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FOX NEWS : WHO: Flesh-Eating Disease Making Comeback
Thursday, January 25, 2007

GENEVA — A virtually eradicated disease that eats through people's skin, cartilage and bones is reappearing in Africa, Asia and South America, the World Health Organization warned Thursday. Yaws, which is triggered by bacterial infection and can cause debilitating deformations, particularly in children under 15, once affected 50 million people worldwide before a massive treatment program in the 1950s almost succeeded in wiping it out.

"What happened then is that people focused on other things and took their eye off yaws," WHO spokesman Ian Simpson said.

"The attempt now is to try and see what can be done to make sure that the number of cases doesn't increase and that a new effort is made to eradicate it," he said.

At present, some 500,000 people mostly in poor, rural areas are affected by yaws, according to WHO. The global health body said it had assembled experts from countries where yaws is endemic in Geneva this week to consider whether to revive the global program of 50 years ago so as to "eradicate this disease once and for all."

The nonfatal disease, which is spread by spiral bacteria similar to those that cause syphilis, can be treated with a single dose of cheap penicillin.

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PR Newswire US : WHO Revives Efforts to Eliminate Forgotten Disease

January 26, 2007 Friday 1:36 AM GMT

GENEVA, Jan. 25 /Xinhua-PRNewswire/ -- A neglected disease with a nearly forgotten name is making a comeback following a global control programme that almost eradicated it more than forty years ago. Yaws, a disease which eats away at the skin, cartilage and bones of its victims (mostly children), is re-emerging in poor, rural and marginalized populations of Africa, Asia and South America.

(Logo: http://www.newscom.com/cgi-bin/prnh/20040610/CNTH001LOGO)

Today, more than 500,000 are afflicted by yaws, which is caused by a spiral bacteria that penetrates through a cut in the victim's skin resulting in bumps that burst, ulcerate and spread over the victim's body.

In the 1950s, more than 50 million people worldwide were afflicted by the disease until the World Health Organization (WHO), in partnership with UNICEF, established a massive global control programme to eliminate it. The Global Yaws Control Programme, fully operational between 1952-1964, succeeded in treating 300 million people in 50 countries -- reducing global levels of the disease by more than 95% and virtually eradicating yaws. However, after the enormous success of the programme, sustained surveillance of yaws diminished, which have now given way to its resurgence in the 21st century.

Yaws is transmitted from person to person via skin contact or through breaks in the skin caused by injuries or bites which allow spiral bacteria to penetrate. It is a debilitating disease whose effects in its young victims (mostly children under 15 years of age) can often cause gross deformation. Lesions develop that eat bone, cartilage, skin and soft tissue, leaving victims with gaping holes where their lips or noses should be.

"The persistence of yaws in the 21st century is unacceptable," says Dr Lorenzo Savioli, WHO Director of Neglected Tropical Diseases. "There is a cost-effective approach to treating this disease." Yaws is treated by a single dose of long-acting penicillin that costs as little as US$0.32. Experts believe that yaws can be eliminated and eventually eradicated because humans are the only reservoir of infection.

New cases of yaws appear every year. This week (24-26 January), world experts including officials from the Ministries of Health of selected endemic countries -- Indonesia, Ghana and the Republic of Congo -- will be holding an informal consultation to develop a new global strategy for combating this disease, the 2nd attempt of its kind.

The consultation's objectives are three-fold: to detect and treat all yaws cases and their contacts; to interrupt transmission of the disease; and to prevent disability, minimizing suffering and the socio-economic impact the disease has on affected populations. A recent control programme in India provides optimism that elimination can be achieved in other countries with persistent efforts and political commitment. In the south-east Asia region, the aim is to eradicate yaws by 2012.

The consultation this week will examine whether elimination is now possible in other regions of the world, signalling a possible revival of the 1950s global yaws programme as well as the development of a current global strategy to generate much needed support on global, regional and country level to eradicate this disease once and for all.
The World Health Organisation said on Thursday it will relaunch efforts to eradicate the skin and bone wasting disease yaws, which afflicts over 500,000 people worldwide.

The disease was virtually wiped out in the 1950s but is now staging a comeback in poor areas of Africa, Asia and South America, mainly affecting children in rural and marginalised communities, the WHO said in a statement.

