Abstract

The Drugs for Neglected Diseases Initiative (DNDi) is a collaborative, patient needs–driven, nonprofit drug research and development (R&D) organization that is developing new treatments for neglected diseases. DNDi is working on the following diseases: leishmaniasis, sleeping sickness (human African trypanosomiasis, HAT), Chagas disease, and malaria. In 2011, DNDi started to take on specific projects for two new disease areas: pediatric HIV and filarial diseases.

Mission

DNDi’s mission is to develop new drugs, or new formulations of existing drugs, for patients suffering from the most neglected communicable diseases. Acting in the public interest, DNDi will bridge existing R&D gaps in essential drugs for these diseases by initiating and coordinating drug R&D projects in collaboration with the international research community, the public sector, the pharmaceutical industry, and other relevant partners.

DNDi’s primary focus has been the development of drugs for the most neglected diseases, such as HAT, visceral leishmaniasis (kala-azar), and Chagas disease, while considering engagement in R&D
projects for other neglected diseases or development of diagnostics and/or vaccines to address unmet needs that others are unable or unwilling to address.

In pursuing these goals, DNDi will manage R&D networks built on South-South and North-South collaborations. While using the existing support capacities in countries where the diseases are endemic, DNDi will help to build additional capacity in a sustainable manner through technology transfer in the field of drug R&D for neglected diseases.

In December 2011, the Board of Directors decided that while maintaining its full commitment to neglected diseases such as sleeping sickness, leishmaniasis, and Chagas disease, DNDi will conclude its malaria activities by 2014, maintaining emphasis on technology transfer and sustained access, and take on new activities in the fields of pediatric HIV and specific helminth infections.

**Consortium History**

July 2003: Start date

**Structure & Governance**

Highlights of the Business Plan

Although the R&D landscape for neglected tropical diseases (NTDs) has improved since 2000, sustainable public funding remains a critical issue to support these R&D efforts.

DNDi will concentrate its efforts on the three primary diseases (leishmaniasis, Chagas disease, and HAT). It will complete its malaria activities and launch two mini-portfolios: pediatric HIV and specific helminth infections.

With its pipeline maturing, DNDi will increasingly focus on access, with the ultimate aim of facilitating maximum impact via appropriate use of treatments, assuring their effective transition to relevant access partners and implementers, and leveraging success for future steps.

A critical component of the updated strategy is the further empowerment of regional offices, with the goal of transitioning their role from one of support to one of more active contribution to all DNDi
activities.

Financing

DNDi is grateful for the support received from donors who contributed to the advancement of its mission and goals. DNDi invested €120 million from 2003 to 2011. DNDi has secured €340 million (approximately 85 percent) of the €400 million needed to fund its estimated needs by 2018.

Impact/Accomplishment

DNDi’s primary objective is to deliver a total of 11 to 13 new treatments by 2018 for leishmaniasis, HAT, Chagas disease, malaria, pediatric HIV, and specific helminth infections and to establish a strong R&D portfolio that addresses patient needs.

Working in partnership with private industry, public institutions, academia, and nongovernmental organizations, DNDi has built the largest ever R&D portfolio for the kinetoplastid diseases and has currently under way five projects in the implementation, seven in the clinical, and seven in the preclinical stages.

To date, DNDi has successfully delivered:

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