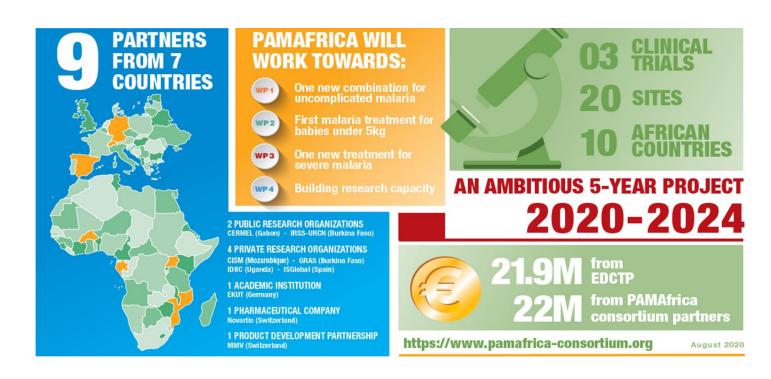




1 ANNUAL CONSORTIUM MEETING

Wednesday, 13 October 09.00-10.30 CET Thursday, 14 October 09.00-12.00 CET

REPORT





















Introduction

PAMAfrica was launched in January 2020, just before COVID-19 descended on the world and life and work seemed to grind to a halt. The Kick-off meeting planned for Q1 last year therefore had to be cancelled. This also meant that the Work Packages (WPs) that had been preparing to launch their projects had to quickly change gear - all meetings either went virtual or were cancelled.

Face-to-face meetings are still on hold which is why the 1st PAMAfrica consortium meeting was held virtually.

The meeting was organised by a subgroup of the PAMAfrica Grant Management Team, with technical and administrative support from MMV colleagues.

The meeting was hosted by Dr Timothy Wells, Chief Scientific Officer of MMV and PAMAfrica Coordinator, together with Dr Jovenal



Photo: @EDCTP

Message from Dr. Michael Makanga, Executive Director EDCTP

"EDCTP is committed to supporting high-quality research and development on urgently needed tools to close the chemoprevention and treatment gaps, and to provide new impetus to achieving the ambitious malaria control and elimination goals.

"The PAMAfrica annual consortium meetings play a very important role towards strengthening the North-South collaboration and fostering bi-directional exchange of information on the ongoing and planned studies on the portfolio of antimalarial products in development."

Armando, Manhiça Health Research Centre, CISM. Ms Jaya Banerji moderated the meeting.

Organizing a virtual meeting is challenging, but this first PAMAfrica Annual meeting was seamlessly implemented. The absence of face-to-face interaction was clearly missed. If COVID-19 control grows more robust, the next meeting will hopefully be in-person with ample time for individual, informal conversations and exchanges.

This report is a documentation of the meeting and will be shared with all participants and posted on the PAMAfrica website (pamafrica-consortium.org)

Objective

The objective of the meeting was to build a collective sense of awareness and ownership among consortium members of the PAMAfrica project, its contribution to the global malaria elimination agenda, and the status of the five work packages.

Day 1

The day started off with old hands and ended with new blood in the field of global health and infectious diseases.

In the first session participants were given a sense of progress and hope from Ms Joy Phumaphi, Executive Secretary of ALMA, with her insights into the push by the African Union and ALMA for increased domestic investment in health.

Dr Pedro Alonso, Director WHO Global Malaria Programme, underlined the continued need for the scientific community to find solutions for the challenges facing malaria elimination, such as drug resistance. Dr Alonso

mentioned the important Rethinking Malaria consultation that is calling for a "Shift of the Center of Gravity of the Malaria Fight Towards Endemic Countries".

Participants got a bird's eye view of the extensive reach of Novartis' global partnerships from Dr Sujata Vaidyanathan, Development Unit Head Global Health Novartis, and EDCTP's intensive investment in clinical trials for infectious diseases from Dr Michael Makanga, Executive Director EDCTP, the organisation that has the 'African Tiger factor' – mission focus, nimbleness and agility.

With defeating malaria in mind, the second session looked into how the malaria community will actually make this effort sustainable.

Continuing Dr Alonso's thought on rethinking malaria, top of the list was the shift of focus to endemic countries with local manufacturing in Africa, and how to raise their game.

Participants heard from Mr Pierre Hugo, Senior Director Access and Product Management MMV, Mr Palu Dhanani, Managing Director Universal Corporation (UCL) and Dr Jutta Reinhard Rupp Head Merck Global Health Institute. Each provided important insights into understanding and overcoming the obstacles in the path to establishing local manufacturing that entails so much more than just simply drug manufacture.

The morning ended with the next generation of scientists. Ms Zoleka Ngcete Program Manager South African Medical Research Council (MRC) moderated a session with PAMAfrica PhD and MSc students¹; Mr Victor Asua, IDRC, Mr Fabrice Mougeni, CERMEL, Mr Barry Nouhoun, GRAS, and Ms Emma Gladis Malinga, CERMEL. This section, which closed day 1 of the PAMAfrica consortium meeting, looked towards the future with the next generation of scientists who will build Africa's capacity on the research front.

Day 2

Day 2 was a deep dive into the status and outlook of PAMAfrica's five work packages²:

- Work package 1: New combination treatments for uncomplicated malaria case management (current frontrunner is a combination of M5717 and pyronaridine)
- Work package 2: First malaria treatment for vulnerable infants and neonates less than 5kg (a new AL formulation)
- Work package 3: New non-artemisinin treatment for severe malaria (parenteral KAE609)
- Work package 4: Building research capacity of next-generation African scientists
- Work package 5: Operations and implementation.

