Supplementary Information on Global and European Funding on HIV/AIDS and *M. tuberculosis*/TB

Claudia Giehl*

European Research and Project Office GmbH, Saarbrücken, Germany

Keywords: AIDS/TB, infectious diseases research, funding.

Two large initiatives have been initiated in the past few years to analyze global funding streams for poverty related diseases: the George Institute's G-FINDER project (Global Funding of Innovation for Neglected Diseases) and the Treatment Action Group reporting on funding trends for tuberculosis (TB) research and development.

The Treatment Action Group (TAG) is an independent AIDS research and policy think tank fighting for better treatment, a vaccine, and a cure for AIDS. In the context of the their TB/HIV Advocacy Project supported by the Bill & Melinda Gates Foundation, TAG has been compiling the "Treatment Action Group's report on funding trends for tuberculosis (TB) research and development (R&D)", monitoring global spending for TB R&D from the baseline year 2005 to date [1].

G-FINDER is an annual survey of global neglected disease R&D expenditure conducted by the Health Policy Division of the George Institute for International Health, and funded by the Bill & Melinda Gates Foundation. This survey provides comprehensive data to help funders and product developers better understand where funding gaps lie and how their investments fit into the global picture. In 2008, 208 organizations from 44 countries participated in the G-FINDER survey [2].

Both the TAG and G-FINDER report analyze R&D funding according to donors, providing rankings with the top R&D funders for HIV/AIDS and/or TB, respectively. In addition, they depict the allocation of funding according to different fields of research.

The G-FINDER analysis of the latest available data on global R&D funding for HIV/AIDS (Fig. **1**) show that currently, by far the biggest share is going into vaccines research (65%), followed by microbicides (18%) and basic research (17%). Only 1% is dedicated to diagnostics research.

With regard to global TB funding, both analyses (G-FINDER, Fig. **2**, and TAG, Fig. **3**) show the majority of funding going to drugs (35% and 36%, respectively), with 21% and 22% going to vaccines, and 9%/10% supporting diagnostics research. In the G-FINDER report, drug research is closely followed by basic research with 32%. This area is sub-divided into basic research and operational research in the TAG report, receiving 20% and 7% respectively.

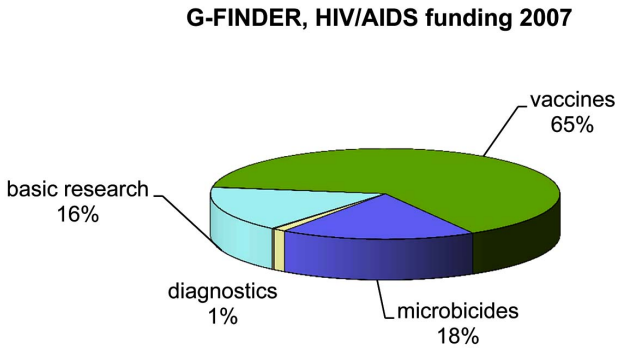

Fig. (1). G-FINDER, HIV/AIDS funding 2007.

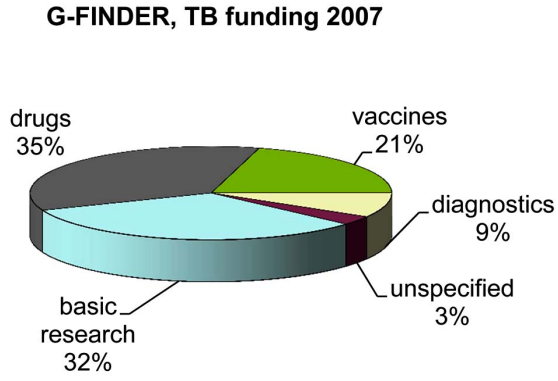

Fig. (2). G-FINDER, TB funding 2007.

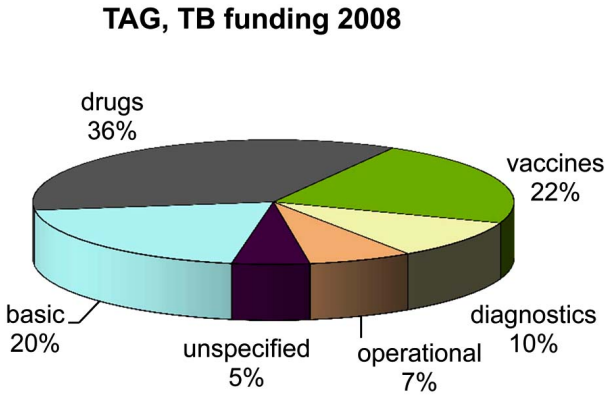

Fig. (3). TAG, TB funding 2008.

