# NTD News

NEGLECTED TROPICAL DISEASES NEWSLETTER



# Communities drive elimination of schistosomiasis through improving water, sanitation and hygiene in the Lao People's Democratic Republic

The Community-Led Initiative to Accelerate Elimination of Schistosomiasis with Water, Sanitation and Hygiene interventions (CL-SWASH) was implemented in Champasak Province, Lao People's Democratic Republic. The training of facilitators for provincial and district staff was led by the Water Safety Plan (WSP) facilitators in the Ministry of Health's Center for Environmental Health and Water Supply with assistance from the national NTD programme in the Ministry of Health and the World Health Organization. Subsequently, the trained provincial and district staff from the Provincial Health Department responsible for NTDs and WASH jointly facilitated the CL-SWASH planning activities in the targeted villages with community members. It aims at empowering communities to become the drivers of elimination of schistosomiasis by voluntarily making decisions and taking actions in building latrines and improving their hygiene behaviours.



# NEWS FROM MEMBER COUNTRIES

#### **American Samoa**

A project to strengthen the transmission assessment survey (TAS) for lymphatic filariasis (LF) was initiated in August 2016 by the Australian National University, in collaboration with the American Samoa Community College, the Neglected Tropical Diseases Support Center at the Task Force for Global Health and the United States Centers for Disease Control and Prevention. The project aims to test options for strengthening the existing TAS platform to enable LF elimination programmes to have increased confidence in their cessation of mass drug administration (MDA) and surveillance decisions. The study is still underway in Tutuila and Anu'u in American Samoa.

#### Cambodia

After being validated as having eliminated LF in May 2016, the plaque and letter of appreciation for their achievement was presented to the Honourable Dr Bunheng Mam, Cambodian Minister of Health, by Dr Margaret Chan, WHO Director-General, Dr Shin Young-soo, WHO Regional Director for the Western Pacific and Honourable YB Datuk Seri Dr S. Subramaniam, Chairperson of the sixty-seventh session of the WHO Regional Committee for the Western Pacific and Minister of Health, Malaysia, during the opening ceremony of the sixty-seventh session of the WHO Regional Committee for the Western Pacific on 10 October 2016.

The National Helminth Control Program and the Population Service Khmer continued to organize deworming campaigns against soil-transmitted helminthiases (STH) for workers and their families working in plantations located in eight northeastern provinces of Cambodia in July and November 2016. The report is awaited.



Deworming campaigns for workers and their families in plantations in northeastern provinces in Cambodia, July-November 2016.

The national, provincial and district level officers responsible for NTDs and water, sanitation and hygiene (WASH) in the Ministry of Health and Ministry of Rural Development participated in the first training of facilitators and community trainings of the community-led initiative to eliminate schistosomiasis with water, sanitation and hygiene interventions (CL-SWASH) organized by the national, provincial and district CL-SWASH Task Force, with the support of the WHO country office, a WHO consultant and the WHO Regional Office for the Western Pacific in 10 prioritized schistosomiasis-endemic villages in Champasak province, the Lao People's Democratic Republic from 9 to 12 November 2016. During this mission, the delegation from Cambodia also developed the CL-SWASH joint workplan to be implemented in schistosomiasis-endemic provinces in early 2017.

#### China

The Chinese Center for Disease Control and Prevention (China CDC) hosted a global health training workshop for vectorborne tropical diseases on 21–25 November 2016 in Urumqi, Xinjiang. The conference was supported by the China UK Global Health Support Programme and the National Institute of Parasitic Diseases (NIPD). More than 70 trainees participated in the workshop from 20 provincial health and family planning commissions, China CDC and parasitic disease institutions involved in prevention and treatment of parasitic diseases in China. The workshop was designed to provide trainees with knowledge on the latest trends, strategies and technologies on global health and covered a variety of topics, including global health cooperation, prevention and control, and diagnosis and treatment of vectorborne diseases.



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Group photo at the Global Health Training Workshop for Vectorborne Tropical Diseases, 21 to 25 November 2016 in Urumqi, Xinjiang

The national medical parasitology symposium on parasitic diseases control and research was held from 17 to 18 August 2016 in Zhengzhou, Henan province. The symposium was hosted by the Chinese Preventive Medical Association and organized by NIPD, China CDC, the Medical Parasitology Branch of Henan Preventive Medical Association and the Henan Provincial Center for Disease Control and Prevention. In total, 125 participants from 23 provinces,

including 30 municipal CDCs and 24 universities and colleges, attended the meeting. The symposium received 75 abstracts, of which 27 were presented. Six outstanding reports received awards after expert appraisal.

