



PAMAfrica & SINDOFO back-to-back annual meetings

20 - 22 September 2022 Lambaréné, Gabon

Tuesday 20 September

PAMAfrica 2nd annual

consortium meeting

Wednesday 21 September
PAMAfrica & SINDOFO cross
cutting topics

Thursday 22 September SINDOFO 1st annual consortium meeting

REPORT





Introduction

The PAMAfrica & SINDOFO back-to-back annual meetings took place at CERMEL's facility in Lambaréné, Gabon from 20 to 22 September. The meetings were hosted by CERMEL with Dr Ghyslain Mombo-Ngoma as the facilitator and main organizer.

PAMAfrica and SINDOFO have respectively ten and eight partners¹, six of the partners participate in both consortia, this together with a shared commitment to capacity building led the coordinators of the two consortia, Dr Timothy Wells and Dr Jana Held, to propose organizing the annual meetings back-to-back. For both consortia, this was the first opportunity for an in-person meeting which allowed for ample time for individual, informal conversations and exchanges. For those who could not attend in-person, it was possible to listen and participate in the discussions.

Day one of the meeting, Tuesday 20 September, was dedicated to PAMAfrica with participation of PAMAfrica partners only. Day two, Wednesday 21 September, was open for all PAMAfrica and SINDOFO partners, while day three, 22 September, was dedicated to SINDOFO with participation of SINDOFO partners only. EDCTP was present as observer on all three days.

The annual consortia back-to-back meeting was announced and approved by the PAMAfrica Strategic Management Committee (PSMC) and the SINDOFO Consortium Steering Committee (CSC) in mid-April. In May a meeting placeholder was sent to all the partners and the organizing committee established. In mid-June a formal invitation with a high-level agenda was sent to all participants and EDCTP as observer. An invitation letter and details for the visa application were shared with participants in mid-August and the final agenda with a logistics note was sent to the participants on 7 September.

The organizing committee was composed of members from the PAMAfrica Grant Management Team (GMT), the project coordinator for SINDOFO and Dr Ghyslain Mombo-Ngoma. Thanks to a collaborative attitude and open communication, the committee was able to organize a successful meeting with representatives from two consortia at a venue outside of a capital city. A total of 52 participants attended the meetings, with four connecting online due to time constraints or, in the case of two participants, having their visa application rejected.

This report is a documentation of the meetings and will be shared with all participants and posted on the PAMAfrica and SINDOFO websites (<u>pamafrica-consortium.org</u> and <u>www.sindofo.net</u>). The participants have received the presentations made at the meetings.

Objective

The objective of the meetings was to share updates on progress, status, and outlook per work package with discussions on selected topics.

¹ The PAMAfrica consortium has completed a request for amending the grant agreement and has been informed verbally by EDCTP that it is approved, which makes Merck an official partner, bringing the number of members to ten. The SINDOFO consortium is preparing a request for amending the grant agreement which, when approved, will make Zydus an official partner, bringing the number of members to eight.

Day 1: PAMAfrica 2nd annual meeting

The meeting was opened by the moderator, Dr Ghyslain Mombo-Ngoma, Head, Clinical Operations at CERMEL who warmly welcomed the participants and referencing the importance of international meetings, not only for CERMEL but also for Lambaréné. The participants were thereafter greeted by representatives from CERMEL's leadership, Dr Bertrand Lell, and Dr Peter Kremsner.

The first external speaker was Dr Julien Meyong, Regional Director from the Gabon Ministry of Health. Dr Meyong talked about the major public health concern posed by malaria and praised the work of CERMEL and its partners in fighting this deadly disease.



Ms Joy Phumaphi, Executive Secretary of African Leaders Malaria Alliance (ALMA), emphasized that to accelerate efforts to end malaria for good, in Africa there is a need to ensure correct balance in the policy and regulatory environment, build stronger capacity and capability across all relevant sectors, ensure effective management, good governance, and accountability and much more global and domestic investment as well as collaboration. Ms Phumaphi highlighted the importance of investing in young African researchers and ended her remarks encouraging informal get together and socializing to strengthen trust and build mutual understanding the foundations which a consortium like PAMAfrica is built on.

Following the opening remarks, PAMAfrica's coordinator Dr Timothy Wells, Chief Scientific Officer, MMV thanked CERMEL and Dr Mombo-Ngoma for hosting the meeting. Dr Wells then set the scene and talked about PAMAfrica's contribution to the malaria elimination agenda, emphasizing the need to continue investing in new medicines and highlighting the importance of training the next generation of scientific leaders for Africa in Africa.

The remainder of the meeting was dedicated to PAMAfrica's five work packages speakers featuring WP leaders and scientists involved in delivering the studies and the capacity building activities. As part of the WP5 presentation, EDCTP represented by Dr Montserrat Blázquez, Scientific Officer, shared observations from a funder's perspective.

- Work package 1: New combination treatments for uncomplicated malaria case management
- 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.

