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Pfizer and DNDi Advancing International Research Efforts In The Fight Against Neglected Tropical Diseases

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(BUSINESS WIRE)--Pfizer Inc and Drugs for Neglected Diseases *initiative* (DND*i*) have signed an agreement that is designed to facilitate advancements in the battle against human African trypanosomiasis (HAT), visceral leishmaniasis (VL) and Chagas disease, which afflict vulnerable populations in the developing world. Under the agreement, DND*i* will have access to the Pfizer library of novel chemical entities, in order to screen it for compounds that have the potential to be developed into new treatments.

“Despite considerable progress made in recent years, these three diseases continue to take a terrible human toll and represent a significant social burden for developing countries,” said Dr. Manos Perros, vice president and chief scientific officer of antivirals research, Pfizer Global Research & Development. “We are expanding our commitment to the fight against tropical diseases by joining forces with DND*i* by sharing our collection of chemical compounds and the knowledge and expertise associated with these chemical entities.”

Under the agreement, scientists in institutes affiliated with DND*i* will test at least 150,000 compounds in the Pfizer library against *Trypanosoma brucei*, *Leishmania donovani* and *Trypanosoma cruzi*, the parasites that cause HAT, VL and Chagas Disease, respectively.

In a process called screening, researchers will seek compounds that show initial activity against the various parasites, and thus might form the basis for novel drug discovery programs to treat the diseases. The screening will be undertaken at the Eskitis Institute for Cell and Molecular Therapies, Griffith University in Brisbane, Australia for HAT and the Institut Pasteur Korea, for VL and Chagas disease.

This collaboration will maximize the chances of identifying attractive starting points for a drug discovery program. “We are confident that the significant resources and expertise that public-private partnerships such as this one bring together, will accelerate and significantly increase the chances of success in the search for effective new drugs against serious infections that disproportionately affect the poor,” said Dr. Sam Azoulay, senior vice president of medical & development, Pfizer Emerging Markets Business Unit.

"This agreement provides us access to a compound library of novel chemical entities that has never been explored for kinetoplastid diseases. This marks an important step towards DND*i*’s objective of building a robust portfolio and to feed the research and development pipeline with new promising compounds,” said Dr. Shing Chang, R&D director at DND*i*.

About Neglected Diseases

Visceral leishmaniasis (VL), a potentially fatal disease if left untreated, is present in 62 countries, with 200 million people at risk and 500,000 new cases and 51,000 deaths[1] each year. Current therapeutic options for VL are limited as there are significant drawbacks, including method of administration, toxicity, lengthy treatment period, and cost.

Human African trypanosomiasis (HAT, also known as sleeping sickness), is a fatal disease which, if not treated, threatens more than 50 million people in 36 countries and has limited treatment options. Every year 50,000 to 70,000 people are infected[2] and 48,000 die.[3] There is a need for an effective oral drug to treat stage two of the disease when parasites have penetrated the central nervous system.

Chagas disease kills more people in the region every year than any other parasite-born disease, including malaria. Over eight million people are infected with an average of 14,000 deaths per year, and 100 million at risk in 21 countries across Central and South America. Drugs are needed to treat both acute and chronic phases of Chagas disease, as are safer and more effective drugs adapted to patient needs.

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About Drugs for Neglected Diseases initiative (DND*i*)

The Drugs for Neglected Diseases *initiative* (DND*i*) is a not-for-profit product development partnership working to research and develop new and improved treatments for neglected diseases such as malaria, leishmaniasis, human African trypanosomiasis, and Chagas disease. With the objective to address unmet patient needs for these diseases, DND*i* was established in 2003 by the Oswaldo Cruz Foundation from Brazil, the Indian Council for Medical Research, the Kenya Medical Research Institute, the Ministry of Health of Malaysia, the Pasteur Institute, and Médecins sans Frontières (MSF). WHO/TDR acts as a permanent observer. Working in partnership with industry and academia, DND*i* has the largest ever R&D portfolio for kinetoplastid diseases. Since 2007, DND*i* has delivered three products, fixed-dose anti-malarials "ASAQ" and "ASMQ", and a combination treatment for the advanced stage of sleeping sickness NECT (nifurtimox-eflornithine combination therapy). For more: www.dndi.org.

DISCLOSURE NOTICE: The information contained in this release is as of November 18, 2009. Pfizer assumes no obligation to update any forward-looking statements contained in this release as the result of new information or future events or developments.

This release contains forward-looking information that involves substantial risks and uncertainties about the potential development of drug candidates to treat certain tropical diseases. Such risks and uncertainties include, among other things, the uncertainties inherent in research and development; decisions by regulatory authorities regarding whether and when to approve any drug applications that may be filed for any such drug candidates as well as their decisions regarding labeling and other matters that could affect their availability; and competitive developments. A further description of risks and uncertainties can be found in Pfizer's Annual Report on Form 10-K for the fiscal year ended December 31, 2008 and in its reports on Form 10-Q and Form 8-K.

[1] WHO, Report of the 5th Consultative meeting on Leishmania/HIV Coinfection, Geneva 2007.

[2] WHO. Wkly Epidemiol Rec. 2006:81;71-80.

[3] WHO, World Health Report 2004

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