

Afghanistan is the most endemic country in the world to be affected by Cutaneous Leishmaniasis: 20 provinces out of 34 are high risk of transmission. Kabul remains the world capital of CL, with over 10,000 new cases per year, hence 34% of the total annual incidence. Since 2009, the French Development Agency/Agence Francaise de Development (AFD) has been a key partner in supporting the efforts to prevent leishmaniasis, in Afghanistan, addressing the needs of curing Afghans from leishmania where most needed, namely in Kabul and Southern Region. This slide-show narrates how WHO, AFD and the National Malaria and Leishmania Control Program of Afghanistan (NMLCP) partnered together and made a change in the lives of the people bearing the health and social burden of leishmaniasis.

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{besps\_c}0|picture-1.jpg|Cutaneous leishmaniasis is largely found among young girls, women and children who spend more time at home where the sandfly, transmitting *Leishmania*, hides and breeds.|Photo credit: Chris Black, WHO{/besps\_c}

{besps\_c}0|picture-2.jpg|*Leishmania*, a disease of poverty, poses a huge social burden in Afghanistan. When not treated in a timely way, the disease leaves lesions and scars; sometimes preventing young girls from getting married. |Photo credit: Chris Black, WHO{/besps\_c}

{besps\_c}0|picture-3.jpg|WHO is the only partner working in Afghanistan with the Ministry of Public Health to tackle leishmaniasis. WHO provides medicines to the Ministry of Public Health, supports capacity-building and conducts health behaviour education.|Photo credit: Chris Black, WHO {/besps\_c}

{besps\_c}0|picture-4.jpg|Thanks to the partnership with Agence Française de Développement, WHO and the national malaria and leishmaniasis control programme have succeeded in expanding treatment for leishmaniasis among difficult-to-access communities in Kandahar, Helmand, Nimroz and Kabul.|Photo credit: Chris Black, WHO{/besps\_c}

{besps\_c}0|picture-5.jpg|High-quality anti-*Leishmania* medicines are essential to stop the

infection and transmission. Thanks to Agence Française de Développement, more than 20 000 treatment vials have been distributed in Kabul and the southern Region, curing more than 5000 patients a year. |Photo credit: Chris Black, WHO{/besps\_c}

{besps\_c}0|picture-6.jpg|Partnership with Agence Française de Développement made it possible to establish, for the first time, a new reporting system to provide information on treatment outcomes; health workers can better follow-up treated, cured and relapsed patients. |Photo credit: Faizi, UNAMA{/besps\_c}

{besps\_c}0|picture-7.jpg|Thanks to coordination with Agence Française de Développement, WHO and the national malaria and leishmaniasis control programme worked together to develop the first ever clinical guidelines for diagnosis and treatment of cutaneous and visceral leishmaniasis. This was a major step towards improving the quality of treatment service. |Photo credit: Faizi, UNAMA{/besps\_c}

{besps\_c}0|picture-8.jpg|Visceral leishmaniasis, the deadly form of *Leishmania*, has been neglected for a long time. Improved surveillance and care service helped to increase by 50% the number of visceral cases detected among children, in the southern Region and Kabul between 2010 and 2012. |Photo credit: Elena Vuolo, WHO{/besps\_c}

{besps\_c}0|picture-9.jpg|Though the treatment for *Leishmania* is free of charge, many patients remain unaware of this right. Out-of-pocket expenses for full *Leishmania* treatment can reach up to US\$ 200 in cities such as Kabul and Kandahar. |Photo credit: Elena Vuolo, WHO{/besps\_c}

{besps\_c}0|picture-10.jpg|The positive results achieved thanks to the partnership with Agence Française de Développement call for continuity and sustainable solutions; only when treatment is safe, affordable and available, can we expect patients to complete the necessary treatment and be cured. |Photo credit: Chris Black, WHO{/besps\_c}

{besps\_c}0|picture-11.jpg|Stigma and marginalization lead to misinformation about the nature of the disease and available measures to treat and cure patients. More work needs to be conducted to raise awareness. |Photo credit: Chris Black, WHO{/besps\_c}

 *Leishmania* can be cured if patients are treated promptly. Cost-effective treatment solutions need to be supported to make sure treatment is accessible to all. Lessons learned from the partnership with Agence Française de Développement help to guide the future directions of work at the national malaria and leishmaniasis control programme and WHO. | Photo credit: Elena Vuolo, WHO

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