

# World leaders recommit to end NTDs

## STAR HEALTH REPORT

Past week, leaders from governments, pharmaceutical companies and charitable organisations convened at a five-day summit in Geneva to pledge new commitments to the collective efforts to control and eliminate neglected tropical diseases (NTDs).

The summit coincided with the launch of the World Health Organisation's (WHO) fourth report on NTDs, showing transformational progress against these debilitating diseases, and a commitment by the United Kingdom to more than double its funding for NTDs.

The meeting comes five years after the launch of the London Declaration on NTDs, a commitment by the public and private sectors to achieve the WHO goals for control, elimination and eradication of 10 NTDs.

NTDs are some of the oldest and most painful diseases, afflicting the world's poorest communities.

A new report titled Integrating Neglected Tropical Diseases in Global Health and Development by the WHO revealed that more people are being reached with needed NTD interventions than ever before. As more districts, countries and regions eliminate



NTDs, the number of people requiring treatments has decreased from 2 billion in 2010 to 1.6 billion in 2015. The report highlights include:

• **Lymphatic filariasis (LF) racing toward finish line:** In the last year, eight countries (Cambodia, Cook Islands, Maldives, Marshall Islands, Niue, Sri Lanka, Togo and Vanuatu) eliminated LF, and 10 other countries are waiting on surveillance results to verify elimination.

• **Eighty-two percent decrease in visceral leishmaniasis (VL) cases in**

**India, Nepal and Bangladesh:** Since 2008, cases of VL across India, Nepal and Bangladesh have decreased by 82% due to improvements in vector control, social mobilisation of village volunteers, collaboration with other NTD programmes and drug donations from industry partners.

Governments and other donors announced new commitments at the summit to expand the reach and impact of NTD programs around the world. The Bill & Melinda Gates Foundation committed \$335 million in grants over

the next four years to support a diverse group of NTD programmes focused on drug development and delivery, disease surveillance and vector control.

In the five years since the London Declaration, companies have donated over 7 billion treatments that, with the support of partners, now reach nearly 1 billion people every year. These donations, worth an estimated \$19 billion from 2012 through 2020, greatly multiply the impact of donor investments; USAID estimates that each dollar

invested in delivery leverages \$26 worth of donated drugs.

Though tremendous progress has been made in reducing the burden of NTDs, global control and elimination targets cannot be met without increased financial support, stronger political commitment and better tools to prevent, diagnose and treat the diseases. Partners from private philanthropy, affected country governments and cross-sector partnerships recommitted to leveraging their respective resources and expertise to fill critical gaps in the past week.

Although nearly a billion people received NTD treatments in 2015, more funding is needed to ensure that NTD programmes reach all people and communities affected by the diseases. WHO estimates that 340 million people in Sub-Saharan Africa could be covered by new investments of \$150 million per year through the year 2020.

Strong leadership from affected countries is vital to sustaining progress against NTDs, particularly in the face of shifting economic climates and competing health priorities. Despite these challenges, some countries are increasing financing for NTD programmes and integrating them into national health systems.

## #VACCINESWORK

24-30 April 2017

## World Immunisation Week 2017

World Immunisation Week – celebrated in the last week of April – aims to promote the use of vaccines to protect people of all ages against disease. Immunisation saves millions of lives and is widely recognised as one of the world's most successful and cost-effective health interventions. Today, there are still 19.4 million unvaccinated and under-vaccinated children in the world.

2017 marks the halfway point in the Global Vaccine Action Plan (GVAP) – endorsed by 194 Member States of the World Health Assembly in May 2012 – which aims to prevent millions of deaths from vaccine-preventable diseases by 2020 through universal access to immunisation.

Despite improvements in individual countries and a strong global rate of disease vaccine introduction, all of the targets for disease elimination—including measles, rubella, and maternal and neonatal tetanus—are behind schedule. In order for everyone, everywhere to survive and thrive, countries must make more concerted efforts to reach GVAP goals by 2020. Additionally, those countries that have achieved or made forward progress towards achieving the goals must work to sustain those efforts over time.

Expanding access to immunisation is crucial to achieving the Sustainable Development Goals. Routine immunisation is a building block of strong primary health care and universal health coverage—it provides a point of contact for health care at the beginning of life and offers every child the chance at a healthy life from the start.

Immunisation is also a fundamental strategy in achieving other health priorities, from controlling viral hepatitis, to curbing antimicrobial resistance, to providing a platform for adolescent health and improving antenatal and newborn care.

## HEALTH bulletin



### Investing in adolescents could bring 10-fold economic benefit

A new study shows that investments in adolescent health and wellbeing are some of the best that can be made towards achieving the SDGs.

Improving the physical, mental and sexual health of adolescents aged 10-19 years, at the cost of US\$4.6 per person per year, could bring a 10-fold economic benefit by averting 12 million adolescent deaths and preventing more than 30 million unwanted pregnancies in adolescents.

Similarly, investing to increase the extent and quality of secondary education, at a cost of US\$22.6 per person per year, would generate economic benefits about 12 times higher and result in an additional 12 million formal jobs for people aged 20-24 years.

The findings are published in The Lancet on the eve of the World Bank Spring Meetings in Washington D.C. where finance and development leaders from 188 countries will discuss the critical need for investment in adolescents. Programmes to reduce child marriage, at US\$3.8 per person, had a 5.7-fold return on investment and could cut child marriage by around a third.

## Higher tobacco taxes increase revenue decrease death

IQBAL MASUD

Bangladesh is one of the largest tobacco consuming countries in the world, with over 46 million (43%) adults consuming cigarettes, bidis, smokeless tobacco or other tobacco products and Bangladesh is one of the five focus countries of the Bloomberg Initiative (BI) to reduce tobacco use.

