GHIT Fund

Global Health Innovative Technology Fund

Annual Report 2025

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GHIT Fund

Global Health Innovative Technology Fund

CONTENTS

Message from CEO & Chair

Sustaining Momentum: Collaboration at the Heart of Global Health Innovation

Staying the Course and Delivering Impact

As we reach the midpoint of our GHIT 3.0 Strategic Plan, FY2025 has reinforced the core belief that backs all our initiatives: cross-sector collaboration remains the driving force behind breakthroughs for neglected infectious diseases. In a year marked by global uncertainty, both our mission as a Japan-based organization and our collective commitment have never been more significant. With more than 140 cumulative investments, a network of more than 200 partners and over 40 billion Japanese yen committed since inception, the GHIT Fund is steadily applying its resources to achieve concrete advances for the most vulnerable among us, and we are starting to see tangible results from our collective efforts.

The inclusion of arpraziquantel in the WHO Essential Medicines List stands as a defining moment in our institutional history. This pediatric formulation for schistosomiasis, born from the Pediatric Praziquantel Consortium supported by the GHIT Fund, has achieved the global recognition necessary to hasten its roll-out to the 50 million preschool-aged children who need it. Building on the successful administration of the treatment in Uganda, Côte d'Ivoire, and Kenya, an implementation research project was also rolled out in Tanzania in February 2026. We also made steady progress with approximately 10 late-stage developments, which include point-of-care technology for Chagas disease and a urine-based rapid diagnostic kit for tuberculosis. In addition to these long-term efforts, we demonstrated our

Photo credit: Kibuuka Makisa/Candid Local

Osamu Kunii
CEO & Executive Director

中谷 比呂樹 Hiroki Nakatani
Chair & Representative Director

agility in pandemic response by supporting the development of a rapid diagnostic test for Mpox. By responding to this public health emergency of international concern (PHEIC) with such urgency, we continue to prove our capacity to swiftly tackle emerging global health crises.
This milestone validates our approach and positions the GHIT Fund as an accelerator capable of pushing transformative treatments through the pipeline.

The GHIT Fund on the Global Stage

Our participation in international forums throughout FY2025 has deepened our connections across the global health ecosystem. At TICAD 9, the GHIT Fund co-hosted strategic sessions on vaccine manufacturing capacity, diagnostics innovation, and malaria elimination. With more than 500 participants, including government officials, international organizations, and representatives from African countries, we shared knowledge across borders and explored new collaboration opportunities, aiming to reaffirm the importance of partnerships from innovation to impact and the need to integrate African perspectives early in R&D.
The American Society of Tropical Medicine and Hygiene's Annual Meeting offered additional opportunities to share knowledge with researchers advancing the scientific frontier and signaled growing praise for our investment strategy in product development. At the World Health Assembly, we discussed global health priorities with policymakers and partners, gaining positive feedback on our role in strengthening Japan's leadership in global health R&D.

These efforts further clarify our mission to serve as a bridge. Our FY2025 achievements belong to our community of diverse stakeholders, whose dedication drives our progress. In earnest response to your trust and expectations, we will redouble our efforts to ensure that our results are reliably returned to society.
Together, we will continue advancing innovation that drives lasting change in global health. Thank you for your partnership and trust in our shared mission.

TICAD 9 Report

The GHIT Fund participated in the Ninth Tokyo International Conference on African Development (TICAD 9), held from August 20 to 22, 2025 in Yokohama, Japan, by hosting, cohosting, and speaking at nine thematic events.
Throughout the three-day conference, the GHIT Fund actively engaged with more than 500 participants, facilitating knowledge exchange and collaboration across borders. The GHIT Fund advanced international dialogue and forged new partnerships to promote access to innovative healthcare solutions for underserved populations.

The Future of Health Technology Innovation and Equity

Speaker: Hayato Urabe, GHIT Fund Investment for Impact, MC: Yukie Michelle Lloyd

The GHIT Fund, the United Nations Development Programme (UNDP), and the Access and Delivery Partnership (ADP) co-hosted a strategic seminar, sponsored by the Ministry of Foreign Affairs of Japan (MOFA) and the Ministry of Health, Labour and Welfare of Japan (MHLW). The gathering brought together a diverse array of stakeholders including members of the Japanese Diet, UN leadership, pharmaceutical industry executives, African regulatory officials, university researchers, and diplomatic representatives, notably Keizo Takemi, former Minister of Health, Labour and Welfare, Japan, and H.E. Ryo Nakamura from MOFA.
The event centered on strengthening innovation pathways while ensuring equitable access to advance universal health coverage, pandemic preparedness, and global health equity. Key themes emerged around the critical need for strategic partnerships in building resilient health systems and delivering drugs, vaccines, and diagnostics for underserved populations.

A central panel on “Advancing Equitable Health Technology R&D in the Digital Age” explored synergies between R&D and access mechanisms. Discussions emphasized aligning African research capabilities, regulatory harmonization, digital innovation, and partnership structures to deliver health technologies both swiftly and equitably. Speakers stressed that access considerations must be integrated from the earliest stages of innovation rather than treated as an afterthought. Uniting Efforts for Innovation Access and Delivery, a partnership of the Government of Japan, the UNDP-led ADP, and the GHIT Fund, was highlighted as a model for this integrated approach. Participants called for inclusive funding partnerships, clearer business models to bridge research gaps, and process innovations enabling parallel product testing.

Co-Hosted and Featured Thematic Events

Further details about the event are available on our website.

Co-creating the future of healthcare and the economy

Speaker: Osamu Kunii, CEO, GHIT Fund

- Showcased Japan's role in Africa's health sector through public-private partnerships.
- Presented business case studies on Japanese companies' contributions to solving healthcare challenges in Africa, focusing on medical supply chains, nutrition, and health systems.
- Japanese and African government representatives, international organizations, business groups, and companies confirmed new cooperation and closer collaboration.

Co-creating with Africa to end NTDs

Speaker: Osamu Kunii, CEO, GHIT Fund

- Co-organized by Nagasaki University, JPMA, DNDi Japan, the NTDs Youth Organization, SDGs Promise Japan, the GHIT Fund, and JAGntd
- Emphasized bridging innovation gaps between research and delivery, DNDi's development of new treatments, and the importance of sustainable, locally driven healthcare systems.
- Addressed funding challenges and tool development for Neglected Tropical Diseases (NTDs) while highlighting commitment to the Nagasaki Outcomes Statement.

Africa-Japan Common Vision on Health: co-creating health security and sustainable growth

Moderator: Osamu Kunii, CEO, GHIT Fund

- Launched the "Africa-Japan Common Vision on Health" report.
- Advocated for equitable partnerships beyond traditional donor-recipient models.
- Participants emphasized sustainable health financing as the most critical challenge and the urgency of human resource development needs in vaccine and pharmaceutical manufacturing.

AMED initiatives in Africa

Speaker: Osamu Kunii, CEO, GHIT Fund

- Three major AMED health programs in Africa were showcased: the Clinical Research Program for Developing Countries, the Research Program on Emerging Infectious Diseases, and the Science and Technology Research Partnership for Sustainable Development.
- Tackled the issue of overcoming the risky gap between product development and industrialization and the importance of aligning projects with WHO strategies and engaging industry partners from the outset.

Challenges in the area of diagnostics – from the humanitarian frontline

Speaker: Hayato Urabe, Investment for Impact, GHIT Fund

- Highlighted critical gaps in Africa's diagnostic ecosystem, the need for diagnostics adaptable to the African context and designed for real-world settings, capacity building initiatives, and quality assurance mechanisms through WHO prequalification programs.
- Emphasized the stance "Access should not be an afterthought," underscoring the importance of co-creation through multi-level partnerships, community, and mission alignment.

Unlocking the potential of vaccine R&D and manufacturing capabilities in Africa

Speaker: Hayato Urabe, Investment for Impact, GHIT Fund

- IAVI and the Japan Institute for Health Security co-hosted an event on the importance of strengthening Africa's vaccine research and manufacturing capacity. At the event, the Africa CDC and the Institut Pasteur de Dakar presented the current situation in Africa.
- Highlighted the importance of partnership through multiple GHIT funded-supported vaccine projects with collaborators in Africa, such as Groupe de Recehrche Action in Sante (GRAS) for placental malaria and blood-stage malaria vaccine development.

The way forward for malaria elimination: joint effort through drug development

Speaker: Hiroki Nakatani, Chair, GHIT Fund,
MC: Yukie Michelle Lloyd

- Addressed malaria's impact beyond health, its effects on productivity, education, and family economics.
- Japanese contributions were highlighted, particularly the collaboration between Nagasaki University and Shionogi in the development of a single-dose, long-acting injectable treatment supported by the GHIT Fund.
- Effective malaria elimination requires sustained multilateral cooperation combining research innovation with contextual understanding.

Advancing universal health coverage

Speaker: Osamu Kunii, CEO, GHIT Fund

- Affirmed the need for strong partnerships, sustained investment, and country ownership to end NTDs and back health systems across Africa.
- Partnerships with Japan and other global actors are seen as critical to building resilient systems and achieving disease elimination.
- The elimination of NTDs and the achievement of UHC—urgent and achievable goals—premised on sustained and strengthened partnerships among Africa, Japan, and the wider global community.

Diseases “Neglected” by the World

Infectious diseases like malaria, tuberculosis (TB), and neglected tropical diseases (NTDs) affect over 1.7 billion people globally, but research and development for treatment and prevention remain insufficient due to lack of funding and trained personnel for effective control. There are an estimated 280 million cases of malaria alone each year, and TB causes more than 1.2 million deaths annually. These diseases disproportionately impact the world’s poorest populations, resulting in illness, disability, and stigma, which decrease productivity and perpetuate cycles of poverty.

Malaria

Cases in 2024 **282** million **Deaths** in 2024 **610,000**

Malaria parasites, spread by female Anopheles mosquitoes, destroy red blood cells causing fever, chills, and severe anemia. The disease can rapidly overwhelm vital organs, becoming deadly within days. It claims hundreds of thousands of lives yearly despite being entirely preventable. Of the five parasite species affecting humans, *Plasmodium falciparum* and *Plasmodium vivax* are the most dangerous.

Achievements & challenges

47 countries and 1 territory have received official malaria-free certification from the WHO, but progress is uneven: 11 African countries account for roughly two-thirds of global cases and deaths. Climate change, humanitarian emergencies, and rising resistance to both drugs and insecticides continue to drive case increases in endemic regions.

21 neglected tropical diseases (NTDs)

Buruli ulcer

Bacteria in soil or water enter the body through cuts or bites, causing chronic skin ulcers. Without early treatment, bones may be destroyed, causing disfigurement.

Chagas disease (American trypanosomiasis)

Parasitic infection spread primarily through bites of kissing bugs. Early symptoms are mild, like fever or muscle pain. Years later, it can cause heart or digestive failure and sudden death.

Cysticercosis (Taeniasis)

Tapeworm infection from contaminated food or water is often initially asymptomatic but can later cause vision loss, seizures, paralysis, and death.

Dengue and chikungunya

Spread by Aedes mosquitoes, rather than malaria mosquitoes, dengue causes sudden high fever, severe headache, joint pain, and sometimes rash. Severe cases can lead to bleeding, shock, and can be fatal if untreated.

