

Tanzania
10th-16th June 2019
German network against NTD and
Global Health Initiative of the German parliament



21 June 2018 Members of German Parliament Establish Advisory Council Against Neglected Tropical Diseases

In June 2018 nine members of the German parliament initiated an advisory council to combat neglected tropical diseases and strengthen health systems. **Heike Baehrens MP** is one of the parliamentary delegates who founded the council, and sits as vice council chair. **Prof. Andrew Ullmann**, another member of the advisory council is infectiologist at the University of Wuerzburg.



Visit of German member of parliament to Tanzania NIMR HQ Dar es Salaam 11th June 2019



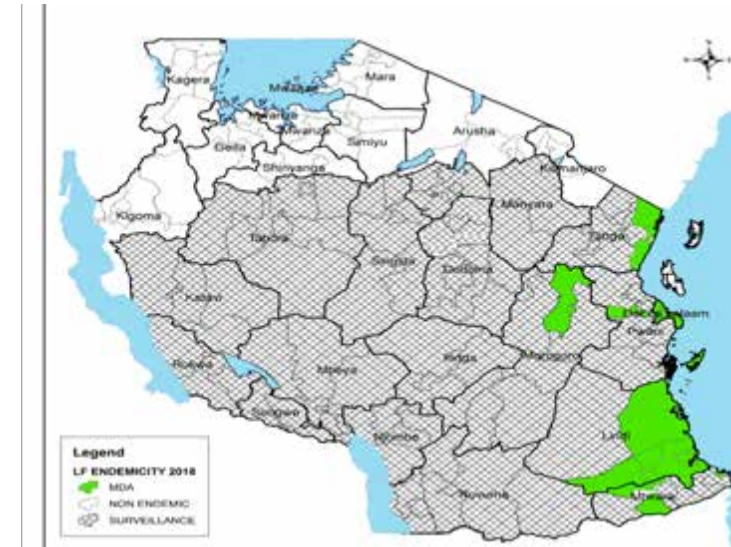
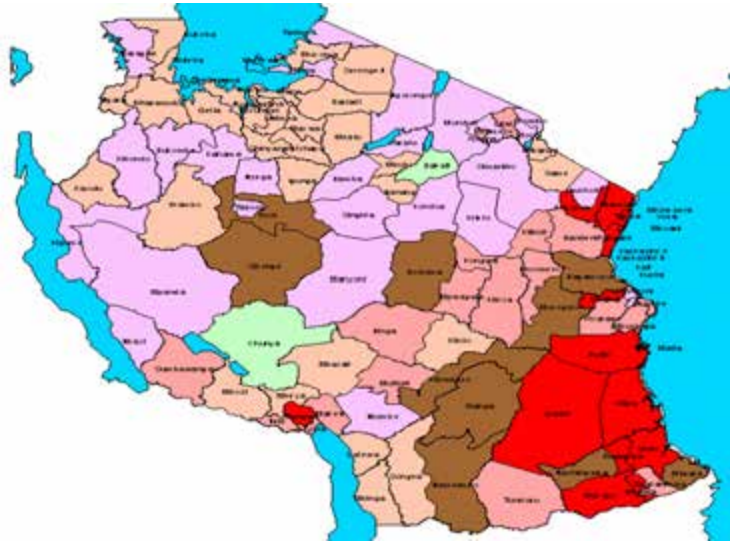
After initiation of the advisory council the wish to visit a country where NTDs are prevalent was formulated. Tanzania was chosen, because the national NTD programme is very active and well known in addition several German NGOs are working in Tanzania since many years.

The members of the German parliament (**Heike Baehrens, Andrew Ulmann**) and the German network against NTD (**Achim Hörauf, Inge Kroidl, Rhan Gunderlach**) were accompanied by **Joerg Herrera**, Deputy Ambassador of the German Embassy in Tanzania and **Agnes Kayola**, Acting Director Department of Regional Cooperation of the Ministry of Foreign affairs.



