

**TIME Global Health Summit
Press Conference: Bill Gates and Jim Kelly
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At the TIME Global Health Summit, held in New York Nov. 1-3, TIME magazine convened leaders in medicine, government, business, public policy and the arts to develop actions and solutions to the world's health crises.

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Male Speaker: I'm the editor of *Time Magazine*, and we're very pleased to be working with the Bill and Melinda Gates Foundation on this project, this Summit. And here is the co-founder of the Bill and Melinda Gates Foundation, Bill Gates.

Female Speaker: I'm a [Inaudible]. You have donated hundreds of millions of dollars to fight the spread of HIV in India. But do you think the Indian government is doing enough and treating it as enough of a crisis? And do you think AIDS could effect the economic boom India is undergoing?

Bill Gates: Well, I don't think there is any government in the world that has jumped up and done as much as maybe they should, as soon as maybe they should have. And so we're working with government of India. They're doing a lot more. At the top

levels, they've got commitments. Getting that translated into the kind of awareness and behavior change that is important at this stage is a very difficult thing. But they're stepping up and doing more.

Frederick Wright: My name is Frederick Wright, with the AIDS Institute. My understanding is that your foundation is funding two-thirds of a polio vaccine for last year, and that's amazing. Do you consider yourself an evangelical Christian businessman, in the sense that you're spreading the "Good News"?

Bill Gates: Well, I'm not sure exactly what that means. I do think that science has improved our living conditions in some pretty impactful ways over the last 100 years; and making true that these technological advances are available to everyone, whether it's computer technologies, or medical technologies; and making sure that the research doesn't just go on to the conditions of the rich world, but also into the conditions of the world at large, the developing countries, the Foundation has

taken that on as their biggest commitment. So whenever we have progress getting those interventions out, we're excited to be involved in that.

Polio is an interesting one because many people have done great work over more than a decade. Rotary, in particular, has been the leader in funding those things. We are coming in and helping with some of the final funding that needs to get done. We also funded a modified vaccine that's more effective for the strain that's out there today. And so we're pleased to be involved with that with lots of partners.

Mike Heprin: Good afternoon, Mr. Gates, Mike Heprin [ph], with CNBC. I know you're hear primarily to talk about malaria, HIV/AIDS.

Bill Gates: I'm entirely here to talk about global health.

Mike Heprin: This has to do with global health, as well. I'm wondering how you gauge the threat of the

bird flu, and more specifically, what are you doing to protect your company, your employees, your franchise, etc.?

Bill Gates: Well, I'm not an expert on the risks involved. Certainly, it's a very serious issue. It's great to see the U.S. government stepping up with a plan. As that unfolds, it will be interesting to see what exactly they fund. Some of the things they fund will help get a flu vaccine that could work for all strains of flu, which would be a wonderful thing.

Some of the funding will probably help with immunology, in general, which is an important thing not only for emerging diseases like this one, but also as a tool against possible bioterrorism, and also as a tool against the infectious diseases that still exist in the world at large. You'd have to talk to somebody at Microsoft. They have a plan. But I'm not the expert about the plan. It's very similar to, I'm sure, what other companies have.

Female Speaker: I'm from CNN. I'm wondering if

your Foundation has any plans on contributing any money towards research for the bird flu?

Bill Gates: I think the resources that the U.S. government has announced and that a number of the pharmaceutical companies are putting in are really great and will make sure that money is not the thing holding back the creation of a vaccine, and certainly the purchasing for some of the richer countries.

The place where there might be a gap, and we need to see if we can help with is how these interventions would be available to the world at large, where you don't have the same type of health budget or health infrastructure, and where you could have a much greater impact because of the disease. So we're going to look at how we can make sure it's a global impact.

Male Speaker: [Inaudible] What do you think about the new technology, nano technology, stem cell, and cloning in the global health [Inaudible]?

Bill Gates: Those are very general terms. It's probably easiest to respond to some very specific advances. Nano technology is a broad term that usually refers to new material science, or working at lower scales. Certainly, there are discoveries in that area of nano technology that will be valuable in world health.

For example, take the idea of filtering water to get clean water. Nano technology will probably let us create membranes that do that in a better way that just were not possible before. In the understanding of genetics, proteomics, the data we're getting from that, we'll finally understand latent TB, and how do you go after a disease like that.

So there's a variety of technologies. None of the things we're doing at this point are things coming out of the stem cell area for infectious diseases. There could be, but as far as I know, there's not today.

Male Speaker: A follow-up, please. What do you think, if there is a pandemic, about what the impact

could be on internet traffic, if there is mass telecommuting, etc., and are we prepared to handle that?

Bill Gates: I don't think the internet will be our problem. It's actually an infrastructure that can take quite large loads. And scaling that up, versus scaling up hospitals, it's a lot easier to do that. So I don't think that has to be a major concern. We need a vaccine. We need antiretrovirals. And we need to think through how quarantine would be done. Those are tough medical issues. And if we have good answers for that, then we'll be able to deal with the crisis

Jordan Lyte: I'm Jordan Lyte [ph], from the *Daily News*, in New York. I'm just wondering if you could talk a little bit more broadly about why so much of the drug development burden now for certain [Inaudible] by the foundations that are non-profit?

Bill Gates: Well, it's very simple. If you have areas where there's no market, that is there's no

money to buy medicines, then you need some special intervention to come in and provide resources for that. It's simply not something you can expect private enterprise to step up and do. And the fantastic thing over the last few years, and particularly even the last few months, is the creation of these public/private partnerships where you bring in the expertise and some of the resources of the drug companies, biotech and pharma companies. And yet there's enough philanthropic and government funding that they don't have to lose so much money that it would mean they couldn't work on their other programs and respond to the market that's out there.

