The Fight Against Filariasis
One of the world’s most disfiguring and debilitating diseases

Cairo, March 23, 2004 – Health workers from around the world are congregating in Cairo, Egypt, March 23rd-25th to review the progress of the Global Programme to Eliminate Lymphatic Filariasis (GPELF). Hosted by His Excellency the Honourable Minister of Health and Population, Professor Mohamed Awad Tag El Din, the third meeting of the Global Alliance to Eliminate Lymphatic Filariasis (GAELF) will welcome representatives from the endemic countries (83), donor pharmaceutical companies, bilateral and other donors, academic institutions, and non-governmental organizations. Several Ministers of Health or their representatives are attending the event from a diverse group of countries including Samoa, Guyana, Burkina Faso, Vanuatu, and China (the first large country to eliminate LF).

The aim of the GPELF is to eliminate lymphatic filariasis (LF) so that no future generation is plagued by this gross disability. Commonly known as elephantiasis, lymphatic filariasis, caused by worms and transmitted by mosquitoes, is regarded as the second most disabling disease in the world and affects the poorest people in society. Lymphatic filariasis is a disease which has flourished since the time of the Pharaohs. An autopsy performed on the 3000 year old mummified body of Natsef-Amun, an Egyptian priest during the time of Ramses XI (1113-1085BC), revealed lymphatic filariasis worms.

Today, LF is a disease with more than one billion people at risk. While the disease has been eliminated in some countries, it still affects more than 120 million people, of which 40 million live with severe disability and disfigurement. Dr. J.W Lee, Director General of WHO, said: "In many countries, health systems have been suffering the combined effects of instability, conflict, and under-funding due, in part, to heavy external debt. With the donations of various organizations, and community participation health systems can be effectively strengthened with the support of skilled management, reliable information systems, and financial and political support." Therefore, there is hope that the disease can now be eliminated with the treatment of drugs donated by GlaxoSmithKline and Merck & Co. Inc. In most sub-Saharan Africa, LF is treated using a combination of albendazole, donated by GlaxoSmithKline and Mectizan®, donated by Merck & Co. Inc., over a four to six year regimen. In other endemic countries, including Egypt, the drug DEC is administered with albendazole.

The meeting is celebrating the rapid up-scaling of the GPELF since its launch in Spain in 2000. Around 63 countries now have active elimination programmes, of which 36 countries have commenced mass drug administration activities. In 2003, 80 million people were treated with the co-administration of the two drugs and 52 million with DEC alone. The drugs include many additional benefits such as deworming and improved anaemia status. The treatment reaches the most impoverished people enabling them to work and lead more productive lives. In addition to presenting reports of various endemic countries, the meeting will hear of the success to date of Egypt, where the Minister of Health and Population has strongly supported the Programme and where the numbers of those affected are rapidly declining. In Egypt, the fifth round of treatment is scheduled to take place in September, just prior to a detailed evaluation of GPELF.

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