PAHO Consultation
on
Congenital Chagas Disease,
Its Epidemiology and Management


Communicable Disease Unit
Disease Prevention and Control
(PAHO/AD/DPC/CD)

in collaboration with
Latin American Center for Perinatology and Human Development
(CLAP)
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Objectives

To consult with researchers, clinicians, and program managers dealing with Congenital
Chagas Disease, for the following purposes:

• To arrive at and update a situational diagnosis of the disease and its management.
• To develop guidelines for a management guide.
• To establish a risk and impact projection on the disease in the Region.
• To generate guidelines to regularly and sustainably implement the necessary actions in
the countries.

Participants

A select group of researchers, clinicians, program managers, and program operators working
with Congenital Chagas Disease in the Region of the Americas, with subregional emphasis on
the Southern Cone and with the participation of the Université Libre de Bruxelles/ULB
(Free University of Brussels), Belgium.

Recommendations

After due consideration, the Advisory Group recommends the following:

1. The Advisory Group considers it indispensable to carry out intervention and control
activities to prevent and control congenital infection by Trypanosoma cruzi, due to the
importance that the latter has on children’s health and the epidemiology of the
parasitosis.

2. In consideration of the historic time that Chagas disease control is now going through
throughout the Region of the Americas, the Advisory Group wishes to express the
need to consolidate successful actions and to increase efforts to control vectoral and
transfusional transmission of T. cruzi.
3. The Advisory Group points out that, in those regions where achievements or advancements have been made in controlling vectoral and transfusional *T. cruzi* transmission, congenital transmission constitutes the main and most persistent form of the parasitosis among the human population.

4. The Advisory Group considers that the document *Congenital Infection from T. CRUZI: From Mechanisms of Transmission to Strategies for Diagnosis and Control* (Rev. Soc. Bras. Med. Trop., 2003, 36 (6): 767-771), resulting from the International Colloquium at Cochabamba, Bolivia (6–8 November 2002), reflects the main orientations and provides fundamental guidelines on which to base the necessary screening, diagnosis, treatment and monitoring in order to deal with individual cases completely and correctly, as well as with the public-health problem that Congenital Chagas Disease represents.

5. The Advisory Group recommends that basic data on Congenital Chagas Disease be integrated into the PAHO/CLAP Perinatal Information System. In addition, it recommends that that the problems of this parasitosis be incorporated into technical-cooperation activities in the area of maternal and child health that the Center promotes in the Region of the Americas.

6. The Advisory Group insists on the need for greater coordination of activities and interventions in the area of maternal and child health, in such a way that the activities aimed at screening, diagnosis, treatment, and monitoring of Congenital Chagas Disease be given preference both through routine vaccinations and/or clinical controls in each country, in order to achieve greater operational effectiveness, efficiency, and sustainability.

7. The Advisory Group proposes the following as a basic scheme for screening and diagnosis procedures, so that the countries can implement adequate, feasible, effective, efficient, and sustainable program activities actions against Congenital Chagas Disease:

   a. **Universal maternal serological testing**, first during pregnancy or upon admission to hospital for childbirth.

   b. **For children with positive Chagas serology:**
      i. Direct neonatal parasitological testing.
      ii. Conventional serological testing differed between 9 and 12 months of age.

In communities with a high incidence of vectoral transmission and **acute infection during pregnancy**, regardless of relevance, the possibility should be explored to provide universal testing for *T. cruzi* infection among all newborns.

In countries with a high frequency of home deliveries, newborns should be tested during their first contact with the health system.
8. With regard to treatment, the Advisory Group considers the following indispensable:
   a. That the countries allocate resources for the procurement of specific drugs (nifurtimox and benznidazole) and recommends a purchasing system managed with PAHO cooperation.
   b. That the countries make pediatric presentations of these drugs available for the etiological treatment; for this reason, the Advisory Group exhorts governments, NGOs, international organizations, and industry to implement the corresponding actions.

9. With regard to the family health, the Advisory Group recommends the following:
   a. To expand testing to all children whose mother has a positive serology.
   b. To provide medical care for the infected mother.

10. The Advisory Group reaffirms the need for developing programs and control measures for Congenital Chagas Disease throughout the entire country (in both endemic and non-endemic areas), due to the demographic and migratory realities that surpass all past and present limits in these areas to control vectoral transmission.

