

CDT-Africa News



A Newsletter of the Center for Innovative Drug Development and Therapeutic Trials for Africa



Editorial

Volume 2 Issue 1

Dear friends of CDT-Africa, Enqutatash, Happy Ethiopian New Year. Welcome to the first edition of our Newsletter of the New Ethiopian Year, 2014.

August was the last month of the year (2013) and of the rainy season. It was also a time of reflection. At the start of 2013, our primary plan was to strengthen our medical discovery laboratory-renovate the Sefere Selam lab space, procure essential equipment and reagents for chemistry, molecular, and cell culture labs. All in all, very good progress has been made. There are challenges in relation to procurement and the broader innovation ecosystem. We have begun evaluation of the innovation ecosystem of the country with the aim of assisting improvement. We visited three universities and interviewed 20 scientists to gain an initial insight on how the innovation ecosystem needs to change. We hope to complete this work in the coming six months and present the results to critical policy makers.

In these two months, our ASSET team has continued working with the Federal Ministry of Health. One of the key activities was a review meeting with the Ministry and representatives from the project implementation areas to evaluate the implementation of the Ethiopian Primary Health Care Guideline and Quality Improvement manual for primary health care. Training of Master trainers and facility trainers were conducted and supportive supervisions undertaken in these sites. In addition to this work with the Ministry of Health, the ASSET team continues to work on its healthcare delivery work with full engagement of local stakeholders and moves towards a successful closure by December 31, 2021. This work is being done with our long-term partner, King's College London. We are very grateful for their continued support.

We just completed the implementation of the EnDPoINT project in the Awi Zone. Through this project, we have identified four promising medicinal plants with antimicrobial, antipain and anti-inflammatory properties. We have been developing diagnostic tools to estimate limb swelling more accurately and distinguish between the various causes of limb swelling - podoconiosis, lymphatic filariasis and leprosy, highly debilitating and stigmatizing ..

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The College of Health Sciences is a large institution with huge potential. Through its four schools-School of Medicine, School of Pharmacy, School of Public Health, School of Nursing and Midwifery and its 600+ faculty, trains over 5000 students, including Fellows and PhD candidates. The College also offers highly specialised health services, including cancer care, with over half a million patients treated every year. Recently, the Minister of Health, Dr. Lia Tadesse, the President of Addis Ababa University, Prof Tassew Woldehanna signed a contract agreement to renovate 13 wards of the Tikur Anbassa Specialized Hospital. This is clear evidence of the commitment of the government, the university and the college to improve healthcare in Ethiopia and the region, and the tacit recognition of the role of this national treasure, Tikur Anbassa Specialized Hospital.

The new management of the College is aware of its enormous responsibilities. We will work tirelessly and engage with our partners proactively and unreservedly to ensure that the potential of the College is exploited fully to the benefit of the country and the region. I would like to take this opportunity to thank my predecessor Dr. Dawit

Wondimagegn, for taking on the hard work of leading such a giant institution and building essential foundations of progress for the past four years.

I am pleased that CDT-Africa is in the College of Health Sciences and the scientists leading it come primarily from the college. The centre should be congratulated for their big vision, making the region produce its own drugs, vaccines and diagnostics, and the major results they have achieved in four short years. The centre deserves not only the support of the College and Addis Ababa University but also of the federal government at national level. I commit the college to offer direct support to the centre and mobilise broader institutional and national support.

Dr. Andualem Deneke,

Chief Executive Director, Addis Ababa University, College of Heath Sciences

Editorial, continued ...

... conditions. Through the healthcare delivery innovation platform, it was possible to provide clinical care for over 2,000 people with these conditions. We have also been able to reach about 12,000 households through our community conversation programme. We are grateful to the Brighton and Sussex Medical School of the United Kingdom for their exemplary partnership and look forward to building this partnership over the coming years.

Our staff work quietly without seeking recognition. Yet, sometimes, recognitions come to where they are. We are very pleased that one of our members, Dr. Asrat Mengiste, was recognised by the Ethiopian Society of Plastic & Reconstructive Surgeons with a Lifetime Achievement Award for his "years of dedicated and outstanding service as Champion of Cleft Care & Reconstructive Surgery in Ethiopia".

