

succeed where safe sex campaigns promoting condom use and abstinence have failed to change sexual behaviour, with devastating consequences.

One of the first microbicide products likely to come on the market in the next 5 to 10 years is TMC-120 produced by US pharmaceuticals giant, Johnson & Johnson. The US company told the conference it would grant royalty-free rights to this promising new drug to the US-based non-profit organization, the International Partnership for Microbicides.

The drug, originally developed as an antiretroviral by Johnson & Johnson's Belgian subsidiary, Tibotec Pharmaceuticals, has since been developed into a gel for use particularly in resource-poor countries and has already undergone early stage clinical trials. Under the agreement, the International Partnership for Microbicides will conduct the remaining trials necessary for regulatory approval, which could cost between US\$ 50 million and US\$ 100 million.

Other products entering phase III trials include dextrin sulfate, from the UK firm, ML Laboratories; PRO-2000 gel, a synthetic naphthalene sulfonate polymer from the US company Indevus Pharmaceuticals; cellulose sulfate from CONRAD, a partnership between the Eastern Virginia Medical School in the US and the US Agency for International Aid (USAID); Carrugard from the Population Council, an international non-profit organization; BufferGel from the HIV Prevention Trials Network (HPTN), a worldwide collaborative clinical trials network, and a vaginal gel known as C31G, developed by US pharmaceuticals company, Biosyn Inc.

Further information on the conference, Microbicides 2004 is available at: <http://www.microbicides2004.org> and further information on microbicides is available at: <http://www.microbicide.org> ■

Fiona Fleck, *Geneva*

scientific journals in the US to peer review and edit manuscripts from countries subjected to the US Government's trade embargo. Since then the government has eased off, apparently leaving publishers free to work on manuscripts from the Islamic Republic of Iran and other embargoed countries.

The relaxing of the ban was signalled by a letter from the US Department of the Treasury on 2 April to a lawyer for the Institute of Electronic and Electrical Engineers — which had stopped accepting papers from embargoed countries — saying that the organization's peer review, editing and publishing was "not constrained" by regulations from the department's Office of Foreign Assets Control.

New SARS scare in China

China has reported two confirmed cases of SARS and six suspected cases since 22 April. Six of these are in Beijing and two, including a fatality, are in the eastern province of Anhui.

Results of investigations to date point to laboratory research at the National Institute of Virology in Beijing as the likely source of the outbreak. The institute has been engaged in research with the SARS coronavirus, including the development of a vaccine. Two of the recently reported cases were conducting research at the laboratory: a 26-year-old female postgraduate student from Anhui Province, and a 31-year-old man.

As of 26 April, almost 1000 contacts of these cases are under medical investigation, including 640 in Beijing and 353 in Anhui. All the cases diagnosed and those under investigation have been linked to chains of transmission involving close personal contact with an identified case.

At the request of the Chinese Ministry of Health, WHO sent the first members of an international team to help investigate the source of the cases on 26 April.

Measles death toll drops

WHO and the United Nations Children's Fund (UNICEF) announced a global reduction of 30% in deaths from measles between 1999 and 2002. In Africa, the region with the highest number of people affected by the disease, the reduction in measles deaths was 35%.

In 1999, some 869 000 people — mostly children — died of measles. In 2002, this figure had dropped to an estimated 610 000 people. According to WHO, the progress indicates that countries can achieve the UN goals of halving global measles deaths by the end of 2005.

Recent progress is due to the adoption by the most affected countries of the comprehensive WHO/UNICEF strategy for sustainable measles mortality reduction. At a WHO/UNICEF meeting in Cape Town, South Africa, in October 2003, Ministry of Health representatives from 45 high-burden countries agreed that this strategy was highly effective in reducing measles deaths.

The estimated annual cost for measles mortality reduction activities in the 45 high burden countries is approximately US\$ 140 million.

