First International Podoconiosis Conference 23 September 2018

Addis Ababa Ethiopia



Acknowledgements

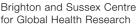
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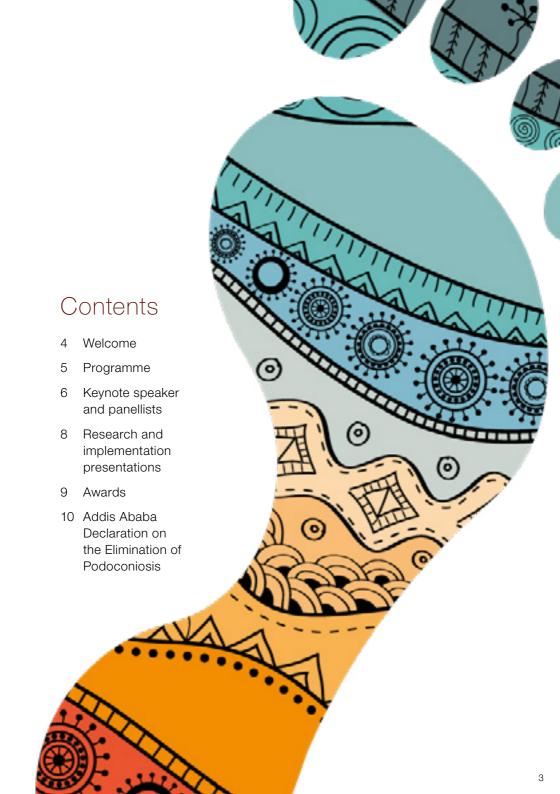








Many thanks also to our Scientific Review Committee: Dr Desalegn Admassu, Dr Paul Matts, Dr Kebede Deribe, Dr Asrat Hailu, Haregwoin M Desta and Tonya Huston



Welcome

Dear friends and colleagues

It is a great pleasure and an honour to welcome you to this conference, the first international conference to focus on ending podoconiosis. This is a truly exciting time to be working on podoconiosis, with significant steps taken in recognition of the condition by endemic countries, many of which are represented here. As the country bearing the highest burden of podoconiosis globally as well as the one with the most advanced research, implementation and government commitment, Ethiopia is the ideal setting for this conference.

Our theme 'Research to implementation: A call for global action' will be reflected both in the programme and by the spread of participants. We are delighted to welcome patient representatives together with implementers, researchers, policy makers and spokespeople. Only through strong partnerships across these groupings will the ambitious commitments articulated in the Addis Ababa Declaration on the Elimination of Podoconiosis (please see page 10) be realised.

We wish you a highly enjoyable conference, and one that stays in the memory as a key step towards a world free of podoconiosis.

Mossie Tamiru
Birhan Mengistu
Mesfin Sileshi
Dr Kebede Deribe
Dr Asrat Mengiste
Haregwoin M Desta
Tsige Amberbir
Dereje Assefa
Dr Abraham Tesfaye
Clare Callow
Prof Gail Davey



Programme

08:30-09:00	Registration		
09:00-09.30	Formal welcome		
09:30-10:00	Keynote address: Dr Akpaka Kalu , WHO Representative in Ethiopia		
10:00-10:30	Coffee break / poster presentations and exhibition by partners		
10:30-11:30	Research presentations – Session 1 Chair: Dr Taye Tolera, Armauer Hansen Research Institute		
11:30-12:40	Implementation presentations Chair: Dr Louise Kelly-Hope, Liverpool School of Tropical Medicine		
12:40-12:45	Film introduction: 'Mossy Foot' by Dr Benjamin Jelle Visser, Center for Tropical Medicine & Travel Medicine, Amsterdam		
12:45-13:45	Lunch, group photo and film viewing		
13:45-15:00	Research presentations – Session 2 Chair: Dr Taye Tolera, Armauer Hansen Research Institute		
15:00-15:30	Coffee break / poster presentations and exhibition by partners		
15:30-16:30	A Call for Global Action, panel discussion with:		
	Dr Asrat Mengiste Former Director, National Podoconiosis Action Network, Ethiopia Dr Daniel	Dr Edridah Muheki Tukahebwa Ministry of Health, Uganda Dr Kebede Deribe Global Atlas of Podoconiosis	Professor Samuel Wanji Research Foundation in Tropical Diseases and Environment, Cameroon
	Argaw Dagne WHO Department of Control of Neglected Tropical Diseases		Chair: Nunu Wako , journalist, film-maker and health advocate
16:30-17:30	Award ceremony and launch of the Addis Ababa Declaration on the Elimination of Podoconiosis		
17:30-18:00	Break		
18:00-20:00	Joint Reception with NNN With special guests Haile Gebreselassie and Nunu Wako		

Keynote speaker and panellists

Keynote speaker



Dr Akpaka Kalu is the WHO Representative in Ethiopia. Before his assumption of duty in Addis Ababa, he served in the WHO

Regional Office for Africa in Harare, Zimbabwe and in Brazzaville, Congo; in WHO inter-country support teams in Harare, Zimbabwe and in Libreville, Gabon; as well as in the WHO country offices in Kenya and Sierra Leone. Over the years Dr Kalu's professional interest has been in disease control, programme performance management and health entrepreneurship.

