Blindness prevention and NTDs: Building platforms, raising profiles and learning lessons-recipes for success

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Apparently there are only three diseases on that planet!
BLIND to opportunity and achievement

DISABLED by the belief that only three diseases matter

IGNORED by policy makers
Reduced Performance in education
- Educational Disruption - Children become carers
  - Reduced/no ability to access/afford education

Reduced agricultural productivity
- Inability to harvest - Loss of cash
  - Crops fall back into staples
  - Reduced nutritional status

Blindness
- Complete dependence on community
- Reduced longevity
- Burden on carers
- and loss of carer income

Disablement
- Deformity and stigma
- Reduced social
- Marital prospects

Deformity
- Direct cost of medical care
- Appropriate/inappropriate
  - Medical poverty trap
  - Permanent poverty
  - As no earned income

Stigma
- Reduced Performance
- In education
- Reduced agricultural productivity
- Inability to harvest - Loss of cash
  - Crops fall back into staples
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Disablement
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Complete dependence on community
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Donors should ensure that there is adequate funding for the treatment and prevention of parasitic diseases and micronutrient deficiency.

Governments and global health partnerships should ensure that this is integrated into public health campaigns by 2006.
Building platforms

- Long term Pharmaceutical Donations valued at circa US$ 2-3 BILLION annually
- Branding of NTDs
- Consistent messaging
- The MDGs and the poverty agenda
- WHO leadership - Road Map, Strategy
- London Declaration
Building platforms

- NGDO and bilateral support
- Compelling partnerships
- Universal health coverage and access to essential medicines
- The development case—the disenfranchised “Bottom Billion”
- Community involvement
The ‘Neglected Tropical Diseases’: now a brand identity; responsibilities, context and promise

David H Molyneux
“Last year, WHO launched an integrated strategy for the management of several of the neglected tropical diseases, all of which disproportionately affect the poorest of the poor in Africa.

Instead of a host of individual programmes going their separate ways, we now have a unified, integrated strategy that simplifies drug distribution, reduces duplication, and lessens some of the demands on health systems and staff.”
The Role of Pharma

**Merck & Co Inc**
“Mectizan for as long as needed” for onchocerciasis and filarias in Africa

**Pfizer**
Azithromycin for trachoma 120 million doses

**Sanofi Aventis**
Support for drugs for sleeping sickness treatment

**Merck Serono**
Donation of 250 m tablets annually of praziquantel (100 m treatments)

**Novartis**
Continuing commitment to MDT for leprosy; triclabendazole for fascioliasis

**GlaxoSmithKline**
Albendazole for lymphatic filariasis at least to 2020

**Johnson & Johnson**
Mebendazole for intestinal worms

**Eisai**
Provision of DEC for filariasis

**Gilead**
Ambisome for visceral leishmaniasis
Addressing the Poverty Agenda
The Millennium Development Goals

1. Eradicate Extreme Poverty and Hunger
2. Reduce Child Mortality
3. Improve Maternal Health
4. Combat HIV/AIDS, Malaria and Other Diseases
5. A Global Partnership for Development
“Good science is the basis of good public health, but the challenge we face is to translate the best science into public policy”

Gro Harlem Brundtland
former Director-General, WHO
Messing the Rationale for policy and priority

- The “bottom billion” poorest are most at risk
- Pro poor, address equity, human rights, educational impact
- Preventive chemotherapy, cheap, safe and cost effective
- Proven successes, measurable results
- 700 million plus treatments/year in 70+ countries !!
- Public-private partnerships
Economic rates of return - 15-30%

Units costs between 0.10-0.60 US$ /person/year - circa 1% of country health budgets in Africa

Multiple impacts - helminths, scabies, malaria and HIV

Sustainable, community based delivery, school based treatment

Donated drugs - high quality 70% reach target population
Raising profiles

• Blindness, disability, including mental health
• Creating and promoting the NTD brand
• Evolving the thinking and establishing credible targets
• Well known advocates
The New Advocacy for **Neglected Tropical Diseases**
A roadmap for implementation and the London Declaration

