

GALVmed is a not-for-profit global alliance of public, private and government partners. By making livestock vaccines, diagnostics and medicines accessible and affordable to the millions for whom livestock is a lifeline GALVmed is *protecting livestock and saving human life*. It is currently funded by the Bill & Melinda Gates Foundation, the UK Government's Department for International Development and the European Union.



GALVmed is initially focusing on four priority diseases: East Coast fever (which affects cattle), Rift Valley fever (cattle, sheep, goats, camels and also people), porcine cysticercosis (pigs and also people) and Newcastle disease (poultry). This issue has a special focus on Rift Valley fever. As well as causing deaths in people handling infected animal tissues it can have enormous economic impacts, especially in countries in the Horn of Africa which export live animals to the Arabian Peninsula.

In this issue:

Innovative New Year greeting card combined with 'mini annual report'

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GALVmed and Rift Valley fever

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User Groups extend ECF vaccine distribution network

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the ECF Task Force, which is chaired by the Africa Union-Interafrican Bureau for Animal Resources, approved the concept of using ECF vaccine User Groups.

GALVmed at WHO zoonoses conference

GALVmed recently took part in the Third International Conference on Neglected Zoonotic Diseases: Community based interventions for prevention and control of NZDs, which was held at the World Health Organisation headquarters, Geneva from 23 to 24 November 2010.

GALVmed finds African countries ready to support mutual recognition of vaccines at OIE meeting

Following extensive consultation with the regulatory bodies for veterinary pharmaceutical products and vaccines in Africa, GALVmed, in partnership with PANVAC, has strong evidence that greater harmonisation between countries is possible in the area of vaccine registration, which has the support of OIE.

Key partner profile: PANVAC

With its commitment to ensuring that only quality vaccines and diagnostics are produced and used in Africa and its status

as a Centre of Excellence for veterinary vaccines, it is not surprising that the African Union-Pan African Veterinary Vaccine Centre (PANVAC) has become an important partner and key ally of GALVmed.

Team changes

Introducing new members of GALVmed's team, including the new General Manager, Simon Rhodes, and M&E specialist Dr Hizaamu Ramadhan.

The GALVmed team – under the microscope

Members of the GALVmed team talk about their role in the organisation and also tell us a little about themselves.

Advisory committee updates

The first meeting of the South Asia Regional Advisory Committee was held in New Delhi in December 2010.

GALVmed calendar

Keeping you abreast of what's coming up over the next few months.

Last word

And finally, Steve Sloan, GALVmed CEO, always get the last word...



Innovative New Year greeting card combined with mini 'Annual Report'

Many organisations send out Christmas or New Year greeting cards to their friends and partners. This year GALVmed opted to send a New Year card with a difference. Inside the card, in addition to a conventional greeting, is a list of GALVmed's top 10 achievements during 2010. This new format adds value to a conventional greeting card, effectively serving as a mini annual report. The text read:



Working as an alliance in 2010 GALVmed took 10 more steps towards Protecting Livestock...

GALVmed created new partnerships and networks that exploited its unique convening power by:

- 1 Spearheading new approaches with key agencies across Africa, Asia, South America and Europe, and setting up a broadly-based advisory structure drawing on experts from 20 countries.
- 2 Dramatically increasing the profile and membership of the Community Animal Health Network (CAHNET) through partnership working with FARM-Africa.

GALVmed brought fresh energy that boosted vaccine production capacity in Africa by:

- 3 Providing critical support to the Africa Union livestock vaccine centre in Malawi to enable the centre to manufacture and supply quality-assured East Coast fever vaccine throughout the region in a sustainable manner and securing an additional US\$ 6.9million

grant from the European Commission to strengthen vaccine labs in Botswana, Cameroon, DRC, Ethiopia, Ghana, Kenya, Mali and Senegal.

- 4 Bringing new skills into the equation. Through the Pfizer Fellowship Program, three experts in different aspects of vaccine production and marketing have been seconded to GALVmed for six months.

GALVmed pioneered the introduction of innovative and essential knowledge management tools by:

- 5 Linking experts across the continent through compilation of a database of veterinary vaccine regulatory authorities and also nearing completion of a global database of veterinary vaccines in an innovative partnership with the Innocul8 team at Moredun Research Institute, Scotland.

GALVmed broke down barriers to the introduction of new vaccines by:

- 6 Organising the first Pan-African meeting of veterinary vaccines regulators, brokering an agreement that mutual recognition should be the first step towards harmonisation and formulating roadmaps for technical and political support at all levels.
- 7 Developing and using a robust model for exploiting intellectual property and obtaining Freedom to Operate for the benefit of poor livestock keepers.
- 8 Increasing the awareness of financial incentives, such as Advanced Market Commitments, to stimulate investment in animal health by the private and public sector.
- 9 Demonstrating proof-of-concept for a combination vaccine for Rift Valley fever and starting registration trials; developing the most appropriate formulation of oxfendazole for the treatment of porcine cysticercosis

and successfully conducting animal trials for registration; and driving the process that led to the first registration of the East Coast fever Infection and Treatment Method (ECF-ITM) vaccine in Malawi, Kenya and Tanzania.

And finally GALVmed started to have real life changing impact by sustaining the availability of vaccines to poor livestock keepers:

- 10 GALVmed is supporting and expanding delivery systems: for example, following the success of VetAgro Tanzania Ltd, which has been vaccinating against ECF using ITM in the pastoral areas of Tanzania since 1998. GALVmed is also developing and implementing models for sustainable delivery of Newcastle disease vaccine in Africa and Asia, thereby...

Saving Human Life



GALVmed and Rift Valley fever

Rift Valley fever (RVF) is one of GALVmed's first four prioritised diseases. Together with partners, GALVmed is currently in the process of developing and making available three new vaccines and a diagnostic test for RVF all of which will be significantly better than currently available products. Two of these vaccines will also provide protection against other important livestock diseases – lumpy skin disease and sheep and goat pox.

