Addressing the Burden of African Animal Trypanosomosis (AAT): The Need for New Solutions for Livestock Keepers

SIDE MEETING AT THE 37TH ISCTRC CONFERENCE

17 September 2025 (16:30 – 18:30), Zambezi 1, Mövenpick Hotel & Residences, Nairobi, Kenya

OFFICIAL MEETING REPORT

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See List of Participants *(Appendix on pg. 6)*

Contents

Executive Summary

The side meeting on *Addressing the Burden of African Animal Trypanosomosis (AAT): The Need for New Solutions for Livestock Keepers* was convened on 17th September 2025 at the 37th Conference of The International Scientific Council for Trypanosomiasis Research and Control (ISCTRC). The conference brought together a broad and distinguished group of participants. These included international and regional multi-lateral organisations, national regulators and authorities, leading academics and researchers, as well as the private sector and not-for profit product development organisations.

The meeting highlighted that whilst AAT remains a solvable problem, it is exacerbated by a critical innovation gap and the failure of current tools under mounting drug resistance and challenging access and distribution pathways.

Multi-national collaborations are generating vital data on the socio-economic burden of AAT, informing evidence-based strategies and guiding policy decisions. Regulatory innovations, such as the East African Community's mutual recognition programme, are improving access to existing tools. However, the need for new, effective solutions remains urgent. The development of novel trypanocides, such as the GALVmed trypanocide development project, represents a critical and timely response to the unmet needs of livestock keepers. Sustained collaboration, advocacy, and prioritisation across the animal health ecosystem are essential to bring these solutions to scale.

Key action points emerging from the meeting were:

- **Advance regulatory harmonization** through AU-IBAR and WOAH frameworks to shorten timelines and ensure safe, effective rollout of new medicines.
- **Strengthen farmer-centric design and stewardship** with innovations such as ready-to-use formulations, community engagement models, and robust pharmacovigilance systems.
- **Mobilize partnerships and investment** linking research institutions, policy makers and regulators, private sector, and donors to bridge the innovation gap and position AAT more firmly in national and regional agendas.
- **Support the GALVmed Trypanocide Initiative** by contributing research expertise, clinical trial capacity.

The meeting underscored that sustained progress against AAT will require not only technological innovation but also strong, community-driven and cross-sectoral collaboration, anchored by GALVmed's catalytic role in driving new solutions forward.

Background

AAT remains one of the most significant constraints to livestock production in Africa, causing billions in annual economic losses. Existing trypanocides (diminazene aceturate, isometamidium, and homidium) are increasingly undermined by resistance, poor stewardship, and barriers to access (FAO, 2022; HealthforAnimals, 2025). It is against this backdrop of escalating need and failing tools that GALVmed is advancing a new trypanocide development initiative, designed to provide safe, effective, and farmer-accessible solutions to address the unmet need.

The side meeting was convened as a platform to:

- Reflect on the burden of AAT from the perspective of livestock keepers.
- Examine limitations of current tools and highlight the emerging resistance crisis.
- Raise awareness of the need for new investments and innovative solutions.
- Identify how new trypanocide development projects can be implemented sustainably.
- Identify regulatory/policy barriers and opportunities for enabling environments.
- Foster partnerships across research, regulatory, private sector, and international bodies.

Thematic Discussions

1. CHALLENGES & GAPS IN AAT CONTROL

The heavy socio-economic burden of African Animal Trypanosomosis on livestock keepers was a recurring theme, with participants underscoring the high treatment costs, long travel distances to access services, and the limited veterinary infrastructure available to them. Farmers often have few choices when seeking tools to combat the disease and are frequently confronted with sub-standard products in informal markets. As a result, and given the overstretched veterinary services, many farmers resort to self-administering trypanocides without diagnostic guidance - a practice that not only increases misuse but also heightens the risk of resistance.

Projects such as 'Controlling and progressively Minimizing the Burden of Animal Trypanosomosis' (COMBAT) (https://www.combat-project.eu/, Boulangé et al., 2022) and 'Disease Intelligence & Modelling for Progressive Control of Animal Trypanosomosis in Africa' (DIMCAT) (Cecchi et al., 2025) are developing continental and national information systems (i.e. atlases) to identify epidemiological hotspots (Cecchi et al., 2024), which support resource prioritization and resource allocation. Whilst these tools are designed to support evidence-based strategies and to guide policy makers (Diall et al., 2017), they should be contextualized within socio-economic realities to ensure strategies are not only technically sound but also practical and impactful for livestock keepers.

Complicated supply chain and distribution paths contribute to poor last mile access resulting in the proliferation of informal markets, raising concerns about the availability of safe and effective products for livestock keepers. With the perception that AAT control is as a private responsibility rather than a public good, there are limited coordinated national responses and weakened government-led investment to provide sustainable solutions.

2. LIMITATIONS OF CURRENT TOOLS & RESISTANCE

The choices available to farmers are limited, outdated and frequently unsafe and with no new molecules commercialized in the last 60 years, resistance to existing trypanocides is widespread and worsening. Packaging challenges, poor administration practices, and lack of cost-effective, field based diagnostic tools exacerbate the problem.

