

World Chagas Disease Day 2024

April 14, 2024

Concept Note

<u>Theme</u>	Early diagnosis, treatment, and follow-up #WorlChagasDiseaseDay #Chagas
<u>SOCO</u>	To raise awareness about Chagas disease among policymakers, healthcare providers, and the public about the importance of access to early diagnosis, treatment, and comprehensive follow-up of their condition.
<u>Background</u>	<p>World Chagas Disease Day is observed annually on April 14 to increase awareness about this neglected disease. It is considered neglected because it receives little attention on the public health agenda. The World Health Assembly at WHO approved and endorsed the on this day in May 2019, with the first celebration held on April 14, 2020.</p> <p>World Chagas Day aims to raise awareness of Chagas disease, improve early detection, expand diagnostic coverage, and provide equitable access to clinical care.</p> <p>Chagas disease is a life-threatening parasitic disease caused by the microorganism <i>Trypanosoma cruzi</i>. It is transmitted to humans by insects - known as kissing bugs, bed bugs, chirimachas - by blood transfusion or organ transplantation, by consuming contaminated food, and during pregnancy and labor.</p> <p>Chagas disease is endemic in 21 countries in the Americas. However, 17 of these countries have successfully interrupted vector-borne transmission in homes at either the national or subnational level. This has resulted in a significant drop in the number of annual deaths, from an estimated 45,000 in 1990 to 10,000 today. Additionally, the population exposed to these insects has decreased from approximately 100 million to 70 million over the last 30 years. Despite these efforts, 6 million people are still infected, and around 30,000 new cases are reported each year due to all forms of transmission, causing approximately 12,000 deaths annually.</p> <p>Since the early 1990s, countries affected by Chagas disease have collaborated with PAHO/WHO to establish a successful program of horizontal technical cooperation between countries. This initiative is known as the Subregional Initiatives for the</p>

	<p>Prevention and Control of Chagas Disease and includes the Southern Cone, Central America and Mexico, Andean countries, and Amazonian countries.</p> <p>The Initiatives have led to significant reductions in the number of acute cases and the presence of vectors within homes in all endemic areas, as well as in the reduction of morbidity, mortality, and suffering of those affected.</p> <p>The World Health Assembly 2010 resolution WHA 63.20 and PAHO/WHO 2010 resolution CD50.R17, establish and implement the current Strategy and Plan of Action for Chagas disease prevention, control, and care.</p> <p>PAHO/WHO 2009 resolution CD49.R19 and 2016 resolution CD55.R9 of Neglected Infectious Diseases, provide a frame of reference for controlling and eliminating Chagas disease as a public health problem.</p> <p>Learn more: https://www.paho.org/en/topics/chagas-disease</p>
<p><u>Audiences</u></p>	<ul style="list-style-type: none"> • Ministries of Health and Health Workers • Civil Society Organizations • Representatives of affected people and communities living at risk of infection • Academia and research institutions • Bilateral and multilateral institutions • Implementers of Chagas Disease programs • Patients and communities requiring medical interventions for the prevention and control of this disease • General Public
<p><u>Call to Action and Key Messages</u></p>	<p>Early diagnosis, treatment, and follow-up. Raise awareness among patients, their families, and health workers about the need for early (timely) diagnosis and lifelong follow-up of people affected by the disease.</p> <p>Early diagnosis Screening and treatment of girls and women of childbearing age, along with screening of newborns of infected mothers, is essential to stop transplacental congenital transmission of the infection.</p> <p>Comprehensive treatment Chagas disease can be cured if the treatment (benznidazole or nifurtimox) is administered in the acute phase of the disease, shortly after the initial infection occurs, or when it is administered to children. In the chronic phase of the disease in adults, antiparasitic treatment can improve the progression of the condition.</p> <p>Follow-up: Lifelong accompaniment The patient as a carrier of chronic infection must be followed by the health system,</p>

to detect early possible evolutions of organ damage and thus treat them appropriately.