GALVmed's objectives:

To establish a strategic stock of a newly commercialised monovalent Rift Valley fever C13 live vaccine that can rapidly be made available and used in the event of an RVF outbreak, in partnership with Onderstepoort Biological Products, South Africa

To develop and make available one of two candidate multivalent vaccines that confer protection against Rift Valley fever as well as lumpy skin disease and sheep and goat pox for use in routine prophylaxis:

- a combination vaccine, based on the Rift Valley fever C13 vaccine and a commercially available live attenuated lumpy skin disease vaccine, in partnership with Onderstepoort Biological Products, South Africa

- a new generation recombinant Rift Valley fever-lumpy skin vaccine being developed in partnership with Onderstepoort Veterinary Institute, South Africa

To develop and make available a new pen-side diagnostic assay for Rift Valley fever, in partnership with Onderstepoort Veterinary Institute, South Africa.

The diseases

Rift Valley fever (RVF) is an acute viral disease that mainly affects sheep, goats, cattle and camels but which can also affect people. It is transmitted to livestock by various species of mosquitoes and midges as they feed on blood. In the Horn of Africa, major outbreaks usually occur every 5 to 15 years when heavy rainfall causes flooding, creating ideal breeding grounds for these insects. People can subsequently become infected by direct contact with infected meat, milk and other body fluids.

In young calves and lambs the disease causes mortality rates of up to 90%. In adult cattle and small ruminants the main symptom is abortion, which can affect the majority of the herd or flock. In 1997 a particularly severe outbreak occurred in Egypt when more than 600 people died; more recently an outbreak in Kenya, Tanzania and Somalia in 2006/07 resulted in the deaths of more than 325 people and economic losses estimated to total more than US\$30 million in Kenya alone.

Lumpy skin disease is an infectious viral disease that affects cattle and domestic buffaloes. Globally, an estimated 250 million cattle are affected by lumpy skin disease annually, which is considered to have

massive economic impacts. Although no formal economic impact studies have been undertaken, some authorities believe that the impact of the disease in Africa is comparable to that of foot-and-mouth disease. The disease has major impacts on livelihoods of livestock keepers in Africa. Smallholder dairy farmers are affected by reduction in milk yields, abortions, infertility and deaths in their herds.

Sheep and goat pox are highly contagious viral diseases. Sheep and goat pox impacts on the livelihoods of the poorest livestock keepers for whom, in the absence of cattle, small ruminants are especially important. Direct impacts are caused by reduced productivity of flocks, decreased quality of wool and skins, increased mortality rates of lambs and kids, and restrictions on international trade.

Women are often responsible for small ruminants and may control income generated through sales of animals or skins: sheep and goat pox can therefore cause a reduction in income available to poor women which directly impacts on their ability to provide for their children.



GALVmed's plans for Rift Valley fever

Responding to RVF outbreaks

GALVmed aims to establish and make available a strategic stock of a newly developed monovalent RVF C13 live vaccine. In the event of an RVF outbreak, affected countries will be able to access this stock rapidly, avoiding the need for individual countries to maintain large stocks of vaccine which are likely to go past their expiry date before they are needed. It will also overcome the time lag between countries ordering vaccine from a manufacturer and the vaccine being produced and delivered.

C13 was derived from a human patient in Central Africa and is naturally attenuated and avirulent: it produces much less of a protein which plays a key role in pathogenesis of RVF virus. Safety trials of the RVF C13 vaccine undertaken in sheep and cattle have shown that it can be used in pregnant animals without causing abortion. This represents a significant advance as the live RVF vaccine that has been available until now can cause abortion and birth defects while the currently available inactivated vaccine provides insufficient protection and requires repeat vaccination. This work is being done in partnership with Onderstepoort Biological Products, South Africa.

Preventing RVF outbreaks

GALVmed also plans to develop and make available multivalent vaccines – i.e. vaccines that simultaneously prevent several diseases. This overcomes the problem that, because Rift Valley fever occurs periodically, sometimes with 5 to 15 or more years between outbreaks, it is difficult to justify routine preventive vaccination. However, by combining in one vaccine protection against other serious diseases that occur more frequently, this creates the incentive for livestock keepers, or the national veterinary authorities, to vaccinate herds and flocks. So, while providing on-going protection against lumpy skin disease and sheep and goat pox, the next outbreak of RVF could be effectively prevented.

Pen-side diagnosis

GALVmed is supporting the development by Onderstepoort Veterinary Institute of a field pen-side rapid diagnostic assay (lateral flow device) for RVF. This assay, based on a specific protein of the RVF virus (the nucleoprotein), has shown good characteristics in detecting antibodies to RVF in blood samples of animals susceptible to the disease in a few minutes. If successful, it is expected to improve control efforts and be much quicker than currently available ELISAs and the virus neutralisation test (confirmatory test), which take days.

To date, based on good results obtained with prototype tests produced in South Africa, GALVmed is supporting the further optimisation and development for large-scale production of the assay by a Spanish firm which specialises in human and animal rapid test development and production.

It is anticipated that the assay will be very useful for early detection of the disease in remote areas where poor livestock keepers are usually the first victim of the disease. The assay will also be very useful for monitoring sentinel animals in high risk areas, as well as for regions where export trade of livestock, such as to the Middle East, is important. GALVmed is supporting studies aimed at assessing the need of the assay in different endemic and epidemic regions. Once the test passes field validation (as per OIE pathway), it will be introduced for use by public services as well as livestock keepers.

Two such multivalent vaccines are currently being developed with GALVmed's support. One, a combination vaccine based on existing technology, will be available relatively soon while a new generation recombinant vaccine will entail a more lengthy R&D process. The recombinant lumpy skin disease-RVF vaccine will have the advantage of being a marker vaccine, i.e. one that allows the differentiation between vaccinated and infected animals. This is a useful attribute for surveillance and animal movement purposes, including export.

In October 2010 GALVmed signed a memorandum of understanding with Onderstepoort Biological Products (OBP) for the development of a combination RVF C13-lumpy skin disease vaccine.

