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# Alumni News



#09  
Autumn  
2017

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Winner of the 2017 Alumni photo competition

# Message from the Director

It is always a pleasure to pen the welcome to Alumni News, not only as it gives me the chance to update our alumni on School activity but it also affords me the opportunity to revisit the year past, and to consider the path ahead. I must begin by thanking those of you who have given so generously to the School. Every gift makes a big difference and our gifts from alumni totalled over £200,000 this year.

The generosity of our supporters is helping us to provide much needed support to our students and to improve our research facilities, and alongside our alumni donors this year we have broken another record; I am pleased that our research income has grown to more than £110 million for the first time ever, which is more than many universities in the UK.

Over the past year we have been fortunate to welcome a number of high-profile guests to the School, in October we were thrilled to host Bill Gates. The School and its partners have worked closely with The Bill & Melinda Gates Foundation for a number of years so we were pleased to be able to give Mr Gates a detailed overview of the School's work. In July we were delighted to receive a visit from His Royal Highness Prince Harry, who is the Co-Founding Patron of Sentebale, a charity dedicated to helping children affected by extreme poverty and the HIV/AIDS epidemic in Lesotho and Botswana. I was honoured to join His Royal Highness, Sentebale Chief Executive Officer Cathy Ferrier, and other world health leaders as we heard first-hand from some of Sentebale's 'youth advocates' as they described some of

the many challenges they faced living with HIV/AIDS. We closed the academic year by welcoming the newly appointed Director-General of the World Health Organization (WHO), and LSHTM alumnus, Dr Tedros Adhanom Ghebreyesus. Both staff and students alike were thrilled to be able to hear first-hand from Dr Tedros, who made the trip to the School for his first official visit since taking on his new position.

We have had much to celebrate in the past year. In January a number of our staff were recognised in the New Year's Honours List. Professor Nick Black was knighted for his services to healthcare research, and both Professor Vikram Patel and Dr Francesco Checchi were awarded an honorary OBE for service to their areas of research. We were delighted to welcome Sir Andrew Witty, Wendy Ewart and Precious Lunga to the School's Council.

We were honoured to receive the Times Higher Education (THE) 'University of the Year' award for 2016, which came in recognition of the School's response to the Ebola crisis. Our work to manage Ebola and other deadly diseases has also received coverage in the feature length documentary Unseen Enemy, by Emmy award-winning film maker Janet Tobias. Alongside myself and the School's Professor Heidi Larson, the film also features alumnus Dr Soka Moses, who ran one of the largest Ebola Treatment Centres in Monrovia throughout the most recent epidemic. The learnings we have taken from the Ebola crisis, and the recent Zika and Yellow Fever epidemics, are significant and coupled with our continuing

research findings we are in prime position to put them into practice. As such we have been chosen to jointly run the UK Public Health Rapid Support Team in partnership with Public Health England, funded by the UK Government. The specialist team will respond to disease outbreaks around the world before they develop into health emergencies. It also conducts research to improve epidemic preparedness and assist with training a team of public health reservists. It is a landmark project that we are proud to be part of.

As one academic year closes and another begins we are taking the opportunity to consider the future and we are currently working to update and develop the School's strategy and priorities. It is an exciting time for the School and I look forward to sharing the outcome of that work with you in due course.

For now, all that remains is for me to offer my heartfelt congratulations to our most recent graduates, I am delighted to welcome you into the alumni community. You have joined the ranks of an inspirational group and I look forward to meeting and working with many of you in the coming years.



.....  
Professor Peter Piot,  
LSHTM Director





*British television presenter and wheelchair basketball player Ade Adeptian MBE visits the School to discuss polio.*

## School named University of the Year

The London School of Hygiene & Tropical Medicine was awarded the prestigious Times Higher Education (THE) 'University of the Year' award for 2016. The School was the judges' unanimous choice for the award, given in recognition of its response to the Ebola epidemic in West Africa.

The judges praised the School for putting all of its expertise into action: "It was an extraordinary example of research expertise being deployed in real time in the real world. But the School's response wasn't only about putting people into the field. There was also a need for education to combat Ebola's spread... This was a moment for the London School of Hygiene

& Tropical Medicine to come into its own, to pause the normal business of the School to allow its world-leading experts to make a difference in a way for which they are uniquely qualified."

Professor Peter Piot, Director of the London School of Hygiene & Tropical Medicine, said: "We are delighted to be named University of the Year. When the Ebola epidemic got out of control it was our duty to mobilise to help stop this outbreak. Thank you to our committed community of staff, students and alumni for their outstanding work and ongoing dedication to meeting urgent challenges in public and global health."

“

We are delighted to be named University of the Year. When the Ebola epidemic got out of control it was our duty to mobilise to help stop this outbreak.

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Professor Peter Piot

# School awarded grant to combat seasonal malaria in Africa

**London School of Hygiene & Tropical Medicine is leading a major new trial to investigate the optimum way to prevent seasonal malaria in the African Sahel and sub-Saharan.**

Funded by the Medical Research Council, the Department for International Development and the Wellcome Trust, the £3million study will compare the effectiveness, cost and ease of delivery of

two new malaria interventions, the malaria vaccine RTS,S/AS01 and seasonal malaria chemoprevention (SMC).

Sir Brian Greenwood, Professor of Clinical Tropical Medicine at the School and Principal Investigator on the trial with Professor Daniel Chandramohan, said: "Seasonal malaria affects a large number of children in the Sahel and sub-Saharan. SMC is very effective but its delivery is

demanding on families, especially for those living in rural and difficult to access areas, as it requires four contacts between health providers and recipient children each rainy season. A single dose of vaccination would be easier to deliver. In addition, it may be that a combination of the two interventions would be more effective at preventing malaria than either used alone which is what we are aiming to find out in this trial."

*The RTS,S + SM project field team in Burkina Faso and Mali*



# New School Centres: AMR Centre and the Health and Humanitarian Crises Centre

There are currently 12 School Centres, which are strongly multidisciplinary, drawing on a diverse range of expertise across the School to address global health challenges.

Two new Centres launched in 2016, the Health and Humanitarian Crises Centre (HHCC), and the Anti-Microbial Resistance (AMR) Centre. In its first six months the HHCC, jointly led by Dr Karl Blanchet and Dr Jennifer Palmer, launched a new MOOC; the online course teaches students

about the “health needs of those affected by humanitarian crises, challenges of delivering healthcare, and what we must do next”. It has established a strong seminar programme, which will conclude this academic year when the Centre hosts David Nott, expert on surgery in humanitarian crisis settings.

Dame Sally Davis, the UK Chief Medical Officer, officially launched the AMR Centre in December 2016 with an event which assembled researchers from the

School and beyond to discuss current and future AMR research. The Co-Directors of the Institute, Professors Clare Chandler and Richard Stabler, have organised the Centre into five disciplinary pillars to embed an interdisciplinary perspective within the Centre, comprising Biological & Pharmacological Sciences, Clinical & Veterinary Sciences, Humanities & Environmental Sciences, Epidemiology & Modelling, Economic, Social & Political Sciences.

AMR launch event at LSHTM



Dame Sally Davis

# UK teenage pregnancy rates fall to a record low

Teenage pregnancy rates have reached an all-time low, according to new research from the School. The estimated number of conceptions in the UK among girls aged under-18 fell to 21 per every 1000 in 2015, a decrease of 10% from 2014, and the lowest rate since comparable records began in 1969. Under-18 conception rates have now fallen by 55% since 1998.

In 2000, the government launched the Teenage Pregnancy Strategy, a 10-year programme of work combining co-ordination of efforts at local level, improved access to contraception and a related public education campaign.

Professor Kaye Wellings, Professor of Sexual & Reproductive Health Research at the London School of Hygiene & Tropical Medicine, said:

“England’s success in bringing down under-18 conception rates is now being held as an example to other countries. The Teenage Pregnancy Strategy aimed to reduce under-18 conception rates by 50%, a target considered unrealistic at the time but has now been exceeded. The rates fell furthest in the areas in which most Strategy-related resources were invested by the government, even after taking account of the effect of region and deprivation.

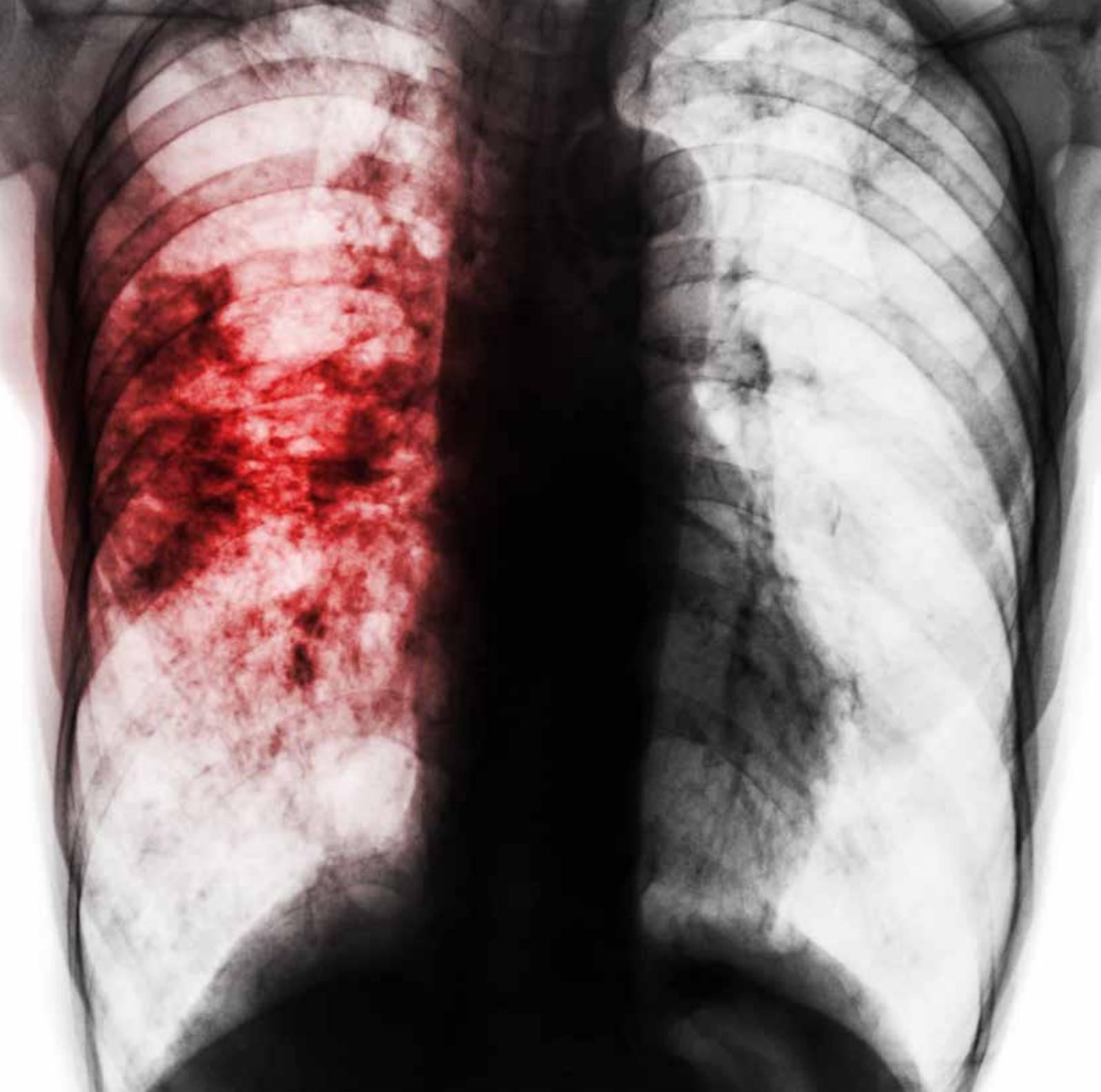


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The dramatic and continuing fall in under-18 pregnancy rates shows how much can be achieved when public health efforts and the social and economic influences are all operating in the same direction.

