



CONTROL AND ELIMINATION OF NEGLECTED INFECTIOUS DISEASES: **Joining efforts for the present and future of Latin America and the Caribbean**

TOGETHER WE CAN CHANGE HISTORY AND PUT AN END TO NID!

The Neglected Infectious Diseases - NID, also known as “forgotten” diseases, affect:

- the poorest of the poor and the most vulnerable populations
- people lacking access to health services, education, drinking water and basic sanitation – particularly people living in rural areas as well as in urban slums or favelas

Though they seldom cause death, they are chronic diseases with debilitating long-term effects which negatively affect:

- the growth, mental and physical development and learning capacity of children
- the working productivity of adults
- the self-esteem and welfare of people since some of them can cause disfigurement leading to stigma and discrimination which in turn results in further neglect

In 2009 PAHO’s Member States approved Resolution CD49. R19 for the control or elimination of NID and other infectious diseases related to poverty, which is the reference frame

for implementing integrated actions in Latin America and the Caribbean with a focus on:

- prompt and adequate diagnosis and treatment with effective and low-cost drugs that can be combined when 2 or more NID coexist in a given geographical area
- integration of efforts between health programs and platforms to increase access and coverage of interventions to the most affected populations (Primary Health Care, Expanded Program of Immunizations, Integrated Management of Childhood Illness, nutrition programs, health programs for children enrolled in schools).
- access to integrated actions in order to address the social determinants of health, mainly those which favor the persistence of transmission of NID (lack of safe drinking water, basic sanitation, education, housing, etc.) for which the inter-sectoral integrated work is promoting reduction of inequalities, stigma and discrimination within the framework of granting human rights, gender equality, cultural diversity and health promotion
- technical cooperation by PAHO for the development and implementation of integrated plans of action to facilitate the collaborative and integrated work within the health sector and with other sectors for the control and elimination of NID.



www.paho.org/neglecteddiseases



Success stories in Latin America and the Caribbean:

Although the Neglected Infectious Diseases - NID continue to be a public health challenge, the Region has had important achievements:

- Interruption of onchocerciasis transmission in 10 of the 13 foci in six countries in the Americas
- Total or partial interruption of vector-borne domestic transmission of Chagas disease in 14 countries in the Region
- Implementation of universal screening of blood donors to prevent transfusional transmission of Chagas disease in 20 of 21 endemic countries.
- Elimination of leprosy as a public health problem at the national level in 34 of the 35 countries in the Region
- Confirmation of the interruption of lymphatic filariasis transmission in Costa Rica, Suriname and Trinidad and Tobago
- Millions of boys and girls who are periodically dewormed for intestinal worms, though there is still a big gap which needs to be closed

The control and elimination of NID will be an important public health achievement which will add to the successful history of disease elimination in the region. Winning the battle against NID we can contribute to improving the living conditions of poor communities and will set an evidence-based example which can motivate other countries and regions to follow a similar path.

