

Dear Readers,

The SUZY news is an innovative initiative taken by the Scaling Up Zinc for Young Children with Diarrhoea (SUZY) Project of ICDDR,B to keep interested people informed about the project activities, about the scaling up process and the research that accompanies and supports this process. We want people to know about the benefits of zinc treatment in young children with diarrhoea.

Since the last issue of SUZY news, the project has successfully hosted its 2nd international conference, titled 'Bringing Zinc to the People', in April 2005.

The Directorate General of Health Services, MOHFW, GoB and ICDDR,B: Centre for Health and Population Research jointly organized the conference. Around 260 participants took part in the two-day conference. Scientists and public health professionals from WHO Geneva, the International Rescue Committee, the Centre for International Health/University of Bergen as well as from ICDDR,B delivered presentations related to zinc and scaling up zinc as a



Bringing Zinc to people, 2nd International Conference 2005.

treatment for childhood diarrhoea. Participants from the Government of Bangladesh, Tanzania, Nepal and the state of Tripura, India attended the conference and shared their experiences. Pediatricians, representa-tives of

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3rd International Zinc Conference

Date: 24-25 April 2006

Venue: Sasakawa Auditorium

ICDDR,B: Centre for Health and Population Research
Dhaka, Bangladesh

We are pleased to announce the 3rd International Zinc Conference to be held on the 24-25 April 2006. Presentations will focus on research of the SUZY and other projects. Guest speakers, both national and international, will inform participants about their activities & 'zinc treatment' projects undertaken in their countries.

Interested persons, experts, and institutes are welcome to participate in the conference. However, registration is required and only a limited number of visitors can be accepted. You are also encouraged to send in abstracts by 15th February.

If you wish to attend this event please register by e-mail or fax, before 30th March, 2006 to:

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Overview and update of the SUZY project

After many years of research, ICDDR,B decided that the effectiveness and benefits of zinc, as a treatment for childhood diarrhoea, have been sufficiently proven and it is time to move to the next step: to make zinc available to the general population. This requires, in addition to further research, innovative solutions for the production of zinc tablets, strategies to promote the use of zinc among providers and caretakers and the establishment of a sophisticated distribution system. In addition, zinc treatment seems to have a positive impact on pneumonia, which is another of the most common causes of death of children living in developing nations. Therefore, zinc treatment holds tremendous potential as a global public health intervention.

The ultimate objective of the SUZY project of ICDDR,B is to implement a zinc treatment scheme for Bangladesh that will reach all children, but most importantly those in greatest need: the poor and undernourished. The SUZY team in collaboration with the Ministry of Health and Family Welfare (MOHFW) and developed two committees: 1. Steering committee: headed by the Health Secretary 2. Planning and implementation committee: headed by the Joint Secretary, Public Health and WHO. These two committees are formed to have effective effort on policy decision. The committee suggested involving pediatricians for their technical opinion and Directorate General of Health Services (DGHS) to augment the

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private and public medical colleges and hospitals, national and international research centres and local pharmaceutical companies also provided their valuable input during this conference.

The two-day conference was divided in plenary and workshop sessions each day. We have updated our web page with the presentations and workshop summaries that you can access at the following address: <http://www.icddrb.org/activity/index.jsp?activityObjectID=1398>.

The 4th edition of the Suzy News includes: our new partner ACME Pharmaceutical Laboratories and workshop summaries from the 2nd international conference. This newsletter also provides brief updates and overviews of the work carried out by the SUZY project so far.

Additional information can be obtained by visiting our homepage at: <http://www.icddrb.org/activity/SUZY>. On the web page we provide detailed information on research, zinc news, and about upcoming events.

I hope you will enjoy reading this issue of SUZY News.

Editor
SUZY News

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scaling up process.

According to the suggestions made by the Planning and implementation committee, SUZY team arranged several meetings with pediatricians (3 days workshop as well as meeting at BPA) and a meeting with all the civil surgeons and important members from DGHS to further enhance the process of policy development. According to the recommendation, Government will decide whether to include zinc and modify current diarrhoea management guidelines. We are happy to announce that on July 2005, Bangladesh Pediatric Association (BPA) has approved zinc.

At present only one company (Nutraset, Ltd, France) offers a dispersible tablet product of adequate quality to be considered acceptable for a countrywide scale up.