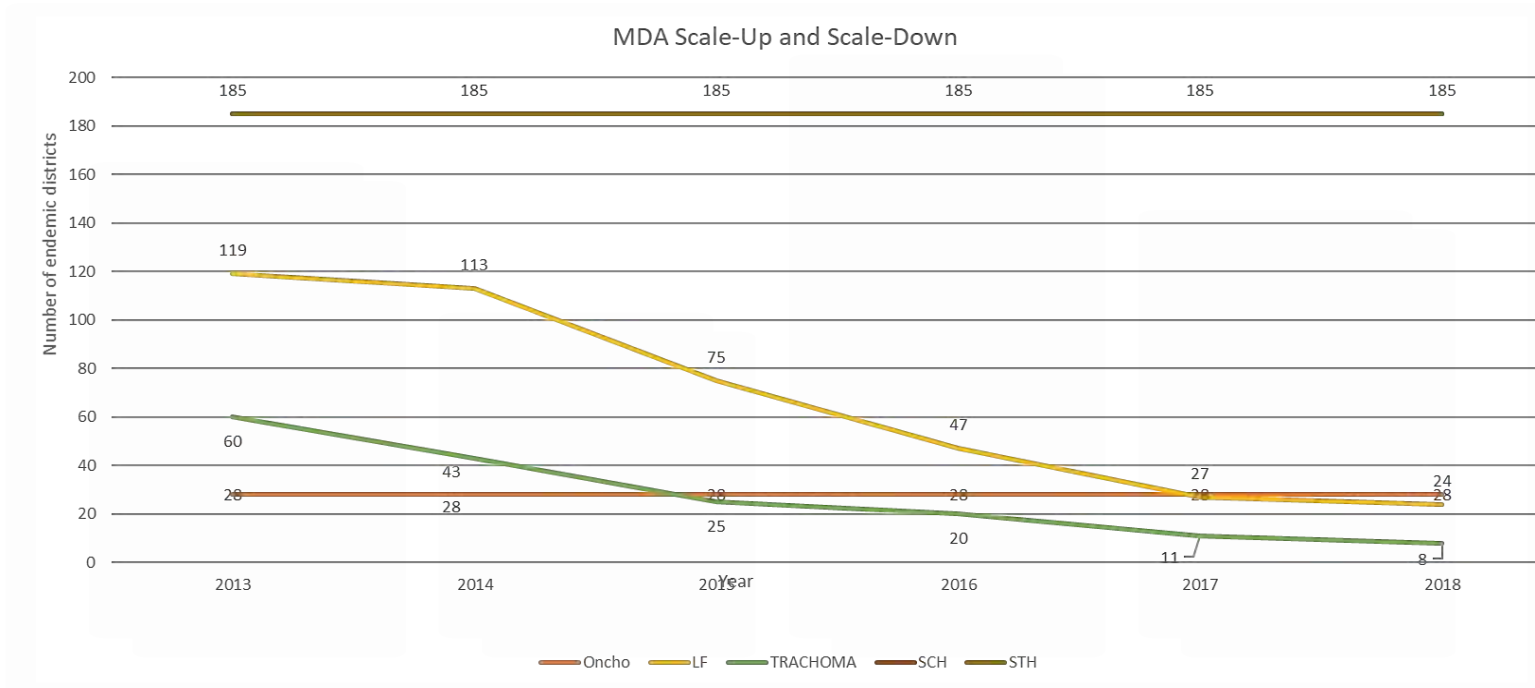
Introduction by NTD programme manager Dr. Upendo Mwingira at NIMR HQ

Reduction of # of Districts requiring mass drug administration for lymphatic filariasis from 120 in year 2014 to 24 by 2019



- Mass drug administration (MDA) against LF started in 2000 in coastal regions of TZ
- This led to a reduction in prevalence of lymphatic filariasis in most districts
- However, individuals with filarial induced pathology do not benefit from the drugs chosen for mass drug administration and remain behind. Morbidity management is key.

MDA scaling down



- The Tanzanian NTD programme is very successful in reducing the prevalence of several diseases e.g. lymphatic filariasis
- Other NTDs, e.g. Schistosomiasis and STH didn't change in prevalence
- MDA against STH and Schistosomiasis focus on school age children, but re-infection through untreated family members is high

Treatment campaigns and other activities were explained by Dr. Mwingira and her team



Disabling morbidity through lymphatic filariasis was explained by Dr. Lazarus

MDA led to a reduction in prevalence of LF, but patients with LF pathology remain behind and need to be addressed

Prof. Hoerauf, University Bonn, Prof. Hoelscher and PD Dr. Inge Kroidl from University Munich are collaborating with Dr. Mwingira and her team in a Doxycycline treatment trial for lymphedema patients (TAKeOFF-LeDOXY)



