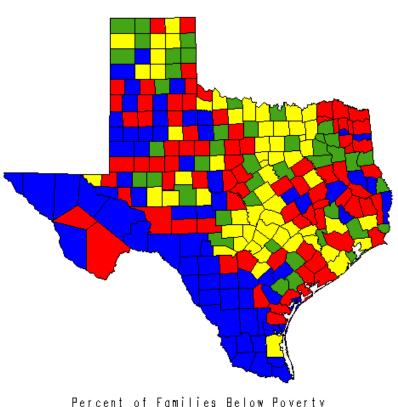
# June 7, 2012 Global Health R&D and the Hidden Burden of Neglected Tropical Disease in Texas

Summary and Cross-Cutting
Themes of the Day

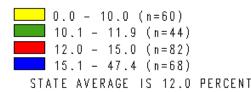
Peter Hotez

### Plenary 1

- Joe McCormick
  - We do not pay attention unless the disease "hits our shores"
  - We have learned it is not enough to simply hit our shores.
  - If it's striking U.S. impoverished populations (or people of color?).
  - Diseases of the "other America" will not be noticed?
    - Diabetes and TB
    - Chagas disease
    - Cutaneous leishmaniasis

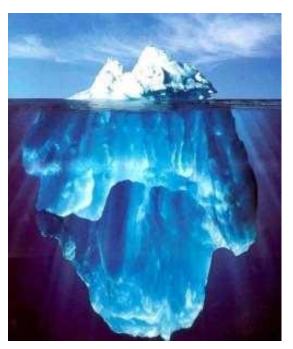






#### Panel 1: Neglected Parasitic Infections

- "Tip of the iceberg"
  - Chagas and leishmaniasis
  - Widespread in dogs
  - Widespread in other animal reservoirs
  - Insect vectors are widespread
  - Maternal child transmission
  - Blood transfusion
- No active public health surveillance
  - No burden assessments
- Modes of transmission minimally assessed
- Minimal local and state lab capacity for diagnostic testing
- Available drugs developed in the Jurassic era
- Vector control strategies?





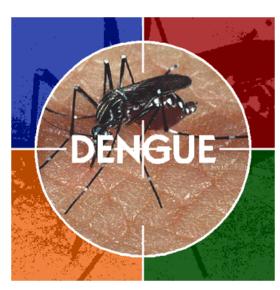
Adult Rhodnius prolixus, a kissing bug. WHO/TDR/Stammers

### Panel 2: Neglected Viral Infections

#### Dengue

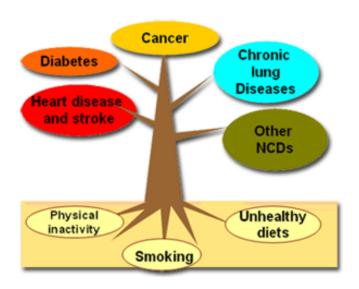
- Urban areas not just a disease of the poor
- High seroprevalence of dengue in South Texas
- Emergence of dengue in Houston
  - Perfect storm in Houston
  - Outbreaks in May and June
  - Is it a game changer?
    - Is border infectious disease program still relevant
    - Risk of hemorrhagic fever?
    - Vaccinating Houston?
- Endemic in Caribbean/Pacific Islands
- Changes needed Much the same as those needed for Chagas/Leish
- Surveillance
  - Improve clinical awareness
  - Improve case management
  - Data to improve prevention
  - Prevent local DENV transmission
- Diagnostics
- Disease burden data cyclical disease





### Panel 2.1. Neglected CNCDs

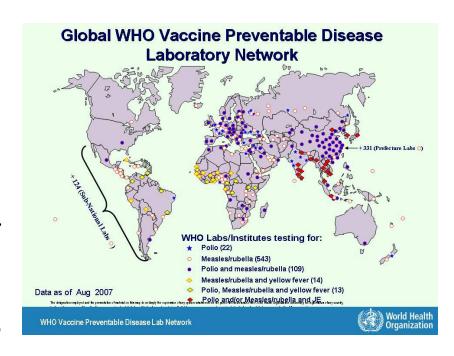
- TB and diabetes
  - 5,000 TB patients on both sides of the border
  - 30% of TB cases have diabetes as the primary risk
  - Mexicans vs. other populations
  - Mechanistic studies
- Should we be looking at the NTDs together with CNCDs – Chagas, leish, NCC, dengue?



### Plenary 2

#### Jon Andrus, MD

- Capacity development for embracing new technologies
- Folding in the policy process for introducing new vaccines
- Making the investment case –
   do we need to show that
   Chagas, Leish, Dengue
   interventions are cost-saving?
- Laboratory networks like we have in Latin America?