ICDDR,B signed a contract with Nutraset on July 20th to purchase the patent license for Bangladesh. This would include a technology transfer to any company ICDDR,B contracts out in Bangladesh. Regarding the technology transfer in spring of 2005 ICDDR,B had extensive discussions with ACME, Ltd. ACME had previously been visited by Nutraset and had been judged to have the required capacity and quality control standards to produce and package the dispersible zinc tablets. Upon conclusion of a MOU between ICDDR, B and ACME, the latter have agreed to enter into a partnership. ICDDR,B will have responsibility for preparing/funding the mass media campaign (through subcontract with a local advertising agency) while ACME will promote the product through their network of 90,000 licensed and unlicensed providers. Under this plan there will be no need to import blister packs from France.

ACME obtained registration of zinc tablet formulation in Bangladesh from the Drug Administration on 10 July, 2005. ACME undertakes the responsibility for local production, compression and packaging of dispersible zinc tablets for sustainable, sufficient production at an affordable price (less than 25 cents US per pack). The technology transfer will possibly occur in February 2006 and the estimated date of launching the rollout of zinc is in April/May 2006. We will purchase from the local manufacturer (ACME Pharmaceuticals) the production of a generic product for distribution into the public sector.

A number of research studies, in support of scaling up, are either completed or currently under operation. Some of the research topics are immunological and clinical responses of zinc, zinc and pneumonia, efficacy of short course zinc therapy, the implementation of zinc treatment in complex emergency settings, side effects and safety, acceptability and adherence, provider practices and social marketing strategies etc. For further detail on the research you can log onto <http://www.icddrb.org/activity/index.jsp?activityObjectID=555>.

The project has a solid partnership with

the Institute for Child & Mother Health and planning an additional safety study and an in-depth observation of zinc introduction into urban slums. The latter will include measurement of zinc levels, which has never been done in slum population. Scientists from Dhaka Shishu Hospital also showed interest in doing research with the SUZY project. A study on Clinical effectiveness and preventive impact of zinc treatment in Rural Kenya has been developed and under review. Results will be highly relevant to policy decisions in scaling up zinc treatment in sub-Saharan Africa. This is a joint effort between ICDDR,B, CDC and Kenyan Medical Research Institute.

The training team of the project is currently busy in the development of training manuals. These will assist in providing training to all those who will be involved in the distribution process. This is worthwhile to mention here that training curriculum has been developed and courses has been conducted for the service providers and supervisors of NSDP for testing distribution of zinc and integration of zinc treatment protocols into health services of NGO. They also have collected various recommendations from the leading pediatricians of the country, as input for their training programs.

Information of the project is disseminated among the local and international stakeholders to generate awareness, provide access to the strategies and obtain contribution to the SUZY project. Various presentations were made to inform the international audience about 'zinc treatment' initiative taken in Bangladesh, as pioneer country to scale up zinc as a treatment of diarrhoea. Presentations were made to Zinc Collaborative Group, Wash. DC in June; Canadian Conf. International Health in October, and ZINC symposium, Peru in November. So far two international conferences were held in the home country and the next one is planned for April 2006. Scientists and institutes from home and abroad shared their knowledge, experience & research findings with the participants. Several workshops, seminars, technical interest group meetings and advisory

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Introduction to ACME Laboratories Limited

The history of the ACME Laboratories Limited dates back to 1954 when a proprietorship firm conceived to manufacture ethical drugs. It started



The plant: ACME Laboratories Ltd.

with the modest introduction of a few oral liquid products. After its initial years of trials and tribulations the firm was converted into a private Limited Company in the year 1976. That same year work began on a large new premise in Dhamrai, Dhaka.

ACME continuously seeks to expand its production facilities, add employees, and increase its sales and marketing efforts. According to the latest statistics, out of the nearly 300 pharmaceutical companies in the country, ACME is one of the top two with an annual turnover of approximately US\$ 50 million.

ACME aims to produce high quality medicines at an affordable price. Total quality assurance is ACME's avowed people oriented commitment for ensuring the highest obtainable quality and total customer satisfaction. As a testimony of high quality and standards, ACME obtained ISO 9001: 2000 standard certifications in June 08, 1999 and continues to comply with it. To maintain Good Manufacturing Practice (GMP) approval, proper attention is paid to the latest concepts of cross contamination, air circulation and air handling, particle free finishes, equipment layout, process flow hygiene and safety.

Over the years ACME has achieved perpetual growth and success. With its more than 50 years of experience of producing and marketing pharmaceuticals, ACME covers a wide range of pharmaceutical formulations in different dosage forms. ACME's products cover virtually all therapeutic classes and forms. These include both human and veterinary products in a wide range of formats; tablets, capsules, syrups, injectables, creams, ointments, metered dose inhalers, dry powder inhalers and suppositories. At present, ACME's product line contains 272 products.