Our current 5-year strategic plan will expire in 2022. We are working on a longer (10-years) strategic plan with on going focus on our three strategic pillars: medical discovery and development; clinical trials and regulation; and healthcare delivery innovation to improve access to medicines. The 10-years strategic plan will be more ambitious and aims to pave the way for Ethiopia's self-sufficiency in essential medical commodities (drugs, vaccines and diagnostics).

We would like to say thank you for your partnership in 2013. Through your support, we are closer to our goal of building an endogenous medical discovery expertise and assured access to medicines in Africa. We hope your support will continue in the coming year.

CDT-Africa joins Ministry of Health to review implementation of Ethiopian Primary Health Care Guideline & supporting health system strengthening interventions

The Ministry of Health in collaboration with CDT-Africa reviewed the implementation of the Ethiopian Primary Health Care Guidelines and a new facility-based training programme in Quality Improvement for primary health care, co-developed with CDT-Africa. The meeting took place on 28th August 2021. A team of experts from the Ministry of Health, CDT-Africa and health bureau representatives from the intervention areas took part in the review meeting.

The Ministry of Health is scaling up the Ethiopian Primary Healthcare Clinical Guidelines (EPHCG) as part of its efforts to improve the quality and reach of health centre-based services. CDT-Africa through its health systems strengthening project (ASSET) has been supporting this effort. First ASSET carried out a series of 'diagnostic' studies to understand the health system bottlenecks to successful implementation of EPHCG. This information was then used to co-produce a series of health system strengthening interventions with the Ministry of Health to enhance the success of EPHCG. The project is currently implemented in Misrak Meskan, Meskan, Debub Sodo and Sodo districts as well as Butajira City administration in Gurage Zone and will be scaled up at the national level upon successful implementation in these pilot project sites.



development of a facility-based training programme in Clinical Communication (CCS) for person-centred care in the primary health care setting. Both the QI and CCS training are innovative because they use adult learning principles. Health workers train in teams on a weekly basis, working through case examples and reallife problems that they encounter in their work. CDT-Africa has supported the training of Master trainers and facility trainers to cascade this initiative to the health centres. The Centre in collaboration with the Ministry of Health undertakes supportive supervisions in the pilot areas to assist the implementation of the broader Ethiopian Primary Health Care Guideline.



The meeting was the first of a series of planned review meetings over the next four months, in which health facilities districts will learn from one another. Alongside the implementation, CDT-Africa ASSET project is evaluating the impact on key indicators, specifically on personcentred care, integration of psychosocial care detection and management of pre-eclampsia.

The Quality Improvement manual was developed to equip Primary Health Care-based health workers with the essential knowledge, attitudes and skills to carry out quality improvement activities as a routine part of their work with the goal of achieving high-quality universal health coverage in Ethiopia.

CDT-Africa has also assisted the Ministry in the

CDT-Africa's ASSET project works across four sub-Saharan African countries in the area of noncommunicable disease/mental health, maternal health and surgical care platforms with the aim of developing effective health system strengthening interventions to support the translation of clinical evidence into delivery of integrated continuing care at scale across the three healthcare platforms.

CDT-Africa launches CPT clinical trial for treatment of Covid patients



CDT-Africa recently launched a phase IIa open-label randomized controlled trial to assess safety, efficacy, and feasibility of deploying a high-titered convalescent plasma therapy (CPT) in a cohort of moderately and severely ill COVID-19 patients in Ethiopia. Ethiopian Public health Institute, National Blood Bank and the Millennium Covid Treatment Centre are jointly implementing the trial.

During the launching ceremony, Professor Abebaw Fekadu, CDT-Africa Centre Leader noted that Covid-19 has taken the lives of over 4.6 million people globally and over 5,000 in Ethiopia with serious negative economic consequences. "In countries like Ethiopia, where access to preventive measures is limited, the impact of the pandemic can be worse. The mechanisms put in place for global vaccine distribution have not been effective either." He noted that WHO aimed to vaccinate a meagre 10% of the African population by the end of September 2021. As shameful as that target was, not even 2% of the population of Africa has been vaccinated by the target date. "In the absence of effective antivirals, Convalescent therapy may be an alternative to save lives. We hope this trial will allow us to develop other impactful treatment options in the country." Professor Abebaw said.