Yaws is caused by a spiral bacteria and eats away at the skin, cartilage and bones of its victims, leaving gaping holes where their lips or noses should be, the health organisation said.

In the 1950s, more than 50 million people worldwide were afflicted by the disease until the WHO and UNICEF launched a global control programme to eliminate it.

Levels of the disease were cut by over 95 percent in the period 1952-1964, but thereafter surveillance and support systems were dismantled, allowing the disease to reappear.

Yaws can be treated by a single dose of long-acting penicillin that costs as little as 32 US cents, the WHO said.

WHO spokesman Dick Thompson said the 1950s programme had come close to full eradication of the disease, but the lesson to be learned was that surveillance needs to be kept up until the very end of the process.

"You can get pretty close, but it can bounce back if you're not paying attention," he said.

Dr. Kingsley Bantoe Asiedu, who is heading the WHO's yaws programme, told AFP that surveillance and monitoring systems should be kept in place even after the bulk of the work seems to have been accomplished.

He could not say how much the WHO's programme will cost but added that meetings are being held with health officials from some of the countries where yaws is once again prevalent, such as Indonesia, Ghana and the Republic of Congo.

Once these meetings are completed by the end of the week, the WHO will be in a better position to finalise details and assess the cost, he added.
NOTICIAS.INFO : NOVARTIS: Novartis Institute for Tropical Diseases inaugurates new Indonesian research initiative to study dengue fever, tuberculosis and malaria
Thu, 25 Jan 2007

NOTICIAS.INFO: NOVARTIS: Novartis Institute for Tropical Diseases inaugurates new Indonesian research initiative to study dengue fever, tuberculosis and malaria

*Makassar, Indonesia, January 25, 2007 - The Novartis Institute for Tropical Diseases (NITD) announced today the opening of a new clinical research initiative in Indonesia that will further expand the capabilities of the Singapore-based institute to conduct research for tuberculosis, dengue fever and malaria - three of the world's most neglected diseases.*

This new collaboration involves the NITD, the Eijkman Institute in Jakarta and the Hasanuddin University Clinical Research Institute in Makassar. The three organizations will create a joint research initiative that will recruit top scientists from Indonesia and also provide NITD researchers direct access to hospitals and patients suffering from these diseases in a "real-life" context. The NITD will also train and educate young students, post-doctorate candidates and healthcare staff.

The official name of this new collaboration is NEHCRI (the NITD - Eijkman Institute - Hasanuddin University Clinical Research Initiative). NEHCRI will be located at the Eijkman Institute in Jakarta and at the Dr. Wahidin Sudirohusodo Hospital in Makassar.

Novartis offers its broad expertise in all aspects of drug discovery and development as well as technologies, financial resources and local clinical expertise in tropical diseases. This is the latest in a series of investments by Novartis to discover and develop novel treatments for these tropical diseases, and will further strengthen translational clinical research in this area.

The Eijkman Institute offers an excellent facility to enhance the study of molecular biology and biochemistry of dengue fever, TB and malaria. The medical faculty of Hasanuddin University will establish a clinical research unit devoted to patient studies in epidemiology, diagnostics, biomarker technologies and novel drug candidates.

"As part of our commitment to tropical disease research, scientists at NITD will now have direct access to patients and their physicians in a setting typical for many patients suffering from TB, dengue or malaria," said Professor Paul Herlling, Chairman of NITD and Head of Corporate Research at Novartis. "We believe this initiative will particularly help us to design better treatments for patients in endemic regions."

"Neglected diseases occurring in developing countries lack the sound epidemiology and clinical pathophysiology that are the bedrock of drug discovery," said Professor Idrus Paturus, Rector of the Hasanuddin University in Makassar. "The new NEHCRI center will be a great benefit to the Indonesian clinician research community, both as a center of excellence and an opportunity for Indonesian researchers."

Professor Sangkot Marzuki, Director of the Eijkman Institute, said, "Clinical trial sites in developing countries are not very common and also not very well developed. The establishment of NEHCRI will positively impact the quality of patient care and programs, both in Asia and around the world."

The need for new medicines to help patients with dengue fever, TB or malaria is urgent given data from the World Health Organization (WHO) showing that the incidence of these diseases is accelerating rapidly, especially in developing countries.