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Professor Kaye Wellings



## New grant to strengthen TB prevention and care decision-making

**A £2.5million project that is supporting global health policymakers to make evidence-informed decisions on tuberculosis prevention and care will continue for a further three years, thanks to a new £2.5 million grant from the Bill & Melinda Gates Foundation awarded to the School.**

Tuberculosis is one of the top 10 causes of death worldwide. In 2015, 1.8 million people died from the disease, with 95% of these cases occurring in low- to middle-income countries. Critical data and modelling gaps, as well as conflicting policy recommendations, have often led to poor TB prevention and care.

This grant will enable the School to continue our extensive work on TB.



# LSHTM to lead investigation into sustainable and healthy food systems

**Sustainable food systems, healthy diets and the impact of environmental and population changes on food production will be investigated in a major new project led by the London School of Hygiene & Tropical Medicine.**

The Sustainable and Healthy Food Systems (SHEFS) programme is a large international collaboration funded by a major £5million grant from the Wellcome Trust - one of four projects funded through their Our Planet, Our Health strategy. SHEFS will generate much needed evidence to help policy makers deliver healthy food systems in the face of future environmental and demographic change.

Alan Dangour, Professor of Food and Nutrition for Global Health at the School and Principal Investigator for SHEFS, said: "As the world's population increases, with a growing divide in food security and big environmental changes, ensuring healthy and sustainable diets for all is a major challenge. In many countries, the gap between rural and urban communities and changing food trends have seen a rise in both under-nourished children and adults suffering from a range of diet-related conditions, each with serious health consequences.

"This new project will examine people's diets, map the origins of their food and the

supply chain, as well as investigating the environmental impacts of dietary patterns and risks such as water contamination in local farming. We hope to provide important evidence for policy makers on how best to solve the threats to both population health and the planet's resources."

SHEFS is a collaboration of researchers from London School of Hygiene & Tropical Medicine, UCL, SOAS, University of Aberdeen, City University London, Royal Veterinary College, Public Health Foundation India, University of KwaZulu-Natal, South Africa and the Food Foundation.



*Professor Peter Piot and HRH Prince Harry*

## Prince Harry unites global HIV/AIDS leaders during visit to the School

Global HIV leaders have committed to ensuring young people affected by HIV/AIDS play an integral part in shaping new research and policies to strengthen HIV prevention, testing and treatment in sub-Saharan Africa. The agreement was made during a special round-table organised by the School, the charity Sentebale and its Co-Founding Patron Prince Harry.

His Royal Highness joined School Director Professor Peter Piot and Sentebale Chief Executive Officer Catherine Ferrier, along with other key global health figures to hear first-hand why youth in the region are failing to test for HIV and access the relevant follow-up care and treatment.

Prince Harry said: "To me it is totally absurd that in today's world that for young people,

the first time they hear anything about HIV/AIDS, it's probably by the time it is too late.

"HIV needs to be treated exactly the same as any other disease, and between us hopefully we can eradicate the stigma and give these young people an opportunity to stand up and say, I've lived it and I want to come forward and make a difference."

At the round-table event, key representatives from organisations including UNAIDS, the Global Fund to Fight AIDS, TB and Malaria, PEPFAR, and the International AIDS Society outlined commitments as to how they, as the leading figures in the AIDS response, could help address the needs of youth across the sub-Saharan African region.

Professor Peter Piot, Director of the London School of Hygiene & Tropical Medicine, who was formerly founding Executive Director of UNAIDS, said: "The largest ever generation of adolescents in sub-Saharan Africa are at risk of HIV and yet the world is not listening to them. Young people should be involved every step of the way, from research development to policy-making.

"It was a privilege to welcome Prince Harry and other global HIV/AIDS influencers, and especially the youth advocates. Hearing their experiences should be a wake-up call for researchers and policymakers as HIV/AIDS is not over, especially in sub-Saharan Africa."



*The UK Public Health Rapid Support Team was deployed to Sierra Leone to help reduce the risk of a disease outbreak following the deadly landslides in Freetown.*

## £20m announced to prevent global health emergencies

The School has been chosen to jointly run the newly established UK Public Health Rapid Support Team in partnership with Public Health England and funded by the UK Government. The initiative means the UK has a fully operational specialist team that is ready to deploy anywhere in the world within 48 hours to tackle disease outbreaks which have the potential to develop into major health emergencies.

The team has been established in response to the Ebola crisis in West Africa, which highlighted the need for the international community to develop a system to help support countries respond to and control disease outbreaks before they can develop into a global threat. It will continually monitor infectious disease outbreaks around the world, identifying situations where the deployment of specialist expertise could help mitigate threats.

Jimmy Whitworth, Professor of International Public Health, who led the team's development for the School, said:

"The UK Public Health Rapid Support Team brings together two very important concepts - a national force on stand-by to help with international responses to outbreaks around the world, and a team of experts dedicated to operational research, planning and evaluating our outbreak response so that we can improve our response in future outbreaks.

"The School was actively involved in responding to the Ebola crisis in West Africa and has been working on the Zika and Yellow Fever epidemics - our involvement in the Rapid Support Team builds on this experience. We'll be conducting rigorous research to improve epidemic preparedness and future responses and will rapidly share this information with the scientific community."

The team, with Director, Professor Daniel Bausch at the helm, will be funded over five years by £20 million made available from the UK development assistance budget.

Professor Daniel Bausch, a specialist in emerging infectious diseases trained in internal medicine, infectious diseases, tropical medicine, and public health, has extensive experience combating deadly global health threats such as Ebola virus, hantavirus, and SARS coronavirus.

The core team includes experts in tracking the progress of an outbreak (epidemiologists); in diagnosing the cause of an outbreak (microbiologists); in advising on outbreak control measures (infection prevention and control) and community responses to outbreaks (social scientists); and in developing the best clinical response measures (clinical researchers).

# Bill Gates visits the School



Bill Gates recently visited the School, meeting with leading researchers in areas including malaria, neonatal health and vaccine development, as well as hearing presentations about some of the School's cutting-edge work.

The Foundation has funded a variety of research at the School, including the first study to demonstrate unequivocally the effectiveness of a mass vaccination campaign with a new meningitis serogroup A vaccine, PsA-TT, in sub-Saharan Africa. Current Foundation funded projects include PopART, a project that is testing an innovative combination of strategies to prevent HIV in African countries. It continues to be a key partner.

Professor Peter Piot said: "We are delighted that Bill Gates has been able to visit us and taken the time to hear about some of our work. His leadership has been transformational for global health. The Foundation is a very important funder and in many ways helps to drive the global health agenda. They are tackling some of the main health challenges in the poorest parts of the world - a mission that we share."



# Scholarship launched in memory of Dr Jeroen Ensink

**The Jeroen Ensink Memorial Fund commemorates the life and work of Dr Ensink, Senior Lecturer in Public Health Engineering at the School, and was established following his death in December 2015. Dr Ensink was an internationally renowned water engineer and dedicated humanitarian.**

Dr Ensink was passionately committed to improving access to water and sanitation around the world, above all in low-income countries where children continue to die due to lack of basic services. At the time of his death he was leading work to improve the control of cholera in emergency situations. He worked closely with research institutes in Africa and Asia and devoted much effort to supporting them in developing research capacity.

To date, the memorial fund established in his name has received more than 400 donations totalling over £88,000. These gifts will fund scholarships for students from sub-Saharan Africa or South Asia to study the MSc in Public Health for Development.

Joanna Schellenberg, Professor of Epidemiology and International Health at the School, said: "Jeroen was a brilliant researcher and a hugely committed teacher who inspired a new generation of public health professionals. We are grateful for the many generous donations to his memorial fund, from both the School community and members of the public.

"These kind gifts are a testament to his life and work. Jeroen was a Course Director for the MSc in Public Health for Development. We are thrilled that the new scholarship will enable a student from a low-or-middle income country to complete this valuable course."

For more information about giving to the Jeroen Ensink Fund please email [alumni@lshtm.ac.uk](mailto:alumni@lshtm.ac.uk).





# Got your underwear, bed sheets and vaccination? Why freshers could help eliminate measles

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**Every Autumn thousands of teenagers are beginning an exciting new chapter in their lives. Freshers' week will see friendships fostered for life, but for some unfortunate students it will also mean experiencing something not quite as welcome. Close contact between large groups of young adults is the perfect breeding ground for infectious disease. Perhaps surprisingly, measles is one of them.**

Fifty years ago measles affected virtually every child in the world. In the UK alone this resulted in hundreds of thousands of cases and hundreds of deaths every year – even today about one in 2000 reported measles cases results in a death.

The US introduced measles vaccination in the mid 1960s – almost certainly one of the most effective and cost-effective medical interventions of all time. European countries followed shortly afterwards – Russia in 1967, the UK in 1968 and the Netherlands in 1976.

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Although spectacular declines in measles incidence followed, the disease remained endemic in most countries with epidemics occurring every few years. This was because countries were offering just a single dose of measles vaccine – about 90% of children vaccinated will become immune so even if vaccine coverage is 100% then this still leaves 10% unprotected allowing measles to circulate among 'susceptibles'.

The introduction of the triple-jab measles, mumps and rubella vaccine (MMR) and the second dose early in childhood, which occurred in the 1980s and early 1990s led to increases in vaccine coverage and further declines in measles incidence. By the mid 1990s, measles was becoming very rare and elimination of the disease (along with rubella) became a very real possibility...but then the spectacular gains started to unravel.

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Almost 20 years ago a little-known gastroenterologist called Andrew Wakefield published a paper claiming a link between the MMR jab and autism. Although the scientific basis for this claim was almost non-existent he began an increasingly embattled campaign against the vaccine which became front page news. The result? Parents and even some health-care professionals became confused about the risks and hesitant about vaccinating their children and coverage rates dropped. In England MMR coverage at two years of age fell to 80% by 2003, and was 10% lower still in London.

Measles did not immediately bounce back. This was largely because a successful campaign had been conducted just prior to the controversy in which school aged children were offered the measles-rubella (MR) vaccine.

Gradually, carefully conducted studies were published that failed to show a link between autism and MMR (the best that



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scientists can do, as you can't prove a negative). The tide slowly turned but the controversy left its mark. It was not until 2010 that MMR coverage in England exceeded 90%. Confidence is easily lost, but it takes a long time to regain.

Over the last 10 years measles has gradually crept back into our society. Outbreaks have been occurring in groups which are more difficult to reach and spilling over into wider society – particularly in areas with lower levels of coverage, such as London.

The disease has started to catch up with the 'Wakefield cohorts' who are now in their teens, mopping up susceptibles in other age groups as it goes. A disease that was typically spread in nurseries and schools is now one that hops between summer festivals and freshers' fairs.

So what will happen in the future? Are we content to allow this virus that can cause pneumonia, brain inflammation, deafness

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and occasionally death to linger in our society? Two doses of vaccine can prevent it but the epidemiology has changed. It is no longer sufficient to just vaccinate in early childhood. If we want to eliminate the disease we also have to reach the other susceptible groups. Increasingly this also includes adults but they, particularly young men, tend to have much less contact with the health services.

