

UNITED NATIONS
ECONOMIC
AND
SOCIAL COUNCIL



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UNITED NATIONS CHILDREN'S FUND
Programme Committee

Recommendation of the Executive Director for an Apportionment
TUNISIA
Control of Trachoma and Associated Eye Diseases

1. The Administration recommends an apportionment to Tunisia of \$24,000 to provide anti-biotic ointment and vehicle spare parts to expand and continue through 1956 the trachoma and seasonal conjunctivitis control campaign in southern Tunisia for which the Board has previously approved apportionments totalling \$101,000 (exclusive of freight). The additional aid would permit expansion of the campaign into a new area, Gafsa. In addition to continuing treatment in seven southern districts already covered, in which 350,000 persons received treatment in 1954/55, the 1956 operation would provide treatment for another 150,000 persons, bringing the total protected to one-half million or one seventh of the population of Tunisia. The extension of the campaign into Gafsa would be the first step in extending the scheme to the north and ultimately to all of Tunisia. An estimated 12,000 trachomatous children will be given intensive treatment in schools in addition to 16,500 treated during the 1954-1955 school campaign.

2. The plan proposed for 1956 includes:

- a) extension of the mass anti-conjunctivitis campaign to an additional 150,000 persons in the Gafsa district and continuation of community-wide treatment along the lines of the 1954-55 action described below (paras. 5-6);
- b) continuation of the school campaign for intensive treatment of trachoma in the four sectors covered by the 1954-55 action and extension to the schools of Gafsa district. An estimated 12,000 additional children will receive treatment in 1956 (paras. 7-8 below).

/c) Development of.....

- c) development of self-treatment against conjunctivitis in the seven districts treated during the 1954-55 mass campaign, using demonstration and free distribution of ointment (para 14 below).
- d) The beginning of thorough technical assessment of the results of the campaign (para. 15);
- e) provision for exceptional measures to meet epidemic waves of acute conjunctivitis which may occur suddenly in localized areas.

3. Government matching for the 1956 operation would be equivalent to \$70,000 primarily for personnel. WHO has budgeted (under Technical Assistance Priority I) to provide the services of technical personnel and fellowships.

Progress of the Campaign 1954-55

4. The plan of operations previously approved for this programme, as outlined to the Board in March 1952 (E/ICEF/R.312) provided for a pilot campaign in the island of Djerba and a two-year mass campaign in the highly infected areas of southern Tunisia with special attention to school and pre-school children. The campaign includes mass treatment of assembled populations during the summer months against seasonal epidemics of conjunctivitis, and diagnosis and intensive treatment of trachoma among school children. Commencement of the campaign was delayed until the beginning of 1954 due primarily to local budgetary difficulties. During 1954 and 1955 the entire population of 350,000 persons in the highly infected areas chosen for campaign action will have been treated against conjunctivitis. To the present time 16,500 pupils have received intensive treatment for trachoma. Responsibility for both the mass and the intensive treatment campaigns rests with field headquarters which are located at Gabes under the technical and administrative direction of the WHO Ophthalmologist and Bacteriologist. The main lines of the campaign are described below:

5. The Mass Campaign Against Conjunctivitis: The peaks of seasonal epidemics occur in June/July and in September/November. Before the first cycle special teams are trained for twelve days at the headquarters at Gabes. In the 1954/55 operation, thirty of these teams (each consisting of a qualified nurse and a local aid) have administered treatment for three consecutive days to every person in a community. Each team handles 800 to 1,000 persons at a time and

/ then moves on.....

then moves on to treat another group.

6. In the first epidemic cycle of 1954 173,000 persons were treated in seven southern districts, including 74,000 children and 8,500 pregnant or nursing women. These same districts have been covered in the second cycle of 1954 and the first cycle of 1955 and it is expected that the entire population of 350,000 will have been treated by the end of this year. Additional transport provided by UNICEF in 1955 is now making it possible to cover greater distances in less time and thus to treat many tribes which could not otherwise be reached within the time limits of the cycle.

7. Intensive Trachoma Treatment in Schools: The school campaign against trachoma has been carried out in four selected "ophthalmological sectors", - Tozeur, Medenine, Djerba and Gabes, - where there is a total of 20,200 children attending school. The staff for this part of the programme consists of four ophthalmologists, twenty male nurses, three laboratory technicians and sixteen auxiliaries including drivers.

8. From January to May 1954, 13,265 children were examined and 7,324 treated for a period of sixty to ninety days. To provide a control, 2,304 cases were left untreated to be treated in the next year. From November 1954 to June 1955, 16,000 children were treated, including new pupils, the untreated control cases, and relapses among the cases previously treated. Treatment of the first control group is still underway. Preliminary reports indicate favourable results, and it is believed that the results of the second series of treatments will be better than those of the first, due primarily to the greater thoroughness and greater experience of the personnel during the 1955 operation.

9. Educational Programme: In order to assemble urban, rural and nomadic people for treatment, it has been necessary to carry out an extensive educational programme. The "caids" (district leaders) and "sheiks" have acted as local interpreters to their peoples on the aims and methods of the campaign, and the population has also been attracted by mobile cinema shows, using primarily health education films conducted by a full-time propaganda team. Leaflets, soap, DDT, barley and other inducements have also been distributed to ensure that enough people would attend the assemblies and accept the treatment to afford protection to the community against the epidemic infection.

