

# **Guidelines for Certifying Lymphatic Filariasis Elimination**

(including Discussion of Critical Issues and Rationale)

Following from the WHO Informal Consultation on  
Epidemiologic Approaches to Lymphatic Filariasis Elimination:  
Initial Assessment, Monitoring, and Certification

*Atlanta, Georgia, USA  
2-4 September 1998*



**World Health Organization  
Communicable Diseases Eradication and Elimination  
Lymphatic Filariasis Elimination (CEE/FIL)**



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## 1. INTRODUCTION

Widespread interest in and support for a global campaign to eliminate lymphatic filariasis has developed and grown in the 1990s. In 1997 the World Health Assembly endorsed efforts to eliminate transmission of filariasis on a country by country basis (WHA resolution 50.29).

Filariasis is a disease which is endemic in communities worldwide affecting an estimated 120 million persons. Table 1 lists those countries where human filariasis has been: (i) endemic during the 1980s and 1990s, (ii) endemic or possibly endemic before 1980 but not recognized since then, (iii) sporadically reported without evidence of endemic disease. In 1998, there is still lack of knowledge about when transmission of filariasis was interrupted in many countries.

The need for certification of attainment is inherent in the goal of an elimination programme; such a need does not exist for control programmes. There must be an objective basis, according to agreed criteria, for determining whether transmission of filariasis has indeed been eliminated; the criteria must take into account the risk of importation from filariasis endemic countries. It is expected that efforts towards elimination of filariasis transmission for individual countries will be conducted until the global certification of elimination of filariasis is achieved.

In order to complete the process of certifying elimination, an independent International Commission for the Certification of Lymphatic Filariasis Elimination (ICCLFE) will be established by World Health Organization (WHO). This commission will recommend to the Organization those countries that fulfil the requirements for certification, as well as advise the Organization on criteria, procedures and progress made towards verification of absence of transmission. The commission will also designate a panel of specialists, whose members can be assigned to International Certification Teams (ICTs).

WHO, including the Regional offices, will facilitate national preparations for certification by carrying out regular visits by WHO staff, members of the designated ICT, or consultants to the country or sub-region concerned. A register will be established of countries requesting certification and also of those countries where official certification of elimination is pending. Finally WHO will also establish an official register of countries where filariasis has been eliminated, based on evaluations by the ICCLFE.

The aim of the present document is to describe the criteria for verifying the absence of filariasis transmission. In addition WHO has developed a document addressing issues of disease ascertainment, monitoring, and pre-elimination surveillance – i.e., addressing the various issues before elimination certification (see document WHO/FIL/99.195).

## 2. DEFINITIONS

A *lymphatic filariasis (LF) case* is defined as an individual with evidence of current infection with *Wuchereria bancrofti*, *Brugia malayi* or *Brugia timori*.

*Endemic filariasis* is defined as an area within a country with a prevalence of greater than or equal to 1 (locally acquired) case per 1,000 population.

Countries are classified as:

*Never-endemic*: No history of (or evidence for) endemic filariasis

*Post-endemic*: Past history of filariasis, but no evidence of transmission or new clinical disease since 1980.

*Endemic*: Filariasis since 1980 or current filariasis.

*Local elimination* is defined as a cumulative incidence rate over five years of less than 1 new case per 1000 susceptible individuals. When a country with endemic areas has achieved local elimination in all affected regions, the country can apply for certification of filariasis elimination.

*Worldwide elimination* of filariasis will be considered achieved when all countries have been certified as having eliminated filariasis.

### **3. CRITERIA FOR CERTIFICATION OF ELIMINATION**

Standard criteria for certification are needed for the following reasons:

1. To ensure international credibility for the expected future claim that filariasis has been eliminated from an area.
2. To have an established and consistent mechanism for judging the success of national filariasis elimination programmes.
3. To have a standard, effective procedure to identify and eliminate any previously unknown foci of transmission.

#### **3.1 In countries with filariasis transmission after 1980**

National governments requesting certification of elimination must submit to WHO a country report (see section 4.1.2) which describes the procedures undertaken and provides evidence in support of the assertion that filariasis has been eliminated.

