

MEDIA INFORMATION for the Celebration of Elimination of Trachoma as a Public Health Problem 22nd November 2018

Notes to Editors:

Trachoma is an infectious disease caused by bacterium chlamydia trachomatis. The infection causes a roughening of the inner surface of the eyelids. This roughening can lead to pain in the eyes, breakdown of the outer surface (or cornea) of the eyes, and eventual blindness.

Trachoma is one of the world's oldest infectious diseases, and a leading infectious cause of blindness worldwide and is the second leading cause of avoidable blindness in Nepal.

The disease thrives in poor communities especially in crowded living conditions where there are shortages of water, lack of sanitation and where numerous eye-seeking flies are present. The bacteria can spread easily by either direct contact with an infected person's eyes or indirect contact, such as through contact with hands, clothing or flies that have come into contact with discharges from infected person's eyes or nose.

The wide-spread existence of trachoma in Nepal has been recognized since 1981, when a blindness survey confirmed the extent of the problem. In 2002, the National Trachoma Programme (NTP) was launched, and from the beginning was set up as a partnership. The Nepal Netra Jyoti Sangh (NNJS), the Ministry of Health and Population (MoHP), Ministry of Education and the Department of Water Supply and Sewerage (DWSS), were the main implementers, with financial and technical support from the USAID/Research Triangle Institute (RTI) International /ENVISION, International Trachoma Initiative (ITI), , Helen Keller International and technical support from the World Health Organization.

Nepal is the first Country in South East Asia to defeat the world's leading infectious cause of blindness. Thanks to the collaboration between the Government of Nepal and national and international agencies, people in Nepal could benefit from a combination of strategies (**SAFE**), as advised by WHO. It was the combination of offering eye **surgery** to people who had already an advanced stage of the disease, giving once a year specific **antibiotic** to everyone in the districts affected by the diseases, promoting to regularly wash hands and **face**, and improving cleanliness in the home and **environment** that has led to reducing the disease from a major public health problem to a minor one.

The implementation of this combined strategy through partnership was a huge undertaking. For example, MOHP and partners ensured that the people affected by trachoma received quality eye surgery through a team of 3000 well-trained staff at 18 eye hospitals throughout the country, and an additional 85 district eye care centers have been instituted to provide eye services including surgery. Ten thousand social volunteers and more than 16,000 Female Community Health Volunteers (FCHV) were mobilized to refer patients and raise awareness. By 2014, 14.7 million doses of the antibiotic azithromycin had been delivered throughout Nepal.

In May 2018, WHO officially declared Nepal as a country that has achieved Elimination of Trachoma as a public health problem. Which means, less than 5% of children between the ages of 1 and 9 years have signs of active trachoma, which requires treatment with antibiotic eye

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drops; less than 0.2% of people over 15 years have a more advanced form of the disease (trachomatous trichiasis) requiring eyelid surgery; and that Nepal's health system can identify and treat any new cases of the disease.

A letter acknowledging this achievement was presented to Nepal's Minister of State for Health and Population Mrs Padma Aryal by the WHO South-East Asia Regional Director, Dr Poonam Khetrupal Singh and the WHO Director-General Dr Tedros Adhanom Ghebreyesus at the 71st General Assembly of WHO in Geneva, Switzerland.

This is a historic milestone for Nepal, as the country become the first country in WHO's South-East Asia Region to eliminate Trachoma as a public health problem. And, Nepal has a reason to celebrate the disease-free dreams and visions of 29 million Nepalese.

The Government of Nepal, represented by the Honorable Deputy Prime Minister Mr Upendra Yadav celebrated the historic achievement with the Regional Director of WHO-South East Asia, Dr Poonam Khetrupal Singh as the Special Guest and all other partners and donors who supported this achievement by honoring the major eye health contributors with citation from WHO and letters of appreciation from the Government. Special recognition was given to Nepal Netra Jyoti Sangh, Research Triangle Institute and Tilganga Institute of Ophthalmology and Nine individuals for their contribution in tackling trachoma in Nepal.

USAID/Nepal's Mission Director Ms Amy Tohill-Stull said, "Since 2009, USAID has worked closely with Government of Nepal to survey the impact of trachoma and roll out treatment services in affected districts. Today, after nearly a decade of investing in eliminating trachoma, the United States government is proud of the milestone we have achieved together. Along with trachoma, USAID is also supporting the Ministry of Health and Population to eliminate Lymphatic filariasis—another harmful neglected tropic Disease as a public health problem, and we are confident that our collaborative efforts can yield similar results."

Regional Director, WHO SEARO, Dr. Singh stated, "*Your elimination of trachoma as a public health problem is an achievement to be immensely proud of. Not only does it speak of your enduring sense of mission – as well as the grit and resolve with which you pursued it but it also underscores the wisdom of WHO's SAFE strategy for trachoma elimination.*" She also highlighted key takeaways from Nepal's success of focusing resources on remote, neglected or marginalized populations, and a finely tuned surveillance system that can gauge programme efficacy and target resources accordingly"

Speaking at the ceremony, His Excellency Mr. Yadav stated: "*As a Leader, we always want to see people in the center of our work, and this could be an excellent example. We always talk about the public-private partnership, for me, this is the best example from our own country how we all partnered to achieve this historical success in public health. And this inspires me to think of other areas and opportunities where public private partnership could make a real difference in the lives of the people.*"

As Nepal celebrates this historic achievement in public health, efforts to keep Trachoma away must continue. For **Trachoma** to stay away, changes must be made at the environmental and resource allocation levels. Protection from the fly vector of trachoma requires proper water supply and sanitation. This requires infrastructure, education and behavior change across population. Even after achieving elimination, work must continue to ensure the disease does not resurface.

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The Honorable Deputy Prime Minister also urged the MoHP and partners to replicate this excellent public private partnership to address other neglected tropical diseases (NTDs) such as Lymphatic Filariasis and Kala Azar which are targeted for elimination and Leprosy where efforts are still needed to eliminate at district level

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