And so companies like JSK and many others, Merck, J&J, Bristol-Myers, and the [Inaudible] have stepped forward to partner up in these new approaches, and it's fantastic to see that. After all, it's not an issue of the medicines we have to date. It's an issue of the new medicines that need to be invented. And so it's great that they're becoming even more involved.

Female Speaker: There are epidemics of resistant

strains of tuberculosis now in areas where tuberculosis has been wiped out [inaudible], and other resistant bacteria now, even in hospitals in our country. We need to be doing research into new cures for non-resistant epidemics.

Bill Gates: We have a history of being involved in those issues. TB, in a sense, hasn't been wiped out anywhere. TB is worldwide. It's not wiped out. There are strains of TB that don't respond to the current antibiotics that are used. We funded a thing with Partners in Health four years ago or so that was about multi-drug resistant TB, getting a second [Inaudible] machine, getting a WHO group that was called the Green Light Committee to get the prices of those down, get the approvals so those would be available.

Now, the primary funder of a thing called the Global Alliance for TB drugs, and they're working with some novel things that they're developing, and at least in one case, would bear on a antibiotic dayhab to come up with new treatments for TB. So anything that's new would not have drug

resistant problems. So the broader set of drugs you have, you're going to avoid those problems. So, yes, we're the biggest funder of that, and we think that's a very important area.

Male Speaker: Colby [Inaudible], *Stanford Daily*.

What steps can your Foundation take, or does your Foundation even take, in terms of encouraging people to come from places like the United States, where we have a tremendous educational background to go over to these countries and impart our help and knowledge there, such as, perhaps one example would be, college scholarships that are tied into similar to the GI Bill for college. They go to college for four years, and then have two or three, four years of service in a foreign country that needs our help; or scholarships to medical school, and then you have doctors coming out who have to a similar thing, a few years of service in order to account for the paying of their tuition?

Bill Gates: Well, many of our partners who are in country are hiring those kinds of people to help out

with drug trials, to help out with drug delivery. Certainly, people like Save the Children, Peace Corps, step up and do those things. You want to make sure you're not just going for rich world's expertise, but you're also providing jobs for people in country who are going to stay in country, probably will do the job longer, do it for less resources, and therefore, be able to save more lives.

So you have to decide what your goal is. Is your goal to treat the disease as best you can, or is it some just exposure type thing that maybe gets those people to come back and be advocates in the U.S. for these causes, and the government resources that ought to go to these things. I've spoken at public health schools about, I think, the imperative of those students to get involved in these issues. Really, it's medical schools and public health schools where you've got the expertise to come in and help. And there's a lot more that can be done. People like Paul Farmer set an example that more should follow.

Linda Bloom: Linda Bloom, the *United Methodist News Service*. Your Foundation just recently announced more than 250 million grants for malaria. I'm wondering if you could talk a little bit about your strategy in terms of eradicating malaria.

Bill Gates: Malaria is a disease that because it kills over a million people a year, we need to pursue many approaches, some of which are near term and barely low risk, like funding more bed nets; some of which are medium term, medium risk, like what we call intermittent preventive therapy; or having a drug that would help pregnant women who are also a major part of the burden of the disease; and new drugs can be delivered in the medium term, as well.

In the long run, the idea would be to have a vaccine that you give it early in life and it gives you coverage for your entire life. We don't have that today. We have a partially effective vaccine that's gone through certain states of trials that looks good, and we need to complete the Phase III, the final trials, and get that out there.

So we are funding all these different things. Bed nets, with today's insecticides, and because you get resistance, new insecticides. Taking today's drugs, getting those out there more, but also the creation of new drugs, that's a group called MMB. That's the medicines. The vaccines are funded by a group called MBI. And so there's about five different ways that we're going after malaria.

If you want to really wipe it out, either it's something we're doing in our so-called grand challenge about mosquito genetics, or an incredibly effective vaccine would be necessary. But you can probably reduce the disease burden by a factor of 2 just with the tools that we already have.

Rachel: My name is Rachel; I'm with Wired News. I'm curious what you'd say to people that see a lot of the solutions that your foundation is coming out with that's very high tech, and think, well, maybe these problems could be solved with lower tax solutions, like just providing clean water, very simple ground level things. Do you feel any heat about that?

Bill Gates: We're not bias towards high technology solutions. Clean water hasn't cured anyone of AIDS or malaria or tuberculosis. And so we would fund any intervention that works. This is about saving lives, and the most effective way of saving lives.

Bed nets are a pretty low tech solution. We're the biggest backer of those things, and making sure there's a new generation of those that you don't have to don't have to redip their net and making sure there's not going to be disease resistance there. So if somebody has a low tech idea, they should come forward, because we'll fund anything that saves lives.

David Duncan: David Duncan, from *Discover* Magazine. I wanted to ask about diabetes. Some of the figures are looking like this could be actually the real plague of the 21st century. There's something like 200 million diabetics around the world, and it's growing very rapidly. What is the Gates Foundation's long range plans on a disease that's essentially not something solvable and short term,

and has a lot of chronic issues attached to it?

Bill Gates: Certainly, there are billions of dollars going in from biotechnology and pharmaceutical companies going after that disease, whether it's new ways of delivering insulin, understanding what's going on with the pancreatic cells. There's amazing science there. Because there's a rich world market for that, that's not a disease priority for us.

We go after the infectious disease killers that there is no market for the drugs. And those turn out to be, by far, the biggest burden of disease, killing way more people than any of the rich world conditions. So we [Inaudible] the pharma company's arm, but until we go after these completely ignored ones, we'll continue to make that our priority.

Male Speaker: Thank you very much.

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