



**THE UNITED REPUBLIC OF TANZANIA
MINISTRY OF HEALTH
NATIONAL INSTITUTE FOR MEDICAL RESEARCH**



PRESS RELEASE

**NEW HOPE FOR MALARIA TREATMENT AS TANZANIAN SCIENTISTS LEAD
GROUNDBREAKING CLINICAL TRIAL**

The National Institute for Medical Research (NIMR), through its Tanga Medical Research Centre under the leadership of Principal Investigator and Country Coordinator Dr. Samwel Gesase, has played a key role in a landmark multi-country Phase III clinical trial of KLU156 (GanLum), a next-generation malaria treatment developed by Novartis. The KALUMA trial was implemented across 34 sites in 12 African countries, including Muheza and Korogwe in Tanzania, enrolling 1,688 patients.

Results from the trial show that GanLum performs as well as or better than the current standard treatment for uncomplicated malaria, Artemether-Lumefantrine (Coartem). GanLum achieved a cure rate of 97.4 percent, positioning it as a promising option for regions facing emerging artemisinin resistance.

Partial resistance to artemisinin-based therapies has been reported across several parts of Africa, including western Tanzania, such as the Kagera region. The KALUMA trial directly addresses this growing threat by providing evidence for a new treatment that can maintain effectiveness despite reduced artemisinin susceptibility.

GanLum contains ganaplacide, a novel compound that rapidly kills malaria parasites, including those with artemisinin partial resistance. It has also shown potential to block parasite transmission, targeting stages responsible for spreading malaria within communities. If approved, GanLum would become the first major non-artemisinin-based antimalarial in more than 25 years. The trial was also carried out in Bagamoyo in collaboration with the Ifakara Health Institute (IHI).

NIMR continues to play a central role in advancing malaria research in Tanzania. As the national health research institution under the Ministry of Health, NIMR conducts biomedical and clinical research that informs national policy. Its past contributions include the AQUAMAT trial, which led to the WHO's shift from quinine to injectable artesunate for severe malaria; evidence that guided the transition from Chloroquine to Sulfadoxine-Pyrimethamine, and later to ACTs; studies on chemoprevention in pregnancy and school-aged children; and participation in the RTS,S malaria vaccine trials now recommended by WHO.

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Working closely with the National Malaria Control Program (NMCP), regional and district health teams, research partners, and international institutions, NIMR remains committed to generating evidence that strengthens public health and contributes to malaria control and elimination.

Reference:

Novartis Phase III trial for next-generation malaria treatment KLU156 (GanLum) meets primary endpoint, with potential to combat antimalarial resistance.

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