Conclusions and Recommendations

from the Joint IPA-AMCHA Annual Meeting

(Quito, Ecuador, 18–20 September 2006)

This joint meeting constitutes the VIIth Annual Meeting of the Andean Initiative for Chagas Disease Control (IPA) and the IIIrd Annual Meeting of the Initiative for Chagas Disease Surveillance and Prevention in the Amazon Region (AMCHA). The meeting was a joint effort between the Regional Program on Chagas Disease, Communicable Disease Unit, Health Surveillance and Disease Management Area of the Pan American Health Organization (PAHO/HDM/CD/CHA), in collaboration with the Program for Innovative and Intensified Disease Management, Control of Neglected Tropical Diseases Team, Communicable Diseases Cluster of the World Health Organization (WHO/CD/NTD/IDM). With Dr. Jorge Monroy (Ecuador) presiding as President, Dr. Soraya Oliveira dos Santos (Brazil) as Secretary, and Dr. Jesús Benítez (Venezuela) as rapporteur, the official government delegates from Brazil, Colombia, Ecuador, Guyana, French Guiana, Peru, Suriname, and Venezuela analyzed the current epidemiological situation as well as that of their control programs, arriving at the following conclusions and recommendations:

1. Obtain a commitment from the countries to contribute their validated information to PAHO, in order to complete and publish, before the end of this year, the regional study containing quantitative estimates on Chagas disease per country, Subregion and for the Region of the Americas, which is vital for the economic and strategic management needed to control this endemic disease.

2. Renew interest in developing a semiannual electronic bulletin system for the Initiative of the Andean Countries (IPA), to be coordinated by the PAHO Technical Secretariat. This will be done together with the countries and the Healthy World Foundation (Fundación Mundo Sano) in Argentina, the latter having ample experience in this type of publication. In terms of methodology, the Technical Secretariat will submit a preliminary draft to the countries for consideration this November, in order to obtain their feedback and approval. All subsequent semiannual issues will be based on information provided by the countries.

3. Promote interest in developing a semiannual electronic bulletin for the Amazon Initiative (AMCHA), to be coordinated by the PAHO Technical Secretariat working together with the countries and the Healthy World Foundation (Fundación Mundo Sano) in Argentina, the latter having ample experience in this type of publication. In terms of methodology, the Technical Secretariat will submit a preliminary draft to the countries for consideration this November, in order to obtain their feedback and approval. All subsequent semiannual issues will be based on information provided by the countries.

4. Adopt the surveillance model developed by Brazil for Chagas in the Amazon Subregion as a generic orientation for AMCHA Member Countries, with understanding and recognition of the peculiarities of each case.

5. Write, edit, and publish an AMCHA guide for Surveillance and Prevention of Chagas Disease in the Amazon Region, to serve as a reference for the developments proposed by the countries in this area. An expert editor will be put in charge of this task, with coordination by the AMCHA Technical Secretariat. The latter will submit a preliminary draft to the countries for consideration prior to the Initiative’s 2007 meeting.
6. **For the Andean countries**: Set, within the IPA framework, immediate priorities to take action vis-à-vis the following objectives:

- **Colombia**
  - Include in general patient-care guides, as well as in protocols for epidemiological surveillance, components for entomological surveillance and vector control of Chagas disease, in addition to arranging for their inclusion into the Sectoral Health Plan 2006–2010 and into the respective regulations in the Basic Care Plan.
  - Start the integral development of Chagas surveillance (epidemiological, serological, and entomological).
  - Strengthen the education and certification process for operational human resources (VBD technicians and microscopists) for entomological surveillance, vector control, and diagnosis.

- **Ecuador**
  - Eliminate *T. dimidiata*.
  - Develop prevention and surveillance activities in the Amazon region.
  - Optimize screening quality and coverage in blood banks.

- **Peru**
  - Interrupt transmission by *T. infestans*.
  - Implement surveillance and prevention activities in the northern Amazon region.
  - Optimize and assure screening quality and coverage in blood banks.

- **Venezuela**
  - Eliminate residual *R. prolixus* infestation.
  - Develop health surveillance with community components.
  - Develop adequate medical care for Chagas patients.
  - Conduct a study on congenital transmission.

