



World Health Organization

NTDs: update on the progress

Department of Control of Neglected Tropical Diseases

WHO Department of control of Neglected Tropical Diseases

Two main groups of diseases:

- **IDM** (Innovative and Intensified Diseases Management)
Group of neglected diseases whose control interventions are based on **individual** approach;
- **PCT** (Preventive Chemotherapy and Transmission control)
Group of neglected diseases whose control interventions are based on **community** approach;

IDM

H A T (sleeping sickness)

Leishmaniasis

Chagas disease

Leprosy

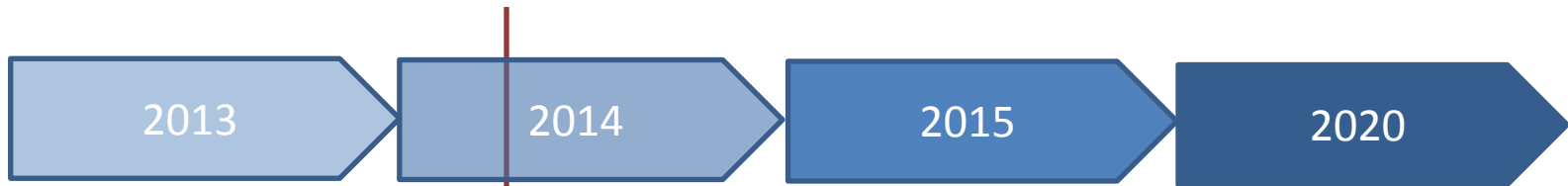
Buruli ulcer

Yaws

Strategy:

- Strengthen prevention, control and surveillance.
- Provide wider accessibility to proper diagnosis
- Treatment of positive cases

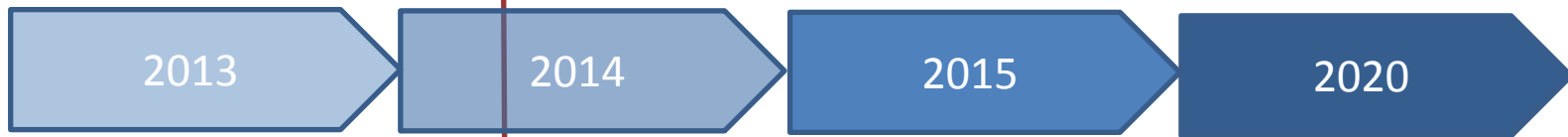
Status as of April 2014



Human African Trypanosomiasis (sleeping sickness)

- Less than 7 000 cases in 2013 (over 25 000 in 2000)
- *Trypanosoma brucei gambiense* localized in west and central Africa, accounts for 98% of reported case (*T. brucei rhodesiense* localized in eastern and southern Africa, accounts for 2% reported cases)
- March 2014: HAT moves from control to elimination phase.

Status as of April 2014



Leishmaniasis

Visceral Leishmaniasis (VL)

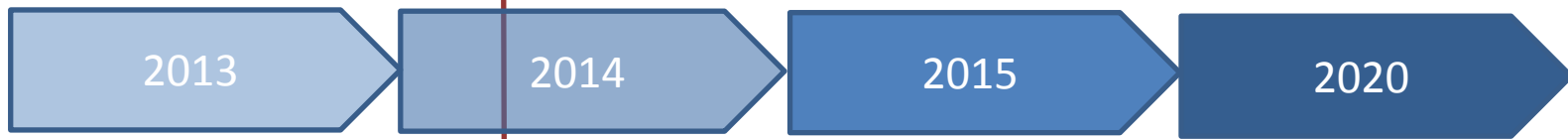
- **SEAR** Continuous decline of incidence in the 3 endemic countries in the region (India, Sri Lanka, Bangladesh): < 1 case per 10 000 population.
- **AFR** Ambisome and treatment guidelines available for severe VL cases in East Africa.

