

EUROPEAN & DEVELOPING COUNTRIES CLINICAL TRIALS PARTNERSHIP



The challenge

Poverty-related infectious diseases have huge negative impacts on health, society and the economy. They particularly affect the world's poorest and most marginalised communities. More than 1 billion people, including 400 million children, suffer from the three major poverty-related diseases — HIV/AIDS, malaria and tuberculosis — and the neglected infectious diseases combined. Infectious diseases increase infirmity and insecurity, undermine productivity, and thus contribute to the cycle of poverty in sub-Saharan Africa.¹

A European response: the EDCTP programmes

The European & Developing Countries Clinical Trials Partnership (EDCTP), devised as a funding organisation, was launched in 2003 as a European response to the global health crisis related to infectious diseases of poverty. It aims to advance the clinical development of new or improved medicinal products while also strengthening African clinical research capacity.



The first EDCTP programme (EDCTP1, 2003-2015) was launched in 2003 by 16 European countries and the European Union to support clinical trials and research capacity development to fight HIV/AIDS, malaria and tuberculosis in Africa. EDCTP1 supported 254 projects with EUR 378 million, involving 194 African and 72 European research institutions. African researchers led more than 70% of the projects.

Under Horizon 2020, the EU's continued commitment to EDCTP resulted in an increased budget for a second programme (EDCTP2, 2014-2024) of up to EUR 683 million, provided that the European Participating States would donate the same amount. This has enabled an expanded scope allowing for targeted investments in neglected infectious diseases, diarrhoeal diseases, lower respiratory tract infections, and (re-)emerging infectious diseases with pandemic potential.

¹ https://www.who.int/healthinfo/global_burden_disease/estimates/en/

Between 2014-2019, EDCTP has awarded EUR 605 million in grant funding: 217 clinical research studies conducted by European-Africa consortia, 126 fellowships focused on career development of researchers from sub-Saharan Africa. The funded research activities included a total of 130 clinical trials. To strengthen the enabling environment for clinical research in Africa 57 grants were awarded, including projects on research ethics, regulatory issues and pharmacovigilance). Nearly 7500 people have participated in EDCTP project-related training and workshops on topics such as study protocol, specimen collection, research administration, Good Clinical Practice and epidemics preparedness.

EDCTP contributes to the European Union as a strong global player in health research. and complements other EU initiatives. First, EDCTP coordinates the Participating States Initiated Activities on infectious diseases in sub-Saharan Africa. EDCTP participates in GLoPID-R, the Global Research Collaboration for Infectious Diseases, a network of funders, chaired by the EU, to facilitate a quick and effective research response to a significant outbreak of a new or re-emerging infectious disease with pandemic potential. EDCTP also supports EU initiatives on open access to clinical trial results and clinical data, research ethics and anti-microbial resistance.

EDCTP success stories

For HIV, EDCTP-funded studies made vital contributions to the development of antiretroviral drug formulations tailored to children – facilitating their broad introduction in Africa. Other landmark studies were carried out in prevention of mother-to-child transmission of HIV and in detection and treatment of opportunistic fungal infections – responsible for one in five HIV-related deaths.

For tuberculosis (TB), EDCTP-funded research played a pivotal role in the evaluation of the Xpert MTB/RIF diagnostic technology, now recommended by WHO and widely implemented globally. Other studies have advanced the development of diagnostics for use in special groups, such as children and people with HIV infections. Landmark drug trials have identified possible ways to shorten TB drug treatment and have also been influential in shaping how TB drug trials should be carried out.

For malaria, EDCTP-funded trials have generated key evidence on antimalarial use in pregnant women, who are particularly susceptible to malaria, which can harm both mothers and their babies. Other trials have had a significant influence on the choice of antimalarial drugs for children.

Regarding neglected infectious diseases, new medical interventions are being evaluated for infections such as schistosomiasis and leishmaniasis. EDCTP contributed substantially to the EU having become an important investor in this still severely underfunded global health field.

Two consortia – ALERRT with 21 and PANDORA-ID-NET with 22 African and European partner organisations – contribute to epidemic-preparedness in sub-Saharan Africa, having responded to several disease outbreaks (Lassa fever, Ebola virus disease, plague and monkeypox).

The EDCTP comprehensive fellowship programme is clearly successful in launching and furthering the careers of future and current African research leaders.

More information: www.edctp.org