

Capacity Building Platform for clinical and operational research on Human African Trypanosomiasis (HAT)

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12 years of adapting our approach to the realities on the ground

OBJECTIVES

- Strengthen research capacity
- Improve the research landscape
- Develop operational research
- Support ethics committees
- Mobilize internal and external resources
- Develop partnerships with other research networks
- Ensure internal and external communication

ACHIEVEMENTS SINCE 2005

Contribution to the development of and access to a new treatment combination

Between 2005 and 2012, the HAT platform participated in clinical trials of the nifurtimox-eflornithine combination therapy (NECT) and the Phase IV study NECT-Field. NECT is now used as first line therapy for the treatment of all stage 2 *T.b gambiense* HAT patients in the 13 endemic countries. NECT is included on the WHO list of essential medicines for adults and children.

Participation in four clinical trials

Between 2011 and 2017, the HAT Platform participated in three Phase II/III clinical trials on fexinidazole. Results will be submitted to the regulatory authorities by the end of 2017. Finally, the HAT Platform is involved in a phase II/III clinical trial on acoziborole.

Its contribution to these studies consisted in:

- Facilitating the training of investigators and site staff in preparation for the clinical trials mentioned above, and an additional clinical trial on fexinidazole, the first inclusions for which occurred in the 4th quarter of 2016 in the DRC.
- Facilitating the meeting of investigators on NECT, NECT-Field, fexinidazole, and acoziborole
- Conducting exploratory missions with FIND for studies on HAT rapid diagnostic tests
- Contact with regulatory authorities and ethics committees



Training of laboratory technicians from South Sudan in DRC



acoziborole clinical trial investigators meeting

OVER 400 PEOPLE TRAINED IN 22 TRAINING SESSIONS

TRAININGS CONDUCTED AND NUMBER OF PEOPLE TRAINED	VENUE AND YEAR
Training in ethical review of research (142)	Kinshasa 2007, Khartoum 2007, Kampala 2007, Luanda 2008, Juba 2009, Bangui 2010
Training of physicians in good clinical practices (96)	Nairobi 2006, Kinshasa 2011 & 2012, Juba 2012
Training of physicians on clinical examination of the patient (25)	Kinshasa 2012
Training of clinical research monitors (13)	Kampala 2008
Participation in ICAT6 at Kinshasa (18)	Kinshasa 2014
HAT training in Dinamadji health district (30)	Dinamadji 2015
HAT Clinical training in South Sudan (41)	Juba 2015
Training of Guinean physician in DRC (1)	Kinshasa 2014
Training of laboratory technicians from South Sudan in DRC (3)	Kinshasa 2016
Training of Mobile team technicians on HAT diagnostic in DRC (36)	Kinshasa 2016
Waste management training in clinical trial sites in DRC (182)	Mushie, Vanga, Bagata and Masi 2016