Cutaneous Leishmaniasis (CL)

- New drug in development

Inter- regional surveillance system for Cutaneous Leishmaniasis, VL and Muco-cutaneous Leishmaniasis established for EMRO, EURO and AFRO

Status as of April 2014

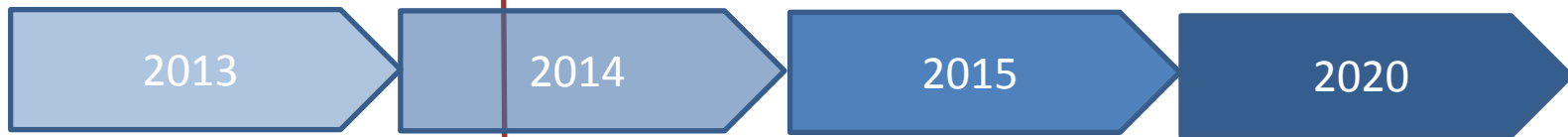


Chagas disease

- Global **estimates** for Chagas disease updated
- Design of a computerized information and **surveillance** system completed;
- Methodology to verify interruption of **transfusional transmission** and organ transplantation updated
- Increase in **case detection and treatment** at global level;
- 2011-2012 **shortage** of benznidazole solved
- **Pediatric forms** of Nifurtimox and Benznidazole available



