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MINISTRY OF HEALTH - ETHIOPIA
የዜጎች ጤና ለሃገር ብልጽግና!
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Press Release

Ethiopia interrupted river blindness (Onchocerciasis) transmission in three more districts in Oromia and 508,000 people no longer need mass drug administration (MDA) with Ivermectin

December 21, 2021 … Addis Ababa: Onchocerciasis, also known as river blindness, is one of the neglected tropical diseases targeted for elimination by 2030. It is caused by *Onchocerca volvulus*, a parasitic worm that causes skin disease and vision loss and is transmitted from person to person through the bites of infected blood-sucking black flies, which breed around rapidly flowing rivers. In Ethiopia, Onchocerciasis control was started in 2001 with annual drug distribution to members of endemic communities and it was shifted to an elimination effort in 2013 to get rid of the parasite throughout Ethiopia.

Ethiopia declared its first major success against river blindness in Amhara, where it was possible to stop drug distribution in six districts in the cross border Metema-Galabat focus in 2018. This coordinated cross-border collaboration between Ethiopia and Sudan has freed over one million people from risk of onchocerciasis since 2018 (the *countries' Metema-Galabat announcements are hyperlinked, respectively*).

The Ethiopia Onchocerciasis Elimination Expert Advisory Committee (EOEEAC), during its 8th annual meeting held virtually from October 26-28, 2021, recommended second area where drug distribution could be stopped in Ethiopia, this time in Oromia region (Tiro Afeta, Chora Botor and Limu Kosa districts). Serological blood tests in humans and examination of black flies for parasites showed no significant infections and were below the World Health Organization (WHO) cut-off. The Ministry of Health (MoH) accepted the EOEEAC recommendation, and, as a result, 508,000 people no longer need mass drug administration (MDA) with ivermectin. These three districts now enter the next and very important phase of post-treatment surveillance (PTS) for 3-5 years to be sure that the infection does not recur. During the PTS period, health education, advocacy, and surveillance activities will continue; if there is no evidence of recrudescence or reinfection, these areas will move to the post-elimination surveillance (PES) phase.

The Ministry of Health thanks and acknowledges all partners and stakeholders, namely: the Ethiopian Public Health Institute (EPHI), The Carter Center, Lions Clubs International Foundation (LCIF), the

Ethiopia Lions Clubs, the Reaching the Last Mile Fund administered by the END Fund, Light for the World, USAID-RTI-ACT to END NTDs, the University of South Florida, WHO-ESPEN and the late Most Honorable World Laureate Dr. Tebebe Yemane Berhan.

Special gratitude goes to EOEEAC members for their advisory role and Merck, Merck Sharp & Dohme, and Mectizan Donation Program for the generous donation of Mectizan® (ivermectin).

Contacts:

Mrs. Hiwot Solomon - Ethiopian MoH, DPC Director; email: hiwot.solomon@moh.gov.et

***Mr. Fikre Seife** - Ethiopian MoH, NTD Team Leader, email: fikre.seife@moh.gov.et

Related Resource:

Carter Center Congratulates Ethiopia on Interrupting Transmission of River Blindness in Three Former Highly-endemic Districts