The RVF component is the same as that being used in the monovalent vaccine described above. The lumpy skin component is a commercially available live attenuated lumpy skin disease vaccine which also confers protection against sheep and goat pox. The multivalent vaccine will therefore confer simultaneous protection against RVF, lumpy skin disease and sheep and goat pox.

The combination vaccine will provide solid protective immunity after a single vaccination and be safe for use in pregnant and young animals.

Following the signing of the agreement, work has begun and it is expected that the vaccine will be ready for registration by 2012. The memorandum of understanding between GALVmed and OBP also covers possible further development of a thermo-tolerant formulation and support to increase access to the combination vaccine in countries where RVF, lumpy skin disease and sheep and goat pox affect poor livestock owners.

Meanwhile work on the recombinant multivalent RVF-lumpy skin disease vaccine is currently at the proof-of-concept stage.

RVF case study: Advanced Market Commitments

In 2009, GALVmed commissioned the UK-based Cambridge Economic Policy Associates, an economic and financial policy advisory business, to investigate the application of Advance Market Commitments in the field of animal health, based on its application in human health.

The objective was to evaluate appropriate financing mechanisms and approaches that support the involvement of the private sector in the research & development, manufacturing, distribution and delivery of vaccines for animal health that address neglected diseases.

An Advance Market Commitment is a contractual financial commitment to subsidise the future purchase of a health product that meets defined specifications and demand, available for a fixed number of treatments, so the customer can obtain the product at a discounted price with the risk shared between the manufacturer and the sponsor.

The study was based on Newcastle disease vaccines in Mozambique and the combination RVF-lumpy skin disease vaccine in Kenya.



User groups extend ECF vaccine distribution network

GALVmed aims to make the East Coast fever Infection and Treatment Method (ECF-ITM) vaccine available, affordable and accessible to as many cattle keepers in the affected countries as possible – especially to poorer farmers. However, many of these are likely to live in remote areas which are currently not well served by the private sector, beyond the existing ECF vaccine distribution network.



In Kenya, some User Groups will focus on East African Dairy Development project milk cooling plants, such as this one at Kabiyet

To overcome this problem and to complement private sector-led delivery, in March 2010 the ECF Task Force, which is chaired by the Africa Union Interafrican Bureau for Animal Resources, approved the concept of using ECF vaccine User Groups. The Task Force has since prepared and ratified terms of reference for the User Groups, and will oversee the approval process and operations of the groups, which they also do for the conventional ECF vaccine distributors.

User Groups are groups of cattle owners who are potential ECF vaccine consumers. The groups will usually be beneficiaries of service delivery organisations, such as cooperatives, non-governmental organisations and faith-based organisations which have a pro-poor agenda. User Groups represent a large potential customer base.

GALVmed is currently actively recruiting such user groups. Once these are approved by the ECF Task Force they will be able to purchase vaccine directly from the manufacturer, enabling them to supply the vaccine to group members at the lowest possible price in areas where the vaccine would not otherwise be available.

Over the past few months, GALVmed has been in discussion with several such organisations in the ECF vaccine user countries, including the East African Dairy Development project (EADD) and VETAID Kenya, an NGO. GALVmed is also working with a local Malawian company, GSJ Animal Health and Production, which will work closely with the user groups in Malawi.

EADD is funded by the Bill & Melinda Gates Foundation and implemented by Heifer International and a consortium of partners in Kenya, Uganda and Rwanda. It aims to double the income of smallholder dairy farmers impacting on the lives of around one million family members. In Kenya, EADD farmers together own more than 200,000 dairy cattle. To date the ECF vaccine has not been used in the Kenyan dairy sector but recently a directive has been issued by the Director of Veterinary Services for an immunisation campaign in dairy cattle.

GALVmed are currently assisting both EADD and VETAID to develop business plans for their user groups and are also continuing to search for similar user groups in the other countries. VETAID Kenya will target the Maasai community who hold a considerable proportion of cattle in Kenya.

GALVmed at WHO Zoonoses Conference

“There is a lot of high-level discussion and lots of reports will be written... what GALVmed has chosen to do is act – and that is a big difference.”

GALVmed recently took part in the Third International Conference on Neglected Zoonotic Diseases: Community based interventions for prevention and control of NZDs, which was held at the World Health Organisation headquarters, Geneva from 23 to 24 November 2010.

Dr Johan Vanhemelrijck, GALVmed's European Advisor, gave a presentation on behalf of CEO Steve Sloan on zoonotic disease vaccine development during a session on public private partnerships for neglected zoonotic disease control and prevention and poverty reduction.

The Neglected Zoonotic Diseases conference attracted nearly 100 participants, representing all the disciplines involved at the human-animal health interface from all continents. The stated purpose of the conference was to mobilise high level interest and support, particularly from the public health and agriculture sectors as well as the donor communities, for the control and elimination, when feasible, of these diseases in all places where they represent a significant public and/or animal health burden.

In a filmed interview recorded at the conference (available on the GALVmed website) Johan briefly reviews GALVmed's progress over the past five years, emphasises the importance of zoonotic diseases in the GALVmed portfolio, and describes GALVmed's brokering role and the way it works through broad alliances of partners.

Commenting on the conference Johan said:

“There is a lot of high-level discussion and lots of reports will be written... what GALVmed has chosen to do is act – and that is a big difference.”

The conference is a follow up to the previous meeting held in Geneva in 2005, and Nairobi in 2007. It was organized by the WHO with the support of the DFID-funded Research Into Use (RIU) programme, the Integrated Control of Neglected Zoonoses (ICONZ) programme and the Directorate-General Research in EC in close collaboration with Stamp out Sleeping Sickness (SOS) in the University of Edinburgh, the Tropical Disease Research (TDR) programme with the participation of FAO, International Livestock Research Institute and The World Organisation for Animal Health (OIE).



