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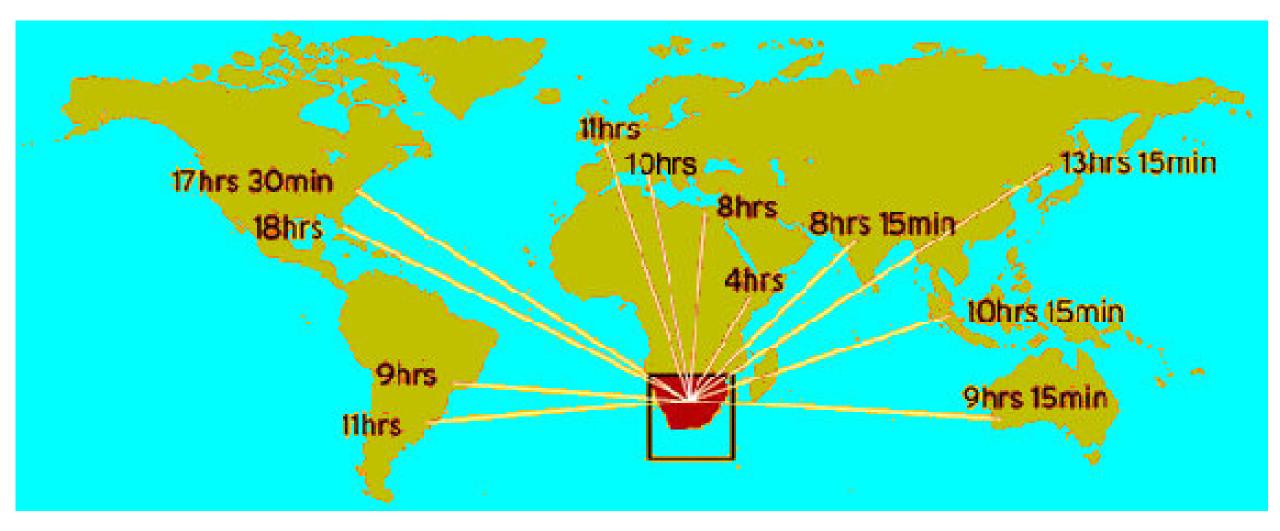
DESMOND TUTU TB CENTRE

15 June 2016

FRIEDA VERHEYE-DUA

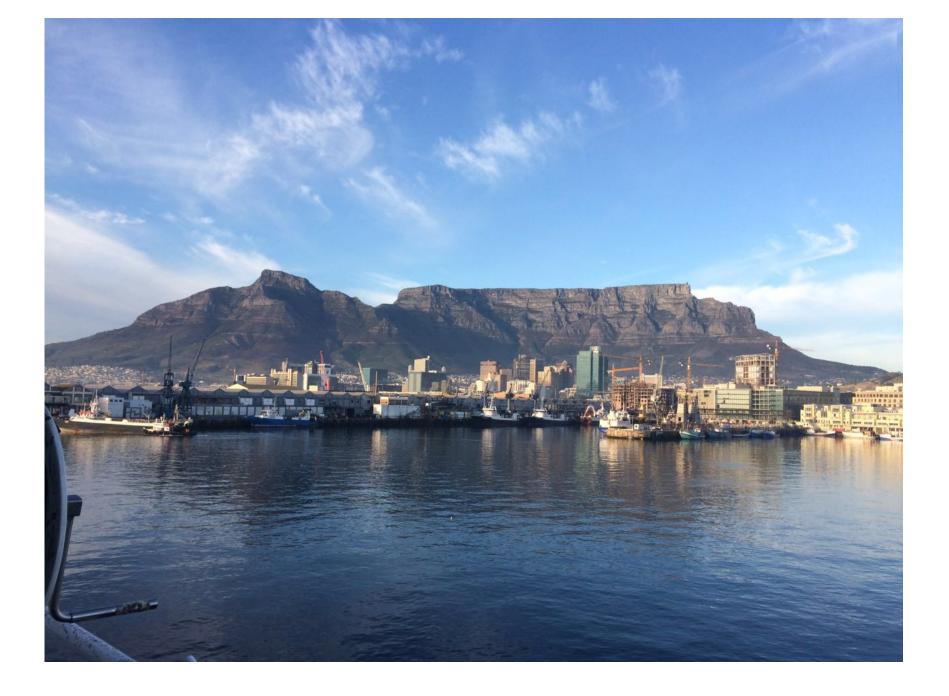
DESMOND TUTU TB CENTRE DEPARTMENT of PAEDIATRICS AND CHILD HEALTH FACULTY OF MEDICINE AND HEALTH SCIENCES STELLENBOSCH UNIVERSITY



