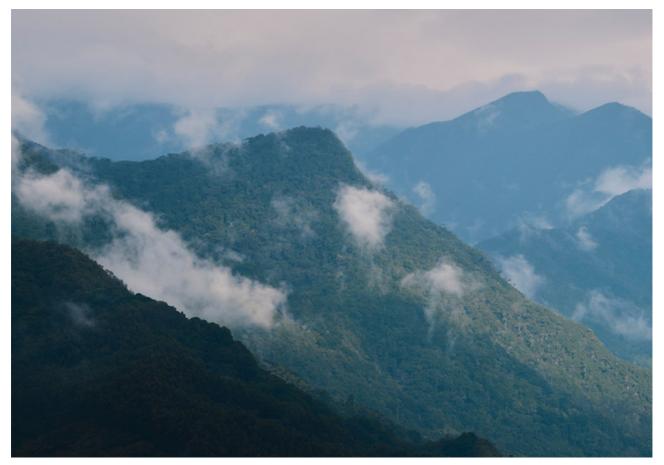
In Colombia, a researcher works against a devastating disease

Alexandra Cossio Duque, a clinical and community research coordinator from Colombia, has travelled the world to study how to overcome social and geographic barriers to healthcare access. Today, she is working in her home country to strengthen the capacity of health systems to treat leishmaniasis, a neglected tropical disease that is endemic to rural areas of Colombia.

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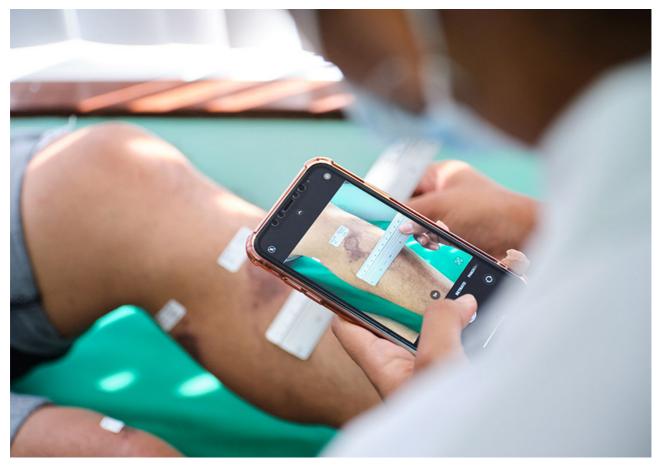


Alexandra Cossio Duque has dedicated her career to working on infectious diseases. In 2020, she completed a fellowship at the Novartis Institutes for BioMedical Research in Basel, Switzerland, to understand how pharmaceutical companies conduct research and development to develop new medicines for target patient populations. Today, Alexandra works for the International Center for Medical Research and Training (CIDEIM), an independent biomedical research center in Cali, Colombia. CIDEIM also supports capacity building to treat infectious diseases and find solutions for health issues that typically affect underserved populations in rural Colombia, where poverty, poor infrastructure, population displacement, and a distrust of modern medicine are all barriers to healthcare access.



The mountains of western Colombia are remote and beautiful. Yet hidden among these forested slopes are insects that transmit parasites responsible for diseases such as cutaneous leishmaniasis (CL) - the most common form of leishmaniasis with up to 1.3 million new cases worldwide every year. Although not fatal, CL causes skin lesions and scarring that can lead to social stigma and subsequent economic difficulties for patients.

The most common method of treating CL typically requires 21 consecutive days of intramuscular injections at a hospital or clinic. Patients require close monitoring and follow-up appointments over six months. The difficult nature of these treatments and their economic impact means people often choose not to seek treatment or do not complete follow-up. Alexandra's work focuses on developing new alternatives that can be easily and safely self-administered at home.



A healthcare worker measures the size of a patient's healed CL lesion.

From her fellowship at Novartis and subsequent work in rural Colombia, Alexandra learnt that developing medicines for patients who need them most requires understanding the realities of their daily lives. "Most of the patients in my studies must walk hours to get to a clinic to receive treatment...they can't afford to miss work or leave their children at home," she says.



Oscar Armando Wazorna with his wife Alba Rosa and son Junior stand on a hillside near their home in Santa Cecilia, Colombia. Junior recovered from CL, which left a permanent scar on his face. After his son's illness, Oscar began volunteering with CIDEIM's efforts to study, prevent, and treat CL in the region.

Alexandra says that partnerships between pharmaceutical companies, research centers, public health organizations and local communities are critical to develop new treatments and address the impact of neglected tropical diseases.



Alexandra works with local healthcare professionals like Eyder Cuesta (left), pictured outside a clinic in Santa Cecilia, Colombia.



A group of women from an indigenous community at a health workshop near Santa Cecilia, Colombia. Designed to establish relationships with otherwise isolated populations, the workshops provide information on infectious disease prevention, diagnosis and treatment.

See <u>here</u> for information on Novartis efforts to develop new medicines for neglected tropical diseases, including leishmaniasis.

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List of links present in page

- 1. https://prod1.novartis.com/stories/colombia-researcher-works-against-devastating-disease
- 2. https://prod1.novartis.com/tags/category/access-healthcare
- 3. https://www.reporting.novartis.com/2022/novartis-in-society/performance-in-2022/deliver-high-value-medicines.html#eliminate-neglected-diseases