More than 58,000 new cases of dengue fever, a virus transmitted to humans through bites from infected
mosquitoes, were discovered in Indonesia in 2004, while some 2.5 billion people worldwide are estimated to be at risk for the disease.

The prevalence of TB is also alarming: about one-third of the world's population is latently infected with this bacterial infection based on estimates that about two million people die every year from this disease.

Malaria also remains a pressing public health issue and one of the most dangerous diseases. A largely preventable disease, about 300-650 million people each year become infected with this disease, which kills one to three million people a year worldwide.

About the Novartis Institute for Tropical Diseases (NITD)
The Novartis Institute for Tropical Disease (NITD) aims to discover novel treatments and prevention methods for major tropical diseases. In those developing countries where these diseases are endemic, Novartis intends to make treatments readily available without profit to poor patients. The Singapore-based institute is striving to become known in the areas of dengue fever, tuberculosis and malaria, contributing to the education of young scientists and being a role model for public-private partnerships in Southeast Asia. NITD is aiming to have at least two compounds in clinical trials by 2008, and one novel compound available to patients by 2012.

About the Eijkman Institute
The Eijkman Institute carries out fundamental research in biomedical areas of strategic importance to Indonesia, including molecular biology related research. The Institute's research program was developed following a strategy to ensure scientific performance at an internationally competitive level. In addition, the Institute will offer an excellent facility to enhance the study of molecular biology and biochemistry of dengue fever and TB.

About the Medical Faculty of Hasanuddin University
The Medical Faculty of Hasanuddin University is one of the most prominent medical schools in Indonesia. The Faculty is located in Makassar, a strategic city and the center for development in the eastern region of Indonesia. The Medical Faculty will establish a clinical research unit devoted to patient studies of new diagnostics, biomarker technologies and novel drug candidates.

About Novartis
Novartis AG (NYSE: NVS) is a world leader in offering medicines to protect health, cure disease and improve well-being. Our goal is to discover, develop and successfully market innovative products to treat patients, ease suffering and enhance the quality of life. We are strengthening our medicine-based portfolio, which is focused on strategic growth platforms in innovation-driven pharmaceuticals, high-quality and low-cost generics, human vaccines and leading self-medication OTC brands. Novartis is the only company with leadership positions in these areas. In 2006, the Group's businesses achieved net sales of USD 37.0 billion and net income of USD 7.2 billion. Approximately USD 5.4 billion was invested in R&D. Headquartered in Basel, Switzerland, Novartis Group companies employ approximately 101,000 associates and operate in over 140 countries around the world. For more information, please visit http://www.novartis.com.

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Bâle (ats) L'Institut Novartis pour les maladies tropicales (NITD) de Singapour lance une nouvelle recherche clinique en Indonésie sur la tuberculose, la dengue et le paludisme. Ces trois maladies tuent entre 3 et 5 millions de personnes par année.

"Nos chercheurs vont dorénavant avoir un accès direct aux patients et à leurs médecins", a expliqué le professeur Paul Herrling, président du NITD, dans un communiqué publié jeudi. "Cette initiative nous aidera à concevoir de meilleurs traitements pour les régions endémiques". Novartis se donne jusqu'en 2012 pour mettre un nouveau composé à disposition des patients.

La recherche se fera en partenariat avec l'institut Eijkman de Jakarta et l'Université Hasanuddin de Makassar, dans l'est indonésien. Cette collaboration permettra de recruter des scientifiques dans toute l'Indonésie, indique le géant pharmaceutique. Le NITD va également former des étudiants et du personnel soignant.

Près d'un tiers de la population mondiale présenterait une infection latente de la tuberculose. Deux millions de personnes en meurent chaque année, selon les chiffres de l'Organisation mondiale de la Santé cités dans le communiqué. Le paludisme reste avec 1 à 3 millions de morts par année l'une des maladies les plus dangereuses.
OMS advierte regreso de enfermedad tropical olvidada
La guiñada, una enfermedad tropical de la piel que carcome cartílagos y huesos, está emergiendo nuevamente en zonas rurales pobres de África, Asia y América del Sur, advirtió hoy la Organización Mundial de la Salud (OMS).

El organismo explicó que el padecimiento se encontraba prácticamente olvidado y que ha vuelto después de un programa de control mundial de la ONU que casi la erradicó hace 40 años.