Dr Timothy Wells closed the meeting thanking everyone for their contributions and encouraged a proactive approach to ideas emerging from discussions. If we are not able to bring good ideas to research, we are reactive and miss opportunities to address issues at an early stage. Building on the WP4 discussion, Dr Wells highlighted the importance of 'African voices', especially young researchers, and invited interested participants to participate in MMV's upcoming update of the target product profile (TPP) papers on chemoprevention, uncomplicated malaria and severe malaria². He concluded his remarks by stressing the importance of gender equity, encouraging the female participants to seek out colleagues that can play a role in empowering them, seeking mentors and be more active in networking.

² At the time of issuing this report, four young researchers have expressed interest to participate in the TPP process.

Day 2: PAMAfrica and SINDOFO cross-cutting topics

The second day was a joint PAMAfrica and SINDOFO day with a focus on capacity building followed by a visit to CERMEL's facilities.

The two coordinators, Dr Timothy Wells, Chief Scientific Officer, MMV and Dr Jana Held, Group Leader Institute for Tropical Medicine (ITM), EKUT kicked off the meeting with opening remarks.

Dr Michael Makanga, Executive Director EDCTP2, subsequently made remarks on the importance of collaboration and sharing of knowledge across grants. Dr Makanga reminded the participants about the importance of thinking long-term — to develop sustainable capacity that can be deployed beyond the current trials. Further, he mentioned that considering the interconnected and co-existence of diseases, especially in LMICs, cross-disease sharing of research infrastructures is strongly encouraged over traditional siloed approaches. He also encouraged the consortia to maximize knowledge transfer by finding ways to ensure increased participation of African colleagues in all aspects of the trials — management, governance, planning and budgeting, protocol development and not only



in study participants recruitment into trials. Obtaining and enhancing skills for setting up, budgeting and managing trials is essential to increase African scientific leadership and sponsorship of trials.



The capacity building session was led by Ms Teresa Eduardo Machai, Head of training, Manhiça Health Research Center (CISM). She was assisted by Dr Quique Bassat, ICREA Research Professor, Head Malaria Programme, ISGlobal who started the session by talking about challenges in research capacity in African countries. In his presentation he touched upon reasons for the lack of equity in health, the decolonizing global health movement, structural factors contributing to inequity, and importantly, challenges faced by African early career researchers as well as wider challenges in research capacity in Africa. Dr Bassat

ended his presentation with the following conclusions:

- Research challenges are multiple, deeply rooted and not easy to address.
- Their increasing recognition is a positive change, and this change needs to be driven primarily by African scientists.
- Talent is similarly prevalent as in other parts of the world, what we really lack are more opportunities for the development of that talent.
- Large projects like PAMAfrica and SINDOFO need to offer those opportunities, and do so in the context of research questions inherently related to African problems (i.e., malaria).
- Training programs funded by large agencies, such as EDCTP/TDR, have and hopefully will continue to have a major positive impact for those African beneficiaries. They need to continue and expand.

The participants were then divided into five groups and asked to discuss the following topic: 'The future of capacity building, innovative solutions for research capacity development in collaborative projects', and to report to plenary.





There were lively conversations in all groups, proof that this is a topic that engages and where everyone's experiences and views enrich the discussion. The main points captured in the report to the plenary were:

- Lack of human capacity: many young researchers, especially Bachelor and Master students, are lost after their training because of lack of funding. Also, more funding options for post-Docs, as well as the hiring of grant managers (including for fundraising) should be promoted.
- Language barrier: grant application and trainings in languages other than English should be promoted.
- **Importance of sites**: not only PIs, but also sub-investigators should be involved in the early phases of protocol development. Also, exchange programs and platforms across sites should be implemented to share knowledge and experience.
- Clinical studies: a network for CRO services should be implemented around African institutions. Regarding activities related to clinical trials, more responsibilities could be given to young researchers in the context of capacity building.

It is also worth mentioning a good practice document which both Dr Eusebio Macete, CISM and Dr Michael Makanga, EDCTP referenced in their interventions: Four Approaches to Supporting Equitable Research Partnerships which was launched on 20 September 2022 by the UK Collaborative on Development Research (UKCDR) and ESSENCE on Health Research initiative. The document is developed by a global taskforce of research funders, including EDCTP, and aims to support equity in research partnerships by assisting funders, research organizations and researchers to improve their ways of working in multi-country research consortia, particularly in relation to LMIC contexts.

The afternoon was dedicated to CERMEL with an introduction to the history and current work followed by a visit to the facility and laboratories. The origin of CERMEL, which today is a leading research and training center in Gabon and in the Central African region, is the former "Medical Research Unit" of the Albert Schweitzer Hospital. The participants had the opportunity to visit the hospital and museum, and see the original equipment and furniture used by Albert Schweitzer and his staff.

Day 3: SINDOFO 1st annual meeting

The meeting was opened by introductory words from Dr Jana Held, Group Leader at ITM, EKUT and Coordinator of the SINDOFO project and Dr Peter Kremsner, Head, Board of Trustees, CERMEL and Director ITM, Tubingen, who also reminded on the history of the SINDOFO grant and of the Ferroquine compound.



Dr Jana Held then set up the scene, by giving an overview of the project. The timelines of the clinical trial were shared, with a planned start in Q2 2023. In terms of capacity building, all PhD candidates have been selected, face-to-face trainings are planned within the consortium, and other trainings are planned in synergy with PAMAfrica.