Smoking is harmful for the smokers as well as others around them. Non-smokers exposed to second-hand smoke or environmental tobacco smoke (ETS) are subject to similar health hazards as those of the smokers. ETS exposure increases the risk of lung cancer, cancers of the mouth and larynx, stroke and ischaemic heart diseases (IHD), chronic obstructive pulmonary diseases (COPD), pulmonary tuberculosis, and Buerger's Disease. ETS exposure is common in workplaces. Smoke-free workplaces can create safer working environments, improve workers' health and enhance corporate image.

Bangladesh was the first developing country to sign the WHO Framework Convention on Tobacco Control (WHO FCTC) in 2003. It has been a Party since the 2004. Article 6 of the FCTC requires that parties to the treaty consider tax policies and price policies as a part of their overall national health policy and recommends that governments will raise tobacco taxes to

reduce tobacco consumption.

The Bangladesh government is committed to reduce tobacco consumption. Prime Minister Sheikh Hasina pledged her government to work towards full compliance with the WHO FCTC and stated that overhauling tobacco tax is high on the agenda as the most powerful measure for reducing tobacco use. "Bangladesh will be tobacco-free by 2040" - she declared at the first-ever South East Asian Speakers' Summit on Achieving the Sustainable Development Goals (SDGs), held in Dhaka.

The Summit concluded with the release of the Dhaka Declaration – committing all signatories to work towards significant reductions of non-communicable diseases (NCDs). Tobacco use is the main risk factor for NCDs.

Tobacco taxes are the single most cost-effective policy tool to achieve the goal of reducing tobacco consumption. Tobacco taxation reduces the consumption and increases revenue due to the demand-inelastic nature of the product. It is sufficient in raising revenue. Normally there is a large captured consumer market paying taxes because they cannot either quit smoking due to addiction, or are not price sensitive due to lower taxes. It helps defray the "negative spillovers" of tobacco consumption, such as diseases contracted by non-smokers and the costs to treat such

diseases. Tobacco taxes discourage consumption of the poor, the young and new tobacco users, and provide opportunity for more productive spending and investment elsewhere. The World Bank recommends setting tobacco taxes to between two-thirds to four-fifths of retail price. Few low- and middle-income countries achieved this level of taxation, and most can significantly increase their tax levels.

Not only would comprehensive tobacco control programmes help us to achieve SDG 3, fighting tobacco and tobacco use would advance progress on many other goals, including: end poverty in all its forms everywhere, end hunger, promote sustainable agriculture, promote economic growth, and combat climate change.

As emphasised by the WHO report released in July 2015, tobacco taxation is also the FCTC measure that is least implemented, so there is lots of room for governments to increase taxes as part of a long-term strategy to save lives and raise revenue for tobacco control. Trade should not promote or increase use of tobacco products, and they should not prohibit any nation from using its sovereign authority to protect public health by taking action to reduce tobacco use.

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## New report highlights silent epidemic of kidney disease globally

Despite one in 10 people worldwide global having chronic kidney disease, a new report – The Global Kidney Health Atlas – presented at the World Congress of Nephrology in Mexico City and compiled by the International Society of Nephrology (ISN) and kidney health experts worldwide – highlights the huge gaps in kidney disease care and prevention in both developed and developing countries, with many countries not prioritising kidney health, says a press release.

Chronic kidney disease (CKD) is the gradual loss of the kidneys' abilities to perform these essential functions, and can be caused by high blood pressure, diabetes, obesity, smoking and other risk factors. One in three people in the general population is at increased risk of CKD.

"A diagnosis of CKD does not mean that you will need dialysis or a transplant, but does signal that you are at risk for many health problems, including heart disease, strokes, and infections," says Adeera Levin, President of the International Society of Nephrology.

"People in the earlier stages of CKD can be treated with blood pressure lowering drugs, diet and lifestyle, and can maintain a good quality of life. It is vital therefore that all countries improve their rates of early diagnosis and treatment. However, across countries of all incomes, many governments are not making kidney disease a priority. This makes no sense, as the costs for treating people with end stage kidney disease are enormous, along with the devastating effect it has on patients and their families."



  /StarHealthBD

## Hyperemesis Gravidarum

Hyperemesis gravidarum is extreme, persistent nausea and vomiting during pregnancy. It can lead to dehydration, weight loss, and electrolyte imbalances.

### Signs and symptoms of HG include

- Prolonged and severe nausea and vomiting - some women report being sick up to 50 times a day
- Dehydration - not having enough fluids in your body because you can't keep drinks down; if you're drinking less than 500ml a day, you need to seek help
- Ketosis - a serious condition that results in the build-up of acidic chemicals in the blood and urine; ketones are produced when your body breaks down fat, rather than glucose, for energy
- Weight loss
- Low blood pressure (hypotension)

### Treatment

If your nausea and vomiting causes you to become dehydrated, you will receive fluids through an IV. You also may be given anti-nausea medicine. If nausea and vomiting is so severe that you and your baby might be in danger, you will be admitted to the hospital for treatment. If you can't eat enough to get the nutrients you and your baby need, you may get extra nutrients either through an IV or a tube placed into your stomach.

To help manage symptoms at home, try these tips.

**Avoid triggers.** You may notice that certain things can trigger nausea and vomiting.

These may include:

- Certain noises and sounds, even the radio or TV
- Bright or blinking lights
- Toothpaste
- Smells such as perfume and scented bathing and grooming products
- Pressure on your stomach (wear loose-fitting clothes)
- Riding in a car
- Taking showers

**Eat and drink when you are able.**