The NIPD, together with China CDC, completed a three-year project 'the Centre of Excellence in Health Development Aid in China: Capacity Building and Information Dissemination' in December 2016. A final assessment of the project was held on 19 December 2016. The project was designed to train a group of professionals majoring in global health and/or tropical diseases prevention and control. Through the project, the NIPD was able to establish the Global Health Center and undertook the secretariat work of the WHO Collaborating Centre for Tropical Diseases and the Global Health Branch of Chinese Preventive Medicine Association to serve as one of the centres of excellence in health development aid in China.

#### **Cook Islands**

After being validated as having eliminated LF in May 2016, the plaque and letter of appreciation for their achievement was presented to the Honourable Nandi Tuaine Glassie, Minister of Health, Cook Islands, by Dr Margaret Chan, WHO Director-General and Dr Shin Young-soo, WHO Regional Director for the Western Pacific Region and Honourable YB Datuk Seri Dr S. Subramaniam, the Chairperson for the sixty-seventh session of the WHO Regional Committee for the Western Pacific and the Minister of Health, Malaysia during the opening ceremony of the sixty-seventh session of the WHO Regional Committee for the Western Pacific on 10 October 2016.

# Fiji

The pre-TAS survey was conducted in sentinel and spot check sites in the three remaining implementation units, namely the Eastern division, Taveuni subdivision in the Northern Division and Malolo Island in the Western Division between July and September 2016, after completing two additional rounds of MDA in 2015 and 2016 with reported coverage of over 80%. The pre-TAS results of all three areas showed ongoing transmission with LF, with antigenaemia prevalence rates of 4.7 % in the Eastern division, 3.3% in Taveuni subdivision, and 16% in Malolo Island even after the additional MDA rounds. The all three areas are now planning to conduct two more intense MDA rounds using the directly observed treatment (DOT) strategy followed by coverage assessment surveys. MDA campaigns for elimination of LF in Fiji started in 2002 and continued annually. The Central Division stopped MDA in 2014. The Western Division stopped MDA in 2011 with only Malolo Island re-starting MDA in 2014. The Northern Division, except for Taveuni Island, stopped MDA in 2013.

The Health Promoting Schools Expansion Project, a three year project funded by the Korea International Cooperation Agency with technical support from WHO, was initiated by the Ministry of Health and Medical Services and the Ministry of Education in late 2016. The project will involve 204 primary and secondary schools in the country, focusing on three core areas, including good water, sanitation and hygiene practices,

which are expected to contribute to reduction of transmission of STH. In areas where MDA against LF was stopped, transition from LF MDA to school deworming was not conducted smoothly and since then, deworming coverage against soil-transmitted helminthiases (STH) in Fiji has dropped drastically. This project, which covers slightly over a third of the schools in Fiji, is expected to provide a much needed boost for deworming coverage.





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Top: Blood testing for lymphatic filariasis in Taveuni Island, Fiji during the sentinel site survey in 2016. Bottom: Fijian students taking part in WASH activities of Health Promoting Schools in Fiji.

#### **French Polynesia**

In November and December 2016, TAS1 was conducted in two implementation units, Tuamotu Gambier and Australes, following a pre-TAS survey conducted in March 2015, which demonstrated that both implementation units had zero antigenaemia prevalence. The TAS 1 found that in Australes there were no positives out of 204 individuals tested with the Filaria Test Strip (FTS), and in Taumotu Gambier there were seven FTS positives from 168 individuals tested. All the positive cases were retested and turned out to be negative. As a result, both of these implementation units were considered to have passed TAS.

Of the remaining five implementation units, Tahiti Urban area is now in a post-MDA surveillance phase having passed TAS1 in 2015. The Winward Islands rural areas and the Marquesas

North group passed pre-TAS and TAS between October and December 2016. The Marquesas South group and Leeward Islands failed the pre-TAS and therefore will conduct two more rounds of MDA, with an increased focus and intensification on the DOT strategy. Detailed results are awaited.

#### Kiribati

Between July and December 2016, TAS 2 was conducted in the Line Islands and TAS 3 was conducted in the Gilbert Islands. In the Line Islands, seven primary schools in two islands were visited and 542 students were tested for LF using immunochromatographic test (ICT). All students tested negative for LF. In the Gilbert Islands, 28 primary schools in six islands were visited and 798 students were tested. All students tested negative for LF.

