Pediatric TB Research Funding Trends

Annual Meeting of the Childhood TB Subgroup
October 27, 2014

Lindsay McKenna
Tracking Tuberculosis Research Funding Trends
Flat Funding = Falling Funding

Total TB R&D Funding, 2005-2013
9 Straight Years of Funding Gaps

Annual *Global Plan* Research Funding Targets versus 2013 Funding
Where is Pharma?

Total TB R&D Funding by Funder Category, 2005-2013 (in USD millions)
60% ...is the loneliest number

- of **total** TB R&D funding comes from **1 sector**: public institutions
- of **public money** spent on TB R&D comes from **1 country**: the United States
- of **industry funding** for TB R&D comes from **1 company**: Otsuka
- of TB **basic science funding** comes from **1 agency**: the U.S. National Institutes of Health
Pediatric TB R&D Funding by Research Category, 2013
Total: $25,318,577

- Vaccines: $4,692,887 (19%)
- Operational Research: $3,321,459 (13%)
- Basic Science: $3,312,681 (13%)
- Infrastructure/Unspecified: $583,631 (2%)
- Diagnostics: $2,564,036 (10%)
- Drugs: $10,843,882 (43%)
### TABLE 3

Pediatric TB R&D Funders by Rank, 2013

<table>
<thead>
<tr>
<th>2013 Rank</th>
<th>FUNDING ORGANIZATION</th>
<th>FUNDER TYPE</th>
<th>2013 PEDIATRIC TB R&amp;D FUNDING</th>
<th>Percent of Total 2013 PEDIATRIC TB R&amp;D FUNDING</th>
<th>TOTAL 2013 TB R&amp;D FUNDING</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>NIH Other ICs</td>
<td>P</td>
<td>$4,741,873</td>
<td>18.73</td>
<td>$36,656,765</td>
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<td>2</td>
<td>USAID</td>
<td>P</td>
<td>$4,338,420</td>
<td>17.14</td>
<td>$20,429,363</td>
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<td>3</td>
<td>UNITAID</td>
<td>M</td>
<td>$3,412,000</td>
<td>13.48</td>
<td>$3,412,000</td>
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<td>4</td>
<td>European and Developing Countries Clinical Trials Partnership (EDCTP)</td>
<td>P</td>
<td>$2,473,301</td>
<td>9.77</td>
<td>$18,980,589</td>
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<td>5</td>
<td>Gates Foundation</td>
<td>F</td>
<td>$2,176,559</td>
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<td>$147,923,878</td>
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<td>6</td>
<td>U.K. Medical Research Council (MRC)</td>
<td>P</td>
<td>$2,069,201</td>
<td>8.17</td>
<td>$11,956,068</td>
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<tr>
<td>7</td>
<td>Company X</td>
<td>C</td>
<td>$1,935,487</td>
<td>7.64</td>
<td>$13,071,337</td>
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<td>8</td>
<td>Wellcome Trust</td>
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<td>$1,295,508</td>
<td>5.12</td>
<td>$14,458,418</td>
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<td>9</td>
<td>NIH NIAID</td>
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<td>$1,106,235</td>
<td>4.37</td>
<td>$158,797,248</td>
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<tr>
<td>10</td>
<td>Company V</td>
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<td>$520,284</td>
<td>2.05</td>
<td>$4,278,035</td>
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<td>11</td>
<td>Canadian Institutes of Health Research</td>
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<td>$393,675</td>
<td>1.55</td>
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<td>12</td>
<td>Médecins Sans Frontières</td>
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<td>$374,604</td>
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<td>$976,833</td>
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<td>13</td>
<td>Australian National Health and Medical Research Council (NHMRC)</td>
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<td>$151,481</td>
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<td>$4,935,036</td>
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<td>14</td>
<td>French National Agency for AIDS Research (ANRS)</td>
<td>P</td>
<td>$114,498</td>
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<td>15</td>
<td>Grand Challenges Canada</td>
<td>P</td>
<td>$100,000</td>
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<td>$912,475</td>
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<td>16</td>
<td>Taiwan Centers for Disease Control</td>
<td>P</td>
<td>$61,927</td>
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<td>17</td>
<td>Firland Foundation</td>
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<td>18</td>
<td>Indian Council of Medical Research</td>
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<td>$9,315</td>
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<td>19</td>
<td>Thrasher Research Fund</td>
<td>F</td>
<td>$4,209</td>
<td>0.02</td>
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<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td><strong>$25,318,577</strong></td>
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</table>
Mind the Gap

WHAT WE NEED
US$ 40 million per year

2011-2015: US$ 200 million

WHAT WE GOT
2013: US$ 25.3 million
2012: US$ 10.3 million
2011: $11.6 million

2011-2013: US$ 47.2 million
We Called for a Research Movement. But We Never Built It.

2006–2015 Global Plan to Stop TB heralded the creation of a research movement with 3 goals:

1. Increase resources for TB research and innovation;
2. Coordinate priorities among research groups;
3. Implement coherent global TB research roadmap toward TB elimination.

Yet...

9 straight years of missed funding targets
Never more than $700 million/year in funding
Fewer than 120 TB R&D funders globally
We Made Declarations about Shared Accountability. But We Didn’t Follow Through.
Where do we go from here?

We must:

• **Call on countries**, especially BRICS to invest in TB research;
• Make the case that research and programs are two sides of the same coin (especially when there are very few coins);
• Engage in discussions on new targets for the **2016–2025 Global Plan to Stop TB** (being developed now!);
• Call for the inclusion of a **pediatric-specific funding target** (develop clear research agenda to inform this figure);
• **Refuse to let history repeat itself!**
• **Engage communities** to hold leaders accountable, to call for more research $, and to protect existing (and advocate for expanding) budgets during appropriations processes.
Engaging the public more broadly requires engaging TB-affected communities in TB research.
THANK YOU

www.treatmentactiongroup.org/tbrd2014