Key Messages

Pregnant women who live or have lived in areas where there is a kissing bug that transmits Chagas disease should include a blood test to detect the disease during their prenatal checkups. And women who test positive can be treated in health services to prevent transmission to the baby.

Chagas disease exists in both rural and urban areas of the Americas, and health workers can help detect and prevent the disease, taking into account the patient's risk factors (mainly, living or having lived in an endemic area; being the child of an infected mother).

Depending on the geographic area, health workers must take measures for prevention and control. These include (a) screening tests on donated organs, tissues, or cells and their recipients; (b) access to diagnosis and treatment for persons for whom deworming treatment is indicated or recommended, especially children and women of childbearing age before pregnancy.

The first level of health care, through the different health professionals that compose it, and in interaction with other levels of health, plays a key role in improving current indicators of detection, treatment, monitoring, and reporting.

It is critical to improve case detection by evaluating available diagnostic means, including rapid serological or chemiluminescence tests, and molecular biology tests, and identifying the most cost-effective algorithms by territory.

Promoting comprehensive studies (biomedical, psychosocial and environmental) on the determinants and risk factors of Chagas disease is crucial to propose effective multidimensional approaches for its prevention and control.

National information systems aimed at monitoring the number of acute and chronic cases and routes of active transmission play a key role to control the disease.

In recent years, there has been an increasing trend of people moving from rural areas to cities, not just in Latin America but also in other parts of the world. It has led to changes of how Chagas disease is transmitted, with a greater emphasis on congenital and transfusion transmission in urban areas. Additionally, there have been instances of oral transmission in the Amazon basin, which have not yet been adequately characterized. These changes have resulted in a new epidemiological landscape for Chagas disease.

Learn more: [Chagas disease \(also known as American trypanosomiasis\) \(who.int\)](https://www.who.int/news-room/fact-sheets/detail/chagas-disease)

<p><u>General Public Messages</u></p>	<ul style="list-style-type: none"> • Chagas is a parasitic disease caused by the protozoan <i>Trypanosoma cruzi</i>. It is transmitted by <i>Triatominae</i> insects, especially the so-called “kissing bugs” that typically colonize poor-quality dwellings, hiding during the day and becoming active at night, biting people while they are asleep. • Chagas disease is present in Central and South American countries, especially in rural areas, in houses with thatched roofs, or with cracked or poorly constructed walls. • The parasites enter the body when someone who has been bitten instinctively scratches the bite and thus introduces feces left by the insect into the wound created by the bite, or subsequently touches another open cut/wound, an eye, or their mouth. • Chagas can also be transmitted through blood transfusions or organ transplants, from mother to child through the placenta, and contaminated food. • Early symptoms of infection include headache, fever, swelling, cough, and abdominal pain. • In 70% of cases, people who are infected with a certain disease do not exhibit any additional symptoms throughout the illness. However, 30% of those who are affected can experience serious and long-term consequences that can affect their nervous, digestive, and cardiovascular systems, and could ultimately lead to mortality. • The diagnosis of Chagas disease can be obtained through a blood test. Once the disease is detected, the treatment indicated by the health provider should be followed, following PAHO's recommendations. • Chagas can be cured if the treatment is administered to children or is administered shortly after infection. During the chronic phase of the disease in adults, an antiparasitic treatment can stop or prevent the progression of the condition, if it is administered with strict medical care. • There is no vaccine to prevent Chagas disease. • To prevent the bites of transmitter insects, it is recommended to spray dwellings and their surroundings with insecticides, improve housing to prevent infestation by the vector, use mosquito nets, and hygienic practices, among others.
<p><u>Communication Products/Channels</u></p>	<ul style="list-style-type: none"> • Campaign webpage • Educative videos on social media • Banner web • Message of Director (video)

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| | <ul style="list-style-type: none">• CDE bulletin• Regional event, April 10, 2024. |
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