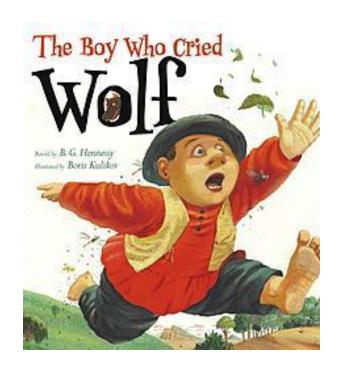
#### R&D Panel

- Needs are pervasive
  - Lack of appropriate animal models of disease
  - Expertise in pathogens, vertebrate host, vectors
  - Labs with special containment
- Translating into products
  - Lots of candidates, money, and long timelines
- Models to make the investment case closing the gap between technology innovation and market needs
  - Push vs. Pull Technologies
  - Products are cost savings
  - Hidden economic benefits



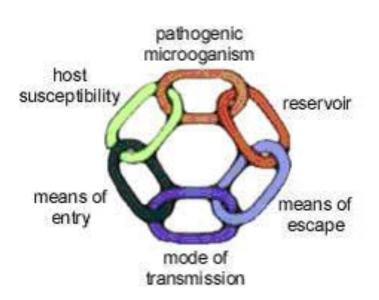
### Cross Cutting Theme 1: Embarking on public health studies

- Lost emphasis on public health in the scientific community
  - We need hard data for surveillance
  - Otherwise we're crying wolf
  - Who is going to do this?
  - Academic, Local, State, Federal?
  - Where can we obtain funding?
- "Twinning opportunities" with local universities in South Texas
  - UTPA
  - THE MEPI MODEL
  - Partnering with CDC, State, Local health agencies



#### Cross cutting theme 2: Transmission

- For Chagas and Leish inadequate data on the ecology of transmission
  - Vectors
  - Animal Reservoirs
  - Dogs
- Dengue risk map



### Cross cutting theme 3: The public health laboratory

- Urgent need for capacity building
- Minimal local and state lab capacity for diagnostic testing
  - Chagas
  - Leishmaniasis
  - Dengue



### Cross cutting theme 4: New Generation of Control Tools

- Need for new products
  - New drugs
  - New vaccines
  - New diagnostics
  - New vector control agents & strategies
- Products for non-lethal diseases
- Marketplace has failed
- Cost-saving
- Role of NIH and BMGF?
- New Foundation?



### Cross Cutting Theme 5: Economic Downturn

- Who is going to do the public health surveillance?
  - Lost state and local public health capacity
  - Budget cuts at the CDC
- R&D downturn
  - NIAID success rate 10%
  - NIMHD?
  - Pending sequestration
- South Texas opportunities to set up simple and straightforward studies



### Cross Cutting Theme 6: Getting the word out

Scientists not trained to speak to the public

 How do we get people to care about NTDs in U.S. affecting Hispanic populations and other

people of color



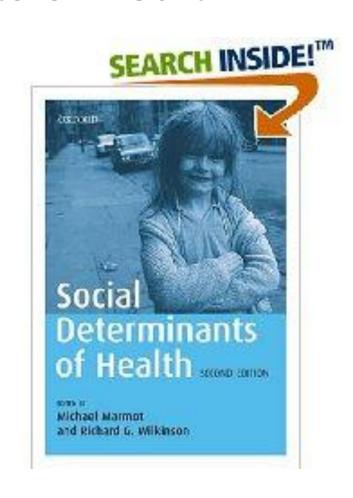
## Cross cutting theme 7: Education physicians and other health care providers

- Diseases
  - Chagas
  - Leishmaniasis
  - Dengue
- Lack of clinical recognition
- Lack of clinical management



### Cross cutting theme 8: Social determinants of health

- Equity and justice
- What is it about poverty?
- What else should we be concerned about?
- Community commitment
- Monitoring



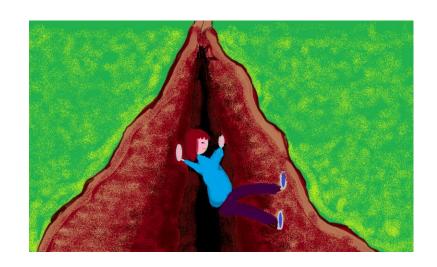
### Cross cutting theme 9: Linking public health with public policy

- Where do we go with shaping public policy?
  - Chagas
  - Leishmaniasis
  - Dengue
  - NTDs with CNCDs?
- And linking it with the urgent public healt needs outlined above
- Importance of political commitment
- Linking global health with U.S. health disparities
- Engaging the Texas congressional delegation?
- Which caucus?
  - NTD-Malaria?
  - Black and Hispanic?



### Cross cutting theme 10: Are NTDs in U.S. falling through the cracks?

- Not global health
- Not affecting Reston,
   Virginia
- Affecting neglected minority populations living in poverty in the U.S.



The "bottom 46 million"

#### Next steps

- Is the concept of NTDs in U.S. transformational?
  - Turning global health R&D on U.S. health disparities
  - Falling through the cracks?
- Create a "white paper" on the major themes and outlines of needs and next steps?
- Viewpoint in the peer-reviewed litera
- Op-ed?
- Visits on the Hill?
- Engaging the electronic media?



#### THANK YOU

- Research!America
- American Society of Tropical Medicine and Hygiene
- Baylor College of Medicine
- Sabin Vaccine Institute & Texas Children's Hospital Center for Vaccine Development