7. **Act on the need to develop a guide for the diagnosis, management, and treatment of Chagas cases in the Amazon Subregion, with a view to becoming familiar and dealing with the its clinical and epidemiological peculiarities, along with those related to treatment—where patient management is both the essence of and basis for Chagas surveillance and prevention.** The Department of Tropical Medicine at the Oswaldo Cruz Institute of the Oswaldo Cruz Foundation (Departamento de Enfermidades e Medicina Tropical, Instituto Oswaldo Cruz, Fundação Oswaldo Cruz / DEMET/FIOCRUZ) in Brazil will be in charge of performing this task, with support from PAHO.

8. **Take steps to effect a multinational activity to standardize and validate laboratory procedures for the diagnosis of Chagas disease in the Amazon Subregion, with a view to the observations and facts, confirmed and validated alike, among patients from the Subregion:**
   - As a first step, implement a theoretical and practical workshop on diagnostic techniques tailored to the Amazon Subregion
   - To this end, collaborate with the National Reference Laboratories in the AMCHA Member Countries (in the case of Guyana and Suriname, the laboratory at the Caribbean Epidemiology Center / CAREC) and national research centers with recognized experience in diagnosis of Chagas disease.
   - Organize the event, with the Department of Tropical Medicine at the Oswaldo Cruz Institute of the Oswaldo Cruz Foundation (Departamento de Enfermidades e Medicina Tropical, Instituto Oswaldo Cruz, Fundação Oswaldo Cruz / DEMET/FIOCRUZ) in charge of this, in collaboration with PAHO (and in consultation with the Secretariat of Health Surveillance in the Brazilian Ministry of Health), and the Center for Research in Tropical Parasitology and Microbiology (Centro de Investigaciones en Microbiología y Parasitología Tropical / CIMPAT) at the University of the Andes (Universidad de los Andes / UNIANDES) in Colombia.

9. **For IPA and AMCHA Member Countries**: Apply for support from the International Development Research Center/IDRC in Canada for the development of geographic information technologies for monitoring and control, as well as virtual distance learning for Chagas control and care, offering a course to strengthen national capacity.

10. **For IPA and AMCHA Member Countries**: Given that fact that PAHO/WHO has made available its Strategic Fund (also known as the Regional Revolving Fund for Strategic Public-Health Supplies) for the procurement of
drugs and supplies of guaranteed quality and at better prices, make a proposal to their respective health authorities—if applicable under the present national legislation and administrative procedures—to make the necessary arrangements for utilizing this mechanism, given the difficulties concerning regular and effective access to etiological treatment for Chagas disease.

11. Gain precise knowledge of how to quantify treatment needs, including estimating the number of adult versus pediatric and acute versus chronic cases, so that an industrial drug-production plan can be jointly developed with the other sectors involved—pharmaceutical, public, or private; this should include purchasing raw materials and making the proper adjustments in industrial scale, which exert a direct impact on the cost and availability of the corresponding drugs.

12. Ensure quality, efficacy, and safety parameters for drug production under the Good Manufacturing Practices (GMP). These parameters can be analyzed and ensured with PAHO and/or WHO prequalification projects; compliance with them is a fundamental requirement for using the PAHO Strategic Fund for drug purchase and distribution.

13. Register the drugs used for etiological treatment of Chagas disease in all endemic countries, involving in this process the National Chagas Control Programs and obtaining technical support from PAHO and its Strategic Fund, as well as from the Drugs for Neglected Diseases Initiative (DNDI).

14. Recommend decentralized replication of the human-resource training in Chagas disease currently being carried out in Brazil, Ecuador, and Venezuela, as a modality in interests of achieving a critical mass of health-care personnel to provide medical attention to people infected by and sick from Chagas.

15. Promote coordination of Chagas surveillance in French Guiana, Guyana, and Suriname with clinical focal points at the highest level of the public-health sector, with implementation support from PAHO/WHO and France.

16. For IPA, the Andean Subregional Initiative for Control of Chagas Disease: Bring about and initiate a strategy of external international situation evaluation through PAHO technical cooperation with support from the Spanish International Cooperation Agency (AECI / Agencia Española de Cooperación Internacional) and/or the Canadian International Development Agency (CIDA), in the following countries:

- **Peru:** PAHO/CIDA, 23–27 October 2006.
- **Venezuela:** PAHO/AECI, 6–10 November 2006.
- **Ecuador:** PAHO/AECI, 20–24 November 2006.