Dr Timothy Wells, Chief Scientific Officer, MMV introduced Zydus Lifesciences, by summarizing the background of their addition to the consortium. Zydus will join the Consortium as the Sponsor of the Clinical Trial.

Dr Mukul Jain, Head Non-Clinical Development, Zydus Lifesciences emphasized Zydus´ products and the company activities in clinical research. He then gave an update on the development journey of the ZY19489 compound (formerly MMV253), which will be used in combination with Ferroquine in the planned clinical trial. Dr Jain pointed out that the Consortium should explore to develop all activities regarding the clinical trial together with the consortium, without a CRO. Dr Kevinkumar Kansagra, Principal Scientist, Zydus, then took over the ground to share the study designs of Part 1 and Part 2 of the clinical trial.

Ms Vitalia Mitrovic, Project Manager, MMV, presented the MMV team and summarized previous works on FQ and its history at MMV. MMV, currently sponsor of the clinical study, will have other functions in the amended grant. Ms Mitrovic proposed new responsibilities and possible deliverables that could be taken over by MMV within the Consortium.

Dr Montserrat Blázquez, Scientific Officer, EDCTP, shared some observations of the funder to the consortium. Dr Blázquez reminded that the EDCTP2 programme might be extended until December 2025 but a confirmation on that is still pending. She also reminded on EDCTP' requirements and obligations to grantees for dissemination and acknowledgments.

The rest of the day was dedicated to presentations of the different sites (WP2 to WP5). Each of the speakers gave an overview of his / her site (research areas, personnel, resources) and the expected timeframes for approval by regulatory authorities following submission of clinical trial-related documents in his / her respective country.

- Work Package 2: Clinical Trial Gabon
- Work Package 3: Clinical Trial Mozambique
- Work Package 4: Clinical Trial Burkina Faso
- Work Package 5: Clinical trial Kenya

The Training and Capacity Building Committee then shared recent updates on WP6, which include the recruitment of all 4 PhD candidates, 3 of them being female, as well as possible training synergies together with the PAMAfrica consortium.

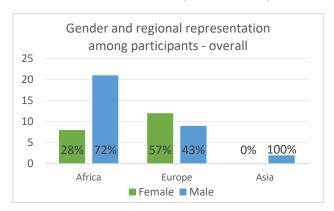
Following an in-depth discussion of the consortium on general topics regarding the clinical trial, the meeting was closed with acknowledgments of Dr Jana Held to the participants, especially those from Zydus, as well as the host, CERMEL. Dr Mombo-Ngoma also acknowledged the participants and emphasized that CERMEL was very pleased to host the meeting.

Facts and figures

A total of 52 people representing 12 institutions from nine countries attended the meeting. Below is an overview of participants and speakers by gender and geography³, as two indicators of diversity and representation.

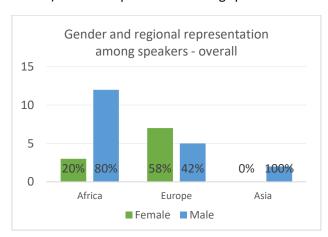
Participants

Both PAMAfrica and SINDOFO had similar gender and geographical representation with most participants representing African institutions. Women were underrepresented, in particular from Africa.



Speakers

Both consortia had similar gender and geographical representation among the speakers. Overall, female participants are underrepresented among speakers, especially if they are from Africa. European participants (both female and male) are overrepresented among speakers.



³ The regional origin of speakers and participants is based on the location of their institution. Virtual participants are included.

Annexes:

- Report of the joint capacity building session
- Agenda
- Logistics note
- List of participants
- Presentations:
 - PAMAfrica annual meeting, email sent to relevant participants by Rana Rossignol on 22/09/22
 - Joint PAMAfrica & SINDOFO 2, email sent to ALL participants by Rana Rossignol on 27/09/22
 - SINDOFO annual meeting, email sent to relevant participants by Vanesa Nkwouano on 24/09/22

About PAMAfrica and SINDOFO

A portfolio approach to developing next-generation malaria treatments for Africa (PAMAfrica)

Supporting a portfolio of three clinical studies, the PAMAfrica consortium aims to contribute to malaria elimination by developing new antimalarial medicines for the most at-risk populations, including newborns, patients with severe malaria and those with drug resistant infections. The consortium, supported by EDCTP and led by MMV, comprises ten public-and private-sector research and development partners across Africa and Europe.





















Phase II multicenter clinical trial of a Ferroquine + ZY19489 (MMV253) short regimen for the treatment of malaria (SINDOFO)

The SINDOFO consortium's main goal is to develop a new non-ACT-based antimalarial drug combination with a shortened, ideally single dose regimen to help reduce morbidity and mortality due to malaria in adults, adolescents, and most importantly, in children in Africa under the age of five, who are the most vulnerable group with the highest number of deaths. The consortium, supported by EDCTP and led by the University of Tübingen, comprises eight public- and private- sector research and development partners across Africa, Europe and India.