11. The Advisory Group considers it fundamental that the plans and operations developed for screening, diagnosis, treatment, and monitoring of Congenital Chagas Disease be incorporated definitively into the national health system at all levels of complexity, and integrated into Primary Health Care (PHC).

12. The Advisory Group considers it necessary to implement processes to educate and continually train human resources, so that they might carry out the recommended actions.

13. The Advisory Group invites the countries to make compulsory and to regulate screening, diagnosis, treatment, and monitoring of Congenital Chagas Disease, within its legal and/or health regulatory system.

14. The Advisory Group deems it of the greatest importance and interest to promote interagency technical cooperation between PAHO/WHO, the Belgian Cooperation agency, and the French Institute for Research in Development (Institut de Recherche en Développement / IRD), to support the organization, development, scientific research, and human-resources training required to strengthen control measures against Congenital Chagas Disease in the Region of the Americas.
Annex I: Agenda

All presentations were made in Spanish.

Meeting Site: Latin American Center for Perinatology and Human Development (PAHO/CLAP).
All activities were held on the 15th floor in the CLAP meeting room.

Thursday, 24 June 2004

09:00 Opening ceremony.
09:30 Diagnostic Situation Report
10:00 Congenitally Transmitted Infectious Diseases in the Americas
(Dr. José Luis Díaz Rossello)

10:15 Coffee Break

10:45 Strategies to Diagnose and Control Congenital T. cruzi Transmission:
Summary of the Cochabamba Document
(Dr. Yves Carlier)

Experiences in Controlling Congenital Chagas Disease
11:15 Argentina (Dra. Sonia Blanco, Argentina)
11:30 Chile (Dra. Myriam Lorca, Chile)
11:45 Bolivia (Dr. Faustino Torrico, Bolivia; Dr. Laurent Brutus, IRD-France)
12:00 Uruguay (Drs. M. Sarasúa, G. Queiruga, A. González y A. Lena, Uruguay)

Contributions to the Topic of Congenital Chagas Disease
14:00 Congenital Chagas Disease (Drs. H. Freilij, M. Biancardi y J. Altcheh)
14:30 Congenital Chagas Disease: The Case of Córdoba (Drs. E. Moretti y B. Basso)

15:00 Coffee Break

15:30 Mechanisms of Transmission and Progression of Congenital Trypanosoma cruzi Infection
(Dr. Ives Carlier)

Friday, 25 June 2004

09:00 Review of the Methodological and Organization Proposal for Action to
Diagnose and Manage Congenital Chagas Disease

10:15 Coffee Break

10:45 Discussion of the Proposal
14:00 Formulation of Recommendations and Conclusions

15:00 Coffee Break

15:30 Finish formulating Recommendation and Conclusions
17:00 Closure
Annex II: List of Participants

Advisory Group

Dra. Beatriz Basso
Departamento Diagnóstico y Tratamiento
Servicio Nacional de Chagas
Hospital Universitario Maternidad y Neonatología
Universidad Nacional de Córdoba
Rondeau 41
5000 Córdoba, Argentina
Tel: (+54-351) 422 2424
E-mail: ebi@fcm.unc.edu.ar

Dra. Sonia Beatriz Blanco
Ministério de Salud de Argentina
E. Mariotti 5920
V. Belgrano
Córdoba, Argentina
Tel: (0054 3543) 421 247
E-mail: sblanco@minsal.gob.ar

Dr. Laurent Brutus
Institut de Recherche pour le Développement (IRD)
Av. Hernando Siles 5290, Obrajes
9214 La Paz, Bolivia
Tel: (+591) 2222 1901
E-mail: laurent.brutus@ird.fr

Dr. Ives Carlier
Director del Laboratorio de Parasitología
Facultad de Medicina
808 Route de Larnik
B-1070 Bruselas, Bélgica
Tel: (+32) 2555 6255
E-mail: ycarlier@ulb.ac.be

Dr. Hector Frelij
Jefe Servicio de Parasitología
Hospital de Niños “Ricardo Gutiérrez Gallo” 1330
1425 Buenos Aires, Argentina
Tel: (+54-11) 4863 3712
E-mail: frelij@uolsinectis.com.ar

Dra. Alicia González Banfi
Unidad de Perinatología
Sanatorio Cansani
San Martín 2217
11800 Montevideo, Uruguay
Tel: (+598-2) 209 0437 / 208 0121
E-mail: alhec@chasque.net

