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Title: Building Bridges between Clinical Trials and Health Care Delivery in Africa

Author: Pascoal Mocumbi, High Representative, EDCTP

Introduction – I join the ED in saluting all present and express my appreciation to the hosting country for the warm Burkinabe hospitality. I was asked to speak about "Building bridges between clinical trials and health care delivery in Africa". Three points to remind what our partnership stands for:

- 1 EDCTP overall goal is to reduce poverty in developing countries by improving the health of the populations mostly affected by HIV/AIDS, Tuberculosis and malaria. Because effective clinical tools are still missing in Africa, the three diseases persist and continue causing ill health (morbidity), death (mortality) and great impact on the economic development of individuals, the family and the community at large in Africa. This is not only attributed to lack of effective tools but also to weakness of healthcare systems and other factors associated with poverty.
- 2 Poverty reduction requires concerted collaboration between organizations like ECTP working to accelerate the development of new clinical tools and other stakeholders interested in reducing disease burden for health improvement particularly organizations supporting the strengthening of healthcare delivery system to ensure that populations have equal access to quality health that enable them to up-lift themselves.
- 3 Development of new products and subsequent access to them for prevention and cure has a unique contribution towards reduction of disease burden and enabling individuals and communities to enjoy better health and make use of their potential to engage in productive activities to reduce poverty and promote sustainable development activities.

Building bridges for better health is a call for linkages between our partnership and stakeholders in the areas of evidence-based research, best practices, enhanced national capacities for strengthened community-based health systems, procurement and deployment of public goods and training of a vibrant and creative health research networks in sub-Saharan Africa.

Bridging clinical trials and health care delivery in Africa

Why Now?

- EDCTP has now more than 50 projects, some still under negotiation and others already up and running in 21 African countries this achievement opens a unique window of opportunity to engage stakeholders in enhancing capacity and participation to close the gap in health systems;
- The EDCTP funded HIV clinical trial conducted in Zambia led by Prof Chifumbe Chintu, has contributed to the FDA granting tentative approval for the registration of Triomune Baby and Junior for use in children. This is the first fixed-dose anti HIV product designed for treatment of children under twelve years of age infected with HIV/AIDS.
- New malaria artemisinin-based combination therapies (ACTs) could be approved for use in about a year's time and current anti-malaria interventions, such as bed-nets and mosquito control, are reaching more and more people across Africa and they are making a difference.
- There is also hope in relation to malaria vaccine research. Results from the experimental malaria vaccine RTS,S has recently shown an encouraging safety profile and some promise in reduction of malaria infection in African infants as shown by the clinical study conducted at the Manhica health research Center in a highly endemic area of Mozambique. More work is underway even with alternative vaccines.
- EDCTP is ready to expand its integrated approach to clinical trials and support capacity development in Africa as illustrated by calls for capacity building still running; Progress made and recent achievements in clinical research urge for bridging clinical research to healthcare delivery.

The way forward - translating commitments into facts

As a successful partnership based on its long-term commitment EDCTP must continue mobilization of the constituencies to persevere working together to achieve the agreed mission, objectives and ultimate



goals. Moreover, EDCTP has developed relationships and explored synergies and complementarities with likeminded organizations and the process continues. Now that EDCTP has overcome the difficulties that characterized the initial phase of its existence, it is set to scale up its activities as a trusted connector whose niche is clinical trials for development of medicines for poverty related diseases.

The experience of the stakeholders meetings has demonstrated its usefulness as a methodology for exploring synergies and complementarities between interested parties in accelerating development of new clinical tools to control effectively poverty related diseases and improve health of affected populations. The site visits to EDCTP funded projects have clearly shown to us that clinical trials conducted in endemic areas are addressing the same populations and communities that also require healthcare providers. Visiting sites like, for example, Kisumu, in Kenya and Lambarene, in Gabon with the EDCTP team, I was impressed by the level of receptiveness of the communities. The communities really appreciate both the long term benefits of clinical trials and the short term benefits too including upgrades at the hospitals and clinics, the medical training of the staff in the latest treatment techniques and access to modern equipment for improved diagnosis and treatment of diseases. It therefore makes sense to plan and make parallel investment in the healthcare delivery system whenever clinical trials are being conducted. EDCTP major funders committed funding fall short of the ultimate goal. We absolutely need more financial resources to do both collaborating with partner organizations, such as:

At global level:

- Global Forum for Health Research, Committee on Health Research for Development (COHRED); Partners of the OECD medicines for neglected diseases Noordwijk agenda; Global Fund to fight AIDS, Tuberculosis and Malaria (GFATM), BMGF-Global Health Programme; the Alliance for Health Policy and Systems Research, etc...
- International financing institutions World Bank, IMF

At regional level:

- African Union (AU) EDCTP has already collaborative relations with the AU whose MOH Conference made a formal commitment to "Strengthening health systems for equity and development" (see Declaration of the Johannesburg AU Ministers of Health Conference, 9-13 April 2007.
- Joint advocacy for coordinated actions in support of R&D and strengthening capacity of healthcare system delivery. AU/NEPAD - Regional Economic Communities and specialized organizations (West African Health Organization, East and Southern African Health Organization,) strategy for harmonization of ethics committees and medicines regulatory authorities and translating research outcomes into policy and practice to reduce the burden of poverty related diseases.
- Promoting collaboration between the Africa thematic networks (AAVP, AMANET, INDEPTH/MCTA, etc)

At country level:

- Engage governments to contribute to funding of the health research institutions and healthcare units deserving the populations participating in clinical trials aiming at accelerating development of new interventions against poverty related diseases and contributing to production and delivery of health research policy to meet national and global priority health challenges. Connecting investigators to policy makers and scientists involved in disease control programs and science and technology for development: Developing national platforms for science and technology that integrate sector wide research activities. Networking investigators and their respective institutions to collaborate explore synergies and complement each other from basic/fundamental research to operational research.
- Engage communities to be an integral link in any health system set up to serve them establishing collaborative relations with healthcare delivery Community Based Organizations (CBO) and health research organizations, such as, the Medical Research Foundation (AMREF). We can do this work – building bridges between clinical trials and healthcare delivery systems – more efficiently by networking investigators, healthcare workers and decision-makers and community leaders.

Concluding: EDCTP is set to move forward and achieve its mission and specific objectives translating intentions into facts. The current platform must be transformed into a connector between national



research intuitions to produce and deliver health research outcomes and strengthened healthcare delivery to meet the millennium development goals and national and global priorities.

The fourth EDCTP Forum offers the opportunity to get ready to scale up implementation of EDCTP joint programme of action based on our achievements so far, and continue working together towards a sustainable partnership.

Thank you!

Pascoal Mocumbi Haut Representant, EDCTP 14 October 2007