

EDCTP
3rd Annual Forum
9-11 October 2006
Stockholm, Sweden

Multi-centre Partnerships for Clinical Trials in Africa

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Abstract

Several recent progresses have been made in the understanding of the immunology, pathogenesis and mode of transmission of the main poverty related diseases. These and a sharp increase in interest and funding from the scientific community and various international funding agencies carry much hope for a brighter future in the fight against these diseases. As a result, several promising vaccines, drugs and diagnostics have been discovered and carried to the phase of clinical testing. It is essential to conduct these trials in those very countries where the diseases are most prevalent. Yet, the infrastructure, legal and regulatory environment and human expertise are very scarce in Africa. This makes it all the more indispensable for African institutions to team up and work together in close collaboration with their Northern partners. Multi-center partnerships are necessary in all stages of clinical trial in Africa including planning, recruitment, conduct of trials, data management ethics and dissemination of information. Several recent initiatives either driven from within Africa or inspired from the North are attempting to promote closer ties between African scientists and trial centers. These initiatives will be reviewed, major roadblocks for efficient collaboration, strategies for better output, advocacy issue will be discussed.

Background

- Several recent progresses have been made in the understanding of the immunology, pathogenesis and mode of transmission of the main poverty related diseases.
- Sharp increase in interest and funding from the scientific community and
- various international funding agencies carry much hope for a brighter future in the fight against these diseases.

Background

- Several promising products under development
 - New products
 - New/old products
 - Old/New products
 - Combinations of the above
- Vaccines,
- Drugs,
- Diagnostics
- Devices

NEED TO BE TESTED IN THE FIELD IN AFRICA

ROAD BLOCKS

- Scarcity of human expertise
- Lack of basic infrastructure
- Lack/weak or outdated legal and regulatory environment
- Absent/poor ethical oversight

Solutions

- Training, Training, Training local scientists
- Capacity development
- Empowering local professionals
- ***Multi-centre partnerships***

Examples

- Multi-centre clinical trials
 - Investigator driven (some EDCTP projects)
 - Pharma/Sponsor driven
- Networks of African Institutions
 - EANMAT, WANMAT, etc.
 - MIM-ADRN
- AMANET
- WACCS (West African Consortium for Clinical Studies)
- MCTA/INDEPTH
- Etc.

Questions

- Why do we need multi-centre partnerships in Africa?
- What aspects of clinical trials should be covered in those partnerships?
- What can we learn from the existing partnerships?
- What needs improvement and how to make these happen?
- How can we assess the impact of existing networks?
- What new types of partnerships are needed?