According to Professor Abebaw, "Covid-19 is a wakeup call for Africa; ... Africa can't depend on external agencies for its health security. True independence in health technology is vital for true independence. It is time for Africa to produce its own medicines, and vaccines."

Dr. Getachew Tollera, Deputy Director General of EPHI, for his part said "the country is on its third covid-19 pandemic wave with the delta variant active and spreading in the country which has high transmission rate compared to the alpha variant."

"Though the country has not been as hardly hit by Covid-19 as some developed countries, the pandemic is not yet over, so we can't sit back and relax. Our fight against Covid-19 continues. This trial is part of such an effort", Dr. Getachew said.

Dr. Getachew highlighted the institute's emphasis on strengthening partnerships and collaborations

since the pandemic started. Besides the atrocities, he said "Covid-19 has also opened new opportunities for collaboration. At the start of the pandemic the institute has set up Operational Research Taskforce and National Covid-19 Research Taskforce with active contribution of the CDT-Africa team".

Habtamu Taye - Deputy Director General - National



Dr. Getachew Tollera, Deputy Director General - EPHI

Blood Bank appreciated the initiative, and assured the blood bank's commitment to support the trial. "I hope this trial, which is part of the effort to mitigate Covid-19, will be successful," he said.



Habtamu Taye - Deputy Director General - National Blood Bank

The clinical trial is being started at the Millennium Covid Treatment Centre, which will be scaled up to other Covid-Treatment centres in the country, as necessary.

CDT-Africa secures laboratory equipment through Seeding Labs

CDT-Africa received a donation of laboratory equipment worth over \$100,000 through Seeding Labs to help strengthen the centre's medical discovery facility.

The process has taken over a year to complete but was worth the wait and all the effort. CDT-Africa was selected to receive the award

for its "potential to solve problems and change lives through science" according to Seeding Labs.

On the occasion of the award of the instruments, Prof Abebaw Fekadu, Centre Leader of CDT-Africa, stated that "The instruments will remove a critical barrier for a promising new regional medical discovery centre like CDT-Africa to be a major resource for Africa; ... Through such positive partnerships, Africa will not only become self-sufficient but also be a significant contributor to the global health solutions.".

According to Dr. Christina Viola Srivastava, Director of Programs at Seeding Labs "The diverse lab equipment



will provide the necessary foundation to generate new knowledge, leverage sustainable funding, and better prepare faculty and university students for the scientific workforce...".

Seeding Labs is a US-based non-governmental organization working to help build sustainable scientific infrastructure that increases research capacity; empowers every scientist to transform the world. Seeding Labs connects scientists in developing nations with lab equipment, training, and opportunities to collaborate with experts in their field—and to use these vital resources to improve education, research, and economic development.

JICA Ethiopia team visits CDT-Africa

Representatives from the Japan International Cooperation Agency (JICA) visited CDT-Africa and held productive discussions on areas of potential collaboration.

On the occasion, Ms. Mai Toguchi, JICA Representative, and Mr. Biruk Zenebe, Programme Officer for Social Sector, explained the education and cultural programmes of JICA, including the JICA chair activities.



The CDT-Africa team briefed the JICA representatives about the interest of CDT-Africa in enhancing the innovation ecosystem of Ethiopia, and the interest of the Centre to learn from Japan on how transformative scientific advancement could be achieved while maintaining cultural integrity, as was the case in Japan. Dr. Shunji Nagai, Medical Attaché of the Embassy of Japan, and Mr. Dejene Sakoume, Secretary, Press and Cultural Division of the Embassy of Japan, attended the meeting.

