

The Control of Neglected Zoonotic Diseases



Community-based interventions for prevention and control

Report of the third conference organized with ICONZ, DFID-RIU, Gates Foundation, SOS, EU, TDR and FAO with the participation of ILRI and OIE

WHO headquarters, Geneva, Switzerland
23–24 November 2010

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Department of Control of Neglected Tropical Diseases
HIV/AIDS, Tuberculosis, Malaria and Neglected Tropical Diseases Cluster

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Preface

It is now five years since the World Health Organization (WHO), with the United Kingdom's Department for International Development (DFID) Animal Health Programme, launched the first international meeting to consider how to tackle a group of ancient, endemic and largely forgotten zoonotic diseases. During the course of that meeting – which brought together some 50 researchers, public health practitioners and members of international organizations from the Americas, Africa and Asia – we realized that these diseases, although different in causation, incidence and impact, had much in common. Woefully under-diagnosed, affecting mainly poor people in remote rural or marginalised urban and peri-urban communities, usually in low income countries, these are diseases of poverty. By undermining human health at the same time as affecting livestock, they impose a dual burden on poor communities.

In 2007, we met again at the International Livestock Research Institute (ILRI) under the aegis of WHO and its partners, this time as a much larger group focused on Africa and policy issues. Resource constraints and competing human and animal health priorities have meant that these diseases are often simply forgotten in Africa.

Out of these meetings came a recognition that control of this group of grossly neglected diseases is often impeded by the fact that it depends crucially on mobilising both the medical and the veterinary sectors. WHO now recognizes these diseases as neglected zoonotic diseases (NZDs). Since 2008, NZDs have been an integral part of WHO's Department of Control of Neglected Tropical Diseases and feature in its Global Plan to Combat Neglected Tropical Diseases 2008–2015. Priority NZDs were also included in the first WHO report on neglected tropical diseases: "Working to overcome the global impact of neglected tropical diseases" (WHO, 2010).

This third NZDs meeting, brought together an even larger and more diverse group than before. More than 100 participants from Africa, the Middle East, the Americas, Asia and Australia, including policy-makers, international organizations, researchers and field workers directly involved in disease control attended the meeting, as well as a range of observers including a number of young researchers representing the next generation of NZD specialists sponsored by the European Union.

In this report we have tried to present the various issues, problems and challenges that were discussed against the backdrop of the many inspiring control programmes that were presented. Again and again these programmes demonstrated how the NZDs are not so much re-emerging as rediscovered – once a concerted effort is made to find and treat patients – and how both control and prevention rely on involving and inspiring the animal keeping communities where they prevail.

The representatives of WHO, DFID-RiU, ICONZ, EU, SOS, TDR and FAO



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The third meeting on neglected zoonotic diseases (NZD3) was organized by François Meslin with Ian Maudlin, Sue Welburn, Isabel Minguez-Tudela, Mark Eisler, Lee Willingham, Deborah Kioy and Katinka de Balogh. It would not have been possible without the technical and/or financial support of many partners, to whom we are grateful. These include the European Union Framework 7 Project Integrated Control of Neglected Zoonoses in Africa (ICONZ), the UK Department for International Development's Research into Use Programme (DFID-RiU), the Bill & Melinda Gates Foundation (BMGF), the Research Directorate of the European Commission, the Stamp Out Sleeping Sickness Project (SOS, University of Edinburgh), the UNDP/UNICEF/World Bank/WHO Special Programme for Research and Training in Tropical Diseases (TDR), the Food and Agriculture Organization of the United Nations (FAO), the International Livestock Research Institute (ILRI) and the World Organization for Animal Health (OIE).

We are grateful to our Chairman, Samson Mukaratirwa, for coordinating our discussions, keeping us to time and providing his valuable insights into the debates; and to our keynote speakers, David Molyneux and Alexandra Shaw who were able to strike just the right note to set the scene for this meeting. Particular thanks are due to Wendy Harrison and Eric Fèvre, our rapporteurs, whose summing up underpinned a lively discussion at the end of the meeting and whose meticulous notes have helped greatly in putting together this report, which was undertaken by Alexandra Shaw. We much appreciated the feedback and comments received from those who made presentations at the meeting, in particular from David Molyneux. We also thank Beatrice Wamutitu for handling the meeting's administrative aspects and acting as our link person during its planning.

Lastly, we would like to thank everyone who attended, contributing their presentations, comments and materials, which led to an extremely informative, lively and productive meeting.



Dedication



As this report was being prepared, we learnt with great sadness of the passing away of Isabel Minguez-Tudela on Saturday 16 April, 2011. Despite her illness, Isabel was determined to attend this third NZD meeting, having been a staunch advocate of work on these diseases for many years.

Isabel attended the first WHO NZD meeting in 2005 and her enthusiasm and institutional support were a major motivating factor in the setting up of the subsequent two meetings. Many of those working in this field have benefitted from her encouragement and support.

She was born in Spain in 1956. She studied as a veterinarian and her PhD provided important new insights into African Swine Fever. She initially worked as a veterinary inspector for the Spanish border control agency. In 1990 she joined the European Commission. In 1996 she became senior scientific officer at the Directorate General for Research and Innovation. Since then she commissioned and managed a large portfolio of animal health research projects. In her presentation at our meeting, she described with passion several important EU projects on neglected zoonoses research that she was currently involved with. Isabel has left behind an important legacy of progress in the field of animal health research and strong networks among veterinary scientists. She played a vital role in raising the international profile of the neglected zoonotic diseases.

Isabel was also paying special attention to the next generation of zoonoses researchers and control officers. To that goal she worked very hard in October 2011, in spite of her ill health, to ensure the participation at this meeting of no fewer than 29 mostly young professionals from East African and European countries.

She will be remembered for her total dedication to zoonoses research and control, a strong determination to move the subject always a step further and her unfailing kindness. For many of us, our ongoing work in this field will be inspired by her.

In memory of the encouragement, inspiration and kindness she showed to so many of us and of all she has done to promote the cause of those suffering from, and at risk of contracting NZDs, we dedicate this report to her.

François Meslin



Summary

On the positive side: the past five years have seen a growing interest in these diseases, their recognition by WHO as neglected zoonotic diseases, and the launching or continuation of many successful control programmes.

Four main themes emerged from this meeting.

First, under-diagnosis and misdiagnosis are more important issues than previously thought. They are crucial to understanding why this cluster of diseases is so chronically neglected. Talk after talk highlighted how it is only once investigations start that patients are found. Typically, these patients have been treated for another condition, notably malaria, often several times. Many NZDs involve severe disability; several are fatal if left untreated. Published case histories are necessarily those of people who were diagnosed – the others simply silently suffer an untold burden of human misery and ultimately death. The cost of misdiagnosis is not only that of untreated patients but also of the household and public sector resources wasted and misallocated to the wrong diagnosis. Thus the need to improve diagnostic capacity – by reinforcing both human clinical skills and by supplying appropriate and accurate tests – has become urgent.

Second, community engagement and hence empowerment is a crucial if success is to be achieved. Because these are diseases of poverty, occurring in remote or marginalised communities, the people affected are burdened with the many vital activities necessary for survival on a day to day basis. Despite this, once people recognise the significance of these diseases, communities can be mobilised to tackle sanitation issues, bring their roaming dogs forward for vaccination, consider boiling their milk – simple but effective examples which contribute to reducing the burden of NZDs.

On the negative side: as more

Third, because NZDs are transmitted to people from animals, controlling animal

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