GALVmed finds African countries ready to support mutual recognition of vaccines at OIE meeting



Group photograph of the delegates at the OIE National Focal Points for Veterinary Products meeting in Johannesburg on 24 November 2010



Dr Peter Jones presenting at the GALVmed hosted workshop on mutual recognition of vaccines

GALVmed finds African countries ready to support mutual recognition of vaccines at OIE meeting

Following extensive consultation with the regulatory bodies for veterinary pharmaceutical products and vaccines in Africa, GALVmed, in partnership with PANVAC, has strong evidence that greater harmonisation between countries is possible in the area of vaccine registration, which has the support of OIE. Indeed, at a workshop held in November 2010, African regulators stated that now is the right time for this to happen.

Through a consultation event and research GALVmed has established that there is strong support for a process of mutual recognition of vaccines in Africa as a first step, whilst in a later phase a centralised system is researched and developed. Very simply put, the idea is that

where one country's authority has issued a license, other countries are now willing to consider a mutual recognition of that assessment and authorisation thereby reducing the significant duplication of effort that currently exists.

GALVmed hosted a very successful workshop during a meeting of OIE National Focal Points for Veterinary Products in Johannesburg on 24 November 2010. GALVmed-sponsored consultant Dr Peter Jones presented the results of a questionnaire sent out by PANVAC and GALVmed on current practice in vaccine registration across Africa. 50 people attended representing 28 countries in Africa. A further seven countries had completed the questionnaire which formed the basis of Dr Jones's research.

Dr Meritxell Donadeu, GALVmed's Director of Operations, said:

"GALVmed works to get vaccines into the hands of people that need them. Sometimes this involves identifying appropriate vaccines and ensuring global access. But GALVmed also seeks to influence what we call the enabling environment. One of our objectives is to communicate and network at all levels to gain buy in to paradigm change.

The work we asked Peter Jones to do for us to facilitate the future of harmonisation for vaccine registration is a case in point. The GALVmed questionnaire went to 49 African countries. We were really pleased that representatives of 35 countries completed the questionnaire and returned it to us.

Even more encouraging is the fact that the evidence we have collected in the questionnaire and workshop points towards an appetite for greater harmonisation and more collaboration. This could reduce regulatory costs and speed the passage of essential vaccines to the people who need them most. This is an encouraging start and an interesting challenge to see how we can transform these aspirations into actions."

The consultation showed that the representatives of the African regulatory bodies felt that the building blocks for greater harmonisation were in place.

The workshop also highlighted the benefits of harmonisation. These include a reduction in the costs of regulation and making products available more speedily without compromising safety and efficacy. The reduction in cost can benefit vaccine producers by making markets more attractive and benefit livestock keepers where the retail costs are reduced or products are made more readily available. This cooperation also brings regulatory capacity within the reach of all countries in Africa.

PANVAC, as the Centre of Excellence for veterinary vaccines in Africa, was seen as having a critically important role encouraging a pan-African approach to regulatory harmonisation, promoting the political support needed amongst senior staff and policy and decision makers. OIE, in accordance with the recommendations from the Dakar meeting in March 2008, and the African Union were also seen as having a key and supportive role to play.

Dr Baptiste Dungu, GALVmed Senior Director Research & Development, who chaired the workshop added:

"Everyone seems excited by the idea of harmonisation of veterinary vaccines and GALVmed has played a key role in facilitating these discussions."



Key Partner Profile: PANVAC



(Left – right) Dr Hameed Nuru, GALVmed, Ethel Chitsungo, PANVAC, Dr Christie Peacock, FARMAfrica, Dr Gregg BeVier, the Bill & Melinda Gates Foundation, Dr Karim Tounkara, PANVAC and Dr Johan Vanhemelrijck, GALVmed, pictured in front of the new laboratory for testing vaccines



Dr Karim Tounkara, Director of PANVAC (Left), and Dr Gregg BeVier, Senior Program Officer of Agricultural Development for the Bill & Melinda Gates Foundation, inside one of the quality control laboratories

With its commitment to ensuring that only quality vaccines and diagnostics are produced and used in Africa and its status as a Centre of Excellence for veterinary vaccines, it is not surprising that the African Union-Pan African Veterinary Vaccine Centre (PANVAC) has become an important partner and key ally of GALVmed.

PANVAC is located at Debra Zeit, Ethiopia. It was formally launched in March 2004 as a specialised agency within the Department of Rural Economy and Agriculture of the African Union Commission (AUC). PANVAC was founded on the belief that the health of livestock in Africa can be drastically improved by the use of good quality vaccines and diagnostics.

PANVAC's mission is to:

- provide international independent quality control of veterinary vaccines in Africa
- facilitate the standardization of veterinary vaccine production and harmonisation of their quality control techniques in Africa
- promote the transfer of appropriate vaccine production technologies in Africa
- provide training and technical support services to veterinary vaccine and quality control laboratories
- produce and distribute essential biological reagents for animal disease diagnosis and surveillance.

Its facilities include three separate laboratories dedicated to vaccine quality control, training and reagent production. It also has a Biosafety Level 3 facility which enables lab personnel to work safely with potentially dangerous pathogens, such as Rift Valley fever virus.

Prior to being supported by the AUC, PANVAC received significant support from the 1980s onwards from a variety of donors, including FAO, UNDP, the European Commission and Union and the Government of Japan.

Initially PANVAC focused on quality control of rinderpest vaccine in support of the campaign which culminated in 2010 with the global eradication of rinderpest. More recently it has broadened its remit to include quality control and other support functions for African vaccine producers for a wide range of infectious diseases that affect the continent including: peste des petits ruminants, contagious bovine pleuropneumonia, sheep and goat pox, Rift Valley fever, Newcastle disease, infectious bursal (Gumboro) disease, avian influenza, infectious bronchitis, African horse sickness, blackleg, hemorrhagic septicaemia, anthrax and rabies.

Dr Hameed Nuru, GALVmed's Senior Director of Policy and External Affairs, said:

"PANVAC, an African Centre of Excellence, is a good example of African initiatives towards African problems. Its set up was conceived by African leaders and scientists to address critical problems of poor vaccine quality and standards of production which are common on the African continent. In our quest to address poverty and food security through animal health interventions, namely vaccines, GALVmed is honoured to be partnering with PANVAC and supports all efforts towards improving capacity building within the institution. There is no doubt in my mind that the relationship between our organisations is significantly impacting positively on livestock health and livestock keepers in Africa."