Research & Development is of prime significance for round-the-year operation of a pharmaceutical company and is indispensable for its steady growth. Since inception, ACME faced the challenges of introducing new and effective drugs to compete with other



competitors in the business. ACME recognizes the need for progressive approach in order to lead the ever-competitive trends in the health care market. ACME has also endeavored to strengthen its network of international marketing operations to export its products abroad. Currently ACME is exporting medicines to 16 countries in Southeast Asia, Central Asia and Africa and has gained an international reputation for high quality

at an acceptable price.

In partnership with the SUZY Project of ICDDR,B, ACME is undertaking the responsibility for the local production, compression, packaging and marketing of 20 mg zinc dispersible tablets for sustainable, sufficient production at an affordable price (less than 25 cents US per pack). These activities will commence after the technology transfer from Nutriset. ACME already has obtained the registration of zinc tablet formulation in Bangladesh from the Drug Administration on 10 July 2005 and registered the name of the tablet as 'Baby Zinc'. The estimated date of launching the rollout of zinc dispersible tablet is in April/May 2006. ACME will be providing zinc blister packs for the private and public sectors as required.

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committee meetings were held to disseminate information and to update about the project. A newsletter called 'SUZY News' is published twice a year to inform the general public about the project and to provide latest updates to them. We also established SUZY project website to inform about the detail of our project at the following web address. <http://www.icddr.org/activity/SUZY>. This site is regularly up-dated.

Till date the project has faced significant delays in the registration process of technology transfer of the zinc formulation, to be promoted, and that resulted into delay in the actual roll out of the scale up process of zinc in Bangladesh. All other activities undertaken by the project are proceeding on schedule with the exception of the proposed impact study in Kenya. This proposed study is currently undergoing scientific and ethical review at the Kenyan Medical Research Institute and the Centers for Disease Control (USA). However, all research, dissemination and training activities planned for this period were achieved.

Workshop summary of the International Conference

There were five workshops held as part of the conference 'Bringing Zinc to the people' on 17 and 18 April 2005. Scientists and Public Health professionals representing national and international NGOs organizations, UN agencies as well as the public and private health sector in Bangladesh have been discussing several issues in support of zinc.

will occur if zinc is administered only for 2 to 3 days, which is the common duration of ORS administration. The consensus of the group was not to combine zinc with ORS in a single preparation.

'How Zinc Works? – Immunological Aspects of Zinc' was a forum elaborating the role of zinc in immune function. Zinc's influence on the

It was agreed that to recommend the integration of zinc into pneumonia case management as a policy would need to await further effectiveness studies.

The 'Food Based Zinc Supplementation' workshop was dedicated to the essential question: how to overcome the zinc deficiency in Bangladesh. Several initiatives were presented of which all are contributing to the overall goal. Nevertheless, there was a consensus on the need to identify food vehicles, which can be fortified with zinc at a national level and to reach all age groups including pre-school children.



Workshop at the 2nd International Conference 2005

The 'Scaling Up Zinc Treatment for Young Children with Diarrhoea in the Public Sector' workshop with representatives from the DGHS, WHO, UNICEF and the SUZY project, was attended to identify best strategies to implement the scaling up zinc process in Bangladesh in the public sector. It was agreed that a policy decision on zinc, as a treatment for childhood diarrhoea, needs to be taken by the Government of Bangladesh. Based on that, it was felt that zinc should be added to the essential drug list, guidelines and training materials have to be adapted and the introduction of zinc as a treatment for childhood diarrhoea should be integrated in the IMCI program.

The 'Zinc-Oral Rehydration Solution' workshop took up the question if zinc added to ORS will result in better outcomes. The major concern was the compliance to zinc treatment. Zinc needs to be given for 10 to 14 days. So far there is no evidence that the preventive effects of zinc in diarrhoea

efficacy of varied vaccines, its benefit in HIV positive children, and current thinking about how zinc in short term regimes improves immune function were included in the discussions.

The workshop entitled 'The Impact of Zinc in the Treatment of Pneumonia' began by discussing studies on the effect of zinc as adjunct therapy for pneumonia and eventually addressed the question whether zinc can currently be recommended for the pneumonia management or not. It was stated that the studies lack sufficient exploration of the nutritional status and/or the severity of pneumonia, which might influence the impact of zinc in both prevention and treatment of pneumonia. Furthermore, the WHO case definition of pneumonia was found to be very sensitive, but specificity is low, thus making interpretation of previous research more difficult. A more specific pneumonia case definition applied in future studies would support the actual efficacy of zinc in the management of pneumonia.

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Page lay-out, desktop design and
pre-press processing:

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