



Photo: Ministry of Health, Maldives

A Nation UNBURDENED

Elimination of Lymphatic Filariasis in Maldives

In 2016, Maldives was validated by the World Health Organization as one of only two of the nine endemic countries in the South East Asia Region to have successfully eliminated lymphatic filariasis. This achievement was the result of the WHO and Ministry of Health collaboration that began in 1951, the political commitment of the Government of Maldives, intensified efforts of the National Filaria Control Programme that began in 1968, and the unflagging determination of frontline health workers.

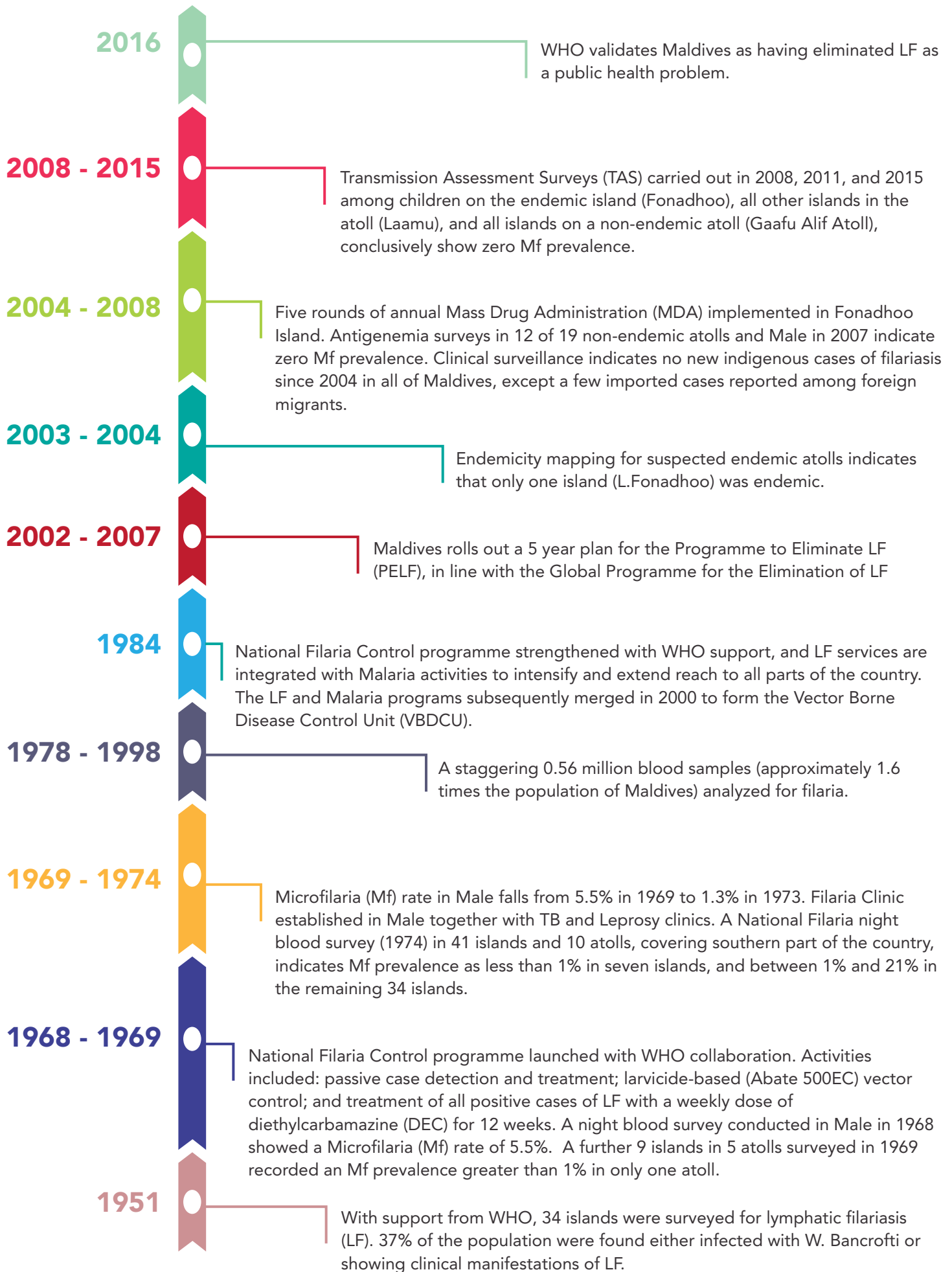
Maldives is testament to the effectiveness of the strategies recommended under the Global Programme to Eliminate Lymphatic Filariasis (GPELF). The achievements were possible due to sustained commitment to case finding, monitoring the implementation, coverage, and effectiveness of Mass Drug Administration (MDA), integrated vector control, morbidity management, and preventive chemotherapy.

