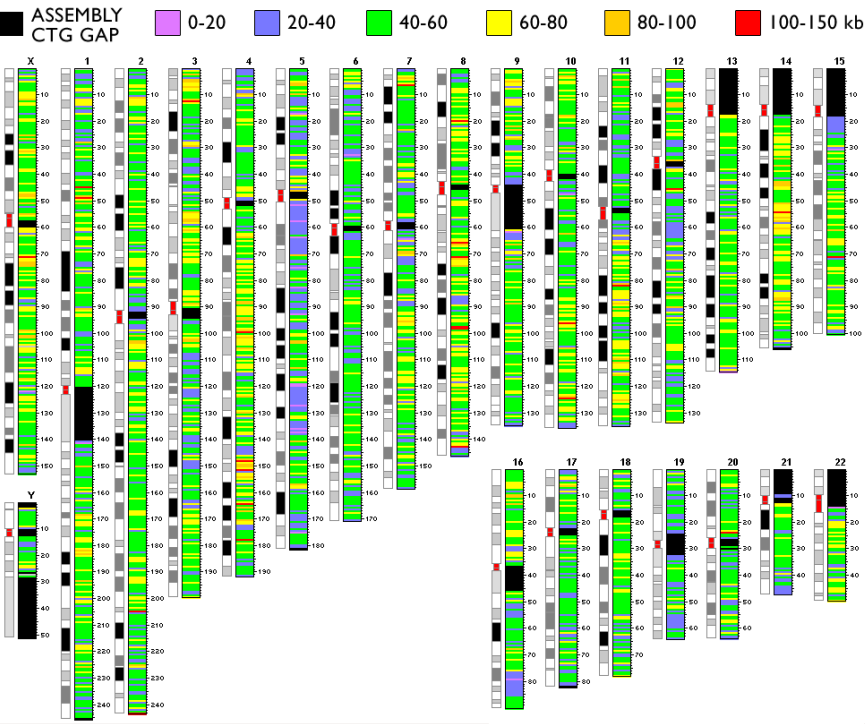


Academic Delivery of Global Health Solutions

Dermot Kelleher

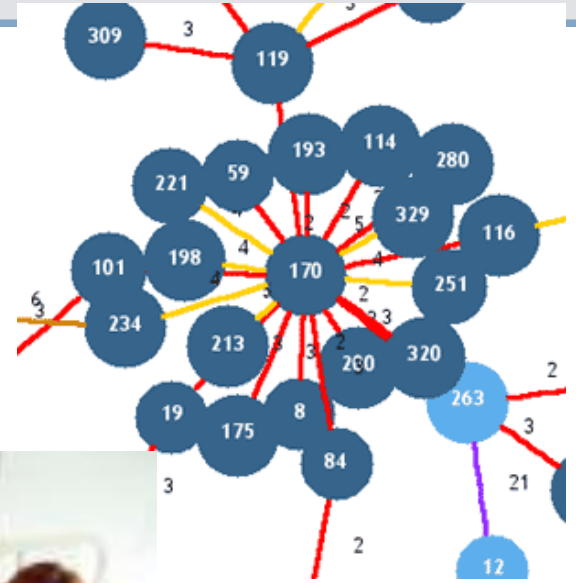
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Changing Face of Medicine



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How this paradigm applies to common disease

- Identification of multiple genes
- Cell biology of gene: gene interaction / protein:protein interaction
- Animal model
- Test therapeutic entity in mouse
- Move on to clinical trials in humans
- “Bench to Bedside”