Dracunculiasis (Guinea-worm disease)

Parasitic infection from contaminated water where worms penetrate intestines, migrate under skin, and emerge through painful blisters, typically on legs.

Echinococcosis

Parasitic infection where tapeworm larvae from contaminated food or canine contact form potentially fatal organ cysts, particularly in liver and lungs.

Foodborne trematode infections

Parasitic worm infections from eating undercooked or raw fish/shellfish or contaminated vegetables, causing fever, pain, and potential liver or lung damage.

Human African trypanosomiasis (African sleeping sickness)

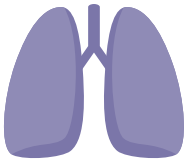
Parasitic disease transmitted by tsetse flies, causing fever and swollen lymph nodes then severe neurological symptoms; it is fatal if untreated.

Leishmaniasis

A parasitic infection transmitted by sandfly bites that can affect the skin, mucous membranes, or internal organs. Visceral leishmaniasis, in particular, may be fatal if left untreated.

Leprosy (Hansen’s disease)

A bacterial infection with low infection that damages skin and nerves. Advanced cases cause stigmatizing external deformities.



Tuberculosis (TB)

Cases in 2024 **10.7** million **Deaths** in 2024 **1.23** million

TB, the world's deadliest infectious disease, spreads through airborne droplets. While infection often remains dormant, it can activate when immunity weakens, particularly in people with HIV/AIDS. The bacteria typically attack the lungs but can also affect other organs. In some countries, the number of TB cases is increasing due to population aging and migration, and many cases remain undiagnosed or untreated. With rising cases and drug resistance, often caused by inappropriate treatment, TB remains a dangerous and difficult disease to treat.

Achievements & challenges

The overall number of TB deaths is declining, and for the first time since 2020, the number of new cases has also decreased. However, drug resistance remains a serious concern.

Neglected tropical diseases (NTDs)

Cases in 2023 **1.5** billion

NTDs comprise 21 conditions caused by various pathogens that primarily affect impoverished communities in tropical regions. Their complex transmission through climate, living conditions, and animal hosts, makes control difficult. Many NTDs cause visible disfigurement and profound stigma, leading to social isolation beyond physical suffering. Despite causing devastating health, social, and economic consequences, NTDs receive little research funding and attention, and many lack effective diagnostics or treatment and remain consistently overlooked.

Achievements & challenges

54 countries have successfully eliminated at least one NTD, but NTDs remain endemic in over 100 countries, and recent cuts to global health funding threaten to stall or reverse these gains.

Reference: World Health Organization（WHO） https://www.who.int/

illustration: © Shota Koyano

Lymphatic filariasis (Elephantiasis)

A mosquito-borne parasitic infection where filarial worms block lymph nodes, causing severe limb/genital swelling and thickened, elephant-like skin.

Mycetoma

A bacterial or fungal infection entering through foot wounds, causing painless swelling at first, leading to eventual deformity and disability if severe, and possible death.

Noma

Severe infection that initially manifests through gum ulcers and progresses to destroy facial tissue and bone and can be fatal.

Onchocerciasis (River blindness)

Spread by blackfly bites, this parasitic infection causes severe itching, skin changes, and can lead to blindness, for which it is the world's second leading cause.

Rabies

Rabies, transmitted through bites from infected animals, is almost always fatal once symptoms—pain, fever, and loss of appetite—appear.

Scabies

A skin condition caused by tiny mites that burrow under the skin, spreading through close contact with infected people. The mites cause intense itching and rash, especially at night.

Schistosomiasis (Bilharziasis)

Spread by freshwater snails, this parasite causes abdominal pain, blood in urine or stool, and can lead to bladder cancer or liver damage if untreated.

Snakebite envenoming

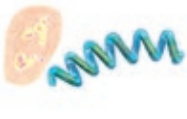
Toxins in the bite of a venomous snake that can cause deadly paralysis affecting breathing, dangerous bleeding, kidney damage, and tissue damage.

Soil-transmitted helminthiasis (Intestinal parasitic worms)

Parasitic worm infections from contaminated soil and food, which can cause intestinal obstruction, cough, skin itching, growth impairment, blood in stool, and anemia.

Trachoma

Bacterial eye infection spread by personal contact and by flies and insects in unsanitary conditions. Without treatment, repeated infections inflame the eyelids and eye surface, eventually scaring the cornea and causing blindness.



Yaws

Bacterial infections spread through skin-to-skin contact through scrapes or cuts, which can cause chronic lumps or ulcers in the skin, bone, or cartilage, sometimes resulting in disfigurement or physical disability.

Learn about Neglected Tropical Diseases (NTDs)

Leishmaniasis

What is leishmaniasis?

Leishmaniasis is a group of diseases caused by parasites transmitted through sandfly bites. There are three main forms. The most common form affects the skin, causing ulcers that often leave permanent scars, often on the face and arms. These scars can cause stigma, especially for women and girls. Another form affects the mouth, nose, and throat, leading to tissues and causing severe disfigurement if not treated.
The most serious form affects internal organs such as the spleen, liver, and bone marrow. It causes fever, weight loss, and severe anemia. Without treatment, this form is almost always fatal. The disease mainly affects the world's poorest populations living in areas with limited healthcare access. Leishmaniasis is endemic in nearly 100 countries and an estimated 12 million people are currently infected globally.

Leishmaniasis is a group of diseases caused by parasites and spread through sandfly bites.
Photo credit: James Gathany, CDC Public Health Image Library

Disease vectors and disease burden

Skin lesions caused by leishmaniasis
Photo credit: Dr. Abhay Satoskar, Ohio State University

Leishmaniasis spreads through bites from infected sandflies. When a sandfly bites someone with leishmaniasis, it picks up parasites, which develop inside the insect and spread to the next person it bites. Once in the body, the parasites invade cells and multiply. The course of infection depends on the parasite type and the person's immune system, and many infected people never develop symptoms.
Sandflies breed in warm, humid environments, and people living in rural areas near these habitats face the highest risk. No vaccine is available. The serious form affecting internal organs requires IV or oral medication, which can cause side effects such as nausea and kidney problems. Treatment does not always completely eliminate the parasite, relapse can occur, and resistance to certain medications has been reported.

Investment in clinical development of a leishmaniasis vaccine

Since 2015, the GHIT Fund has been investing in the development of a live-attenuated leishmaniasis vaccine collaboratively advanced by Ohio State University and Nagasaki University, with the goal of delivering a safe and affordable vaccine for people in endemic countries. In FY2025, GHIT decided to invest JPY 680 million in the clinical development of this candidate to evaluate its safety and immunogenicity in healthy adults in Brazil and Kenya, where leishmaniasis is endemic. In July 2025, the Investigational New Drug (IND) application submitted to the U.S. Food and Drug Administration (FDA) to initiate a Phase I clinical trial was approved, representing a significant milestone toward controlling the disease. As no vaccine for human use has previously been available, this project is expected to accelerate product development and support early implementation.

Skin lesions caused by leishmaniasis
Photo credit: Dr. Abhay Satoskar, Ohio State University

Special Thanks to: Dr. Abhay Satoskar, Ohio State University and Dr. Shinjiro Hamano, Nagasaki University
Sources: WHO Global leishmaniasis surveillance updates 2024

Human African Trypanosomiasis
(African Sleeping Sickness)

A tsetse fly sucking blood from a person's arm

What is human African trypanosomiasis (sleeping sickness)?

Human African trypanosomiasis is a life-threatening parasitic disease spread through tsetse fly bites. The flies, which feed on blood, are found exclusively in sub-Saharan Africa. Most cases develop slowly but a few progresses rapidly within weeks. First, parasites multiply in the blood, causing fever, headaches, swollen lymph nodes, and joint pain. Parasites then invade the brain, triggering sleep disorders (giving the disease its name "sleeping sickness"), confusion, and personality changes. Without treatment, patients progress to coma and death. Early diagnosis and treatment can cure the disease and prevent brain damage.

Prevention of infection from tsetse fly bites

Sleeping sickness is spread through the bite of infected tsetse flies, who inject a parasite into the skin. While most tsetse flies do not carry the parasite, each bite increases the risk of infection. Sleeping sickness is not transmitted through routine contact with an infected person or through sexual transmission. The disease is endemic in 36 sub-Saharan African countries and mainly affects remote rural communities who depend on agriculture, fishing, animal husbandry, or hunting. Although 70 million people remain at risk, reported cases have dropped from 28,000 in 1999 to about 550 a year. Wearing long sleeves and pants and using insect repellent help reduce the risk, but a vaccine is not yet available.

A sleeping sickness patient and a doctor (Republic of Malawi)
© Thoko Chikondi-DNDi

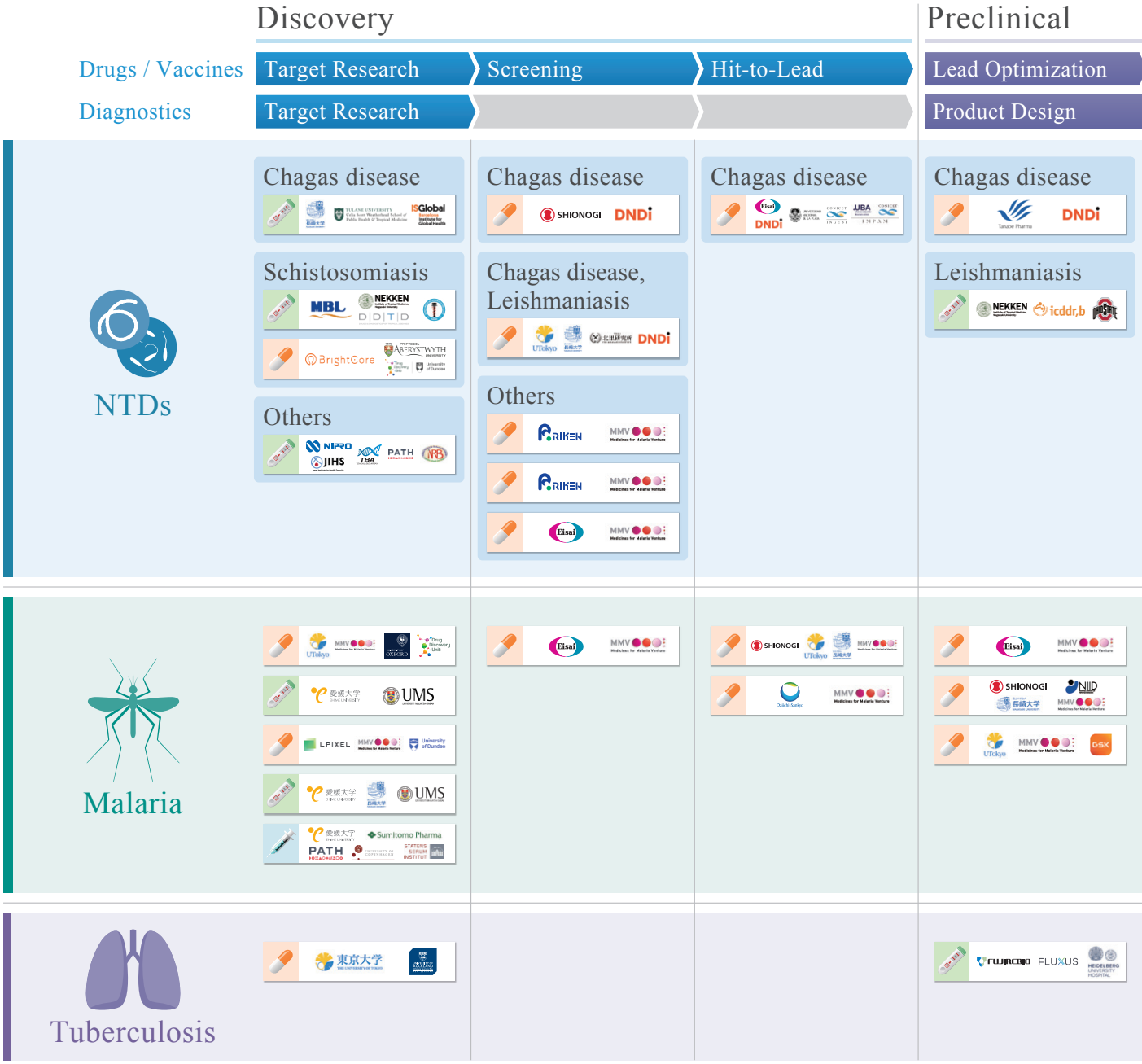
The Hideyo Noguchi Africa Prize

The Hideyo Noguchi Africa Prize, a Japan-led international award, honors those advancing public health in Africa. In its fifth edition, chaired by Osamu Kunii, CEO of the GHIT Fund, DNDi received the Prize in the Medical Services category for its work on NTD treatments—most notably the development and delivery of the first all-oral treatment for African sleeping sickness through long-term collaboration with partners in Africa and globally.