Report of the joint capacity building session: "The future of capacity building: innovative solutions for research capacity development in collaborative projects"

21 September 2022, Gabon

Objective

The objective of the joint capacity building session was to conduct a workshop, including all the participants at the annual meetings, to reflect on the future of capacity building and propose innovative solutions for research capacity development in the context of large collaborative projects, such as PAMAfrica and SINDOFO.

Outcomes

The participants divided into five groups to facilitate discussion and then each reported the outcome of their discussion to the plenary. Below is a summary of the key observations made.

1. Site capacity/capability: challenges and opportunities

1.1 Infrastructure:

- Refurbishment of materials and equipment is not usually included in Sponsor clinical trial budgets from
 pharmaceutical companies, nor in grant budgets. Budgets tend to be linked to the number of participants
 recruited and yet salary and equipment needs are similar, irrespective of the numbers enrolled in a trial.
 A simplification of budgets that allowed for longer term vision and support is needed for sustainability.
- Short term budgets that equip laboratories and buy into internationally recognized QC programs are helpful for individual trials but need to be maintained outside of the research grants if the capacity that has been developed is to be sustainable. A longer-term commitment from the funders would be beneficial. Initiatives such as CHAMPS which collects and disseminates data on child mortality, funded by BMGF is a longer-term approach (20 years) and a good example of sustainability.
- Restrictions faced by pharmaceutical companies in the provision of equipment for trials needs to be addressed for sustainability. Currently ethical compliance requires that equipment can only be rented to the sites for the duration of a trial or if purchased must be destroyed at the end.

1.2 Process development:

- Develop Sponsor confidence through standardization of laboratory procedures and introducing QA approach to enable more extensive use of laboratories in the countries of the primary data-generation for local or central lab services to clinical trials.
- Research institutions can do more to identify their own needs and develop an action plan for stronger infrastructure: diagnostic techniques, equipment maintenance, staff training, quality assurance.



- Financial sustainability opportunities such as providing support for research hospitals, or statistical services should be explored.
- Ensure research site competence in the following areas through identifying knowledge gaps and ensuing training opportunities and expert hires: project and budget management, grant writing, quality assurance and quality management system, as well as biostatistics.
- Strategic guidance for the development of the sites, a vision for the future expansion, including satellite
 sites, which would enable more space for younger scientists to grow their expertise. Grants could
 encompass salary for project and grant management as well as satellite development for sustainable
 capacity building.
- To be autonomous in terms of funding would imply having a grant management office with the necessary expertise, proactively looking for funding and helping researchers to apply.
- Take better advantage of grants and build in sustainability and resource mobilization: a grants unit at the research institution should be established with a grant manager and project management expertise salaries factored into the grant budgets to keep that experience 'in house'. A clear plan of budget distribution and management outside of the grants should be developed.
- English proficiency is key to a successful grant application, the funders should be offering applications in several languages or allowing to include in the budget English proficiency courses for young researchers.

2. Human capacity

There is a lot of brain drain and the sites need to develop strategies how to retain qualified personnel. Various potential solutions were proposed:

- 'Sandwich' PhD: students do not disconnect with their home institutions, and more accessible for women with family obligations. It is a way to connect the PhD program with ongoing work on site.
- Exchange programmes and partnerships between South-North universities should be further developed with PhD co-supervision between the institutions encouraged.
- Include PhD positions into all grant applications, as more qualified personnel on site also attract more funds in the future.
- Sustainable funding for PhDs, that is independent of the outcome of the trials.
- Money should be invested in trained people to write grant applications and who understand financial processes. Soft skills training often as important as PhD training post-doctoral support plans should be written into trial plans and budgets. For example, ensure that young researchers, and especially women are written into research proposals as co-PI, so that they get exposure to funders, gain the experience and it becomes a model for the institution.
- Support female candidates by providing infrastructure for lactating women and young children on site, offering PhD programmes that allow to remain on site or offer additional family relocation support.

- Involvement of young investigators with real life experience in the protocol development process to develop competences and motivation.
- Workshop trainings of, for example, a week are often more accessible to people with lab commitments than longer running on-line courses that require attendance at a fixed time each day over a longer term. It is harder to schedule lab work and clinics around longer-term commitments, although it is acknowledged that on-line courses can have a wider reach for less financial investment.

3. Knowledge transfer

- Platform to access data. Difficult to access info if the site is not affiliated to an EU institution.
- Cross site knowledge sharing, sites and researchers might be facing the same challenges within the clinical trials. Large research grants have the potential to develop a platform for interaction across sites and across studies within Africa.
- PhD and master's Students across different sites should have meeting platforms to share ideas and progress.
- More should be made of N/S, S/S and S/N collaborations for knowledge transfer. For example, exchange of researchers from Kenya to Burkina Faso to share knowledge and experiences and get new ideas to better address challenges on a particular trial or disease area should be supported. Map expertise and allocate centers of excellence based in SSA in studies.

4. In-country and in-continent capacity development of the research environment

- Ensure early HA involvement in protocol development.
- NMCP/HA integration in EDCTP programs.
- Advocate for health research support at national/regional level.
- Sample analysis, PCR analysis, need for standardized methodology to allow confidence in local analysis of samples for key trial endpoints.
- Address country requirements/barriers for sample transfer between African countries.
- ISO certification simplification. African CROs should be used to ensure that more of the available money stays in Africa.
- Statistical services from site teams could be utilized better in the trials.
- Investment in managers, thinkers, analyzers and policy makers to promote African leadership is key to sustainability of research.
- Biostatistics training is very important to help the dissemination of information to policy makers and to inform the public.