La guiñada es causada por una bacteria que penetra a través de cortes en la piel y genera hinchazones y úlceras que se extienden a todo el cuerpo. Actualmente más de 500.000 personas están infectadas, indicó la OMS.

Esta enfermedad se transmite de persona a persona y afecta en su mayoría a niños menores de 15 años, causando frecuentemente deformaciones.

La OMS informó que esta semana celebra consultas con expertos de algunos países donde la guiñada es endémica, como Indonesia, Ghana y la República del Congo, para desarrollar una nueva estrategia global que eliminate la enfermedad de una vez por todas.
A neglected disease with a nearly forgotten name is making a comeback following a global control program that almost eradicated it more than forty years ago. Yaws, a disease which eats away at the skin, cartilage and bones of its victims (mostly children), is re-emerging in poor, rural and marginalized populations of Africa, Asia and South America, the World Health Organization (WHO) informs in a release. Today, more than 500,000 are afflicted by yaws, which is caused by a spiral bacteria that penetrates through a cut in the victim's skin resulting in bumps that burst, ulcerate and spread over the victim's body.

In the 1950s, more than 50 million people worldwide were afflicted by the disease until the World Health Organization (WHO), in partnership with UNICEF, established a massive global control program to eliminate it. The Global Yaws Control Program, fully operational between 1952-1964, succeeded in treating 300 million people in 50 countries - reducing global levels of the disease by more than 95% and virtually eradicating yaws. However, after the enormous success of the program, sustained surveillance of yaws diminished, which have now given way to its resurgence in the 21st century.

Yaws is transmitted from person to person via skin contact or through breaks in the skin caused by injuries or bites which allow spiral bacteria to penetrate. It is a debilitating disease whose effects in its young victims (mostly children under 15 years of age) can often cause gross deformation. Lesions develop that eat bone, cartilage, skin and soft tissue, leaving victims with gaping holes where their lips or noses should be.

"The persistence of yaws in the 21st century is unacceptable;" says Dr Lorenzo Savioli, WHO Director of Neglected Tropical Diseases. "There is a cost-effective approach to treating this disease." Yaws is treated by a single dose of long-acting penicillin that costs as little as US$0.32. Experts believe that yaws can be eliminated and eventually eradicated because humans are the only reservoir of infection.

New cases of yaws appear every year. This week (24-26 January), world experts including officials from the Ministries of Health of selected endemic countries – Indonesia, Ghana and the Republic of Congo – will be holding an informal consultation to develop a new global strategy for combating this disease, the 2nd attempt of its kind.

The consultation's objectives are three-fold: to detect and treat all yaws cases and their contacts; to interrupt transmission of the disease; and to prevent disability, minimizing suffering and the socio-economic impact the disease has on affected populations. A recent control program in India provides optimism that elimination can be achieved in other countries with persistent efforts and political commitment. In the south-east Asia region, the aim is to eradicate yaws by 2012.

The consultation this week will examine whether elimination is now possible in other regions of the world, signaling a possible revival of the 1950s global yaws program as well as the development of a current global strategy to generate much needed support on global, regional and country level to eradicate this disease once and for all.

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January 25, 2007 8:19 p.m. EST

Josephine Roque - All Headline News Staff Writer
Geneva, Switzerland (AHN) - The World Health Organization said it will restart the campaign to rid the globe of the skin and bone wasting disease yaws. The disease affects over 500,000 people globally. It was previously thought that the disease had been wiped out in the 1950s but it is now slowly returning in Africa's poorest areas in addition to Asia and South America. Its victims are mostly children in rural and marginalized communities, the WHO said. Yaws is a spiral bacteria that consumes the skin, cartilage and bones. Victims are often left with holes instead where their lips or noses should be.

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THE HINDU : Flesh eating disease back after 40 years
Houston, Jan. 26 (PTI): Four decades after its complete eradication, a dreaded flesh eating disease is reportedly making a comeback in poor, rural and marginalized populations of Africa, Asia and South America.

Yaws, a nearly forgotten name, eats away at the skin, cartilage and bones of its victims (mostly children). The disease that has afflicted more than 500,000, is caused by a spiral bacteria that penetrates through a cut in the victim's skin resulting in bumps that burst, ulcerate and spread over the entire body.