18 newsletters published in French and English

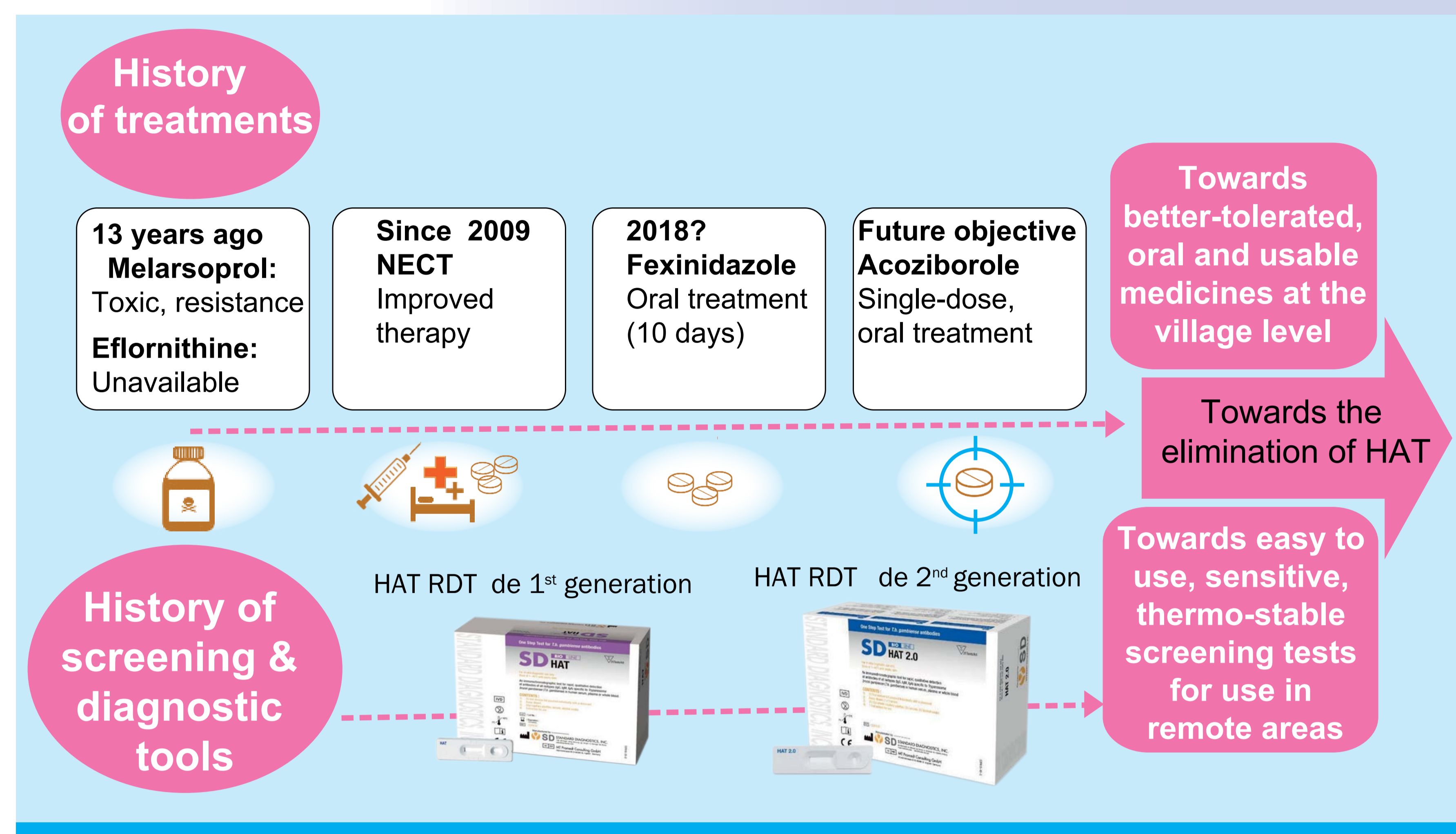
Television and radio presentations were also given on the co-administration therapy, NECT, for the treatment of stage II HAT

4 scientific meetings jointly organized with EANETT

(Nairobi 2010, Nairobi 2013, Kinshasa in 2014, and Conakry in 2016)

Steering committee meetings are held annually and the HAT platform ensures that its members participate in the biannual meetings of the International Scientific Council on Research and Control of Trypanosomiasis. In addition, the coordinator of the HAT platform generally gives scientific presentations at scientific congresses.