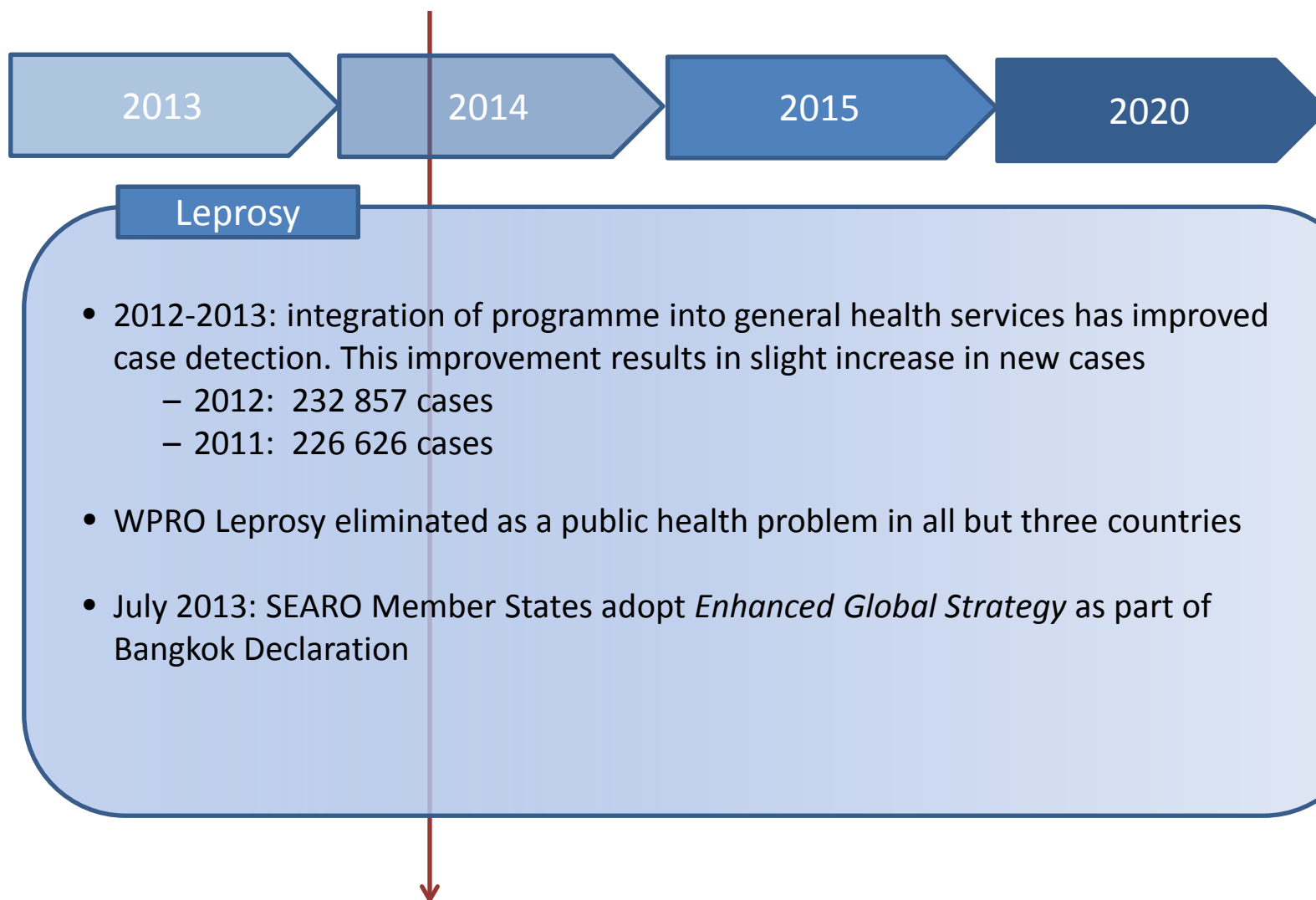
Status as of April 2014



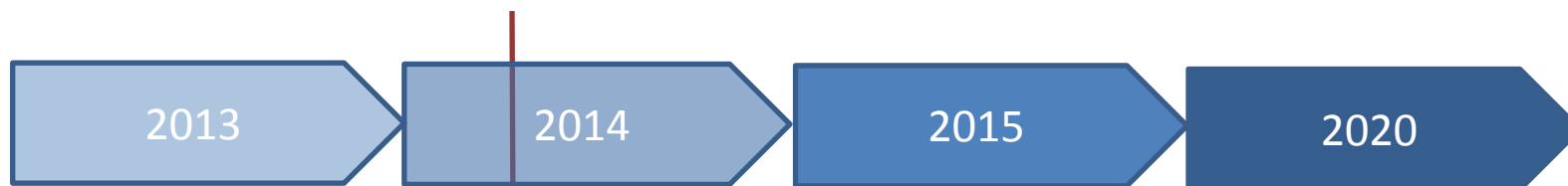
Buruli ulcer

- Combined rifampicin/clarithromycin clinical trial in progress in Benin and Ghana
- WHO and Harvard University started evaluation of mycolactone detection method on human samples