*Address correspondence to this author at the European Research and Project Office GmbH, Saarbrücken, Germany; Tel: +49 681 95923378; Fax: +49 681 95923370; E-mail: c.giehl@eurice.eu

1874-2793/11

As opposed to the allocation of global funding between different areas of research, the allocation of TB funding in FP6 and FP7 projects (Fig. **4**) is clearly focusing on vaccines research, receiving 42% of the total EU funding, followed by basic research (17%), drugs (16%), clinical and epidemiology (13%) and diagnostics (12%) [3].

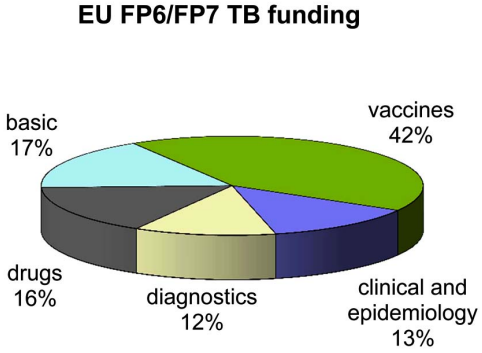

Fig. (4). EU FP6/FP7 TB funding.

ONGOING EU PROJECTS

Based on the information available on the website of the infectious diseases unit of the European Commission's Research Directorate for Health [4], the EC under FP7 is currently funding ten HIV/AIDS projects with an EC contribution of 33.904.935 EUR and fourteen TB projects with a total EC contribution of 37.726.399 EUR. Most projects are dealing with either HIV/AIDS or TB alone; only two of the 24 current projects are explicitly focusing on co-infection issues.

The calculated average monthly funding under FP7 for both diseases has been constantly increasing since the beginning of the framework programme, with average monthly TB funding surpassing monthly AIDS funding in September 2008 (Fig. **5**). As shown in Fig. (**6**), Germany, Italy and UK were the countries most actively participating in TB projects. The most frequent EU partner countries involved in HIV/AIDS projects are Italy and France, followed by Germany, UK and Switzerland (all calculations are based on detailed factsheets for all ongoing FP6 and FP7 AIDS and TB projects which can be accessed at the website of the infectious diseases unit of the European Commission's Research Directorate for Health [4]).

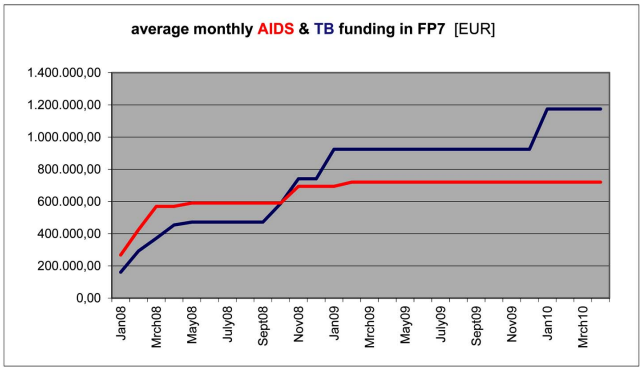

Fig. (5). Average monthly AIDS & TB funding in FP7.

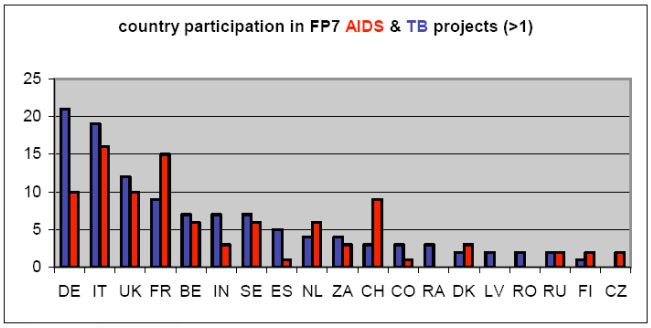

Fig. (6). Country participation in FP7 AIDS & TB project.

REFERENCES

[1] Harrington M, Morgan S, Syed J. Report on Tuberculosis Research Funding Trends 2005-2008, 2009. http://www.treatmentaction group.org/pubindex.aspx?id=364&folderId=362 accessed 13/06/2010.

[2] Moran M, Guzman J, Ropars A-L, McDonald A, Sturm T, Jameson N, Wu L, Ryan S, Omune. Neglected Disease Research & Development: How much are we really spending? The George Institute for International Health, 2009. http://www.georgeinstitute.org.au/sites/default/files/pdfs/G-FINDER_2008_Report.pdf accessed 13/06/2010.

[3] Laang H, Quaglio G, Olesen O. Tuberculosis research in the European Union: Past achievements and future challenges. Tuberculosis 90. 2010; 1-6.

[4] European Commission's Research Directorate for Health, Infectious Diseases Unit http://ec.europa.eu/research/health/infectious-diseases/poverty-diseases/projects_en.html accessed 13/06/2010.

Received: November 26, 2010 Revised: February 15, 2011 Accepted: February 18, 2011