



Drugs for Neglected Diseases *initiative*

Progress in India in Medical Research New Treatments for Neglected Diseases from Research to Implementation

New Delhi, 3rd December 2010: Over 150 Indian and international health researchers, policy makers, experts from 22 countries met on December 3rd, at the Constitutional Club in New Delhi for the 3rd International Partners meeting organized by Drugs for Neglected Diseases *initiative* (DNDi) in collaboration with Indian Council for Medical Research (ICMR) to stimulate greater regional research partnership to fight the most neglected diseases such as Kala-azar sleeping sickness, malaria and Chagas disease

Hon'ble Union Minister Shri Ghulam Nabi Azad, Ministry of Health & Family Welfare was invited to open this international meeting in presence of Dr. V.M. Katoch, Secretary to Government of India, Department of Health research and Director General of ICMR.

During this meeting on Research & Development for neglected diseases, two projects were highlighted as DNDi's successes of the Year 2010 respectively. These projects showed important breakthrough in research and development for neglected diseases and global collaboration between scientists from over the world.

Better treatments are still desperately needed by millions of the world's poorest people as current therapies are often toxic, prohibitively expensive, or difficult to administer, particularly in resource-poor settings. Little progress was made in the past thirty years: only 1.3% (21 out of 1,556) of new drugs developed from 1975 to 2004 were addressing neglected tropical diseases and tuberculosis even though these diseases account for 12% of the global disease burden.

The "Project of the year" award went to the Visceral Leishmaniasis Combination Therapies project in India. This clinical research study completed in 2010 showed that three combination therapies of existing drugs for Visceral Leishmaniasis (VL) also called Kala-azar are highly efficacious and are offering shorter, safer and cheaper treatment options than the current standard monotherapy treatment available in the region. The results will be published in *The Lancet* within the coming days.

This project has been developed in collaboration with ICMR, the Rajendra Memorial Research Institute of Medical Sciences (RMRI) in Patna and the Kala Azar Medical Research Centre (KAMRC) in Muzafarpur.

"New treatments for Kala-azar involving combination therapies of drugs could offer shorter, safer, and cheaper treatment options than the current standard monotherapy treatment available", said Dr Bernard Pecoul, DNDi Executive Director. *"The challenge now is to*

move from research into practices to reach the patients in need at community level” added Dr Pecoul, Executive Director at DNDi.

Kala-azar mainly occurs in poor, remote areas in South Asia, East Africa, and South America. VL is characterized by prolonged fever, enlarged spleen and liver, substantial weight loss, and progressive anemia. If left untreated, the disease is fatal. To this day, existing treatments have serious limitations such as potential of resistance, low tolerability, long treatment duration, and difficulty in administration. Furthermore, they can be expensive.

To facilitate the introduction of these new treatments in India and South Asia, DNDi will actively collaborate with health authorities at national and regional level. DNDi would like to implement effectiveness studies in India to demonstrate that such treatments can be feasibly and safely implemented at the primary health care setting.

The “Partnership of the Year” award went to the Institute Pasteur Korea programme for an important technological breakthrough on drug discovery in the field of Kala-azar and other neglected diseases. Since 2008 for the first time in the field of neglected diseases a method called “high throughput image screening” can allow the testing of thousands of compounds in a very short period of time. So far more than 350 000 compounds have been screened from different libraries of private partners, pharmaceutical and biotech’s companies. As a result of this partnership, one compound series showed very promising results that could lead to a new potential candidate for treatment which is now in further development at the Indian pharmaceutical company, Advinus Therapeutics in Bangalore, and at the Central Drug Research Institute in Lucknow (India).

The Board of Directors reviewing the DNDi’s business plan until 2018 agreed to consider extension of the R&D portfolio to address specific areas of need into two new diseases. These mini portfolios of research could include the development of new drugs to treat patients infected with onchocerciasis / river blindness who cannot be treated with currently available drugs, and the development of paediatric formulations of HIV anti retroviral drugs.

In India, DNDi is successfully conducting several projects with Indian partners both from the public and private sector and at different stages of R&D drug development with the objective to develop new treatments and to use and strengthen existing research capacities for neglected diseases.

Movies are available on the Project and Partnership of the Year 2010.

About DNDi. DNDi (Drugs for Neglected Diseases *initiative*) is a patient-needs driven, not-for-profit drug R&D organization that is currently developing new treatments against the most neglected diseases such as sleeping sickness (or human African trypanosomiasis, HAT), leishmaniasis, Chagas disease and malaria. The initiative's primary objective is to deliver six to eight new treatments by 2014 and to establish a strong R&D portfolio for these diseases. In doing so, DNDi is also working to use and strengthen existing capacities in disease-endemic countries, and advocate for increased public responsibility. DNDi was established in 2003 by the Indian Council for Medical Research (ICMR), Brazil's Oswaldo Cruz Foundation (Fiocruz), the Kenya Medical Research Institute (KEMRI), the Ministry of Health of Malaysia, the Pasteur Institute in France, and Médecins Sans Frontières/Doctors Without Borders (MSF), with the World Health Organization/TDR as a permanent observer. Since 2007, DNDi has delivered three treatments including two fixed-dose anti-malarials "ASAQ" and "ASMQ", and the combination treatment NECT (nifurtimox-eflornithine combination therapy) for the advanced stage of sleeping sickness.

DNDi in India

With support from DNDi's founding member, the India Council of Medical Research (ICMR), DNDi opened the regional support office in India in 2005 to support and catalyse DNDi's operational activities, namely in the field of two diseases, malaria and visceral leishmaniasis (VL). These two diseases are prevalent in India and affect more than 3 million Indians each year, according to Indian government estimates. In addition to close networks with researchers, academics and drug development experts, DNDi India undertakes a series of initiatives to strengthen its role in advocacy for neglected disease patients and to raise awareness over their plight.

For more information: www.dndi.org

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