Status as of April 2014



Status as of April 2014



Yaws

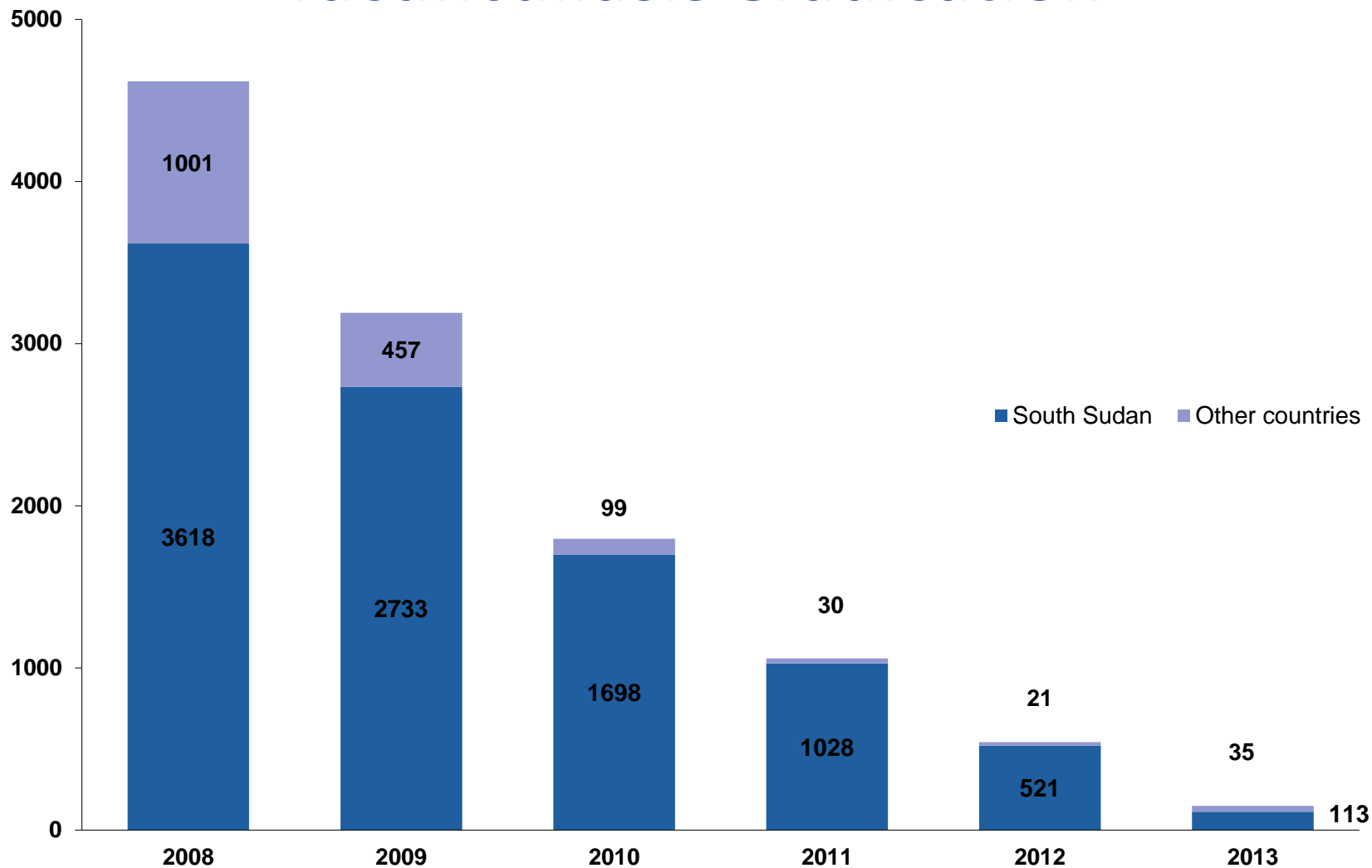
Morges strategy (total community treatment / total targeted treatment + 3-6 monthly re-survey until zero cases) is effective:

In four countries implementing the strategy:

- coverage >90% was achieved;
- rapid disappearance of lesions instilled confidence in the populations;
- no evidence of drug resistance (azithromycin resistance surveys);

Challenges azithromycin is not donated for yaws and there are no funds for implementation

Dracunculiasis eradication



PCT

Lymphatic filariasis

Onchocerciasis

Schistosomiasis

Soil Transmitted Helminthiasis

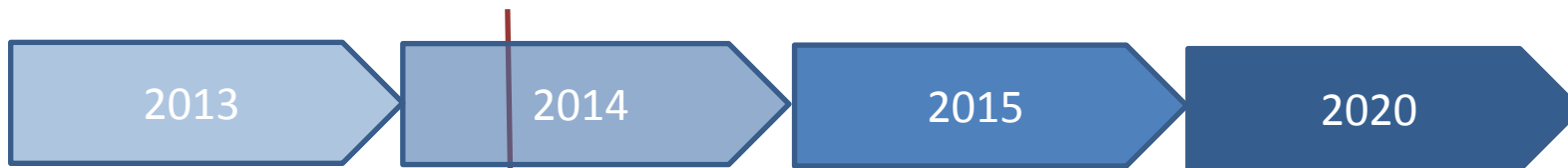
Trachoma

Foodborne trematodiasis

Strategy:

- Community diagnosis
- Preventive chemotherapy for population at risk
- Prevention (health education, wash promotion, vector control)