Global health

EMERG



Pacific

- Ebola
- Congo
- Influenza
- Lassa
- Mumps
- Nipah
- Riftvalley fever





Develop a global
partnership for
development



Eradicate extreme
poverty and hunger



Achieve universal
primary education



Ensure environmental
sustainability

2015
MILLENNIUM
DEVELOPMENT GOALS



Promote gender
equality and
empower women



Combat HIV/Aids,
malaria and other
diseases



Improve maternal
health



Reduce child mortality

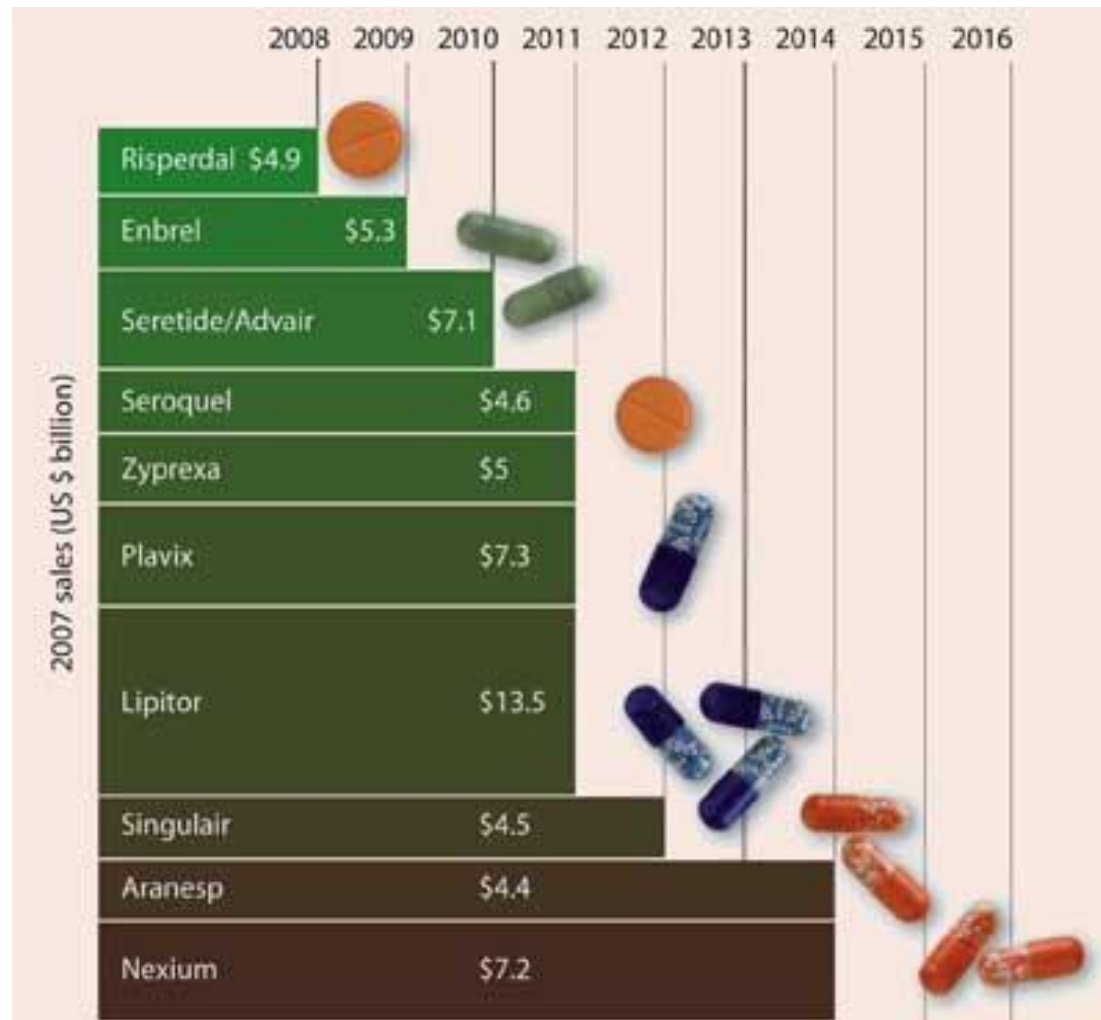
International Health – “Bench to Bedside?”