A detailed micro-plan for MDA for elimination of trachoma was developed in October 2016 and donation of azithromycin through the International Trachoma Initiative was received by Kiribati. MDA is scheduled to commence in March 2017 with financial support from the Fred Hollows Foundation.









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Top left: Public health nurses explaining to children about lymphatic filariasis (LF) transmission before they undertake blood tests at the Tennessee Primary School, Christmas Island, Kiribati in July 2016; Top right: Primary school children in North Tarawa, Kiribati, are tested for LF by public health nurses in October 2016; Bottom left: Health staff being trained on the proper use of the ICT for LF testing at Marakei Island, Kiribati; Bottom right: A patient who has suffered from lymphedema in his left leg for over 26 years being visited during a LF morbidity follow-up in Kiribati.

Deworming of preschool-aged children, school-aged children, and women of child-bearing age against STH was implemented in September 2016. The deworming coverage of preschoolaged children and school-aged children combined was 71.7%. The programme, through outreach visits, has also dewormed 54% of the women of child-bearing age during this round.

# The Lao People's Democratic Republic

Pre-TAS for LF was conducted in two sentinel and two spot check sites in Attapeu province, the only endemic province in the country, in October 2016. The antigenaemia prevalence was 0.08% (one out of 1,200 individuals tested). The final round of MDA and TAS implementation is planned for February and October 2017, respectively.







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The provincial and district health department staffs responsible for NTD and water sanitation and hygiene facilitating the CL-SWASH planning with community members by mapping sanitation status in a village map and discussing transmission of schistosomiasis in the targeted schistosomiasis-endemic villages in Champasak Province, November 2016

Stool examinations were conducted at seven sentinel sites before MDA against schistosomiasis took place in August 2016. Stools were collected from both school-age children and adults. The prevalence and intensity of schistosomiasis is being analysed.

The CL-SWASH initiative was implemented in 10 prioritized schistosomiasis-endemic villages in Champasak Province from 9 to 12 November 2016. The first training of facilitators for provincial and district staff and training at the community level were conducted by the lead Water Safety Plan (WSP) facilitators in the Ministry of Health's Center for Environmental Health and Water Supply with assistance from a WHO consultant, the WHO Lao country office and a team from the WHO Regional Office for the Western Pacific. The trained provincial and district staff from the Provincial Health Department responsible for NTDs and WASH facilitated the CL-SWASH planning activities in the targeted villages with community members. Six delegates from the Ministry of Health, the Ministry of Rural Development, and the provincial and district NTD and WASH focal points from Cambodia and

three delegates from the National Institute of Malariology, Parasitology and Entomology and the Health Environment Management Agency under the Ministry of Health in Viet Nam also participated as observers.

Teaching material on schistosomiasis prevention was developed and integrated into the official teaching curriculum for primary and secondary school teachers. This will be provided to all primary and secondary school principals in schistosomiasis-endemic districts by the national school health taskforce.

Stool examinations for STH at eight sentinel sites were conducted in September 2016. The prevalence of infection with any STH was 16.6% (223/1341). The intensity of trichuriasis ranged from light to moderate, whereas the ascariasis and hookworm infection ranged from light to high intensity. A detailed report is awaited.

Preventive chemotherapy intervention against schistosomiasis and STH were conducted between October and November 2016. Treatment coverage for STH was 94.9% and for schistosomiasis was 77.0%.

# Malaysia

TAS 1 was conducted in 16 implementation units while TAS 2 was conducted in 55 out of 127 implementation units in Malaysia. Four implementation units (Bangkalalak in Sabah, Sundar, Lawas and Mendamit in Sarawak) failed TAS 2. Tangkarason in Sabah failed the pre-TAS and will implement mini-TAS in 2017 to determine if there are any potential hot spots of persistent transmission within the implementation unit.

The WHO consultation to accelerate the elimination of Brugia malayi transmission in Indonesia and Malaysia was organized in Sabah from 13 to 15 December 2016 to discuss potential causes of persistent transmission of Brugia malayi in some areas of Indonesia and Malaysia, the results of relevant studies to date, and to determine programmatic actions and operational research priorities to address this issue. The consultation commended Malaysia for progress in achieving elimination threshold in many of the implementation units, the quality and extent of monitoring activities, and the proactive response in the few areas of remaining infection. Several programmatic actions were recommended, including enhanced MDA in implementation units where TAS or pre-TAS has failed, and consistent use of the Brugia Rapid tests in the surveys and implementation of mini-TAS in non-endemic implementation units surrounded by or adjacent to endemic implementation units where persistent transmission is currently observed.

