

A conversation with Dr. Melanie Taylor, April 24, 2018

Participants

- Dr. Melanie Taylor – Medical Officer, Department of Reproductive Health and Research, World Health Organization
- Josh Rosenberg – Senior Research Analyst, GiveWell
- Stephan Guyenet – Research Consultant, GiveWell

Note: These notes were compiled by GiveWell and give an overview of the major points made by Dr. Melanie Taylor.

Summary

GiveWell spoke with Dr. Taylor of the World Health Organization (WHO) as part of its investigation into the global funding landscape for syphilis testing and treatment among pregnant women. Conversation topics included the WHO's work on congenital syphilis prevention and its room for more funding.

WHO's work on congenital syphilis prevention

Congenital syphilis is the second leading cause of stillbirth. The disease is responsible for approximately 350,000 adverse birth outcomes, including stillbirth and neonatal death, per year.

The WHO advises nations to improve coverage for the testing and treatment of syphilis in pregnant women, which it believes is the most cost-effective strategy for reducing rates of congenital syphilis. Specifically, it promotes dual elimination programs, in which syphilis testing and treatment is integrated with a nation's platform for the prevention of mother-to-child transmission of HIV. The WHO provides nations with technical assistance for the planning and development of dual elimination programs.

Advocacy for dual test kits

Many nations in Africa with high HIV and syphilis prevalence have significantly lower coverage rates for syphilis testing than for HIV testing. However, national governments and external aid organizations, such as the WHO, often do not possess significant funding to procure syphilis test kits.

The WHO works with countries to develop strategies for using existing funding to increase syphilis testing coverage rates. For example, it advocates for a rapid test kit—which became available for purchase in 2015—that can simultaneously test for HIV and syphilis with a single finger stick. Since these kits test for HIV, a nation could potentially purchase them using funding from the Global Fund to Fight AIDS, Tuberculosis and Malaria (the Global Fund), which helps nations finance resources for the testing and treatment of HIV. Leveraging funding from the Global Fund to procure dual test kits has been successful for some nations but not for others,

although the WHO is not aware of the Global Fund's rationale for accepting or rejecting applications.

Room for more funding

Syphilis prevention does not currently receive significant funding from donors or charities, potentially due to cultural stigmas associated with the disease. The only direct funding currently available for syphilis prevention comes from national governments, the WHO, and the US Centers for Disease Control and Prevention (CDC).

Indirect support for syphilis prevention from the Bill & Melinda Gates Foundation

Funding for the Clinton Health Access Initiative

The Bill & Melinda Gates Foundation is funding the Clinton Health Access Initiative (CHAI) to help countries secure larger supplies of benzathine penicillin, which is the only recommended treatment for syphilis in pregnant women.

Funding for research on the provision of test kits

The Bill & Melinda Gates Foundation recently supported research studies in the Democratic Republic of Congo and Zambia that evaluate the effects of providing antenatal care clinics with syphilis test kits.

WHO budget for congenital syphilis prevention

The WHO's budget for congenital syphilis prevention comes primarily from the US CDC and is relatively small (below \$200,000 per year).

Dr. Taylor is the only WHO staff member working on congenital syphilis prevention and spends approximately 75% of her time on this work.

Past funding sources

In the past, the WHO received funding from the Bill & Melinda Gates Foundation and PATH for research activities related to syphilis prevention. The WHO has also partnered with CHAI for technical assistance work. The WHO does not currently receive substantial private funding for its syphilis control efforts.

Use for additional funding

The WHO would direct additional funding for its work on congenital syphilis prevention towards activities such as:

- **Purchase of syphilis test kits for pregnant women** – The WHO would likely direct the majority of additional funding it received towards the procurement of syphilis test kits.
- **Supporting the availability of benzathine penicillin for treatment of pregnant women with syphilis**

- **Technical support for governments** – The WHO would use additional funding to provide technical support to countries establishing syphilis testing programs. Technical support may include hiring a staff member at a national or regional level who could focus solely on congenital syphilis prevention.
- **Support for the Global Validation Advisory Committee (GVAC)**
 - GVAC is an advisor to the WHO during the process of validating a nation as having eliminated mother-to-child transmission of HIV and syphilis. The WHO may use additional funding to support the annual GVAC meeting or to enable officials from different member countries to attend and learn from the meeting.

All GiveWell conversations are available at <http://www.givewell.org/conversations>