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Ã¢â?¬Å?TBVI is developing booster BCG vaccinesÃ¢â?¬?

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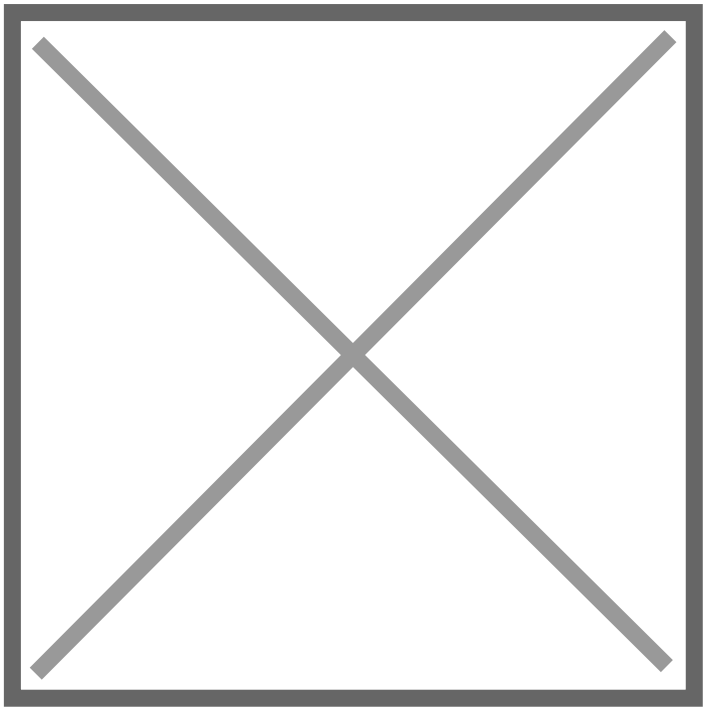

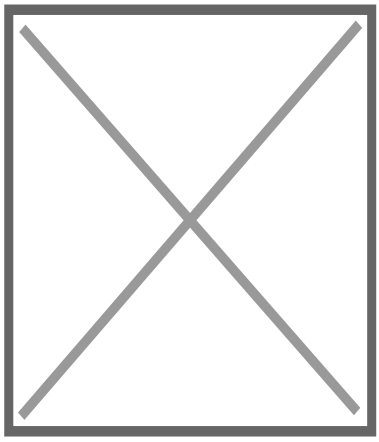

—Jelle Thole,director, TBVI , The Netherlands

Tuberculosis or TB is the oldest disease known to science. Today, it is one of the biggest killers affecting almost two billion people. Far from being a disease of the past, around one-third of the earth's population is infected, resulting in over nine million new cases and close to two million deaths annually.

In 2007, Hannu Laang and Ole Olesen of the European Commission were the first to suggest the establishment of a separate entity to fund research for new vaccines to conquer tuberculosis. Less than a year later, on March 5, 2008, Tuberculosis Vaccine Initiative (TBVI) was established, a European-based foundation facilitating development of safer and more effective vaccines against tuberculosis.

TBVI is based in the Dutch city of Lelystad and is headed by Dr Jelle Thole, its director since launch. Dr Thole in an interview with BioSpectrum shares his thoughts on various issues such as TBVI's initiatives, funding and development partners.

What are the major initiatives taken by TBVI to curb TB in the Asian countries?
TBVI is developing vaccines that are useful to people all over the world and are not focusing on specific vaccines for Asia. There is no reason to have specific vaccine for Asia because the TB-related issues are common in nature. The current live vaccine that we use is Bacillus Calmette-Guérin (BCG) and this protects children up to five years from meningitis. What we are trying to do now is to develop vaccines that boost the second vaccination of BCG and improve the performance in adult population.

We are also supporting a number of partnerships that develop these kinds of vaccines. The other type of vaccines that we are

developing is the BCG replacement vaccine that will be used in children. BCG should offer long-term protection, however, it is entirely safe when it is used in HIV positive population.

Who are your major partners and how are those partnerships fulfilling your needs?
We work with over 40 research partners in Europe, Africa, Asia and South-America and we have a variety of joint projects with them. We are supported by European Commission, Bill and Melinda Gates Foundation, FIT-BIOTECH and Institute Merieux. We aim for a portfolio of five programs with a budget of 200 million (Rs 1,302 crore) for the coming 10 years; in our first year of existence in 2009 we have raised about 15 million (Rs 97.69 crore).

How do you operate internationally?
European Commission has a big project called the International project and in this project 35 partners work together. They are bound by a contract and have specific deliverables deadlines. Some of them work together and others work together in specific areas. Everybody, each year or twice a year gets exposed to the consortium and gets to know what is happening in the consortium. This brings them together and they can network with each others.

Has there been a decline or increase in the number of TB cases globally?
The TB Report is always two years late, so the report released in 2009 deals with cases of 2007 and the one coming in 2010 will be based on 2008 results. In 2007, there has been a slight decline of one percent in the number of new instances globally. This is very important because this might be a turning point because there has been an increase of 10 percent in the last 10 years. However, we need to wait and watch how much the infections decrease. A lot of countries have adopted Directly Observed Treatment, Short Course (DOTS) strategy and they are treating positive cases. The partnership aims to detect 70 percent of these cases, treat 85 percent of them and we reach that target.

— Sanjeev Jain in Bangalore