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New UCT-led consortium to tackle malaria drug resistance in South-East Africa

The University of Cape Town (UCT) has announced the launch of the Mitigating Antimalarial Resistance Consortium in Southern and East Africa (MARC SE-Africa), which will tackle the growing crisis of drug resistant malaria. Over the next four years, MARC SE-Africa will receive almost 4.2 million euros from the European Union's research and innovation programme, Horizon Europe.

The 48-month project — funded by the Global Health EDCTP3 Joint Undertaking — responds to a growing malaria crisis, one of Africa's greatest infectious challenges. Gains achieved in reducing the burden of malaria and advancing its elimination are now threatened by malaria parasites becoming resistant to the main group of drugs used to treat the disease, the artemisinins.

Artemisinin-based combination treatments (ACTs) are the backbone of all currently recommended malaria treatments. The potential impact of widespread ACT resistance in Africa has been estimated at 16 million more malaria cases and nearly 80 000 additional malaria deaths annually. Protecting the efficacy of current first-line malaria treatments is now a top public health priority.

The MARC SE-Africa project is designed to promote the translation of evidence of artemisinin and other drug resistance of public health significance to inform better malaria policy and practice before drug resistance increases the number of malaria cases and deaths. This consortium will provide technical support to the 18 countries of Southern and East Africa, the area historically first affected by drug resistance.

The UCT-led consortium includes Infectious Diseases Research Collaboration, Karolinska Institutet, LINQ management GmbH, Liverpool School of Tropical Medicine and their Malawi-Liverpool-Wellcome Programme, Stichting Amsterdam Institute for Global Health and Development, Stiftelsen Magic Evidence Ecosystem, University of Oxford, University of Melbourne, and the University of Rwanda.

UCT's professor Karen Barnes leads the MARC SE-Africa consortium. Commenting on the importance of the project, she said: "This consortium will provide technical support to facilitate the implementation of the World Health Organisation Strategy to respond to antimalarial drug resistance in Africa in our region. Working together, we have the best chance of preventing a repetition of the devastating increase in malaria cases and deaths seen previously with chloroquine resistance."

As founding director of the <u>UCT_MRC Collaborating Centre for Optimising Antimalarial</u> <u>Treatment (CCOAT)</u>, Barnes has spent over two decades bridging the research needs of malaria control and elimination programmes. In 2001, she supported the first Department of Health in Africa (the KwaZulu Natal Department of Health) to deploy artemisinin-based combination treatment.

Barnes co-chairs the South African Malaria Elimination Committee and heads up the Clinical Pharmacology Scientific Module in the <u>WorldWide Antimalarial Resistance Network (WWARN</u>). She has been working with national malaria programmes to establish a regional network since 2019, with efforts interrupted by the COVID-19 pandemic.

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