Status as of April 2014



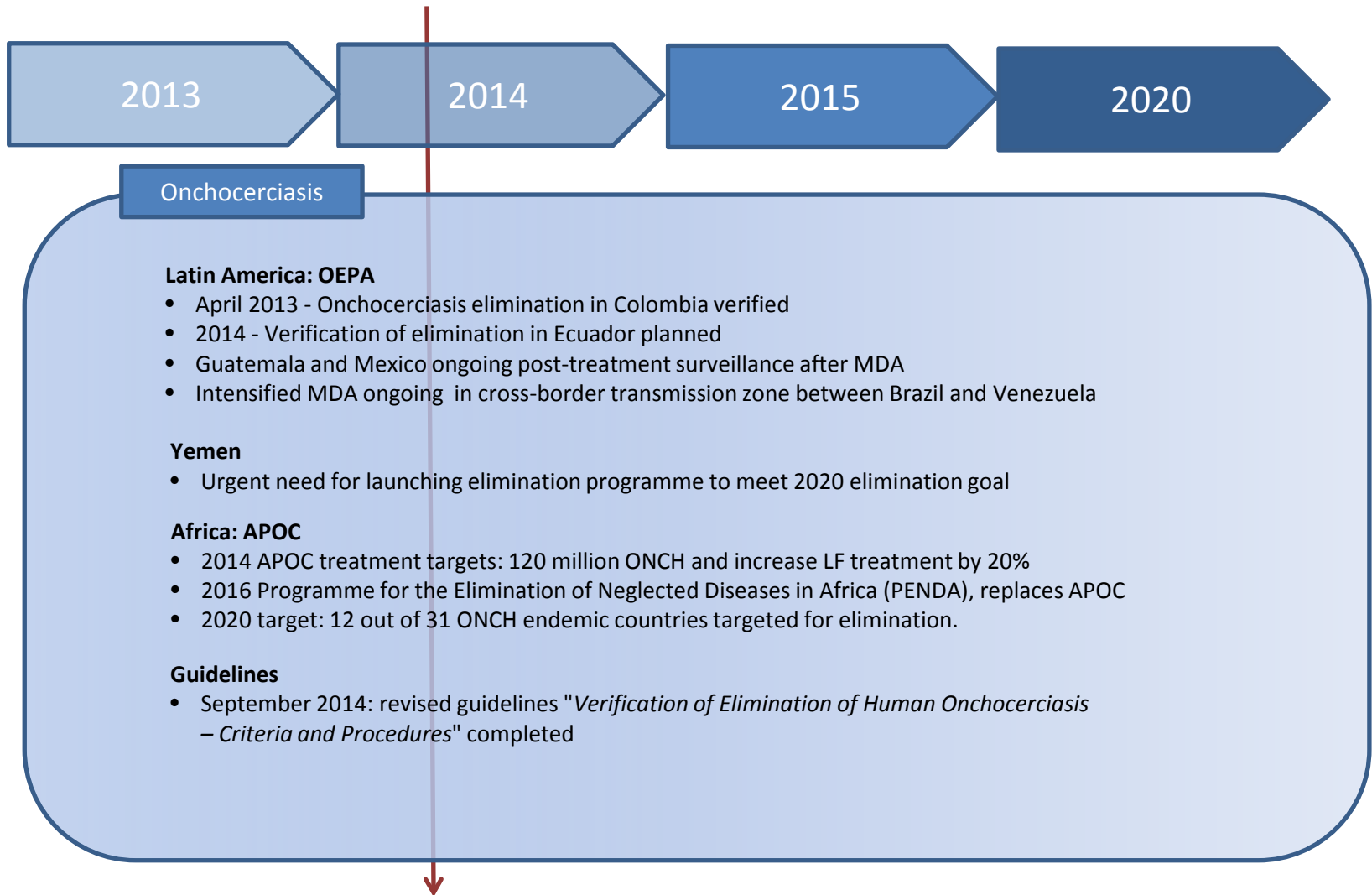
Lymphatic filariasis

- Of 73 endemic countries: 59 completed mapping, 56 started MDA, 13 under post-MDA surveillance
 - Diethylcarbamazine donation (Eisai) solved the problems related to procurement of this drug
 - STAG endorsed a provisional strategy to start interventions for LF in loiasis-endemic areas
 - STAG TAS training workshops completed in all regions

