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Clinical Drug Trials Offer Hope of Relief to Patients with Stigmatizing Lymphedema

For people with disfiguring lymphedema, the hope that a drug may help reduce inflammation and swelling — potentially returning to them a life of dignity — is huge cause for celebration.

The video below chronicles the work of The Task Force's Neglected Tropical Diseases Support Center (NTD-SC) and its partners in assessing the effectiveness of the drug, doxycycline, to reduce inflammation for people suffering from lymphedema.

The clinical trials are funded by the United States Agency for International Development (USAID), and are being conducted in sites across three countries: Sri Lanka, Mali, and India. Additional

sites of the trial, funded by the German government, are being led by the University of Bonn. The trials are expected to be completed by 2021.

More than 15 million people worldwide suffer from lymphedema as a result of the mosquito-borne infection, lymphatic filariasis (LF). Lymphedema of the leg or arm and its advanced form, known as elephantiasis, are significant causes of disability and morbidity in 72 countries endemic for LF.

“Although mass treatment with antiparasitic drugs has led to significant reductions in the transmission of LF worldwide, activities to address morbidity have lagged behind,” says NTD-SC's director Eric Ottesen, MD. “Consequently, even countries that have successfully interrupted LF transmission may have sizeable populations who continue to suffer from the disabling and stigmatizing effects of lymphedema.”



CHAMPS Data Highlights Causes of Newborn and Child Deaths in South Asia and Sub-Saharan Africa

For the first time, public health officials and researchers around the globe will have access to accurate and timely data about the causes of death in children under age five in South Asia and sub-Saharan Africa. The data release is part of an ambitious and comprehensive initiative called Child Health and Mortality Prevention Surveillance (CHAMPS) Network that is supported by a coalition of partners including The Task Force for Global Health.

“Usually, people take years to collect the data and gradually release papers,” explains Patrick Caneer, senior manager for information technology at the Public Health Informatics Institute (PHII), the Task Force program that consolidates and manages CHAMPS data. “One of the biggest things that's different about CHAMPS is that these data are coming in every day. That's unprecedented.”

Every day around the world, more than 15,000 children under the age of five die—many of them from preventable diseases. CHAMPS believes that knowing the causes of death can help inform interventions to reduce child mortality in developing nations.



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Only
**9 percent of
persons with
Hepatitis B**
and
**20 percent of
persons with
Hepatitis C**
have been tested
and know their status.

Deaths from the disease
are up by 22 percent
since 2000.



The Task Force Embarks on Initiative to Eliminate Hepatitis B and C

The Task Force for Global Health has launched an ambitious program to eliminate hepatitis B and C, two infectious diseases that affect more than 300 million people and kill an estimated 1.3 million people annually – a higher death toll than HIV, malaria or tuberculosis.

The initiative, anchored in The Task Force’s collaborative approach, will create a platform for stakeholders in the viral hepatitis space to share knowledge, access technical assistance, and coordinate operational research to accelerate elimination of hepatitis B and C.

“There is nothing that exists right now that provides these services to help countries eliminate viral hepatitis,” says John Ward, MD, who heads the program and is seconded to The Task Force from the Centers for Disease Control and Prevention (CDC).

Ward says recent advances in the prevention and treatment of hepatitis B and C make elimination feasible and the initiative timely. Two years ago, the WHO responding to the growing incidence of the diseases, endorsed the goal of eliminating hepatitis B and C as public health threats by 2030.



New Drug Resistance Test Could Help Strengthen Deworming Programs

A groundbreaking new test to detect drug resistance in intestinal worms is expected to be ready for proof of concept testing early next year. This test could help large-scale treatment programs identify resistance before it takes hold within a population.

Intestinal worms cause soil-transmitted helminthiasis (STH), a neglected tropical disease that affects more than a billion people in some of the poorest and hardest to access areas of the world.

The Task Force program Children Without Worms (CWW) has been working with partners over the last year to spur the development of the resistance test, which will be the first of its kind

for humans. Similar tests exist for identifying drug resistance in livestock with STH.

The test could be a game-changer for STH control and elimination as it uses new technology to identify specific gene mutations in human parasites that cause drug resistance. A distinguishing feature of this test is its ability to scale up and test large numbers of samples simultaneously at relatively low cost per sample.