

The country remains at precertification stage for dracunculiasis and is still endemic for cutaneous and visceral leishmaniasis, as well as blinding trachoma. In 2012, 3165 cases of visceral leishmaniasis were reported, while in 2013, there were 677 cases of leprosy reported. In 2013, 89 872 people were reached as part of a mass treatment campaign for soil transmitted helminthiasis, 2 074 774 for schistosomiasis, 292 739 for lymphatic filariasis and 335 791 for trachoma.

Of the 17 globally-listed neglected tropical diseases, 9 are a recognized public health problem in the country. These include: leishmaniasis, schistosomiasis, lymphatic filariasis, onchocerciasis, trachoma, guinea worm, mycetoma, soil transmitted helminthes and leprosy. Large populations living in rural areas are infected by one or more of these diseases.

Neglected tropical diseases rank among the most important causes of disease in school-age children and are estimated to represent more than 40% of the disease burden due to all tropical diseases, excluding malaria.

Schistosomiasis, in particular, is an increasing public health problem. Intestinal and urinary bladder chronic inflammation are endemic in the country with varying prevalence rates. The country is in the precertification phase of guinea worm disease eradication. In June 2013, two confirmed cases of guinea worm disease were reported from South Darfur State. Since 2012, large-scale treatment (17 mass drug administration rounds) has resulted in interrupted transmission of onchocerciasis in Abu Hamad area, River Nile State, and treatment has been stopped; as of 2014, the country is in the assessment phase. In 2013, fewer cases of visceral leishmaniasis were reported compared to the previous year, and over two million people were treated for schistosomiasis.

Also, there was a 70% increase in treatment of soil-transmitted helminthiasis compared to the previous year. Implementation of a four year plan is underway with an international donor agency to expand coverage of diagnostic and treatment services for visceral leishmaniasis to all endemic states beyond the two states currently covered. Challenges for neglected tropical diseases control include sustaining drug supplies and running costs for mass drug administration campaigns and follow-up prevalence surveys.

Priorities

A key priority is to establish well-structured, integrated and adequately resourced neglected tropical diseases departments at state level. Increased and sustainable domestic and donor funding is needed to ensure the sustainability of over 90% coverage of populations in endemic areas with preventive chemotherapy for five diseases (schistosomiasis, soil-transmitted helminthiasis, lymphatic filariasis, onchocerciasis and trachoma) through integrated mass drug administration. A collaborative effort is needed involving the federal surveillance department, and surveillance departments and neglected tropical diseases focal persons at state level, to achieve certification of the country as free of guinea worm disease in 2016.

Another priority is to establish a national mycetoma disease control programme that is integrated into the community interventions department in the Communicable and Noncommunicable Disease Control Directorate of the Federal Ministry of Health, including epidemiological mapping of the disease and efforts to include the disease in the WHO list of neglected tropical diseases. Another focus area is to integrate the reporting of all neglected tropical diseases into the national health information system.

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