

**Summary of the Eleventh Meeting of the ITFDE (II)
October 11, 2007**

The Eleventh Meeting of the International Task Force for Disease Eradication (ITFDE) was convened at The Carter Center from 8:30am to 4:00pm on October 11, 2007. The

as Australia, have reported cases. Some animals (e.g., koalas, possum) are also naturally infected.

M. ulcerans is a slow growing mycobacterium which can be cultured at 30-33 degrees centigrade, and produces a unique toxin: mycolactone. Specimens are collected by swab, biopsy, or (recently) fine needle aspiration. Early diagnosis and treatment with antibiotics (rifampicin and streptomycin) provide the best outcomes, and can prevent the disfiguring scarring and need for extensive surgery that was required in the past. Health education of people in communities at risk and training of health workers and community agents are keys to improving early case-finding and treatment. Wearing long pants and long-sleeved shirts appear to be protective, as may be the use of bednets and insect repellants (the latter suggestions based on very preliminary data from one study).

Yaws

This discussion included consideration of all three non-venereal e

following confirmation by independent appraisals in 2004-2006. The South-East Asia Region of the World Health Organization has set a goal of eliminating yaws from the entire region (which includes Indonesia and Timor-Leste) by 2012. The World Health Organization convened an informal consultation on yaws in Geneva on January 24-26, 2007, to review the current situation and launch a new initiative on yaws as part of the Neglected Tropical Diseases Initiative.

Conclusions and Recommendations

1. The ITFDE commends the strong example set by India recently, for demonstrating the possibility of interrupting transmission of yaws nationwide, given sufficient political will, despite the biologic constraints associated with the pathogen. India's example and the recent efforts underway in the South East Asia region of the World Health Organization deserve much greater attention and should be published in an appropriate journal.
2. The continued occurrence of yaws and other endemic treponematoses, despite availability of an effective, stable and inexpensive treatment and a simple means of diagnosis in the field, is lamentable testimony to lack of political will, inadequate funding, and persistent weaknesses in primary health care systems of affected countries.
3. The current status of knowledge of the extent of yaws is very poor. The World Health Organization should publicize the currently known and unknown status of surveillance for this disease in each of the remaining suspected endemic countries, and encourage mapping and more detailed reporting of surveillance data.
4. The World Health Organization and UNICEF are the best hopes for strong global advocacy to address this eminently curable and preventable Neglected Tropical Disease.

includes formation of a bi-national committee, and the mutual goal of eliminating lymphatic filariasis and malaria from Hispaniola by 2016-2017.

Conclusions and Recommendations

1. The International Task Force for Disease Eradication commends the progress made over the past year and a half by the Dominican Republic and Haiti (with the assistance of the Pan American Health Organization and the Centers for Disease Control and Prevention) to increase their cooperation towards eliminating lymphatic filariasis and malaria.
2. The ITFDE emphasizes the urgency of bot