

## BVGH Newsletter



### March 2016

1. [UN High-Level Panel](#)
2. [Interview with Merck & Co., Inc.](#)
3. [BVGH Membership Program](#)
4. [Eisai's Work in Global Health](#)
5. [WIPO Re:Search Highlighted Collaboration](#)

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#### Note from Jennifer

Dear BVGH Friends and Colleagues,

We are off to a great start in 2016 and are excited to continue making advances in global health.

BVGH is pleased to announce the completion of our [2015 Partnership Hub Annual Report](#), which highlights BVGH's WIPO Re:Search activities and achievements in 2015 and since the Consortium was launched.

This issue of the BVGH Newsletter features an interview with Brenda Colatrella, Executive Director, Office of Corporate Responsibility, Merck & Co., Inc. We have also highlighted BVGH's Membership Program, summarized Eisai's global health programs, and described a WIPO Re:Search collaboration between Alnylam Pharmaceuticals and researchers at Aberystwyth University.

We look forward to a productive year to come and are eager to continue to work collaboratively to bring our global health goals within reach.

*Sincerely,  
Jennifer Dent  
President, BVGH*



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#### United Nations Secretary-General's High-Level Panel on Access to Medicines solicits recommendations from BVGH

Jennifer Dent, President of BIO Ventures for Global Health (BVGH), participated in the United Nations Secretary-General's High-Level Panel on Access to Medicines in London earlier this month. The

objective of the Panel's discussion was to propose incremental modifications to existing pharmaceutical innovation and access models. During the Panel, Jennifer called for the expansion and scale-up of collaborations between the biopharmaceutical industry, researchers, and governments to facilitate greater access to medicines.

Also in attendance at the UN High-Level Panel was Michel Sidibé, Executive Director, UNAIDS and Under-Secretary-General of the United Nations. He spoke at the evening session in London on March 10<sup>th</sup>. Mr. Sidibé said, "Partnership and innovation are critical to addressing gaps in global health and access to medicines. We should work within the current system to expand and build new partnerships to increase access to medicines for all patients. Governments will be key to implementing programs, including partnerships, with the biopharmaceutical industry and other sectors."



To learn more about BVGH's involvement at the UN High-Level Panel on Access to Medicines, [click here](#).

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### **Interview with Brenda Colatrella, Executive Director, Office of Corporate Responsibility, Merck & Co., Inc.**

**Besides Merck's core business of discovering and developing medicines and vaccines, what other activities is Merck employing to impact global health?**



At Merck, we believe strongly that the best way to create long-term value for both society and our business is through the discovery and development of innovative medicines and vaccines that improve health. In fact, this year marks our 125<sup>th</sup> anniversary as a global healthcare leader. We also believe that we have an important role and responsibility to improve access to medicines, vaccines, and quality healthcare worldwide. For that reason, access to health is central to our approach to corporate responsibility, with a focus on long-term, innovative solutions, and leveraging of partnerships.

We understand that the challenges we face in global health are beyond the ability of any single organization or country. Accordingly, we have long believed in the power of partnerships in both our business models and our social investments. Through strong partnerships, Merck is able to advance much of the work we do.

In Africa, for example, where we have had a presence for more than 50 years, we have a dedicated team of public health and medical specialists called the Institutional Business Africa unit that works to facilitate access to essential medicines in Africa, in collaboration with country governments, international

donors, and non-governmental organizations. Collectively, we help to ensure the successful delivery of healthcare services, particularly lifesaving vaccines and family planning.

While we have a number of ongoing collaborative global health programs, two that really highlight our commitment to advancing global health through our social investments are Merck for Mothers and the MECTIZAN® (ivermectin) Donation Program.

Merck for Mothers is a 10-year, \$500 million initiative launched in 2011 to address maternal mortality. Merck for Mothers works with over 75 implementing partners in 30 countries around the world with a focus in India, Senegal, Uganda, the U.S., and Zambia. The goal is to test innovative, scalable, sustainable models that expand women's access to affordable, quality care.

Our MECTIZAN® Donation Program was launched in 1987 to control onchocerciasis (river blindness) by donating as much MECTIZAN® as needed. In 1998, the program was extended to the prevention of lymphatic filariasis. Merck has donated more than two billion treatments in Africa, Latin America, and Yemen to help eliminate these two diseases. In the case of river blindness, three countries in Latin America have received WHO verification of elimination with a goal of elimination in selected African countries by 2020.

**Given the changing global health landscape (for example the rise of non-communicable diseases in developing regions), do you envision Merck also changing its focus in its global health strategies and partnerships?**

We recognize that companies must adapt and respond to changing global health needs. Today we are at the forefront of inventing or facilitating access to tools for the fight against some of the world's most urgent global health challenges including more than 30 different cancers, hepatitis C, Alzheimer's disease, Ebola, and many others. Our current pipeline and list of marketed products are aligned with the major global burden of diseases (based on the Global Burden of Disease 2010 Study). This changing landscape is also reflected in our current giving priorities. Our philanthropic health portfolio focuses on improving healthcare quality and health system capacity, as well as increasing access to care for underserved populations for non-communicable diseases or chronic conditions such as diabetes, cardiovascular disease, and cancer, in addition to hepatitis C and HIV/AIDS.