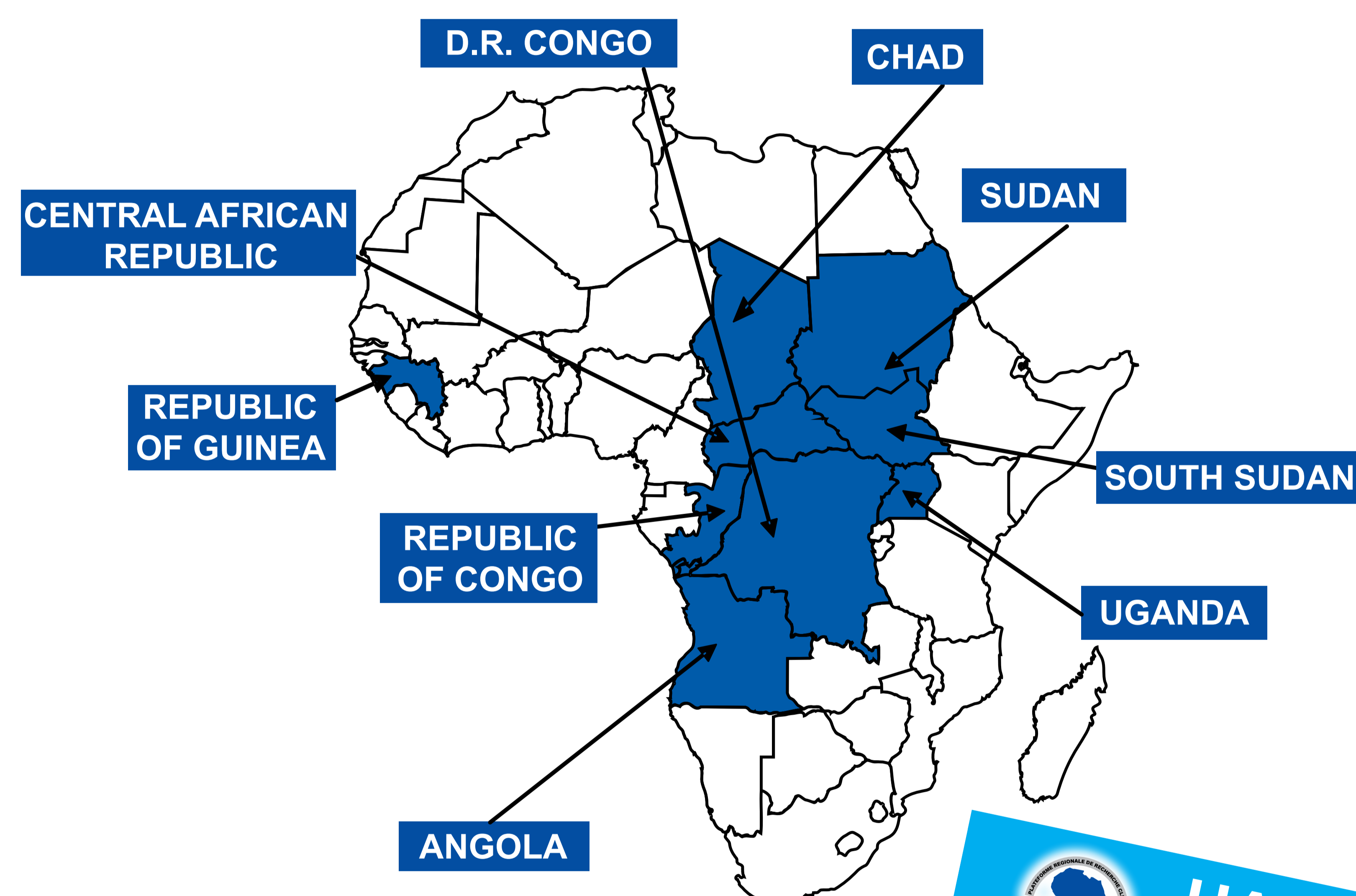
THE EVOLUTION OF TOOLS IN THE FIGHT AGAINST HAT



MEMBERS OF THE HAT PLATFORM

Launched in August 2005 in Kinshasa

National sleeping sickness control program and research institutions/ universities of the most affected countries



INTERNATIONAL RESEARCH GROUP:
DNDi, FIND, Swiss TPH, ITM Antwerp, IRD (France)
INZI project/ University of Edinburgh

International NGO:
MSF

Observer:
WHO

Others platforms:
EANETT



CONCLUSION

Through the HAT platform, local partners are involved in research and are the first to benefit from the results. The HAT platform facilitates capacity building and the conduct of studies under difficult conditions, in accordance with international standards and ethical and quality requirements, in particular with respect to the upgrading of staff and infrastructure. The HAT platform has created synergy between endemic countries in the region, and multilateral exchanges have been established. We need to continue to strengthen this synergy through increasing collaboration with other platforms and organizations, such as the African Network for Drugs and Diagnostics Innovation (ANDI), Eastern African Network for Trypanosomiasis (EANETT), Pan African TSETSE and Trypanosomiasis Eradication Campaign (PATTEC), Organization for the control of endemic diseases in Central Africa (OCEAC), etc.

The HAT platform continues to use an approach adapted to the reality on the ground, which allows local partners, who are the users of the results, to be the main actors. National programs use the research results to adapt their national policies.