The children of Maldives can now look forward to a future free from this debilitating and stigmatizing Neglected Tropical Disease.

The Game Changers

- Unswerving political commitment and allocation of dedicated financial resources for case detection and treatment since 1968.
- Intensified case detection, treatment, and vector control activities since 1984 had reduced the number of endemic islands in Maldives to just one by the start of MDA in 2004.
- Continued antigenemia surveillance on all islands in Maldives and among foreign migrants since 2007 to monitor and detect any LF transmission.
- Systematic elimination of breeding habitats of the vector, *Culex quinquefasciatus*.

THE PATHWAY TO ELIMINATION



Key Challenges for Eliminating LF in the Maldives

- Case finding and management activities were enormously hampered in the initial years by the lack of health facilities and staffing across the islands.
- Lack of systematic mapping of endemic areas and the location of patients was a barrier to service outreach, treatment completion, and ensuring access to MMDP services to all chronic LF patients across Maldives.
- Multiple vector breeding sites due to poor environmental sanitation, and socio-cultural and livelihood practices.
- Continuous risk of migrants and visitors bringing in the disease from neighboring countries that were endemic for LF.

The Gameplan for Success

The Political: Sustained leadership and commitment from the Ministry of Health and its Health Protection Agency, and support from partners such as WHO GPELF, the Maldives Red Crescent Society, and a network of health centers and health workers across the islands drove the game-changing agenda, including: the launch of the National Filaria Control Programme in 1968; the intensification of integrated Malaria and LF activities 1984 onward; the launch of the Programme for Elimination of LF in 2002; ensuring the availability of Morbidity Management and Disability Prevention (MMDP) services in all the regions of the country; and making LF a notifiable disease under 2012 Public Health Protection Act.

The Technical: A cadre of highly trained frontline health workers linked to the WHO-supported LF surveillance system was instrumental in catalyzing case-finding and treatment services across the whole country. Through a 1996 regulation, all recruits for national security and sailors, and students visiting from abroad were required to do blood screening for Mf. Endemic areas were systematically mapped out for the implementation of five annual rounds of MDA from 2004 – 2008. Aggressive and on-going vector control, and continuous post-MDA surveillance since 2011 in domestic and foreign migrant populations were implemented to validate the elimination of LF. MMDP was fully integrated into the free health services offered in Maldives.

The Social: Following the very first LF survey in 1951, a strong recommendation was made to abandon the practice of segregation, isolation, and relegation of people living with LF to camps in uninhabited islands. This set the stage for mitigating stigma and mobilizing communities to fight LF, through the Island Chiefs and cadres of dedicated frontline health workers. Social mobilization and door-to-door awareness campaigns resulted in wide-scale and active public participation in vector control measures and increased compliance with the MDA campaigns, which ultimately resulted in the elimination of LF in Maldives.

The Financial: The entire LF elimination programme in Maldives was financially supported by the Government through domestic resources, ensuring that there were no constraints to systematically conducting the LF elimination programme since 2002.