# **Marshall Islands**

The dossier to claim elimination of LF as a public health problem was finalized, incorporating the outcomes of the final assessment of the prevalence of LF in the two originally endemic atolls (Mejit and Ailuk), completed in February 2016, as per the recommendation of the Regional Programme

Review Group (RPRG) in July 2015. The dossier was reviewed by the Regional Dossier Review Group (RDRG), the outcome of which was presented in the RPRG meeting in Manila, Philippines in July 2016. The RDRG recommended validating the claim pending minor editorial corrections.

Marshall Islands completed a school-based deworming round in September 2016 and data collection and reporting are being followed up.

#### The Federated States of Micronesia

The second round of MDA against LF continued in Chuuk State, after having been completed in Mortlocks Region in May 2016, the Northwest Region in June 2016, and the Faichuuk Region between August and September 2016. Faichuuk has a population of 11 524 in eight geographically scattered islands. The overall MDA coverage was 66% of the total population in the islands with a few villages achieving low coverage. The national programme is organizing mop up activities to provide MDA to the unreached. The Northern and Southern Namonia Regions are planning to complete MDA in April 2017. The widely scattered islands, limited manpower and local administrative constraints have been contributing factors to the delay in the implementation of MDA.

# Mongolia

The stakeholders meeting on cystic echinococcosis (CE) was held in Ulaanbaatar in September 2016. The meeting was organized by the Mongolian Society of Diagnostic Ultrasound in collaboration with the National Center for Zoonotic Diseases, with support from WHO. The health authorities and policymakers from the Ministry of Health, national experts from the School of Medicine in Mongolia (HSUM), members of the Institute of Veterinary Medicine, members of the National Communicable Disease Center, surgeons from national hospitals, ultrasound doctors, and epidemiologists from 21 provinces, participated in the meeting. The main objective of the meeting was to update participants about the current situation of CE in Mongolia and to agree upon priority actions to accelerate control and management of CE, such as: (i) embedding messages regarding prevention into locally adapted campaigns; (ii) establishing regular communication between human and animal health sectors about where patient catchments are located and how to support further investigations; and (iii) coordination of CE control activities between the public or private sectors. The meeting participants also agreed on the urgent need for a standard operating procedure for diagnosis and treatment of CE based on the WHO Informal Working Group in Echinococcosis staging in order to ensure quality treatment, to have good communication between patients and physicians, to provide routine follow up schedules prepared annually for 5 years, and to provide regular ultrasound courses so that local general practitioners are properly trained.

Study on the clinical management and burden estimate of CE was completed with support of WHO Headquarters in December 2016. The data analysis is ongoing.





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The Stakeholders Meeting on Cystic Echinococcosis (CE) in Ulaanbaatar in September 2016.

# **Palau**

National ethical clearance was obtained from the Institutional Review Board for the study protocol for assessing the prevalence of LF among migrant populations in Palau planned in October 2016. However, due to local manpower constraints, the survey was not initiated before the end of 2016. The rescheduled survey is expected to commence in March 2017, and following its completion, the dossier for validation of elimination of LF will be updated with its results and resubmitted to WHO for further review.

# **Papua New Guinea**

The third round of MDA for LF elimination in the New Ireland province was completed in October 2016. The coverage report is still being finalized. Plans are being made to implement the fourth round and to start MDA in one more province in 2017.

The multi-centre randomized controlled trial comparing efficacy of a single dose of treatment against yaws with 20mg/kg versus 30mg/kg body weight azithromycin was completed in December 2016. This study, supported by WHO and the Task force for Global Health, was carried out in Papua New Guinea and Ghana. In Papua New Guinea, the study took place on Karkar Island and Madang Province.

The follow-up completion rate of the study was 92% in Papua New Guinea. While the final results of the study are pending, clinically it appears that the single dose of 20mg/kg worked just as well as the 30 mg/kg dose. Upon release of the final study report, the plan is to conduct MDA on Karkar Island.

## **Philippines**

A Memorandum of Understanding was signed between the Bureau of Animal Industry and the Ministry of Health in December 2016 to formalize collaboration between human health and animal health sectors in working towards schistosomiasis control, specifically on implementation of interventions against buffalos and monitoring the impact of efforts to accelerate interruption of schistosomiasis transmission in the Philippines.

