ACCESSIBLE, AFFORDABLE, QUALITY TESTS ARE FUNDAMENTAL TO HEALTH AND CARE

FIND is an international non-profit organization dedicated to transforming diagnostics and testing to solve some of the world’s most challenging health issues.

Testing is a particular challenge in low-resource settings. Identifying infectious diseases like tuberculosis (TB), malaria, and hepatitis – which devastate lives and livelihoods – is crucial so that people can seek the care they need and break the chain of transmission.

Testing has always been overlooked in global health, despite being central to disease control and fundamental to achieving universal health coverage. Diagnostics often do not exist, are inaccessible, or cost too much. We have been working for nearly 2 decades to spur development of new tests and make them accessible to everyone in need.

COVID-19 has shown the world that testing doesn’t only save lives, it allows economies to function. But countries with fragile health systems without the strong laboratory networks needed to support today’s tests are being left behind in the race to contain the pandemic.

Our approach bridges research and development (R&D) to access, ensuring that new tests are available for use and sustainably supplied in low- and middle-income countries. These must be affordable, appropriate to the needs of those who will use them, and adopted into national policy so that they can be widely rolled out. A portfolio of digital tools helps to ensure that data can be collected and underpin evidence-based policy decisions.

Primary care, and maternal and child health in particular, has a unique role in saving lives, ensuring appropriate care for individuals in their communities, and being the front-line against global threats, including disease outbreaks and antimicrobial resistance.

Simple, affordable, high-quality tests that can be performed in clinics or even at home are essential, and urgently needed for a wide range of diseases.

A STRONG CONTINENT-WIDE PRESENCE

Africa has been at the heart of FIND’s body of work since its inception and is home to two of our regional offices, in South Africa and Kenya. We have implemented programmes throughout the continent, helping reinforce under-resourced public health programmes and bolster disease control and elimination efforts, with tangible results for patients and health systems.

BUILDING STRONG PARTNERSHIPS

Our African partners provide the bedrock upon which we can develop and extend our activities. We value long-lasting partnerships and continue to build up in-country capacity and know-how by working closely with leading public and private institutions such as the Africa CDC, the African Society for Laboratory Medicine, Institut Pasteur de Dakar and the South African Ministry of Health.

“FIND has had an incredible impact on the work we do, especially around Lassa fever, one of the most important public health diseases we deal with in Nigeria. The greatest thing working with FIND was that no solution was imposed on us, we went through an iterative process to define our priorities, define the steps and then implement it together.”

Dr Chikwe Ihekwezah, Nigeria CDC

BY THE NUMBERS

- Over 100 institutional partners
- 48 partner hospitals, research, and laboratory centres
- 14 university partners
- 46 clinical sites
- 24 million US dollars invested directly in Africa over the last 6 years

www.finddx.org
NEGLIGENCE TROPICAL DISEASES

As a group, neglected tropical diseases (NTDs) affect more than 1 billion people with an estimated 40% of impacted people living in the WHO African Region. These diseases have suffered a historical lack of attention, largely because they thrive in conditions of poverty.

Our FIND NTD portfolio focuses on those with significant unmet needs, from TB in 2018 in Africa, where a quarter of new cases were untreated and drug-resistant.

Specifically, we focus on:
- Human African trypanosomiasis (HAT, also known as sleeping sickness)
- Leishmaniasis
- Schistosomiasis
- Buruli ulcer
- Chagas disease

TUBERCULOSIS

Over 600,000 people were estimated to have died from TB in 2018 in Africa, where a quarter of new cases were drug-resistant. Over 600,000 people were estimated to have died from TB in 2018 in Africa, where a quarter of new cases were drug-resistant.

Our R&D efforts focus on areas of critical unmet needs. These include tools to identify drug-resistant forms of the disease, and we prioritize the development of user-friendly, low-cost, non-sputum-based rapid tests for diagnosing active TB that can be used in primary healthcare facilities.

In addition, we are also exploring technologies such as computer-assisted digital X-rays for optimal health impact.

SPOTLIGHT: Detecting childhood TB

Globally, at least 1 million children under 15 years old become ill with TB every year. We are driving diagnostic innovation for childhood TB in Africa by helping develop and evaluate tests that are extremely sensitive to account for low bacteria densities, and that do not rely on sputum, as children often cannot produce any. These include improving on existing line assays (LAM) urine-based tests, and developing a disposable stool processing kit that can be paired with molecular testing devices.

This work is being conducted with support from the South African Medical Research Council and the ELMA Foundation, with academic partners in South Africa and Uganda.

Activities are organized across three areas:
- Conducting technical demonstrations that will close R&D gaps
- Improving outbreak response speed by ensuring readiness to conduct robust clinical trials
- Supporting market sustainability by exploring innovative new financing solutions

SPOTLIGHT: Online training for COVID-19 diagnostics & testing

Together with the African Society for Laboratory Medicine (ASM) and the London School of Hygiene & Tropical Medicine, we developed a freely available online course on diagnostics and testing for COVID-19, aimed to support Ministry of Health officials, laboratory professionals, clinicians and anyone involved in laboratory testing and diagnosis for COVID-19, with a focus on low- and middle-income settings. To date over 16,000 people have registered, more than a quarter of whom are based in Africa.

ARTIMICROBIAL RESISTANCE

Antimicrobial resistance (AMR) is a global health emergency. Diagnosis and patient management are crucial to prevent AMR, particularly in low-resource settings that bear most of the burden and “just in case” antibiotics prescribing is common.

We are working with our partners and donors to tackle AMR holistically by focusing on urgent unmet needs across the spectrum of R&D and access. This includes developing new tests specifically designed to address AMR, such as stewardship diagnostics that will help to safeguard new medicines, addressing barriers to diagnostic access and building diagnostic connectivity solutions that can facilitate and strengthen AMR surveillance.

SPOTLIGHT: AMR Dx Use Accelerator

To stimulate research, speed up data generation to inform policymakers, and drive behaviour change, we have established and manage an AMR Dx Use Accelerator to generate crucial data on a package of interventions. Almost 22,000 patients are being enrolled in one of the largest AMR studies ever conducted, in Ghana and Uganda where we are assessing rates of change in antibiotic prescription and patient outcomes in those presenting with fever.

MALARIA & FEVER

Management of fever (febrile illness) is a huge medical challenge. In Africa alone, over 600 million childhood fevers occur every year, often with highly non-specific and overlapping signs and symptoms. Our work addresses current gaps such as lack of biomarkers and clinical decision tools and focuses on three areas:
- R&D for improved malaria diagnostics
- R&D for fever (non-malarial) diagnostics
- Addressing barriers to access and appropriate use of quality diagnostics

Recent work has taken place in Ivory Coast, Benin, Senegal, Rwanda, Sudan and Burkina Faso.

SPOTLIGHT: Diagnosing malaria in pregnant women

With our partners we have evaluated a new highly sensitive rapid diagnostic test (hsRDT) for detection of malaria in pregnancy and run a pilot implementation. Results from Benin show the hsRDT identifies significantly more infections in pregnant women than regular RDTs and is now used for reactive case detection and to evaluate active screening in areas close to elimination in Senegal.