

LESOTHO

Neglected tropical disease treatment report 2017



NEGLECTED TROPICAL DISEASES

Neglected tropical diseases (NTDs) are a group of preventable and treatable diseases that affect 1.6 billion of the world's poorest people – 40% of whom live in Africa. They cause disfigurement, disability and even death. They stop children from going to school and rob millions of adults of their most productive years, depriving developing economies of billions of dollars in income.

Defeating NTDs is not just the right thing to do. It is a social justice issue and will be essential to deliver the Sustainable Development Goals (SDGs) and Agenda 2063, which amongst other things aims to free Africa of its heavy burden of disease, disability and premature death.



“In 2018 we became the first sub-Saharan African country to eliminate blinding trachoma. A painful and disabling disease. We cannot achieve the SDGs without addressing the needs of the poorest members of our society who are disproportionately affected by neglected tropical diseases. I urge my fellow African leaders to prioritise ending these diseases of poverty on the continent. We have shown that it can be done.”

Nana Akufo-Addo
President of the Republic of Ghana

LESOTHO

This country profile provides an overview of Lesotho’s progress in reaching everyone in need of treatment for the five most common NTDs, based on 2017 data reported to the World Health Organization (WHO) by the country. This information is used to calculate the NTD index that appears in the African Leaders Malaria Alliance (ALMA) Scorecard for Accountability and Action, and is used for SDG 3.3 and Universal Health Coverage (UHC) reporting.



NTD mass treatment coverage index



| | People who received treatment | People who did not receive treatment |
|-------------|-------------------------------|--------------------------------------|
| 2017 | 0.31 million | 0.08 million |
| | 2016: 0 million people | 2016: 0.53 million people |

| ELEPHANTIASIS | BLINDING TRACHOMA | INTESTINAL WORMS | BILHARZIA | RIVER BLINDNESS |
|----------------|-------------------|------------------|----------------|-----------------|
| Not applicable | Not applicable | 80% coverage | Not applicable | Not applicable |

*This includes all countries in Africa that are endemic for at least one of the five NTDs

ABOUT THE DISEASES



ELEPHANTIASIS (LYMPHATIC FILARIASIS)

This is a mosquito-transmitted disease that attacks the blood circulation system. It causes fever and, in time, severe swelling of the lower limbs and, in men, swelling of the scrotum. Elephantiasis is painful, disfiguring and can lead to stigma. It also limits mobility.



BLINDING TRACHOMA

This is an eye disease caused by bacteria, which causes the eyelashes to grow inwards, causing painful scratching and ultimately blindness. Infection spreads through personal contact (via hands, clothes or bedding) and by flies that have been in contact with discharge from the eyes or nose of an infected person.



INTESTINAL WORMS

A parasitic disease that causes worms to multiply inside the intestines. The worms feed on nutrients from food consumed by people, so causing malnutrition or stunted growth. Intestinal worms are spread by human waste, but also through soil or water where people go to the toilet in the open. The disease is known to scientists as soil-transmitted helminths.



BILHARZIA

This disease is sometimes known as snail fever or schistosomiasis. It is caused by waterborne snails carrying parasites. The parasites penetrate the skin and can cause distended bellies, malnutrition, and, if untreated, can damage women's reproductive organs, tripling the risk of contracting HIV.



RIVER BLINDNESS

This is an infection from parasitic worms spread by blackflies, which are found near fast-flowing rivers and streams. It causes disfiguring skin conditions and sight loss. The disease is known to scientists as onchocerciasis.

| | | | |
|--------------------------|--|--|----------------|
| ELEPHANTIASIS | 2017 | | 2016 |
| | PEOPLE NEEDING TREATMENT | PEOPLE RECEIVING TREATMENT | |
| | Not applicable | Not applicable | Not applicable |
| BLINDING TRACHOMA | 2017 | | 2016 |
| | PEOPLE NEEDING TREATMENT | PEOPLE RECEIVING TREATMENT | |
| | Not applicable | Not applicable | Not applicable |
| INTESTINAL WORMS | 2017 | | 2016 |
| | CHILDREN NEEDING TREATMENT | CHILDREN RECEIVING TREATMENT | |
| | 0.39m | 0.31m | 80% |
| BILHARZIA | 2017 | | 2016 |
| | SCHOOL-AGED CHILDREN NEEDING TREATMENT | SCHOOL-AGED CHILDREN RECEIVING TREATMENT | |
| | Not applicable | Not applicable | Not applicable |
| RIVER BLINDNESS | 2017 | | 2016 |
| | PEOPLE NEEDING TREATMENT | PEOPLE RECEIVING TREATMENT | |
| | Not applicable | Not applicable | Not applicable |

COUNTRY COVERAGE INDEX

| COUNTRY | 2016 | 2017 | |
|----------------------------------|----------------|----------------|---|
| Algeria | Not applicable | 86 | |
| Angola | 7 | 10 | ▲ |
| Benin | 58 | 77 | ▲ |
| Botswana | 2 | 2 | = |
| Burkina Faso | 88 | 88 | = |
| Burundi | 16 | 17 | ▲ |
| Cabo Verde | 61 | No report | |
| Cameroon | 58 | 83 | ▲ |
| Central African Republic | 32 | 1 | ▼ |
| Chad | 10 | 1 | ▼ |
| Comoros | 0 | 79 | ▲ |
| Congo | 16 | 30 | ▲ |
| Cote d'Ivoire | 69 | 75 | ▲ |
| Democratic Republic of the Congo | 44 | 54 | ▲ |
| Djibouti | 0 | No report | |
| Egypt | 10 | 10 | = |
| Equatorial Guinea | 0 | No report | |
| Eritrea | 31 | 64 | ▲ |
| eSwatini (Swaziland) | 90 | 92 | ▲ |
| Ethiopia | 51 | 73 | ▲ |
| Gabon | 1 | No report | |
| Gambia | 8 | 72 | ▲ |
| Ghana | 70 | 37 | ▼ |
| Guinea | 65 | 86 | ▲ |
| Guinea-Bissau | 1 | 20 | ▲ |
| Kenya | 43 | 40 | ▼ |
| Lesotho | 0 | 80 | ▲ |
| Liberia | 62 | 71 | ▲ |
| Libya | Not applicable | Not applicable | |

