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Weekly epidemiological record
Relevé épidémiologique hebdomadaire

15 JANUARY 2021, 96th YEAR / 15 JANVIER 2021, 96e ANNÉE
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followed by discussions of the 7 programmes, with specifc conclusions and recommendations for each programme: Guinea Worm Eradication Programme (dracunculiasis; GWEP); Global Polio Eradication Initiative (GPEI); elimination programmes for measles and rubella (MR), malaria, river blindness (onchocerciasis; RB) and lymphatic flariasis (LF); and the programme for the Global Elimination of Trachoma. The conclusions and recommendations are intended to help national decision-makers in making the diffcult choices they face in 2021 to balance the need to continue or resume public health programmes with mitigation of the risks of exposing health workers and community members to COVID-19.

Participants considered the impact of the pandemic on the pillars of effective public health programmes, including a competent, motivated workforce; suffcient infrastructure to administer interventions; political will at community, intermediate and national levels; donors to help fnance the efforts; and a supply chain that can deliver the necessary diagnostics, therapeutics and vaccines in time. The pandemic threatens each of these pillars. The ITFDE noted the challenges that the COVID-19 pandemic presents by impeding delivery of necessary, effective public health programmes to many poorly underserved populations as well as the exceptional opportunities for national programmes and donors to improve mutually benefcial cooperation among disease-specifc programmes and the provision of broad health services. The critical importance of public health leadership was also noted.

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As the number of COVID-19 cases increases around the world, with most cases outside Africa, models predict that there will be many more COVID-19 cases in Africa but with fewer deaths than in other regions mainly because of a younger population. The potential impacts of climate and environmental characteristics and some comorbid conditions such as malaria, HIV/AIDS and malnutrition on the experience of COVID-19 in Africa are, however, unknown, and the models do not allow adjustment for altered health care capacity or the feasibility of social distancing.

Decisions about how, when and where to continue and even intensify eradication, elimination and control programmes must be based on ethical principles in the face of priorities that some may see as competing. This is particularly true in considering the ethical value of community and stakeholder engagement and the importance of respect when engaging populations. Ethics in global health programming is a means for reasoning among the complex interests at stake when multiple organizations and stakeholders with different levels of power, resources and influence cooperate in shared, or unilaterally imposed, goals. Ethical reasoning provides language and concepts to frame and analyse ethical issues and develop valid rationales and arguments for what might constitute the best solution and

This includes intensive efforts for large countries with the weakest health systems and for the lowest-performing districts within countries. This approach will probably also be needed in some large middle-income countries with quite strong health systems but uneven access for specifc communities.
There is no global goal for measles eradication.

Existing tools may be suffcient to reach minimal conditions for eradication, but new tools such as point-of-care diagnostics, rapid diagnostic tests and new strategies such as novel vaccine delivery and rapid pathways to market are needed to overcome traditional barriers to equity.

Malaria elimination

Malaria-endemic countries may be categorized into high-burden countries, where progress has stalled after a period of exceptional decreases in morbidity and mortality between 2000 and 2015, and more than 34 countries that now report fewer than 1000 cases of malaria annually.[5] The major challenge facing high-burden countries is to get back on track to meet goals established in the Global Technical Strategy for Malaria 2016–2030 that call for a 90% reduction in malaria morbidity and mortality by 2030. The goal for the eliminating countries is to accelerate progress towards achieving 3 years with 0 indigenous malaria cases, attain WHO certifcation of malaria elimination and prevent re-establishment of transmission. Since 1955, WHO has certifed 37 countries as malaria-free, including 4 countries since 2018. The COVID-19 pandemic has challenged malaria programmes, including in countries approaching malaria elimination, by delaying receipt of commodities, care-seeking, case investigation and response; causing missed diagnoses; and reducing the mobility of health care workers. These issues are also of concern in high-burden countries. Tighter borders have decreased cross-border traffc but have increased the number of illegal crossings in some countries and contributed to delayed shipments of commodities. Modellers have analysed the impact of different COVID-19 scenarios on disruption of programme activities and

raising coverage from 65% to 80% of the total population would mitigate the negative impact of delayed or no MDAs over time for both RB and LF.

National RB and LF programmes should use the pause due to COVID-19 to plan modifcations or redesign delivery strategies to improve coverage of the total population. NTD programmes could also use the pause in feld work to gather data and build their elimination dossiers. Where schools are closed, programmes should consider community-based transmission assessment surveys.

WHO guidelines for resuming community-based interventions with proper precautions to prevent COVID-19 should be followed to maintain MDA for LF and RB wherever possible. RB-endemic countries should consider biannual rather than annual MDA. In countries where only LF is endemic, programmes should transition from 2-drug to triple-drug therapy.

National programmes should plan for additional resources to support activities with mitigation measures. Care for persons with lymphoedema and hydrocoele must be maintained.