Interview with CDT-Africa's staff member Dr. Asrat Mengiste

Dr. Asrat Mengiste, is a staff member at CDT-Africa since July 2018. He was recently given a Lifetime Achievement Award in recognition of his years of dedicated and outstanding service as Champion of cleft care & reconstructive surgery in Ethiopia from the Ethiopian Society of Plastic & Reconstructive Surgeons. We had a few words with him about his work and his recent recognition.

CDT-Africa News: How and why did you join CDT-Africa, and tell us about the project you are involved in with the Centre?

I noticed that what I and my colleagues have been doing for decades providing surgical treatment for thousands of individuals with disabilities was like a drop in a bucket compared to the demand. I realized that preventing these disabilities is much easier and more cost effective. I chose to pursue a career in clinical research at CDT Africa in 2018 so that I'll make a better difference in people's lives, whether through helping patients in new ways, or working to combat increasingly-prevalent issues like Neglected Tropical Diseases (NTDs) which cause disabilities.

I saw this opportunity as a way to contribute to the CDT Africa research EnDPOiNT project working through implementation research on Integrated Morbidity Management and Disability Prevention (MMDP) of patients with elephantiasis at three districts in Amhara region. This gave me a deeper understanding of dealing with the MMDP of the three NTD diseases namely, Podoconiosis, Lymphatic filariasis and leprosy

CDT-Africa News: How is CDT-Africa involved in the fight against NTDs? How active has CDT-Africa been in NTD Research?

CDT-Africa is involved in identifying better ways of prevention and management of NTDs. It also works on developing innovative diagnostic tools and drug trials for treatment of some of the NTDs. I believe that CDT-Africa will be among the leading research centres for NTDs in Ethiopia in the coming years.

CDT-Africa News: What are some of the project's successes so far?

Existing practice and field research to integrate and scale up a holistic package of community-level care including physical, psychosocial and mental health care into routine health services for patients with lower limb lymphoedema (podoconiosis, lymphatic filariasis and leprosy) in selected districts in Ethiopia showed encouraging outcomes.



Integrated service is shown to be more cost-effective and efficient than disease-specific interventions and feasible. Attitudes of the health providers towards integration were positive. The research results provided vital information about the development of integrated approaches to improve the wellbeing of these individuals to influence policy decisions at both the local and national level. Different aspects of our research findings were published in five international journals. [Our work will also] be put in a database where other scientists and policy makers can study our research and work towards improving the services.

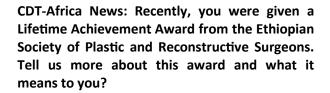
The project is also changing lives. Take for example the story of Abebe [NAME CHANGED TO PROTECT IDENTITY OF PATIENT], one of the at least 2,000 patients who received care through our programme. He is a 60-years old farmer and a father of five in one of the project intervention sites. It all began for him when he noticed a gradual swelling on his foot 30 years ago. At first he thought it would just go away, but it didn't. It got worse to the extent that it hindered his movement and work, affecting his life both socially and economically. People in that part believe that Elephantiasis is a punishment from God. So, there is shame and stigma associated with the disease. He is now in much better condition--after receiving treatment through the project. His recurring acute attack and the swelling has dramatically decreased...So, I believe it is already making a difference in peoples' lives.

CDT-Africa News: What is Ethiopia's Disability-related reconstructive surgery need?

Survey data from 2015/16 indicates nearly 7.8 million people in Ethiopia are estimated to live with some form

Interview with Dr. Asrat continued ...

of disability. Of these, up to 2.2 million people have very profound difficulties. Burns, trauma, NTDs and congenital anomalies can cause severe morbidity and contribute significantly to the national disability burden. Reconstructive surgery plays a significant role in alleviating some of the disabilities amenable to surgical intervention. Continued expansion of the Reconstructive workforce surgical and accompanying infrastructure is critical to meet unmet surgically correctable disability burden. Though there is progress in the infrastructure and human resources in the field in the last two decades in Ethiopia, we are still far behind to meet the national demand.



It is an award in formal acknowledgment of my contributions over the whole of my career in recognition of years of dedicated and outstanding service as Champion of cleft care & reconstructive surgery in Ethiopia. I was given the award during the society's annual meeting in August 2021.