- The Director-General launched the NTD roadmap during the historic London meeting – Uniting to combat neglected tropical diseases: ending the neglect and reaching 2020 goals – featuring Bill Gates, Margaret Chan and 9 pharmaceutical company CEOs on 30 January 2012

- The roadmap inspires unprecedented support to overcome NTDs

- The London Declaration was endorsed during the meeting
London Declaration January 30\textsuperscript{th} 2012
The Commitment by Partners

• Sustain and expand programmes and thus drug access
• Advance R & D for next generation of products
• Enhance collaboration and coordination
• Enable adequate funding with endemic countries to support programmes
• Provide technical support
• Provide regular updates on progress
Dr Margaret Chan

“We are moving towards universal health coverage for neglected tropical diseases, the ultimate expression of fairness”
Range of treatment costs per person per year

<table>
<thead>
<tr>
<th>Condition</th>
<th>Cost per patient treatment per year (US dollars)</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV/AIDS</td>
<td>~1000</td>
</tr>
<tr>
<td>TB</td>
<td>~800</td>
</tr>
<tr>
<td>Malaria</td>
<td>~200</td>
</tr>
<tr>
<td>Rapid Impact Package</td>
<td>~0.40 for packaged intervention</td>
</tr>
</tbody>
</table>
Final Report of Mectizan Donation Programme Evaluation

Figure 4 MDP data on treatments approved and distributed for lymphatic filariasis 2000 - 2010
“Only 0.6% of overseas development assistance for health is allocated to neglected tropical diseases, despite such diseases affecting at least 1 billion people.”
Opportunities

• Post MDG positioning for NTDs

• Executive Board and World Health Assembly Resolution WHA 66.12 May 2013

• Regional WHO Resolutions to Country Commitment

• Advocacy of case – seeking to influence influencers

• Recognition of pharma and value of donations circa $US2 billion/year
• Proportion of national spend on NTDs AFRO figures US$0.10-0.20 equivalent to 1-2 % national budget of poorest countries
Recognize the Challenges

- Attaining significantly increased rate of up scaling to reach targets
- Coverage and compliance issues
- Loa problems-bednets and 2x albendazole
- Partnership management - the complex mix of interests
- Delivery of new tools to the market
- Reduced drug efficacy towards end game?
- Integration of vector control with malaria and HIV and urinary schisto-easier said than done
Challenges (continued)

- Morbidity management (surgery) for LF/trachoma lagging behind MDA
- Defining elimination targets and consensus on targets-re WHA resolutions
- Realistic expectations for Intensified Disease Management Diseases-ie VL in Asia, HAT in Central Africa-
- Evaluation, monitoring, surveillance- tools need to be adopted and deployed quickly
Challenges (continued)

• Verification and Certification costs

• Maintenance of DG’s interest as key advocate, keeping World Bank to commitments, relationship of APOC and other NTDs

• WHO/HQ and Regional office interactions: Regional Resolutions on NTDs

• USAID/ DFID but more from Eurozone and yen zone; ? Change of Minister in DFID; Change of President in US
Innovation !!
4. Ensure Healthy Lives (Page 30)

4a. End preventable infant and under-5 deaths 1, 2

4b. Increase by x% the proportion of children, adolescents, at-risk adults and older people that are fully vaccinated 1, 2

4c. Decrease the maternal mortality ratio to no more than x per 100,000 1, 2

4d. Ensure universal sexual and reproductive health and rights 1, 2

4e. Reduce the burden of disease from HIV/AIDS, tuberculosis, malaria, neglected tropical diseases and priority non-communicable diseases 2
The next Decade

Neglected tropical diseases

- Maintain the momentum
- All NTD drugs are Essential Medicines
- Universal health Coverage-equity and access
- Continue to be innovative
- Build Capacity
- Challenge targets
- Implement new science
To conclude

“If we cannot deliver free drugs to poor people we are unlikely to be able to solve the other more complex issues of International Health-NTDs are low hanging fruit with a proven record of success-control, elimination and near eradication-we have an obligation to maintain the momentum”