

SITUATIONAL ANALYSIS OF NTDs IN ZIMBABWE: SUMMARY



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BACKGROUND

- Neglected Tropical Diseases (NTDs) disproportionately affect marginalized and impoverished communities which lead to a significant hindrance to a country's socio-economic progress.
- NTDs and Sustainable Development Goals (SDGs) are closely related, as the control and elimination of NTDs are essential to achieving several of the SDGs, particularly those related to health and poverty reduction.
- Efforts to address NTDs and promote healthy lifestyles can improve individuals' health status, while prioritizing access, equity, efficiency, quality, and sustainability can improve health care delivery systems.
- Although significant progress has been achieved in enhancing the quality of life by managing Neglected Tropical Diseases (NTDs), the ultimate objective is their complete eradication from all communities, which can be accomplished through the implementation of a comprehensive masterplan.
- The literature survey and reporting of the prevalence of NTDs was used to develop a masterplan for Zimbabwe. The importance of masterplan was to outline a comprehensive approach for managing NTDs, including strategies for prevention, treatment, and control.

METHOD

A systematic search was conducted in PubMed, Google scholar, web of science, WHO reports and grey literature using the following search terms:

(Buruli ulcer OR Bairnsdale ulcer); (Chagas disease OR American trypanosomiasis); (Cysticercosis OR taeniasis); (Dengue Fever); OR (Chikungunya); (Dracunculiasis OR Guinea Worm Disease); (Echinococcosis/ echinococcus OR Hydatid/ hydatidosis); (foodborne trematodiasis OR Fascioliasis OR Clonorchis OR Opisthorchis OR Paragonimus); (Human African Trypanosomiasis OR African sleeping Sickness); (Leishmaniasis OR black fever); (Leprosy OR Hansen's disease); (Lymphatic filariasis OR Elephantitis); (Mycetoma OR Chromoblastomycosis OR deep mycoses); (Onchocerciasis OR river blindness); (Scabies OR ectoparasites); (Rabies); (Snakebite envenoming); (Yaws OR endemic treponematoses); (Schistosomiasis/ Schisto* OR Bilharzia / bilharz*); (soil transmitted helminths/ STH OR helminth OR nematode OR Ascaris OR hookworm OR Whipworm OR Trichuris OR Strongyloides OR Necator americanus); (Trachoma OR Granular conjunctivitis) IN Zimbabwe

Articles published from 1st January 2002 to date were considered. Official surveillance data were also reviewed where available. Only human studies and those in English were included. A similar search was conducted to determine the NTD situation in Zimbabwe's neighbouring countries (Botswana, Mozambique, Namibia, South Africa and Zambia) focusing on Zimbabwe's non-endemic NTDs. Results from individual studies providing an overall prevalence of the NTDs are reported.

AIM

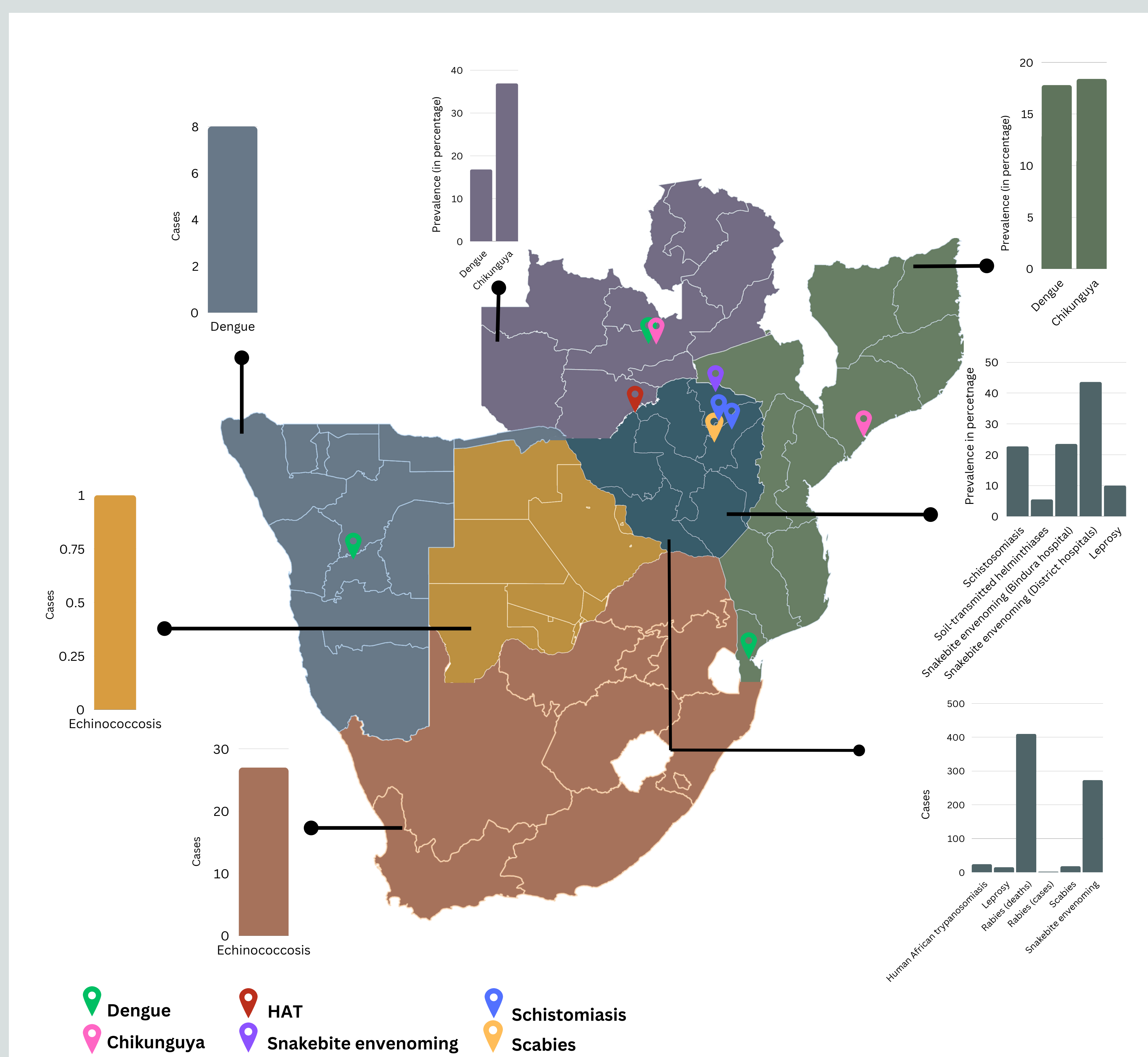
The aim of this work was to conduct a literature review of studies reporting the prevalence of the different NTDs in Zimbabwe and the available control measures.

