

June 30, 2023

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Re: National Institute of Dental and Craniofacial Research's Request for Input on the Renewal of NIDCR's FaceBase Program.

via website: https://www.nidcr.nih.gov/grants-funding/funding-priorities/future-research-initiatives-concept-clearances/may-2023-input-request?utm_medium=email&utm_source=govdelivery

The American Association for Dental, Oral, and Craniofacial Research (AADOOCR) is the leading professional community for multidisciplinary scientists who advance dental, oral, and craniofacial research. We appreciate the opportunity to share our thoughts on the request for input on the renewal of the FaceBase Program. AADOOCR recognizes and applauds the National Institute of Dental and Craniofacial Research's (NIDCR) efforts towards publicly sharing research and clinical data that cover the full translational spectrum in specific dental, oral, and craniofacial research areas. To respond to this request for comments, AADOOCR engaged its Science Information Committee and its Board of Directors.

AADOOCR would like to congratulate NIDCR on a program that has become the central repository of dental, oral, and craniofacial (DOC) datasets generated using a variety of molecular, cellular, genomic, and imaging technologies. It is encouraging to know that website usage shows an upward trend, accommodating 21,000 unique website visitors and 29,000 user sessions over the past year. The utility of this program is further demonstrated by the reuse of the data in DOC and other biomedical research, having led to publications on the shared genetics of human face and brain shape, the regulatory pathway reconstitution, and the impact of caries on the overall health. **AADOOCR supports the reissuance of the FaceBase program** to foster data sharing and to carry out data-driven research towards the discovery and delivery of health solutions. This program is undoubtedly a very valuable mechanism for leveraging ongoing studies and/or data.

Open data sharing is becoming increasingly important to enhance rigor and reproducibility in science as a whole¹ and journals will continue to drive towards higher levels of data accessibility. The leveraging of FaceBase for the training of researchers to curate data according to FAIR principles is also quite useful for future generations of

data scientists. FaceBase provides an exemplar of how complex data sets can be managed in a way that they can be usefully shared, with appropriate metadata included. Therefore, **AADOCR supports aligning FaceBase with other repositories to improve data sharing more widely.**

Over the past 15 years, NIH has made significant changes to Resource Sharing requirements for grantees, most recently creating the Data Management and Sharing plan independent from Resource Sharing. It is also important that this FaceBase program cycle consider how to efficiently and timely process what will continue to be a steady increase in the number of requests for acceptance of new data. This can be facilitated with a clear definition of the types of data that would be acceptable to the program. **AADOCR supports NIDCR providing well-defined indications of data that would or would not be acceptable.** This will accelerate the ability for investigators with unacceptable data types to search for an alternate repository early in their project.

AADOCR appreciates the opportunity to provide comments on the request for input on the renewal of the FaceBase Program. AADOCR stands ready to work with the NIDCR to enable and accelerate data-driven efforts in knowledge discovery, translation of knowledge gained into health and health care solutions, and the delivery of those solutions.

If you have any further questions, please contact Dr. Makyba Charles-Ayinde, Director of Science Policy, at mcayinde@iadr.org.

Sincerely,



Christopher H. Fox, DMD, DMSc
Chief Executive Officer



Alexandre Vieira, DDS, MS, PhD
President

¹ Brito J, Li J, Moore J, Greene C, Nogoy N, Garmire L, and Mangul S. (2020). Recommendations to Enhance Rigor and Reproducibility in Biomedical Research. *GigaScience*. 9(6):1-6.