Source: Prime Minister's Office of Japan website
https://japan.kantei.go.jp/103/actions/202508/22noguchishou.html

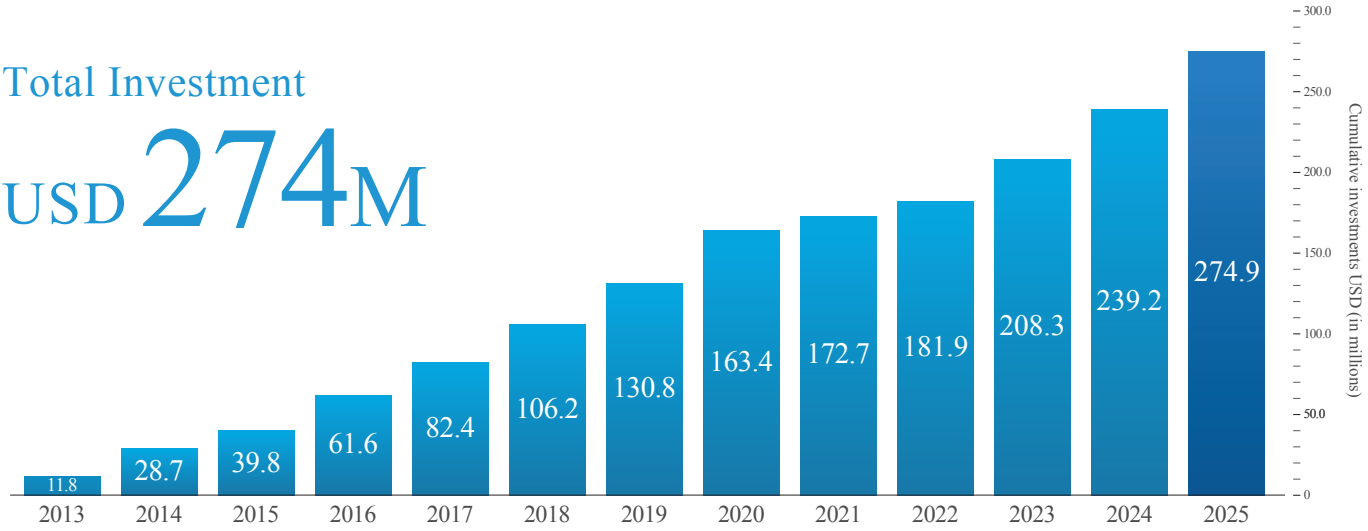
Special Thanks to DNDi
Source : WHO, DNDi, Papagni et al. (2023)

Portfolio



Total Investment

USD 274M



US dollar amounts represent conversions from Japanese yen at JPY159.9 = USD1, the exchange rate as of March 31, 2026.

Please visit the GHIT Fund's website to find out more about each project and partner's innovations.
https://www.ghitfund.org/investment/portfolio/en

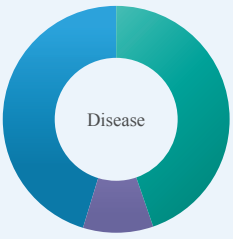
Drugs Vaccines Diagnostics

Clinical

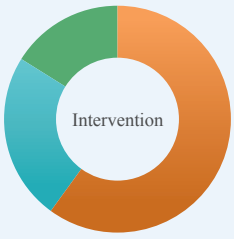
Preclinical	Phase I	Phase II	Phase III	Registration
	Product Development	Product Validation	Product Validation	Registration
Lymphatic filariasis, Onchocerciasis	Dengue		Mycetoma	Mycetoma
Trachoma	Schistosomiasis			Chagas disease
Soil-transmitted helminthiasis	Leishmaniasis			

As of March 31, 2026

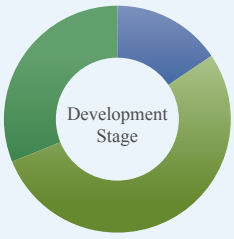
Investment Overview FY2013-FY2025



- Malaria 44.8%
- Tuberculosis 10.1%
- NTDs 45.1%



- Drugs 60.2%
- Vaccines 23.8%
- Diagnostics 16.0%



- Discovery 15.8%
- Preclinical 53.3%
- Clinical 30.9%

146
Total invested partnerships

213
Total product development partners
68 Japanese partners
145 non-Japanese partners

FY2025

20
Invested partnerships

USD 35M
Total investments

Clinical Candidates—Regulatory Submission

The development programs in which the GHIT Fund has invested, from clinical trials through regulatory submission, are being conducted worldwide. However, some programs are still in the preparation phase and are scheduled to commence in the near future. We are making steady progress in delivering products to patients in need.

SJ733

Malaria / Drugs

Development Stage: Phase IIb Clinical Trial
Country: Peru

Eisai
University of Kentucky College of Pharmacy

ALAQ-FDC

Malaria / Drugs

Development Stage: Phase III Clinical Trial, Registration
Country: Rwanda, Uganda, Angola, Nigeria, Thailand

Marubeni
MMV Medicines for Malaria Venture
FOSUN PHARMA Innovation for Good Health
MORU Tropical Health Network

LmCen$^{-/-}$ vaccine

Leishmaniasis / Vaccines

Development Stage: Phase I Clinical Trial
Country: Brazil, Kenya

長崎大学 NAGASAKI UNIVERSITY
The Ohio State University

Fosravuconazole

Mycetoma / Drugs

Development Stage: Phase III Clinical Trial, Under Regulatory Submission Preparation
Country: Sudan, Senegal, Kenya, India

Eisai
DNDi

SchistoAbRDT-*Sm*

Schistosomiasis / Diagnostics

Development Stage: Product Development
Country: Kenya

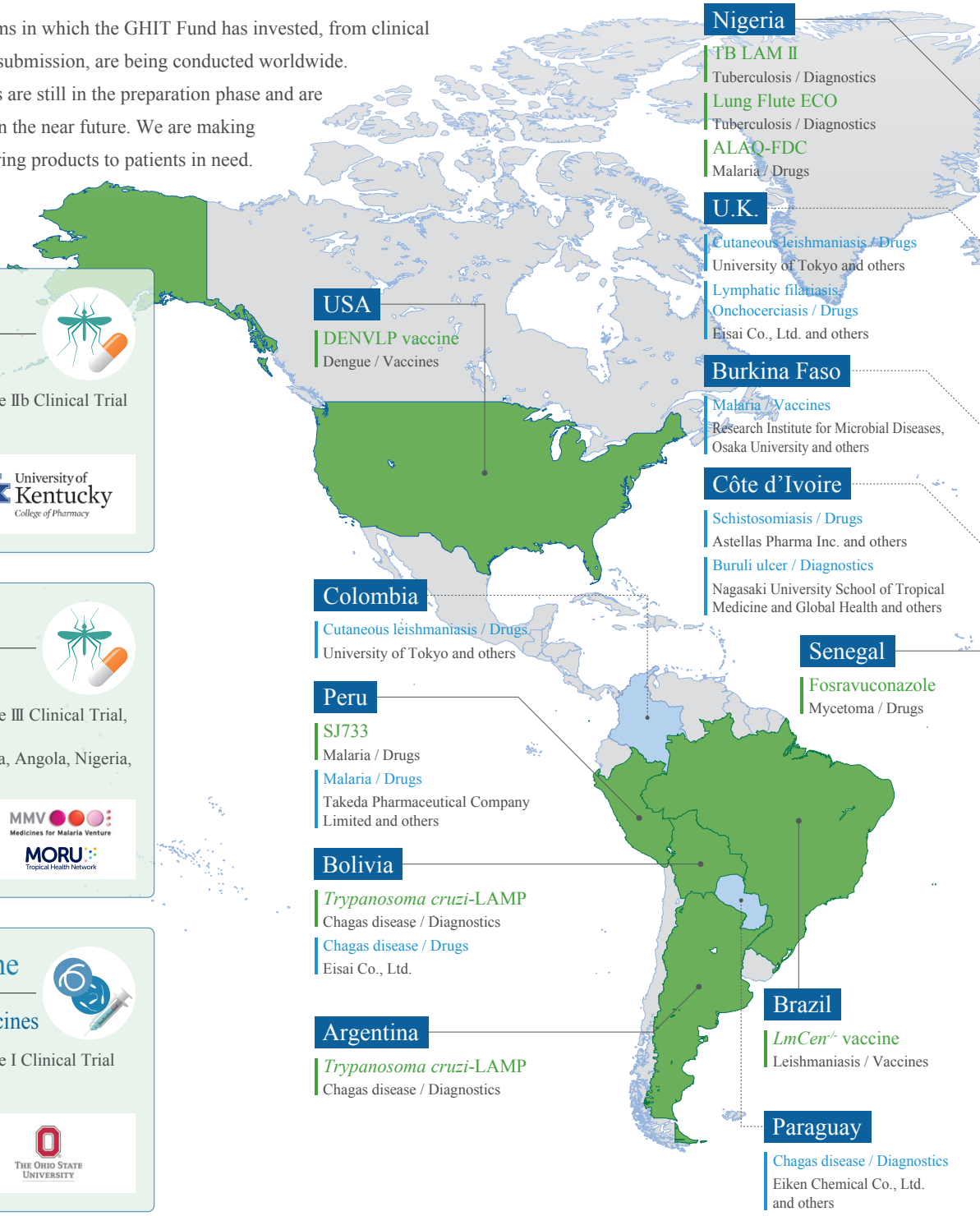
MBL
NEKKEN Institute of Tropical Medicine, Nagasaki University
BIG EYE DIAGNOSTICS
DDTD
University of Ghana
NOGUCHI