Sustaining the Elimination

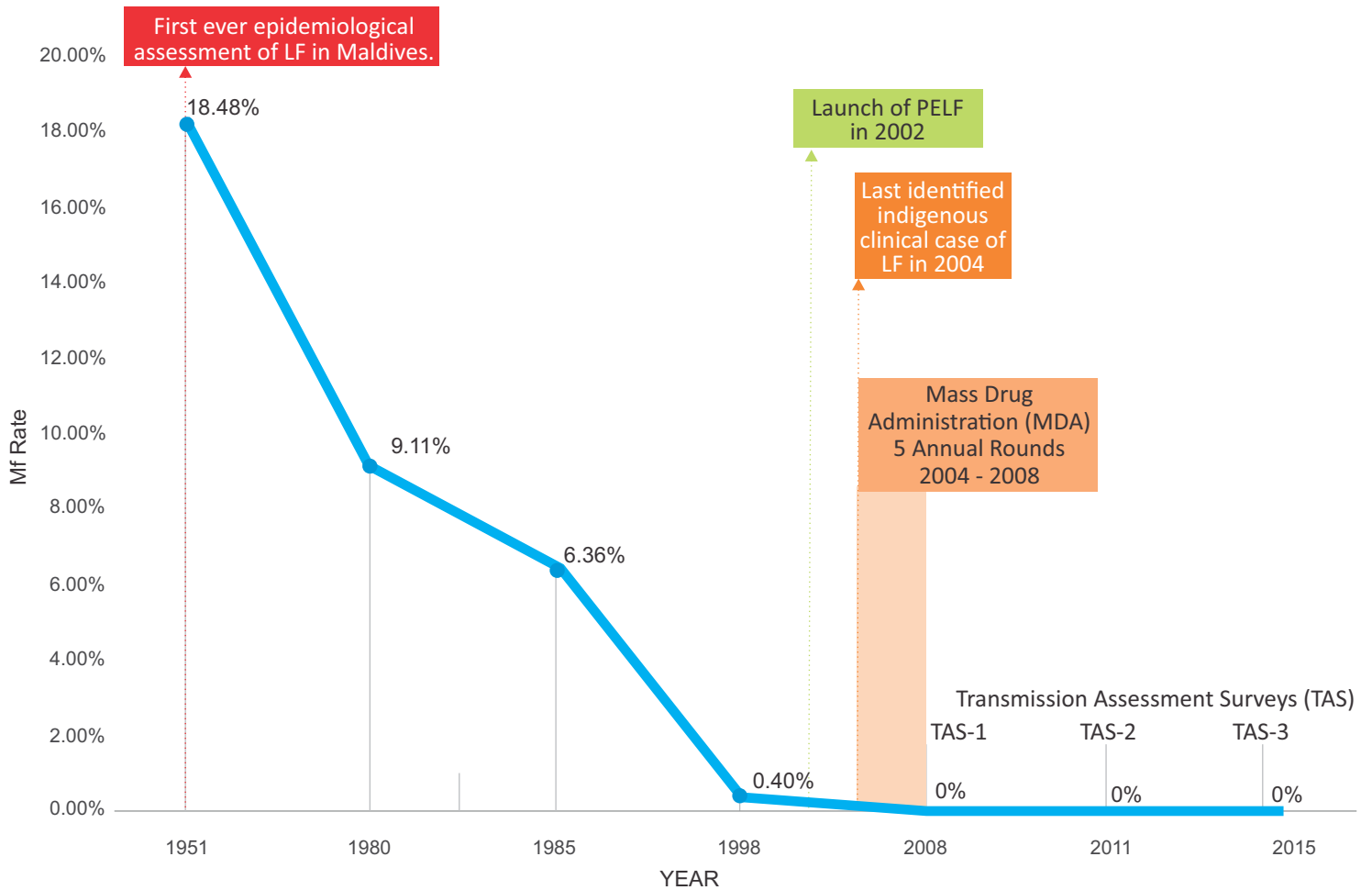
Maldives plans to continue post validation surveillance to ensure that no new instances of the disease emerge: 5 atolls have been scheduled for post validation surveillance in 2016.

Migrants to the country continue to be screened for LF, an important strategy to prevent reintroduction of transmission. Regular entomological monitoring, including reduction of mosquito breeding sites, will require the constant involvement of health workers and strong community participation. Initiatives to promote personal protection from mosquito bites to prevent

multiple diseases, including LF, must be sustained well into the foreseeable future.

All regional hospitals have facilities for hydrocele surgeries, and all 34 Health Centres and 21 hospitals (Level 1, 2 and 3) are accessible for morbidity management. An action plan has also been prepared to assess the quality of care for lymphedema, acute dermatolymphangioadenitis (ADLA), and hydrocele surgery. These will ensure that post validation, chronic LF patients will continue to receive high quality care in the Maldives.

Mf rate among vulnerable populations as per surveys on various islands across Maldives.



By eliminating Lymphatic Filariasis, we have gifted our people a future free from a debilitating and deeply stigmatizing disease. It is testimony to what can be achieved when science and society fully embrace each other. This staggering achievement is a result of the unrelenting persistence of hundreds of frontline workers, the steadfast technical support of WHO, and our own unswerving commitment to the people of Maldives.

– HE Abdulla Nazim Ibrahim,
Health Minister, Maldives

The elimination of Lymphatic Filariasis in Maldives is a celebration of the human spirit and endeavor that has spanned over five decades. This inspiring achievement has sparked, and will drive, a determined Region-wide effort to eliminate all Neglected Tropical Diseases in South East Asia.

– Dr. Poonam Khetrapal Singh,
Regional Director, WHO-SEARO