Meeting at the embassy, roundtable discussion



Member from DAHW (GLRP)
Christoffel-Blindenmission, GIZ
and action medeor joined the
delegation at the round table
discussion



The discussion about
achievements and
current needs continued



Visiting Mwanza at Lake Viktoria 12.06.2019

Schistosomiasis program by Stadt Würzburg and DAHW



Briefing by Dr. Andreas Müller, Missionsärztliches Institut and Dr. Humphrey Mazigo, Project coordinator, Schistosomiasis

*Hospital in Kigombe
Meeting with Doctor in
charge and laboratory
personnel:
Challenges in diagnosis,
treatment, transferal of
Schistosomiasis patients.*



Meeting with Praziquantel Drug distributor in Mwanza



Infection through activities in water of Lake Viktoria



Visit of a project on the island Ijinga.

Visit of WASH infrastructure in communities and schools of Ijinga, supported by MI and GLRA/DAHWA

Building safe water supplies on Ijinga island supported by MI and GLRA/DAHWA



Visit of the only health center in Ijiinga



Discussion in Mwanza and Ijinga

The governmental NTD programme focus on mass drug administration of praziquantel against schistosomiasis is school children. But re-infection rate is high because smaller children and adults are infected with schistosomiasis, but not treated regularly

The MDA programme did not lead to a decrease in prevalence or reduced need for MDA

Drs. Müller and Mazigo presented a study focusing on treatment of all individuals in an isolated area (island Ijinga)

Population of 2500 individuals in Ijinga. GLRA is teaching and treating all people on that island with praziquantel, not only school children. A decrease in prevalence of schistosomiasis was seen, but increased again after short time

~120 individuals on Ijinga island are infected with HIV and receive ART. Not everyone on the island agrees to be tested. HIV/Schistosomiasis co-infection is studied by Dr. Humphrey Mazigo from Department of Medical Parasitology and Entomology, Catholic University of Health and Allied Sciences.

German Leprosy and TB Relief programme (GLRP / DAHW) in Kolandoto



Leprosy participants in Kolandoto



Selfcare-groups (Leprosy-patients: >training to self-treatment to avoid further handicaps)



Support group:
inclusion of handicapped persons and community
members, who suffer from bad economic situation
>implementation of microcredit systems



Meeting with community-based rehabilitation (CBR) -village committees: self contained of CBR measures



- Meeting with community-based rehabilitation (CBR) -village committees: self contained of CBR measures
- Fighting stigma by community sensitization
- Discussion with 2 former leprosy patients who had taken part in schoolings and what they have achieved in life.

Discussion in Kolandoto

- DAHW (GLRP) is focusing on sustainable help for disabled leprosy patients
- In addition support for children from leprosy families (with reduced or no income)
- and supporting handicapped people with micro credits

- During the village meeting further support for education to a higher level was requested by former leprosy patients and also orphans from leprosy families.

- **> need for more capacity development-research or education opportunities formulated**

- In Kolandoto all cases have been treated and no active case was known. Overall ~2000 new leprosy cases per year are diagnosed in Tanzania (in contrast to 8000/year sometime earlier). However, many patients are found in very remote areas, so real data are scarce.

- An interesting project supported by EDCTP is conducted: **Lprep**: Single dose Rifampicin for household contacts of leprosy patients (studied in Tanzania, Sri Lanka, Myanmar, Nepal, India, Indonesia, Brazil)

Presentation of studies and visit of the facilities of MMRC in Mbeya



Discussion in Mbeya

MMRC colleagues presented previous and ongoing studies

- HIV studies and vaccine trials
- Cervical Cancer study (2H)
- Mobile lab activities
- Quality management
- Lymphatic Filariasis and
- Co-infection study (RHINO)

Prof. Achim Hoerauf (University Bonn) and Dr. Inge Kroidl presented

- Collaborative activities:
Lymphedema studies
(TAKeOFF LeDOXY)
- WHO strategic plans

Key points of the discussion were

- Capacity building, sustainability,
- Research and education opportunities
- Overlapping or collaborative activities

Delegates were impressed by MMRC

- The diversity of the projects and funding schemes
- Research opportunities and capacity building which is offered to other study sites

Global health Initiative Dinner at Utengule



Watching the HIV drama-group (education about HIV)



Dr. Lucas Maganga, MMRC explaining the work of the mobile laboratory



TB diagnosis of the mobile laboratory



Education through poster

Rapid TB diagnosis with TB Gen Xpert is brought to remote areas with the mobile laboratory