DENVLP vaccine

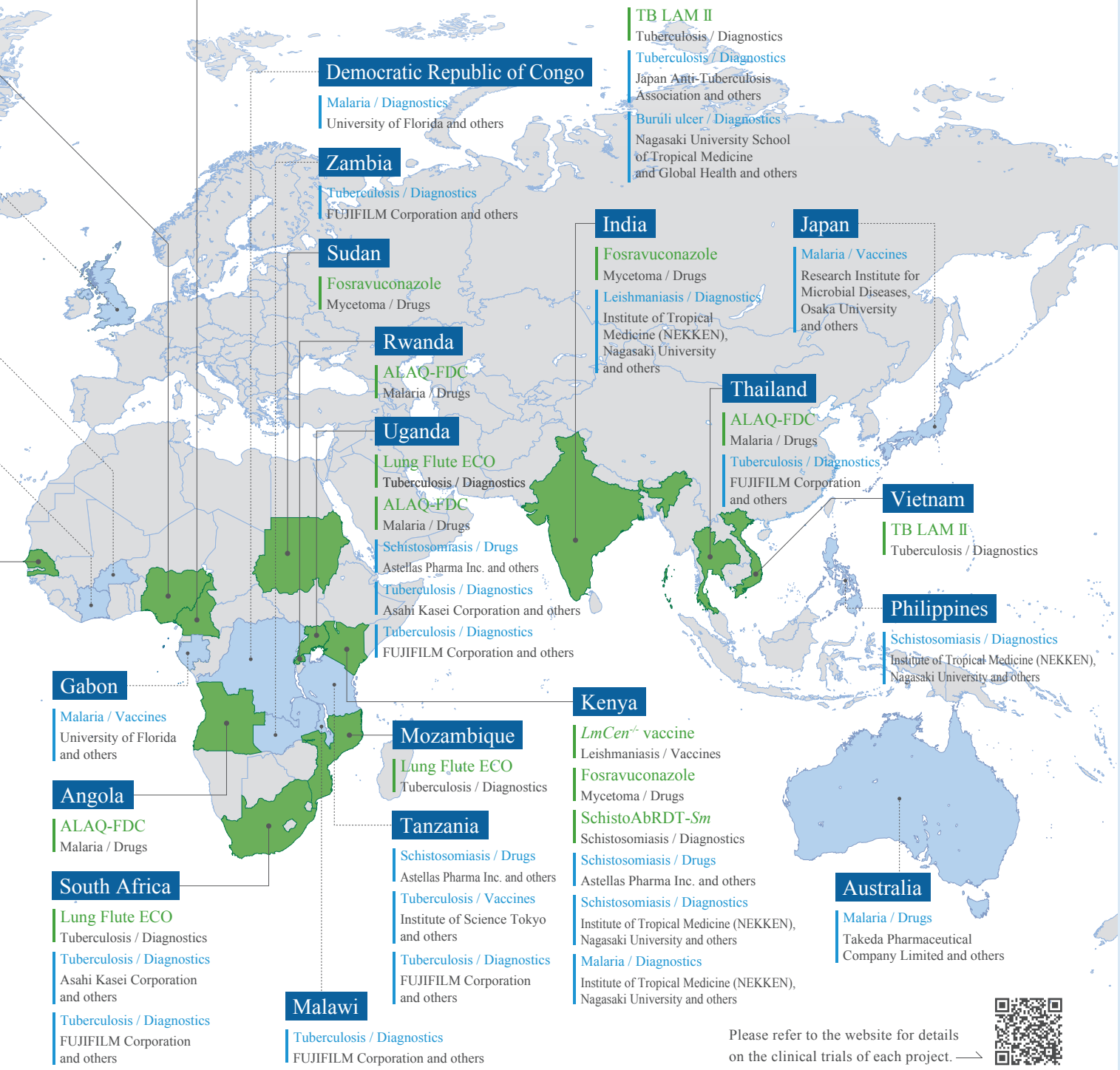
Dengue / Vaccines

Development Stage: Phase I Clinical Trial
Country: USA

長崎大学 NAGASAKI UNIVERSITY
VLP Therapeutics



= Ongoing programs = Completed programs



Cameroon
TB LAM Ⅱ
Tuberculosis / Diagnostics

Tuberculosis / Diagnostics
Japan Anti-Tuberculosis Association and others

Buruli ulcer / Diagnostics
Nagasaki University School of Tropical Medicine and Global Health and others

Democratic Republic of Congo
Malaria / Diagnostics
University of Florida and others

Zambia
Tuberculosis / Diagnostics
FUJIFILM Corporation and others

Sudan
Fosravuconazole
Mycetoma / Drugs

India
Fosravuconazole
Mycetoma / Drugs

Leishmaniasis / Diagnostics
Institute of Tropical Medicine (NEKKEN), Nagasaki University and others

Japan
Malaria / Vaccines
Research Institute for Microbial Diseases, Osaka University and others

Rwanda
ALAQ-FDC
Malaria / Drugs

Thailand
ALAQ-FDC
Malaria / Drugs

Tuberculosis / Diagnostics
FUJIFILM Corporation and others

Uganda
Lung Flute ECO
Tuberculosis / Diagnostics

ALAQ-FDC
Malaria / Drugs

Schistosomiasis / Drugs
Astellas Pharma Inc. and others

Tuberculosis / Diagnostics
Asahi Kasei Corporation and others

Tuberculosis / Diagnostics
FUJIFILM Corporation and others

Vietnam
TB LAM Ⅱ
Tuberculosis / Diagnostics

Philippines
Schistosomiasis / Diagnostics
Institute of Tropical Medicine (NEKKEN), Nagasaki University and others

Gabon
Malaria / Vaccines
University of Florida and others

Kenya
LmCen$^{-/-}$ vaccine
Leishmaniasis / Vaccines

Fosravuconazole
Mycetoma / Drugs

SchistoAbRDT-*Sm*
Schistosomiasis / Diagnostics

Schistosomiasis / Drugs
Astellas Pharma Inc. and others

Schistosomiasis / Diagnostics
Institute of Tropical Medicine (NEKKEN), Nagasaki University and others

Malaria / Diagnostics
Institute of Tropical Medicine (NEKKEN), Nagasaki University and others

Mozambique
Lung Flute ECO
Tuberculosis / Diagnostics

Angola
ALAQ-FDC
Malaria / Drugs

Tanzania
Schistosomiasis / Drugs
Astellas Pharma Inc. and others

Tuberculosis / Vaccines
Institute of Science Tokyo and others

Tuberculosis / Diagnostics
FUJIFILM Corporation and others

South Africa
Lung Flute ECO
Tuberculosis / Diagnostics

Tuberculosis / Diagnostics
Asahi Kasei Corporation and others

Tuberculosis / Diagnostics
FUJIFILM Corporation and others

Australia
Malaria / Drugs
Takeda Pharmaceutical Company Limited and others

Malawi
Tuberculosis / Diagnostics
FUJIFILM Corporation and others

Please refer to the website for details on the clinical trials of each project.

Trypanosoma cruzi-LAMP
Chagas disease / Diagnostics

Development Stage: Registration
Country: Argentina, Bolivia

Lung Flute ECO
Tuberculosis / Diagnostics

Development Stage: Product Validation
Country: South Africa, Uganda, Mozambique

TB LAM Ⅱ
Tuberculosis / Diagnostics

Development Stage: Product Validation
Country: Cameroon, Nigeria, Vietnam

*The information on investment programs presented on this page is based on GHIT Fund's past annual reports and public information, regardless of the progress or status of the clinical trials.

Special Feature

Schistosomiasis / Drugs

Arpraziquantel

Disease: Schistosomiasis
Intervention: Pediatric Drugs
Development Stage: Registration, Access
Country: Uganda, Côte d'Ivoire, Kenya, Tanzania and other endemic countries

Added to WHO's List of Essential Medicines for children

From innovation to global standard

In September 2025, a new pediatric treatment for schistosomiasis in preschool-aged children, arpraziquantel, was added to the World Health Organization's List of Essential Medicines (EML). This inclusion supports the regulatory pathway in African countries as development partners prepare for the widespread introduction of the medication.

This milestone caps a remarkable year for the treatment developed by the Pediatric Praziquantel Consortium with support from the GHIT Fund since 2013. Schistosomiasis, a devastating parasitic disease, affects an estimated 50 million preschool-aged children primarily in sub-Saharan Africa. Prior to the development of the new treatment, millions of children under six years of age had no child-appropriate treatment option, despite being at high risk of infection and long-term health consequences. The new pediatric treatment, a 150 mg dispersible tablet, is child-friendly and stable in tropical climates, making it ideal for endemic regions.

In 2025, the treatment was administered to preschool-aged children in Uganda, Côte d'Ivoire, Kenya, and Tanzania through implementation science studies. Arpraziquantel also received regulatory approval in Tanzania in the same year, showcasing the power of collaboration among the Government of Tanzania, the UNDP-led Access and Delivery Partnership, and the Pediatric Praziquantel Consortium.

Photo credit: UNDP/Kumi Media

Prix Galien Bridges Award nomination

The Pediatric Praziquantel Consortium was nominated for the 2025 Prix Galien Bridges Award in the Public Sector Innovation category. The Prix Galien Awards, often regarded as the "Nobel Prize for biopharmaceutical research," recognize outstanding achievements that improve human health through scientific innovation.

Photo credit: The Galien Foundation

Chagas disease / Diagnostics

Trypanosoma cruzi-LAMP

Disease: Chagas Disease
Intervention: Diagnostics
Development Stage: Registration
Country: Argentina, Bolivia

Advancing timely diagnosis for congenital Chagas disease

Chagas disease is a parasitic infection affecting over 7 million people in Latin America, where mother-to-child transmission remains a major challenge. Early diagnosis and prompt treatment are essential. Current diagnosis algorithm takes months and often fails to timely detect infections, leaving most children undiagnosed until adulthood when treatment is less effective and worse tolerated. Available treatments -benznidazole and nifurtimox- cure nearly 100% of infants when administered early, making timely diagnosis critical.

Building on promising results from earlier research supported by the GHIT Fund that demonstrated *Trypanosoma cruzi*-LAMP could anticipate more than 30% extra positive cases compared to microscopy, this project aims to license the molecular diagnostic tool in Argentina and Bolivia. LAMP (Loop-mediated Isothermal Amplification) is a near point-of-care technology that matches standard PCR in sensitivity and specificity while being simpler to perform and substantially less expensive. ISGlobal coordinates the partnership alongside industrial partners EIKEN and WIENER, with support from INGEBI and SANIT for regulatory submissions and clinical validation.

Tuberculosis / Diagnostics

FUJIFILM SILVAMP TB LAM Ⅱ

Disease: Tuberculosis
Intervention: Diagnostics
Development Stage: Product Validation
Country: Cameroon, Nigeria, Vietnam

Closing the TB diagnostic gap: revolutionary test nears real-world deployment

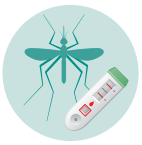
Tuberculosis (TB) affects approximately10 million people and kills 1.2 million annually. Over 3 million people go undiagnosed in resource-limited settings where current sputum-based diagnostics often miss patients who cannot produce samples, such as people living with HIV and children. Without diagnosis, these patients remain untreated, deteriorate, and continue transmitting disease. Early diagnosis is critical.

Building on prior continuous investments from the GHIT Fund, this project evaluates FUJIFILM SILVAMP TB LAM Ⅱ, a rapid diagnostic TB test that detects urinary LAM antigens, used together with a urine concentration device. This innovative diagnostic approach eliminates the need for sputum collection and has the potential to significantly improve diagnostic accuracy for a broad range of people, including those living with or without HIV, severely ill individuals, and children.