The purpose of these external processes is to strengthen the capacity of the national programs in those activities that have shown weakness in the area(s) of Chagas disease surveillance and control.

17. Validate the document PAHO/MSF Technical Consultation on Organization and Structure of Medical Care for Patients Infected by T. cruzi-Chagas Disease (Document OPS/DPC/CD/335-05 from Montevideo.), with a proposal to work in:

- Medical staff training in care for Chagas disease.
- Training health workers in care for Chagas disease.
- Developing diagnostics and care for congenital Chagas disease.
- Strengthening primary care for Chagas disease, with the proper referrals and cross-referrals at other levels of complexity.

18. Validate both the report Technical Consultation on Chagas as a Foodborne Disease (FBD) from the meeting held at the Pan American Center for Foot-and-Mouth Disease (PANAFTOSA) in Rio de Janeiro, Brazil, from 4 to 5 May 2006 and its prevention, management, and control guide for food-poisoning outbreaks from T. cruzi, which are frequent in the Amazon Subregion.

19. Make arrangements with the Department of Tropical Medicine at the Oswaldo Cruz Institute of the Oswaldo Cruz Foundation (Departamento de Enfermidades e Medicina Tropical, Instituto Oswaldo Cruz, Fundação Oswaldo Cruz / DEMET/FIOCRUZ) in Brazil to authorize translation into Spanish of the training course in Chagas diagnostics and its autochthonous transmission that has been formulated for the Amazon region, and arrange for its the widespread use and dissemination with a view to training human resources from the countries of the Subregion in Chagas control and care.
20. Prepare an exhaustive list of technical and scientific institutions in the Amazon Subregion, by country and from various disciplines and specialties, which can contribute to developing and carrying out activities as well as to meeting the objectives proposed by AMCHA. The AMCHA Technical Secretariat will coordinate this inventory and will make it available to the countries by 31 March 2007.

21. In response to the increasing number of detected Chagas cases in non-endemic areas outside the continent, propose the creation of a registry of focal points who can serve as contact persons and who are experts in the diagnosis, management, and clinical treatment of Chagas cases, and who can be consulted via e-mail.

22. For the countries: Organize entomological triatomine collections by geographical area, which can serve as reference material for the countries as they progress to more advanced phases of surveillance and control.

23. Congratulate Ecuador for the significant progress made in Chagas surveillance and control within a brief period of time, thus complying with IPA and AMCHA recommendations.

24. Together with PAHO and within the framework of the Amazon Initiative AMCHA, organize a preliminary consultation with the objective of conducting the first epidemiological analysis to be done on the potential presence and transmission of Chagas in Guyana, as well as laying out next steps for future activities in the area of permanent surveillance and control of and care for this parasitosis.

25. Salute and congratulate Brazil for having attained certification for the interruption of vector-borne transmission of *Trypanosoma cruzi* from *Triatoma infestans*, which occurred this past June on the occasion of the XVth Meeting of the Southern Cone Initiative to Control/Eliminate Chagas Disease (*INCOSUR*).

26. For Ecuador and PAHO: Prioritize the Ecuador-Peru project for Technical Cooperation among Countries (TCC) to strengthen surveillance, prevention, and control of Chagas' disease in border areas, which has been designed and has obtained technical endorsement from the health authorities in both countries; it would be desirable for formal processing and approval be given priority both by the national authorities in Ecuador and by PAHO/WHO at its Country Offices and at Headquarters in Washington.

27. Recognize the value nature and importance of interrelationships and coordination among health authorities and research institutions and centers in the countries regarding Chagas disease. Consider as fundamentally important the contribution made by research institutions through such interaction in terms of valuable and timely information for Chagas control that can then provide support to national programs and strengthen the research processes being developed in each country.

28. Recognize the importance of arranging a TCC project between Guyana and Venezuela to investigate the status of possible transmission of *T. cruzi* in their shared border area.

29. Recognize the importance of arranging for a TCC project between Colombia and Venezuela to address surveillance, prevention, and control of Chagas' disease in the plains region of both countries.

30. Organize the next joint meeting of both Initiatives to take place in Lima, Peru, during second semester 2007.

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**Country Representatives**

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<th>Country</th>
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**PAHO/WHO Technical Secretariat**

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