



**Drugs for Neglected Diseases *initiative*, North America:
2016 DNDi NA Annual Report**

Dear Friends,

Following a very eventful year in 2016, I would like to thank you for your interest in and support of the Drugs for Neglected Diseases *initiative* (DNDi). As a result of the tremendous efforts of our team and all of our partners and collaborators, DNDi North America contributed to the achievement of several important milestones, making significant progress toward ensuring equitable access to treatments and building a robust pipeline of new drug candidates for a host of neglected diseases while expanding into new priority areas, such as antimicrobial resistance.

An exciting development is that in 2016, DNDi and the National Sleeping Sickness Control program of the Democratic Republic of Congo (DRC) began conducting Phase IIIb clinical trials on fexinidazole at 11 sites throughout the DRC for sleeping sickness. DNDi and its partners are getting closer to potentially delivering two new, simple, oral treatments out of the drug pipeline and into the hands of patients. This would help put this ancient, deadly disease on the path to sustainable elimination. In support of this exciting prospect, the Huff Post launched "[Project Zero](#)" in partnership with DNDi to raise awareness about neglected tropical diseases (NTDs), and support DNDi's new campaign to raise \$5 million from new private sources for our sleeping sickness projects.

Last year, DNDi also formally launched our efforts to bring affordable hepatitis C treatments to patients. In partnership with the governments of Malaysia and Thailand, DNDi and the Egyptian generic drug manufacturer Pharco Pharmaceuticals announced an agreement to test an affordable hepatitis C treatment regimen. Phase III clinical studies will evaluate sofosbuvir with the investigational drug ravidasvir, and the company has agreed to supply the combination, should it be successful, at a price of less than \$300 per treatment course.

In May, together with the World Health Organization, DNDi established the Global Antibiotic Research and Development Partnership (GARDP), a new R&D initiative to respond to the global challenge of antimicrobial resistance (AMR). By building upon DNDi's proven nonprofit drug development model, GARDP aims to develop 4-5 new treatments targeting serious drug-resistant infections by 2023. GARDP's immediate focus is on gram-negative bacterial infections, including sexually transmitted infections (STIs) and infections in newborns (e.g. neonatal sepsis). The necessity of this timely partnership was reaffirmed when world leaders committed to taking a broad, coordinated approach to address AMR at the UN High-Level Meeting on Antimicrobial Resistance in September.

In 2016 DNDi also launched the U.S. Chagas Treatment Access Project to identify and address barriers that exist for patients seeking diagnosis and treatment for the disease. As part of the project, DNDi will be supporting existing treatment providers to document and expand their programs, starting with the Center of Excellence for Chagas Disease at Olive View-UCLA Medical Center.

We continued to make progress in developing appropriately adapted formulations of antiretrovirals for infants and young children with HIV/AIDS, with the ultimate goal being the development of a 4-in-1 fixed-dose combination for pediatric HIV. And in May, a devastating infection afflicting marginalized populations, mycetoma, was finally added to WHO's official list of NTDs, bolstering efforts under way by DNDi to launch a clinical trial for fosravuconazole with Japanese pharmaceutical company Eisai Co., Ltd, a potential new treatment for the disease.

As we reflect on our many achievements in 2016, we are more grateful than ever to all of our generous donors, partners, colleagues, and friends in North America for their commitment, energy, and compassion. Together, we will continue to make a real difference by showing that the best science really can reach the most neglected.

Sincerely,

Rachel M. Cohen
Regional Executive Director, DNDi North America

The following is an overview of the Drugs for Neglected Disease *initiative*, North America income and expenses for the fiscal year ending December 31, 2016:

Total Support & Revenue:	3,218,741
Program Expenses:	
Grants to Research & Development	1,963,388
Raising Awareness for NTDs	451,252
Total Program Expense:	2,414,640
Management & General Expenses:	177,504
Fundraising Expenses:	394,582
Total Expenses:	2,986,726
Total Assets:	795,298
Total Liabilities:	228,684
Net Asset Balance:	566,614

DNDi North America

Rachel M. Cohen, Regional Executive Director
Stephanie Davies, Sleeping Sickness Campaign Coordinator
Jennifer Duran, Senior Development Officer
Colin Forsyth, Chagas Epidemiologist
Robert Grembowitz, Finance & Administration Coordinator
Ezra Jerome, Program Associate
Jennifer Katz, Senior Advisor, Policy & Development
DK Lee, Digital Content Officer
Ilan Moss, Senior Communications Manager
Stephanie Oster, Senior Development Advisor, Sleeping Sickness Campaign
Jaxira Rodriguez, Grant Administrator

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Kris Torgeson, M. Phil, Global CEO, Lifebox Foundation

DNDi North America
 40 Wall Street, 24th Floor
 New York, NY 10005-1304, USA
 Tel: +1.646.616.8680
 Email: dndina@dndi.org
 Web: www.dndina.org

DNDi
 15 Chemin Louis-Dunant
 1202 Geneva, Switzerland
 Tel: +41.22.906.9230
 Email: dndi@dndi.org
 Web: www.dndi.org