First polio case in southern Africa since 1997

Health authorities confirmed a new case of polio in Botswana on 14 April — the first in southern Africa since 1997 — and traced it to Nigeria. The finding jeopardizes progress in the eradication of the disease and has prompted preparations for a nationwide immunization campaign to reach 250 000 children in Botswana.

In the past 18 months, wild polioviruses genetically linked to northern Nigeria have emerged in Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Côte d'Ivoire, Ghana, Togo and Botswana — all previously polio-free countries.

Circumcision reduces risk of HIV infection in men

Circumcised men may be six times less likely to contract HIV than men who are not circumcised, suggests new research carried out on more than 2000 men in India.

Published in the UK-based medical journal, the *Lancet*, (2004;363:1039-40), the research letter appears to confirm that the thin foreskin tissue on uncircumcised men could be highly prone to HIV infection, giving support to findings from an earlier study in Africa which had already suggested that the circumcision reduced a man's chances of

In brief

US relaxes ban on editing foreign research

Last month the *Bulletin* (2004;82:312) reported on the US trade embargo ruling which made it illegal for publishers of

contracting HIV. The study also found that circumcision does not have an impact on other sexual diseases. ■

In focus

New generation of non-profit initiatives tackles world's "neglected" diseases

A new generation of non-profit drug companies and public-private partnerships is taking on the challenge of developing drugs and vaccines against diseases plaguing developing countries and traditionally ignored by the pharmaceutical industry because they lack profit potential.

Buying up the rights to develop and market drugs for "neglected" diseases from the drug companies who own them but have yet to develop them are a growing number of initiatives such as the US-based non-profit drug company One World Health and US based non-profit organization, the Aeras Global TB Vaccine Foundation.

The Bill and Melinda Gates Foundation announced on 12 February 2004 a US\$ 82.9 million grant to the Aeras Global TB Vaccine Foundation to support the development of new vaccines to prevent tuberculosis (TB) which causes nearly two million deaths every year, the majority of which occur in developing countries. The grant, the largest ever for TB vaccine development, will allow Aeras to fund human trials of promising TB vaccines and early research on the next generation of vaccines.

Similarly, One World Health, received US\$ 10 million from the Bill and Melinda Gates Foundation to test a promising new treatment for leishmaniasis (kala azar). It is estimated that around 350 million people in 88 countries are at risk of contracting this often-lethal disease but 90% of cases are concentrated in India, Bangladesh, Brazil, Nepal and Sudan, according to WHO. Some 1.5–2 million new cases occur annually.

The pharmaceutical industry has responded with its own initiatives. The development of drugs against malaria, a disease which kills almost a million people every year — mostly in Africa — has benefited from a recent agreement between Chongqing Holley Holding,

a Chinese pharmaceutical company, Sigma-Tau, an Italian pharmaceutical company, Medicines for Malaria Venture, a non-profit organization and the University of Oxford. On 19 March, they signed an agreement for the international development of the anti-malarial drug, Dihydroartemisinin-piperazine (Artekin). Unlike the conventional chloroquine and sulfadoxine-pyrimethamine treatments, artemisinin, from which the drug is derived, has not yet produced any known cases of resistance.

"Not only should this antimalarial be effective," said Dr Christopher Hentschel, CEO of Medicines for Malaria Venture, "our goal is also to be able to make it

available at a cost that's affordable for people living on less than a dollar a day."

The US-based firm, Johnson & Johnson, announced on 30 March 2004 that it has granted royalty-free rights to the International Partnership for Microbicides for a vaginal medication to prevent HIV infection in women originally developed by the firm's subsidiary, Tibotec Pharmaceuticals. The partnership, also based in the US, will conduct the remaining trials of the drug, known as TMC-120, in order to gain regulatory approval. If the trials are successful the product could be on the market by 2010. Research into microbicides has previously been held up by a lack of resources



A patient with tuberculosis in Thailand covers his mouth in an attempt to stop the spread of the disease. South-east Asia which shoulders the biggest burden of the disease sees 3 million new cases every year.

WHO/TB/Falisse