Panellists



Dr Asrat Mengiste is an Ethiopian national who specialises in general surgery with Amref Health Africa. He has completed numerous specialised

reconstructive surgery courses around the world, including in the UK, India, Norway and South Africa. Dr Asrat Mengiste worked as an Executive Director for the National Podoconiosis Action Network in Ethiopia, bringing those working on podoconiosis together for greater visibility and awareness across the country.



Dr Daniel Argaw Dagne currently coordinates the Innovative and Intensified Disease Management Unit at the WHO Department for Control of Neglected

Tropical Diseases in Geneva. He came to this post from a background in cutaneous leishmaniasis, and has led an integrated approach to improve detection and treatment of common skin NTDs.





Panellists



Dr Eridah Muheki Tukahebwa is the Assistant Commissioner Health Services (Vector Control Division), Ministry of Health, Uganda. She

has over seven years' experience of coordinating an integrated program for NTDs that is supported by more than five partners. She is a member of the global Trachoma Expert Advisory Committee and the Schistosomiasis Control Initiative. She has participated in a number of NTD-related research studies, including on podoconiosis, from which she has (co)authored more than 40 peer-reviewed manuscripts.



Dr Kebede Deribe is a Research Fellow at Brighton and Sussex Medical School, UK, a Wellcome Trust Fellow and has an honorary assistant

professorship at Addis Ababa University School of Public Health. Dr Deribe has contributed to book chapters and over 120 publications. He has received several awards including the Scientific Medal of Young Researcher of the Year of the Ethiopian Public Health Association (2011), Young Researcher of the Year of the Health Officers Association of Ethiopia (2016) and Emerging Leaders Award, Royal Society of Hygiene & Tropical Medicine, UK (2016).



NuNu Wako is an internationally recognised broadcast journalist, independent filmmaker, spokesperson, and health advocate. With a

background in international relations, communications and broadcast journalism, she built her broadcasting career discussing a range of topics which link the global community. One of NuNu Wako's main goals is to advocate for ending podoconiosis in our lifetime, and her philanthropic efforts have helped bring awareness to this disease.



Professor Samuel Wanji is a parasitologist and entomologist. He studied at the University of Montpellier, France, and was awarded his

PhD in 1992. His post-doctoral training was undertaken in Paris and Nigeria before he returned to Cameroon, where he has been based at the University of Buea since 1995. Prof Wanji's research focuses on neglected tropical parasitic diseases and his work contributed to the rapid diagnosis and control of loa-loa and onchocerciasis. Prof Wanji's work in NTDs led to his interest in podoconiosis and he has described the epidemiology of the disease in Cameroon.



Research and implementation presentations

Research presentations Session 1

John Gahochi • A journey of a thousand miles begins with a single step: The first steps in podoconiosis research in Kenya

Christine Kihembo • Risk factors for podoconiosis in Kamwenge, western Uganda

Samuel Wanji • Study of podoconiosis in the northwest region of Cameroon: spatial distribution, profiling of cases and socio-economic aspects

Kebede Deribe • Mapping and estimating the burden of podoconiosis in Cameroon, Ethiopia and Rwanda: A geostatistical analysis

Tewodros Gebresilase • Replication of HLA class II association with podoconiosis in diverse Ethiopian ethnic groups

Maureen Ayok Tembei • A comparative analysis of social dimensions and economic costs of podoconiosis and leprosy on affected households in the northwest region of Cameroon

Research presentations Session 2

Meseret Molla Kassahun • Lymphoedema management to prevent acute dermatolymphangioadenitis in podoconiosis in northern Ethiopia (GoLBeT): a pragmatic randomised controlled trial

Jill Brooks • A randomised controlled trial to evaluate the effect of a new skin care regimen on skin barrier function in those with podoconiosis in Ethiopia

Girmay Kiros • 'I should not feed such a weak woman': Intimate partner violence among women with podoconiosis: Exploratory qualitative study in northern Ethiopia

Abebayehu Tora • Footwear use behaviour of rural children in southern Ethiopia: Implications for primary prevention of podoconiosis

