Building Novel Clinical Research Capacity in Resource-Limited Settings: Lessons Learned at Three Mozambique Sites

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BACKGROUND

There are striking disparities in clinical research capabilities worldwide, particularly across regions of sub-Saharan Africa, where disease burden is high. Establishment of novel, indigenous research capabilities is difficult, and evaluations of capacity-building efforts remain scarce. We share our lessons learned from establishing three new clinical research sites in Mozambique.

METHODS

Three new clinical research sites were successfully established in Mozambique. These sites are located in Maputo (capital city), Chókwè (Gaza province) and Beira (Sofala province). Clinical research capacity building was mainly achieved through the implementation of HIV-related clinical trials and epidemiological studies. It took two years between initial discussions and study initiation.

Figure 1: Map of Mozambique



Figure 2: HIV/AIDS Awareness Event, Mozambique



Agreed upon methods included:

Obtaining political (Health Minister, National Institute of Health, provincial, district and municipal approvals) and institutional review boards/ethics committee approvals

Creation of laboratory infrastructure

Creation of data management infrastructure

Establishment of clinical infrastructure

Establishment of financial management systems

Recruitment, training and retention of critical research staff

Development of links for community support, participant recruitment, retention and referrals

Marketing of research sites to outside funders

Strengthening of human research subjects committees

RESULTS

Sites established:

Maputo: CISPOC/INS



(CISPOC), Maputo Province

Chókwè: CITSC/INS



Province

Beira CIDI/UCM



(UCM), private medical university

Current Research Capacity:

Maputo: CISPOC/INS

25 staff Clinical research laboratory Six private medical/examination rooms Two counseling rooms Data management unit Office space/waiting area/reception Pharmacy Administrative area Community mobilization unit Conference/training rooms

Chókwè: CITSC/INS

- 68 staff

- Clinical research laboratory Two private medical/examination rooms Four counseling rooms Data management unit

- Administrative area
- Health demographic surveillance platform/ Geographic information systems









Polana Caniço Health Research and Training Center/Centro de Investigação e Treino em Saúde da Polana Caniço

- Established in 2011, affiliated with National Institute of Health (INS)/Ministry of Health Phase 1 HIV vaccine trial; biomedical studies and evaluation of new laboratory technologies
- Chókwè Health Research and Training Center/Centro de Investigação e Treino em Saúde de Chókwè (CITSC), Gaza
- Established in 2007, affiliated with National Institute of Health (INS)/Ministry of Health Phase III trial of new fixed combination of anti-malarials, HIV incidence study (BED false recent phase, cross-sectional survey and prospective cohort study), Health Demographic Surveillance Survey (HDSS)
- Center for Infectious Disease Research/Centro de Investigação de Doenças Infecciosas (CIDI), Sofala Province Established in 2008, affiliated with the Catholic University of Mozambique/Universidade Católica de Moçambique
- HIV incidence study (BED false recent phasev, cross-sectional survey and prospective cohort study)

- Office space/waiting area/reception
- Community mobilization unit

Beira: CIDI/UCM

- 30 staff
- Clinical research laboratory (including access to TB culture)
- Five private medical/examination/counseling rooms
- Data management unit
- Office space/waiting area/reception
- Community mobilization unit
- Administrative area

Alignment with national and insti-Areas of high HIV incidence with Strong local leadership with locally Local ownership of capacity build Creation of career paths, careful se Containment of research costs, I Collaborative spirit and careful tra Balanced combination of biomed Patience with time horizons and I

Time horizons:

CIT	CISPOC/INS Maputo	
Initial site assessmer		November-06
Site implements Pha	INS approval for research capacity building	January-07
	INS starts field preparation for implementation of	
	Phase III TB/HIV treatment study	February-07
	Staff hiring process begins for TB/HIV study	
	conducted in 3 health centers of Maputo city	April-07
	Trainning of staff: Good Clinical Practice, Good	
	Clinical Laboratory Practice and study procedures	June-07
	First site begins recruitment for TB/HIV study	November-07
Health Ministry app		January-08
USAID concurrence	Second site begins recruitment for TB/HIV study	March-08
FHI 360 - INS sub-ag		April-08
	Third site begins recruitment for TB/HIV study	
	First technician trained on purification and freezing	
	of PBMC, ELISPOT for IFN-y and T-cell proliferation	June-08
		July-08
	Initial discussions with Youth Clinic at Maputo	July co
	Central Hospital (HCM) to conduct HIV incidence	
Initial HIV incidence	study	August-08
	Initial HIV incidence protocol submissions to IRBs	November-08
	Full IRB approval received for HIV incidence study	December-08
		February-09
Full IRB approval rec		March-09
CITSC/INS staff hiring		April-09
CITSC/INS laboratory		
rehabilitation begins		May-09
	Staff hiring and trainings for HIV incidence cohort	
	study: Good Clinical Practice and protocol	
	procedures	June-09
	INS/HCM prospective HIV incidence cohort study	
	initiated	
	Second technician trained on purification and	
	freezing of PBMC, ELISPOT for IFN-γ and T-cell	
	proliferation,	August-09
		September-09
		October-09
		November-09
	Equipment for assessment of immune response	
	(ELISPOT Reader, NucleoCounter, liquid nitrogen	
CITSC/INS trainings: good clinical practice	containers and additional biosafety cabinet, water	December-09
good clinical practice	baths, incubators, centrifuges and freezers)	
		February-10
		March-10
	Recruitment completed for HIV/TB study	April-10
CITSC/INS HIV incide		
Recent phase and cr		May-10

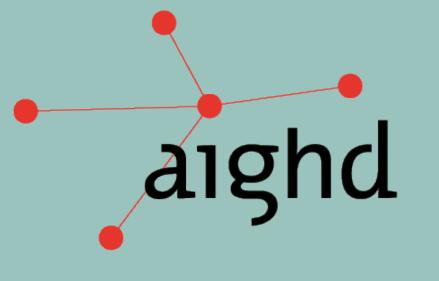
CONCLUSIONS AND RECOMMENDATIONS

Development of novel clinical research capacity in resource-limited settings is feasible, but considerable time and resources are required to create and manage productive sites. Partnerships between funding institutions is vital to provide financial stability and minimize risk.