So what can we do? The first and most important thing is to maintain very high levels of two-dose coverage in infants and young children. This will get tougher as the incidence of measles will go down – we need to anticipate and prepare for this. Monitoring mothers' attitudes to immunisation programmes, and research into what influences their decisions, will be critical.

We also need to be more creative about reaching older unvaccinated individuals. At every major life event – primary school, secondary school and college – parents

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should ask themselves if their child is fully protected against not just measles but other infectious diseases too.

And as for new university students, well ensuring you are vaccinated is as important as bringing enough underwear.



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**John Edmunds,**  
Professor of Infectious Disease Modelling  
and Dean of Faculty of Epidemiology  
& Population Health



## Working with gangs in London – a public health approach

**MSc Public Health alumna Dorcas Gwata is a Mental Health Specialist who works in the Integrated Gangs Unit in London. Dorcas is also a Trustee for Zimbabwe Health Training Support Diaspora Charity, and Co-Director of the Global Health Café. In addition to studying an MSc at LSHTM, Dorcas also studied a short course in Researching Gender Violence in 2014. Her studies developed her skills and practice in the area of gender violence. In this alumni report, Dorcas talks about her work in the Integrated Gangs Unit and how that led her to set up the Global Health Café – a platform for Global Health enthusiasts.**

The Integrated Gangs Unit is a unique multi-agency unit that addresses youth violence and sexual exploitation, and its impact on community safety for young people aged 12 to 21.

The goal of the Unit is to reduce youth violence and improve community safety using public health approaches.

Dorcas was asked to take a lead role at the Unit after working as a Mental Health Adviser for AFRUCA Charity, a charity formed on the backdrop of the Victoria Climbié case. Dorcas's work at the Unit explores the impact of traumatic events on the mental health of young people at the Unit. The Integrated Gangs Unit is currently working on developing community-based clinics across Westminster, which will increase access to mental health services for young people that have experienced youth violence and exploitation.

Dorcas said "In response to the depth of enquiries that we receive on the work we do at the Unit, we have set up the Global Health Café, a platform for "Global Health

enthusiasts" who meet regularly to discuss global health issues with a view to inform innovation, health policy, evaluation and practice". "Over time we will be looking to develop these discussions on bigger think tank platforms, seeking funding to grow our influence in Global Health."

You can also follow Dorcas and the Global Health Café on twitter @zambezi40 and @TheGHCafe.

# Renovation, Refurbishment and New Buildings: The School's Commitment

In 1929 the London School of Hygiene and Tropical Medicine opened the doors to its iconic Keppel Street building, a project made possible thanks to a generous donation from the Rockefeller Foundation. At that time the facilities our students and faculty worked in were cutting edge but as times have changed so have the needs of the School. It is because of this that Professor Peter Piot and the School's Council, chaired by Dame Marjorie Scardino, have developed a vision for the modernisation and refurbishment of wet and dry labs in Keppel Street, a project which will form the core of the School's estate plan over the next five years.

The School's future is equally dependent on the provision of versatile spaces designed for innovation and collaboration; offices, teaching space, and break out rooms. Space within Keppel Street is already limited so we are in the development phase of a new building project, to be constructed in Tavistock Place on land already owned by the School. A key feature of the new Tavistock Place building will be a top-flight central computational lab that will offer researchers invaluable resources in cohort studies and statistical analysis. It is an exciting project and we look forward to sharing further developments with you as and when they take place.

This ambitious, multimillion-pound complex will have naming opportunities for donors. The School has already secured £15m through a variety of public and private philanthropic sources. We aim to open the doors of the brand new building in 2020 and in the meantime will continue to pursue philanthropic support for this large-scale venture. Our commitment to renovations and refurbishments, and to the development of brand new spaces, is representative of the School's dedication to the continued investment in public health worldwide.

*Artist's impression of the new Tavistock Place building*



# Dr Stephen Hoffman on the fight to eradicate malaria

**For the past thirty years Dr Stephen L. Hoffman has been at the front-line of the fight to eradicate malaria. Here, he reflects on his career, which has taken him from practising family medicine in the US to fighting infectious diseases in the remote islands of Indonesia, South America, and Africa.**

"I first studied tropical medicine in my second year of medical school and it was clear to me that this was an area I wanted to explore. Not long after this I received a fellowship to conduct a study in Bogota, so I travelled to Colombia and immediately fell in love with the tropics. It was 1972, the height of the hippy era, and I decided I needed to better understand myself so I withdrew from medical school for a year to do so while exploring South America. I spent time travelling, studied with native healers, and also spent 10 days in hospital in Ecuador with typhoid fever before returning to medical school with a commitment to the field of infectious diseases and tropical medicine.

I came to London to study for the Diploma in Tropical Medicine and Hygiene as part of my residency at the University of California,

San Diego. After completing the DTM&H I returned to the US, became board certified in Family Medicine and started one of the first Tropical Medicine and Travellers clinics in a university in the US. But I felt like a phoney tropical medicine doctor; I knew that if I was going to do this properly, I had to actually be in the tropics. Around this time, I was introduced to scientists working at the Naval Medical Research Unit 2, a biomedical research facility in Indonesia. I was very interested in the work but a little reluctant to take it further as at the time I had a beard, a ponytail, had been an anti-war demonstrator, and was not too keen on joining the Navy! But after a year of discussions with them, I decided to cut off my hair and sign up.

On my first day at the Infectious Diseases Hospital (IDH) of Jakarta I was taken on rounds by the director and saw the first of many patients dying from typhoid fever; in fact, 15% of the typhoid fever patients in the hospital died. I was stunned, because as students we learnt that since the introduction of chloramphenicol the mortality rate of typhoid fever patients was less than 1%. I recorded my observations, selected the top 10 infectious diseases

experts in the world and sent them my findings. In response I either received a letter along the lines of 'You must be one of the worst doctors in the world to be having so many of your typhoid patients die' or no response at all. The only positive reply came from Dr Theodore Woodward, who had discovered the efficacy of chloramphenicol for typhoid fever in 1948, he wrote 'It sounds like you're witnessing some good old fashioned typhoid fever and I'd like to come and see it.' He flew to Indonesia and although we never got to meet in person (at this time I was stuck on a grass landing strip in Flores, a thousand miles from Jakarta) we began a significant collaboration."

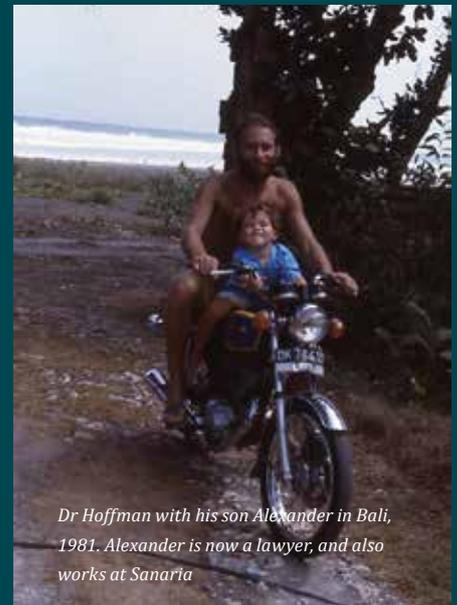
## ALUMNI PROFILE



*Dr. Hoffman, his wife, Dr. Kim Lee Sim, and local children in Mali, 2014*



*Dr Hoffman and colleagues in Indonesia, 1982*



*Dr Hoffman with his son Alexander in Bali, 1981. Alexander is now a lawyer, and also works at Sanaria*



*Dr Hoffman and colleagues meet with brujos (native healers) in Colombia, 1973*



*Dr Hoffman at work in Flores, 1983*

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As Dr Hoffman and Dr Woodward communicated it became clear that they were onto a similar idea; using corticosteroids to treat severe typhoid fever.

"I suggested using high doses of corticosteroids, and my colleague Dr Narain Punjabi and I decided to conduct a double blind, placebo controlled trial. We started in 1981 and 15 months later were able to demonstrate that we had reduced the mortality of strictly defined severe typhoid fever from 55% to 10%. We published our paper, Reduction of Mortality in Chloramphenicol-Treated Severe Typhoid Fever by High-Dose Dexamethasone in the New England Journal of Medicine in 1984. Mortality

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was dramatically reduced at IDH and that treatment regimen is still being used today."

In the following years Dr Hoffman organised a Phase III clinical trial of Ty21a (a typhoid fever vaccine) in Sumatra, with 20,000 participants, presented the findings across the world, including at the US FDA and published extensively. In time his work became focused on the eradication of malaria and in 2003 he launched Sanaria, a biotechnology company dedicated to malaria vaccine development. Sanaria employs 65 staff managed from a facility in Maryland, US where its PfSPZ-based vaccines are manufactured, and is currently conducting or has conducted clinical trials in 6 countries in Africa, 4 countries in Europe, and multiple sites in the U.S.

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"In 6 clinical trials of our PfSPZ-based vaccines in the U.S., Germany, Mali, and Tanzania we have achieved >90% protection against infection with Plasmodium falciparum, the cause of nearly all deaths from malaria. However, we are mindful of how difficult the task at hand is. Thousands of scientists have worked on developing malaria vaccines for a century, billions of dollars have been invested in the effort, and there is still no licensed malaria vaccine anywhere in the world. But our team goes to work every day with the dream that the vaccines we are developing will save millions of lives – that's our aim."

# Zika has created a 'lost generation'

**By Hannah Kuper, Co-director of International Centre for Evidence in Disability**

I recently sat with a mother and her baby in an intensive care unit in Rio de Janeiro, Brazil. The baby was tiny, with lots of dark hair and a beautiful name. He also had microcephaly – and the doctor euphemistically said that his face was disproportionate to his head.

His mother was obviously very anxious, and wondering how she was going to cope when they finally went home. She hadn't known that she'd had Zika in pregnancy, so the diagnosis came as a shock to her. The father had blood-shot eyes – from fatigue or crying – and wanted to know whether this had happened because the mother had been vaccinated against rubella as a teenager, one of the rumours circulating in Brazil.

A few days later, I visited a hospital clinic in Recife treating babies affected by Zika. Not all the babies had microcephaly – many had normal-sized heads but other severe disabilities. In fact, microcephaly may actually be just the tip of the iceberg in the Zika crisis, and the focus is now shifting to "Congenital Zika Syndrome", which covers the full range of conditions affecting these babies.

The shocking thing for me was the sheer number of children at the clinic – they were everywhere I looked. The babies were beautifully dressed and obviously well cared for. The mothers were going through the familiar parental activities of giving bottles of milk, rocking babies to sleep, wiping up baby mess and chatting. But still the atmosphere was anxious, and many of the babies were irritable and crying – common features of babies affected by Zika.

I was in Brazil to take part in a research workshop. I learned about plans to develop diagnostic tests for Zika, animal models to help understand how Zika is damaging the developing brain, new methods to control the vectors of Zika, and models to predict the different likely scenarios.