The Harmonized and Synchronized Combined Mass Drug Administration (HSCMDA) programme of the Philippine Ministry of Health was implemented nationwide in July 2016, which was the second round of the campaign conducted in January 2016. HSCMDA co-administered preventive medicines for LF and STH. Approximately 43 million children aged 1–18 years were targeted, with a reported coverage of 68% among school-aged children and 74.3% among preschool children. In particular, the treatment coverage among the schoolaged children enrolled in public schools was 82.3%. The LF elimination programme also reported the national coverage of 70.9% out of the 7 million people aged 2 years and above in need of preventive chemotherapy.

The Task Force for Global Health supported the national NTD programme in the Department of Health Philippines in piloting the MDA coverage supervision tool for LF and STH in Quezon and Camarines Norte provinces in August 2016. The monitoring tool allowed for supervisors and community drug distributors to monitor community and school-based distribution and to assess and respond to operational data immediately after MDA campaigns.

# **Solomon Islands**

The third round of a school-based deworming intervention took place in Honiara in August 2016. The treatment report is being awaited. In the meantime, the programme plans include collaborating with the Expanded Programme on Immunization and Human Papillomavirus vaccination programme to expand deworming for school-aged children in other provinces.

# **Tonga**

The dossier submitted by the Ministry of Health Tonga for validation of LF as a public health problem was reviewed by the RDRG and discussed at the RPRG meeting in Manila, Philippines, in July 2016. The RPRG acknowledged significant efforts by the Kingdom of Tonga in achieving the target for elimination of LF as a public health problem, and recommended Tonga re-submit the dossier after strengthening information on the number of patients with morbidity due to LF and availability of services for such patients, as well as the post-validation surveillance plan. Accordingly, the Tongan

programme is conducting a health facility-based survey to collect additional information on LF morbidity patients and service provision. The data are still being collated as of December 2016. The revised dossier is to be submitted in the early 2017.

#### Tuvalu

The second round of the additional two rounds of LF MDA recommended by the RPRG in 2013 was implemented between June and December 2016, with an overall MDA coverage of 72.4%. Tuvalu will conduct a TAS in July 2017 to determine if MDA can be discontinued.

The LF MDA round in 2016 served as the second round of the twice-yearly deworming against STH. The first deworming round was completed by June 2016, with 76.2% treatment coverage among children aged 2 to 14 years old.

#### Vanuatu

After being validated as having eliminated LF in May 2016, the plaque and letter of appreciation for their achievement was presented to Toara Daniel Kalo, the Minister of Health, Vanuatu, by Dr Margaret Chan, WHO Director-General and Dr Shin Young-soo, WHO Regional Director for the Western Pacific Region and Honourable YB Datuk Seri Dr S. Subramaniam, the Chairperson of the sixty-seventh WHO Regional Committee for the Western Pacific and the Minister of Health, Malaysia during the opening ceremony of the sixty-seventh session of the WHO Regional Committee for the Western Pacific, on 10 October 2016.

The results of the nationwide school based survey for STH conducted in June 2016 were analysed. The most common STH was ascariasis, followed by trichuriasis, then hookworm infection. The national prevalence of infection with any STH was 29.0%, and by species the national prevalence was 25.1% for ascariasis, 18.6% for trichuriasis and 2.5% for hookworm infection. The national programme decided to continue deworming twice a year. The target age group will be extended to school children aged 2–19 and women of child-bearing age (up to 45 years old).

A deworming campaign against STH took place from July to December 2016. Preschool children, school-aged children and women of child-bearing age were targeted. The treatment report is awaited.

A trachoma MDA campaign was implemented in August and September 2016 in Port Villa. The national treatment coverage was 95.27% (262 593 people treated) with the 2016 national census projection as the denominator.

The national programme continued to monitor the incidences of yaws and scabies through health facility-based surveillance activities. The national programme integrated provision of benzyl benzoate lotion for treatment of scabies to any suspected cases identified during house visits in the trachoma MDA. The assessment of impact of the recent trachoma MDA on yaws is planned in early 2017.