To date this partnership has been cemented through a number of joint activities including:

A workshop on Newcastle disease and Newcastle disease vaccines: In Maputo, Mozambique, in October 2009, GALVmed and PANVAC, together with the Instituto de Investigação Agrária de Moçambique (IIAM – Institute

for Agrarian Research of Mozambique), jointly organised an international workshop which produced a series of recommendations (available on the GALVmed website www.galvmed.org/news-resources/content/workshop-newcastle-disease-and-nd-vaccines) about the control of Newcastle disease in the traditional village poultry sector, especially using the thermostable I-2 vaccine.

Ahead of a workshop for OIE National Focal Points for Veterinary Products, held in Johannesburg in December 2010, a questionnaire designed to capture the current status of vaccine regulation in Africa was sent to 49 countries on behalf of GALVmed and PANVAC. The results from the 35 countries which responded were presented during the workshop. At the workshop participants identified PANVAC as playing a critical role in encouraging a pan-African approach to vaccine regulatory harmonisation.

Vaccines for the Control of Neglected Animal Disease of Africa: GALVmed and PANVAC, together with AU-IBAR and CIRAD, are implementing partners for the EU-funded VACNADA project – which was featured in the November newsletter. Under VACNADA, GALVmed is working with PANVAC to set up a vaccine process development lab at the Ethiopian National Veterinary Institute, Debra Zeit.

In addition, Dr Karim Tounkara, the Director of PANVAC, is a board member of GALVmed in his own right.

Dr Tounkara, commenting on importance of the partnership with GALVmed for PANVAC, said:

"Over the years, GALVmed has played a leading role in fostering partnerships between the private and public sector towards promoting investment in livestock production in order to alleviate poverty, promote human health and enhance development in poor countries of Africa. Indeed PANVAC has enjoyed the support and partnership of GALVmed on several projects aimed at promoting affordable animal vaccines and biological reagents. These are projects that have positive impact on the livestock industry and the lives of poor livestock keepers in the continent. PANVAC recognises the strategic role and importance of these partnerships in the development of the livestock industry in Africa. We are proud to be associated with GALVmed and its vision of creating a positive transformational change in the lives of poor livestock keepers."



Team changes

GALVmed is pleased to welcome **Alice Ruvera** as the new part-time Finance Assistant and to welcome back our Research Officer, **Dr Rubina Sharif**, who has returned from maternity leave. Both these staff are based in Edinburgh.

GALVmed strengthens management team

During 2010 GALVmed underwent a period of rapid growth. This saw it evolve from a small start-up that had been highly successful in raising funds to emerging as a major player in the international livestock health field.

Real progress was made towards its long-term goal of making available a number of new animal health products for neglected livestock diseases. Large steps forward were taken both at a technical level and in creating the necessary enabling environment through beginning to address capacity building needs and policy and institutional constraints, especially in Africa.

New staff members were recruited to cope with the burgeoning work load and activities took off in multiple locations around the world. By the end of 2010, more than 30 staff members located in Africa, Asia and Europe were working collaboratively with numerous partner organisations and short and long-term consultants, and a large number of high-calibre advisors were serving on the board and on various advisory committees. Managing the GALVmed team quickly became increasingly complex, challenging and time consuming.

The year 2011 will also see GALVmed coming to the end of its first major grant, which was jointly provided by the Bill & Melinda Gates Foundation and the UK Government's Department for International Development. Developing the next grant proposal will represent a significant workload and a successful outcome is vital if GALVmed is to continue protecting livestock – saving human life.

To cope with this impressive evolution and growth, and the new challenges that come with it, at their last meeting in November the GALVmed board approved a new management structure.

Under this new arrangement Steve Sloan will remain as GALVmed's CEO.

A new position of Interim General Manager has been created to manage and coordinate GALVmed's day-to-day business and ensure the large and widely dispersed team remain on track, hitting their milestones on time. **Simon Rhodes** has been appointed to fulfil this role, initially for 6 months from 1 December. The Senior Directors for Research and

Development, and Policy and External Affairs, and the Director of Finance report directly to Simon.

This new management team combines highly complementary skills and experience – Steve's gained largely in the voluntary and charity sector, and Simon's gained in the pharmaceutical industry encompassing both technical and management roles. Some members of the GALVmed team will already know Simon from his previous involvement in human resources work in the organisation.

Steve Sloan said:

"I am really pleased that Simon has joined us as our organisation is in a period of growth and is maturing. Simon is well known to us because of his earlier consultancy support and his skills are already adding value to our focus."

Simon Rhodes added:

"I'm delighted to be part of the GALVmed team, to be working towards a noble cause, and at a particularly interesting and busy time. I'm looking forward to learning as well as applying my experience"

Monitoring and Evaluation specialist joins GALVmed team

Following a tendering exercise GALVmed has appointed **Dr Hizaamu Ramadhan** to design a useable, implementable and robust monitoring and evaluation system and to help build the internal capacity to make it work.

The GALVmed team is made up of around 30 core staff but, where necessary, critical expertise is brought into the mix through specialist contractors. Dr Ramadhan is a monitoring and evaluation specialist with extensive veterinary and human health experience. He brings with him considerable experience of designing monitoring and evaluation systems for complex services. With over 8 years experience as a trainer in the area he is also well placed to build GALVmed's internal capacity.

Lois Muraguri, Assistant Director: Policy and External Affairs, explains: *"GALVmed has appointed Dr Ramadhan as a critical friend to help us review what we are doing in terms of monitoring and evaluation, and to help us design the necessary tools and methodologies and build the skills we need within our staff. It is important to us that, at the end of his nine months with us, we will have the skills we need to keep the system going. This merging of consultancy and training will leave us with a legacy and ensure that we can provide robust information for our funders, the board and management, and other interested parties. Whilst we already have some very good practices in GALVmed, like many organisations*

in their infancy, we are yet to develop and implement a robust monitoring and evaluation system. With the guidance of Dr Ramadhan we will get to this point."