As a first step countries with endemic filariasis must ascertain all of the local areas in the country with endemic filariasis (see document WHO/FIL/99.195). That document also includes substantial information on monitoring elimination programmes while in progress and during the post-treatment surveillance period (up to five years after cessation of community treatment).

In these countries, elimination will be considered to have been achieved when surveys in each endemic region in the country have shown a cumulative incidence rate over five years of less than 1 new case per 1000 susceptible individuals. Because transmission of filariasis is suppressed during community treatment with antifilarial agents, and certification is of the post-treatment state, the official surveys for certification should take place not less than 5 years after cessation of community treatment. For working purposes it is recommended that, five years after cessation of community treatment, 3000

school children 5 years of age from the endemic area(s) be screened. If all test negative local elimination can be considered achieved (see Appendix Sections 1 and 6).

Confirmation of the absence of transmission in a country is judged on the basis of an assessment of:

- (i) the thoroughness and adequacy of the original ascertainment of the local areas of endemic filariasis within the country;
- (ii) the surveys and survey findings from all local areas with endemic filariasis (in order to substantiate elimination of filariasis transmission).

Records of the original ascertainment and final surveys should be compiled by the national authorities for review. In addition, documentation of elimination efforts undertaken, and other screening and surveys undertaken as part of monitoring or pre-certification surveillance (see section 4.1.2), should be compiled. These documents will then be reviewed as part of the field appraisal by an international certification team.

After provision of necessary documentation and upon satisfaction of ICCLFE that transmission has been halted in all areas of the country, the country will be officially designated as “recently-endemic: elimination certified”.

### **3.2 Other countries with history or possible history of filariasis transmission**

In these countries certification of elimination may be granted after the provision of satisfactory documentation that no residual foci of infection exist. Countries in this group represent a wide range of situations; therefore, requirements for certification will need to be tailored to each situation, relating to the following issues:

3.2.1 A detailed description of the extent of any former endemic area(s).

3.2.2 The possible need to present findings of active case searches, conducted within the last five years, in areas which may formerly have been endemic. The results should ascertain that residual foci of infection no longer exist.

3.2.3 Countries with areas that are determined to have current filariasis transmission will subsequently need to be certified as per section 3.1.

After provision of necessary documentation and upon satisfaction of ICCLFE, a country in this category will be officially designated as “post-endemic: elimination certified”.

### **3.3 Countries without a history of filariasis transmission**

(All other countries)

Countries that believe they should be classified as never endemic need to document to WHO that their existing public health infrastructure would have detected filariasis, if it had occurred at endemic levels. After provision of necessary documentation and upon satisfaction of WHO

(designated) reviewers, a country in this category will be officially designated as “never-endemic: elimination certified”.

#### 4. CERTIFICATION PROCEDURES

All countries should contact WHO to initiate the verification and certification process. The proposed sequence of events listed below should be kept flexible. This listing summarizes the process for certification.

- (1) All countries of the world will be encouraged to submit a formal request to WHO to certify the elimination of filariasis transmission (5 years after completion of the elimination programme for countries with currently endemic filariasis).
- (2) Such formal requests must conform with the procedures given in this document and any subsequent guidelines prepared by WHO or by the ICCLFE. In particular, the requesting countries will produce a detailed report on all ascertainment, monitoring, elimination, surveillance, and pre-certification survey activities.
- (3) WHO will designate an International Certification Team (ICT) in the case of recently endemic countries and other countries considered to potentially be at "high risk" of having filariasis foci. The ICT will have the mandate to evaluate the country report and to determine, in collaboration with the host country, the status of certification.
- (4) Countries may find it useful to designate a national committee to evaluate the report on the filariasis elimination programme before its submission to WHO. Such a committee may choose to do its own evaluation of the national programme and to give evidence before the International Certification Team (ICT).
- (5) The ICT will evaluate the likelihood that all filariasis endemic areas have been detected, review the evidence for absence of transmission for the previous five years, and make appropriate recommendations to WHO regarding approval of the claim that filariasis has been eliminated.
- (6) If certification of elimination is granted, the country will then be listed on a WHO official register of areas now verified as free of filariasis transmission.

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