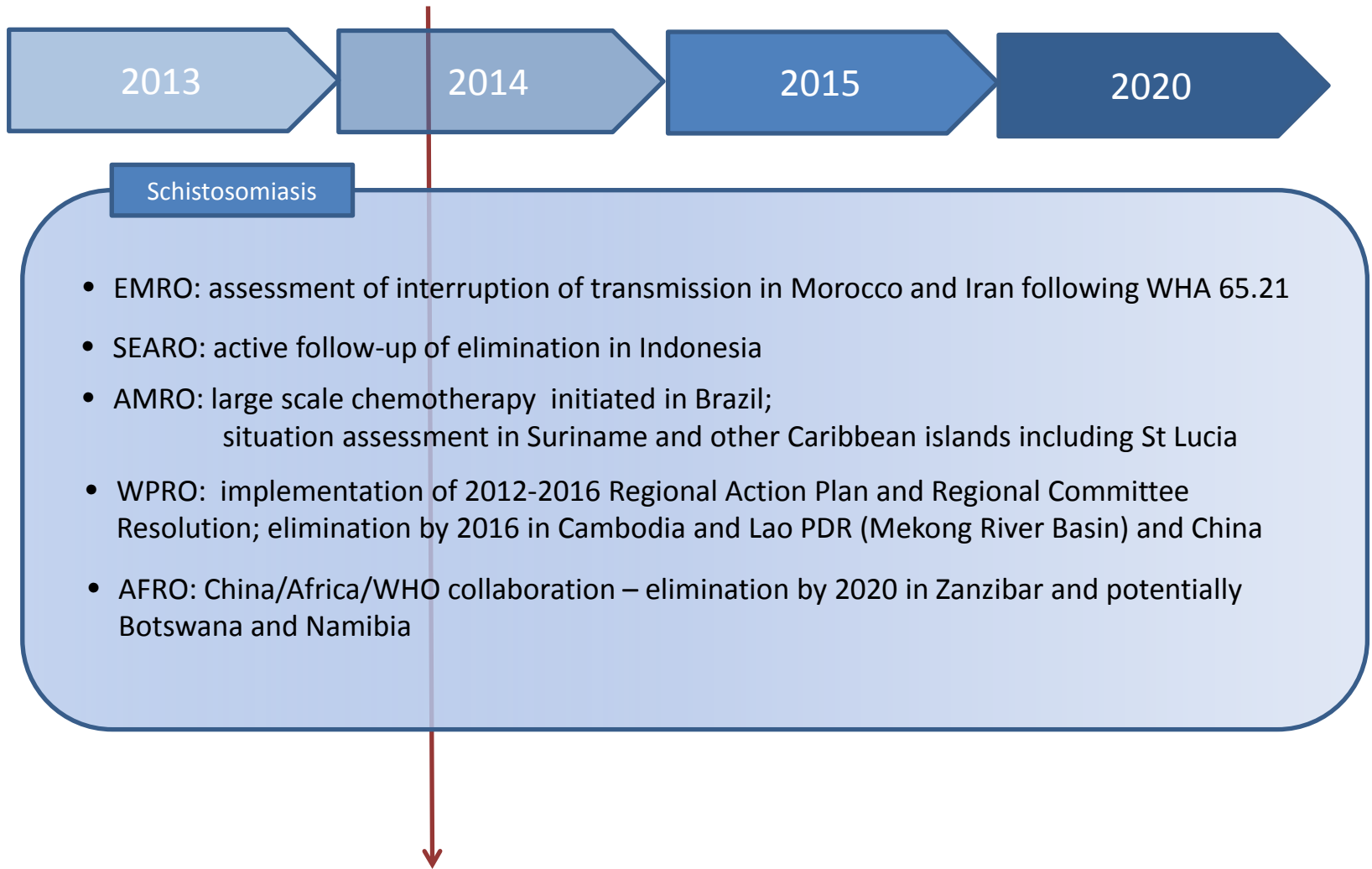
Documents

- Handbook of practical entomology for national elimination programmes
- Provisional strategy for interrupting LF transmission in loiasis-endemic countries
- Managing Morbidity and Preventing Disability: an Aide-mémoire for national programme managers