In the 1950s, more than 50 million people worldwide were afflicted by the disease until the World Health Organization, in partnership with UNICEF, established a massive global control programme to eliminate it. The Global Yaws Control Programme, fully operational between 1952-1964, succeeded in treating 300 million people in 50 countries - reducing global levels of the disease by more than 95 per cent and virtually eradicating yaws.

However, after the enormous success of the programme, sustained surveillance of yaws diminished, which have now given way to its resurgence in the 21st century.

Yaws is transmitted from person to person via skin contact or through breaks in the skin caused by injuries or bites which allow spiral bacteria to penetrate.

It is a debilitating disease whose effects in its young victims (mostly children under 15 years of age) can often cause gross deformation.

Lesions develop that eat bone, cartilage, skin and soft tissue, leaving victims with gaping holes where their lips or noses should be.

"The persistence of yaws in the 21st century is unacceptable," says Dr Lorenzo Savioli, WHO Director of Neglected Tropical Diseases. "There is a cost-effective approach to treating this disease."

Yaws is treated by a single dose of long-acting penicillin that costs as little as USD 0.32.

Experts believe that yaws can be eliminated and eventually eradicated because humans are the only reservoir of infection.

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INTERNATIONAL HERALD TRIBUNE : WHO warns forgotten flesh-eating disease making a comeback

The Associated Press
Thursday, January 25, 2007

GENEVA
A virtually eradicated disease that eats through people's skin, cartilage and bones is reappearing in Africa, Asia and South America, the World Health Organization warned Thursday.

Yaws, which is triggered by bacterial infection and can cause debilitating deformations, particularly in children under 15, once affected 50 million people worldwide before a massive treatment program in the 1950s almost succeeded in wiping it out.

When the disease's incidence went down by 95 percent, control programs were gradually dismantled.

"People assumed that the last few cases would be caught by public health systems, but yaws made a comeback," said Dr. Kingsley Asiedu, a WHO disease expert.

"This is an easily treatable disease that we are technically capable of eradicating," said Asiedu. For instance, since India began a nationwide effort to eliminate the disease in 1996, no cases have been detected in the subcontinent since 2003.

Yaws' resurgence stands as a cautionary tale for other disease eradication programs such as polio, which often falter in their final stages. "No one thought the last five percent of cases would be so difficult," said Asiedu.

At present, some 500,000 people mostly in poor, rural areas are affected by yaws, according to WHO.

The global health body said it had assembled experts from countries where yaws is endemic in Geneva this week to consider whether to revive the global program of 50 years ago so as to "eradicate this disease once and for all."

The nonfatal disease, which is spread by spiral bacteria similar to those that cause syphilis, can be treated with a single dose of cheap penicillin.

Copyright © 2007 The International Herald Tribune
A virtually eradicated disease that eats through people's skin, cartilage and bones is reappearing in Africa, Asia and South America, the World Health Organisation has warned. Yaws, which is triggered by bacterial infection and can cause debilitating deformations, particularly in children under 15, once affected 50 million people worldwide before a massive treatment program in the 1950s almost succeeded in wiping it out. When the disease's incidence went down by 95 per cent, control programs were gradually dismantled. "People assumed that the last few cases would be caught by public health systems, but yaws made a comeback," said Dr Kingsley Asiedu, a WHO disease expert. "This is an easily treatable disease that we are technically capable of eradicating," said Asiedu. India began a nationwide effort to eliminate the disease in 1996, and no cases have been detected in the subcontinent since 2003. Yaws' resurgence stands as a cautionary tale for other disease eradication programs such as polio, which often falter in their final stages. "No one thought the last five per cent of cases would be so difficult," said Asiedu. At present, 500,000 people mostly in poor, rural areas are affected by yaws, according to WHO. The global health body said it had assembled experts from countries where yaws is endemic in Geneva this week to consider whether to revive the global program of 50 years ago so as to "eradicate this disease once and for all." The nonfatal disease, which is spread by spiral bacteria similar to those that cause syphilis, can be treated with a single dose of cheap penicillin. © 2007 AP DIGITAL

Copyright © 2007. The Sydney Morning Herald
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When the disease's incidence went down by 95 per cent, control programs were gradually dismantled.

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"This is an easily treatable disease that we are technically capable of eradicating," said Asiedu.