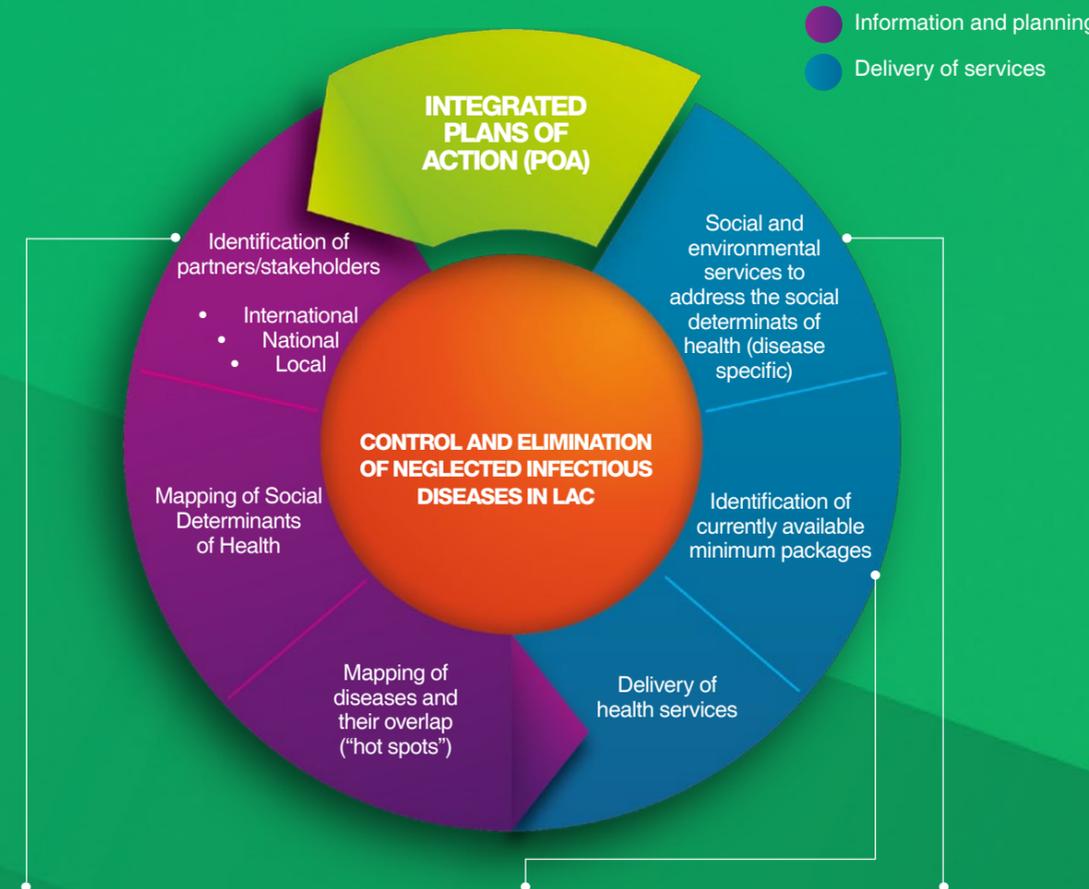
Some of the NID were introduced in Latin America and the Caribbean - LAC with slavery and the time has come to end this legacy. Although Latin America and the Caribbean is not the poorest of the world's regions, it is the one with the greatest economic inequalities and by addressing the NID we have the opportunity to contribute to reduce them.

*Together we can see the END of the NID!
Together we can win the battle!
It is an ethical and moral imperative!*

- Education
- Environment
- Water and sanitation
- Social mobilization and community participation
- Infrastructure
- Poverty reduction
- Agriculture and animal husbandry
- Nutrition
- Gender, Human Rights and Cultural Diversity

- Development of minimum packages for the future
- ¿To whom should the services be provided? Where? How? When (how often)? Quality?
- Identification of common platforms for delivery of health services and drugs (mass drug administration)

- Safe water in schools and houses
- Ventilated improved pit latrines
- Improvement of houses and their surroundings
- Control and recycling of residual waste
- Use of shoes
- Interventions in health education and social mobilization
- COMBI - Communication for Behavioural Impact
- Microcredits