*Merck is known as MSD outside of the United States and Canada.*

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## **BVGH Membership Program**

Over the past ten years, BVGH has developed an international network of biopharmaceutical and biotechnology companies, academic and nonprofit research institutions, multilateral organizations, and government agencies. BVGH has an established track record of implementing successful global health programs and proactively identifying, creating, and managing collaborations. The BVGH Membership Program builds off of this network and experience to offer Members a package of services to support and advance their global health activities. This could include expanding their R&D programs, identifying international opportunities, and developing cross-sector collaborations.

The BVGH Membership Program is built on three service pillars: Strategic Engagement, Knowledge &

Reports, and Advocacy & Awareness. A dedicated BVGH team works closely with each Member to understand their priorities for partnerships, disease areas, and regions. Work is tailored within each of the three service areas to create complementary deliverables that support the Member's specific objectives.

Membership Services and Deliverables		
Strategic Engagement	Knowledge & Reports	Advocacy & Awareness
Partnership development Customized engagement proposal	2 reports with recommendations 4 summaries of funding awards	3 publications 1 presentation or panel
Dedicated BVGH Team		

BVGH provides each Member with partnership development support, a customized strategic engagement proposal, two targeted reports describing global health developments, four summaries of relevant funding awards, and access to BVGH FundFinder. BVGH also features Members and their work in three publications and one conference presentation or panel session.

To learn more about the BVGH Membership Program, please email Jennifer Dent at [jdent@bvgh.org](mailto:jdent@bvgh.org).

## Industry Organization Working in Global Health



Eisai is a Japanese pharmaceutical company dedicated to advancing global health efforts. As evidenced by its *hhc* (human health care) corporate philosophy, Eisai is committed to addressing global health challenges in developing countries. Eisai describes its *hhc* approach to health as understanding and connecting with patients and their support systems.

Eisai applies its *hhc* philosophy to all of its efforts including its global health programs and partnerships.

- Eisai is a founding Member of WIPO Re:Search and actively participates in other drug discovery consortia such as the TB Drug Accelerator, the Macrofilariicide Drug Accelerator, and the Drug Discovery Booster (focused on the leishmaniasis and Chagas disease).
- As part of its commitment to fighting neglected tropical diseases (NTDs), Eisai is supplying 2.2 billion tablets of diethylcarbamazine (DEC), a therapeutic agent for lymphatic filariasis (LF), free of charge to the World Health Organization (WHO). According to the WHO, over 120 million people are affected with the disease. LF affects a person's lymphatic system and can present as abnormally enlarged body parts, which can be painful, stigmatizing, and disabling.
- Eisai is a co-founder and partner of the Global Health Innovative Technology Fund (GHIT Fund). Launched in 2013 by the Japanese government, the Bill & Melinda Gates Foundation, and four other Japanese pharmaceutical companies, the GHIT Fund facilitates and supports international partnerships promoting innovation, research, and development to fight diseases of poverty.
- Through the GHIT Fund, and in collaboration with academic partners, Eisai is actively involved in the discovery and development of new drugs for malaria (SJ733 with St. Jude Children's Research Hospital, E209 with Liverpool School of Tropical Medicine [LSTM], and a Phe tRNA ligase inhibitor with the Broad Institute); filariasis (a novel macrofilariicide with LSTM); and

Chagas disease (a novel small molecule trypanocidal with the Broad Institute), as well as a Chagas disease vaccine with the Sabin Vaccine Institute.

Aligning with its *hhc* corporate philosophy, Eisai continues to actively participate in combating NTDs and advancing global health.

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## WIPO Re:Search Highlighted Collaboration

Schistosomiasis is a neglected infectious disease that affects more than 240 million people worldwide, most of whom are children. Exposure to schistosome-contaminated water often occurs in resource-deprived tropical and sub-tropical regions where exposure is practically unavoidable. The main anthelmintic used to treat schistosomiasis, praziquantel, is only effective in treating adult worms. This limited efficacy, along with the potential of resistance development, highlights the urgent need for new therapies.

Responding to this need, researchers at Aberystwyth University in Wales, led by Professor Karl Hoffmann, are developing new approaches for controlling the parasitic helminth. The group has partnered with Alnylam Pharmaceuticals to explore the use of RNAi technology to identify *Schistosoma mansoni* genes required for survival.

Dr. Brian Bettencourt, a biometrics researcher at Alnylam, optimized a set of siRNAs for Professor Hoffmann to assess in gene knock-down studies in *S. mansoni*. To optimize the knock-down, Alnylam also provided lipophilic reagents and advice on the delivery of the siRNAs. With this additional support from Alnylam, Professor Hoffmann's team plans to demonstrate proof-of-principle and establish an optimized protocol for gene silencing in schistosomes. Ultimately, the group envisages applying for funding to conduct a genome-wide screen in *S. mansoni* using siRNAs designed with Alnylam's technology, with the aim of identifying gene targets for developing next generation anthelmintics.



To learn more about WIPO Re:Search and other collaborations, please visit our [website](#) or email Ujwal Sheth at [usheth@bvgh.org](mailto:usheth@bvgh.org) for more information.

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## Did you know?

According to the World Health Organization, it is estimated that at least 90% of people needing treatment for schistosomiasis live in Africa.

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Forward



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