RESULTS:

The prevalence of some NTDs was available from population-based studies conducted in different districts. The data obtained is summarised in the table below. The table lists the NTDs that have not been reported or recorded post 2002. The other tables also summarise the situation of Zimbabwe's non-endemic NTDs in its neighbouring countries.

ZIMBABWE

Disease	Control measures	Actively controlled (Yes - Y, No - X)
Lymphatic filariasis	preventative chemotherapy MDA	X
Leprosy	Therapeutic treatment	X
Schistosomiasis	-Therapeutic treatment -preventative chemotherapy MDA -snail control -WASH	Y
Soil-transmitted helminthiasis	preventative chemotherapy MDA	Y
Trachoma and Trachomatous inflammation-follicular	preventative chemotherapy MDA	X
Trichiasis	preventative chemotherapy MDA	X
Rabies	Dog vaccination & surveillance	X
Scabies	Therapeutic treatment	X
Human African trypanosomiasis (HAT)	-Vector Control -case detection -treatment with trypanocides	X
Snakebite envenoming	Therapeutic treatment	X



Diseases	Age-specific prevalence
Schistosomiasis	Nationwide: 6-15yrs/0% (post MDA6)
	Murehwa district: 18-95yrs (males)/ 13.7%
	1-10yrs/ (S.haematobium)/24.2%
	Shamva district: PSAC(≤ 5yrs)/8.5%
Manicaland Province: 7-13 yrs/ 0.47%	
Soil-transmitted helminthiasis	Nationwide: SAC/(0.8) <20 years/13.4
Trachoma and Trachomatous inflammation-follicular	1-9 yrs/(8.4%) 10-14 yrs/(4.1%) >15 yrs/(1.2%)
Trichiasis	10-14 yrs/ (n=3) >15 yrs/(1%) 15-39 yrs/ (n=96) >40 yrs/(n=263)

ZAMBIA

Disease	Endemic (Y)/non-endemic (x)	No data	Cases reported (Y)/ no reported cases (x)
Buruli ulcer	x		
Chagas disease	x		
Dengue			Y
Chikungunya			Y
Dracunculiasis			x
Echinococcosis		x	
Leishmaniasis			x
Mycetoma		x	
Onchocerciasis	x		
Taeniasis		x	
Yaws	x		

NAMIBIA

Disease	Endemic (Y)/non-endemic (x)	No data	Cases reported (Y)/ no reported cases (x)
Buruli ulcer	x		
Chagas disease	x		
Dengue			Y
Chikungunya		x	
Dracunculiasis			x
Echinococcosis		x	
Leishmaniasis	Y		
Mycetoma		x	
Onchocerciasis	x		
Taeniasis		x	
Yaws	x		

MOZAMBIQUE

Disease	Endemic (Y)/non-endemic (x)	No data	Cases reported (Y)/ no reported cases (x)
Buruli ulcer	x		
Chagas disease	x		
Dengue			Y
Chikungunya			Y
Dracunculiasis			x
Echinococcosis		x	
Leishmaniasis			x
Mycetoma		x	
Onchocerciasis	Y		
Taeniasis		x	
Yaws	x		

SOUTH AFRICA

Disease	Endemic (Y)/non-endemic (x)	No data	Cases reported (Y)/ no reported cases (x)	Reported but no current data
Buruli ulcer	x			
Chagas disease	x			
Dengue	x			
Chikungunya		x		
Dracunculiasis			x	
Echinococcosis				x
Leishmaniasis			x	
Mycetoma		x		
Onchocerciasis	x			
Taeniasis		x		
Yaws	x			

BOTSWANA

Disease	Endemic (Y)/non-endemic (x)	No data	Cases reported (Y)/ no reported cases (x)	Reported but no current data
Buruli ulcer	x			
Chagas disease	x			
Dengue	x			
Chikungunya		x		
Dracunculiasis			x	
Echinococcosis				x
Leishmaniasis			x	
Mycetoma		x		
Onchocerciasis	x			
Taeniasis		x		
Yaws	x			

SUMMARY

- Zimbabwe is burdened with several NTDs of public health significance
- The routine health information system in Zimbabwe only captures cases that are attended at health facilities, and therefore, there is insufficient knowledge about the prevalence and distribution of most of the suspected NTDs in Zimbabwe.
- NTDs can be controlled and eliminated through the implementation of five evidence based strategies; preventive chemotherapy, innovative and intensified disease management, vector control, veterinary public health measures for zoonotic diseases and clean water, sanitation and hygiene facilities.