



UNITING TO COMBAT

NEGLECTED TROPICAL DISEASES



Women and girls are disproportionately affected by neglected tropical diseases (NTDs), and have less access to medical care. Female genital schistosomiasis (FGS), caused by an NTD, can triple the risk of women contracting HIV, yet safe and effective donated medicines are available but not currently reaching everyone.

If, for less than 50 cents per treatment you can reach the unreached, why wouldn't you?

The impact of NTDs on women and girls

- NTDs disproportionately affect women. Women bear the largest burden of infection and consequence of disease predominantly through socio-cultural reasons, and through biological factors. They often have the least access to medical attention.
- Infections with NTDs contribute to poor foetal development, maternal anaemia, maternal mortality, pregnancy complications, infant mortality and low birth weight. It is estimated that one out of every three pregnant women in endemic countries is infected with hookworm, a type of soil-transmitted helminth (STH). This NTD causes iron deficiency anaemia and increased blood loss during childbirth.
- Globally, adolescent young women are still becoming HIV positive at an alarming rate and the HIV community has classified them as a 'key population'.
- Women living with female genital schistosomiasis can be at three times the risk of contracting HIV.

121m

school-aged children
at risk from
schistosomiasis

97%

of affected
people live
in Africa

50¢

is all it costs
per treatment,
per year

Key FGS points

- Globally the highest burden of schistosomiasis is found in Africa, with over 97% of people requiring preventive treatment for schistosomiasis living on the continent.
- The World Health Organization (WHO) estimates that up to 56 million young and adult women suffer from FGS.
- FGS can triple the risk of women and girls contracting HIV, and also frequently causes reproductive organ damage leading to infertility, ectopic pregnancy and maternal death.
- Regular treatment in childhood with the drug praziquantel treats schistosomiasis infection and therefore prevents FGS.
- The pharmaceutical company Merck KGaA committed to donate 250 million tablets per year for the treatment of school-aged children. However, the full potential of this generous donation is not being utilized due to a lack of resources for in-country drug distribution.
- In 2017, 121 million school-aged children needed treatment, yet praziquantel treatment only reached just over two thirds of them (70.8%).
- For less than 50 cents per treatment, per year, we can deliver the donated drugs needed to protect girls and boys against schistosomiasis and other NTDs, making it one of public health's best buys.
- Praziquantel is a safe, effective and easy to administer medication, and is needed not just for school-aged children, but also for the treatment of women of reproductive age.

Prevention and treatment of female genital schistosomiasis is a social justice, reproductive health and human rights issue.

Background information

Schistosomiasis, also known as bilharzia, is a parasitic infection in subtropical and tropical regions, caught through contact with contaminated fresh water where the intermediate host — a snail — lives. The parasite is most commonly found throughout Africa, but can also be found in parts of South America, the Caribbean, the Middle East and Asia. There are two forms of schistosomiasis: the urogenital form and the intestinal form.

Schistosomiasis mostly affects poor and rural communities, particularly those who depend on agriculture and fishing; activities that require people to spend much time in contaminated water, exposing them to infection. Inadequate sanitation and safe water supply means that children playing in water and women doing domestic chores, such as washing clothes or dishes, in infested water are especially vulnerable to infection.

Urogenital schistosome eggs lodge in urinary and reproductive organs. In the Fallopian tubes, uterus, cervix, and lower genital tract of girls and women they form fibrotic nodules that result in female genital schistosomiasis (FGS), a condition which is associated with lesions, bleeding and infertility as well as social stigma and depression. Given the nature of the signs and symptoms of FGS, women tend to approach health services with complaints of infertility or symptoms of sexually transmitted infections (STIs). Clinicians are generally unaware of FGS because it is not taught to them during their training. Most patients are therefore misdiagnosed, often being diagnosed with an STI, and do not receive the appropriate treatment.

There is a pressing need to increase awareness of FGS in secondary schools and women's health clinics in endemic areas and to find better diagnostic and treatment platforms to reach young girls and women already affected by FGS in communities.

WHO and UNAIDS have issued a joint technical document presenting a wealth of evidence of FGS association with HIV/AIDS transmission and as such advocating for large-scale prevention. Prevention of FGS is indeed possible by regular treatment with praziquantel. In 2018, only 220 million tablets (providing 88 million treatments) were requested by endemic countries, meaning millions of girls were left behind and put at risk of FGS and HIV. If it is given early in life, praziquantel will prevent chronic damage of the genital tract that occurs in adolescent girls in areas where schistosomiasis prevails.