HIV Seminar in a Mbalizi Bar



Mr. Azza Kamendu informs about risk for HIV, different prevention methods and antiretroviral treatment

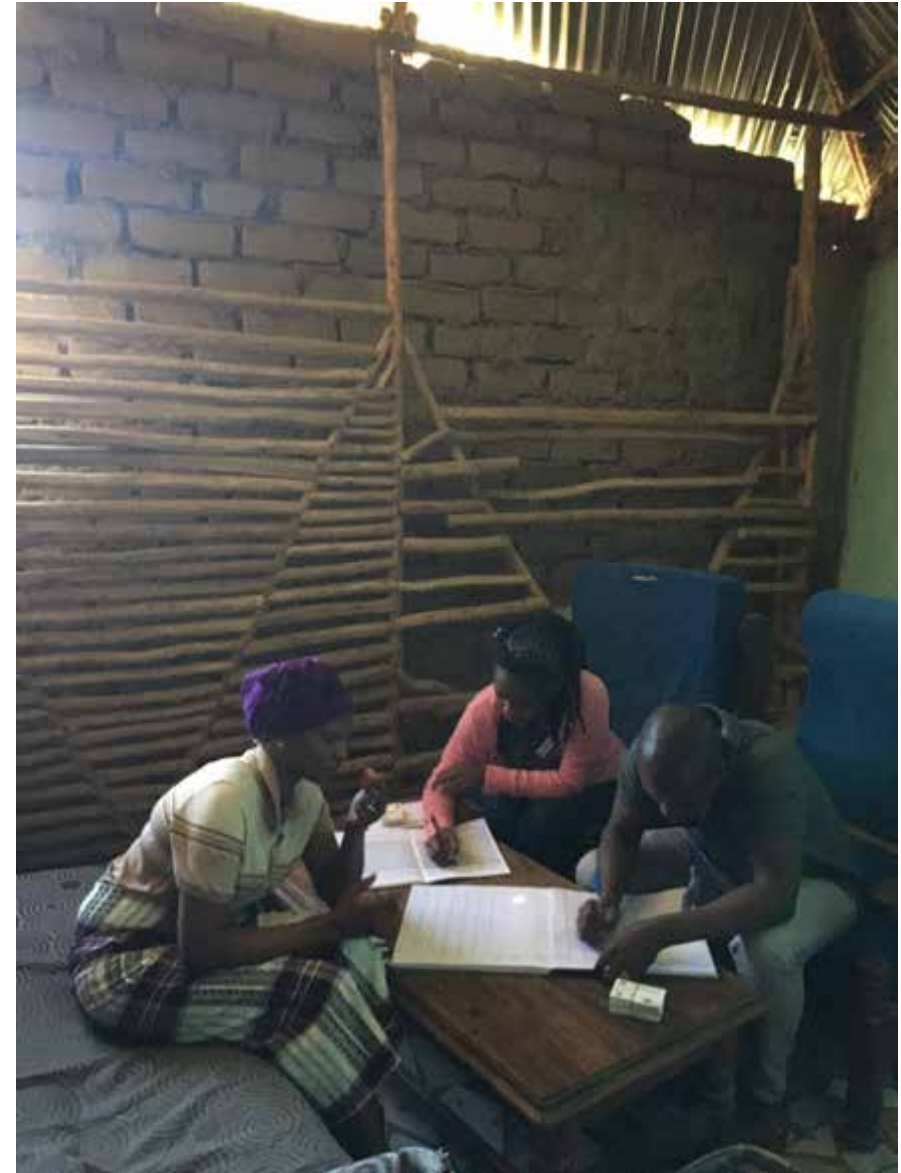
Bar workers and truck drivers assembled in Mwanji Pub. After the seminar HIV voluntary counseling and testing is offered

Voluntary counseling and HIV testing in a private setting after the seminar

On the morning of our visit 15 individuals were interested and finally HIV tested

Three new HIV infections were detected and participants referred to Care and Treatment facility at Ififisi Hopital nearby

TB diagnosis in the mobile laboratory is scheduled if neccessary.



Visit of Action medeor in Dar es Salaam



Since 2005 action medeor is providing more than 400 pharmaceutical products to larger and smaller health facilities throughout Tanzania.

At the Muhimbili University of Dar es Salaam action medeor offers pharmaceutical training and stipends to foster local production of pharmaceutical products.