This new science is cutting edge and will help to prevent and control future Zika epidemics, but it may not do so much to help those babies already affected by Zika – at least 2,000 so far in Brazil alone. Without support, these babies are likely to grow up with serious and wide-ranging disabilities, which will severely restrict their ability to live normal lives. Public health messages may also not be much help yet. Most focus so far has been on avoiding infection with Zika and delaying pregnancy

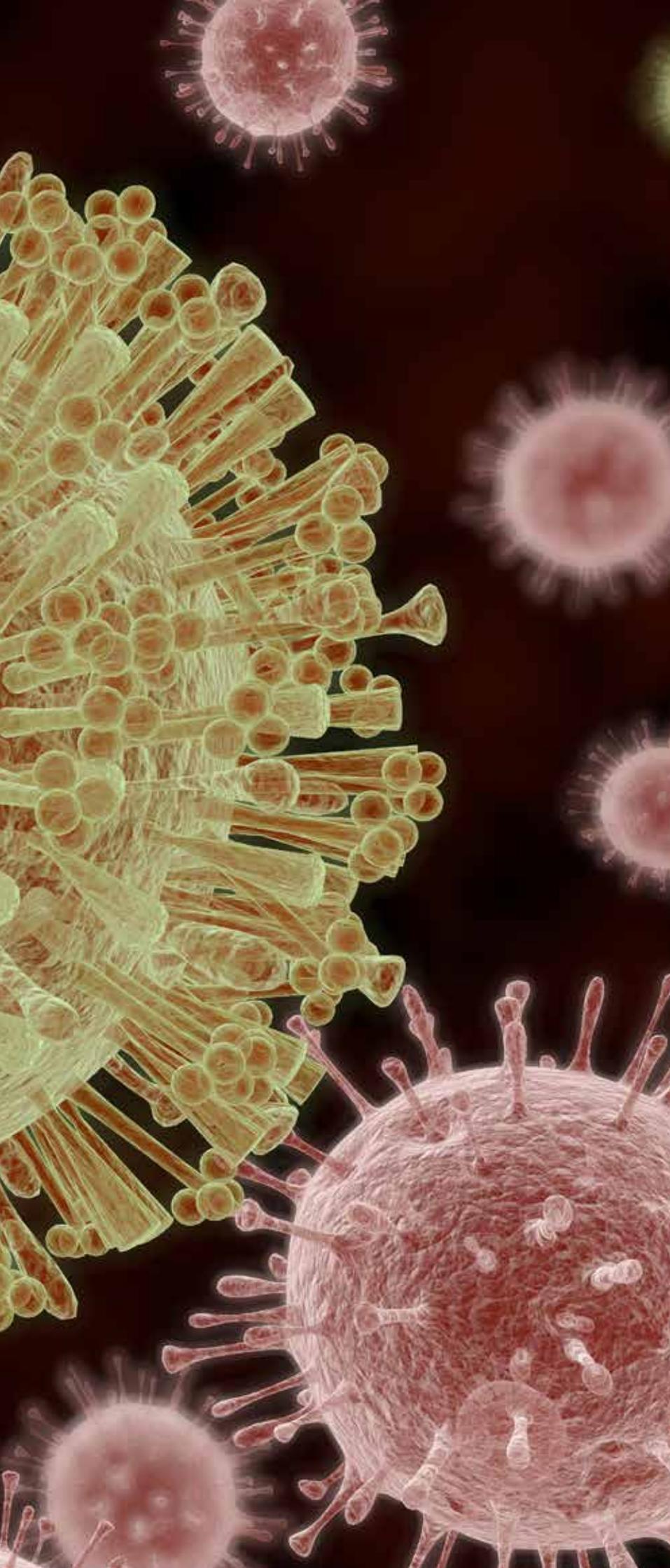
– difficult for women who are often very poor and not always in control of their fertility.

Early intervention and stimulation will help these babies to have the fullest possible lives. Providing emotional and practical support to the families will also help them to cope better – which is particularly important as I was told time and time again that these mothers are among the poorest of the poor. Zika, after all, is a disease of the most disadvantaged.

**Helping these families is not just our duty – it is also their right.**



*Hannah Kuper with mothers in Brazil*



## London International Development Centre appoints new Director

Professor Claire Heffernan is the new Director of London International Development Centre (LIDC). LIDC facilitates interdisciplinary research and training to tackle complex problems in international development. It brings together scientists from the University of London's Bloomsbury Colleges: London School of Hygiene & Tropical Medicine, Royal Veterinary College, SOAS and UCL Institute of Education.

LIDC membership is free and open to all alumni of LSHTM who are interested in international development. Details of how to join can be found on our website.



# How climate change is affecting your health

**“If things go on like this, in the coming years we may have a season without any rain,” says 45-year old Chikumbutso Patson Kayira, a Malawian farmer.**

Until recently, Mr Kayira’s land had been fruitful, yielding enough crops, such as maize, to feed his family, while leaving enough as extra for sale at the market. Within just five years, changes in rainfall and weather patterns have halved his yield.

## Changing climate, changing food

When many of us think about climate change, our minds naturally wander to gas emissions, increasing temperatures and melting ice caps that are causing sea levels to rise, but the consequences stemming from this run deep. Increasing heat and changing rainfall patterns will lead to a decrease in crops, then a decrease in nutrition, and an increase in stunting among children, particularly in the developing regions of the world.

“Providing food for the growing population in the face of these environmental changes will be one of the great challenges of our century,” says Sir Andy Haines, Professor of Public Health and Primary Care at the London School of Hygiene & Tropical Medicine.

## Healthier food, healthier planet

The consequences of the Western diet on health include a greater risk of obesity and other lifestyle diseases but, from an environmental perspective, the associated greenhouse gas emissions from producing these foods in high quantity are significant.

The Western diet is not the only one to blame though. Typical Asian diets, rich in rice grains, produce potent amounts of methane.

Dr Alan Dangour, Reader in Food and Nutrition for Global Health at the School, and his team at the School are researching how diets could be subtly improved.

In one study, his team have found that if UK diets were changed to meet WHO recommendations, greenhouse gases

could fall by an astonishing 17% from this change alone. As an added benefit, average life expectancy was shown to increase by eight months.

Dr Dangour’s team recently explored the situation in modern-day India.

“We’re trying to understand the greenhouse gas and water emissions associated with current diets in India,” said Dr Dangour who wants to use his data to help devise policy options for the Indian government.

As tropical countries increase in temperature, their agricultural production will suffer. This will ultimately have an impact on the availability and price of foods, and the ability of people to buy healthy, nutritious diets.

## Redesigning cities

Cities account for over 70% of greenhouse gas emissions, while housing over 50% of the world’s population and exceeding 85% in some countries.

There is a lot of interest at the moment about how cities should be designed, for example, whether they should be dense

# Royal visit to Commonwealth Eye Health Consortium programmes in Malawi

**Her Royal Highness The Countess of Wessex marked Commonwealth Week by visiting a hospital and school in Malawi to see activities to end avoidable blindness and champion young leaders.**

The Commonwealth Eye Health Consortium programmes are funded by The Queen Elizabeth Diamond Jubilee Trust and coordinated by the International Centre for Eye Health at the School.

The Countess, who is Vice Patron of The Queen Elizabeth Diamond Jubilee Trust, visited Lilongwe's Kamuzu Hospital to see how the Consortium is contributing to long-term capacity building for the delivery of quality eye care services. Her Royal Highness also travelled to the Kasungu district where she saw Trust-funded activities with the Malawian Ministry of Health and the International Coalition for Trachoma Control to eliminate blinding trachoma.

The Countess' visit comes at an exciting time in Malawi as the country reaches an historic milestone in its fight against blinding trachoma: from now on no one in Malawi need lose their sight from this ancient, painful infectious disease. The country is on track to meet by 2018 the World Health Organisation criteria where trachoma is no longer a public health problem and verification of elimination by 2020.

Professor Matthew Burton, Professor of International Eye Health and Commonwealth Eye Health Consortium Director, represented the Consortium during the Countess's visit to Malawi.

He said: "Malawi is making great strides in its efforts to increase eye care services and tackle avoidable blindness. The scholars and fellows the Countess met today are playing a key role in leading eye-health developments in the country.

"I am delighted that the Countess is so supportive of eye health and that she was able to see how our Trust-funded programmes are working to increase capacity and bring long-term and large-scale improvements through people, knowledge and tools."



and high-rise as this would facilitate active travel with people walking to work.

"There's been a lot of focus around making houses more energy efficient, but if you make the house too energy efficient and seal it up, you've reduced ventilation, then that can have unintended consequences [such as overheating]," says Dr Sari Kovats, a senior lecturer and Director of the NIHR Health Protection Research Unit in Environmental Change and Health at the School.

Dr Kovats admits the HPRU in Environmental Change and Health are addressing a somewhat more serious concern: flooding.

Decisions need to be made about flood defences and about what and where should be protected, meaning experts are required to value people and properties.

While people in the UK have extreme heat and extreme floods to worry about, Mr Kayira, may sit in hope of some extensive water to come his way to quench the thirst of his crops.

The need for change is urgent.



# GlaxoSmithKline establishes 30 new scholarships for students from sub-Saharan Africa

**GSK Scholarship Fund has been launched in recognition of the contribution Sir Andrew made to GSK during his tenure as CEO. The £1.3 million Fund was established in response to Sir Andrew's retirement and it honours his commitment to GSK and his dedication to addressing health challenges in the developing world, particularly Africa.**

The Scholars will be awarded annually to students from sub-Saharan Africa over a period of ten years, to match Sir Andrew's decade at the helm of GSK. The recipients will benefit from the training and development that the School is so well known for, standing them in perfect stead to take their places amongst the next generation of leaders in global health,

helping to strengthen capacity of health systems in Africa.



Alumni and Annual Giving team: Natasha Rodney, Alice Perry and Victoria Bennett

## Message from the Alumni Team

**Thank you to everyone who has taken part in recent alumni events and activities around the world. We now have over 30 active international alumni groups and our amazing Alumni Chapters have organised a record number of events – we are grateful to our fantastic network of volunteers for all the work they do. If you are interested in getting involved with your local alumni group or helping to set one up please do get in touch!**

There are many ways you can get involved and support the School. If you are passing through London please do come back to the School to give a lunchtime Career Talk to our students. These talks are fun and informal. If you are interested in finding out more please email [alumni@LSHTM.ac.uk](mailto:alumni@LSHTM.ac.uk).

A big thank you to everyone who completed the 2017 Alumni Survey. We asked you all for feedback on our communication, events and fundraising activities. People asked for more information about lectures and talks in London and around the world – we will

make sure we promote these events in our email newsletter. You asked for more information about lectures and talks in London and around the world – we will make sure we promote these events in our email newsletter. You also asked for video, we will relaunch our Youtube Channel with more talks and lectures, as well as other fun alumni videos. Look out for these on our website and in Alumni eNews. A significant number of alumni completing the survey also said that you would like to remember the School in your will. We have sent out further information about how you can make a legacy gift to support the School and ensure our pioneering work will continue for generations to come. Please do email [Victoria.Bennett@LSHTM.ac.uk](mailto:Victoria.Bennett@LSHTM.ac.uk) for more information about this.

Our alumni community have given over £200,000 to the School this year. The 2017-18 Alumni Fund raised money for scholarships for students from low and middle-income countries. This includes a full MSc scholarship for a refugee from Kenya or Uganda. These scholarships

transform lives and even small gifts to the LSHTM Fund (formerly called the Alumni Fund) make a big difference, so thank you all!

Finally, we really enjoyed meeting so many alumni throughout the year. If you are coming to the School please do stop by and say hello. There are lots of lectures at the School that alumni are welcome to attend. Also, drop us a line if you would like a tour of the School – we love giving tours to alumni and their friends and families.