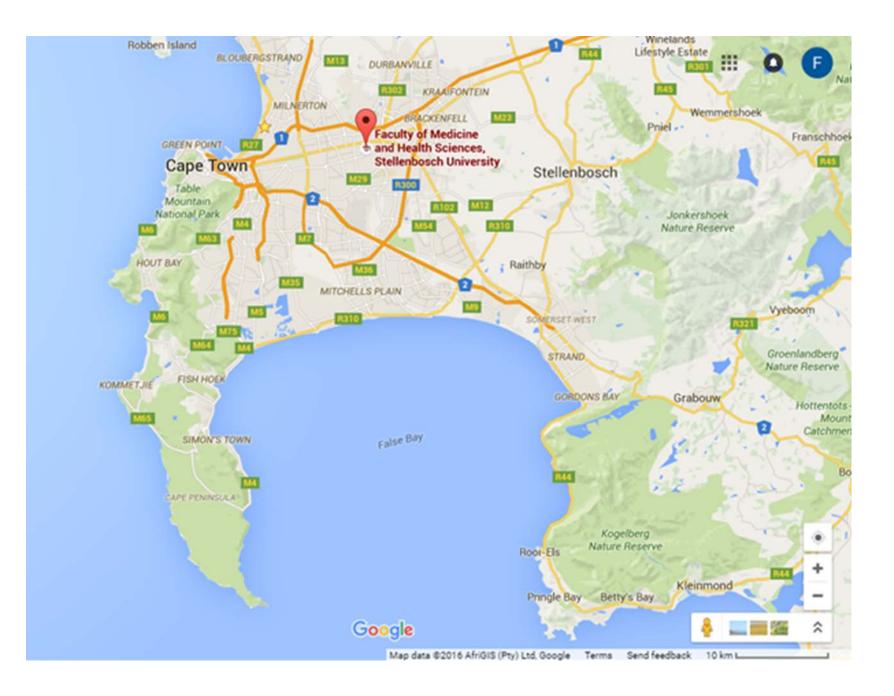














TYGERBERG HOSPITAL



SU FACULTY MEDICINES & HEALTH SCIENCES



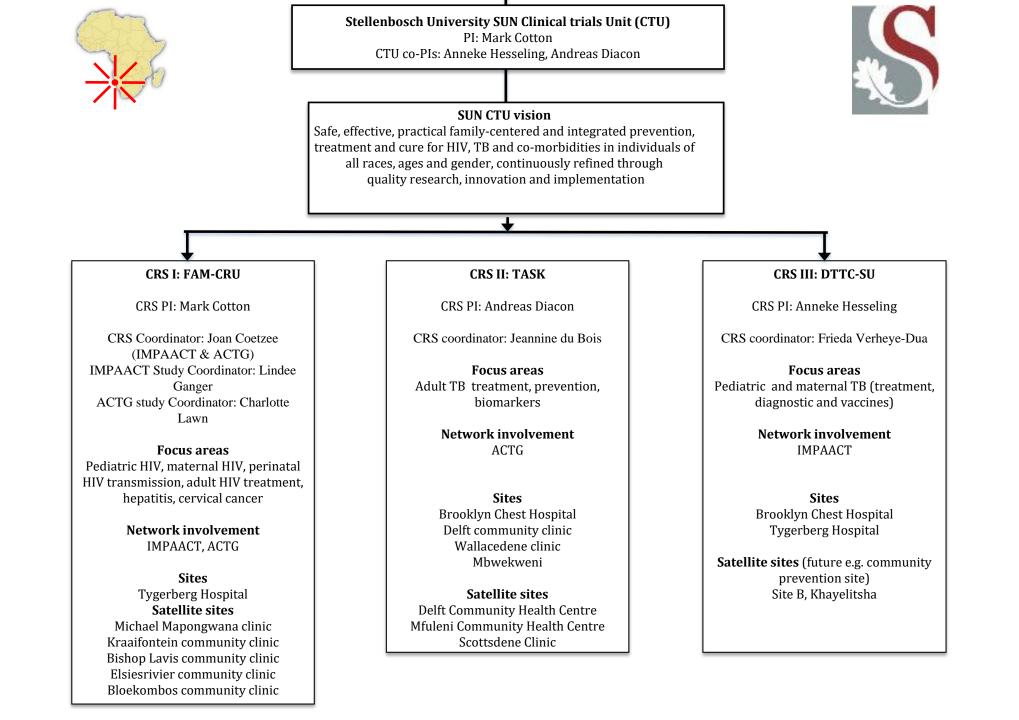
FACULTY OF MEDICINE AND HEALTH SCIENCES STELLENBOSCH UNIVERSITY



Lower Ground level

DESMOND TUTU TB CENTRE

ADMIN HUB DATA CENTER





13 Clinicians / Sub-Investigators

CRS Coordinator/Regulatory

7 Study Coordinators/Project Managers

9 Study Nurses

9 Data Staff

3 Lab staff

12 Counselors (English/Afrikaans/Xhosa

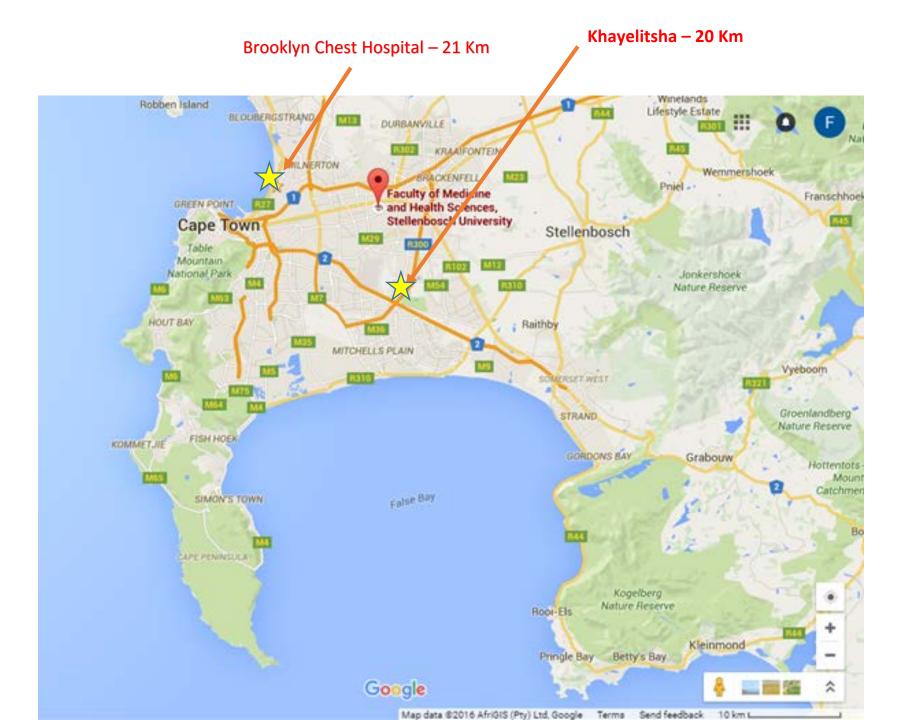
9 support staff

5 Drivers



Paediatric Team

69 staff







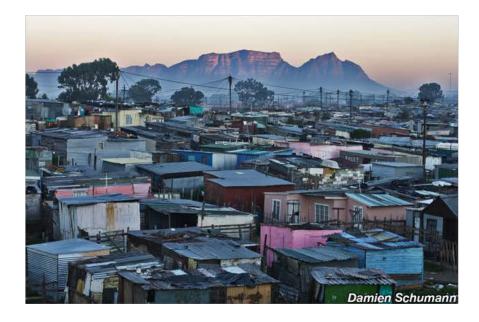


PHARMACIES TASK & FAMCRU DRIVERS & STAFF

LOGISTICS & COORDINATIONS



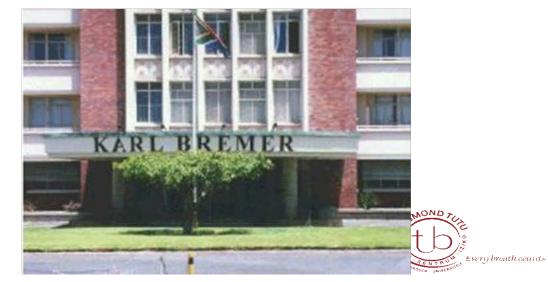








KARL BREMER HOSPITAL









Khayelitsha Nolungile Clinic Site C



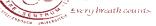
Brooklyn Chest PK Unit







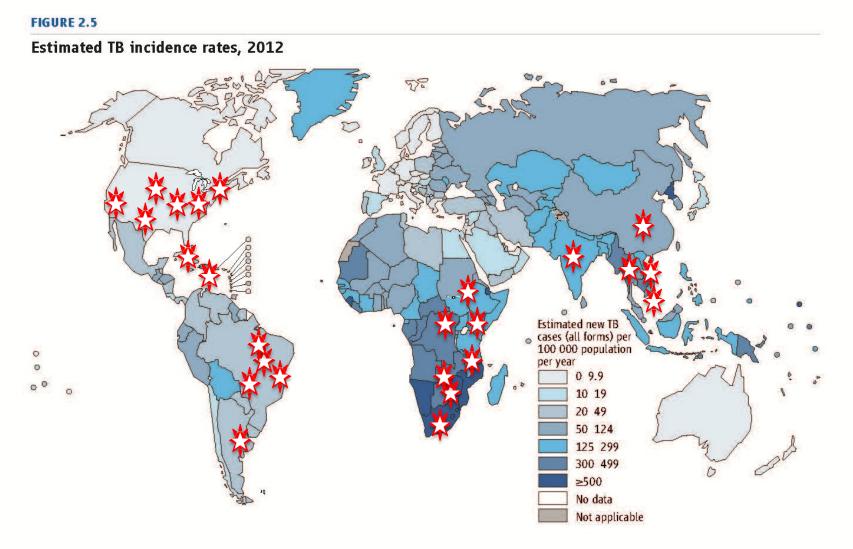








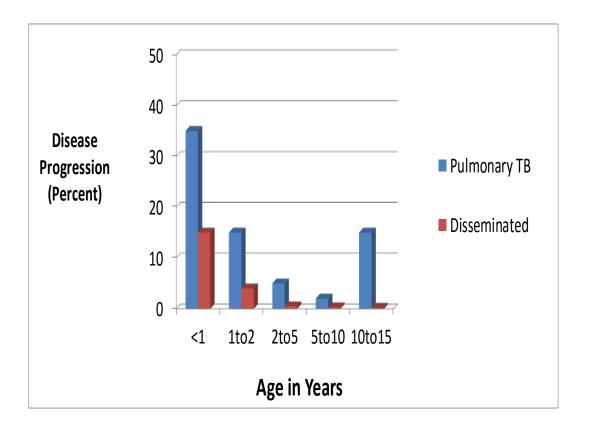
Current IMPAACT Sites and TB Burden





Risk of TB Disease and Death: Highest in the Youngest

- W Cape: TB notification >1000/100,000
- Annual risk of TB infection up to 4% in high-burden settings like SA
- Children < 5 and HIV- infected are at highest risk



Marais et al. Int J Tuberc Lung Dis. 2004



14 October 2014 - Site approval as IMPAACT Site 31790

P1101

