

## JOHN E. FOGARTY INTERNATIONAL CENTER

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### Mission:

The Fogarty International Center (FIC) promotes and supports scientific research and training internationally to reduce disparities in global health. The Center, dedicated to international collaboration and the health of mankind, was established in 1968 to advance health through international scientific cooperation and serve as the organizational locus for the NIH's international activities. It is named for the late Congressman John E. Fogarty of Rhode Island, in recognition of his support for an international agenda at the NIH because, in his words, "just as disease knows no boundaries, so also the benefits of medical research and indeed research itself can know no boundaries."

### Selected Achievements and Initiatives:

*Combating HIV/AIDS:* Fogarty's AIDS International Research and Training Program (AITRP) is building capacity in poor countries to tackle the AIDS problem more effectively. Working through 25 U.S. universities, educational programs support Ph.D., Masters level, and nurse training to advance research on vaccine and microbicide development, and to identify groups at high-risk for exposure. Nearly 2,000 researchers from over 100 countries have been trained in the U.S., many at senior levels, and more than 50,000 through in-country workshops and courses. More than 80 percent of those trained in the U.S. through this program returned home to pursue research and health efforts locally.

In an eight-year study supported by FIC and the National Institute of Child Health and Human Development, researchers from Harvard University and partners in Tanzania examined the effect of multivitamin supplements containing high doses of the vitamin B complex and vitamins C and E on the risks of clinical disease progression, HIV-related complications, immune response, and viral levels in HIV-positive women in Tanzania. Multivitamin supplements reduced the risk of progression to AIDS by half when they were given to HIV-infected women during pregnancy and for more than five years after they gave birth. These women also had fewer later-stage symptoms, such as mouth infections or diarrheal diseases. The supplements bolstered counts of disease fighting immune cells and modestly lowered HIV levels in the blood. The results suggest that use of multivitamins by HIV-infected women during and after pregnancy can slow the course of disease, and could provide a low-cost intervention to extend the time before they need anti-retroviral therapy.

*Malaria:* Every year, between 300-500 million people are infected by the malaria parasite and nearly three million die. Most deaths occur among children under the age of five living in sub-Saharan Africa. U.S. citizens are increasingly vulnerable, with rising numbers of tourists and military traveling to malaria-endemic settings. Increasing resistance of the Anopheles mosquito to insecticides and of the malaria parasite to currently available drugs

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adds urgency to the search for new anti-malarial drugs. A significant barrier to the development of anti-malarial drugs is that commonly used laboratory techniques require radioactivity as part of the detection strategy of malaria parasites. The use of radioactivity requires special laboratory procedures and facilities, usually beyond the reach of most developing country laboratories.

A new malaria parasite detection system has been developed as part of Fogarty's unique drug discovery program that supports screening of flora and fauna for potentially active compounds. Scientists in Panama associated with the Fogarty's International Cooperative Biodiversity Groups (ICBG), have developed a novel, non-radioactive assay based on the use of a fluorescent dye. Researchers in Bolivia and Italy have adopted the new technique, which represents an accurate, rapid, and cost-effective method for anti-malarial drug discovery. This innovation will allow malaria research to move forward in new ways in those countries hardest hit and will yield knowledge that will ultimately benefit the global community.

### Appropriations History

*(\$ in thousands)*

FY 2001	\$50,482 (+16.1%)
FY 2002	\$56,859 (+12.6%)
FY 2003	\$63,465 (+11.6%)
FY 2004	\$65,382 (+3.0%)
FY 2005	\$66,632 (+1.9%)

### Extramural Research Project Grants

*(Includes SBIR/STTRs)*

FY 2001	185
FY 2002	238
FY 2003	246
FY 2004	245
FY 2005	229

### Success Rate — Research Project Grants

FY 2001	30%
FY 2002	28%
FY 2003	19%
FY 2004	22%
FY 2005	18%

### Research Training Positions Supported

FY 2001	0
FY 2002	0
FY 2003	0
FY 2004	0
FY 2005	1

### Research Centers

FY 2001	0
FY 2002	0
FY 2003	0
FY 2004	0
FY 2005	0