Challenges in maintaining capacities for outbreaks of other vector borne diseases

Audrey Lenhart PhD MPH Research Entomologist

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Alternate title...

The Zika Crisis: A Public Health Entomology Opportunity

Endangered Species











Existing public health entomology capacities in the region

- Highly heterogeneous
- Most countries conduct routine vector surveillance
- Many countries have the capacity for insecticide resistance monitoring
- Highly variable infrastructure capacities
- Resource limitations are ubiquitous

Resources are focused on the diseases that produce the greatest public health burden

Key vector borne diseases in the Americas

- Malaria
- Dengue
- Chikungunya
- Lymphatic filariasis







- Other emerging arboviruses?i.e., Zika
- Chagas disease



Leishmaniasis



Onchocerciasis



Schistosomiasis

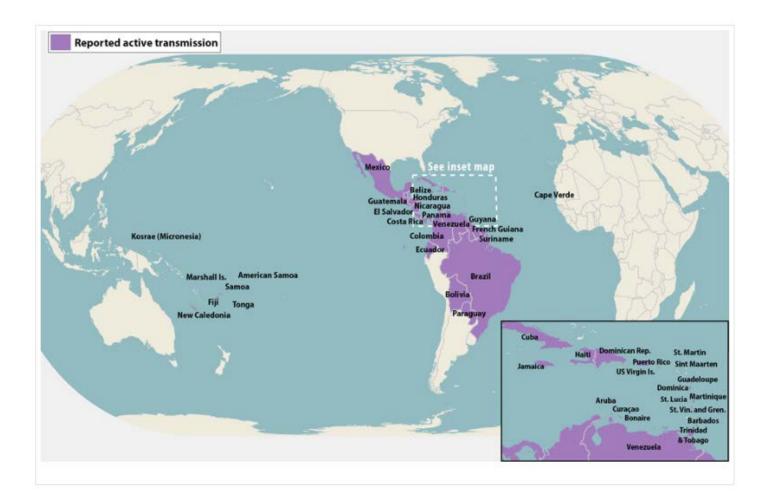


Shifting public health burden

Parasitic diseases:

- Onchocerciasis \rightarrow nearly eliminated
- LF → continues to progress toward elimination
- Chagas \rightarrow large-scale regional reductions
- Malaria \rightarrow regional declines and current elimination push
- The vector borne diseases currently causing the greatest public health burden (Zika, dengue, and chikungunya) are arboviruses
- An IVM framework could be particularly useful in maintaining capacities that can be applied across vector borne diseases

Countries with current vector-borne Zika transmission



The current Zika outbreak

- Vector control is in the spotlight
- Widespread political will to bring outbreak under control
- We are facing a unique opportunity to strengthen public health entomology in the region
 - How do we do this in the most sustainable and impactful way?

Build lasting capacity

Opportunities for further education in public health entomology

- Scholarships for higher education
- Certifications
- Continuing education

Job creation

- Permanent positions in national programs
 - Professional
 - Technical

Enhance vector surveillance

Incorporation of vector surveillance and control data into GISplatforms

Novel surveillance tools

Use of nontraditional indicators

Insecticide resistance detection, intensity, and mechanisms

Vector control

- WHO recommendations for emergency Zika vector control (18 March 2016):
 - **Targeted residual spraying** of resting sites of *Aedes* spp. mosquitoes primarily inside and, to a lesser extent, around houses as the primary vector control intervention for immediate response.
 - **Space spraying** is effective inside buildings where *Aedes* spp. mosquitoes rest and bite. It has no residual effect. Its application outdoors only suppresses vector populations temporarily and is not as effective as indoor space spraying.
 - Larval control including source reduction and larviciding should be applied where appropriate through community mobilization.
 - Personal protection measures should be used to protect against day biting mosquitoes. These include the use of appropriate repellents and wearing of light-coloured loose fitting clothing. This is especially important during pregnancy.

Evaluation of vector control strategies

Efficacy is key, but also scalability and feasibility

- What works best in which scenario: phased response plans
 - Emergency (widespread outbreak)
 - Routine (endemic transmission)
 - Maintenance (no transmission but vector is present)

Quality control mechanisms

Training and refreshers offered to operational personnel

Calibration and maintenance of equipment

Proper personal protective equipment

Build lasting partnerships

• Central pillar of IVM

Engage stakeholders

- Community
- Industry
- Businesses
- Other ministries
- NGOs
- Etc...

Social mobilization

In conclusion...

- The current Zika crisis is offering us an unprecedented opportunity to build long-term capacity for public health entomology in the region
- We need to leverage these resources strategically to achieve the broadest and most integrated impact across vector-borne diseases

Thank you/Gracias/Obrigada/Merci