About Dr Hizaamu Ramadhan

Dr Ramadhan has a BSc in veterinary medicine and a Masters in public health, both from Makerere University. He is a Ugandan citizen. Amongst his previous jobs he was senior veterinary officer in Masindi District where he coordinated livestock improvement projects, trained farmers in improved animal husbandry techniques and designed and implemented disease surveillance systems. Since specialising in monitoring and evaluation his clients have included Water Aid Uganda, the Ministry of Gender, Labour and Social Development, the Regional AIDS Training Network, the Uganda Women's Efforts to Save Orphans, United National Health Users/Consumers Organisation and Hospice Africa.

Key elements of the M&E work plan

- Review and define the socio-economic impact and gender approach in relation to GALVmed's monitoring and evaluation strategy
- Define and obtain stakeholder agreement on specific metrics and key indicators for all components of GALVmed's interventions
- Develop tools for monitoring and evaluation



Dr Hizaamu Ramadhan photographed in Shashmanne Town, Ethiopia, monitoring progress of a focus group discussion for traditional leaders and traditional health practitioners on an assignment for HelpAge International

- Develop a plan for implementation of monitoring and evaluation at a project level – including harmonisation activities where GALVmed is already conducting M&E
- Design a reporting structure and communication plan for sharing monitoring and evaluation results
- Build monitoring and evaluation capacity within GALVmed including data analysis and processing

Outputs from this work include the production of a monitoring and evaluation readiness assessment report; reports (including key performance indicators) on social economic impact and gender and other metrics; a detailed data collection timeline; and an indicator protocol.

The work will also involve the production of templates and other tools to be used in relation to GALVmed projects and a database drawn from the first cycle of monitoring and evaluation.



The GALVmed team under the microscope

Here members of the GALVmed team talk about their role in the organisation and also tell us a little about themselves. We anticipate the latter will help break the ice when you first meet them.

A complete bank of team biographies will soon appear on the GALVmed website.



Steve Sloan on a field trip to Tanzania

Steve Sloan

Job title: Chief Executive Officer

Role in GALVmed: Steve believes that one person can make a difference. As CEO of GALVmed he believes that it is his role to enable as many people as possible to believe that too. Right now his priority is to ensure that using livestock as a mechanism to achieve food security and social change goes from a notion to a reality.

Joined GALVmed: Steve joined GALVmed in 2006

Nationality: British

Career highlights: Steve's career to date has been in domestic and global consultancy and voluntary sector management. He was responsible for securing \$US28 million in funding for GALVmed from the Bill & Melinda Gates Foundation and the UK AID/ Department for International Development.

His diverse career has included leading VSO (the British equivalent of the U.S. Peace Corps) as Country Director in Papua New Guinea and working with Young Offenders for over for 17 years. Throughout his working life, he has devoted much of my own time to supporting voluntary organisations in a hands-on capacity and at the Board of Directors level.

In March 2009, he was named the Emerging Director of 2008 by the Institute of Directors Scotland.

Interests: Steve is a passionate and accomplished photographer and he enjoys hill walking and travel.



New Interim General Manager, Simon Rhodes

Simon Rhodes

Job title: General Manager

Role in GALVmed: Simon's job is to manage and coordinate GALVmed's day-to-day business and ensure the large and widely dispersed team remain on track, hitting their milestones on time. The Senior Directors for Research and Development, and Policy and Advocacy, and the Director of Finance report to him.

Simon's post is a six month contract and runs until June 2011.

Nationality: British

Joined GALVmed: Joined GALVmed in December 2010

Education: Simon has a Bachelor's degree in Biology and a Master of Philosophy in Toxicology. As a scientist, he worked firstly in ecology, toxicology and fisheries in the public sector Water Research Centre, and then for several years in drug safety evaluation in the pharmaceutical industry.

Simon also holds a postgraduate qualification in Personnel Management, and has worked in Human Resources (HR) for some 24 years. He worked for three global companies during bold expansion phases - Glaxo (Human Health), Pfizer (Human and Animal Health), and Shire Pharmaceuticals (a specialty bio-pharma company) - supporting businesses during such diverse phases as rapid organic growth, company acquisitions, and also retrenchments.

Career highlights: During his HR work Simon has worked with a wide range of scientific, corporate and commercial functions. He was the HR Adviser during the expansion of Pfizer's Animal Health R&D in the UK, recruiting vets and other scientists in large numbers. His clients have worked with conventional small molecule pharmaceuticals for humans and animals, large molecules such as monoclonal antibodies, vaccines for animals, and enzyme replacement therapies.

Simon has been heavily involved in providing HR support to colleagues in many countries, as well as supporting expansion into new countries of commercial operation, including Russia, Japan, and many others.

During his career, Simon has worked as a full member of many national and international business management and leadership teams. He also has worked in small, highly independent business units within large companies, sometimes from start-up, and operating as a 'standalone' HR consultant in some business areas.

Simon's HR career has centred around working closely with line managers and their departments, on strategy development and implementation, organisational development, as well as in everyday management, and along the way he has also worked extensively in recruitment and in academic liaison, supporting the relationship between business and academia, as well as the future supply of scientists.

Thus Simon has a wealth of HR experience to bring to GALVmed, as well as personal insight into working in the field, lab and office.

Interests: Wildlife, conservation, history, cookery.

Favourite food: perfectly cooked fish and home-baked bread!





Dr Johan Vanhemelrijck,
GALVmed's European
Advisor

Dr Johan Vanhemelrijck

Job title: European Advisor

Role in GALVmed: Johan monitors opportunities in Europe for developing public private partnership between European Institutions and Member States and GALVmed to help it fulfil its mission.

Nationality: Belgian

Joined GALVmed: Johan was appointed on a consultancy basis in 2009

Relevant career highlights: Johan joined the Upjohn Company in 1977 and held a number of different European functions until 1989. During this period, he was President of the Veterinary Section of the Belgian Pharmaceutical Association and President of the Veterinary Section of the Belgian Association of Veterinarians in Industry.