Best wishes,

*Alice Perry, Victoria Bennett and Natasha Rodney*

# Alumni Events

Thank you to everyone who attended a recent alumni event. Information about all our forthcoming events are available online at [Ishtm.ac.uk/alumni](http://Ishtm.ac.uk/alumni). Highlights from the past year include:



Alumni & Students  
Networking Event

ASTMH Alumni Reception

Global Mental  
Health Jamboree



Graduation



One Health Lecture



Open House Afternoon Tea



Distance Learning Reception

# Alumni Chapters

Our international Alumni Chapters held over 50 events in the past year around the world. Thank you to all our amazing chapter volunteers and to everyone who took part in Chapter activities.



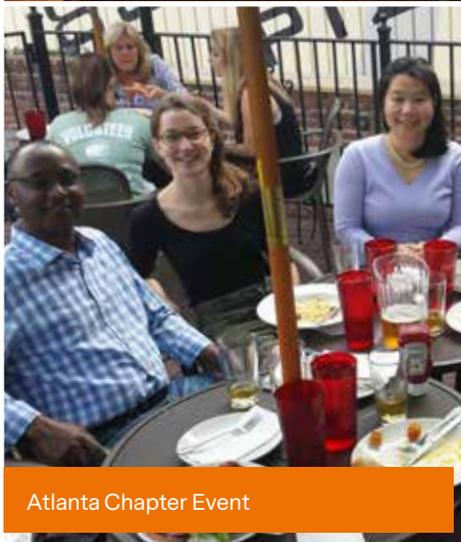
Washington Chapter Event



Athens Chapter Dinner



Vancouver Alumni Reception



Atlanta Chapter Event



Beijing Alumni Dinner



Boston Chapter Dinner



Paris Chapter Event



Laos Chapter Dinner



NYC Chapter Event

## Come join us in 2018



Dr Tedros with staff and students at LSHTM in July



Carissa Etienne

## Congratulations to our alumni

**This year we have received fantastic news of awards and achievements from our alumni network. In case you missed any of the announcements, here is a round-up of how of our alumni are being recognised around the world.**

On 16 February 2017, MSc in Medical Entomology (1996) and MPhil/PhD in Infectious and Tropical Diseases (2000-2006) alumnus, Dr Pablo Manrique won the British Council Alumni Award 2017 for Social Impact.

On 7 March 2017, MSc Infection & Health in the Tropics alumna (1996), Dr. Joy Pamela Rendi-Wagner was appointed Minister of Health and Women for Austria. Dr Rendi-Wagner has worked internationally as a scientist in the areas of infection epidemiology, vaccine prevention and travel medicine. Her achievements include setting up a network for nationwide epidemiological monitoring of major infectious diseases. As a result of her research, the recommended interval for tick protection vaccinations was extended from three to five years.

On 17 March 2017 MSc Medical Microbiology alumnus (1981), Professor Barry Cookson won the Royal College of Physicians' Excellence in Patient Care Lifetime Achievement Award 2017.

In April 2017, alumna Dr Celina Turchi was named one of the Time 100 Most Influential People for 2017. Celina is an infectious disease specialist who studied MSc Epidemiology at the School in 1991 and leads the Brazilian microcephaly research effort in partnership with LSHTM Professor Laura Rodrigues. Turchi's studies were part of an emergency investigation that ultimately proved that Zika does indeed cause microcephaly. We also celebrated the achievement of Dr Cesar Victora, PhD in Health Care Epidemiology alumnus (1983) who won the prestigious 2017 Gairdner Global Health Award.

On 23 May 2017 the World Health Assembly elected Dr Tedros Adhanom Ghebreyesus as the new World Health Organization (WHO) Director-General.

Dr Tedros, an MSc Immunology of Infectious Disease alumnus (1992), and an Honorary Fellow (2012) was selected from a shortlist that included two other candidates, Pakistan candidate Dr Sania Nishtar and UK candidate Dr David Nabarro who is an MSc Community Health in Developing Countries alumnus (1979), and Honorary Fellow (1999).

Prior to being elected as the next WHO Director-General, Dr Tedros served as Minister of Foreign Affairs, Ethiopia from 2012–2016 and as Minister of Health, Ethiopia from 2005–2012. He has also served as chair of the Board of the Global Fund to Fight AIDS, Tuberculosis and Malaria; as chair of the Roll Back Malaria (RBM) Partnership Board, and as co-chair of the Board of the Partnership for Maternal, Newborn and Child Health.

On the announcement of his new position, Dr Tedros received an outpour of support from the alumni community on the Alumni Facebook page and other social media platforms. He took time to thank the LSHTM community on Twitter for recognising his achievement.

Dr Tedros began his five-year term as WHO Director-General on 1 July 2017, succeeding Dr Margaret Chan who has been WHO Director-General since 1 January 2007.

On 23 May we received the news that PhD in Public Health alumna (2010) Dr Sylvia Struck was selected as one of 80 women who will be part of the Homeward Bound leadership initiative for women in STEMM (Science Technology Engineering Mathematics and Medicine) that culminates in a trip to Antarctica.

On 27 September 2017, MSc Community Health in Developing Countries (1982) alumna, Dr Carissa F. Etienne was re-elected for a second five-year term as Director of the Pan American Health Organization (PAHO) by the Member States of the organisation. The PAHO serves as the regional office for the Americas of WHO and is the specialized health agency of the inter-American system. Ministers of health meeting at the 29th Pan American Sanitary Conference voted

*Sir Alimuddin*



unanimously to re-elect Dr. Etienne. She will begin her second five-year term as Director of the Pan American Sanitary Bureau, PAHO's Secretariat, on 1 February 2018.

In addition, in September 2017, PhD (1983) alumnus Ahmed Mushtaque Raza Chowdhury won the Ronald McDonald House Charities (RMHC) US Medical Award of Excellence for his outstanding contributions to improve the health and well-being of children. We also celebrated the achievement of current research fellow, PhD student and MSc Public Health for Eye care (2009) alumna Priya Morjaria who won the esteemed World Congress of Optometry Paul Berman Young Leader Award.

In October 2017, it was announced that two out of the fourteen new appointees for the WHO Headquarters Leadership Team are LSHTM alumni. MSc Community Health in Developing Countries alumnus, Dr Ranieri Guerra has been appointed Assistant Director-General for Special Initiatives, and Dr Princess Nothemba (Nono) Simelela, a

*Cesar Victoria*



distance learning alumna from South Africa who studied for a Postgraduate Certificate in Global Health Policy, has been appointed Assistant Director-General for Family, Women, Children and Adolescents.

Read more about alumni awards and achievements on the Alumni Blog.

We love to celebrate and recognise the achievements of our alumni and we are so proud to see our mission of improving health worldwide in action through our alumni community.

**If you have an achievement that you would like to share on the Alumni Blog, please contact us at [alumni@lshtm.ac.uk](mailto:alumni@lshtm.ac.uk).**

*Sylvia Struck*



# Career Talks

Throughout the year alumni return to the School to give Career Talks to our students. These are fun, informal events where people talk about their work, offer tips and advice and answer questions from students.

Our students really value the opportunity to hear from alumni. If you would like to come to the School to give a Career Talk, or would like more information about what is involved, please email [Alumni@LSHTM.ac.uk](mailto:Alumni@LSHTM.ac.uk).

## Vanessa Kerry

MSc in Health Policy Planning & Financing (HPPF) alumna (2005), Vanessa Kerry gave a career talk to students in April. Vanessa Kerry is the CEO of Seed Global Health, a non-profit organisation that aims to strengthen education of healthcare professionals in low- and middle-income countries. Vanessa gave a talk to current students on her transition from a practising physician to leading an organisation of her own in order to help solve the shortage of trained healthcare staff in sub-Saharan Africa.

## Elizabeth Pisani

MSc in Medical Demography (1994) and PhD in Infectious Disease Epidemiology alumna (2006), Elizabeth Pisani was also invited to the School for a career talk. Elizabeth is a Public Health consultant, journalist and author. She spoke to current students about her career in epidemiology and science communications.

## Bobbi Pritt

In June, MSc in Medical Parasitology, Bobbi Pritt visited the School to give a career talk on her role as a Medical Director of the Parasitology Unit at Mayo Clinic. Bobbi took current students through real life case studies and tested their knowledge of parasites. She also gave them advice on how to build their reputation in their field using blogs and social media, and outlined the pathway to becoming a Medical Director.

You can read more about Elizabeth, Vanessa, Bobbi and our other Career Talks on our blog [www.blogs.LSHTM.ac.uk/Alumni](http://www.blogs.LSHTM.ac.uk/Alumni).



*Vanessa Kerry with students after her Career Talk*



*Bobbi Pritt giving her Career Talk*

# The Lancet Maternal Health Series: Global Research & Evidence

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**Every woman, every newborn, everywhere has the right to good quality care. This is the guiding message of The Lancet Maternal Health Series, published in September 2016. The six papers of the Series synthesise the last decade of evidence on maternal health worldwide and champion vital action on the path to 2030.**

With 210 million women becoming pregnant and the delivery of 140 million newborn babies each year, it is urgent to improve the quality of care and reduce disparities in access, thereby securing future economic and social development and supporting the vision of the 2030 Sustainable Development Goals (SDGs) and the Global Strategy for Women's, Children's, and Adolescents' Health.

## Free online course

Building on and extending the reach of the Series, in 2017 the School launched a free Massive Open Online Course (MOOC), bringing the wealth of learning in the Series to the next generation of maternal health researchers globally.

The Lancet Maternal Health Series: Global Research & Evidence presents a range of maternal health experts and evidence across disciplines including epidemiology, health systems, economics, advocacy, programming, obstetrics and midwifery. Using videos, articles, mini-lectures and discussions, the course will ask:

- What is the state of the world's maternal health and health care?;
- What is quality maternal health care, including 'too little, too late' and 'too much, too soon'?, and finally;
- What is the future of maternal health?

**The online course is free and open to all. For information about The Lancet Maternal Health Series: Global Research & Evidence, please visit [www.maternalhealthseries.org](http://www.maternalhealthseries.org) or email [lancetmaternal@lshtm.ac.uk](mailto:lancetmaternal@lshtm.ac.uk).**



# ALUMNI PRO

## Liberian Medical Doctor and Ebola Fighter

**Alumni and Annual Giving Administrator  
Natasha Rodney talks to Dr J Soka Moses**

Dr J. Soka Moses is a Liberian medical doctor and MSc Control in Infectious Diseases alumnus (2016) who worked in one of the biggest Ebola Treatment Units (ETU) in Monrovia, Liberia during the 2014 Ebola outbreak. In 2015 when transmission of the Ebola virus had significantly reduced, Soka enrolled onto the MSc Control of Infectious Diseases at the London School of Hygiene & Tropical Medicine, graduating from the programme in 2016. Soka shares his experience of working in Liberia during the Ebola outbreak, and tells us how his studies at the School are contributing to strengthening Liberia's health system post-Ebola.

"During the outbreak, I worked in one of the biggest Ebola Treatment Units (ETU) in Monrovia where more than 600 patients were treated. My proudest moments during the Ebola outbreak were always the discharge of survivors of the disease from the ETU and giving them hope for a new life again. The youngest of my survivors was a 4-month-old orphan. These survivors inspired me to return to the epicentre of the outbreak every day."

"In 2015 when transmission of the Ebola virus had significantly reduced, I knew that I needed to obtain the best training available in public health and infectious disease epidemiology to contribute to health system strengthening in Liberia post-Ebola. The London School of Hygiene & Tropical Medicine has achieved a reputation as the global leader in public health. Its professors and staff are conducting cutting-edge biomedical research, while at the same time implementing high impact public health programmes and collaborations to improve global health. More recently, LSHTM staff, alumni and students worked with us in Liberia during the Ebola response, and the School even started a free online course on Ebola to help the Ebola response. The School was therefore the natural choice."