UNOPS's Stop TB Partnership coordinates the effort alongside FUJIFILM Corporation, Liverpool School of Tropical Medicine, and institutions in Cameroon, Nigeria, and Vietnam to assess clinical performance and implementation feasibility.

Invested Partnerships in FY2025

T2024-153



Malaria / Diagnostics

TRP

ZOO-RDT: validating a novel biomarker and associated reagents for diagnosis of acute zoonotic malaria in Southeast Asia

Ehime University, Universiti Malaysia Sabah

Prof. Richard Culleton
Ehime University

The zoonotic malaria parasite *Plasmodium knowlesi* is the leading cause of malaria in parts of Southeast Asia, and its prevalence is increasing. Currently, no specific point-of-care (PoC) tests exist, causing potentially fatal delays in treatment. Given this situation, we aim to develop a novel *P. knowlesi* PoC diagnostic test, which will aid patient management and help to alleviate the suffering caused by zoonotic malaria.

T2025-157

Malaria / Vaccines

TRP

Development of a novel *P. falciparum* multistage vaccine candidate based on *Pf*CSP and PfRipr5

PATH, Ehime University, Sumitomo Pharma Co., Ltd., Statens Serum Institut, University of Copenhagen

Dr. Tara Tagmyer
PATH

Investment in next-generation *Plasmodium falciparum* malaria vaccines is critical due to current malaria vaccines' limitations. This project will advance a vaccine candidate that targets anti-infection and blood-stage malaria. The generated preclinical data will help develop a multistage particle-based candidate. Streamlining the manufacturing and formulation processes will boost efficacy and durability and ease production costs and cold chain requirements.

T2024-268

Malaria / Drugs

TRP

Machine learning-based deconvolution of antimalarial drug mechanisms of action through cell painting of compound-treated *Plasmodium falciparum*-infected erythrocytes

Medicines for Malaria Venture (MMV), LPIXEL Inc., University of Dundee

Dr. Benoît Laleu
MMV

Malaria requires the development and approval of new therapies with modes of action that are not subject to existing resistance mechanisms. This project will leverage advances in cellular imaging and machine learning-led pattern recognition and develop a combined high-throughput growth inhibition assay and cell painting platform for antimalarial drug discovery. It is anticipated that this will reduce time and costs in the context of hit generation.

T2024-276

Malaria / Diagnostics

TRP

Development of ultrasensitive and robust malaria rapid diagnostic tests using de novo designed antigen binders

Ehime University, Institute of Tropical Medicine (NEKKEN) Nagasaki University, Universiti Malaysia Sabah

Prof. Richard Culleton
Ehime University

Current malaria lateral flow assays (LFAs) have limited sensitivity and specificity. This project proposes to develop novel protein-based affinity reagents that enable the creation of rapid diagnostic tests (RDTs) that diagnose infection with *Plasmodium falciparum*, non-falciparum malaria parasites, and the emerging pathogen *Plasmodium knowlesi* with sensitivities that considerably exceed existing alternatives.

T2025-151

Schistosomiasis / Drugs

TRP

AIH2L: artificial intelligence guided strategies to identify new anti-schistosomal hit-to-lead candidates

Aberystwyth University, BrightCore, Inc., University of Dundee

Prof. Karl F Hoffmann
Aberystwyth University

There is an urgent need to identify alternatives to praziquantel, the current treatment for schistosomiasis. AI offers transformative potential by addressing cost, time, and resource constraints. This project aims to deliver multi-lifecycle stage active chemical series ready to enter the hit-to-lead phase of anti-schistosomal drug discovery. New approaches to identify urgently needed, next-generation, anti-schistosomal candidates will be developed.

T2024-253

Tuberculosis / Drugs

TRP

Harnessing genome mining for novel tuberculosis antibiotics

The University of Auckland, The University of Tokyo

Dr. Ghader Bashiri
The University of Auckland

The rise of multidrug-resistant (MDR) and extensively drug-resistant (XDR) strains of *Mycobacterium tuberculosis*, which causes TB, requires the urgent development of anti-TB agents. This project aims to find antimicrobial agents that target metabolic pathways critical to the viability and pathogenesis of *M. tuberculosis,* by identifying secondary metabolites. We will translate the findings into clinical applications, offering new options for patients.

H2025-102

Malaria / Drugs

HTLP

Hit-to-lead development of a series of Daiichi Sankyo inhibitors of the novel multi-lifecycle stage target PfPFN (Profilin)

Medicines for Malaria Venture (MMV),
DAIICHI SANKYO COMPANY, LIMITED

Dr. Benoît Laleu
MMV

Among the hit compounds identified from the Daiichi Sankyo library, the frontrunner demonstrated potent antimalarial activity and a novel mechanism of action. This project aims to develop a compound series that meets the GHIT Fund's HTLP and MMV's early lead criteria, and will carry out the cycle of compound design, synthesis, and testing.

H2025-101

Chagas Disease / Drugs

HTLP

Hit-to-lead optimization of phosphodiesterase inhibitors for the treatment of Chagas disease

Eisai Co., Ltd., Drugs for Neglected Diseases initiative (DNDi),
Universidad Nacional de La Plata, Fundación Instituto de Investigaciones en Ingeniería Genética y Biología Molecular,
Instituto de Investigaciones en Microbiología y Parasitología Médica

Dr. Kristen Skillman
Eisai Co., Ltd.

New treatments for Chagas disease are urgently needed. Current medications lack effectiveness against chronic infection and have adverse effects. This project aims to develop a novel mechanism-of-action drug candidate for Chagas disease. New hits that act on the novel target will be optimized according to DNDi's lead criteria, with new leads added to the project pipeline. This will boost the chances of completing the development of a new drug usable in a short-course, oral treatment.

G2022-210

Malaria / Drugs

PDP

Prolyl tRNA synthetase inhibitors as new antimalarials

Medicines for Malaria Venture (MMV),
GlaxoSmithKline Investigacion y Desarrollo, S.L.,
The University of Tokyo

Dr. Stephen Brand
MMV

There are concerns that malaria is becoming increasingly resistant to existing treatments. Plasmodium cytoplasmic Prolyl-tRNA synthetase (PfProRS) is an enzyme essential for protein synthesis and is a clinically validated target for malaria; inhibiting it is expected to suppress the parasite's growth. This project aims to identify a late lead for the development of preclinical candidate compounds that meet the MMV's criteria for treatment or prophylaxis.

G2024-201

Malaria / Vaccines

PDP

Biomanufacture and preclinical development of the blood-stage malaria vaccine candidate SE36/cVLP

European Vaccine Initiative e.V.,
Research Institute for Microbial Diseases, Osaka University,
University of Copenhagen, AdaptVac, University of Tübingen,
Ajinomoto Co., Inc., Nobelpharma Co., Ltd.

Dr. Sophie Houard
European Vaccine Initiative e.V.

Progress is expected with the deployment of two anti-sporozoite malaria vaccines for African children. Still, blood-stage malaria must be controlled for durable efficacy. This project seeks to develop a blood-stage vaccine based on the N-terminal domain of *Plasmodium falciparum* serine repeat antigen-5 (SE36). Utilizing the cVLP nanoparticle presentation, SE36/cVLP aims to improve immunogenicity, lower the cost of goods, and ease supply to target populations.

G2025-112

Malaria / Vaccines

PDP

Development of a highly efficacious multistage mRNA vaccine formulation to prevent *P. vivax* infection and transmission

Mahidol University, Ehime University,
Chulalongkorn University

Prof. Jetsumon Sattabongkot Prachumsri
Mahidol University

Malaria caused by *Plasmodium vivax* poses a major challenge for global malaria eradication as the parasite can stay dormant in the liver before reactivation. Currently, there is no vaccine for this disease. The project aims to develop a multistage mRNA vaccine able to reduce both infection and transmission of *P. vivax*. It could dramatically reduce the financial and healthcare burdens on endemic areas, prevent long-term health issues, and improve quality of life.

G2025-102

Malaria / Drugs

PDP

Preclinical development of a target-based series with potential for treatment, SERCAP and chemoprevention of malaria.

Medicines for Malaria Venture (MMV),
Tanabe Pharma Corporation, University of Georgia

Mr. Hiroki Kano
Tanabe Pharma Corporation

MMV172, which meets MMV's late lead criteria, exhibits a promising profile as a next-generation antimalarial drug. The aims of this project are, first, to complete the IND-enabling preclinical development studies on MMV172 targeting chemoprevention; and second, to deliver one or more late lead(s), either as an oral radical cure (SERCAP) for *P.vivax* malaria or a long-acting injectable for chemoprevention.

Invested Partnerships in FY2025

G2024-101

Leishmaniasis / Vaccines

PDP

Evaluation of the safety and immunogenicity of the cGMP *LmCen*$^{-/-}$ vaccine in Phase I clinical trials

The Ohio State University, Nagasaki University

Prof. Abhay R Satoskar
The Ohio State University

Over 12 million people suffer from leishmaniasis, with about 2 million new cases per year, making it a neglected tropical disease (NTD). Yet there are currently no prophylactic or therapeutic vaccines for human use. This project will test the safety and immunogenicity of a novel live attenuated *LmCen*$^{-/-}$ vaccine developed using CRISPR-Cas9 genome-editing technology in healthy human volunteers to further advance a prophylactic vaccine for eliminating leishmaniasis globally.

G2025-101

Soil-transmitted helminth / Diagnostics

PDP

Strongyloides stercoralis Rapid Test Plus (SsRT+): A new rapid diagnostic test with improved ease of use to support WHO strongyloidiasis control programs

Drugs & Diagnostics for Tropical Diseases (DDTD), Medical & Biological Laboratories Co., Ltd., IRCCS Sacro Cuore Don Calabria Hospital, QIMR Berghofer Medical Research Institute, Fundacion Mundo Sano, Big Eye Diagnostics, Inc.

Dr. Marco A. Biamonte
DDTD

Strongyloides stercoralis is a soil-transmitted helminth affecting an estimated 300-600 million people globally. This project aims to deliver an easy-to-use, low-cost point-of-care test, termed S. stercoralis Rapid Test Plus (SsRT+), which will meet all key criteria of the WHO target product profile (TPP) for *S. stercoralis* diagnostics and will support reliable decisions on whether, and where, strongyloidiasis control programs should be implemented.

G2025-121

Chagas / Diagnostics

PDP

Trypanosoma cruzi-LAMP: a molecular point-of-care test for the control of congenital Chagas disease - from prototype to product

Barcelona Institute for Global Health (ISGlobal), Eiken Chemical Co., Ltd., Consejo Nacional de Investigaciones Cientificas y Técnicas - Instituto de Investigaciones en Ingeniería Genética y Biología Molecular "Dr. Héctor N. Torres" (CONICET-Ingebi), Fundación Salud Naturaleza Integral (SANIT), Wiener lab (WIENER)

Dr. Julio Alonso Padilla
ISGlobal

Mother-to-child transmission of *Trypanosoma cruzi* infection remains a public health challenge. Currently available anti-parasitic drugs benznidazole and nifurtimox are highly efficacious and well tolerated by newborns, hence early diagnosis is crucial to prompt access to treatment. We aim to register *T. cruzi*-LAMP as a product to timely detect congenital Chagas disease. Adopting the LAMP tool will increase access to diagnosis, in line with WHO's 2030 road map for NTDs, and PAHO's Elimination of Mother-to-Child Transmission initiative.