	Disease	Population at Risk and Countries with Foci, 2011	Key Interventions	Regional Goals (PAHO's Directing Council Resolution CD49.R19, 2009)
DISEASES TARGETED FOR ELIMINATION IN LAC	Onchocerciasis (River blindness)	0.5 million people living in areas at risk of transmission in Brazil, Colombia, Ecuador, Guatemala, Mexico and Venezuela	- Biannual Mass Drug Administration (MDA) of ivermectin to at risk communities - Health education and community participation	- To eliminate ocular morbidity and to interrupt transmission by 2012 (PAHO's Directing Council Resolution CD48R.12, 2008)
	Lymphatic filariasis (Elephantiasis)	12 million people at risk of infection in Brazil, Guyana, Haiti and Dominican Republic	- Annual Mass Drug Administration (MDA) during 5 to 7 years of diethylcarbamazine -DEC + albendazole to all the eligible population at risk. Albendazole also contributes to STH control - Integrated Vector Management - Improve and increase access to safe water and basic sanitation - Prevent and control disability	- Microfilaremia prevalence <1% in sentinel sites and in spot-check sites after the fifth MDA with at least 65% coverage of the total population in each MDA.
	Trachoma (Blinding trachoma)	50 million people at risk of infection in Brazil, Colombia, Guatemala and Mexico	- Control of trachoma based on the SAFE strategy: surgery to correct lesions which can lead to blindness, mass administration of antibiotics, promotion of facial washing and environmental improvement	- To eliminate new cases of blindness caused by trachoma (reduction in the prevalence of trachomatous trichiasis (TT) to less than 1 case per 1,000 (general population) and reduction in the prevalence of trachomatous inflammation – follicular (TF and TI) to less than 5% in children aged 1-9 year)
	Leprosy (Hansen's disease)	All countries have eliminated leprosy at national level (except Brazil), and at first subnational administrative level (except Bolivia, Dominican Republic, Paraguay and Venezuela)	- Prompt detection and timely treatment with multi-drug therapy of patients - Prevention of disability and rehabilitation - Intensified surveillance of contacts	- To eliminate leprosy as a public health problem (less than 1 case per 10,000 people) at the first sub-national political/administrative levels
DISEASES TARGETED FOR CONTROL IN LAC	Chagas disease	Mexico and all the countries in Central and South America	- Integrated vector management - Improve housing and environmental conditions - Increase screening in blood banks - Diagnosis of infection in pregnant mothers and diagnosis and treatment of their newborn babies	- To interrupt domestic vector-borne transmission of <i>T. cruzi</i> (domestic triatomine infestation index of less than 1% and negative seroprevalence in children up to five years of age, with the exception of the minimum represented by cases in children of seropositive mothers). - To interrupt transfusional transmission of <i>T. cruzi</i> (100% blood screening coverage). (PAHO's Directing Council Resolution CD50.R17, 2010)
	Schistosomiasis (blood flukes)	25 million people living in areas at risk of transmission in Brazil, Venezuela, Suriname and Saint Lucia. Status of transmission needs to be evaluated in Dominican Republic	- Preventive chemotherapy for at least 75% of school-age children living in at-risk areas which can be integrated with albendazole or mebendazole for STH control - Improvement of access to safe drinking water and excreta disposal systems - Focalized snail control - Avoid contact with contaminated water	- To reduce prevalence and parasite load in high transmission areas to less than 10% prevalence by 2015
	Soil-transmitted helminths (intestinal worms)	13.8 million pre-school age children and 31 million school age children at risk of infection in 30 countries	- Albendazole or mebendazole for pre-school age and school age children living in areas with prevalence of soil-transmitted helminths above 20% or in areas at risk of transmission - Integration with treatments for schistosomiasis, lymphatic filariasis or trachoma in areas of co-endemicity - Integration with other programs such as the Expanded Program of Immunization, healthy schools program and nutrition - Improve access to safe water and basic sanitation - Promotion of use of shoes	- To reduce prevalence among school-age children in high risk areas (prevalence >50%) to <20% prevalence as measured by quantitative egg count, by 2015
DISEASES FOR WHICH ADEQUATE TOOLS NEED TO BE DEVELOPED	Cutaneous and mucocutaneous Leishmaniasis	All countries in Central and South America, except Chile and Uruguay	- Prompt detection and treatment of cases - Integrated vector management in special situations, where applicable	- Morbidity control and prevention of severe disease (This is the regional goal established by PAHO's regional leishmaniasis program)
	Visceral Leishmaniasis	Endemic countries: Brazil, Paraguay, Argentina, Colombia and Venezuela Countries with sporadic cases: Bolivia, Costa Rica, El Salvador, Guatemala, Honduras, Mexico and Nicaragua	- Prompt detection and treatment of cases - Integrated vector management (environmental and chemical control) - Control of domestic animal reservoirs	- Morbidity control and prevention of severe disease (This is the regional goal established by PAHO's regional leishmaniasis program)
	Fascioliasis (Liver fluke)	The Andean highlands is the most affected area. In some communities 50 to 75% of the population might be infected	- Large scale mass drug administration of triclabendazole - Improve access to safe drinking water and basic sanitation - Adequate manipulation and cooking of foods - Focalized snail control	- To reduce the burden of disease in areas at risk (This is the goal established by the WHO global fascioliasis program)

Five additional diseases were included in PAHO's Directing Council Resolution CD49.R19 which are not mentioned in this table, for which specific programs exist in PAHO: malaria, neonatal tetanus (in the immunization program), congenital syphilis (in the HIV/AIDS program), human rabies transmitted by dogs and plague (in the veterinary public health program PAHO / PANAFOTSA).

Please visit our website www.paho.org/neglecteddiseases to learn more about the NID.