3. NEED FOR INVESTMENT IN NEW SOLUTIONS

The development of new drugs based on novel molecular entities, essential for addressing resistant strains, typically takes 10 to 15 years and requires substantial investment. Stakeholders highlighted that robust socio-economic data quantifying the burden of AAT will be critical to elevating its priority and encouraging such investment. Successes in the control of sleeping sickness were cited as examples where leveraging existing research and strong partnerships proved decisive, reinforcing the importance of collaboration in accelerating progress (Franco et al., 2014). Stakeholders stressed the urgent need to close the innovation gap in animal trypanocide R&D, which receives minimal investment compared to human neglected tropical diseases. This aligns with broader findings that animal health innovations are critical to sustainable livestock transformation (HealthforAnimals, 2025)

Encouragingly, COMBAT is working to publish new data on the socio-economic impact of AAT, which could provide a stronger evidence base for mobilizing resources. This need for better data was reinforced by market insights shared by Agnexus, showing that farmers in East Africa already spend around USD 500 million annually, nearly 45% of their livestock health budgets, on parasiticides. Together, these points underline both the urgent demand and the lost opportunity, highlighting why sustained investment in new, accessible, and farmer-friendly solutions is critical.

Since treatments are usually administered by veterinarians and extension workers, diagnostics must be directly linked to these professionals to ensure effective and responsible use. The integration of diagnostics into veterinary workflows is therefore of paramount importance to strengthening AAT control. Diagnostic lab networks exist but are frequently fragmented, underutilized and often constrained by limited staffing. Investments in coordinated strategies across multiple disease areas could improve efficiency and ensure better use of available resources.

Beyond this, farmer awareness and accessibility remain central: laboratories, drugs, and trained professionals must be visible and accessible at the community level. Without these linkages, even the best innovations risk remaining underutilized, as farmers will continue to rely on guesswork or self-treatment.

4. GALVMED'S INITIATIVE AND RELEVANCE

The development of new trypanocides was highlighted as a practical and urgently needed response to the unmet needs of livestock keepers. Stakeholders stressed that the successful rollout of any new molecule will depend not only on its scientific innovation but also on how well it is grounded in farmers' realities. Approaches such as simplified, ready-to-use formulations, in contrast to granulates requiring reconstitution in the field were noted as examples of farmer-centric design that can reduce misuse and improve adoption. More broadly, participants emphasized the importance of embedding new tools within a framework of affordability, accessibility, and stewardship, ensuring that innovations are integrated into veterinary workflows and responsive to the conditions faced in the field.

5. REGULATORY/POLICY BARRIERS & ENABLERS

An effective regulatory framework should expand access to veterinary medicines by incentivizing companies and manufacturers to register their products through streamlined and harmonized procedures and transparent and predictable timelines. National regulators face resource challenges that lead to long timelines. However, AU-IBAR is playing a pivotal role in shaping a more enabling regulatory environment for veterinary medicines by strengthening regulatory capacity such as advocating for digitizing dossier submission to increase efficiency and transparency, using the mutual recognition model (East African Community, 2021), emphasized by their work with AU-PANVAC in harmonizing regulation with the vaccine sector.

The diversity of ministries involved in animal health may also complicate policy implementation and slow down coordinated responses to AAT. Strengthening harmonization across ministries and clarifying institutional roles were underscored as critical steps to creating a more enabling policy environment for new trypanocide introduction. It was also highlighted that advocacy for local drug formulation and production would increase access to quality trypanocides.

A proposal for establishing a unified regulatory network is ongoing, and AU-IBAR indicated that a major meeting with regulators to progress this initiative is scheduled for November 2025. It is envisaged that a continental regulatory framework will harmonize processes across regional economic communities. Importantly, stakeholders stressed that successful implementation will depend on the integration of regional bodies into national regulatory frameworks, ensuring coherence between continental ambitions and country-level realities.

6. DISEASE PRIORITIZATION

Disease prioritization is a critical driver of funding and political attention, yet AAT remains underreported and insufficiently prioritized, often described as a “neglected neglected” disease. While AAT is undeniably important, it is also only one among many pressing challenges facing farmers, who must contend with competing livestock health priorities that often dominate national agendas. Trade considerations were highlighted as a potential lever for elevating its importance on policy agendas. AU-IBAR is advancing a continental AAT strategy, due for submission in October 2025, which will be presented to AU member states in 2026, offering a platform to embed AAT more firmly within regional priorities. Advocacy opportunities through mechanisms such as GF-TADs, alongside better inclusion of AAT in data capture and reporting systems, including improved reporting to WOAH, were identified as essential enablers for creating a more supportive policy and regulatory environment.

7. OPPORTUNITIES FOR PARTNERSHIP AND COLLABORATION

Stakeholders highlighted that sustainable progress requires innovation and community-driven partnerships. Stakeholders envisaged that partnerships/collaborations should focus on:

- ***Research & clinical trials***: ICIPE, CIRAD/COMBAT, LSTM, Makerere, and KALRO were identified as partners for clinical trials and pharmacovigilance (PV).
- ***Policy & advocacy*****:** FAO, WOAH and AU-IBAR can provide policy frameworks, advocacy, and technical guidance, and promote disease intelligence for evidence-based decision making.