"When I started at the School, I had just completed 14 months of intensive and exhausting work during the Ebola response in my home town of Monrovia. The year I spent at the school was an exciting experience that offered some really unique opportunities. I made great friends and built relationships. It is amazing how we bonded very quickly in spite of the multicultural diversity; life in London became enjoyable and the relationships I made continue to get stronger."

"My tutor, Professor Jimmy Whitworth, was very supportive and was always willing to make time for me even on short notice. The library at the school offered a calm and beautiful research experience. My time in the beautiful and friendly city of London became a memorable period of my life."

"There is so much happening in my country now to strengthen the health system. The MSc in Control of Infectious Diseases has given me the skills to contribute to this process. Currently, I work with Liberian researchers and globally renowned research scientist from NIH and the NIH: National Institute of Allergy and Infectious Diseases (NIAID) to conduct innovative epidemiologic research to understand the chronic sequelae of EVD faced by survivors of the disease. This cutting-edge research will provide a new understanding of the epidemiology and biological risk factors associated with EBOV persistence in body fluids of male EVD survivors and sexual transmission of EBOV."

"I have led public health activities on semen testing and safe sexual behavioural counselling of male EVD survivors to mitigate the risk of re-emergence of the outbreak through sexual transmission. The information generated is very important in supporting public health services for Ebola survivors. I heard that the Zika response is now following the same public health model to test semen. Our work is having an impact on the health of thousands of communities. Thanks to the training



# FILE



at the School, I can work to generate and use evidence to improve public and global health.”

“I have learned that with some support from health workers in Liberia, health workers in Sierra Leone will be able to improve the quality of care they provide. Indeed, the last sporadic cases of EVD were contained without secondary transmission, thanks to the training and support we received from colleagues internationally.”

“Infectious disease outbreaks can happen anytime, anywhere and can affect anyone, whether affluent or poor, young or old. A poorly prepared health workforce, and lack of the appropriate public health systems early in the response were big challenges. When the health system was fragile, a containable disease became an epidemic with devastating effects on human lives, the economy and public systems. We must strengthen our local capacity, public health systems, and community participation.”

“My ambition is to become a leader in global health and epidemiology of infectious diseases. My interest is cross-cutting; including other hemorrhagic viral fevers (Lassa and Yellow fever), Hepatitis B virus infection and HIV/AIDS and antimicrobial resistance (AMR), all of which are major issues facing my Country. I intend to pursue a DrPH at the London School of Hygiene & Tropical Medicine. This additional training will solidify my skills to achieve my professional interests and goals. My goal moving forward is to continue to support health system strengthening to prevent epidemics in the future in Liberia and other parts of Africa and support information sharing and awareness, capacity building and engage in cross-border collaborative research and epidemic intelligence.”

“The School is the global leader in public health, epidemiology and tropical medicine. My advice to current students is to seize this privileged opportunity to tap into the rich wealth of knowledge at the school, try to create relationships with other students and professors in the School and become part of the growing niche of public health champions in the world. Each student and professor in the school brings a unique and rich perspective, which further adds to the learning experience.”

Dr Moses’ story is part of a new documentary film by award winning Director Janet Tobias. The film examines the reasons why 21st-century populations are experiencing a rash of diseases that were once only outbreaks, but have now become full-blown epidemic and features contributions from School staff including Professor Peter Piot and Dr Heidi Larson.





# In focus:

## Health Economics and Systems Analysis Group

Since 2006, staff in the School's Health Economics and System Analysis Group (HESA) have been tracking aid flows to reproductive, maternal, newborn and child health as part of the Countdown 2015 initiative.

The initiative was established to monitor countries' progress towards Millennium Development Goals 4 and 5 in relation to mortality, service coverage, equity and financing. Donors made pledges to increase funding to the countries with the highest burden of maternal and child ill health. To assess progress towards meeting these goals, HESA have tracked disbursements reported by donors to the Creditor Reporting System maintained by the Organisation for Economic Co-operation and Development.

In 2003 work began on tracking 'official development assistance' disbursements to maternal, newborn and child health.

In 2009, the exercise was expanded to include reproductive and sexual health and disbursements of private grants from the Bill and Melinda Gates Foundation. As part of the process:

- Projects were manually coded based on descriptive information provided by the donors, using a pre-defined framework.
- Records from all aid sectors were analysed to ensure identification of all relevant funding.
- A separate framework was developed to categorise records mentioning prenatal and neonatal health (PNH) in greater depth.
- The approach also enabled the breakdown of resources by funding type (i.e. general budget support, health sector budget support, basket or pooled funding, or projects), activity type for projects (e.g. nutrition, immunisation) and by beneficiary group.

The team have also studied whether aid to reproductive, maternal, newborn and child health adheres to principles of aid effectiveness, specifically of alignment and harmonisation, examined aid flows to Latin America and the Caribbean and to family planning.

# Alcohol, health harms and new laws in Tanzania

On 1 March 2017, the government of Tanzania banned the production, marketing and sale of alcohol sachets, also known as viroba. The (in)famous sachets made it cheap and easy for consumers, including school students, to access alcohol and carry it around unnoticed. The ban cited a number of harmful factors associated with sachets, focusing in particular on environmental damage from discarded packaging and the multiple risks that result from under-age drinking.

Contributing to the evidence base underlying the new law were a number of studies conducted through the School-led STRIVE consortium, funded by DFID/UKaid to tackle the structural drivers of HIV. Researchers from STRIVE partner organisations in Mwanza – the National Institute for Medical Research and the Mwanza Intervention Trials Unit – have produced:

- a systematic review and meta-analysis of the prevalence of alcohol use among young people in eastern Africa
- evidence and analysis of the epidemiology of alcohol use and related disorders among young people in northern Tanzania
- a validated tool to measure alcohol dependence in young people
- social science research into the production and targeted marketing of the sachets and their harmful impact on Tanzanian young people's drinking norms and health risks
- geographic mapping of the density of alcohol venues close to schools and youth centres
- participatory photo-voice research by young people themselves to document the nature and intensity of alcohol marketing and pricing that targets them, and the impact of harmful drinking on their families and lives

More broadly, research by Mwanza and London School colleagues are contributing to developing a health-oriented national alcohol policy in Tanzania – a complex and contested process indeed. The humble sachet epitomises the conflict between the alcohol industry's drive to create new consumers (particularly among women and youth) and government efforts to secure the health and well-being of the next generation.

## Message from the Students

**The Students' Representative Council has financed and supported the student take-over of the pumphandle bar within Keppel Street. This has provided students with an individual space and social space within the school.**

SRC used funds to support/assist with organising student-led activities, which include:

- Missing-maps parties- four events to date where students add geographical details to satellite images for NGO's
- LGBT event, which promoted inclusivity within the school.
- UN-WHO event where students participate in a senate debate.
- TEDx- talks organized by students.

We also organised a range of social events include parties, Karaoke night, a Ceilidh dance and a Christmas at the park event.

This year we worked closely with the career and alumni offices to enhance the programming and to lay the groundwork for future plans.

Based on feedback from students, the career fairs at the school were diversified further beyond medical practitioners to reflect the plurality of fields that students are pursuing. Please do consider advertising any opportunities via the school!

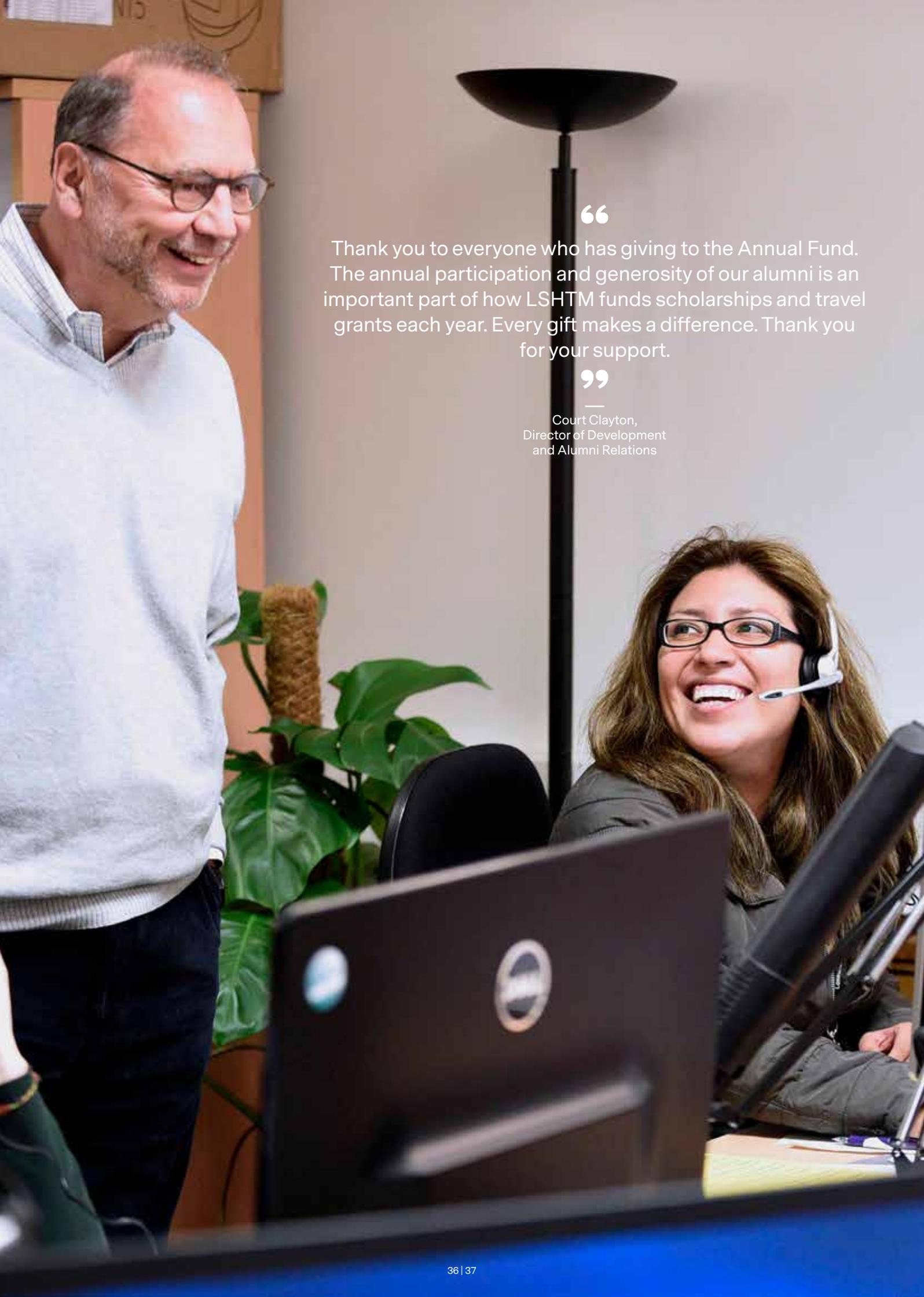
In addition, lunchtime career talks by alumni were very popular as a more informal way for students to gain insight into particular career paths. Please do get in touch if you would be willing to share your experience with students in this way or want to nominate another alum to do so!

In the spring, an evening networking event for students and alumni had great success! More to come so do keep an eye out!

It has been a very busy and enjoyable year for the SRC and we would like to take this opportunity to thank alumni and the Alumni Relations and Annual Giving Office for all the support and provision for student events/opportunities over the past year.



