

Neglected Tropical Diseases in South Asian Region

What is the issue?

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- South Asian region has recorded a notable progress in eliminating and containing various diseases.
- However, the status of neglected tropical diseases (NTDs) in the South Asian region calls for a last-mile push. \n

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What are the health achievements in South Asia?

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- Maternal and neonatal tetanus has been eliminated. n
- HIV, TB and malaria epidemics have been halted and reversed after decades of struggle.

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- These will hopefully be ended altogether in the coming years. $\ensuremath{\sc n}$
- Regional India is now yaws-free.

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• Maldives, Sri Lanka and Thailand have eliminated *lymphatic filariasis* as a public health problem.

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• Nepal is in the process of validating the elimination of *trachoma* as a public health problem.

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• Nepal also maintained the elimination target for *kala-azar* for more than 3 consecutive years.

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- By the end of 2017, 100% of sub-districts in Bangladesh and 90% of blocks in India had done the same. \n
- As a whole, the region remains responsible for the world's largest *preventive chemotherapy campaign*.

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What are the shortfalls?

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• NTDs include diseases like leprosy, trachoma, lymphatic filariasis and kalaazar.

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• As the name suggests, NTDs take their most severe toll on the poor and marginalised communities.

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• The political influence of these sections is limited and their health needs are often overlooked.

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• Evidently, South Asian region has eliminated leprosy as a public health problem.

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- \bullet But the disease continues to circulate among vulnerable communities. $\slash n$
- They accounts for more than 60% of leprosy-caused grade two disabilities worldwide. $\$
- Similarly, several member countries have eliminated lymphatic filariasis. \n
- However, its burden continues to haunt communities in remote and hard-toreach areas elsewhere.
- Region-wide, 53% of all people require mass drug administration to stay free of this disfiguring disease.

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What is the way forward?

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• No member country of the South Asian region can be complacent as one of

the 20 NTDs is endemic to each of them.

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- Stable domestic funding for national programmes is central to taking forward the progress achieved so far.
- Member countries must ensure programming is both dynamic and flexible i.e. pursuing large-scale campaigns as well as working creatively across sectors.

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- Going for mass drug administration where appropriate and strengthening NTD-related services at the primary level are essential.
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- Simultaneously, **specific efforts** such as roping in agro-engineers in the battle against *schistosomiasis* can be taken up.
- Similarly, vector control must be actively pursued and harnessed by programmes at the local level. \n
- These can have immediate and substantial impact on disease transmission in NTD-affected areas.

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• Importantly, member countries should take full advantage of innovations in **research and technology**.

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- The effective use of rapid diagnostics can facilitate swift and accurate diagnosis of a range of NTDs.
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- IT infrastructure should be integrated with existing surveillance systems to allow programme managers to gather, analyse and act on real-time data. \n
- Ensuring all communities have access to health services and the benefits they provide is essential to make them free of NTDs. \n

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Source: Business Line

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Quick Fact

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Preventive Chemotherapy Campaign

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- This is a public health strategy recommended by WHO against a set of Neglected Tropical Diseases.
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- Preventive Chemotherapy consists of the regular, large-scale administration of drugs, either alone or in combination.
- It is administered to entire population groups, with the aim of reducing transmission and associated morbidity.

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Lymphatic filariasis

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- Lymphatic filariasis is commonly known as elephantiasis. $\ensuremath{\sc vn}$
- \bullet It is caused by infection with parasites classified as nematodes (roundworms), which are transmitted to humans through mosquitoes. \n
- Mosquitoes are infected with microfilariae by ingesting blood when biting an infected host.

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• Infection is usually acquired in childhood causing hidden damage to the lymphatic system.

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- Its visible manifestations may occur later in life, causing temporary or permanent disability. $\gamman \ensuremath{\n}$

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Schistosomiasis

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- Schistosomiasis is an acute and chronic disease caused by parasitic worms. $\ensuremath{\sc n}$
- People are infected during routine agricultural, domestic, occupational, and recreational activities, which expose them to infested water.

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- Water contamination due to excreta containing parasite eggs, which hatch in water, is also a mode of transmission. \n

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Trachoma

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• Trachoma is a disease of the eye caused by infection with the bacterium Chlamydia trachomatis.

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 \bullet It causes blindness or visual impairment. It is the cause for about 1.4% of all blindness worldwide.

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• Blindness from trachoma is irreversible.

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• Environmental risk factors influencing the transmission of the disease include:

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i. poor hygiene

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- ii. crowded households \n
- iii. water shortage

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 $\operatorname{iv.}$ inadequate latrines and sanitation facilities $_{n}$

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Kala-azar

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• Visceral leishmaniasis (VL), also known as kala-azar, is caused by the protozoan Leishmania parasites.

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• It is transmitted to humans through infected sandflies.

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• The parasite migrates to the internal organs such as the liver, spleen, and bone marrow; if left untreated, it may result in death.

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- It is characterized by irregular bouts of fever, weight loss, enlargement of the spleen and liver, and anaemia. \n
- It is endemic to the Indian subcontinent in 119 districts in four countries (Bangladesh, Bhutan, India and Nepal). \n

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