- ***Private sector***: Engagement of agro-vets and supply chain actors is essential for stewardship and access.
- ***Community engagement***: Training Community Animal Health Workers (CAHWs), including in topics related to AAT control has often been project-based with a limited long-term impact. Linking CAHW training programs with established organization will provide improved accountability and continuity. Furthermore, proposals such as certifying trainers, deploying mobile veterinary clinics, and establishing centres of excellence will support sustainable capacity. These approaches align with the broader vision of institutionalized, community-driven models of training and service delivery capable of sustaining and amplifying the impact of innovations such as trypanocides.
- ***Integration of diagnostics***: Diagnostics integration was also discussed as a cross-cutting enabler, supporting stewardship and resistance monitoring when linked to veterinary workflows and farmer awareness.

Recommendations and Call to Action

- ***Support the GALVmed Trypanocide Initiative*** – Accelerate development of a new trypanocide by supporting clinical trial sites, contributing in-kind research expertise, and exploring future procurement commitments.
- ***Farmer-Centric Design*** – Ensure new tools are accessible, affordable, and designed for ease of use (e.g., ready-to-use formulations) to minimize misuse and enhance adoption.
- ***Strengthen Stewardship & Pharmacovigilance*** – Partner with regulators to operationalize PV systems, build farmer awareness, and invest in training and monitoring.
- ***Advance Regulatory Harmonization*** – Endorse AU-IBAR's efforts with AU-PANVAC and WOAH to streamline regulatory approval and support the November 2025 regulators' meeting.
- ***Mobilize Partnerships*** – Formalize collaborations with research institutions and laboratories to support trials and strengthen diagnostic capacity; engage NGOs to lead community and field-based activities; and work with intergovernmental bodies to provide policy alignment and advocacy support.
- ***Advocate for Prioritization*** – Elevate AAT in donor, national, and regional agendas, positioning it as a key food security and livelihoods issue.

Next Steps

- ***GALVmed & AU-IBAR***: Consolidate meeting outcomes into the continental AAT advocacy strategy.
- ***Regulators***: Engage at the November 2025 AU-IBAR convening to advance harmonization.
- ***Research institutions*** (ICIPE, KALRO, NARO, CIRAD, Makerere, etc.): Explore partnerships with GALVmed for field trials and pharmacovigilance.
- ***Donors & development partners***: Consider aligned funding mechanisms to bridge the innovation gap for AAT solutions.
- ***Private sector (Agnexus, pharma industry & agro-dealers***): Strengthen supply chain stewardship and explore procurement channels for new products.

Appendix 1: List of Attendance

No.	Name	Organization	Country
1.	Prof. Enock Matovu	Makerere University	Uganda
2.	Dr. Joseph Magona	National Agricultural Research Organisation (NARO)	Uganda
3.	Dr. Monicah Maichomo	Kenya Agricultural and Livestock Research Organisation (KALRO)	Kenya
4.	Dr. Seth Onyango	Kenya Tsetse and Trypanosomiasis Eradication Council (KENTTEC)	Kenya
5.	Dr. Giuliano Cecchi	Food and Agricultural Organization of the United Nations (FAO)	International
6.	Dr. Geoffrey Muttai	Kenya Tsetse and Trypanosomiasis Eradication Council (KENTTEC)	Kenya
7.	Dr. Dan Masiga	International Centre for Insect Physiology and Ecology (ICIPE)	Kenya
8.	Dr Alain Boulangé	French Agricultural Research Centre for International Development (CIRAD)	France
9.	Dr. Paul Bessell	Liverpool School of Tropical Medicine (LSTM)	UK
10.	Dr. Huyam Salih	African Union-InterAfrican Bureau for Animal Resources (AU-IBAR)	Regional
11.	Dr. Joachim Ajakaiye	Nigeria Institute for Trypanosomiasis Research (NITR)	Nigeria
12.	Prof. Albert W Mugenyi	Ministry of Agriculture, Animal Industry and Fisheries (MAAIF)	Uganda
13.	Dr. Néo Mapitse	World Organization for Animal Health (WOAH) (Eastern Africa)	Regional
14.	Emmanuel Couacy-Hymann	World Organization for Animal Health (WOAH) Expert – Biological Standards Commission	Cote d'Ivoire
15.	Prof. Joseph Ndung'u	Foundation for Innovative New Diagnostics (FIND)	Kenya
16.	John Muthee	Agnexus	Kenya
17.	Alec Evans	Global Alliance for Livestock Veterinary Medicines (GALVmed)	Kenya
18.	Dr. Johnson Ouma	Global Alliance for Livestock Veterinary Medicines (GALVmed)	Kenya
19.	Dr. Ruphline Anyango	Veterinary Medicines Directorate (VMD)	Kenya
20.	Dr. Josphat Kiama	Directorate of Veterinary Services (DVS)	Kenya

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