DR. DEES: -- my appointment isn't up for  
21 at least another year, I think.

22 MS. HORN: Our new chair of legal and  
23 ethics committee.

24 MR. WOLLSCHLAGER: Thanks so I'll get that

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1 out to people and try to bring it back on the agenda for  
2 the next meeting.

3 CHAIRPERSON GALVIN: Okay. Is there any  
4 other business? Is there any public comment?

5 MR. WOLLSCHLAGER: I just want to  
6 acknowledge this is -- CI did a heck of a lot of work for  
7 this committee.

8 CHAIRPERSON GALVIN: Yes, I was just saying  
9 that both Dan and Chelsey did a superb job and a lot of  
10 hard work.

11 And hearing no further business, I will  
12 entertain a motion to adjourn.

13 DR. FISHBONE: So moved.

14 CHAIRPERSON GALVIN: And I'll second. And  
15 all in favor for adjourning indicate by saying aye.

16 ALL VOICES: Aye.

17 CHAIRPERSON GALVIN: And we are adjourned.

18 Thank you.

19 (Whereupon, the meeting was adjourned at  
20 3:57 p.m.)