CDT-Africa News: What does this award mean to you?

I was pleasantly surprised, of course. It is an assurance that I am on the right path while doing what I love, what I am passionate about most of my professional career. This encourages me to do even more.

A four year milestone ...

CDT-Africa just completed the EnDPoINT project after four years of implementation. The project was completed successfully on time despite the severe disruptions of the COVID-19 pandemic. The project was carried out in partnership with the Brighton and Sussex Medical School (University of Sussex), UK, and focused on three neglected tropical diseases causing lymphoedema (podoconiosis, lymphatic filariasis and leprosy) and scabies. The project was conducted under the drug development, diagnostic development and the healthcare delivery innovation platforms of CDT-Africa. The aim of the drug development work was to prepare a skin care product.



Dr. Abiye Hailu, Plastic and Reconstructive Surgeon & Society's Executive Committee handing over the award

Three promising local medicinal plants with antimicrobial, antipain and anti-inflammatory properties were identified from 250 potential plants. Work is in progress to develop identified compounds. In the diagnostic development platform, the centre has worked to enhance diagnostic accuracy of the causes of limb swelling and assessment of treatment outcome. The evaluation of two products is completed with a third just starting. In the care delivery innovation work, integrated care was offered for people with limb swelling from the three conditions. Staff at 13 health centres and 65 health posts were trained and supervised to provide care. Critical supplies, including wash basins, soaps, gauzes, vaseline, shoes and antibiotics were provided. As these are extremely stigmatising conditions, the intervention involved antistigma approaches, including community conversations (CC). Over 2000 patients with limb swelling (lymphoedema) were reached, many of them improving significantly in terms of their illness symptoms and day to day functioning. Over 3000 facilitators of CC were trained and about 12,000 households were reached. Programmes to improve living conditions were also part of the project. The scabies study was a small subproject that evaluated the impact of mass drug administration on the prevalence of scabies. The results are being analysed but preliminary figures are of interest.

Scientific publications through this project can be accessed here:

CDT-Africa sets next 10 years strategic direction

CDT-Africa held its strategic planning meeting to set centre's upcoming 10 years strategic direction to meet its goal of achieving equitable access to medicines in Africa through medical discovery & development and research & education at a meeting held 15-20 August.

As Africa centre of excellence for education and research in medical discovery and development, the Centre will focus on the key strategy pillars of vaccine discovery and development, diagnostic discovery and development, drug discovery and development as well as health evidence and policy.

Speaking at the Occasion, Centre Leader, Professor Abebaw Fekadu said Africa needs to ensure its security by ensuring its self-sufficiency in health technology. There is no true freedom for the continent without basic capacity of ensuring access to essential medicines, including vaccine technology, to its citizens. Africa should develop its capacity to produce the drugs,



vaccines, and diagnostics it needs.

"No excuse will be sufficient to fail at this. We need to work together to ensure Africa produces all the medicines it needs in the next 15 years to ensure its true freedom. This undeniably needs robust leadership and strong partnerships." He said.

Centre trains data collectors for survey on Covid-19 early case finding, populationlevel impact, innovative control approaches in Ethiopia (The Epic study)

CDT-Africa trained data collectors who will engage in gathering data for the Centre's Epic Project.

Epic, a partnership project with the Ministry of Health, and the Ethiopian Public Health Institute, aims to understand the health, economic, and social impact of Covid-19 and innovative containment measures in the country. The result will be an input for national level Covid-19 response and control measures.

During the training, data collectors were given an overview of the project and trained on ethical practices during data collection, the role of data collectors, content of the questionnaire and possible challenges call agents may face.



As an African Centre of excellence for research and education, through this project, CDT-Africa hopes to contribute to the national Covid-19 mitigation efforts. The Centre has worked to support the national level response of the pandemic through knowledge translation. Its knowledge Synthesis Team worked with the ministry of health to curate evidence from various credible sources daily on the spread of the pandemic.

CDT-Africa was established as an Africa Centre of Excellence to build endogenous expertise in Africa to address the development challenge posed by poor access to drugs, vaccines, and diagnostics in the continent.

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