PAMAfrica & SINDOFO back-to-back annual meetings

20 - 22 September 2022

Tuesday 20 September 9.00 to 5.00 PM WAT PAMAfrica 2nd annual consortium meeting Wednesday 21 September 8.30 to 5.00 PM WAT PAMAfrica & SINDOFO cross cutting topics Thursday 22 September 9.00 to 5.00 PM WAT SINDOFO 1st annual consortium meeting

PAMAfrica 2nd annual meeting

Objective: at the halfway point, share updates on progress, status, and outlook per work package with discussions on selected topics.

Agenda day 1: PAMAfrica 2nd annual consortium meeting

Tuesday 20 September

09.00 AM WAT (CET-1)	Departure from hotel to CERMELRegistration	
10.00 AM WAT	Opening of meeting	
(45')	Welcome by moderator	Dr. Ghyslain Mombo Ngoma , Head, Clinical Operations, CERMEL
	Opening remarks	Dr. Bertrand Lell, Director, CERMEL
		Dr. Peter Kremsner, Head, Board of Trustees, CERMEL
		Dr. Julien Meyong , Representative of the Gabon Ministry of Health
		Ms. Joy Phumaphi Executive Secretary of the
		African Leaders Malaria Alliance (ALMA) & MMV
		board member (video message)
10.45-11.00 AM	Setting the scene: PAMAfrica's contribution to the	Dr. Timothy Wells, Chief Scientific Officer, MMV
(15')	malaria elimination agenda	
11.00-11.20 AM	Coffee break	
(20')		
11.20-11.50 AM	Work Package 1: New treatments for uncomplicated	
(30')	malaria	
	 Antimalarial resistance and the need for new drug combinations 	Dr. Ghyslain Mombo Ngoma



	WP1 status and outlookQ&As/discussion	Dr. Jutta Reinhard-Rupp , Head, Merck Global Health Institute All participants
11.50-12.20 PM	Work Package 2: AL for infants and neonates < 5kg	
(30')	body weight	
	The importance of developing antimalarials for	Dr. Berenger Kaboré, MD Research associate,
	newborns and treatment considerations	IRSS/Clinical Research Unit of Nanoro
	 WP2 status and outlook 	Dr. Caroline Boulton, Head, Novartis Malaria
		Global Program
	Q&As/discussion	All participants
12.20-2.00 PM	Group photo + Lunch	
2.00-2.30 PM	Work Package 3: Parenteral KAE609 for severe malaria	
(30')	Artemisinin resistance and the risk to severe	Dr. Selidji Maxime Agnandji, co-Principal
	malaria patients	Investigator, and Director, CERMEL
	WP3 status and outlook	Dr. Caroline Boulton
	Q&As/discussion	All participants
2.30-3.30 PM	Work package 4: Capacity building	
(60')	Building the next generation research capability	Dr. Eusebio Macete, General Director, Empresa
	in Africa	Farmácias de Moçambique; Investigator,
		Manhiça Health Research Center (CISM) virtual
	 Update on MSc and PhD student progress 	Ms. Teresa Machai, Head of training, Manhiça Health Research Center (CISM)
	PhD topics presentation	Mr. Abel Nhama, Mr. Nouhoun Barry, Mr.
	• Prib topics presentation	Victor Asua, PAMAfrica PhD students
	WP4 status and outlook	Dr. Helen Demarest, Director, Clinical
	VVI 4 status and outlook	Operations, MMV
	Q&As/discussion	All participants
(10')	Break	
3.40-4.05PM	Work Package 5: Operations & implementation	
(25')	 Observations from a funder's perspective 	Dr. Montserrat Blázquez Domingo, Senior
(23)		Project Officer, EDCTP
(23)		,
(23)	WP5 status and outlook	Ms. Olaug Bergseth, Associate Director, Externa
(23)		Ms. Olaug Bergseth , Associate Director, Externa Relations, MMV
(50)	WP5 status and outlookQ&As/discussion	Ms. Olaug Bergseth, Associate Director, Externa
4.05-5.00 PM		Ms. Olaug Bergseth , Associate Director, Externa Relations, MMV

5.00 PM	Bus back to the hotel
7.00 PM	Meeting at Le Refuge hotel restaurant Dinner for PAMAfrica and SINDOFO participants Le Refuge

