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PLANNING FOR THE GLOBAL ELIMINATION OF TRACHOMA (GET)

Report of a WHO Consultation

*Geneva, Switzerland
25 & 26 November 1996*

PROGRAMME FOR THE PREVENTION OF BLINDNESS AND DEAFNESS
Alliance for the Global Elimination of Trachoma



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INTRODUCTION

A meeting of nongovernmental development organizations (NGDOs) and other interested parties was convened by the WHO Programme for the Prevention of Blindness and Deafness on 25 and 26 November 1996 in Geneva, Switzerland, to plan for the global elimination of trachoma. The purpose of the meeting was to follow up the recommendations made by the Global Scientific Meeting on Future Approaches to Trachoma Control held in June 1996, and to consider establishing a group to coordinate efforts to attain the goal of the Global Elimination of Trachoma by 2020 (**GET 2020**), its terms of reference and work priorities.

Dr Ralph H. Henderson, Assistant Director-General of WHO, opened the meeting, noting advances made in the control of trachoma thus far, and the challenge of forming new alliances and partnerships, especially among the non-governmental development organizations and private industry, as interested parties working toward the goal of GET 2020.

After introductions, Dr Allen Foster was unanimously elected Chairman, and Dr Virginia Turner, Vice-Chairman. Mr Jeffrey Mecaskey agreed to act as Rapporteur. The draft agenda was adopted (Annex 1); a list of participants is given in Annex 2.

1. REVIEW OF FOLLOW-UP ACTION AFTER THE GLOBAL SCIENTIFIC MEETING ON FUTURE APPROACHES TO TRACHOMA CONTROL

In briefly reviewing the final draft of the report of the Global Scientific Meeting on Future Approaches to Trachoma Control (WHO/PBD 96.56), a number of minor modifications were noted and further amendments were suggested for the final version, which will be available in English and French in early 1997. It is hoped that Arabic and Spanish versions would be prepared subsequently.

Several other documents related to trachoma had been developed by the WHO Programme for the Prevention of Blindness and Deafness (PBD), including an editorial on trachoma for the *British Journal of Ophthalmology*, and by UN agency publications, e.g., UNICEF's *The Prescriber* and WHO's *Drug Information*. Additionally, the manual *Achieving Community Support for Trachoma Control* has been reprinted and, following the model of other WHO programmes, a boxed set of WHO trachoma material will be ready for distribution, as part of a new WHO literary kit to all Member States, in early 1997.

To strengthen its role in the GET 2020 initiative, WHO/PBD will receive a grant from the Edna McConnell Clark Foundation, a pledge from the Task Force of the Partnership Committee of Nongovernmental Organizations collaborating with the WHO Programme, and anticipated support from Pfizer Inc. These resources will cover administrative support and travel costs. Since the June Meeting, WHO/PBD staff has also provided technical assistance on the design of the azithromycin trial in Morocco, heightened the priority of trachoma on the agenda of the Partnership and Strategic Planning Committee, and communicated recent developments with WHO's Regional Offices for Africa (AFRO) and the Eastern Mediterranean (EMRO). They have also brought the emerging trachoma agenda to the attention of appropriate divisions within WHO, e.g., for Drug Management and Policies and for Disease Surveillance and Control. In addition to the recommendations of the Global Scientific Meeting, it was suggested that the recommendations of the current meeting should note the following points:

- ▶ potential emergence of drug resistance to azithromycin in relation to nonchlamydial infections;
- ▶ intermediate mile stones to be defined toward the goal of the Global Elimination of Trachoma by 2020;
- ▶ clarification of the definition of the elimination of trachoma; e.g., as a blinding disease;
- ▶ assessment of national and global progress in elimination.

2. UPDATE ON THE USE OF AZITHROMYCIN AGAINST TRACHOMA

2.1 MOROCCO

Azithromycin, an azalide antibiotic, has shown tremendous promise in the control of trachoma. Trials have demonstrated that the drug is much more effective than topical tetracycline, though the optimal treatment interval for suppression of inflammatory disease in a single dose scheme remains to be assessed. With financial support from the Edna McConnell Clark Foundation and technical and in-kind support from Pfizer Inc., the Ministry of Public Health in Morocco has begun a trial to evaluate two alternative intervals of treatment in a single dose and the feasibility of alternative distribution schemes. As a public health trial, this study will form the basis for the Ministry's policy on treatment of trachoma and Pfizer Inc.'s consideration of a donation for other country programmes.

2.2 PRELIMINARY REPORT OF THE COLLABORATIVE TRIAL OF AZITHROMYCIN FOR TRACHOMA (ACT) (by Dr C. R. Dawson)

The new antibiotic azithromycin is uniquely effective against *C. trachomatis* infections. For endemic trachoma, azithromycin treatment of whole village populations (mass treatment) offers the possibility of suppressing chlamydial infection in the entire community, thus eliminating the disease.

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