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AP
TODAY (SINGAPORE) : WHO to relaunch fight against skin and bone wasting disease

Thursday • January 25, 2007

The World Health Organisation says it will relaunch efforts to eradicate the skin and bone wasting disease yaws, which afflicts over 500,000 people worldwide. The disease was virtually wiped out in the 1950s but is now staging a comeback in poor areas of Africa, Asia and South America, mainly affecting children in rural and marginalised communities, the WHO said in a statement.

Yaws is caused by a spiral bacteria and eats away at the skin, cartilage and bones of its victims, leaving gaping holes where their lips or noses should be, the health organisation said. In the 1950s, more than 50 million people worldwide were afflicted by the disease until the WHO and UNICEF launched a global control programme to eliminate it.

Levels of the disease were cut by over 95 percent in the period 1952-1964, but thereafter surveillance and support systems were dismantled, allowing the disease to reappear. Yaws can be treated by a single dose of long-acting penicillin that costs as little as 32 US cents, the WHO said.

WHO spokesman Dick Thompson said the 1950s programme had come close to full eradication of the disease, but the lesson to be learned was that surveillance needs to be kept up until the very end of the process.

"You can get pretty close, but it can bounce back if you're not paying attention," he said. Dr. Kingsley Bantoe Asiedu, who is heading the WHO's yaws programme, told AFP that surveillance and monitoring systems should be kept in place even after the bulk of the work seems to have been accomplished.

He could not say how much the WHO's programme will cost but added that meetings are being held with health officials from some of the countries where yaws is once again prevalent, such as Indonesia, Ghana and the Republic of Congo.

Once these meetings are completed by the end of the week, the WHO will be in a better position to finalise details and assess the cost, he added. — AFP

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INDEPENDENT (SA) : Flesh-eating disease making a comeback
January 25 2007 at 07:01PM
Geneva - A disease, almost eradicated, that eats through people's skin, cartilage and bones is re-appearing in Africa, Asia and South America, the World Health Organisation has warned.

Yaws, a bacterial infection that can cause debilitating deformations, particularly in under-15's, once affected 50-million people worldwide before a widespread treatment programme in the 1950's almost wiped it out.

Control programmes were gradually dismantled when the incidence of the disease dropped by 95 percent.

Dr Kingsley Asiedu, a WHO disease expert, said: "People assumed that the last few cases would be caught by public health systems but yaws made a comeback."

"This is an easily treatable disease that we are technically capable of eradicating," he added.

For instance, India began a nationwide effort to eliminate the disease in 1996 and no cases have been detected in the sub-continent since 2003.

Yaws' resurgence stands as a cautionary tale for other disease eradication programmes such as polio, which often falter in their final stages. "Nobody thought the last five percent of cases would be so difficult," Asiedu said.

At present about 500 000 people, mostly in poor, rural areas, are affected by yaws, according to WHO.

The global health body said it had assembled experts from countries where yaws is endemic in Geneva to consider whether to revive the global programme of 50 years ago to "eradicate this disease once and for all".

The non-fatal disease is spread by spiral bacteria similar to those that cause syphilis but can be treated with a single dose of cheap penicillin. - Sapa-AP
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LE MESSAGER (CAMEROUN) : 600.000 nouveaux lépreux par an
Par Vanessa Nana
Le 26-01-2007
Entre traitement et attente du vaccin, tous les derniers dimanches de janvier, le monde est de tout cœur avec les lépreux.


Dans les années 1970, il y avait fréquemment des flambées de lèpre au Cameroun et en République centrafricaine. Aujourd'hui, la lèpre est en net recul au Cameroun (0,8 % de cas sur 10.000 personnes). Grâce au fonctionnement durant plusieurs décennies de centres de traitements pour lépreux, cofinancés par plusieurs structures et au programme national. En 2004, seuls 430 nouveaux cas ont été enregistrés dans l’ensemble du pays. Les nouvelles infections se concentrent essentiellement sur quelques régions peu accessibles du pays.