Agenda day 2: PAMAfrica & SINDOFO cross cutting topic

Wednesday 21 September

8.30 AM WAT (CET-1)	 Departure from hotel to CERMEL Registration for SINDOFO participants 	
9.00 AM (10')	Opening by moderator	Dr. Ghyslain Mombo-Ngoma , Head, Clinical Operations, CERMEL
9.10 AM (20')	Welcome by the PAMAfrica and SINDOFO coordinators	Dr. Timothy Wells, Chief Scientific Officer, MMV Dr. Jana Held, Group Leader, ITM, EKUT and SINDOFO Project coordinator
9.30-9.45 AM (15')	Remarks on the importance of collaboration and sharing of knowledge across grants	Dr. Michael Makanga , Executive Director, EDCTP (virtual)
9.45-10.45 AM (60')	Capacity building session part 1: group discussion Introduction by the moderator Informal discussion in 3 groups around innovative solutions for research capacity development in collaborative projects (coffee and biscuits served during the session)	
10.45-11.45 AM	Capacity building session part 2: plenary	
(60')	 Keynote presentation Panel discussion 	Dr. Quique Bassat , ICREA Research Professor, Head Malaria Programme, ISGlobal Participation from group facilitators and online participants.
11.45-12.00 PM (15')	Wrap up and conclusions	Dr. Quique Bassat and Ms. Teresa Eduardo Machai
12.00 PM WAT (30')	Presentation about CERMEL	
12.30 PM (90')	Group photo + lunch	
14.00 PM (120′)	Guided tour (3 groups) through CERMEL's facilities and labs	Dr. Ghyslain Mombo-Ngoma
16.00 PM (90′ – 120′)	Guided tour through the Albert Schweitzer Museum or Boat trip	
Evening	Dinner close to the museum with cultural event – TBD	

Agenda day 3: SINDOFO 1st annual consortium meeting

Thursday 22 September

Objective: share goals, status, and future perspectives of different work packages and students' projects, with in-depth discussions on selected topics of common interest.

09.00 AM WAT (CET-1)	Departure from hotel to CERMEL			
09.30 AM (30')	Opening of the meeting Welcome by moderators Opening remarks	Dr. Jana Held, Group Leader, ITM, EKUT and SINDOFO Project Coordinator Dr. Ghyslain Mombo-Ngoma, Head, Clinical Operations, CERMEL Dr. Peter Kremsner, Head, Board of Trustees, CERMEL		
10.00 AM (15′)	Setting the scene: SINDOFO project overview, achievements and outlook	Dr. Jana Held		
10.15 AM (45′)	Introduction, declaration of role and responsibilities Development of the drug combination Q&A / discussion	Dr. Mukul Jain , President, Non-Clinical Research and Development Dr. Kevinkumar Kansagra , Principal Scientist All participants		
11.00 AM (20′)	 MMV: New role within the project MMV role in the combination development Q&A / discussion 	Ms. Vitalia Mitrovic, Project Manager All participants		
11.20 AM (20′)	Coffee break			
11.40 AM (20′)	 Observations for the consortium Q&A / discussion 	Dr. Montserrat Blázquez Domingo , Senior Project Officer		
12.00 PM (20')	 Work Package 2: Clinical trial 1 Overview on site and WP update Q&A / discussion 	Dr. Ghyslain Mombo-Ngoma All participants		
12.20 PM (20′)	 Work Package 3: Clinical trial 2 Site overview and WP update Q&A / discussion 	Dr. David Torres, Sub-Investigator WP3 All participants		

12.40 PM	Group photo + lunch	
(90′)		
2.10 PM	Work Package 4: Clinical trial 3	Dr. Moussa Lingani, Site Coordinator IRSS,
(20′)	Site overview on site and WP update	Burkina Faso
	Q&A / discussion	All participants
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2.30 PM	Work package 5: Clinical trial 4	
(20′)	 Site overview on site and WP update 	Dr. Bernhards Ogutu , Director CREATES,
	004 / 1	Strathmore University
	Q&A / discussion	All participants
2.50 PM	Coffee break	
(20′)		
3.10 PM	Work Package 6: Capacity building	D 0 : D
(20′)	WP overview, update and perspectives	Dr. Quique Bassat , ICREA Research Professor, Head Malaria Programme, ISGlobal
		Dr. Ghyslain Mombo-Ngoma
		Dr. Helen Demarest , Director, Clinical
		Operations, MMV
	Q&A / discussion	All participants
3.30 PM	Training and Capacity Building Needs Assessment	
(60´)	Presentation of the assessment document and	Dr. Ghyslain Mombo-Ngoma
	trainings incl. Workshop to promote African Leadership	Dr. Quique Bassat
	In-depth discussion with the consortium	All participants
	·	· ·
4.30 PM	 Wrap up and closing remarks 	Dr. Jana Held
(30′)	Coffee and informal conversations	All participants
5.00 PM	Bus back to the hotel	
J.00 F IVI	bus buck to the noter	
7.00 PM	Meeting in the hotel lobby	
	Departure for get together (Lambaréné´ Street restaurants)	





Practical information for the participation in the

PAMAfrica and SINDOFO back-to-back annual meetings

September 20th – 22nd, 2022, Lambaréné, Gabon

The information in thi	is note is important for your travel to Lambaréne, please read it caref	ully.	
Contacts:			
CERMEL:	Ms Régine Ekaghba <u>regine.ekaghba@cermel.org</u> , Ms Anita Dolet <u>anita.dolet@cermel.org</u> SMS or whatsapp +24177989191; +24162855113		
EKUT/SINDOFO:	Ms Vanesa Nkwouano <u>vanesa.nkwouano@klinikum.uni-tuebingen.de</u> Whatsapp +4917623677836		
MMV/PAMAfrica:	Ms Rana Rossignol rossignolr@mmv.org SMS or whatsapp +41794261040		
IMPORTANT: for any o	changes to your flight or other delays, please inform CERMEL and your	consortia point of contact.	
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1. PREPARING FOR TRAVEL

You will be required to present the following documents, please keep printed copies with you

- E-visa registration receipt (*Reçu d'inscription*) and E-visa approval travel authorization (Autorisation d'entrée)
- Invitation letter signed by Cermel with your name and passport number
- Humanitarian certificate for those whose travel has been booked with an NGO fare
- Yellow Fever vaccination certificate

Also, make sure to have some cash as you will be required to pay for the visa upon arrival at Leon Mba International Airport, see point 2.1. below for further details.

