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## Background

The Leishmaniae are a group of vector borne diseases caused by various species of the parasitic protozoan *Leishmania* (Kinetoplastida: Trypanosomatidae) and transmitted by several species of phlebotomine sand flies (Diptera: Psychodidae).

According to the WHO, the public health impact of Leishmaniasis has been underestimated. Disease reporting is required in only 32 of the 88 affected countries and a considerable number of cases are not recorded. An estimated 2 million new cases (1.5 million cases of Cutaneous Leishmaniasis and 500,000 of Visceral Leishmaniasis) occur annually, with about 12 million people currently infected. In recent years, the endemic regions of the disease have been spreading and there has been a sharp increase in the number of cases. Leishmaniasis is a diseases of public health importance in many countries of Europe and Middle East. Regional networks established to increase regional cooperation, improve disease surveillance and detection of cross border alerts and response in South East Europe (Albania, Bosnia and Herzegovina, Bulgaria, Croatia, Kosovo\*, Macedonia, Moldova, Montenegro, Romania, Serbia, Israel), SECID and Middle East (Israel, Palestine and Jordan), MECIDS during preliminary informal discussions and meetings, have expressed their desire to work together on Leishmaniasis control in their regions. Cutaneous Leishmaniasis is present both in SECID and MECIDS countries whereas Visceral Leishmaniasis is detected in SECID countries and on small scale in the MECIDS countries. In both networks, the number of cases of Leishmaniasis is growing and under reporting of cases is common. Various changes have been identified in the pattern of the disease e.g new reservoirs in Palestine and north of Jordan and Leishmaniasis, previously considered a poverty-related disease, is now also hitting wealthy areas. There is a common understanding between the two networks that efforts should be deployed to improve the surveillance and control of Leishmaniasis following also the recommendation of experts from all over the world:

- To establish a network of experts on Leishmaniasis from various sectors
- To build a regional system for Leishmaniasis surveillance, knowledge sharing, multisector collaboration and international cooperation.

In order to respond to these recommendations and with the goal of strengthening the control of leishmaniasis, CORDS, MECIDS and SECID have combined to **establish the “One Health Virtual Group on Leishmaniasis” also called the “Leishmanix Group”**.

The objective of the virtual group is to provide a platform for Leishmaniasis experts from various disciplines and countries of the Mediterranean region to share knowledge, data and increase capacities and awareness on Leishmaniasis. The core activities of the Group will be facilitated by a dedicated website with both public and private areas, fora and sub-groups.

### **Scope of the meeting:**

To present a web based “One Health” Leishmaniasis , information and communication platform and discuss further collaborative initiatives with partners, donors and stakeholders.

### **Objectives of the meeting**

1. To increase the awareness of Leishmaniasis the second most important parasitic disease in the world after Malaria by using the communication and information platform.
2. To improve one health communication and cooperation within SECID and between MECID, SECID and APEIR.
3. Use the web based platform to improve one health surveillance and control of Leishmaniasis as a model to be applied to other priority diseases.
4. To promote and discuss future one health “cross-network” initiatives.
5. To develop and test evidence based strategies for the treatment and control of Leishmaniasis.

## MEETING AGENDA

### 29 – 30 October 2014

#### Day 1 – Wednesday, 29 October

- 9.00 Registration
- 9.20 Opening ceremony - *Ministry of Health, Albania, CORDS, SECID, MECIDS, APEIR.*
- 09.50 CORDS and the need for cross border collaboration - *Nigel Lightfoot, CORDS.*
- 10.05 Leishmaniasis, the process from the idea to the platform and further on.  
*- Silvia Bino/ Institute of Public Health, Albania.*
- 10.20 Leishmaniasis an important public health issue in Europe and Middle East - *Luigi Gradoni/ National Institute of Health, Italy.*
- 10.30 *Photo Group*
- 10.40 Coffee Break
- 11.00 Diagnostic challenges in Leishmaniasis. Treatment failure due to drug resistance – *Maria Antoniou/University of Crete, Greece.*
- 11.20 Sand fly surveillance in the Balkans and Turkey – *Yusuf Ozbek, Ege University, Izmir, Turkey.*
- 11.40 Leishmania surveillance and risk assessment – *Laor Orshan, Ministry of Health, Israel.*
- 12.20 Presentation of Virtual Communication Platform – *Doriana Delija, SECID .*
- 12.40 Virtual Communication Platform - a tool to share data, knowledge, and experience among experts worldwide and make it first one health portal for Leishmania – *James Crilly, SECID.*