DISCLOSURES

Authors of this presentation have nothing to disclose concerning possible financial or personal relationship with commercial entities that may have a direct or indirect interest in the subject matter of this presentation Nothing to disclose: Nilesh Bhatt • Ilesh Jani • Ricardo Thompson • Josefo João Ferro • Sónia Enosse, Arlinda Zango • Karine Dubé • Paul Feldblum • Janneke van de Wijgert • Merlin Robb • Kathleen Walker







Capacity building success depended on:

stitutional priorities
n potential for future prevention research
ally-based management teams
Iding effort and field site philosophy
selection of and sustained training of staff
leveraging of funds and diversification of research portfolio
ransitions of sites from one funder to another
edical and community-based field research for systemic capacity building
l long-term visions involved with building novel research capacity in resource-limited settings

/INS Chókwè	CIDI/UCM Beira		CISPOC/INS Maputo	CITSC/INS Chókwè	CIDI/UCM Beira
	Initial site assessment			CITSC/INS Health Demographic Surveillance Survey	
II malaria trial		June-10		begins	
			INS/HCM prospective HIV incidence cohort study		
		September-10	recruitment completed		
		October-10			
		November-10		CITSC/INS HIV incidence study prospective cohort begins	
			HIV vaccine trial (TaMoVac-I) protocol submission to		
			IRB + Two technicians were certified to perform		
		December-10	ELISPOT		
or research capacity building	Health Ministry approval for research capacity building	January-11			
red	USAID concurrence received		INS/CISPOC site considered formally an INS research		
nt in place	FHI 360 - UCM sub-agreement in place		center		
			Recruitment ends for HIV/TB study		
			Acquisition of Flow Cytometer FACSCount and		
		Eabruary 11	MagPix Luminex		
	CIDI/UCM Principal Investigator identified	rebiudiy-11	-		
	CIDI established in rental house near UCM campus		MHRP site assessment visit		
			IRB approval for phase I/II HIV (TaMoVac-I) vaccine		
		Name a	trial		
ol submissions to IRBs		March-11	Staff hiring begins		
	Initial HIV incidence protocol submissions to IRBs		Good Clinical Practice training		
	Initial discussions with UCM regarding laboratory space		TaMoVac-I data management training		
	mitial discussions with Ocivi regarding laboratory space	April-11	Site assessment for TaMoVac-I trial		
			Staff training on protocol procedures for Phase I/II		
	CIDI/UCM laboratory rehabilitation begins	May-11	HIV vaccine trial		
for HIV incidence study	CIDI/UCM staff hiring process begins	June-11	Site infrastructure upgrades		
ess begins		July-11		MHRP - FHI 360 - CITSC/INS sub-agreements in place	
a management and center			Establishment of laboratory infrastructure		
	CIDI/UCM laboratory rehabilitation complete		International course on GCP and GCLP: Train the		CIDI/UCM reaches recruitment targets in HIV incid
			trainers		study
	CIDI/UCM trainings: research methods, research ethics,	August-11	Site initiates Phase I/II HIV vaccine trial		Site assessment visit from DAIDS/MHRP
	Good Clinical Practice, protocol procedures		Public announcement of TaMoVac-I trial by the		
			Minister of Health		
			CISPOC/INS starts pilot study on acute febrile		
		September-11			
			INS/HCM prospective HIV incidence cohort study		
	Full IRB approvals received for HIV incidence study	October-11	completed follow-up completed		
	Data management training	January-12	completed follow up completed		CIDI/UCM research center structure completed
	Laboratory equipment received	Janual y-12			
	Laboratory training		Third training of additional one technicians on		
			Third training of additional one technicians on		
			purification, freezing, thawing and counting of cells		
when mothed a managered at his-		P 1 44	using a NuceloCounter + First technician trained on		CIDI/UCM initiates behavioral surveillance truck dr
ch methods, research ethics,		February-12	Flow cytometry using Flow Cytometer FACSCanto		survey
protocol procedures	CIDI/UCM HIV incidence study initiated (World AIDS Day)		CISPOC/INS reaches recruitment targets for		
	Launch of CIDI/UCM as a research center	March-12	TaMoVac-I trial		MHRP - UCM sub-contract in place
	Health Minister puts HIV incidence study on hold; study		CISPOC/INS begins development of a quality		
	restart	April-12	management plan	CITSC/INS initiates Phase III malaria trial	CIDI/UCM initiates TB/HIV treatment study
		July-12			Move of the CIDI research center to UCM campus
tudy initiated (BED False			CISPOC/INS starts HIV-1C vaccine cohort		CIDI/UCM starts HIV-1C vaccine cohort development
ectional survey)		December-12	development program with MHRP		program with MHRP

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