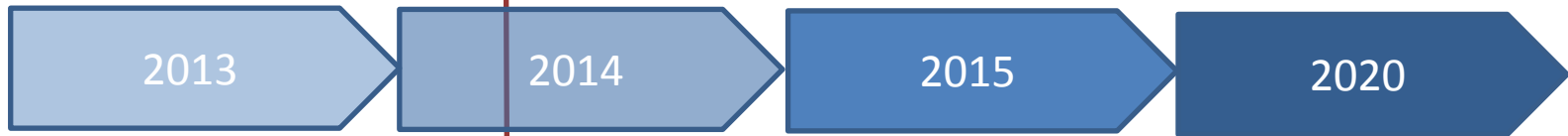
Status of PC as of April 2014



Status of PC as of April 2014



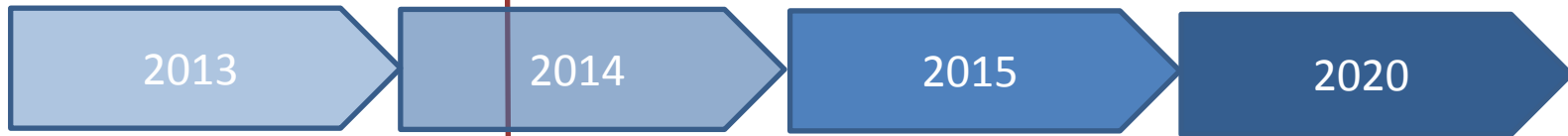
Status as of April 2014



Soli Transmitted Helminthiasis

- 285 million children in need of treatment received anthelmintic for STH in 2012 corresponding to a global coverage of 32.6%
- Medicine donation resulted in an increased number of school-age children treated:
 - from 75 in 2011 to 132 million in 2012
- In contrast, coverage of pre-school-age children continued to decline,
 - after a peak of 37% in 2010, coverage went to 30% in 2011 and to 25% in 2012
 - The decline is due to unavailability of donated medicines for this age-group
- 4 tools prepared and presently field-tested: (i) teachers' manual; (ii) mapping manual; (iii) model to predict prevalence changes during PC implementation; (iv) STH data collection during TAS

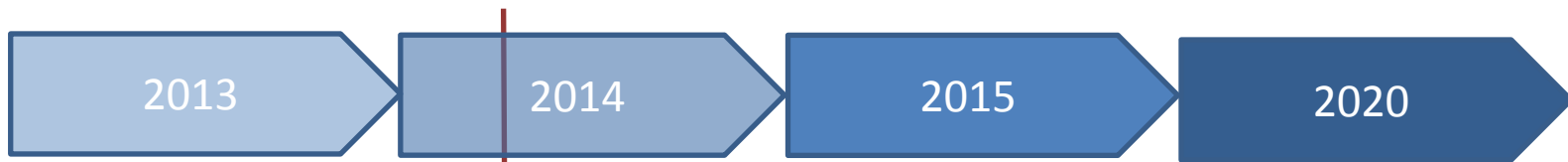
Status as of April 2014



Foodborne trematodiasis

- Progressive global expansion of fascioliasis treatment with focus on AMR and WPR
 - 470,000 tablets of triclabendazole donated through WHO for 2014 activities
- Progressive expansion of clonorchiasis, opisthorchiasis and paragonimiasis treatment activities in WPR
 - Challenge: No donation of PZQ in place for clonorchiasis and opisthorchiasis
- Approximately 608,000 individuals treated in 2012

