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Neglected Tropical Disease Management: Problems and Prospects

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Neglected tropical diseases represent one of the most serious burdens to public health. Many of these diseases can be treated cost-effectively, but most of them could not attract the attention of policy makers associated with global health policy formulations. The 13 parasitic and bacterial infections known as the neglected tropical diseases include three soil-transmitted helminth infections (ascariasis, hookworm infection, and trichuriasis), lymphatic filariasis, onchocerciasis, dracunculiasis, schistosomiasis, Chagas' disease, human African trypanosomiasis, leishmaniasis, Buruli ulcer, leprosy, and trachoma. An expanded list could include dengue fever, Japanese Encephalitis, Chikungunya, treponematoses, leptospirosis, strongyloidiasis, foodborne trematodiasis, neurocysticercosis, and scabies, as well as other tropical infections. Polyparasitism has become very common rather than the exception in many under developed and developing countries. It has been reported that a large number of individuals harbor three or more parasites in remote areas of Sub-Saharan Africa, due to lack of adequate facilities of health and hygiene. Co-infection with malaria and HIV has recently been reported as a source of increased severity of both of these diseases in sub-Saharan Africa. Scientific literature focused on co-infection with diverse combinations of helminths, HIV, malaria, and tuberculosis is growing tremendously. Neglected tropical diseases have been ignored for a long time due to the negligence of health policymakers at national, regional, and global levels. During the past few years, several research and development agencies have shown their interest and started supporting the programs related to control of neglected tropical diseases. There is a need of concerted effort to face the challenges associated with diversity of disease control approaches and health policy structures-both nationally and internationally in controlling neglected tropical diseases.