

UBC researchers call for 'social offset' to tackle neglected tropical diseases

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Public health and international development experts at the University of British Columbia are calling for a "social offset" mechanism to set aside a portion of research funding slated for neglected tropical diseases (NTD) to address broader social determinants of disease.

Their comments are published today alongside other perspectives in the Debate section of the online journal *PLoS Medicine*.

More than one billion people suffer from one or more of approximately 15 tropical infections identified by the World Health Organization as NTDs. These diseases disproportionately impact poor and rural populations, mostly in the developing world, who lack access to safe water, adequate sanitation and essential medicines.

"NTD initiatives have primarily aimed to stimulate drug development by offering incentives for pharmaceutical companies to produce essential medicines for vulnerable populations," says Jerry Spiegel, director of Global Health at UBC's Liu Institute for Global Studies and lead author of the article.

"These initiatives have largely ignored other manifestations of neglect, such as weak health systems and poor socio-environmental conditions that cause and perpetuate NTDs."

Spiegel and colleagues from UBC's faculties of Medicine and Pharmaceutical Sciences and the College for Interdisciplinary Studies

are proposing a model of "offsetting" - similar to carbon offsets for air travel - to help fund infrastructure and healthcare needs that complement increased access to drugs.

"Nobody questions the need for better drugs for visceral leishmaniasis, a parasitic disease that affects 12 million people worldwide," says co-author and UBC Pharmaceutical Sciences Prof. Kishor Wasan. "But currently, 66 per cent of U.S. research funding for leishmaniasis is devoted to basic and biomedical research and product development, compared to 3.7 per cent for epidemiological research and 7.1 per cent for implementation research."

Wasan is inventor of an oral formulation of Amphotericin B, an anti-fungal drug commonly used to treat leishmaniasis but remains prohibitive in developing countries due to its intravenous delivery requirements. His drug is the first to be licensed under UBC's Global Access Initiative, which works with researchers and industry partners to provide underserved populations with access to UBC technologies.

"But merely providing incentives to increase access to drugs isn't enough," say Wasan. "That's why we have created the Neglected Global Diseases Initiative at UBC to explicitly expanded our focus beyond 'drug development and delivery' to 'effective disease-reducing interventions.'"

Other UBC co-authors are Shafik Dharamsi, faculty lead of the Global Health Network at the Liu Institute and spearheading UBC's Ethical International Service Learning initiative, and Annalee Yassi, Canada Research Chair in Global Health and Capacity Building.

In addition to the UBC researchers' viewpoint, Burton Singer of the Emerging Pathogens Institute at the University of Florida argues in the same article that the recent designation of a set of tropical diseases as "neglected" has led to strategies for control that are "overmedicalized,"

while Peter Hotez of George Washington University and colleagues maintain the best return on investment will continue to be mass drug administration for NTDs.

More information: Spiegel JM, Dharamsi S, Wasan KM, Yassi A, Singer B, et al. (2010) Which New Approaches to Tackling Neglected Tropical Diseases Show Promise? PLoS Med 7(5): e1000255.

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