Status as of April 2013



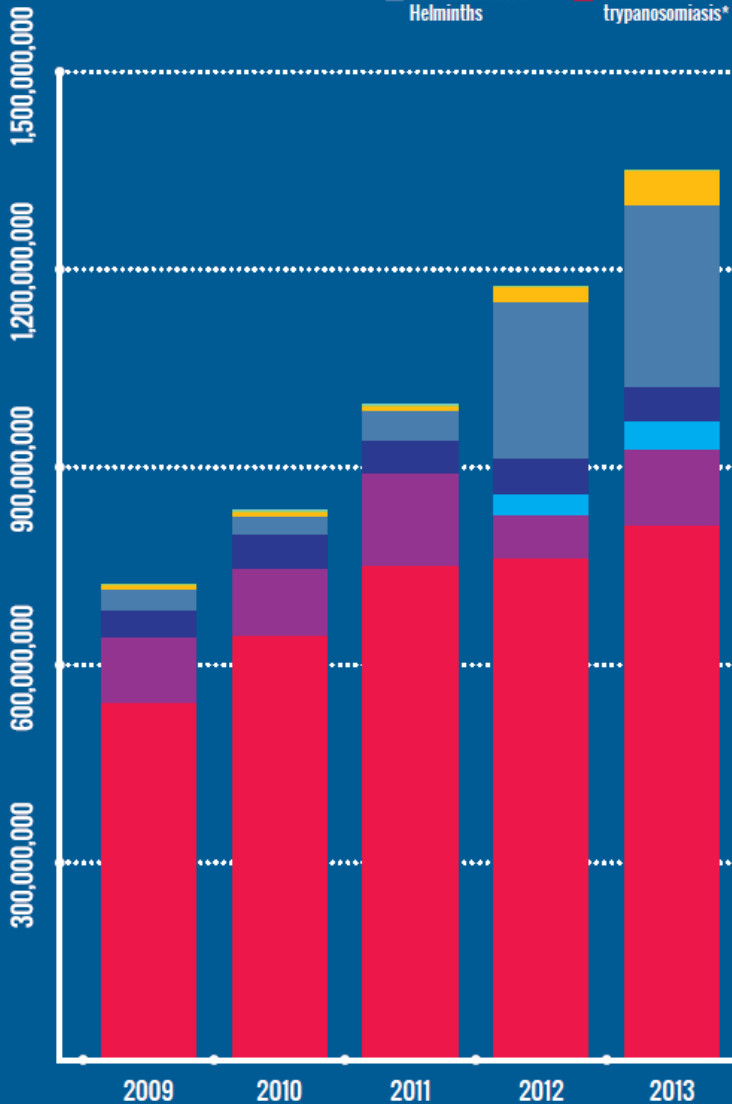
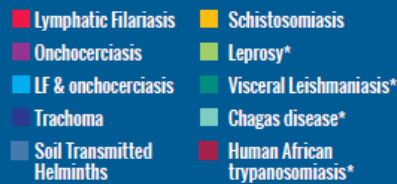
Trachoma

- The disease is now in the NTD portfolio
- A WHO/NTD focal point has been selected and will join the department in April
- It is expected to
 - increase coordination/integration of trachoma elimination activities with the activities for the control of the other NTDs
 - Reinforce the collaboration among the different groups within the NTD community



2009–2013

Total Donated Treatments
by Disease



* Donations not visible due to scale

Most recent report on treatment provided by PC diseases

LF 425 M people treated
(*WER 2014 88 389-400*)

ONCHO 98 M people treated
(*WER 2013 88 17-28*)

TRA 47 M people treated
169 000 surgeries for trichiasis
(*WER 2014 88 241-256*)

STH 321 M children treated
(*WER 2014 89 133-40*)

SCH 42 M people treated
(*WER 2014 89 21-28*)



Thank you