La première mention écrite de la lèpre date de 600 ans avant Jésus-Christ. La lèpre est une maladie chronique provoquée par le bacille mycobacterium leprae. Elle est transmise par des gouttelettes d’origine buccale ou nasale, à l’occasion de contacts étroits et fréquents avec un sujet infecté non traité. Dans l’organisme, le bacille se multiplie très lentement. La période d’incubation atteignant cinq ans. Quant aux symptômes, ils peuvent n’apparaître qu’au bout de vingt (20) ans. En l’absence de tout traitement, la maladie peut entraîner des lésions progressives et permanentes de la peau, des nerfs, des membres et des yeux. Depuis 1981, l’Organisation mondiale de la Santé (Oms) recommande un traitement basé sur l’association de trois antibiotiques : la dapsone, la rifampicine et la clofazimine.

En 1999, avec la création de l’Alliance mondiale pour l’élimination de la lèpre, la communauté sanitaire internationale s’est fixée pour objectif : l’élimination de la maladie avant 2005. Ce critère étant défini par son recul jusqu’à une prévalence inférieure à un cas pour 10 000 habitants. Si le vaccin contre la lèpre reste encore à découvrir, on sait traiter la maladie et même la guérir. Plus de 9 millions de malades ont déjà bénéficié de ces traitements, mais on dépiste encore chaque année 600.000 nouveaux cas de cette maladie. Chez nous, les autorités se chargent du coût du traitement, qu'elles mettent à disposition des moyens auxiliaires pour personnes handicapées. L’aide aux lépreux y assure la prévention des handicaps et l’atténuation des atteintes déjà subies en collaboration avec le programme national de lutte contre la lèpre. Environ 5 % des malades présentent déjà des handicaps identifiables au moment où leur diagnostic est posé. Bien que ce taux soit relativement bas en comparaison avec d’autres pays africains, ce sont encore 5 % de trop.
A virtually eradicated disease that eats through people's skin, cartilage and bones is reappearing in Africa, Asia and South America, the World Health Organization warned Thursday. Yaws, which is triggered by bacterial infection and can cause debilitating deformations, particularly in children under 15, once affected 50 million people worldwide before a massive treatment program in the 1950s almost succeeded in wiping it out.

When the disease's incidence went down by 95 percent, control programs were gradually dismantled. "People assumed that the last few cases would be caught by public health systems, but yaws made a comeback," said Dr. Kingsley Asiedu, a WHO disease expert.

"This is an easily treatable disease that we are technically capable of eradicating," said Asiedu. For instance, since India began a nationwide effort to eliminate the disease in 1996, no cases have been detected in the subcontinent since 2003.

Yaws' resurgence stands as a cautionary tale for other disease eradication programs such as polio, which often falter in their final stages. "No one thought the last five percent of cases would be so difficult," said Asiedu.

At present, some 500,000 people mostly in poor, rural areas are affected by yaws, according to WHO. The global health body said it had assembled experts from countries where yaws is endemic in Geneva this week to consider whether to revive the global program of 50 years ago so as to "eradicate this disease once and for all."

The nonfatal disease, which is spread by spiral bacteria similar to those that cause syphilis, can be treated with a single dose of cheap penicillin.

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DEUTSCHE PRESSE-AGENTUR : Dengue fever surge kills 28, sickens hundreds in Indonesia
Jan 25, 2007, 7:36 GMT
Jakarta - While Indonesia has scrambled to contain a resurgence of bird flu that killed five people, a least 28 people have died and hundreds were infected in an outbreak of dengue fever on Java since New Year's Day, a local report said Thursday.

The mosquito-borne disease is at its worse during the current monsoon season, which creates pools of water that are ideal breeding places, The Jakarta Post reported.

The worst-hit region has been West Java province, where 23 people died and 848 were infected since January 1, leaving hospital staffs scrambling to find enough personnel and space to treat patients.

Four other people, including two children, have died in the Central Java city of Yogyakarta, and one more in eastern Indonesia, the paper reported.

‘We still cannot predict when the peak of the outbreak will be due to changeable climate conditions,’ Maya Sintodewi, a public health official in Yogyakarta's Bantul regency, was quoted as saying.

The situation in Central Java is potentially direr this year because tens of thousands of people remain in makeshift emergency shelters following the May 2006 earthquake there and are more susceptible to mosquito bites.

Dengue infects up to 50 million people worldwide a year, and South-east Asia and the Western Pacific are the worst-hit regions. Dengue hemorrhagic fever is a lethal complication of the disease, and is a leading cause of hospitalization and death among children in several Asian countries, according to the World Health Organisation.

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