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Aaron Marcus has dedicated his life to platelets research.

Scientists rail against Europe's absence in AIDS research

Europe is squandering scant research funds available for AIDS vaccine research by having them managed by administrators rather than scientists, vaccine researchers charge. In an attempt to gain more control, researchers are lobbying governments for a large, long-term research fund steered by scientists.

Since 2000, Europe has supplied 8% of global funds available for HIV vaccine research, according to a report published in June by international groups including the International AIDS Vaccine Initiative (IAVI) and UNAIDS. The US contributed 81% and the remainder came from other sources, such as the Bill & Melinda Gates Foundation and pharmaceutical companies.

"In terms of HIV vaccine research, Europe is completely absent," says Giuseppe Pantaleo, an immunologist at the University of Lausanne. "Bureaucrats cannot manage complicated scientific programs."

Europe continues to promote fragmented projects, researchers say, while elsewhere, the Global HIV/AIDS Vaccine Enterprise and the US National Institutes of Health (NIH)'s proposed Center for HIV/AIDS Vaccine Immunology are fostering collaborations.

In July, the European Commission invited researchers to apply for a new European network on HIV/AIDS vaccines and microbicides. Officials invited scientists to Brussels and said they would like to fund one pan-European proposal. Octavi Quintana-Trías, director of health at the commission's Directorate General of Research, says the network might have a scientific steering committee, but only in an advisory role.

The announcement hasn't silenced the critics. The €10 million set aside is little more than "seed money," says Peter Liljestrom, head of vaccine research at the Swedish Institute for Infectious Disease Control in Stockholm. The NIH's new project, in contrast, could pour up to \$315 million over seven years into HIV vaccine research (*Nat. Med.* 11, 587–588; 2005). What's more, he adds, administrators will once again retain control over the project's direction.

In Europe, 95% of funds for research flows through national channels. The remaining 5% is distributed through the commission's Framework Programmes. Its administrators solicit proposals and, after peer review, fund about 20% of

them with grants of up to five years. At present, the commission spends about €25 million per year on AIDS vaccine research carried out by more than 100 research groups and companies.

Although Framework Programmes foster innovation, they are ill equipped to handle long-term, product-oriented vaccine development, says Frans van den Boom, IAVI's European director. A case in point is Eurovacc, a multinational program that from 2000–2005 received €16 million to develop AIDS vaccine candidates.

The program produced four vaccines, but could not get follow-up funding to get them clinically tested. The commission in 2003 instead granted €10 million to the AIDS Vaccine

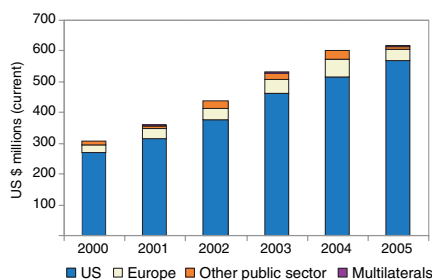
Integrated Project, a research consortium led by Italy's National Health Institute, which aims to develop and test four wholly different vaccines.

"We got five years of funding to develop vaccines. Now that we get to the clinic, the funding stops," says Liljestrom, Eurovacc's coordinator. "In my view, that means [the money] has been misspent."

But commission administrators say Eurovacc lost its funding because it couldn't show positive results. "When no results at all are presented or published, proposals have great difficulties competing for new funding," says Quintana-Trías. The commission's long-term commitment to AIDS vaccine research is illustrated by the European & Developing Countries Clinical Trials Partnership (see sidebar), an independent organization it helped launch to boost clinical research into HIV/AIDS, malaria and tuberculosis, Quintana-Trías says.

Eurovacc researchers are meeting with colleagues to discuss a joint proposal for the new pan-European project. But the NIH has already agreed to finance a trial of one Eurovacc product and may fund others. IAVI is also inviting research proposals, to be paid from \$10 million set aside by the US Congress to strengthen AIDS vaccine research—not in the US, but in Europe.

Peter Vermij, Amsterdam



Cheap shot: Europe lags far behind the US in funding HIV vaccine research.

Clinical trial scheme off to slow start

The European & Developing Countries Clinical Trials Partnership was intended to make European researchers work together to test promising vaccines and therapies against HIV/AIDS, tuberculosis and malaria. But with the appointment of the partnership's third executive director in as many years, it has yet to fulfill its ambitious premise.

Launched in 2003 by the EU, the partnership was an attempt to build infrastructure for phase 2 and 3 clinical trials in developing countries. With offices in The Hague, Netherlands, and in Cape Town, South Africa, it receives €100 million each year from the European Commission and 15 member states.

But the group's organizational chart resembles the Krebs cycle more than a pyramid, and power struggles between its three management boards and the European Commission marred it from the start. The first executive director was dismissed last September after complaints over the handling of the first set of proposals, and no calls have gone out since. "Basically, nothing has been done," says Giuseppe Pantaleo, an HIV vaccine researcher in Lausanne.

Peter Lange, outgoing chair of the partnership's Assembly, acknowledges the problems, but says he hopes the organization has left its "turbulent past" behind. With a new director, new procedures and a second call for proposals due within weeks, Lange says the partnership will be "restarted." In June, French researcher Odile Leroy took office as the group's new executive director, but the organizational chart remains complex. "It cannot be changed," says Lange. But, "I hope we now have more clearly established who is responsible for what."—PV