Abebe Kelemework • 'Why should I worry, since I have healthy feet?' Exploring barriers to use of footwear among rural community members in northern Ethiopia

Implementation presentations

Paul Matts • Lessons from the field in the treatment of podoconiosis

Jean-Bosco Mbonigaba •

Podoconiosis: from unknown disease to priority NTD; the response of the health system in Rwanda

Asrat Mengiste • Significant impact of an integrated podoconiosis and lymphatic filariasis morbidity management and disability prevention programme in Ethiopia

Awards

The Henok Negussie Researchers' Award



Henok Negussie was born in Harar, eastern Ethiopiain 1970. He gained a diploma and then a BSc in nursing at Addis Ababa University

and Jimma University, respectively. Following periods of service in Dire Dawa and Addis Ababa, Henok joined Dilla University. He gained a Masters in Public Health from Addis Continental School of Public Health. He was the father of a son and a daughter. From 2013 until his death, Henok was employed as trial coordinator on the MRC/DfID/Wellcome funded 'GoLBeT' trial. In 2014 he was awarded a Sussex Chancellor's International Research Scholarship. His PhD, registered at Brighton and Sussex Medical School, was awarded posthumously in July 2018. While part of the GoLBeT team, Henok published four articles including the main outcome paper in The Lancet Global Health.

The Henok Negussie Researchers' Award, sponsored by the Footwork-Global Health Trials Network, recognises a researcher whose work will bring close the vision of ending podoconiosis in our lifetime.

The Meskele Ashine Implementers' Award



Meskele Ashine was born in southern Ethiopia in 1951. After posts in manpower management in the Ministry of Defence and the Ministry of Internal

Affairs, Meskele moved to the nongovernment sector and the Concern Ethiopia Wolaita programme. In 1998, he became Project Director of the Mossy Foot Prevention & Treatment Association (now Mossy Foot International).

The Meskele Ashine Implementers' Award honours the unique combination of leadership skills and spirit of public service Meskele brought to podoconiosis programmes. He understood that the key to treating podoconiosis lay within affected communities, and inspired patients, care-givers, academics and policy makers towards patient-led treatment and prevention.



Addis Ababa Declaration on the Flimination of Podoconiosis

As partners gathered at the First International Podoconiosis Conference on 23 September 2018 in Addis Ababa, the undersigned endemic country governments, donors, academics and implementers recognise that:

- People with podoconiosis (endemic non-filarial elephantiasis) have long been neglected and have lacked the means to prevent and treat the condition.
- Podoconiosis has profound social, psychological and economic impacts on individuals, families, communities and nations.
- 1.5 million people are affected within Ethiopia alone, and 4 million people are estimated to be affected worldwide.
- There is a critical shortage of health care workers trained in the management of people
 affected by podoconiosis, such that less than 10% of affected people have access to care.

We acknowledge that podoconiosis:

- Is preventable with simple measures that protect the feet from prolonged contact with irritant soil particles; namely, regular use of shoes, foot hygiene, floor covering and road surfacing.
- Can be treated and its consequences mitigated through foot hygiene, skin care, bandaging, exercises, antibiotics for acute attacks, and use of socks and shoes.
- In common with several other co-endemic neglected tropical infections such as trachoma, can be combatted through improved access to clean safe water, facilitating foot hygiene and skin care.

We emphasize that elimination of podoconiosis is critical to the social and economic development of endemic countries, and appreciate that prevention and treatment of podoconiosis will only come about through strengthening of health care systems and services. With these considerations in mind, and inspired by the progress of other Neglected Tropical Disease partnerships, together we commit to initiate, expand and extend interventions to eliminate podoconiosis within our lifetime, through:

- Working with partners and stakeholders to ensure the allocation of necessary resources from private and public sectors and from non-governmental organizations.
- Raising community and public awareness of the causes, impact and treatment of podoconiosis.
- Working within the framework of the UN Sustainable Development Goals, and with approaches that support Universal Health Coverage.
- Providing technical support and tools to support endemic countries in podoconiosis mapping, programme initiation, health professional training, monitoring and evaluation.
- Regular communication of progress towards elimination targets, to partners and stakeholders.

Podoconiosis (podo) impacts millions of lives in more than

15 countries

in Africa, Central America and Asia

Podo affects **1.6 million** people in Ethiopia alone, costing the country more than

\$200 million

per year in lost productivity

Yet podo is entirely treatable and preventable — and with the right interventions, we can end podo in our lifetime.







Our vision is a world free of podoconiosis in our lifetimes.

Our mission is to bring together public and private partners to support prevention and treatment of, and advocacy for, podoconiosis.

www.podo.org

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