

Drugs for Neglected Diseases initiative unveils new plan for neglected patients

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After having built the world's largest drug development pipeline for the most neglected diseases, the Drugs for Neglected Diseases initiative (DNDi) has unveiled plans for a more flexible, dynamic portfolio approach, integrating various operating models to better respond to the needs of patients, notably in low- and middle-income countries. The plan also paves the way for new diseases to be taken up in DNDi's portfolio.

As part of its updated Business Plan for the period 2015-2023, DNDi remains committed to developing treatments for African sleeping sickness, leishmaniasis, and Chagas disease as well as filarial diseases and paediatric HIV. Having recently transferred its malaria activities to the Medicines for Malaria Venture (MMV), DNDi will soon be launching new research and development (R&D) projects for hepatitis C and mycetoma, two very different diseases that share, with other important [global health](#) issues such as anti-microbial resistance, one key challenge: the existing system of biomedical innovation has failed to deliver safe, effective, quality products that are affordable to poor populations.

"New threats are emerging at breakneck speed in today's rapidly changing global health R&D landscape", said Dr Bernard Pécoul, Executive Director of DNDi. "DNDi will remain focused on reaching our treatment targets for the most [neglected diseases](#), but we are now in a position to apply new R&D models, where patient needs drive drug development over profits, and where prices of drugs are delinked from the cost of their development," he added.

The Business Plan 2015-2023 was elaborated through a 24-month process and in-depth consultation with DNDi's founding partners, governments, key stakeholders, and experts in global health research. It was approved by the Board of Directors in June 2015. The new plan emphasizes DNDi's commitment to addressing the needs of neglected patients, while allowing for more flexibility to extend the scope of diseases to address current and future unmet and/or urgent patient needs as they arise. A range of operating and support models has been designed to ensure DNDi's engagement is tailored and appropriate to the need.

For example, the high-cost of a new generation of drugs for hepatitis C has become one of the world's most pressing and high-profile public health challenges, leaving millions of patients behind. To develop an affordable public health tool for hepatitis C, DNDi will conduct clinical trials for combinations consisting of recently approved drugs and clinical-stage compounds in middle-income countries. For mycetoma, DNDi will test a promising drug candidate for this devastating illness for which there has been virtually no R&D - leaving patients to suffer with toxic and ineffective drugs. To help address the global threat posed by anti-microbial resistance, DNDi will create an internal task force, in collaboration with WHO, to assess the potential of an incubator to house a new initiative focused on developing antibiotics.

DNDi will continue developing its pipeline of over 30 projects for the most neglected diseases. By its 20th anniversary in 2023, DNDi aims to deliver 16 to 18 new treatments with an estimated total budget of EUR 650 million. Importantly, DNDi will use its own experience to forcefully advocate for a global R&D framework that guarantees both innovation and equitable patient access to health technologies.

"The Ebola crisis showed the world the need for highly effective collaborations and timely response," said Professor Marcel Tanner, Chair of the Board of Directors, DNDi. "As the organization matures,

DNDi will continue to learn, innovate, and adapt its operational models to guarantee that R&D capacity is built where needed while continuously identifying and addressing neglected patients' needs through the best science."

More information: www.dndi.org/about-us/business-model.html

Provided by Drugs for Neglected Diseases Initiative

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