G2025-211

Mycetoma / Drugs

PDP

Global evaluation and registration of fosravuconazole for eumycetoma: translating research into patient impact

Drugs for Neglected Diseases initiative (DNDi), Eisai Co., Ltd.

Dr. Borna Nyaoke-Anoke
DNDi

Fosravuconazole is expected to serve as a new treatment for eumycetoma, given its favorable efficacy and safety profile, good tolerability, and ease of use for patients.
This project will conduct clinical trials in diverse endemic regions—Senegal, Kenya, and India—to confirm efficacy, safety, and pharmacokinetics, together with Phase II trial results from Sudan, to support registration, including through the WHO Prequalification pathway.

G2025-125

Mpox / Diagnostics

PDP

Development and performance evaluation of Iso-PAS technology for Mpox detection (Iso-PAS Mpox)

NIPRO CORPORATION, TBA Co., Ltd., Japan Institute for Health Security, PATH, Institut National de Recherche Biomédicale

Mr. Hiroshi Yoshida
NIPRO Corporation

Currently available Mpox testing is available at central laboratories in major cities, requiring rural facilities to transport specimens to urban laboratories. This project aims to develop a test kit that can distinguish between MPXV Clade I and Clade II monkeypox using the Iso-PAS method, an inexpensive and simple genetic testing method, and finally register this test kit on the WHO Emergency Use Listing (EUL) following the accumulation of proven data.

Development Stage: Target Research Platform (TRP) > Screening Platform > Hit-to-Lead Platform (HTLP) > Product Development Platform (PDP)

G2023-212

Tuberculosis / Diagnostics

PDP

Multi-site field trial of the FUJIFILM SILVAMP TB LAM II including the diagnostic accuracy of a urine concentration device

Stop TB Partnership, Fujifilm Corporation, Liverpool School of Tropical Medicine, Center for Health Promotion and Research, Friends for International TB Relief, Zankli Research Centre, Bingham University Nigeria

Dr. Jacob Creswell
Stop TB Partnership

Tuberculosis (TB) testing relies on sputum, which can be hard to collect, and true non-sputum point-of-care tests (POCT) are scarce. Fujifilm has created a rapid diagnostic TB test that detects low concentrations of LAM-antigen in urine and is meant as a non-sputum POCT. This project will verify the performance of Fujifilm's redesigned SILVAMP TB LAM II assay and a urine concentration device expected to increase sensitivity, to obtain a WHO policy recommendation.

G2024-105

Tuberculosis / Diagnostics

PDP

Facilitating local universal TB testing with Lung Flute ECO (FLUTTE): Validation in children, health care workers, and PLHIV with robust comparators

Research Institute of Tuberculosis, Japan Anti-Tuberculosis Association, Acoustic Innovation Institute for Tropical Medicine, The Aurum Institute, Stellenbosch University, Instituto Nacional de Saúde, World Alliance for Lung and Intensive Care Medicine in Uganda

Prof. Satoshi Mitarai
The Research Institute of Tuberculosis, Japan Anti-Tuberculosis Association

Many at-risk people cannot produce sputum for tuberculosis (TB) testing. The Lung Flute ECO (LFE) is a safe, low-cost product that helps with sputum production via a short breathing exercise. Electricity, medication, and clinical infrastructure are unnecessary, enabling sustainable testing. This project aims to generate robust scientific evidence for WHO endorsement of the LFE by 2027 and tackles a critical bottleneck in TB diagnosis.

S2025-111

Malaria / Drugs

Screening

Targeting malaria through inhibition of serine hydroxymethyltransferase (SHMT)

Eisai Co., Ltd., Medicines for Malaria Venture (MMV)

T2024-155

NTDs / Diagnostics

Strategic Innovation and Market Assessment Award

Mapping of Japanese in-vitro diagnostic/medical devices developers/manufacturers and global landscape of diagnostic tests for a selection of neglected tropical diseases

FUJI KEIZAI CO., LTD., Foundation for Innovative New Diagnostics (FIND)

*This project was initiated in FY2024, and the final report was published on the GHIT website following the completion of the project in FY2025.

Report on Study Sites

The GHIT Fund is an international organization that supports R&D for malaria, tuberculosis and Neglected Tropical Diseases (NTDs) promoting partnerships with research institutions, academia, and medical and pharmaceutical companies in low- and middle-income countries (LMICs). This is one of the core strategic objectives under “GHIT3.0.” The GHIT Fund’s staff visited a malaria and dengue-endemic area to observe the current state of local malaria and dengue research and the activities of nearby health facilities.

Report I Ghana

The importance of supporting R&D tailored to local needs

In July 2025, with the goal of building even stronger partnerships with LMICs, the GHIT Fund’s CEO Osamu Kunii and Tatsuhiko Sato visited Ghana. Together with researchers from the Ehime University Proteo-Science Center Division of Malaria Research, they visited the Noguchi Memorial Institute for Medical Research at the University of Ghana, research hubs in Cape Coast, local schools and hospitals, the Embassy of Japan in Ghana, and the Ajinomoto Foundation’s maternal and child nutrition improvement projects to observe the current state of malaria research.

We toured medical institutions in rural areas where diagnostic data were still being handwritten, and children’s weights were measured using hanging scales, highlighting the prevalent use of analog methods. We also observed challenges faced by smaller cities, such as a shortage of

The staff also visited a local school where fieldwork using rapid diagnostic tests was underway and observed blood sample collection from children. Since about 80% of malaria deaths occur in children under five with weakened immune systems, preventing malaria at home and in the community is crucial. Although various malaria control measures are being implemented, the WHO estimates that 6.74 million people were infected and about 11,500 died from malaria in Ghana in 2024.* Asymptomatic malaria has recently become a public health concern because of its potential for onward transmission, but the development of ultra-sensitive diagnostic tests is expected to significantly improve

Ghana is the country where Dr. Hideyo Noguchi, a renowned Japanese medical researcher, devoted himself to yellow fever research and passed away in 1928 before completing his mission. The Government of Japan established the Noguchi Memorial Institute for Medical Research at the University of Ghana as a symbolic research facility for medical support in Africa. Over the past 40 years, this institute has worked closely with Japanese research organizations and has played an active role in controlling infectious diseases locally.

In addition, during this visit, the GHIT Fund, together with the Ajinomoto Foundation, observed activities at facilities and clinics operated by the Ghana Health Service (GHS) in Accra. Malnutrition is a major public health concern, and alongside infectious diseases, remains a leading risk factor in Ghana. It leads to stunted growth and impaired brain development in fetuses and young children, and causes anemia, raising the risk of complications such as severe malaria. Pregnant women and children under five are uniquely vulnerable to the combined effects of malnutrition and malaria, hence the urgent need for an integrated approach tackling nutrition, anemia, and malaria jointly. We now regard nutritional support as equally critical as medical care to eliminate malaria in Ghana. The GHIT Fund will continue to support research and development tailored to local needs and conditions through strong partnerships with research institutions across African countries.

*Source: WHO


Children’s weight is measured using hanging scales


Fieldwork with rapid diagnostic tests at a local school


Nutrition guidance for mothers and children

Report II Thailand

Collaboration with Mahidol University to control *P. vivax* malaria

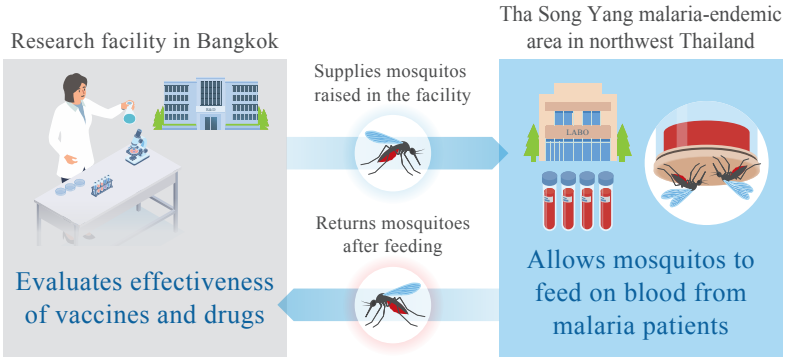
Satoshi Horiuchi and Hiroki Shibata of the GHIT Fund visited Mahidol University's Faculty of Tropical Medicine, a GHIT Fund partner. They toured the campus to learn about key research on tropical diseases, particularly malaria and dengue. They also traveled to Tha Song Yang District in Tak Province near the Myanmar border, where they observed medical practice and

Vivax malaria is an infectious tropical disease prevalent in Thailand and other Southeast Asian countries. Because the parasite can lie dormant in the liver and later reactivate, the disease is difficult to control and eliminate. Long-term strategies therefore emphasize the development of vaccines that can prevent infection and transmission by targeting multiple stages of the parasite life cycle. The GHIT Fund is supporting a vivax malaria vaccine development project conducted jointly by Mahidol

Mahidol University's Faculty of Tropical Medicine is internationally recognized for its research on tropical diseases such as malaria, dengue, and schistosomiasis. Its research facility in Bangkok includes insectaries where mosquitoes are reared under controlled conditions for experimental studies. After transporting these mosquitoes to malaria-endemic areas and feeding them blood samples from local malaria patients, researchers can return the infected mosquitoes to Bangkok to analyze parasite

Tha Song Yang, located roughly 600 km northwest of Bangkok near the Thai-Myanmar border, is one of Thailand's major malaria-endemic areas. The surrounding region is home to local communities and several refugee camps populated primarily by members of the Karen ethnic group who have migrated from Myanmar. Tha Song Yang serves as a key research site for the Mahidol Vivax Research Unit (MVRU), which conducts multifaceted malaria research. At this site, researchers allow lab-reared mosquitoes to feed on blood from malaria patients and subsequently analyze the infection process and transmission mechanisms. Epidemiology research on malaria has been conducted since 2011 which has generated plenty of new knowledge

The team visited Karen communities, Tha Song Yang Hospital, and clinics along the Myanmar border. They observed awareness-raising activities, including the distribution of mosquito nets and the use of posters promoting infection prevention measures. Several volunteers operate "malaria posts" (basic health clinics), which have become firmly established and trusted within the community. This visit reaffirmed the importance of supporting local efforts to control infectious diseases and reduce health disparities.



Facilities of Mahidol University's Faculty of Tropical Medicine


MVRU researchers collect mosquito larvae


Taking blood samples from members of the community

The GHIT Fund will continue to work with local partners to support research and development aimed at controlling infectious diseases such as malaria and dengue, while also contributing to the reduction of healthcare disparities and the improvement of public health and hygiene in LMICs.

Highlights in FY2025

September 2025

Expanding individual donation opportunities to accelerate global health impact

In 2025, the GHIT Fund was pleased to share that we have made supporting global health innovation more accessible than ever. We have strengthened our donation platform by establishing comprehensive systems to accept individual contributions through Minato ward's *Furusato Nozei* (Hometown Tax System), as well as legacy and planned giving options and direct personal donations from supporters. To facilitate these giving opportunities, we have launched a website specifically designed for personal donors. Whether you are establishing a planned legacy contribution or making a direct individual gift, our new platform makes it simple for individuals to support our mission of developing life-saving treatments for neglected infectious diseases, tuberculosis, and malaria. We invite you to join our community of personal supporters as we strive to transform global health outcomes.

