

During the 1990s, for several reasons, the issue of health research was a subject of growing importance. The debate began within the World Health Organization and spread to numerous governments, particularly among the developing countries. In order to further the issue, various spheres linked to the “third sector” were soon created as a way of convening distinct public and private players from both north and south of the Equator around the same table. Today, these important nongovernmental organizations display extensive advocacy in the discussion of the health research issue in the world. However, the World Health Organization and national governments still maintain a position of influence and leadership.

The reasons that increased the First World’s interest in debating health conditions in the Third World included the growing state of destitution, dehumanization, and even extermination plaguing the peoples of a major portion of the African continent, some regions of Asia, and Latin America as well. Added to this was the increasing importance of health problems which had previously been segregated in these regions, but which began to pose a more or less concrete threat to countries north of the Equator. We should also cite the growing importance of clinical and therapeutic trials in human populations as a basic requirement for launching new products on the market, together with increasing difficulties in using populations from the central countries for this task. In parallel, there has been an explosive increase in the importance of peripheral countries’ biota as the point of departure for engineering new bioactive molecules.

In Brazil, the first movement involving participation in this international debate was in 1989, when the Commission on Health Research for Development (COHRED) held one of its first meetings at the Oswaldo Cruz Foundation (Fiocruz) in Rio de Janeiro. This meeting laid the groundwork for a national effort that culminated in the 1<sup>st</sup> National Conference on Science and Technology in Health, in 1994 in Brasilia. The Conference was chaired by Carlos Morel, then President of Fiocruz, who soon went on to head the main world program for health research focused on the developing countries, Tropical Disease Research (TDR). It was thus no coincidence that we invited Morel to write the keynote article on this theme in this issue of *Ciência & Saúde Coletiva*.

There are various conceptual and theoretical questions involved in health research that need to be highlighted and debated. To mention just two, it is worthwhile to reflect on: 1) the new approach to the classical vicious circle of poverty and disease, with the increasing recommendation of acknowledging a “turnaround” in the determination, that is, disease as a cause of poverty rather than poverty causing disease (see for example the report coordinated by Jeffrey Sachs, *Macroeconomics and Health*, 2001); 2) the new ethical challenges posed by the above-mentioned widespread use of human populations as a trial model for new therapeutic models or vaccines and the increasing utilization of foreign populations for this purpose.

Ten years after the first Brazilian conference, the 2<sup>nd</sup> National Conference on Science, Technology, and Innovation in Health is scheduled for July 2004. It is certain to be a moment for furthering the debate on health research in our country, particularly in what appears to be the central theme in this debate: the relations between health policies and health research, that is, which approaches should be adopted to make this research “appropriate” as a theme for the Brazilian Health Reform and the Unified National Health System. Furthermore, a key issue is the role of policy-making and policy-implementing agencies in relation to health research policies. The time is thus ripe for releasing this issue of *Ciência & Saúde Coletiva*, in which this set of themes is approached from a long-term perspective and a theoretical approach.

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