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| <b>13.00</b> | <b>Lunch</b>  |
| 14.00        | The burden of Leishmaniasis and social impact of Leishmaniasis in pediatric age– <i>Dr. Gjeorgjina Kuli – Lito, Pediatric Hospital, Tirana University Hospital Centre.</i>  |
| 14.10        | The burden of Leishmaniasis and social impact of Leishmaniasis in Adults– <i>Dr. Najada Como, Infectious Disease Hospital, Tirana University Hospital Centre.</i>   |
| 14:20        | Dog control and the Municipality Stray Dogs Control Program – <i>Romeo Hanxhari, Municipality of Tirana</i>   |
| 14.30        | The role of media as the mean of effective behavioral change communication – <i>Mirza Softic /Alma Demiraj, Journalists</i>   |
| 14. 45       | Working Groups ( <i>coffee will be served on the tables</i> ) – <ol style="list-style-type: none"> <li>1. <i>How can Lx platform contribute to promote Leishmaniasis control and decrease the burden of disease. (Kujtim Mersini, Ziad Abdeen)</i></li> <li>2. <i>How Lx platform can be used to address the operational and research challenges of Leishmaniasis in Europe and Middle East. (Laor Orshan, Dusan Petric)</i></li> <li>3. <i>How to improve the one health web based platform to address all Leishmaniasis control challenges. (Jim Crilly, Mirza Softic)</i></li> </ol> |
| 16.00        | Presentation from the working groups  |
| 16.30        | Wrap up of the meeting.   |
| <b>19.00</b> | <b>Dinner together</b>  |

## Day 2 – Thursday, 30 October

- 9.00 Data challenges in SECID and MECIDS countries and need for cross border in SECID and MECID countries - *Albania, Macedonia, Kosovo\*, Bulgaria, Croatia, Jordan, Palestine, Israel, Thailand, Georgia, Pakistan.*
- 10.10 Project and initiatives: Surveillance and risk assessment (Cross border Cooperation) – *Laor Orshan, Ministry of Health, Izrael.*
- 10.30 Project and initiatives: Case control study including vectors and reservoirs - *Kujtim Mersini, Institute of Food Safety and Veterinary, Teita Myrseli, Institute of Public Health, Albania*
- 10.50 Partnerships and funding opportunities – *Ann Marie Kimball, Professor Emerita, University of Washington School of Public Health and Medicine*

11.10 Coffee Break

11.30 Working Groups

1. *How to maintain an active platform and further improve it.(Jim Crilly)*
2. *Data query, challenges of standardization and using a web based platform for data sharing. (Kujtim Mersini)*
3. *How to extend the project in other countries, implement it in neighboring countries and beyond (Nigel Lightfoot)*
4. *A scientific advisory group and their role to improve the platform and guide further work (Paul Kaczmarek)*

12.45 Lunch

- 14.00 Working Groups (*Coffee is served on the tables*)
1. *How to maintain an active platform and further improve it.*
  2. *Data query and challenges of standardization and using a web based platform for data sharing.*
  3. *How to extend the project in other countries, implement it in neighboring countries and beyond.*
  4. *A scientific advisory group and their role to improve the platform and guide further work*
- 15.30 Presentation from the working groups
- 16.30 Wrap up of the meeting and follow up
- 19.00 Dinner