Community health workers in LF and RB elimination programmes are a potential resource for mutually benefcial cooperation with efforts to prevent COVID-19.

Trachoma elimination

A signifcan ra ĩ ly

Avian influenza	**https://www.who.int/influenza/human_animal_interface**	Grippe aviaire
Buruli ulcer	**http://www.who.int/buruli**	Ulcère de Buruli
Child and adolescent health and development	**http://www.who.int/child_adolescent_health**	Santé et développement des enfants et des adolescents
Cholera	**http://www.who.int/cholera**	Choléra
COVID-19	**https://www.who.int/emergencies/diseases/novel-coronavirus-2019**	Maladie à coronavirus 2019 (COVID-19)
Dengue	**http://www.who.int/denguecontrol**	Dengue
Ebola virus disease	**https://www.who.int/health-topics/ebola/#tab=tab_1**	Maladie à virus Ebola
Emergencies	**https://www.who.int/emergencies**	Situations d'urgence sanitaire
Epidemic and pandemic diseases	**https://www.who.int/emergencies/diseases**	Maladies épidémiques et pandémiques
Eradication/elimination programmes	**http://www.who.int/topics/infectious_diseases**	Programmes d'éradication/élimination
Fact sheets on infectious diseases	**http://www.who.int/topics/infectious_diseases/factsheets**	Aide-mémoires sur les maladies infectieuses
Filariasis	**http://www.filariasis.org**	Filariose
Global Foodborne Infections Network (GFN)	**http://www.who.int/gfn**	Réseau mondial d'infections d'origine alimentaire
Global Health Observatory (GHO) data	**https://www.who.int/gho**	Données de l'Observatoire de la santé mondiale
Global Influenza Surveillance and Response System (GISRS)	**https://www.who.int/influenza/gisrs_laboratory**	Système mondial de surveillance et d'intervention en cas de grippe (GISRS)
Global Outbreak Alert and Response Network (GOARN)	**https://www.who.int/ihr/alert_and_response/outbreak-network/en/**	Réseau mondial d'alerte et d'action en cas d'épidémie (GOARN)
Health topics	**http://www.who.int/topics/en**	La santé de A à Z
Human African trypanosomiasis	**http://www.who.int/trypanosomiasis_african**	Trypanosomiase humaine africaine
Immunization, Vaccines and Biologicals	**http://www.who.int/immunization**	Vaccination, Vaccins et Biologiques
Influenza	**https://www.who.int/influenza**	Grippe
International Health Regulations	**http://www.who.int/ihr**	Règlement sanitaire international
International travel and health	**http://www.who.int/ith**	Voyages internationaux et santé
Leishmaniasis	**http://www.who.int/leishmaniasis**	Leishmaniose
Leprosy	**http://www.who.int/lep**	Lèpre
Lymphatic filariasis	**http://www.who.int/lymphatic_filariasis**	Filiariose lymphatique
Malaria	**http://www.who.int/malaria**	Paludisme
Middle East respiratory syndrome coronavirus (MERS-CoV)	**https://www.who.int/emergencies/mers-cov**	Coronavirus du syndrome respiratoire du Moyen-Orient (MERS-CoV)
Neglected tropical diseases	**http://www.who.int/neglected_diseases**	Maladies tropicales négligées
Onchocerciasis	**http://www.who.int/onchocerciasis**	Onchocercose
OpenWHO	**https://openwho.org/**	OpenWHO
Outbreak news	**http://www.who.int/csr/don**	Flambées d'épidémies
Poliomyelitis	**http://www.polioeradication.org**	Poliomyélite
Rabies	**http://www.who.int/rabies**	Rage
Schistosomiasis	**http://www.who.int/schistosomiasis**	Schistosomiase
Smallpox	**http://www.who.int/csr/disease/smallpox**	Variole
Soil-transmitted helminthiases	**http://www.who.int/intestinal_worms**	Géohelminthiases
Trachoma	**http://www.who.int/trachoma**	Trachome
Tropical disease research	**http://www.who.int/tdr**	Recherche sur les maladies tropicales
Tuberculosis	**http://www.who.int/tb and/et http://www.stoptb.org**	Tuberculose
Weekly Epidemiological Record	**http://www.who.int/wer**	Relevé épidémiologique hebdomadaire
WHO Lyon Office for National Epidemic Preparedness and Response	**http://www.who.int/ihr/lyon**	Bureau OMS de Lyon pour la préparation et la réponse des pays aux épidémies
WHO Pesticide Evaluation Scheme (WHOPES)	**https://www.who.int/whopes/resources**	Schéma OMS d'évaluation des pesticides
Yellow fever	**http://www.who.int/csr/disease/yellowfev**	Fièvre jaune
Zika virus disease	**https://www.who.int/emergencies/diseases/zika**	Maladie à virus Zika