

JDF expands research effort

Buoyed by recent advances in diabetes research, such as the cadaveric islet cell transplantation technique reported on page 750, the Juvenile Diabetes Foundation International (JDF) announced last month that it is to double diabetes research funding to \$120 million for FY01.

The New York-based group convened an expert panel to review diabetes research and define new priority areas for JDF-funded programs. These include the identification of genes that predispose people to diabetes and its complications; studies aimed at extending the period between early disease diagnosis and its full manifestation; islet transplantation tolerance; stem cell therapy and β -cell expansion. Details of how to apply for JDF Special Research Grants can be found at <http://www.jdf.org>.

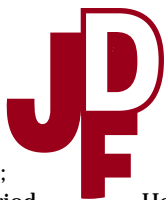
And in a continued effort to make its work international, the JDF announced a new, five-year, \$7 million joint research initiative with the television charity Telethon Italia,

to begin in April 2001. The initiative will fund multidisciplinary and multicenter Italian projects in genetics, immunology, islet transplantation and gene therapy. A joint Telethon/JDF scientific committee will review research proposals this October.

Francesca Pasinelli, Telethon's director of scientific development, says "this is the first time that a US foundation is to support multicenter interdisciplinary work in Italy."

In May, the group opened the JDF Center for the Prevention of Type 1 Diabetes at Turku University Hospital, Finland. The Center will receive \$550,000 a year for five years to evaluate 20% of all newborn Finnish babies for their inherited risk of developing diabetes. The group also announced a \$6 million collaboration with the Australian National Health and Medical Research Council to develop the first Type 1 diabetes vaccine. Similar partnerships exist with institutions and charities in Great Britain and Sweden.

Martina Ballmaier, Milan



Beanie Baby® profits support AIDS Foundation



Courtesy of Tim Kenney Design Partners

As well as adding to your kids' growing mass of stuffed, cuddly toys, buying the latest Beanie Baby®—available in stores this month—could also benefit

HIV positive women and children around the world, since profits from its sale will be donated to the Elizabeth Glaser Pediatric AIDS Foundation. The new toy was created in memory of Elizabeth and Paul Glaser's daughter, Ariel, who died from the disease in 1988.

The Foundation uses its funds to prevent the transmission of HIV/AIDS from mother to child and is currently trying to raise \$12 million to buy the vertical transmission-blocking drug, nevirapine, to treat the estimated 2.4 million infected pregnant women worldwide (*Nature Med.* 5, 1093; 1999).

K.B.

WHO under attack on HIV drug policy

The World Health Organization (WHO) is under increasing pressure from its member states to become more proactive in the dispute over sales of HIV/AIDS drugs to developing countries. It also faces criticism on its policies regarding distribution of such drugs in the Third World.

During its Annual Assembly in Geneva in mid-May, the WHO was called upon by rep-

resentatives from Brazil, Uganda, Mexico and South Africa to create a computerized database of information on international prices of HIV/AIDS drugs for use by member state governments. However, WHO advisor Michael Schultz was quick to respond that creating and maintaining such a database was beyond the resources of the group, as worldwide prices change daily.

The WHO's reluctance to take on such a task was repeated last month by senior WHO executive, Daniel Tarantola, during a French radio show in which he also admitted that, despite the recent announcement by UNAIDS in conjunction with five major pharmaceutical companies to distribute AIDS drugs at drastically reduced prices to developing countries (see www.nature.com/nm/bio-medical_news/west.htm), "negotiations concerning pricing had not begun."

In addition, a WHO document on antiretroviral drug use in the Third World released in March is coming under increasing scrutiny for its lack of medical credibility. The document states that although scientific evidence that a single dose of the drug nevirapine (NVP) prevents mother-to-child transmission (MTCT) of HIV, there is "currently insufficient information to recommend wide-scale implementation of

NVP for MTCT prevention." The article cites a study in which three of fourteen women given a single dose of NVP developed resistant HIV strains. Criticism stems from the fact that this case seems to be the only report of NVP resistance so far, despite the drug's having been tested in hundreds of women in clinical trials.

The WHO's position, which goes against advice of an expert panel convened to report on NVP's effect on vertical transmission, is inexplicable and infuriating to observers. Arthur Ammann, head of the California-based Global Strategies for HIV Prevention, a not-for-profit group that funds HIV research, notes that the WHO supports the use of the broad-spectrum antibiotic Bactrim to treat secondary infections in HIV-infected patients: "I think WHO is inconsistent in its argument." Bactrim given to treat such secondary HIV infections as malaria, *Salmonella* and bacterial pneumonia may result in pathogen resistance in about half of the patients treated, he says.

The WHO's lack of support for NVP has had real implications. In June, South African Health Minister Manto Tshabala-Msimang used this as an excuse for refusing the drug to pregnant women treated in the country's public health system.

Myrna E. Watanabe, Connecticut



Courtesy of Cathy Brown, HHS

South Africa signs MoU with US

The South African Medical Research Council (MRC) has signed a Memorandum of Understanding (MoU) with the US for "cooperation in the fields of Public Health and Biomedical Research," making it the first African research institute to do so. MRC President William Makgoba met US Surgeon General David Satcher in Washington, DC, to sign the agreement last month.