1.1 Visa

Citizens from the CEMAC region (Cameroon, Tchad, Congo, Equatorial Guinea, Sao Tome), South Africa and Morocco do not need visa to enter Gabon. Citizens of all other countries need to apply for a visa online at https://evisa.dgdi.ga Depending on nationality requirements may vary. Please read the instructions carefully. Please apply for a business visa.

During the application procedure, you may be asked to provide your invitation letter, and a contact person in the country, you can use the following details:

Name: Prof Ayôla Akim ADEGNIKA

Affiliation: **CERMEL**Address: **242 Lambaréné**Phone number: **+24177989191**

1.2 Vaccination and COVID-19

YELLOW FEVER: A vaccination certificate for Yellow Fever must be presented upon arrival at Leon Mba International Airport in Gabon.

COVID-19: To date no proof of Covid-19 vaccination or test is required. Please check any COVID-related requirements before departing and returning to your own country.

2. ARRIVING IN GABON

2.1. Visa fee

Although there is an ATM at arrival in Libreville airport, prepare for payment of the visa fee by cash in CFA francs (around 55,000 CFA) or euros (around 85 euros).

PAMAfrica participants will be reimbursed for the visa expense in Lambaréné. Please keep your receipt and reach out to Rana Rossignol during the meeting.

SINDOFO participants will be reimbursed through their Work Package budget.

If you have any issues at arrival, please contact the CERMEL administrative number +24177989191

2.2. Accommodation

Accommodation for delegates with a stopover in Libreville on route to and/or from Lambaréné has been booked for PAMAfrica participants at the <u>Park Inn by Radisson</u>. The hotel has a bus shuttle from the airport. Please look for Park Inn by Radisson shuttle upon arrival at the airport.

Check-in time 15:00, check-out time before 12:00 noon. Breakfast will be at "La Palette" hotel restaurant.

SINDOFO participants have booked their accommodations in Libreville individually and should contact their respective hotels for transfer.

3. TRAVELLING FROM LIBREVILLE TO LAMBARÉNÉ

The transfer from Libreville to Lambaréné and return will be available for **ALL** delegates. The transfer takes approximately 5 hours by coach.

According to your day of arrival, the coach will leave **PARK Inn Hotel at 12.00 midday** on Monday 19 September and Tuesday 20 September. **All delegates are asked to meet in the lobby of the hotel Park Inn by Radisson (Libreville) at 11.30am to ensure on time departure.**

4. MEETING IN LAMBARÉNÉ

4.1 Accommodation for ALL participants is booked for at the hotel Le Refuge in Lambaréné.

Hotel Le Refuge: WhatsApp +241 06 78 64 06

4.2 Meeting venue

The meetings will take place at CERMEL, ten minutes by bus from the hotel Le Refuge. Transport between the hotel and CERMEL will be provided every morning and afternoon.

4.3 Meals

If you have special requirements or allergies, please contact **Régine Ekaghba** (regine.ekaghba@cermel.org) **or Anita Dolet** (anita.dolet@cermel.org) **by Wednesday 14 September.**

Breakfast will be organised at the hotel. Coffee breaks and lunch are organised at the meeting venue, CERMEL. Dinner will be organized at the end of each meeting day¹. The details are included in the agenda.

4.3 Registration

All participants will need to register at the meeting venue. This will take place in the morning of the 20th September for the delegates that participate in the 1st day of the meeting, and in the morning of the 21st September for the delegates that participate from the 2nd day.

4.4 Language

All sessions of the meeting will be in English. Slides from presentations will be available afterwards and meeting reports will be prepared.

¹ For participants arriving on the 19th, dinner will be available at the hotel.

5. RETURN TO LIBREVILLE

For the return to Libreville, according to your travel schedule, coaches will be organized for the departure from the **Hotel Le Refuge** at **7 am** on Thursday 22 September and Friday 23 September.

All delegates who are travelling are asked to be in the lobby of the hotel Le Refuge (Lambaréné) at 6.30 AM. The coaches will drive ALL participants to the Park Inn Hotel in Libreville. For those travelling on the same day please refer to point 6.

6. DEPARTING GABON

For delegates with a stopover in Libreville before departing Gabon, accommodation has been booked at Park Inn by
Radisson for PAMAfrica participants. SINDOFO participants have booked their accommodation individually

For PAMAfrica participants flying on the same day, please register with Park Inn shuttle for transport to the airport. You will need to be at the airport at least **2,5 hours** before your flight departure.