*The SRC Executive with Professor Peter Piot*



“

Thank you to everyone who has giving to the Annual Fund. The annual participation and generosity of our alumni is an important part of how LSHTM funds scholarships and travel grants each year. Every gift makes a difference. Thank you for your support.

”

—  
Court Clayton,  
Director of Development  
and Alumni Relations

# Thank you

## Even small gifts make a big difference

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My Scholarship has helped me grow as a young scientist. Having graduated from my Master's degree with distinction, I am now studying for a Doctoral degree on immune responses against Influenza vaccination in Hong Kong. In the future, I hope to continue making contributions on vaccine design against infectious diseases of public health concern. I have been very fortunate to receive the Helena Vrbova scholarship and I am extremely grateful to it for advancing my career goals.

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Athena Li  
MSc Immunology of Infectious Diseases (2015)

Thank you for your generous scholarship, which enabled me to be the first Palestinian to have the degree of MSc in Public health for Eye Care, from the School. My graduation project was related to cataract, the main cause of blindness, in Palestine. I proudly graduated with a distinction and two prizes, the Hooper prize for best dissertation, and the Gordon Johnson prize for best academic performance. I'm excited about the coming journey, and how I might be able to contribute to eye health in my region. Thank you for your support, and for making this all possible.

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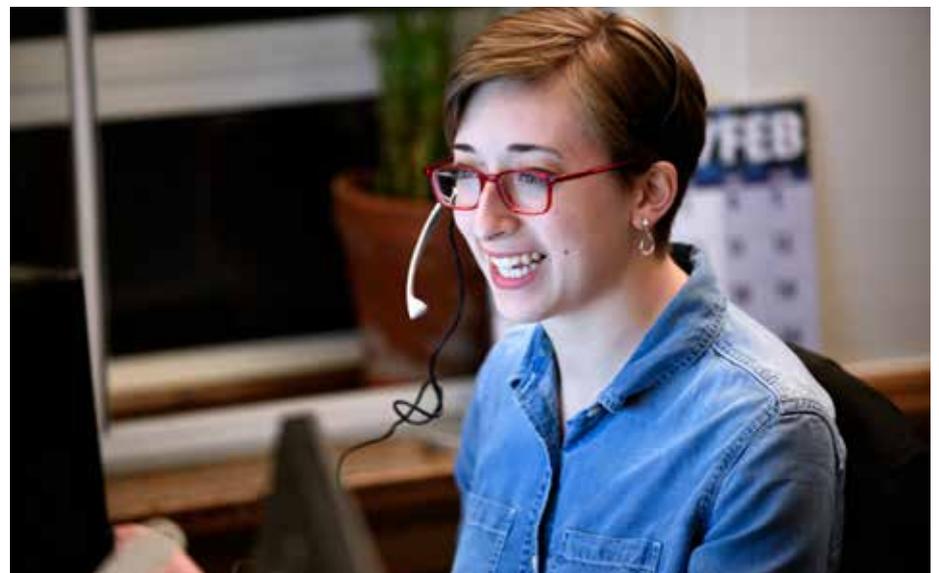
Ranad Maswadi  
MSc Public Health for Eye Care (2016)

To even in a small way follow in the footsteps of Rockefeller in his vast donations to LSHTM and the eradication of Yellow Fever in the Southern States of America is special. The School work contributes to the reduction in the global burden of disease amongst the poorest and most vulnerable people. I am very glad to be a small part of that.

---

Charlie Easmon  
Public Health alumnus and First 500 member

*Students calling alumni for the 2017 fundraising appeal*



# GIVING CIRCLE MEMBERS

Thank you to all the alumni and giving society members who have given to LSHTM in the last financial year.

Members of the First 500 make annual gifts of between £500 and £9,999. Members of the Director's Circle make gifts of £10,000 plus a year.



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# ALUMNI PROFILE

Professor Frank Cox

**Professor Cox's relationship with LSHTM can be traced all the way back in the 1950s, when he came to the School to do work experience in the Parasitology Department.**

"I was 17 years old and I had a wonderful time. The idea was that we would do all the work that they didn't want the technicians doing, cleaning slides and microscopes, filling bottles, that kind of thing. I went from school into the army and I had planned to read medicine but after the army I had a year off and returned to the School to work as a technician. Whilst there, I decided that medicine wasn't for me but that a career as a scientist was. After completing my degree at Exeter University I had hoped to do my PhD with the eminent parasitologist Professor Garnham but he persuaded me to do the Diploma in Applied Parasitology (now a Master's course), which was run conjointly with the Diploma in Tropical Medicine and Hygiene. It was the most amazing year of my life. I made wonderful friends, not just with students but also staff, there was no division, everyone mixed together and we'd meet in the labs and have coffee together in the washing up room.

At the end of the year an Assistant Lectureship in Parasitology came up at King's College. I felt that I didn't have enough experience but Professor Garnham really pushed me and must have given me a fantastic reference as I got the position! Alongside my role at Kings I began my PhD, formally at King's but Professor Garnham supervised my studies at a distance. I visited the

School regularly and made yet more connections that have lasted a lifetime, including with C.P Ramachandran who has been the greatest of friends throughout my life. I progressed to Professor whilst at King's but my links to the School stayed strong and at the invitation of Professor David Bradley I returned as a Senior Research Fellow, staying for 15 years. During the latter part of this period I wrote and organised modules and taught on the distance learning MSc Infectious Diseases, teaching thousands of marvellous students."

Although technically retired Professor Cox continues to give lectures at Gresham College, where he is a Fellow, and he still publishes academically. His most recent paper, on guinea worm, written with School Professor Sandy Cairncross, was recently published in the journal Parasitology.

As well as his continuing academic contribution to the School Professor Cox is also a dedicated philanthropic supporter of the School.

"A huge part of my life has been tied up with the School, it has been a line that runs through my career, it is where I have made the best of friends, and I feel that I owe so much to it. This is one of the reasons I decided to remember the School in my will. There are so many ways in which I am grateful to the School and leaving a legacy enables me to recognise that. I am also member of the First 500 Giving Circle, which is another way I can show my gratitude to the School."



If you would like to find out more about remembering the School in your will please email [Victoria.Bennett@LSHTM.ac.uk](mailto:Victoria.Bennett@LSHTM.ac.uk).



*Steve Lawn after running the London Marathon*

## Fundraising Round-up

**The Steve Lawn Memorial fund was set up to commemorate the life and work of Professor Steve Lawn, who died in 2016 from a brain tumour. In March, the first Steve Lawn Memorial Lecture took place in London and in Cape town. The fund has raised over £50,000.**

In April, Paul Mee, a research fellow at the School, ran the London Marathon in honour of Steve and raised money for the Steve Lawn Memorial fund. Paul raised over £2000. Well done Paul!

Heather Machin walked the Camino Way for Ophthalmic Nurses, raising money to translate the Community Eye Health Journal into Chinese, Vietnamese, Spanish, French, Portuguese and Arabic.

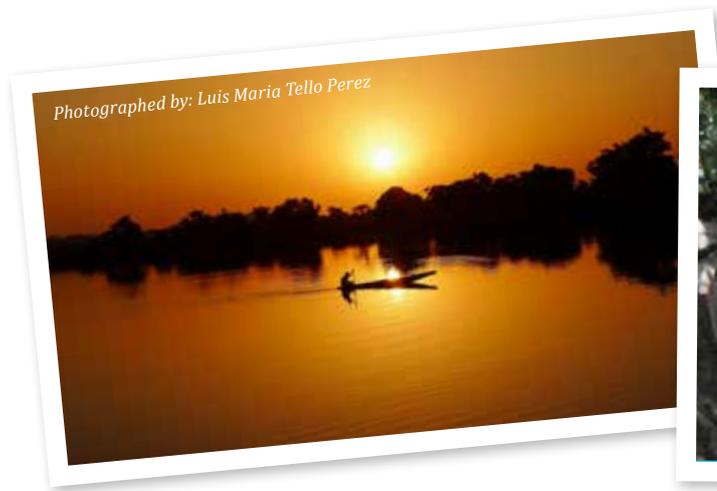
Each year the School takes part in Giving Tuesday, a Global Day of Giving. The Last Giving Tuesday included a variety of events, on campus and online. Staff and Students at the School baked a range of wonderful cakes, and the School community helped us to raise £1300 for the Scholarship fund. Thank you to everyone to gave - we can't wait for this year's Giving Tuesday.

If you would like to run a marathon, bake cakes or fundraise in any other way for the School, please get in touch with us and email [Alumni@LSHTM.ac.uk](mailto:Alumni@LSHTM.ac.uk).



*Paul Mee running the marathon in memory of Steve Lawn*

# “Let’s Face It”



## 2017 Alumni Photo Competition

The 2017 Alumni Photo Competition with the theme “Let’s Face It” closed at the end of May. We received over 40 entries that show cased the variety of experiences our alumni encounter on a daily basis.

The quality of entries was excellent and we are pleased to announce that this year’s winner is Diploma in Tropical Medicine & Hygiene (DTMH) alumnus (2016), Dr Alexander Kumar with his striking image “Love in the time of Zika”.

Alexander said: “Love in the time of Zika - where there is love, there is hope. I took this image while on a research visit to a neurological rehabilitation centre in North East Brazil. Loving mother Anacarla cradles her baby boy Jose-davi affected by Zika-microcephaly. The true burden of the cognitive impairment associated with Zika-microcephaly is still yet unknown and will challenge Brazil’s public health

system requiring a multidisciplinary effort to overcome these challenges. A colouring book with Peter Pan on its cover sits in the foreground.”

MSc in Control of Infectious Diseases alumna (2016), Katina Zeligman-Sommers is our first runner up with her photo entitled “Facing Trachoma”. Katina said: “This young girl takes part in the daily washing routine, common before leaving the compound, in rural Ethiopia. In this region of Oromia trachoma prevalence rates are upwards of 40% in children aged 1-9 years”.

DTMH alumnus (2006), Dr Dan Wiklund is our second runner up for one of his images entered in a series entitled “Faces of NGO Medical Work”. Dan said “[we’ve worked] in 150 countries since 1985 and [we] just finished our 20th medical

outreach in Cameroon where over those years we have seen in this single country over 100,000 patients; pulled nearly 15,000 decayed, painful teeth; dispensed over 16,000 glasses; performed some 500 surgeries; and, hopefully saved from death hundreds of children from Malaria, Onchocerciasis, Leishmaniasis, Typhoid and innumerable other infectious diseases. No research yet has evaluated the benefit of non-governmental organizations impact on global health. Every year thousands of NGO’s are doing work in hundreds of countries”.

Thank you to everyone who entered this year’s competition. Entries will feature in School publications, website and other materials to showcase the inspiring work of our alumni community.



Photographed by: Dan Wiklund



Photographed by: Luis Maria Tello Perez



Photographed by: Thomas Hanscheid



Photographed by Ella Glass



Photographed by: Alexander Kumar



Photographed by: Foluso Hafeezat Ishola



Photographed by: Gracia Fellmeth



Photographed by: Thomas Hanscheid



Photographed by: Nikita Sahgal





## Working towards curing ME

**Myalgic Encephalomyelitis (ME), otherwise known as Chronic Fatigue Syndrome (CFS), causes severe and debilitating fatigue with painful muscles and joints, disordered sleep, gastric disturbances, and poor memory and concentration among other symptoms. In many cases, a viral infection, such as glandular fever, is linked to the onset of ME, although a definitive cause is yet to be discovered.**

Many people are unaware of the existence of ME/CFS, yet it is estimated that up to 250,000 people in the UK are affected by this illness. Some people have thought of it as psychological in origin or representing general tiredness, however, ME/CFS is a

long-term and disabling medical condition characterised by severe and overwhelming fatigue. People with ME can experience extreme disruptions to their everyday life. Some are unable to work or undertake the physical activities of everyday living without collapsing. Social life is affected as a result of being unable to get involved in events and outings, which can lead to isolation, detachment, and in some cases, depression.

