Keynote Address by the Minister of Health, Labour and Welfare, Japan

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Your excellencies, distinguished guests, colleagues in global health community, ladies and gentlemen, Good Afternoon!

It is my greatest pleasure to be present here today with all of you, distinguished speakers/panellists and participants, as well as laureates of Hideyo Noguchi Africa Prize, Dr. Greenwood, Professor Were, and Dr. Coutinho.

At this prestigious opportunity, I would like to say a few words on our perpetual efforts to accelerate medical research and development in African context.

Access to essential medicines is surely the foundation for ensuring indispensable healthcare. The development of new drugs is the most critical element in so achieving. In the end of 1970’s, Dr. Satoshi Ōmura, laureate of Nobel Prize 2015, discovered Ivermectin [ī-vər-ˈmék-tən] which is extremely efficacious against so called river blindness, and saved hundreds of millions of lives.

The development of new medical products has, however, seemed to be stagnated for several decades, in particular with Neglected Tropical Diseases (NTDs), for expected low profitability. And the investment is often discouraged by uncertainties in development and by difficulties in product delivery.

The Global Health Innovative Technology Fund, called GHIT, is founded to break the deadlock. Launched in 2013, the year of the TICAD V, the GHIT has the purpose of promoting development of new medical products, and of providing innovative benefits to patients in developing countries, in particular.

For the objectives, the GHIT actively funds projects, even in earlier stage if it is considered promising, to mitigate risks and costs for researchers and developers. Furthermore, it has formed as well a strategic partnership with the UNDP, aiming to assure the delivery of the new born innovative products to the patients in the field.

Acknowledging its value and uniqueness, the Government of Japan funds the GHIT together with Pharmaceutical industries, the Bill and Melinda Gates Foundation and the Wellcome Trust, who all participate in the governance of GHIT.

For successful development of new medicines, another partnership is essential. It is the participation of the developing countries. To save millions of lives in the Continent, African experts and scientists are expected to play key roles in research and development for new medicines. I am glad, in this regard, to see African researchers have already been engaged in some projects funded by the GHIT.

Examples include the quests for a new malaria vaccine. The Gulu University in Uganda and CNRFP (Centre National de Recherche et de Formation sur le Paludisme / National Centre for Research and Training on Malaria) in Burkina Faso are collaborating with Osaka University, for clinical development of the malaria vaccine candidate. Its outcome is believed to save hundreds of millions of lives at risk of malaria, especially in Africa.

Let me add an example close to myself as well. The Ehime University and a biotech company CellFree Sciences, both in Ehime Prefecture, that I represent, are tackling to establish a technology which provides essential bases for malaria vaccine development. It would contribute significantly to the eradication of malaria disease.

Another example is on the treatment for the schistosomíasis [ʃìstəsoumáiəsis]. 　Tanzania’s Ifakara Health Institute collaborates with Astellas Pharma, a Japanese mega-pharma company, for a new pediatric formulation of an anti-parasitic drug, which is expected to save millions of African children from the disease.

The projects conducted in Africa are significant not only as a process of new medical product, but also as a path to building capacity to develop a new medicine by African researchers here in Africa.

Africa knows best what Africa needs most. It should be African researchers who play the key role in medical research and development for Africans. Japan is more than willing to work diligently with all of them to make African future much brighter.

Thank you.