Highlights of the meeting on Human African Trypanosomiasis elimination Side-event to the High Level Political Forum on Sustainable Development United Nations Headquarters, New York City, July 18, 2017

Meeting organized by the Permanent Mission of France and Sanofi

Round Table discussion with Ms. Hayet Zeggar (Social Affairs Counsellor, Permanent Mission of France to the United Nations), Dr. Werner Obermeyer (WHO Office at the United Nations), Ms. Rachel Cohen (Regional Executive Director, DNDi¹ North America), Ms. Judith Rius (MSF Access Campaign), Dr. François Bompart (Access to Medicines, Sanofi).

Among the attendees: Alan Court (special advisor to the UN secretary's special envoy), Claire Pomeroy (President of the Lasker Foundation), Elvire Aronica (Déléguée adjointe, DAEI/Ministère des Solidarités et de la Santé, France), Julien Potet (MSF²), journalists from the Huffington Post...

<u>Highlights</u>

Hayet Zeggar highlighted France's involvement in the fight against Neglected Tropical Diseases through

- Research institutions (Institut Pasteur, IRD³)
- Pharmaceutical companies
- Historical links with NTD⁴-endemic countries
- Support to DNDi and IRD
- Aviesan

She also highlighted the role of France in promoting the notion of Universal Health Coverage.

Dr Bompart summarized Sanofi's long standing involvement against HAT⁵ and our objectives and challenges to reach sustainable elimination alongside the WHO, MSF and DNDi.

Dr Obermeyer acknowledged several times Sanofi's commitment to supporting WHO's efforts in NTDs, through the partnership started in 2001. He made several remarks regarding the quality of this partnership, based on mutual trust. He insisted on the need of a long-term commitment to eliminate HAT. Judith Rius recalled MSF's historical involvement against HAT. She insisted on the need to not forget "blind spots" such as war-torn areas, and the lack of a simple diagnostic test for HAT. She acknowledged the role played by public-private partnerships, such as those managed by DNDi. She then turned to the need of revising the current healthcare model, both for governments and for the private sector, to address the needs of neglected patients. She acknowledged Sanofi's commitment on many fronts, but specifically mentioned MSF concerns over Zika vaccine's pricing and the discontinuation of Fav-Afrique anti-venom production. In reply, Dr Bompart said that Sanofi is always

¹ Drugs for Neglected Diseases initiative

² Médecins sans Frontières / Doctors without Borders

³ Institut de Recherche pour le Developpement, French National Research Institute for Sustainable

Development

⁴ Neglected Tropical Diseases

⁵ Human African Trypanosomiasis

open to discuss access insufficiencies, but also said that price and intellectual property cannot be the only issues to be addressed, as illustrated by the very large number of medicines on WHO List of Essential Medicines which are off-patent.

Rachel Cohen highlighted DNDi's work on fexinidazole and oxaborole as game-changers in the fight against HAT. She did not mention any date regarding submission or registration.

The Q&A session was mainly over the issues related with disease elimination, with several points of view expressed:

- Need to be extremely focused and "vertical" to eliminate the last cases, and to involve philanthropists as is done for polio eradication vs. need to include the fight against NTDs as part of the strengthening of primary healthcare systems
- Concerns that neglected diseases will never be seen as a political priority in the absence of specific advocacy
- Challenges posed by human and animal reservoirs of HAT, and by *T. rhodesiense*.

Conclusion

This event served as an opportunity to deliver a timely example of successful public private partnerships for the elimination of a poverty-related disease. It illustrated why building a broad coalition is needed to achieve the sustainable elimination of Human African Trypanosomiasis (HAT), or sleeping sickness, one of the Neglected tropical diseases (NTDs). Thanks to the efforts from multiple partners we are well positioned to eliminate sleeping sickness as a public health problem by 2020, but several challenges remain to be addressed to fully eliminate the disease.