Phase I/II Dose-Finding, Safety, Tolerance and Pharmacokinetics Study of a Raltegravir-Containing Antiretroviral Therapy (ART) Regimen in HIV-Infected and TB Co-Infected Children ≥ 2 Years to < 12 Years of Age (Version 2.0 dated 19 June 2015) Activation Protocol version 1.0 but study paused on 06 Feb 2015 Activation Protocol version 2.0 on 17 February 2016 First PID Screened 13 June 2016 – enrollment 21 June 2016

P1078

A phase IV randomised double blind placebo-controlled trial to evaluate the safety of immediate (antepartum-initiated) versus deferred (postpartum-initiated) IPT in HIV-infected women in high TB incidence settings. Activation protocol version 1.0 on 22 June 2015 Enrolled 12 PIDs

Phoenix feasibility study A5300

Study of MDR TB Cases and Their Household Contacts: Operational Feasibility to Inform PHOENIx Trial Design

> Activation protocol 13 November 2015 Enrolled 14 Index +53 Household cases



Planned IMPAACT studies in near future:

P1026s

Pharmacokinetic properties of antiretroviral and related drugs during pregnancy and postpartum

P1108

A Phase I/II, Open-Label, Single Arm Study to Evaluate the Pharmacokinetics, Safety and Tolerability of Bedaquiline (BDQ) in Combination with Optimized Individualized Multidrug-Resistant Tuberculosis (MDR-TB) Therapy in HIV-Infected and HIV-Uninfected Infants, Children and Adolescents with MDR-TB Disease.

Multi-Drug Resistant TB (MDR TB)

- 500,000 new cases of MDR-TB in 2011