June and November 2025

The 11th and 12th Proposal Writing Seminars were hosted

The GHIT Fund hosted online Proposal Writing Seminars (Zoom webinars). The seminars were designed to enhance understanding of the application documents (proposals) required for the GHIT Fund's investment platforms. In the seminars, we covered key considerations for writing effective proposals, with a focus on the Target Research Platform and Product Development Platform.
In 2025, two seminars were held in June and November and provided guidance on key points for preparing proposals, attracting a large number of participants from the private sector, universities, research institutions, NGOs/NPOs, and others interested in the GHIT Fund's investment (grant) programs and considering applying.

*Audio is available in English only, and the content reflects information at the time of the event.

August 2025

Forbes JAPAN dialogue series with Otsuka Pharmaceutical: Innovating together for global health

Forbes JAPAN BRANDVOICE

Osamu Kunii, CEO of the GHIT Fund, and leaders of globally active companies engage in a dialogue about solutions to global health issues and the role Japan should play in this area. This dialogue was featured as a collaborative article in Forbes JAPAN BrandVoice in 2025.
Masanori Kawasaki, Senior Vice President & Operating Officer, Associate General Manager (Research) at Otsuka Pharmaceutical Co., Ltd, has devoted much of his career to the development of innovative treatment for tuberculosis (TB), most notably leading the efforts that resulted in *delamanid*—a groundbreaking treatment launched by Otsuka in 2014—as the first new TB drug in nearly 40 years.
With TB continuing to affect an estimated 10.8 million people and claim approximately 1.25 million lives worldwide each year, Mr. Kawasaki offers his perspectives on the driving forces behind drug discovery, Japan's contributions to global TB research, and the vital role of partnerships in addressing urgent public health challenges.
*Affiliation and position are as of the time of the interview.

Photographs by Tomohisa Kinoshita

Otsuka

*The interview articles are available in Japanese on Forbes JAPAN's special website.

October-November 2025

Strengthening global partnerships through participation in JACLaS EXPO, BioJapan, and ASTMH

In 2025, the GHIT Fund participated in major exhibitions and international conferences to strengthen partnerships and expand its global network across industry, academia, and the public sector.
In October, the GHIT Fund participated as an exhibitor in JACLaS EXPO 2025 in Yokohama, Japan's largest clinical testing exhibition which displays the latest clinical laboratory devices, reagents, and systems, and in BioJapan 2025 in Yokohama, the world's longest-running biotechnology exhibition. Furthermore, the GHIT Fund participated in the American Society of Tropical Medicine and Hygiene (ASTMH) conference held in Toronto, Canada in November to deepen engagement with global researchers and product development partners.
Through panel displays, brochures, and direct dialogue, the GHIT Fund showcased its partnerships with domestic and global companies, universities, and international organizations, as well as its investment (grant) programs in research and development projects on malaria, tuberculosis, and neglected tropical diseases. These activities further reinforced GHIT's global partnerships network and contributed to future collaboration opportunities.

October 2025 and February 2026

SDGs Talk series –featuring Ryota Fujimaki and Kaori Futenma–

The Global Health Discussion with Osamu Kunii: “SDGs Talk” is a video series that aims to raise awareness about diseases that have long been overlooked, including neglected tropical diseases (NTDs). In FY2025, we welcomed musician Ryota Fujimaki and Okinawa-born singer-songwriter Kaori Futenma, who helped promote understanding of the SDGs principle “No One Left Behind” through the universal language of music.

The fifth installment featured Ryota Fujimaki, who reflected on the history of eliminating schistosomiasis in his home prefecture of Yamanashi. Together with Dr. Kunii, he discussed the enduring global burden of this disease and the importance of building a society where no one is left behind. Inspired by their dialogues, Fujimaki performed a special acoustic version of his song *“Hakanaku Moroi Mono,”* expressing the preciousness of life transcending time, borders, and generations.

The sixth installment featured Kaori Futenma, who spoke about postwar malaria and lymphatic filariasis in Okinawa. Closing the dialogue, she performed *“Mamoritai Mono,”* a heartfelt song that reflects the desire to protect the precious lives of loved ones.

This video series seeks to raise awareness of neglected diseases, including NTDs, through collaborations with celebrities and the dissemination of information via social media platforms. It serves as an effort to enhance public understanding of global health challenges and to advance the GHIT Fund’s mission of realizing a society where no one is left behind.

August 2025

Supported the “Japan Global Health Innovation Dialogue” hosted by the Gates Foundation

Gates Foundation

The GHIT Fund supported the “Japan Global Health Innovation Dialogue: Harnessing Japanese R&D for Transformative Change,” hosted by the Gates Foundation in Tokyo on August 19, 2025.

The event brought together a large delegation across the Gates Foundation and Japanese innovators, reflecting strong interest in Japan’s R&D capabilities and partnership potential. The GHIT Fund’s CEO, Osamu Kunii, presented on the role of the GHIT Fund. The dialogue featured three thematic breakout sessions on malaria, diagnostics, and vaccines, enabling in-depth discussion on aligning Japanese technologies with global needs and exploring future collaboration opportunities.

In the evening, we also participated in “Innovation in Action: Harnessing Japan’s R&D Potential for Global Health.” The event brought together over 300 participants from government, academia, research institutions, and industry. Together, the two events strengthened mutual understanding, encouraged collaboration, and set the stage for continued engagement and concrete collaboration between us going forward.

September 2025

Deepening understanding of PDP support through engagement with research institutions in Thailand

Eriko Koyama, Cecilia Chui and Hayato Urabe from Investment for Impact visited Bangkok, Thailand, with the PDP Funders Group (PFG), to engage with research institutions in Thailand. The PFG is an informal network of public and private organizations that support Product Development Partnerships (PDPs). It works to encourage donor alignment and information sharing among funders. This time, the group visited facilities in Bangkok, including Chula Vaccine Research Center and the Mahidol Oxford Tropical Medicine Research Unit, to better understand R&D activities, the R&D ecosystem, and local needs and challenges. The field visit allowed GHIT to see the realities of PDPs and connect with their partners on the ground. It was a great opportunity to confirm the need for sustainable support in global health R&D to ensure solutions reach patients and communities across ASEAN and globally.

January 2026

Supporting the Third NTDs Contest to engage the next generation

The Third Neglected Tropical Disease (NTD) Contest, supported by the GHIT Fund, is an annual initiative launched in 2023 that targets junior high to graduate students living in Japan to deepen their understanding of NTDs and inspire concrete action. As a member of the World NTD Day Japan Preparatory Committee, the GHIT Fund has supported the contest for three consecutive years, presenting the GHIT Partnership & Innovation Prize and participating in judging and selection. In 2026, 37 teams comprising 75 students applied, and during the social media voting period, contest videos were viewed more than 8,000 times, providing many people with an opportunity to learn about NTDs. On World NTD Day, January 30, 2026, an online webinar was held featuring the award ceremony and a panel discussion on how AI and technology can contribute to NTD control, highlighting expectations for next-generation tools and the growing engagement and motivation of young people.

GHIT 3.0 Steadily Advancing

Strategic Plan FY2023-FY2027

R&D: Investments in Product Development

R&D milestone	Lead Identification	Preclinical
# targeted by March 2028	5 Hit-to-lead programs funded	12 Preclinical candidates identified
# achieved by March 2026	3	10
Objective	Further leverage innovations from Japanese biopharma and academia	

1 Galvanize Innovation

In addition to our traditional focus on malaria, tuberculosis, and neglected tropical diseases (NTDs), we have explored our contribution in areas including emerging and re-emerging infectious diseases. Cumulatively, since the start of GHIT 3.0, we have invested in a total of six projects in this area, including the development of an mpox diagnostic prototype in FY2025. Furthermore, we are strengthening our disease response framework by joining GloPID-R (Global Research Collaboration for Infectious Disease Preparedness), an international network of funders investing in research on emerging and re-emerging infectious diseases.

2 Maximize Impact

The GHIT Fund has signed an MOU with Thailand Science Research and Innovation (TSRI) to strengthen their partnership through co-funding opportunities for R&D targeting malaria, tuberculosis, NTDs, and pandemic potential diseases. Through this partnership, additional funding opportunities will be made available to Thai universities, research institutes, and companies, as well as global research partners conducting project activities in Thailand.

FY2025 was the midpoint of GHIT Fund's third phase and a year in which our work advanced steadily toward our long term goals. We built on cumulative investments of more than JPY 40 billion and a network of over 210 partners to further broaden our collaborative platform and positioned ourselves for the next stage of growth. Guided by our three strategic pillars, we remain committed to driving sustainable progress in global health.

As of March 31, 2026

Phase I	Phase II - Phase III	Registration	
6 First human clinical trials conducted	3 Proofs of concept achieved	3 Approved by stringent regulatory authority	1 Local program implementation of a product
2	2	1	0*

Advance R&D investment pipeline and prioritize late-stage candidates

* Delivered to preschool-aged children in Uganda, Côte d'Ivoire, Kenya, and Tanzania as an implementation study.

Three Fundamental Pillars

3 Catalyze Partnerships

Collaboration is essential to deliver drugs, vaccines, and diagnostics more rapidly, we worked with Astellas Pharma and other partners to advance the development of a pediatric treatment for schistosomiasis for preschool aged children, while also strengthening access to health care in affected communities. We shared this development journey and the importance of collaboration at Astellas Pharma's Sustainability Week event. With the innovations generated through these partnerships, we will continue striving for health equity.

Photo credit: UNDP/Kumi Media.

In February 2026, as GHIT 3.0 completed its third year, the pediatric treatment for schistosomiasis that the GHIT Fund has supported since its inception reached children aged two to five in Tanzania through implementation research. Supported by the Government of Japan and led by UNDP, this Access and Delivery Partnership (ADP) program is a powerful example of how collaboration and partnership with the Pediatric Praziquantel Consortium and the GHIT Fund can help deliver new medication to those who need them most.

Finances

FY2025 Financial Summary

*Figures in this section are rounded to the nearest indicated unit.

Balance Sheet

Assets (in millions)	JPY	USD
Current Assets	70.5	0.4
Fixed Assets	12,039.9	75.3
Total Assets	12,110.4	75.7

Liabilities (in millions)	JPY	USD
Current Liabilities	73.2	0.5
Non-current Liabilities	7.4	0.0
Total Liabilities	80.6	0.5

Net Assets (in millions)	JPY	USD
Designated Net Assets	12,029.8	75.2
General Net Assets	-	-
Total Net Assets	12,029.8	75.2
Total Liabilities and Net Assets	12,110.4	75.7

The US dollar amounts in this section represent translations of Japanese yen, solely for the reader's convenience, at JPY159.90 = USD1, the exchange rate as of March 31, 2026.

This financial summary is an excerpt from the GHIT Fund's audited financial statements, which are audited by Deloitte Touche Tohmatsu LLC. The GHIT Fund is a Public Interest Incorporated Association and is registered in Japan.