| COUNTRY | 2016 | 2017 | |
|-----------------------------|----------------|----------------|---|
| Madagascar | 56 | 9 | ▼ |
| Malawi | 89 | 91 | ▲ |
| Mali | 35 | 90 | ▲ |
| Mauritania | 0 | 3 | ▲ |
| Mauritius | Not applicable | Not applicable | |
| Morocco | Not applicable | Not applicable | |
| Mozambique | 65 | 12 | ▼ |
| Namibia | 1 | No report | |
| Niger | 0 | 64 | ▲ |
| Nigeria | 48 | 60 | ▲ |
| Rwanda | 3 | 78 | ▲ |
| Sao Tome and Principe | 8 | No report | |
| Senegal | 44 | 66 | ▲ |
| Seychelles | Not applicable | Not applicable | |
| Sierra Leone | 81 | 85 | ▲ |
| Somalia | 0 | 40 | ▲ |
| South Africa | 3 | 2 | ▼ |
| South Sudan | 3 | 1 | ▼ |
| Sudan | 19 | 12 | ▼ |
| Togo | 77 | 84 | ▲ |
| Tunisia | Not applicable | Not applicable | |
| Uganda | 64 | 68 | ▲ |
| United Republic of Tanzania | 47 | 88 | ▲ |
| Zambia | 51 | 56 | ▲ |
| Zimbabwe | 44 | 12 | ▼ |

| Not applicable | No report | Not on track | Progressing | On track |
|-----------------------------|---------------------|------------------------|---------------------|----------------------|
| Mass treatment not required | No report submitted | Less than 25% coverage | 25% to 74% coverage | 75% or more coverage |

AFRICA CAN LEAD THE FIGHT AGAINST NTDS

Call to the African Union

1 Establish a task force on NTDS at the African Union

The goal of the Africa Health Strategy (AHS) 2016–2030 is to ensure healthy lives and promote the well-being for all in Africa, in the context of ‘Agenda 2063: The Africa We Want’ and the SDGs. Increasing investments in health and reducing the burden of disease are key objectives in the AHS. Seeking to end NTDS is seen as a priority to achieve the strategy.

This task force will facilitate knowledge sharing across the continent, whilst ensuring that drug commitments from pharmaceutical companies are fully utilised every year and that global elimination targets are met.

2 Set a specific target for Africa towards WHO’s goal of eliminating at least one NTD in 30 countries

194 member states have agreed to WHO’s 5-year strategic plan. This sets a target to eliminate at least one NTD in 30 countries between 2019 and 2023, globally. The African Union can show leadership and support SDG 3.3 by setting a specific target for Africa towards this global goal, which can be resourced and monitored.

3 Commit African Union member states to provide domestic health financing towards their NTD programmes

NTD treatment and prevention is highly cost-effective. The most common NTDS can be mass treated at a cost of less than US\$0.50 per person, per treatment.

Most drugs required for NTD treatment are donated by the pharmaceutical industry. This generous support is valued at US\$17.8 billion to 2020, and was recognized with a Guinness World Record in January 2017. Yet not everyone who needs treatment receives it. For every US\$1 invested in delivery, US\$26 of drugs are donated.

4

Recognize and celebrate countries as they achieve elimination goals

A number of countries have demonstrated that eliminating NTDs is not just a pipe dream.

- Ghana is the latest country in Africa to have achieved elimination of trachoma as a public health problem, joining Morocco, which was validated in 2016
- Togo and Egypt have been validated by WHO as having eliminated elephantiasis as a public health problem, the only two countries on the continent to have achieved this goal
- Kenya was validated by WHO for the elimination of Guinea worm disease, joining Cote D'Ivoire, Niger, Nigeria and Ghana

CALCULATING THE INDEX

The index provides an average of coverage across the five diseases amenable to mass treatment. It has been calculated using the geometric mean, which prevents high coverage of one disease from compensating for very low coverage in other diseases. The aim is to provide countries with a sense of how well they are delivering integrated treatment across diseases. This is a common method used to measure a country's progress across multiple elements, including the Human Development Index.

The geometric mean cannot be calculated if an element is zero. We use the following values to deal with this:

- If a disease has 0% treatment coverage in a country, it is calculated as 0.1%
- If a country has not reported coverage for a diseases, it is calculated as 0.1%
- If a country has eliminated a disease, it is calculated as 100%
- If a disease is labelled as not applicable for a country, it is not used in the calculation

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UNITING TO COMBAT NTDS

A coalition of private and public sector organisations working together to beat neglected tropical diseases and improve over a billion lives.

EXPANDED SPECIAL PROJECT FOR ELIMINATION OF NTDS (ESPEN)

In an unprecedented organizational move to reduce the burden of NTDs, the World Health Organization Office for Africa created ESPEN in order to mobilize political, technical and financial resources to meet the London Declaration targets in Africa.

LEARN MORE ABOUT THE NTD COUNTRY PROFILES

Contact Uniting to Combat NTDs for more information:
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**World Health
Organization**

REGIONAL OFFICE FOR

Africa



EXPANDED SPECIAL PROJECT
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