From June 1989 to August 2002, he joined the European Federation of Animal Health as Secretary General where he organised and spoke at national and international symposia and congresses on animal health, policy making, European affairs, precautionary principle and regulatory approval systems.

In January 1997, he became Honorary Dean of the Veterinary Profession of Belgium.

In August 2002, he became Senior Director Worldwide Industry Affairs for Pharmacia Animal Health.

In March 2004, Johan was appointed Secretary General of EuropaBio, the European Association for Bioindustries, representing 80 corporate members and 25 national associations, and speaking on behalf of the bio-industry on biotechnology and its impact on society.

In July 2008, he retired as Secretary General of EuropaBio to concentrate on advising industry, authorities and students as CEO of HI&PP consult.

Since 2009 has been Secretary General of the Belgian Biotechnology industry federation, BIO.BE.

He is active in a number of European Commission initiatives: He is a member of the executive committee of NanoBioraise (a 6th Framework Programme Science & Society Co-ordination Action funded by the European Commission to anticipate the societal and ethical issues likely to arise as nanobiotechnologies develop), and BIOCHEM (an initiative of the DG Enterprise and Industry that aims to support companies, and especially SMEs, to enter the emerging and highly promising market for bio-based products in the chemical sector). He is also member of the DG Sanco stakeholders forum and the animal health advisory committee. Until 2008 he was also a member of the steering committee of the High Level Pharmaceutical Forum of DG Enterprise and Sanco.

He is academic member of the European Risk Forum.

Education: Doctor in Veterinary Medicine at the University of Gent, Belgium, 1976.

Interests: Johan is the president of a local volleyball club, KEVOC. He is also deeply involved in sports management in his home town in Belgium. He is a keen traveller in South America, Asia and Africa and takes a keen interest in agricultural approaches of the local population, the food markets and distribution channels, and the food itself. He films a lot and does the editing during the dark mid-winter days at home.

Favourite foods are: Food has to be fresh and tasty; with that stipulation, Johan claims that he is on a 'see food' diet – when he sees food he eats it! He very much enjoys Vietnamese food, but in fact tries all local ways of eating.



Dr Charlotte Nkuna
Assistant Director:
Global Access

Charlotte Nkuna

Job title: Assistant Director: Global Access

Role in GALVmed: Charlotte is responsible for taking the products from the manufacturer to the market. This mainly entails distribution but also includes sustainable market access.

Joined GALVmed: She joined GALVmed in July 2010.

Nationality: Charlotte is a South African citizen working from both South Africa and Botswana.

Relevant career highlights: Prior to GALVmed, Charlotte spent two years (2008-2010) working as a private sector brand strategist where she concentrated on brand creation and reputation management. The previous eight years (2000-2008) were spent in several roles within animal health companies in South Africa and the UK where she focused on sales, marketing and general management.

Education: Charlotte is qualified as a veterinarian, has a Masters degree in business administration and a Diploma in brand communication.

Interests: Charlotte likes all things that do not cause any form of pain. She likes comfort food, which includes lots of meat floating in oil as well as corn and beans based staple foods, and few, if any, vegetables.



Advisory Committee Updates

South Asia Regional Advisory Committee



SARAC at work. From left to right (going around the table) Dr Shubh Mahato – Nepal; Dr Lal Krishna – India; Dr Wanasinghe – Sri Lanka; Anita Swarup – consultant; Steve Sloan – GALVmed; Dr Prabhakar Pathak – Nepal; Dr C. K. Rao – India; Dr S.N. Singh – India; Dr Mamta Dhawan – GALVmed; Dr Narayan Hegde – India



Dr Hameed Nuru , Senior Director: Policy and External Affairs, addresses the SARAC members



Chair of SARAC, Dr Narayan G Hegde, with GALVmed CEO Steve Sloan

The first meeting of the South Asia Regional Advisory Committee (SARAC) was held in Delhi in December 2010.

SARAC is an advisory committee that informs the board, through its Global Access Sub-Committee, on GALVmed's direction in the region, focusing on Bangladesh, Bhutan, India, Nepal and Sri Lanka.

The meeting gave valuable insights into the challenges faced by low income livestock keepers in the region and pointed to how GALVmed could intervene.

During the meeting Dr Narayan G Hegde of BAIF Development Research Foundation, an NGO, was chosen to be the Chair of SARAC.

Steve Sloan, Chief Executive of GALVmed, said: *"We had a very successful first meeting of the South Asia Regional Advisory Committee. The outcome of the meeting has been summarised below. It is apparent that there is a clear role for GALVmed to play over time with a number of diseases put forward by the committee. We need to make some difficult decisions – but our guiding principle will be how GALVmed can marshal investment to have the greatest impact on poverty.*

In the current business plan GALVmed has identified four diseases for immediate action out of a longer list of 13 diseases. Two of these diseases (Newcastle disease and peste des petits ruminants) proved to be significant to poor farmers in South Asia. But two new priority diseases have also been put forward by the committee – these are helminthiasis and hemorrhagic septicaemia.

This is valuable local advice and will be added to the expert technical intelligence we also receive to assist the board and senior managers in building our business plan so we can work on securing the investment required.

Dr Hegde is an ideal choice as Chair of the South Asia Regional Advisory Committee. He has a wealth of experience and knowledge which will serve GALVmed well."

Dr Hegde said:

"I feel extremely proud that with the recommendation of SARAC, GALVmed has identified critical areas of animal health which are affecting the livestock production in the region and preparing to solve the bottlenecks. With technical expertise and professional dedication, I am sure the presence of GALVmed will make a significant change which will soon be realized by the policy makers and livestock owners in the region".

Summary of the key points emerging from the SARAC meeting:

- > There is a strong focus on animal health provided by governments throughout the region with some comprehensive support services provided in India.
- > In all countries there are issues relating to poor farmers' access to vaccines, diagnostics and medicines. Targeted interventions working with government policy are critical to ensure success.
- > South Asian Association for Regional Cooperation comprising of Afghanistan, Bangladesh, Bhutan, India, Maldives, Nepal and Sri Lanka is a critical point of coordination for the region as a whole.
- > Holistic approaches are important. Vaccine campaigns alone will not succeed and they need to be combined with awareness and extension programmes ideally through local partners.

