



XIV<sup>th</sup> Meeting of the Intergovernmental Commission of the Southern Cone  
(INCOSUR)  
for the Elimination of *T. infestans* and the  
Interruption of Transfusional American Trypanosomiasis



(Santa Cruz de la Sierra, Bolivia, 28–31 March 2005)

## Recommendations and Decisions

### Recommendations of the Intergovernmental Commission (CI)

1. Reaffirm the importance of Initiative for the countries and of the PAHO Technical Secretariat as an element of support and endorsement, in order to provide continuity and sustainability to the control and surveillance processes.
2. Strengthen and sustain international evaluations that INCOSUR-Chagas carries out periodically in the Member Countries, given the high operational and strategic value of the same. For this year, it intends to evaluate Bolivia, Paraguay and Brazil (Bahia and Paraná states).
3. Seek out the necessary resources and prepare an agenda for a regional meeting in 2006 involving the countries that make up the initiatives in the Southern Cone (INCOSUR), Central America (IPCA), Andean Countries, and Amazon region (AMCHA), to allow for exchange of joint activities and mutual technical cooperation in recognized priority areas. Headquarters has taken the matter under consideration.

4. Emphasize the importance of required reporting of acute cases (vectoral, transfusional, congenital, and others). Reporting of chronic cases will remain under the jurisdiction of each country.
5. Develop a care component to integrate persons infected by or sick with Chagas into the control program, to be carried out either directly or in coordination with the health system. As first step, a technical consultation should be held with experts.
6. Reiterate the need to refine a design enabling regional estimation of quantitative elements concerning morbidity and mortality from Chagas disease.
7. Request that the INCOSUR Technical Secretariat be part of the diagnosis and treatment process to be developed in Bolivia starting in 2005.
8. With consent from Brazil, request involvement of INCOSUR-Chagas in the *National Workshop on the Evaluation of State Chagas Disease Control Programs, with Emphasis on Surveillance Models*, to be held in Brasilia in July 2005. The objective is to integrate surveillance processes and share experiences on that topic.
9. Salute the launching in September 2004 of the *Amazon Chagas Initiative (AMCHA)*.
10. At the next INCOSUR-Chagas meeting, ensure that the presentations and country reports contain information related to the surveillance system currently in use, including instruments, methodology, and historical data from the past five years.
11. Provide support to Chile in the taxonomic characterization and interpretation of finding on sylvatic populations or on those with secondary adaptation to the wild, of presumed species of *Triatoma infestans*, and of recent localization in metropolitan areas.
12. Affirm the utmost importance of the report received by the delegate from Brazil on the decision of the Brazilian Government to take over production of benznidazole, acknowledging the CI's interest in exploring the possibility that the drug might be put on the market throughout the INCOSUR Member Countries.
13. Convey to laboratories producing benznidazole and nifurtimox the need to prepare pediatric presentations.
14. Ask TDR to increase its advocacy in the area of Chagas disease within the WHO framework global. Reincorporate the subject of Chagas into WHO periodicals and increase funding for a greater number of operational research projects.

15. Consider utilizing transmission risk stratification when developing INCOSUR activities related to improved housing.
16. Take into account progress made in controlling *T. infestans* in residential and peridomiciliary areas, recommending comprehensive improving of housing, peridomiciliary structures, and peridomiciliary areas as a component of integrated vector control.
17. Emphasize the need for INCOSUR Member Countries to implement techniques and standardized methodologies to determine triatomine resistance to pyrethroids.
18. Reiterate the need to start implementing control measures and epidemiological surveillance in border areas of Brazil-Uruguay, Brazil-Paraguay, Argentina-Bolivia, and Chile-Peru, in an attempt to ensure control levels reached in the countries.
19. Take into account epidemiological changes resulting from control measures, the environmental factors affecting transmission, and political-institutional changes, especially regarding the decentralization of operational programs, and underlining the fundamental importance of the following:
  - a. Redefine areas and risk conditions.
  - b. Demonstrate that risk clearly to local/municipal, departmental, provincial, or state authorities.
  - c. Define surveillance and proportional control activities and adapt them to the current risk in each existing case.
  - d. At the regional and central levels, underwrite the activities expressed in communications between municipalities and the government.
  - e. Concerning the care of persons infected with Chagas, acknowledge the importance of secondary and tertiary levels of prevention.
20. Reiterate recommendations made to INCOSUR Member Countries to carry out studies on the costs and risks of non-intervention.
21. Promote and support the process to interrupt vector-borne transmission of *T. cruzi* by *T. infestans* that will take place in Brazil by the 2005–2006 biennium throughout its national endemic area.
22. Request at highest level in PAHO a note of congratulation to be addressed to the Ministry of Public Health and Social Welfare of Paraguay for having achieved its 2004 goal in managing entomological evaluation and vector control throughout 100% of its endemic area. Acknowledge the fundamental importance of continuing these activities to consolidate the progress made, via the implementation of an epidemiological surveillance system at country level.

23. Acknowledge the fundamental importance of and support the 2005–2007 strategic planning process being carried out by Provincial Chagas Program Chiefs in the endemic areas of the Argentine Republic.
24. Continue developing and implementing activities related to detection, diagnosis, management, and treatment of congenital Chagas, favoring its insertion into the health services of the countries. Propose for 2006 the holding of an event involving the participation of area specialists and national authorities from the area of maternal and child health.
25. Express via the country delegates agreement on the need for the most peripheral levels of the health system with managerial capacity to be involved in surveillance activities, and that they progressively assume those operations. Understand this as an absolutely indispensable condition for the sustainability of such actions at an advanced control phase.

## Decisions of the Intergovernmental Commission

- Approve the report of the international working groups on the evaluations carried out by the Chagas Disease Control Programs in Argentina (Entre Ríos) and by the National Chagas Program in Brazil (Rio Grande do Sul).
- Name Brazil as Headquarters for the *XV<sup>th</sup> Meeting of the Intergovernmental Commission of the Southern Cone (INCOSUR) for the Elimination of T. INFESTANS and the Interruption of Transfusional Transmisión of American Trypanosomiasis.*

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## Links

<http://www.paho.org/english/ad/dpc/cd/dch-incosur-14-2005.htm> (this document)  
<http://www.paho.org/english/ad/dpc/cd/chagas.htm> (PAHO Chagas Page)