CHAGAS DISEASE

- **Trypanosoma cruzi** parasite transmitted by the bite of a triatomine vector known as the ‘kissing bug’
- Congenital transmission, blood transfusion, organ transplantation, or ingestion of contaminated food or beverages also possible
- Endemic in 21 countries in Latin America but also in Europe, North America, Japan, and Australia
- Occurs in two phases:
  - the initial acute phase, with no or unspecific symptoms in most cases; lasts for about two months after infection, and
  - the chronic phase, where the parasites are hidden mainly in the heart and digestive muscles.
- Up to 30% of chronically infected people develop cardiac alterations and up to 10% develop digestive, neurological, or mixed alterations. In later years, can lead to sudden death due to cardiac complications.

Current available treatments are more than 40 years old, and while they show good efficacy in the acute phase, they need to be used in long regimens and cause significant side effects. The efficacy and safety of shorter treatment courses and/or at lower doses need to be explored. New drugs and new combinations are also needed, and there is currently no approved treatment for the chronic form of the disease.

Lastly, the dire situation of access and extremely limited use of existing drugs needs to be tackled, caused by a lack of guidelines and policies supporting implementation and the poor availability of medicines.

**DNDi aims to deliver:**
- Alternative regimens of existing drugs (lower doses, shorter treatment duration, and combinations)
- A safe and efficacious new drug treatment of chronic Chagas patients, ideally efficacious for acute Chagas patients, also safe to use during pregnancy
- An early test of cure and/or markers of therapeutic response