- 50,000 paediatric cases; 400,000 infections
- Data and formulations for treatment of MDR and XDR TB in children are lacking
- MDR TB PK studies (observational), more than 300 kids in the past 4 year
- P1108 and P2005



Trial sponsor



Co-ordinating centre Clinical Trials Unit

Collaborating groups

Sa? 1

S'HINE

Shorter treatment for minimal TB in children

A randomised trial of therapy shortening for minimal tuberculosis with new WHO-recommended doses/ fixed-dose-combination drugs in African and Indian HIV+ and HIV- children

- Parallel group, non-inferiority trial
- 4 vs. 6 months, open label
- Children aged 0-16 years
- Non-severe TB
- WHO-recommended doses first-line drugs
- N=1200 children

Trial sponsor



Stellenbosch University, South Africa

Co-ordinating centre



MRC Clinical

Trials Unit at UCL, London, UK

ТВ-СНАМР

A phase III cluster randomised placebo-controlled trial to assess the efficacy of **preventive therapy in child contacts of multidrug-resistant** (MDR) tuberculosis (TB)

- 814 households of adult MDR-TB source case (with on average 2 children per household)
- 192 weeks in total including enrolment over 72 weeks and follow-up for 96 weeks





DTTC MISSION TO HAVE A TB FREE WORLD FOR THE NEXT GENERATION



"We call on the international community, which was so tremendous in its fight against another epidemic, apartheid, to show the same commitment to deal with TB and HIV/AIDS"

