

World NTD Day - DRC government marks Progress Towards Sleeping Sickness Elimination

DRC Ministry of Health announces advancements in elimination efforts including the rollout of new drug to speed-up progress in beating deadly disease.

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Dit is de omschrijving

Kinshasa, 30 January 2020 – As the world recognises the first annual World Neglected Tropical Diseases (NTD) Day, the Minister of Health of the Democratic Republic of Congo (DRC), Eteni Longondo, highlights success in the fight against one of the deadliest and most debilitating of the 20 target NTDs – human African trypanosomiasis (HAT). While the DRC commemorates the third National HAT Day, roll out of the first all-oral drug is commencing.

DRC's continued commitment to eliminate HAT

HAT, also known as sleeping sickness, is one of the most neglected and disabling diseases in the world. It is transmitted by the bite of the tsetse fly and usually fatal if not treated. Historically, more than 80 percent of cases occur in the DRC. In 2018, on the first National HAT Day, the DRC government committed to eliminate HAT by 2030. The strategy to eliminate the disease is based on a long-term and continued commitment being finetuned constantly and rolled out across the country. A multidisciplinary approach is central in this strategy, which includes digital technologies to find and confirm new cases, an innovative tool to control tsetse flies, etc. Through this strategy and with a strong consortium of Congolese and international partners, this disease can be dealt the final blow.

These efforts are supported by international partners, including Drugs for Neglected Diseases initiative (DNDi), the Belgian Development Agency (Enabel), FIND, the Institute of Tropical Medicine in Antwerp, the Liverpool School of Tropical Medicine, PATH, Sanofi, and the World Health Organization, and made possible by a funding partnership between the Bill & Melinda Gates Foundation and the Kingdom of Belgium.

The Third Annual National HAT Day

The third annual National HAT Day, designed to raise awareness of HAT and synergize the necessary actions to achieve elimination, will be marked with national and provincial-level celebrations.

At the ceremony in Kinshasa, the Ministry of Health will discuss with partners, stakeholders, and donors the ongoing elimination efforts conducted by the Programme National de Lutte contre la Trypanosomiase Humaine Africaine (PNLTHA), and progress made to date. Ministry of Health officials and supporting donors will then travel to the province of Mai-Ndombe to visit with HAT patients, watch the mini-mobile team at work, and meet with the provincial Minister of Health and President of the Provincial Assembly to discuss HAT elimination efforts.

Rollout of all-oral drug that is effective for both stages of the disease

The Ministry of Health will also announce that fexinidazole, the first all-oral treatment for both stages of HAT, has been administered for the first time in the DRC. The previous treatment option for the final, deadly stage of HAT, nifurtimox-eflornithine combination therapy (NECT), while effective, is burdensome for patients and health workers – requiring logistical challenges of hospitalization, especially challenging for people living in remote areas. Fexinidazole is a 10-day once-a-day oral treatment, which will eliminate the need for systematic hospitalization. This innovative treatment was developed by a partnership

led by the non-profit research and development organization the Drugs for Neglected Diseases initiative (DNDi), and French pharmaceutical company Sanofi, with clinical trials run in the DRC and Central African Republic.

“The release of Fexinidazole in the DRC marks a crucial step towards the elimination of sleeping sickness,” says Dr Erick Miaka, the head of DRC’s sleeping sickness programme. “It is also the result of the combined efforts of the Congolese government, PNLTHA and all the partners involved in the fight against this neglected tropical disease. The challenge now is to ensure that patients all have access to and benefit from this new drug.” The WHO is currently distributing the treatment to rural clinics around the country. The national sleeping sickness programme is training health workers in the proper use of Fexinidazole.

Partner quotes

Dr Nathalie Strub-Wourgaft, Director of Neglected Tropical Diseases at DNDi: “A ‘simple pill’ to treat patients with sleeping sickness has been the dream of doctors in Central Africa for decades, as we lost too many patients to older treatments which had sometimes fatal side effects. Fexinidazole is the realisation of this dream, and it will allow health workers to easily treat patients near to their home in the most rural areas, while boosting elimination efforts for this disease.”

Philippe-Serge Degernier, Enabel DRC Resident Representative: “Today we are very proud to announce that Enabel will join forces again with other partners in the fight against sleeping sickness in DRC. The current situation is promising given the clear decrease in the number of cases thanks to a new diagnostic method, new medication, a revival of the vector control and the allocation of digital tools for surveillance and planning. It is a great opportunity and a great honor to provide our expertise at the service of the National Sleeping Sickness Programme. We believe that, with joint efforts and coordinated actions, we will be able to completely overcome this disease in the coming decade.”

Jo Indekeu, Ambassador of the Kingdom of Belgium in DRC: “We are at a turning point. The definitive elimination of sleeping sickness is achievable. Belgium’s scientific expertise to support its elimination is recognised worldwide. Thanks to the collective commitment of strong partners from the public and private sectors, I am confident that we will achieve our goal. Together, we will wish HAT once and for all good night’s sleep.”

Professor Marleen Boelaert, Institute of Tropical Medicine, Antwerp, Belgium: “The Institute of Tropical Medicine (ITM) in Antwerp, has a long expertise in sleeping sickness. Together with all partners, we are on the right track to eliminate the spread of sleeping sickness by 2030. A strong partnership will be crucial to achieve this goal. In addition, more and more health centres should be able to recognise, diagnose and report sleeping sickness to actively detect new cases. Strengthening primary health care also has a positive impact on combating other infectious diseases and public health in general.”

Dr Andrew Hope, Programme Manager, Liverpool School of Tropical Medicine: “We know that we need vector control in addition to medical activities to eliminate sleeping sickness and now we have the tool for the job, the Tiny Target. In DRC we are in a really exciting phase for vector control, the PNLTHA and LSTM are in the middle of a huge scaling up of the use of Tiny Targets and by the end of 2021 DRC will have the largest vector control programme in the world for Gambian sleeping sickness.”

Trad Hatton, PATH DRC Country Director: “The progress toward eliminating HAT in the DRC is a remarkable example of what can happen when a ‘neglected’ disease gets the attention that its burden warrants. Thanks in part to the leadership of the DRC government, scientific advances, and innovation made possible by so many funders and partners, and the dedication of teams working to track the disease every day, we are closer than ever to overcoming this terrible disease.”

Luc Kuykens, Head of Global Health Programs, Sanofi: “Through our partnerships with the World Health Organization since 2001 and with DNDi since 2009, we are proud to deliver today in DRC the first all-oral treatment for both stages of HAT which will simplify the burden of logistics and management of the disease.”

Dr AmÃ© Prosper Djiguimbe, Officer in Charge for the World Health Organization to the DRC: “With the availability of a new oral medication now within reach of the DRC, we must do everything to treat each patient, and make sure to use of all innovations in terms of diagnosis to ensure quality epidemiological surveillance and certification of the absence of cases so that the DRC progresses towards the extinction of African Human Trypanosomiasis.”