

As World Health Organization, drug companies meet

Why is there no vaccine for Ebola?

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The chief executive of the World Health Organization met with representatives of major drug manufacturers in Geneva Thursday to discuss efforts to develop a vaccine for the Ebola virus. The meeting took place as the number of confirmed victims of the outbreak in Liberia, Sierra Leone and Guinea topped 10,000, with nearly 5,000 deaths.

The disease has penetrated a sixth country in West Africa, with a single case reported in Mali. There have been isolated cases in Senegal and Nigeria, but health authorities in both countries claimed to have halted the outbreaks with only a handful of deaths.

A fourth US Ebola victim was reported Thursday, when a doctor at Columbia-Presbyterian Hospital in New York City, who had been working as a volunteer in West Africa for Doctors Without Borders, came down with a high fever and was quarantined for treatment.

According to press reports, the European Union has agreed to finance clinical trials of a vaccine, earmarking \$31 million for research. The drug companies were focused on their bottom lines, insisting on limiting liability for any potential damage if a vaccine is rushed into production with less than normal testing.

Andrew Witty, CEO of GlaxoSmithKline, told the BBC, "I think it is reasonable that there should be some level of indemnification because the vaccine is essentially being used in an emergency situation before we've all had the chance to confirm" that it is safe to use.

Other top executives in attendance included Charles Link, the CEO of Iowa-based NewLink Genetics, and Paul Stoffels, chief scientific officer and worldwide chairman of Johnson & Johnson. Both companies have vaccines in development.

The WHO said Tuesday that two vaccines would be tested in large-scale studies in Liberia, Sierra Leone and Guinea, the three countries that are the focus of the epidemic, beginning in January. One was developed by the US National Institutes of Health and GlaxoSmithKline, the other by the Public Health Agency of Canada and NewLink.

The process is slow compared to the speed of propagation of the disease, with preliminary results likely by the end of 2015.

Three other vaccines will begin safety testing for possible side effects in the first quarter of 2015, using healthy volunteers outside the Ebola zone.

These discussions are overshadowed by two US press reports that demonstrate the role of the drug companies in blocking any progress on stopping Ebola for the past 15 years because they saw no way to make a profit from a vaccine for a disease that killed only poor African villagers.

The *New York Times* article was published October 24 under the headline, "Ebola Vaccine, Ready for Test, Sat on the Shelf." It reported that Canadian and US scientists several years ago developed a vaccine that was 100 percent effective in protecting monkeys from Ebola. "The researchers said tests in people might start within two years, and a product could potentially be ready for licensing by 2010 or 2011," the *Times* said.

"It never happened. The vaccine sat on a shelf. Only now is it undergoing the most basic safety tests in humans with nearly 5,000 people dead from Ebola and an epidemic raging out of control in West Africa."

The article noted that the development of the vaccine to the monkey-trial stage cost only a modest amount, but comprehensive trials of effectiveness and safety in humans, plus the development of manufacturing techniques to produce sizeable quantities of vaccine,

would cost up to \$1.5 billion.

“Most drug companies have resisted spending the enormous sums needed to develop products useful mostly to countries with little ability to pay,” the *Times* continued.

The vaccine in question was patented by the Canadian Public Health Agency and is now being developed for human use by NewLink Genetics.

Five days before, on October 19, the *Wall Street Journal* published an equally devastating indictment of the pharmaceutical industry, profiling the work of Dr. Nancy J. Sullivan at NIH, who worked on the other most-promising vaccine candidate, now being brought to market by GlaxoSmithKline.

Sullivan began working on Ebola in 1997, after a 1995 outbreak in Zaire, and by late 1998 had developed a vaccine candidate that the Centers for Disease Control tested on monkeys, confirming 100 percent success by July 1999. According to the *Journal* account, “Unvaccinated monkeys became sick and died within about a week. The four vaccinated monkeys had no detectable virus—something science had never before accomplished.”

The results were published in the prestigious journal *Nature* in 2000. But the pharmaceutical industry was not interested in developing an Ebola vaccine. The *Journal* account explains why: “The recently retired chief of vaccines at Merck & Co. said ‘there’s no market for this.’ The Wall Street Journal wrote of ‘the relatively tiny risk posed by Ebola.’”

These accounts demonstrate that there is no Ebola vaccine today, even though the virus has been analyzed systematically for several decades and promising initial steps were taken in government research laboratories, because the private drug monopolies that control the development and manufacture of vaccines did not find it profitable.

This underscores the fact that the 5,000 deaths from Ebola in West Africa were completely avoidable. The blood is on the hands of Merck, Pfizer, Glaxo and the other multinational companies which have a vampire-like grip on the production of all forms of medication vital for public health care.

The various governments that act as agents of the drug companies—in the US, Britain, Germany and other imperialist countries—are equally culpable.

Meanwhile, the impact of the Ebola outbreak in West

Africa is so dire that public health measures alone may prove insufficient to stamp it out. The WHO warned Tuesday that 19,000 doctors and nurses would be needed by December 1 in the region, compared to less than a thousand today, along with 500 burial teams, compared to only 50 now in operation.

Dr. Anthony Fauci of the NIH warned that a vaccine may prove to be the only viable means of fighting the Ebola outbreak. Tragically, that would mean millions of deaths during the period that the long-delayed vaccine is developed into a usable medication capable of mass production.



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