International Health

- Evolving pharma / biotech approach-drugs/IP
- Frequently dealing with conditions for which many of the mechanisms are known
- Outcome does not depend on a simple paradigm
- Economics, policy, climate, energy
- Engineering
- Systems
- Politics

The Patent Cliff – Non-communicable Disease



Consortium of Universities for Global Health-2009

We share a common goal of focusing the strengths of the university – research, education, workforce training, and service – on solving issues of health disparities that ravage populations in Africa, Latin America and the Caribbean, Asia, and even in North America. Universities have historically pioneered in discovering causes of diseases, in developing new treatments, vaccines and other preventive measures. We must train the next generation of health professionals to help ensure a healthier future for people everywhere. While our schools of medicine, public health, and nursing are central to these efforts, the university has much more to offer. We recognize that to truly address the myriad of global health problems affecting the poor and disenfranchised requires more than good medicines and dedicated health care professionals. Our broader global health initiatives are building on our historical strengths.

For example, our schools of engineering, architecture, and urban planning are able to address infrastructure needs for clean water and safe sewage systems and injury prevention. Our environmental sciences faculty and students are in the vanguard in addressing the impact of climate change on the health of human populations around the globe. Our schools of public affairs and public policy and law develop policy and governance structures that promote health, and together with faculty in bioethics and philosophy address the human rights dimensions of global health and the challenges of achieving global justice more broadly. Schools of international affairs and business can provide diplomatic and socially responsible entrepreneurial pathways to positive and sustainable change. Divinity schools are exploring ways to engage faith-based organizations in the delivery of health care. Our arts and sciences faculty and students are contributing from both the basic science and social sciences perspectives. Our schools of education are addressing the linkages between education, health, and poverty in an effort to realize the fundamental benefit of a literate population in today's and tomorrow's world.

Why do we need academic networks and alliances?

- Multiple skills needed to address complex problems
- Such skills transcend disciplinary and international boundaries
- Networks can identify priorities for funding bodies
- We must be able to identify new Modus Operandi for delivery

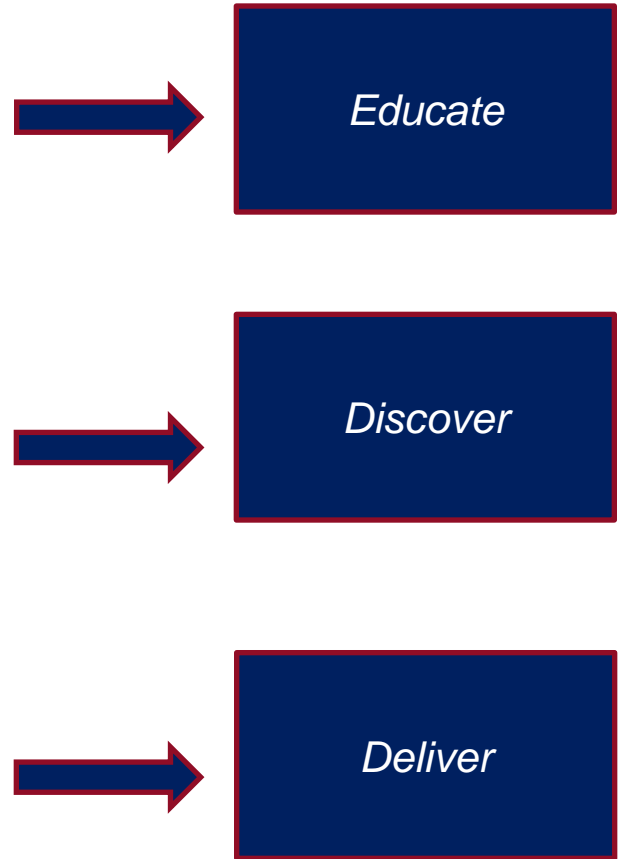
European Academic Alliances in Global Health

Educational Space

Biomedical Space

Public Health Space

Continuum of IH activities



How Academic Organisations can help deliver solutions

- Ask the scientific questions that provide new understanding – eg kwashiorkor
- Use the combined strengths of our institutions to identify solutions
- Utilise all of our internal resources for delivery including IT
- Encourage questioning of our approaches
- Educate and train
- Engage with Health Systems

Academic Social Responsibility



Resurrect and resource a new triple threat—an academician (researcher or clinician educator) who embraces academic social responsibility and effectively mentors to inspire these skills in trainees.

Y Manabe et al Clin Infect Disease 2009

THANK YOU



Denis Burkitt 1911-93