Dra. Anaydée Lena
Hospital de Tacuarembó
Catalogne y Treinta y Trés
Tacuarembó, Uruguay
Tel: (+598-632) 2955 / 3812
E-mail: caminada@adinet.com.uy

Dra. Myriam Lorca
Facultad de Medicina
Universidad de Chile
Las Palermas 299, Instituto Quinta Normal
Santiago, Chile
Tel: (+56-2) 681 7911
E-mail: clorca@med.uchile.cl

Dr. Edgardo Moretti
Servicio Nacional de Chagas
Universidad Nacional de Córdoba
Rondeau 41
5000 Córdoba, Argentina
Tel: (+54-351) 422 2424
E-mail: emoretti@hospital-italiano.com.ar

Dra. Q.F. Graciela Queiruga
Jefa de Laboratorio
Banco de Previsión Social
Sanatorio Cansani
San Martín 2217
11800 Montevideo, Uruguay
Tel: (+598-2) 200 3642
E-mail: eggbmu@adinet.com.uy
queiruga@fq.edu.uy
Dr. Wellington Mario Sarasúa  
Hospital de Artigas  
Gremial Médica de Artigas  
18 de Julio s/n  
Artigas, Artigas  
Tel: (+598-77) 24 001  
E-mail: wmario@st.com.uy

Dr. Faustino Torrico  
Programa Nacional de Control de Chagas  
Pasaje Bernardo Trigo 451  
La Paz, Bolivia  
Tel: (+591-2) 244 1077  
E-mail: foxtorrico@yahoo.com

Participants from Uruguay

Dr. Guillermo Acosta Mohorade  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 1288 x1323  
E-mail: gacosta@higiene.edu.uy

Dra. Ana María Acuña Zúñiga  
Departamento de Parasitología  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 3075  
E-mail: anacuna@higiene.edu.uy

Dra. Raquel Ballesté  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 3104  
E-mail: micol@higiene.edu.uy

Dra. Yester Basmadjian  
Facultad de Medicina UDELAR  
Ministerio de Salud Pública  
Leguizamón esq. M. Cervantes  
Montevideo, Uruguay  
Tel: (+598-2) 622 45 01, 487 1288 x1323  
E-mail: yester@chasque.apc.org

Dr. Luis Calegari  
Departamento de Parasitología y Micología  
Instituto de Higiene  
Av. Navarro 3051, Piso 3  
Montevideo, Uruguay  
Tel: (+598-2) 487 1288  
E-mail: calegari@adinet.com.uy  
parasito@higiene.edu.uy

Sra. Elisa Figueredo  
Estudiante  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 1288 x1327  
E-mail: elisaddoc@yahoo.com

Dra. Paola González Curbelo  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 1288 x1323  
E-mail: marine@higiene.edu.uy

Dra. Marelina González  
Asistente de Parasitología  
Instituto de Higiene  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (598-2) 487 1288  
E-mail: marelina@higiene.edu.uy

Dra. Elena Zanetta  
Instituto de Higiene  
Av. Navarro 3051  
11600 Montevideo, Uruguay  
Tel: (+598-2) 487 1288  
E-mail: ezanetta@higiene.edu.uy

Dr. Andrés Puime  
Encargado Unidad de Parasitología  
Ministerio de Salud Pública  
Av. Navarro 3051  
Montevideo, Uruguay  
Tel: (+598-2) 487 1288  
E-mail: puime@higiene.edu.uy
PAHO/WHO Technical Secretariat

Dr. Fernando Barros
Consultor
Centro Latinoamericano de Perinatología (CLAP)
OPS/OMS
Hospital de Clínicas, Piso 16
Av. Italia s/n
Montevideo, Uruguay
Tel: (+598-2) 487 2929
E-mail: barrosfe@clap.ops-oms.org

Dr. José Luis Díaz Rosello
Centro Latinoamericano de Perinatología
OPS/OMS
Hospital de Clínicas, Piso 16
Av. Italia s/n
Montevideo, Uruguay
Tel: (+598-2) 487 2929
E-mail: diazjose@clap.ops-oms.org

Dr. Roberto Salvatella
Punto Focal Regional de Chagas
Representación de OPS/OMS en Uruguay
Av. Brasil 2697, Piso 2
Tel: (+598-2) 707 3590
E-mail: salvater@uru.ops-oms.org