

African networks launch to boost clinical trial capacity

African countries are hosting an increasing number of clinical trials to develop treatment against infectious diseases. But much of the continent lacks the basic infrastructure and know-how to conduct clinical trials that meet top international standards. A quartet of regional networks now promises to improve the situation by upgrading the quality and capacity of local hospitals and research centers.

The European and Developing Countries Clinical Trials Partnership (EDCTP)—a partnership between 47 sub-Saharan African countries and 14 European Union member states plus Norway and Switzerland—signed the contract for the last of its four regional ‘networks of excellence’ in November. The new southern African group joins similar collaborations in central, western and eastern Africa that bring together neighboring research institutes to lay the groundwork for conducting multicenter phase 2 and 3 clinical trials on HIV/AIDS, tuberculosis and malaria in sub-Saharan Africa.

“There are centers that are good here and there, but there’s a lack of critical mass of researchers on the continent,” says Thomas Nyirenda, EDCTP’s networking and capacity development manager in Cape Town, South Africa. “The driving force is to really put a structure in place that will be sustainable.”

Since its inception in 2003, the EDCTP has spent more than €200 million (\$300 million) to fund 45 clinical trials in 21 African countries. But most of these trials have taken place at a limited number of experimental sites, often at well-equipped institutions that were established by colonial ties.

The new regional networks are intended to broaden the clinical capacity of the continent. Through the new initiative, the EDCTP is investing an additional €10 million over three years, with additional funding coming from some individual European member states, to train staff in ethics and clinical practices, to renovate labs and hospitals for larger and more diverse experiments and to foster partnerships.

“We don’t tend to collaborate with each other,” says Francine Ntouni, coordinator of the central Africa network, which has been up and running for a year. Ntouni says that an investigator in Gabon is more likely to partner with someone in Europe than with a researcher in neighboring Cameroon. “So we have started to build this connection to know each other.”

With improved systems in place, the four networks hope to attract additional funding

from granting agencies and private companies interested in testing new drugs, microbicides and vaccines at their sites. “The funding that we have now is not enough to run trials,” admits Pontiano Kaleebu, assistant director of the Uganda Virus Research Institute in Entebbe and the coordinator of the East Africa network, which officially launched this month. “We are using this as a platform for strengthening ourselves as a consortium and to look for more funding.”

With the infrastructure in place, the networks should be able to move beyond the ‘big three’ diseases of HIV/AIDS, malaria

and tuberculosis to take on neglected tropical diseases that have received far less clinical attention, says Ruxandra Draghia-Akli, the European Commission’s director of health research, which oversees the EDCTP. “If you build the capacity, then you can then extend to other diseases and other clinical trials,” she says.

The ultimate goal, says Nyirenda, is for all four networks to collaborate and complement each other on both subregional and pan-African levels. “That’s the message I’m preaching,” he says.

Elie Dolgin, New York

China offers billions in loans to boost health research in Africa

China’s Prime Minister Wen Jiabao has announced his country’s plans to offer more than \$10 billion in preferential export credits and concessional foreign aid loans to African governments over the next three years.

The loans, announced at the Forum on China-Africa Cooperation in Egypt in November, are part of a raft of eight new Chinese initiatives in Africa. These include a wide range of health- and technology-related initiatives such as the China-Africa Science and Technology Partnership (CASTEP) and a \$73 million provision for pharmaceuticals and health care (including malaria treatment and the training of 3,000 doctors and nurses).

On 25 November, the Chinese government announced the first donation toward CASTEP: more than \$100,000 for equipment to be shared between researchers in Libya, Sudan, Egypt, Morocco and Niger.

According to the Chinese state news agency, Xinhua, CASTEP is intended to include 100 joint scientific projects between Africa and China and the establishment of research positions in China for postdoctoral fellows from Africa.

“Although the West does invest a lot in health in Africa, it is in foreign aid transfers. HIV/AIDS and malaria programs soak up the bulk of this,” says Deborah Brautigam, who studies international development at the American University in Washington, DC. Part of the CASTEP plan also includes China giving laboratory equipment to African countries to upgrade their research facilities. Chinese scientists and engineers will also offer technical guidance to African scientists. The loans are also intended to build science parks in Africa. Brautigam explained one impetus behind the loans: “Chinese companies are heading toward becoming multinationals such as in the pharmaceutical and agrochemical industries. Africa is a good training ground for them.”

Michael Jennings of the University of London also says that the interests of the Chinese government are clearly strategic. According to him, the country “sees its offer of condition-free aid and other inputs as a rival to Western aid, which tends to be linked to conditions around good governance and human rights.”

Georgina Kenyon, London



Dynastic donor: Wen Jiabao