#### **Viet Nam**

A joint workshop to review parasitic disease control activities implemented between 2011 and 2016 in Thanh Hoa and Nghe An province was held on 26 December 2016. The participants included various stakeholders involved in parasitic disease control in the provinces, including representatives of the provincial and district department of preventive medicine and the women's' unions. The findings were as follows:

- Prevalence of STH in Thanh Hoa decreased from the range of 50 to 70% in 2011 to the range of 14 to 35% in 2016, and in Nghe An from 54% in 2011 to 10% in 2016.
- In 2016, there was high coverage of deworming for school-age children and preschool children as a result of two deworming rounds implemented in Nghe An province – 97.0% among preschool children, 96.5% among school-aged children and 94.2% among women of child-bearing age.

Small liver fluke infection (clonorchiasis) was detected in almost all districts in Thanh Hoa province with the infection rate ranging from 3.3% to 26.4%. The province mobilized US\$ 400 000 for intensifying parasitic disease control and prevention activities for three years (2016–2018).

The three delegates from the National Institute of Malariology, Parasitology and Entomology and the Health Environment Management Agency under the Ministry of Health in Viet Nam participated in the first training of facilitators and community trainings of the community-led initiative to eliminate schistosomiasis with water, sanitation and hygiene interventions (CL-SWASH) organized by the national, provincial and district CL-SWASH Task Force, with the support of the WHO country office, a WHO consultant and the WHO Regional Office for the Western Pacific in 10 prioritized schistosomiasisendemic villages in Champasak province, the Lao People's Democratic Republic on 9–12 November 2016. During this mission, the delegation from Viet Nam discussed with the team from the WHO Regional Office for the Western Pacific the way forward for strengthening collaboration between NTD and WASH teams, particularly in areas with persistently high transmission of intestinal helminth in Viet Nam.

#### **Wallis and Futuna**

Using FTS for the first time in the Pacific, the final TAS was completed in September 2016. The TAS tested 772 children aged between 6 and 13 years from all primary schools in the country according to a census survey, of which 772 were negative and seven were invalid. Only one was weakly positive in a child aged 11 years. The results of the final TAS suggest that Wallis and Futuna has reached the target for elimination of LF as a public health problem. The TAS report was reviewed by the RPRG which suggested that the country be now considered to be ready to submit the dossier to claim elimination of LF as a public health problem. Wallis and Futuna plan to commence preparation of the dossier in early 2017.

# 2 REGIONAL NEWS

The NTD Programme Managers Meeting was held on 18 and 19 July 2016 in Manila, Philippines. The NTD programme managers or focal points from 17 countries, seven selected members of the RPRG, and representatives of 14 partner and stakeholder institutions participated in the meeting. The participating NTD programme managers discussed essential health intervention and services that need to be further strengthened or sustained beyond achievement of elimination of LF as a public health problem. This included LF morbidity management and disability prevention and post-validation surveillance activities, scaling up and sustaining deworming against STH, and engaging multisectors, particularly WASH and agricultural sectors, as a priority to accelerate elimination and control of other NTDs. Country experiences and challenges in strengthening such services were shared. Noting the remaining challenges and a lack of clarity and tools for achieving some of the goals set in the Global NTD Roadmap, the meeting recommended that the timeline of the current Regional Action Plan be extended to 2018.



The 16th meeting of the Western Pacific RPRG on NTDs was held from 20 to 21 July 2016 in Manila, Philippines. In addition to 13 RPRG members, five national NTD programme managers and representatives of 11 stakeholder organizations participated in the meeting. The RPRG acknowledged the

of burden data, treatment efficacies, and other intervention options and diagnostics, to determine the best strategies for monitoring, mapping and improving access to treatment with a view to accelerating progress towards elimination. RPRG supported the recommendation of the Programme Managers Meeting that the timeline of the current Regional Action Plan be extended to 2018.



The Consultation to Accelerate Elimination of Brugia malayi transmission in Indonesia and Malaysia was held in Kota Kinabalu, Sabah, Malaysia on 13-15 December 2016 to discuss potential causes of persistent transmission of Brugia malayi in some areas of Indonesia and Malaysia and results of the relevant studies to date and to determine programmatic actions and operational research priorities to address this issue. Malaysia was congratulated for progress in achieving elimination threshold in the majority of implementation units, quality and extent of monitoring activities, and proactive response in few areas of residual infection. Indonesia was congratulated for rapid scale-up of MDA to all endemic districts through the National Lymphatic Filariasis Elimination Campaign (BELKAGA), progress with TAS implementation, and commitment to investigation and response in failed TAS districts. The consultation recommended several programmatic actions (see the section for Malaysia).



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