There is cynicism around ME and often people are not given appropriate support from healthcare systems or family and friends, who may not understand the condition and its severity. It is therefore vital that we find a biological marker for ME/CFS

so that we can progress towards developing a robust diagnostic method, and seeking effective treatments.

At the London School of Hygiene & Tropical Medicine, we are driving clinical and biomedical research for recognition, diagnosis and treatment of ME/CFS. We are home to the UK ME/CFS Biobank, which functions as an open resource for research leading to the discovery of biomarkers for the diagnosis prognosis and stratification (sub-grouping) of cases, and the facilitation of a wide range of research studies now and in the future.

Read more: <http://cureme.lshtm.ac.uk>



# A Three-Minute PhD

Imagine if you had to communicate your summer research project or PhD thesis in just three minutes to a general audience. What would be the important messages? How would you choose what to leave out? Could you make it relatable to your audience? This is the challenge of Three Minute Thesis (3MT<sup>®</sup>), an academic communication competition for research degree students that was developed by the University of Queensland, Australia and is hosted in the UK by Vitae.

This is the third year that the School has taken part in the competition. Five research degree students from all three Faculties progressed to the School final, after surviving a round of semi-final heats. They shared their interesting and relevant research on diverse topics that included breast cancer, nutrition and diabetes.

The winner of this year's competition was Simon Kigozi from the Faculty of Infectious & Tropical Diseases with his talk titled "Malaria Wildfire: Map it to Control it". Simon will represent the School in the National competition. Simon's research seeks to map the regional differences in malaria burden across Uganda, effectively targeting resources to the most vulnerable populations.

Awarded the 2nd place prize was Abda Mahmood from the Faculty of Epidemiology & Population Health with her talk titled "Time lost is brain lost". Abda's PhD is part of a large clinical trial looking at whether a drug that prevents blood clots from breaking down (tranexamic acid) can save the lives of patients with head injuries, and how quickly the drug should be administered to reduce bleeding without increasing the risk of stroke.

Participating in 3MT helps research degree students hone vital presentation and communication skills and gain confidence in speaking about their research as well as the opportunity to share their research more widely. On its relevance to the PhD process, Abda said: "I think it is important for research degree students to learn to communicate effectively with a general audience because talking simply and clearly about our research could help focus our research questions. We often do research with the hope of impacting the general public so we should be trained in how to disseminate our research effectively to a general audience".



Staff and students taking part in the Three Minute Thesis.



# Celebrating 20 years of the Diploma in Tropical Nursing

We are delighted to announce that in spring 2018 we will be hosting a very special event to celebrate the 20th Anniversary of the Diploma in Tropical Nursing.

Since its inception the Diploma has gone from strength to strength, we currently teach 130 nurses a year, and have thousands of alumni across the globe. The Diploma in Tropical Nursing prepares nurses and midwives to work in tropical and resource poor settings. Our students travel from all over the world to study with us and on graduating take the expertise they have gained at the School back to the communities in they work in, or further afield.

Programme Director Dame Claire Bertschinger said: "At this special anniversary celebration there will be the opportunity to meet current students, hear from alumni and meet many of the people so invested in the development and success of this programme. We do hope to see you there."

Further details for this exclusive event will be announced in Alumni Enews. If you do not already receive this please contact [alumni@lshtm.ac.uk](mailto:alumni@lshtm.ac.uk) to be added to the mailing list.

Save the date:  
11 May 2018



## American Friends of LSHTM

Alumnus Lauren Hall has joined the Board of the American Friends of LSHTM. Lauren is a graduate of Harvard University and the School (MSc AMBID, 1993). She has worked in biotech in South San Francisco and sits on the boards of the Fine Arts Museums of San Francisco and the Corporation of the Fines Arts Museums of San Francisco. She was also formerly on the boards of the Friends of Parks and Recreation, the San Francisco Parks Trust, We Teach Science and Friends of Safari West and active on committees at the California Academy of Science.

Lauren is married to David Hearth, an attorney, and has two children, a son Sumner, who works for Google, and, James, who is about to start his gap year volunteering in a hospital in Kenya.

Lauren replaces Dr David Hill, Professor of Medical Sciences at Quinnipiac University, who retired from the Board after ten years. The School welcomes Lauren and thanks David for all his service.



.....  
Lauren Hall

# Benefits of GP-based testing for HIV

Offering HIV testing to people at health checks when they register at a new GP surgery in high-prevalence areas is cost-effective and will save lives, according to new research published in *The Lancet HIV*.

Following a study was led by the School and Queen Mary University of London, researchers are calling on UK healthcare commissioners to invest urgently in the roll out of HIV screening to all 74 high HIV prevalence local authorities in England (those with more than two diagnosed HIV infections per 1,000 adults).

Dr Rebecca Baggaley, lead author of the study and Honorary Assistant Professor at the School, said: "Thousands of people in the UK do not know they have HIV. This means they don't have access to drugs to fight the virus, and of course they can still pass HIV on to others. Our study showed that over 40 years, primary care-based HIV screening in high prevalence areas would give value for money to the NHS and its patients. In these parts of England, HIV tests should be routinely offered during the standard check-up given to people when they join a new GP surgery."

The study examined data from an earlier research trial in Hackney - a socioeconomically deprived inner London

borough with an HIV prevalence rate of 8 per 1000 adults. The trial involved 40 general practices where they tested the effect of rapid fingerprick HIV testing as part of the standard health check during registration. They found it led to a four-fold higher HIV diagnosis rate from screening.

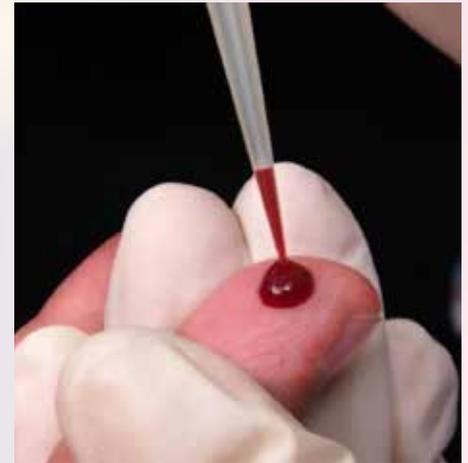
The estimated annual cost of rolling out the screening programme to all 11 Hackney-level HIV prevalence authorities would be approximately £600,000 (£4 million for roll-out to all 74 high prevalence authorities). This does not include increased healthcare costs resulting from earlier HIV diagnosis and treatment which would fall under other NHS budgets.

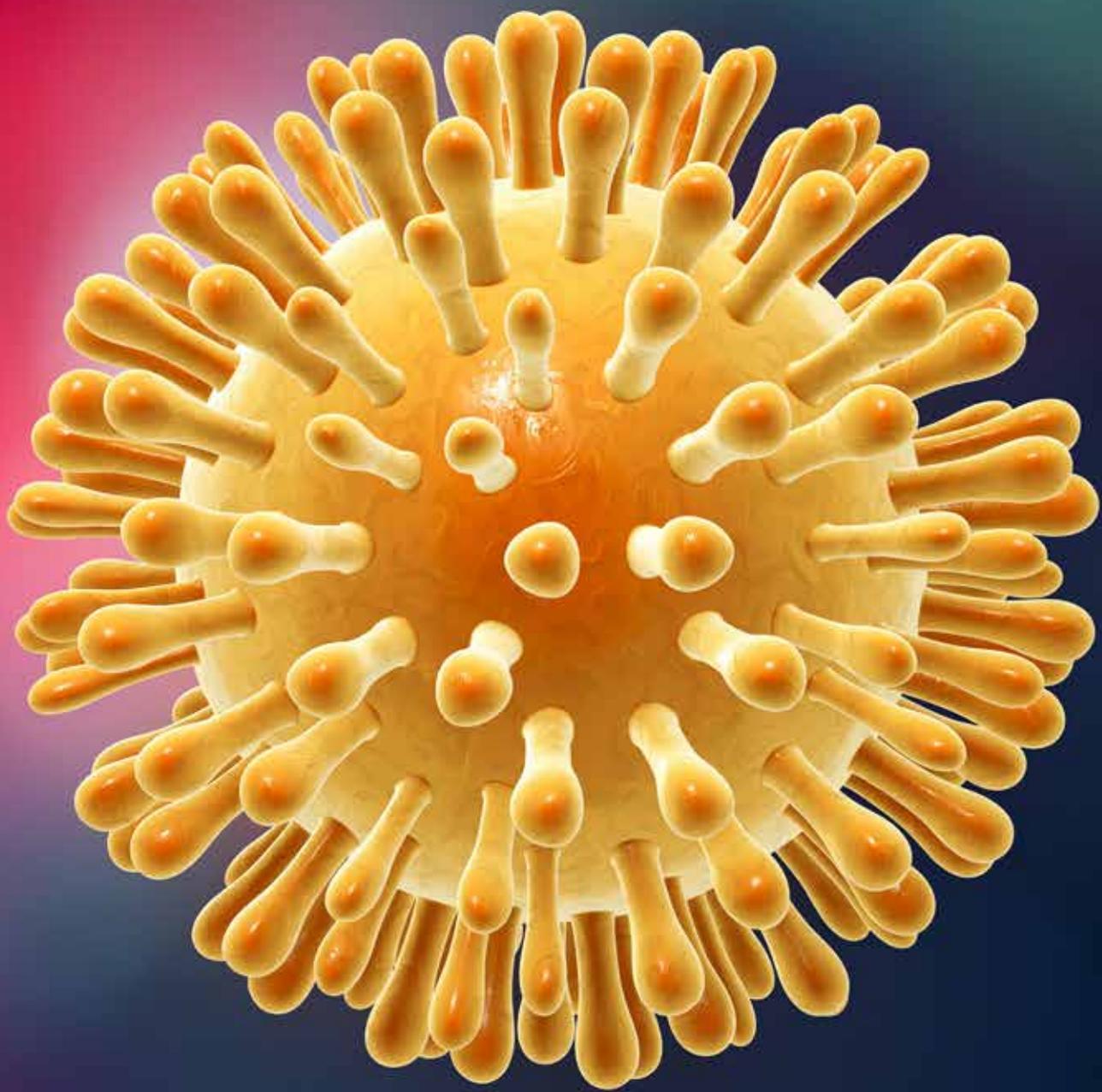
Dr Werner Leber from QMUL said: "We've shown that HIV screening in UK primary care is cost effective and potentially cost saving, which is contrary to widespread belief. This is an important finding given today's austerity. Financial pressures, particularly within local authority's public health budgets, mean that the costs of HIV testing are under intense scrutiny, and in some areas investment in testing has fallen."

The authors acknowledge limitations of the study including on some of the data, such as the probability of viral transmission to partners and quality of life, which have been

estimated based on international literature and may therefore not accurately reflect the Hackney situation.

The study was funded by NHS City and Hackney and UK Department of Health, and involved University College London, Homerton University Hospital NHS Foundation Trust, University of Warwick, and University of British Columbia.





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