- > Good liaison with governments at all levels is essential but would be best approached through on the ground representative partnerships with local organisations which have closer and more sustainable relationships.
- > The private sector is an important partner as a point of access for poor farmers for distribution of vaccines, diagnostics and medicines.
- > Each country has areas of very different need and areas of high concentration of specific diseases that may not be shared by their regional neighbours. GALVmed cannot cater for all of these disease areas and must prioritise.
- > Peste des petits ruminants, Newcastle disease, helminthiasis and hemorrhagic septicaemia are shared issues of concern across all countries for poor farmers.
- > Foot-and-mouth disease is a universal disease of impact. Effective locally developed high-quality vaccines exist but may not be available in large enough numbers. GALVmed (and partners) could be requested to assist in advising on issues of up-scaling.
- > Farmers are willing to pay for vaccines that deliver value for them.
- > There are exceptions where farmers are initially too poor to afford vaccines and here subsidy programmes can stimulate market growth.

The next meeting of the group will take place in Nepal in July 2011.



GALVmed CALENDAR

14 – 16 February 2011

1st International One Health Congress (Human health, animal health, the environment and global survival)
Melbourne, Australia

GALVmed involvement: **Steve Sloan speaking and Hameed Nuru and Lois Muraguri will also attend.**

For more up-to-date information on upcoming events see: www.galvmed.org/news-resources/events

Readers' Feedback

We welcome any comments which can be sent to newsletter@galvmed.org

“Many congratulations on this [November 2010] Newsletter which is a clear testimony to the quality of the work being undertaken by GALVMED.”

Dr Martyn Jeggo, Director, Australian Animal Health Laboratory, CSIRO Livestock Industries

What's the connection between
livestock & healthy people?

**700 million people's
livelihoods depend
on livestock**

Healthy livestock provide
education, healthcare, nutrition
and cash

GALVmed is making livestock vaccines, diagnostics
and medicines accessible, affordable and available
to the millions for whom livestock is a lifeline

www.galvmed.org



GALVmed

Protecting Livestock – Saving Human Life

In the next issue

A focus on Newcastle disease and South Asia



Last word

And finally, Steve Sloan, GALVmed CEO, always gets the last word...

The next board meeting of GALVmed in March 2011 will be concerned with our new five-year business plan. So, thinking about the kind of organisation we will be in 2016 is very much at the front of my mind. This means re-evaluating our priority diseases and geographic spread, and being clear about where in the value chain GALVmed and our partners should intervene. And, of course, securing the resources to enable this to become a reality.

Many of you will have seen our New Year card where we set out some of our major achievements, working as an alliance, in 2010. It was really good to see these all listed in one place. We have been growing, developing our scope and our aspiration; now we are active in 14 African countries (up from 4 in 2009), Peru and, as you will have seen in the report on South Asia Regional Advisory Committee, above, we are also looking at how we can add value in South Asia.

When GALVmed was set up our agenda was very much about the development and production of vaccines, diagnostics and medicines for the animals of poor livestock keepers. It still is. In practice it has become increasingly clear that work is needed around this central proposition, stimulating both demand and the supply of vaccines. If we are to achieve lasting impact by protecting livestock and saving or enhancing human life we must be positioned in a value chain which is providing a holistic approach. This means working with a range of different vaccine producers and developers and seeking

So what will our New Year card be reporting in 2011? Well, diagnostic tools will figure prominently in some disease areas. Furthermore, the development of the South Asia programme will probably see the diseases of interest expand to meet the specific needs of this region.

A key focus for GALVmed will be how we scale from a project focus to programmes of mass access to products – as we seek to have an impact on the health of livestock owned by millions of people in our target countries.

As we mature as an organisation we need to take stock of the way that we work in partnership. I saw some inspirational partnership work on my recent trip to South Asia where partners of Heifer International were using the projects to really consolidate their growth. Genuine partnership working is very difficult but hugely rewarding when it happens. The partnership with our donors also manifests itself in an understanding that learning is a key outcome from their investment. GALVmed also only takes intellectual



Steve Sloan on the recent field trip to India attending a village consultation event on animal health issues for poor livestock keepers

to encourage the development and achievement of commercial distribution chains. Collectively, those of us interested in animal health in the developing world must ensure that products reach poor farmers.

I ended 2010 on an inspirational visit to India. This really focused my mind about the difference we can make. I talked with farmers who had lost nearly all their chickens to Newcastle disease or where mortality in their goat kids ran at up to 70% from peste des petits ruminants. Reducing these losses can really help these farmers to get ahead and be in a position to pay for their own vaccines. The consultation process we commissioned revealed that many people in our sample only ate animal protein a couple of times a year. But we also saw that with the right support, including access to knowledge and a regular supply of vaccines, it can be on the table significantly more often. This represents a massive change in economic and food security as well as in health and development terms too.

Some people will wonder why GALVmed is active in India, but 57% of the poorest farmers GALVmed will seek to help will be found here. My visit made me more confident than ever that we have a significant role to play in South Asia. And more confident too that we can find excellent production facilities in the region and governments which have a key focus on the needs of poor farmers.

property as a last resort and works, whenever possible, to create international public goods. These factors bode well for GALVmed building lasting partnerships with others.

The importance of leaving behind new approaches, new techniques and enhanced capacity is fundamental to our need for exit strategies. 2016 should see GALVmed making real progress in many different areas. If we have facilitated the partnership working I have described GALVmed will be in a position to move on and set new challenges and priorities – safe in the knowledge that the work on the ground is happening without our direct involvement. Few agencies achieve this large-scale capacity building and effective exit strategies – but the groundwork we are undertaking should make us one of the exceptions.

A handwritten signature in blue ink that reads "Steve Sloan" with a stylized flourish underneath.

If you would like further information, or you wish to make any comments, please contact us by email on newsletter@galvmed.org