Our Funding Partners & Sponsors

Full Partners

Ministry of Foreign Affairs

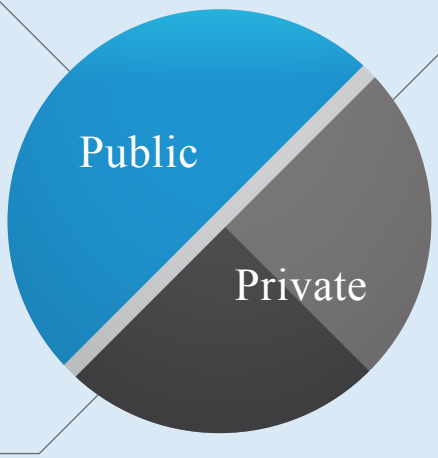
Ministry of Health, Labour and Welfare

United Nations Development Programme

Full Partners

Gates Foundation

Wellcome



Full Partners

Astellas Pharma Inc.
Chugai Pharmaceutical Co., Ltd.
Daiichi Sankyo Co., Ltd.
Eisai Co., Ltd.
Shionogi & Co., Ltd.
Takeda Pharmaceutical Company Limited

Associate Partners

Fujirebio Holdings, Inc.
Otsuka Pharmaceutical Co., Ltd.

Affiliate Partners

FUJIFILM Corporation
Kyowa Kirin Co., Ltd.
Merck KGaA
Remedy & Company Corporation
Sumitomo Pharma Co., Ltd.
Tanabe Pharma Corporation

Sponsors

Burson Japan / Coefficient Giving / Diligent Japan Ltd. /
Eiken Chemical Co., Ltd. / Forbes JAPAN / Mori Building Co., Ltd.
Morrison & Foerster LLP / Salesforce Japan Co., Ltd. / ZVC JAPAN K.K

As of March 31, 2026

Net Assets Variation Statement

Change in General Net Assets (in millions)	JPY	USD
Ordinary Income		
Grants Received	5,289.7	33.1
Contributions Received	720.5	4.5
Foreign Exchange Gains	86.4	0.5
Misc. Income	23.3	0.2
Total Ordinary Income	6,119.9	38.3
Ordinary Expenses		
Operating Expenses	5,925.4	37.1
Management Expenses	194.1	1.2
Total Ordinary Expenses	6,119.5	38.3
Extraordinary Loss		
Loss on Disposal of Fixed Assets	0.4	0.0
Total Extraordinary Loss	0.4	0.0

Change in Designated Net Assets (in millions)	JPY	USD
Grants Received and Others		
Governments, NGOs, Multilateral Organizations	4,350.8	27.2
Foundations	1,554.9	9.7
Local Ward	0.2	0.0
Contributions Received*	1,061.2	6.6
Total Grants and Contributions Received	6,967.1	43.5

*The donations we received include contributions from private companies as well as donations from individual supporters through the one-time donation and monthly donation systems.

Financial Report

In FY2025, grants and donations received by the GHIT Fund totaled 6.97 billion yen. These funds are used responsibly to support our activities, including research and development of new treatments, vaccines, and diagnostics for infectious diseases that are widespread in developing countries.
During the fiscal year, the GHIT Fund invested in 20 projects and there are 42 ongoing projects as of the end of March 2026. In collaboration with these research and development partners, the GHIT Fund promotes the development of drug, vaccines and diagnostics.

For this fiscal year, we also strengthened our framework to receive individual donations by raising awareness and conducting communication activities centering on three schemes—Minato Ward's *Furusato Nozei* (Hometown Tax System), legacy and planned giving, and the one-time donation and monthly donation systems —through the launch of a dedicated website and the creation of brochures. Through Minato Ward's *Furusato Nozei* System, we received 189,000 yen in subsidies,* and a further 78,000 yen through one-time and monthly donations.

Donations from individual supporters reflect your appreciation and high expectations for the GHIT Fund's activities, and they serve as the vital backing that helps us expand the foundation of our work going forward. The donations and grants we receive are used with great care to support our activities, including research and development of drugs, vaccines, and diagnostics for infectious diseases that are widespread in developing countries.

*The amount of the subsidies disbursed to the GHIT Fund in FY2025 by Minato Ward, out of the donations made between January and December 2024 by donors who contributed to Minato Ward while designating the GHIT Fund as the organization they wished to support.

Leadership

Council

Composed of representatives of the Japanese government, global foundations and private companies which contribute funding, the GHIT Fund's Council votes on important affairs, such as the election and dismissal of governors, amendments to the articles of incorporation, and the approval of financial statements.

Ryo Nakamura
Ambassador, Assistant Minister,
Director-General for Global Issues
Ministry of Foreign Affairs

Satoshi Ezoe, MD, MPH, MPA, PhD
Senior Assistant Minister for Global Health
Ministry of Health, Labour and Welfare

Trevor Mundel, MD, PhD
President, Global Health
Gates Foundation

John-Arne Røttingen MD, PhD, MSc, MPA
CEO
Wellcome

Astellas Pharma Inc.
Kenji Yasukawa
Representative Director,
Chairman of the Board

Chugai Pharmaceutical Co., Ltd.
Osamu Okuda, PhD
Representative Director, President & CEO

Daiichi Sankyo Company, Limited
Sunao Manabe, Ph.D
Representative Director,
Executive Chairperson

Eisai Co., Ltd.
Haruo Naito
Representative Corporate Officer
and CEO

Shionogi & Co., Ltd.
Isao Teshirogi, PhD
Chief Executive Officer

Takeda Pharmaceutical Company Limited
Christophe Weber
Representative Director
President and CEO

Board of Directors

Composed of global health and management experts, the GHIT Fund's Board of Directors oversees the work of the leadership team and votes on important affairs related to business management, such as the approval of important regulations, mid-term strategies, annual plans, budgets, and investment opportunities.

Chair & Representative Director
Hiroki Nakatani, MD, PhD, MHPEd
Visiting Professor
Keio University School of Medicine

Vice Chair
Mahima Datla
Managing Director
Biological E. Limited

Executive Director
Osamu Kunii, MD, PhD, MPH
CEO, GHIT Fund

Quarraisha Abdool Karim, PhD
Co-founder and Associate Scientific Director, Centre for the AIDS Programme of Research in South Africa (CAPRISA), Professor in Clinical Epidemiology, Columbia University
Pro-Vice Chancellor for African Health, University of KwaZulu-Natal

Yosuke Kita, MD, MPH, MPA
Director, Global Health Strategy Division
International Cooperation Bureau
Ministry of Foreign Affairs

Daikichi Momma
Vice Chairman
Institute for International Economic Studies

Junichi Takahashi
Director
Office of Global Health Cooperation
Ministry of Health, Labour and Welfare

Rajeev Venkayya, MD
Former President of the Global Vaccine Business Unit, Takeda Pharmaceuticals, Former Special Assistant to the President for Biodefense, White House, Former Director of Vaccine Delivery, Bill & Melinda Gates Foundation

Supervisory Board Member
Peter Mason, FCIArb
Independent Public Company Director and International Arbitrator

Supervisory Board Member
Saori Nakamura
Attorney at Law
Hirayama Nagareya Shirai Law Office

Supervisory Board Member
Hisashi Shirahata, CPA, MBA
Retired Partner of PricewaterhouseCoopers Japan LLC
Outside Director of ID Holdings Corporation
Outside Audit & Supervisory Board Member of Itoki Corporation, Outside Director (Audit & Supervisory Committee member) of Komeda Holdings Co., Ltd.

Ex-Officio
Nicholas Cammack, PhD
Head of Product Development Partnerships, Infectious Disease
Wellcome

Ex-Officio
Isabel Torres
Senior Advisor, Industry Leadership Engagement, Global Health Division
Gates Foundation

Selection Committee

Composed of domestic and foreign experts with a wealth of knowledge and experience in R&D of therapeutic agents, vaccines, and diagnostic agents, the Selection Committee (SC) examines and evaluates applications and progress reports from program applicants and recommends investment opportunities to the Board of Directors. To avoid any conflict of interest between our backers and development partners, the SC does not include private sector representatives.

Chair
Philip Jordan, DPhil
Principal Licensing & Ventures Manager
Oxford University Innovation

Chair
Hiroo Koyama, PhD
Unit Leader
Drug Discovery Chemistry Platform Unit
RIKEN Center for Sustainable Resource Science

Sue Ann Costa Clemens, MD, MSc, PhD, CORB, COMM, CBE
Professor of Paediatrics Infectious Diseases, Global Health and Vaccinology
Department of Paediatrics, University of Oxford
Head of Institute for Global Health, University of Siena

Ann Mills-Duggan, PhD
Independent Consultant

Paul Jorgensen, BS
Independent Consultant

Chris Karp, MD
Director, Global Health Discovery & Translational Sciences
Gates Foundation

Sally Nicholas, PhD
Head of Health Systems and Environment
Wellcome

Akihiko Saitoh, MD, PhD
Professor and Chairman, Department of Pediatrics, Niigata University
Dean, Graduate School of Medical, Dental, and Health Sciences
Vice Dean, School of Medicine, Niigata University

Anna-Karin Tidén, PhD, MRSC
Independent Medicinal Chemistry and Drug Discovery Consultant

Naoto Uemura, MD, PhD
Professor, Department of Clinical Pharmacology and Therapeutics
Oita University Faculty of Medicine

Rieko Yajima, PhD
Director, Drug Discovery Innovation
SPARK Program in Translational Research
Stanford University School of Medicine

Leadership Team

The leadership team facilitates the development of business, investment, and organizational growth strategies, executes strategies based on the approval of the Board of Directors, and implements administrative tasks.

Osamu Kunii, MD, PhD, MPH
CEO

Keiko Haga
COO

Eriko Mugitani
Director, Brand Communications

Shin Sakai
Associate Vice President,
Legal & Investment Risk Management

Kazue Seki
Director, External Affairs & Corporate Development

Miho Takazawa, MBA
Senior Director, Corporate Operations

Hayato Urabe, PhD, MPIA
Associate Vice President
(Department Head),
Investment for Impact

As of March 31, 2026

Funding Partners & Sponsors

Support from our generous funding partners and sponsors helps GHIT's investments and operations advance and create meaningful impact. We would like to express our deepest gratitude for their generous support.

Full Partners

Ministry of Foreign Affairs

Ministry of Health, Labour and Welfare

United Nations Development Programme

Gates Foundation

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Morrison & Foerster LLP

Salesforce Japan Co., Ltd.

ZVC JAPAN K.K

As of March 31, 2026

Fight Neglected Diseases through Partnerships

GHIT Fund

Global Health Innovative Technology Fund

Overview

Name	Global Health Innovative Technology Fund (GHIT Fund)
Address	Ark Hills Sengokuyama Mori Tower 25F, 1-9-10 Roppongi, Minato-ku, Tokyo 106-0032 TEL：+81-36441-2032　　FAX：+81-36441-2031
Launched	November 6, 2012 (Operations started in April 2013)
Chair & Representative Director	Hiroki Nakatani
CEO & Executive Director	Osamu Kunii
Activities	1. Facilitation of global R&D partnerships for the discovery and development of new health technologies for the developing world 2. Investment in these global R&D partnerships through a grant-making mechanism 3. Advancement of Japan’s contribution to global health
Website	https://www.ghitfund.org/en

Fight Neglected Diseases through Partnerships

GHIT Fund

Global Health Innovative Technology Fund

Global Health Innovative Technology Fund

Ark Hills Sengokuyama Mori Tower 25F, 1-9-10 Roppongi, Minato-ku, Tokyo 106-0032, Japan　TEL: +81-36441-2032　FAX: +81-36441-2031

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