7. OTHER RELEVANT INFORMATION

7.1 Malaria

It is recommended that travellers to Gabon take chemoprophylaxis.

7.2 Climate

Gabon has a tropical climate; thus, it is generally hot and humid. In September, the temperature in Lambaréné range between 23 and 30 degrees Celsius; we recommend being prepared for rainy days and air conditioner inside.

7.3 WIFI

WIFI is available at the hotel in Lambaréné and at CERMEL facility. Please note that the WIFI is not very stable at the hotel.

7.4 Local currency

The currency used in Gabon is Central African CFA franc (FCFA). Payments by cash (FCFA or Euros) is preferred. Credit cards are often declined due to network issues, ATMs are available (including upon arrival at the airport) for cash withdrawal.

7.5 Power plugs and sockets

In Gabon, the power plugs and sockets are of type C (two-pin). The sockets also work with plug E and plug F.





Type F







7.6 International access code

The country code for Gabon is +241 Useful emergency numbers are:

- Police 1730
- Ambulance 1300
- Firefighters 18

Annex: List of participants PAMAfrica & SINDOFO 2022 annual meetings

Institution	First Name	Last name	Consortia	Virtual
CERMEL	Ghyslain	Mombo-Ngoma	SINDOFO & PAMAfrica	
CERMEL	Bernard	Lell	SINDOFO & PAMAfrica	
CERMEL	Rella Zoleko	Manego	SINDOFO & PAMAfrica	
CERMEL	Dearie Glory	Okwu	SINDOFO & PAMAfrica	
CERMEL	Laetitia Johanne	Otchague	SINDOFO & PAMAfrica	
CERMEL	Benjamin	Mbadinga	SINDOFO & PAMAfrica	
CERMEL	Frederique	MBANG ABBA	SINDOFO & PAMAfrica	
CERMEL	Selidji T.	AGNANDJI	SINDOFO & PAMAfrica	
CERMEL	Ayodele	ALABI	SINDOFO & PAMAfrica	
CERMEL	Bisola	OLUBIYI	SINDOFO & PAMAfrica	
CERMEL	Charline	ABERE	SINDOFO & PAMAfrica	
CISM	Abel	Nhama	PAMAfrica	
CISM	Teresa Eduarda	Machai	PAMAFrica	
CISM	Jéssica Michelle	da Silveira Dalsuco	SINDOFO & PAMAfrica	
CISM	Eusebio	Macete	SINDOFO & PAMAfrica	
EDCTP	Montserrat	Blázquez-Domingo	Funder	
GRAS	B. Alfred	Tiono	PAMAfrica	
GRAS	San Maurice	Ouattara	PAMAfrica	
GRAS	Aissata	Barry	PAMAfrica	
GRAS	Nouhoun	Barry	PAMAfrica	
IDRC	Adoke	Yeka	PAMAfrica	

IDRC	Afizi	Kibuuka	PAMAfrica	Virtual
IDRC	Kalamba	Keneth	PAMAfrica	
IDRC	Victor	Asua	PAMAfrica	Virtual
IRSS	Bérenger	KABORE	PAMAfrica	
IRSS	Halidou	Tinto	SINDOFO & PAMAfrica	
IRSS	Innocent	Valea	SINDOFO	
IRSS	Moussa	Lingani	SINDOFO & PAMAfrica	
ISGlobal	Quique	Bassat	SINDOFO & PAMAfrica	
ISGlobal	David	Torres Fernandez	SINDOFO & PAMAfrica	
Merck	Jutta	Reinhard-Rupp	PAMAfrica	
Merck	Manfred	Klevesath	PAMAfrica	
Merck	Birgitta	Leopold	PAMAfrica	
MMV	Rana	Rossignol	SINDOFO & PAMAfrica	
MMV	Timothy	Wells	SINDOFO & PAMAfrica	
MMV	Stephan	Duparc	SINDOFO & PAMAfrica	
MMV	Helen	Demarest	SINDOFO & PAMAfrica	
MMV	Olaug	Bergseth	SINDOFO & PAMAfrica	
MMV	Gonzalo	Acuna	SINDOFO & PAMAfrica	
MMV	Vitalia	Mitrovic	SINDOFO & PAMAfrica	
MMV	Anne Claire	Marrast	SINDOFO	Virtual (part of the meeting)
Novartis	Caroline Louise	Boulton	PAMAfrica	
Novartis	Preetam	Gandhi	PAMAfrica	
Novartis	Armin	Weinzierl-Hinum	PAMAfrica	
Strathmore University	Bernhards	Ogutu Ragama	SINDOFO	
Strathmore University	Godfrey Alan	Otieno Muga	SINDOFO	

Tübingen	Peter	Kremsner	SINDOFO & PAMAfrica
Tübingen	Jana	Held	SINDOFO & PAMAfrica
Tübingen	Vanesa	Nkwouano	SINDOFO & PAMAfrica
Tübingen	Lais	Pessanha de Carvalho	SINDOFO & PAMAfrica
Zydus	Mukul	Jain	SINDOFO
Zydus	Kevin	Kansagra	SINDOFO