Following WP presentations, Dr Tim Wells shared his reflections on the meeting and the role of PAMAfrica in the wider context of the fight against malaria, partnerships and the next generation of scientific leaders:

¹ Included in the session was a video featuring some of the students. This video can be viewed on the PAMAfrica website as of November: pamafrica-consortium.org

² To follow WP developments and highlights please refer to the PAMAfrica newsletters and the PAMAfrica website: pamafrica-consortium.org

The call to bend the curve of malaria

- We must not let the malaria curve get worse and should focus on making it better.
- More effective new medicines: Existing malaria drugs will break down like old cars and will need to be replaced. The question is should new drugs be simply identical replacements for old ones, or should they be better?
- Patient-centric new drugs: It is important that next-generation medicines are designed with the
 patient in mind, e.g., half the global patient population is female, a large proportion of whom
 might be pregnant so this needs to centre-stage for drug developers, and not an afterthought.
- Transmission blocking: We have to stop people getting infected this implies the need to use drugs not just for treatment but for protection – we must inform people of this.
- Drugs need to be more convenient easy for children to take, simpler regimens and more available. A key driver of availability is cost. Making cheaper new medicines is challenging and involves many different stakeholders.
- Manage the supply chain: although we have the drugs to treat them, thousands of children continue to die. How to get new medicines to those who need them is a critical distribution issue.

It is all about partnership

- The "Africa tiger factor" to guide partnerships: It is exciting to see EDCTP's agility, speed, flexibility and strength in Africa to enable exploration of different paths and partnership models for clinical trials.
- Partnerships share both cost and risk of drug development, and of course, the credit, as illustrated by Novartis.
- PAMAfrica is entering complicated negotiations with companies, using different processes and different ways of working.
- Learning to speak the languages of different organizations and bring together the best of all players (e.g., the Merck–UCL schistosomiasis programme). This will help involve African companies and manufacturers early in the drug R&D process.
- When we talk about partnerships with Africa, we must make sure the whole of Africa is involved.
 We need to build networks that draw in more countries from Europe and Africa, because it is in everyone's interest to defeat malaria.

- We need a next generation of diverse leaders for PAMAfrica 2.0, 3.0.
 - The PAMAfrica consortium involves nine partner organizations from seven countries, with work ongoing in 20 sites in 10 African countries.
 - We need people who are not just experts in drug design, development, manufacturing etc. but also those who have been exposed to this field of activity and understand it.
 - PAMAfrica's effort will require people with wide exposure not just scientific but from other aspects of the programme, as well as those with a perspective on gender and regional balance.
 - Strong push globally for Africa to take control of the supply chain for vaccines and drugs.

Facts and figures

The meeting convened members of the nine PAMAfrica consortium partners with a total of 23 speakers and 80 people registered. Day 1 had 60 participants and day 2 had 59 participants, including speakers. Below is an overview of speakers and participants by gender and geography³, as two simple indicators of diversity and representation.

Speakers

The meeting had a well-balanced gender representation among speakers; the overview of four out of five Work Packages was presented by women. Most speakers were African, which to a degree was driven by the participation of four of the PAMAfrica PhD and MSc students.

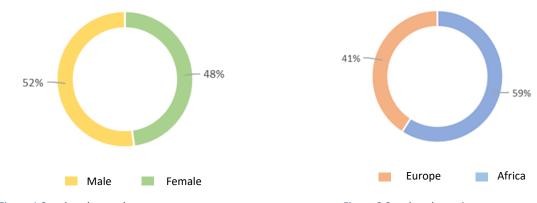


Figure 1 Speakers by gender

Figure 2 Speakers by region

³ The information has been extracted from the agenda and participants registration data which means the regional data may not be fully accurate.

Participants

In addition to participants from the nine PAMAfrica partners, representatives from Merck who will soon join the consortium as sponsor of WP1, were also present at the meeting.

Like the speakers, participants were balanced in relation to gender. However, a greater participation from African partners will be encouraged for future meetings.

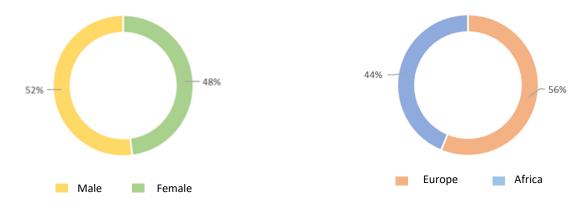


Figure 3: Participation by gender

Figure 4: Participation by region



Some of the participants on day 1

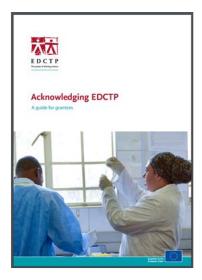
Additional information

It is important to ensure coherent communications and compliance with EDCTP rules for acknowledgement and visibility, as embedded in the conditions of the grant agreement. The PAMAfrica Grant Management Team has therefore developed a communications plan to guide PAMAfrica's communications focus and activities. This plan includes a branding guideline, which builds on EDCTP's guidelines on Acknowledging

EDCTP. The guideline also includes information on the use of the PAMAfrica logo and the logos of the PAMAfrica partners.

The WP5 presentation provided an overview of communications material⁴ and tools developed for use by partners in all communications and dissemination activities related to PAMAfrica. The material has been shared with the consortium's communications focal points. Further information, including how to access material, can be found on the PAMAfrica website (pamafrica-consortium.org).





In relation to scientific publications or promotional materials, partners are encouraged to consult EDCTP's guide for grantees on 'Acknowledging EDCTP', including displaying the EDCTP logo and the EU emblem as well as other requirements such as inclusion of grant number and disclaimer.

⁴ With the inclusion of Merck as an additional partner, all communications material will be revised and updated in Q1 2022 and made available to all the partners.





Partnering to develop the next generation of malaria treatments for Africa





















Annexes:

- Agenda
- Speaker profiles