As the Chief of Viral Immunology within the Virology Division at the United States Army Medical Research Institute of Infectious Diseases (USAMRIID), Dr. John M. Dye, Jr. oversees the execution of research programs in medical countermeasures against viral biological warfare agents in a high-hazard, multi-suite, bio-containment laboratory that operates at Biosafety Levels 2, 3, and 4. Dr. Dye’s research focuses on filovirus vaccines and therapeutics, with the ultimate aim to counteract the Ebola virus and other high risk pathogens.

“It is no question that Dr. Dye’s work is innovative – he has been on the forefront of research and the development of filovirus vaccines and therapeutics throughout his career and during his partnership with Geneva,” said Geneva’s President Elise Huszar. “Dr. Dye’s ability to continue rapid innovation in response to the recent Ebola virus epidemic is impressive, as is his commitment to research collaboration and integrity.”

Dr. Dye is on the cutting edge of research and development of medical countermeasures against filoviruses (e.g., Ebola virus, Sudan virus, and Marburg virus) and other biological threat agents. Since 2012, Dr. Dye has been traveling to Uganda to track the immune response in over 200 survivors of Ebola virus disease. Specifically, he assesses the immune responses of these survivors over time in hopes of determining an “immune profile” to drive vaccine and therapeutic development for the future. His extensive network of research collaborators has influenced basic science research on various aspects of virology and immunology, including the identification and publication of filovirus and Lassa virus receptors in the journals Nature and Science, respectively. These findings have driven protein-specific medical countermeasures against both viruses to provide a treatment option.

Since 2013, Geneva has proudly supported six research projects in partnership with Dr. Dye. His current funded NIH RO1 research award, the objective of which is to develop an antibody-based immunotherapy for the treatment and management of Sudan virus infection, directly addresses a gap in the current Ebola virus therapeutics portfolio. If successful, it will provide an effective countermeasure against Sudan virus that is positioned for investigational new drug (IND)-enabling studies.

DR. DYE’S ABILITY TO CONTINUE RAPID INNOVATION IN RESPONSE TO THE RECENT EBOLA VIRUS EPIDEMIC IS IMPRESSIVE.

ELISE HUSZAR, PRESIDENT
THE GENEVA FOUNDATION