



Approaches to Fight Against the Neglected Tropical Diseases and Appearances of Its Categories According to WHO

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ABOUT THE STUDY

Neglected Tropical Diseases (NTD) is a diverse group of tropical infectious diseases commonly found in the low-income population of developing regions of Africa, Asia, and the Americas. They are caused by various pathogens such as viruses, bacteria, protozoa, and parasites (helminths). These diseases are in contrast to the "big three" infections (HIV/AIDS, tuberculosis, malaria), which generally receive more treatment and research funding. In sub-Saharan Africa, the effects of neglected tropical diseases as a group are comparable to those of malaria and tuberculosis. Coinfection of NTD can also make HIV/AIDS and tuberculosis more deadly.

Seventeen Neglected Tropical Diseases (NTDs) have been identified by the World Health Organization (WHO). It is estimated that more than 1 billion people are infected with NTD and another 1 billion are at risk. The majority of NTDs occurs in the tropics and subtropics and share certain common characteristics.

- High-income earners are rarely affected.
- Many are chronic, slow-growing conditions that are undetected and untreated and gradually worsen.
- The damage they cause may be irreversible. They can cause severe pain and lifelong disability, with long-term effects on affected individuals and family caregivers.
- People with neglected tropical illnesses are often stigmatized, excluded from society, and can affect their mental health.

These illnesses contribute to the cycle of suffering and disability. Most often, people are affected by 5-7 of these diseases at the same time. Some illnesses reduce the economic productivity of young adults, impair childhood growth and development, adversely affect pregnancy and affect people in their prime. These illnesses can cause blindness, disability, malformations, and injury to infected people

The fight against Neglected Tropical Diseases (NTD) has a long history. Even in ancient times, they were often easily identified

as unique, as many neglected tropical diseases either spoil the appearance or cause unique signs and symptoms.

The 20th century has witnessed several extraordinary efforts to fight the NTD, many of them which have been successful. Since the early 1900s, both London and Liverpool's Tropical Medicine Schools have been pioneers in the treatment and prevention of illness. Shortly thereafter, a French doctor and scientist Eugene Jamot promoted an innovative approach to sleeping sickness that depends on mobile teams to diagnose and treat African Trypanosoma in Cameroon and elsewhere in West Africa. The Jamot Act has led to the near eradication of the disease in many areas, but such public health advances have been seen during conflicts in Angola, the Democratic Republic of the Congo, Sudan, etc. in the second half of the 20th century.

Despite the efforts highlighted above, in the 1990s there was a lack of funding for both research and treatment of diseases that affect the poor, so science that is interested in or can tackle these diseases. The number of people has not increased significantly. By the turn of the millennium, research on infectious tropical pathogens lags behind other areas of biomedical sciences. Parasites have not been able to easily adapt to modern molecular and immunological methods, or the rapidly accelerating advances in transmission dynamics and mathematical modeling important developments have occurred. The first major advance in the illness of the poor was the entry of multinational pharmaceutical companies that began to pay attention to the treatment of tropical infectious diseases worldwide. Such efforts led to the first donation of mebendazole from Johnson & Johnson and later to the donation of albendazole from GlaxoSmithKline. In parallel, Davis and Wegner 19 demonstrated the potential effect of praziquantel on human schistosomiasis, and the Bill & Melinda Gates Foundation, a BMGF-sponsored schistosomiasis management initiative, expanded the use of praziquantel. Finally, it led to the donation of the drug by Merck. It was led by KGaA. A major achievement in 2007 was the signing of an agreement by Merck KGaA to donate Praziquantel for schistosomiasis to school-age children

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through the work of WHO and the Financial Times. Initially, 20 million tablets were donated each year, but by 2017 it had reached 250 million. The some of the selected neglected tropical diseases are:

- Buruli Ulcer
- Chagas Disease
- Cysticercosis
- Dengue Fever
- Dracunculiasis (Guinea Worm Disease)
- Echinococcosis
- Fascioliasis
- Human African Trypanosomiasis (African Sleeping Sickness)
- Leishmaniasis
- Leprosy (Hansen's Disease)
- Lymphatic Filariasis
- Mycetoma

- Onchocerciasis
- Rabies
- Schistosomiasis
- Soil-Transmitted Helminths (STH) (Ascaris, Hookworm, and Whipworm)
- Trachoma

Interventions for neglected tropical diseases support the vision of universal health insurance. Neglected tropical disease programs have a grassroots approach and can be accessed. Some of the world's poorest people are affected by complex emergencies. In doing so, they ensure equal access to healthcare and services. Succeeded in overcoming what was ignored Tropical disease can serve as a litmus test for progress towards achieving public health. Coverage can only be achieved if people who are affected by or at risk of these illnesses are properly cared for. Health services have arrived.