/10. Laboratory Facilities..

10. Laboratory Facilities: A base laboratory for the programme is under construction at Tunis and is to open next winter. During 1954/55 laboratory work for the campaign has been done in the Public Health Centre at Gabes under the technical direction of a WHO bacteriologist. The Pasteur Institute in Tunis was brought into direct relationship with the programme in 1955 and is collaborating in assessment of the results of the campaign.

Plan for 1956

11. As indicated in paragraph 2 above, the campaign is to continue in 1956 along the lines established for the 1954/55 action, expanding geographically to take in Gafsa district to the north of, and contiguous with the seven districts already covered.

12. The targets for 1956 action are as follows:

- a) self-treatment for the 350,000 persons treated in the first two years of the campaign (para. 14 below);
- b) mass treatment against conjunctivitis of 150,000 persons in Gafsa district;
- c) intensive treatment of 12,000 additional cases of trachoma in school children, including 8,000 in Gafsa district and 4,000 in the four sectors previously covered;
- d) special examinations and treatment in connexion with the technical assessment plan outlined below (para. 15).

13. With respect to mass treatment against conjunctivitis and intensive treatment of trachomatous school children, the plan of action is much the same as that employed during 1954/55 (see paras. 5-8 above). New aspects of the campaign, to be undertaken for the first time in 1956, are the scheme for self-treatment, and the technical assessment plan outlined below.

14. Self-Treatment: Following mass treatment by teams in the first year, self-treatment will be used in the same area in the second year. This formula will be applied for the first time in 1956 and will cover the seven districts treated in 1954-55. Self-treatment will be carried out in two phases as was the mass campaign: the first in June-August and the second in September-November. Teams will demonstrate the application of ointment. The population will, for the
/first phase receive.....

first phase, receive ointment free for self-application, and, for the second phase, they will buy their own ointment at a Government subsidized price in the local shops.

15. Technical Assessment: Until now it has not been feasible to undertake a thorough technical assessment of the results of the campaign. Except for certain random samplings taken from the mass campaign, and a small control action in the school campaign, there has been no serious attempt at overall assessment. A plan for technical control and analysis has now been added to the plan of operations for the campaign and is to be carried out as follows beginning in 1956:

- a) Fifty families in each of three isolated, homogeneous villages will be examined clinically and bacteriologically before the mass treatment and at repeated intervals afterwards;
- b) In six villages not treated during the mass campaign, 200 children will be examined clinically and bacteriologically during the six summer months; they will then be treated and a subsequent analysis made of the protection afforded them in an untreated "milieu".
- c) In a community of not less than 5000 persons a complete ophthalmological case record of all children from 0 to 6 years will be established. This record will form the basis for a later comparative study, and for a long-term assessment of the campaign's socio-economic effects. At any future time the condition of children born after the commencement of the mass treatment in 1956 can be compared with those born before.

16. In addition, the following measures will be undertaken by the Tunis Ophthalmological Centre and the Pasteur Institute:

- a) scientific research on the biology of the Koch-Weeks bacillus;
- b) study of the possibility of preparing a vaccine against the Weeks bacillus; (Four to five years are considered necessary for this study.)
- c) study of other bacterial or virulent agents;
- d) studies on trachoma.

UNICEF Commitments

17. UNICEF would provide for extension of the campaign in 1956:

a) Anti-biotic ointment	\$20,000
b) Spare parts for vehicles previously provided by UNICEF	1,000
c) Contingency	<u>1,000</u>
Total supplies and equipment	\$22,000
d) Freight	<u>2,000</u>
Total UNICEF Commitments	\$24,000

WHO Approval and Participation

18. This project has the technical approval of WHO. WHO will provide continued advisory services and has budgeted (under TA Priority I) for the following:

- 1 ophthalmologist for 12 months
- 1 bacteriologist for 3 months
- 3 fellowships for 2 months each

Government Commitments and Matching

19. The Government's commitments for the year 1956 would be similar to those for the previous period of the campaign, including:

	<u>Moroccan Francs</u>
a) <u>Personnel:</u>	
3 ophthalmologists plus 75 to 95 nurses and auxiliaries	20,000,000
b) <u>Maintenance of transport</u>	2,800,000
c) <u>Health education</u>	500,000
d) <u>Subsidy on 30,000 gr. tubes of ointment for auto-treatment</u>	300,000
e) <u>Miscellaneous medical, field, camping and laboratory supplies</u>	<u>400,000</u>
Total	24,000,000
	(Equivalent to \$70,000)

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20. In addition, the Government will bear costs relating to the Tunis Centre, the work in the Pasteur Institute and the functioning of other eye-diseases control work in 21 special dispensaries which are not shown in the above estimates.

Target Time Schedule

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| 21. | October 1955 | - delivery of ointment by UNICEF |
| | October/December 1955 | - diagnosis of school trachoma cases and follow up on previously treated cases |
| | January/June 1956 | - treatment of school trachoma cases |
| | March 1956 | - second delivery of ointment by UNICEF |
| | July/November 1956 | - mass and self-treatment campaign |