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Govt, NGOs fight to eliminate major diseases

By Phyu Lin Wai

THE Ministry of Health, in frequent collaboration with nongovernmental organisations (NGOs), has implemented a variety of programs to fight malaria, tuberculosis and HIV/AIDS, three of the most problematic diseases in Myanmar.

One of the longest running is the National Malaria Control Program (NMP), launched in 1950 and conducted with eight major strategies for public health care.

The program has emphasised the correct diagnosis of malaria using laboratory tests, and encouraging the public to use insecticide treated bednets or mosquito nets to prevent transmission of the disease.

Dr Saw Lwin – a deputy director of the Department of Health, and the program manager of the NMP – said that about 700,000 people a year come to hospitals exhibiting malaria-like symptoms, but after testing, only about half of them are found to have malaria, with the rest suffering from other diseases.

The program has distributed treated bed-nets and mosquito nets to remote areas of the country on collaboration with the World Health Organisation (WHO) and the United Nations Children's Fund (UNICEF).

The NMP provides rural health clinics with malaria testing kits that within 15 minutes can diagnose whether the disease is affecting brain function. It also provides multi-drug malaria treatments to patients for free.

Meanwhile, the Central Malaria Control Unit, located in Insein township in Yangon, provides medical treatment to about 30 malaria patients a day.

The Ministry of Health, in collaboration with other government departments, also conducts frequent surveys to prevent new malaria outbreaks in overcrowded areas and in places that have already been targeted by anti-malaria projects. In addition, the ministry has since 2000 sought to increase public awareness about the disease by organising an annual National Malaria Week.

At the end of the 1980s about 5000 to 6000 people were dying of malaria in Myanmar each year. By 2004 this number had been brought down to less than 2000.

Dr Saw Lwin said that Myanmar's states tend to have a higher number of malaria patients than the divisions, citing a 40 to 50 per cent infection rate in Rakhine State compared with an average 20 per cent rate in the country's divisions.

About 200 to 300 million people suffer from malaria throughout the world, and about one million people die each year, he said.



A trained health care worker provides information about TB to villagers in Mandalay Division.

To fight tuberculosis (TB) the Ministry of Health launched the National Tuberculosis Program (NTP) in 1966-1967, and inaugurated the Directly Observed Treatment Short-Course (DOTS) strategy in 1997.

The DOTS strategy is intended to provide continuous treatment for TB patients over the course of six to eight months, but the provider and supervisor roles for the treatment are still weak in Myanmar.

Dr Win Maung, the program manager of the NTP, said the fight against the disease would be more effective if one mucus testing unit were opened for every 100,000 people in the country.

More than 300 testing units have already been opened, but a total of about 530 are needed to reach full coverage of the population.

A 2005 WHO report on global TB control showed that for every 100,000 people in Myanmar there are 180 incidences of and 25 deaths from the disease each year.

Dr Win Maung said that about 100,000 people contract TB every year and that the disease is the ninth leading cause of death in the country, according to the Central Statistical Organisation's Year Book 2002.

In Myanmar TB infection is most common in people aged between 15 and 54, although people of all ages can contract the disease.

To fight the disease the NTP distributes TB medicine from central locations in Yangon and Mandalay to 324 townships and to rural health care centres throughout the country. The government spent K35 million on TB medicine in fiscal 2003-2004, up from K782,000 in 1995-1996. To raise public awareness it also recog-

male clients, entertainment establishment workers, mobile populations and the youth segment of the general population.

The NAP has established 40 clinics throughout the country to provide free treatment to patients with sexual transmitted diseases (STDs). It has provided training to private-sector doctors, government nurses and other health care workers throughout the country in the early detection and treatment of patients with STDs, who are ten times more likely to contract HIV than those who are not infected.

Among the nongovernmental organisations conducting HIV/AIDS projects with the NAP is Belgium-based Care International, which became active in Myanmar in 1995. The organisation's five main HIV/AIDS projects are the Workplace Project, Border Area Chin Health Improvement Project, Fund for HIV/AIDS in Myanmar, Intravenous Drug Users Project and Uniform Project.

The Workplace Project, implemented in Yangon in 2002, is focused on providing HIV/AIDS education to workers in industrial zones and golf courses, with the goal of reaching 2500 workers, 10,000 families and 30 health care centres by the end of 2005, said Dr Khin Oo Zin, the health program coordinator of Care

Myanmar.

The Border Area Chin Health Improvement Project – started in 2003 and based in the Tiddim region in Chin State – aims to provide HIV/AIDS education and health care for 35,000 migrants in 13 area villages by 2006.

The Fund for HIV/AIDS in Myanmar has since 2004 focused on condom distribution, referral to hospitals, home-based care, and life-skills education, in collaboration with other organisations.

It is aimed at educating 15,000 people aged 10 to 24 and distributing 1.5 million condoms in 19 townships in Yangon, Mandalay and Sagaing divisions, and Chin, Mon and Shan states by 2006.

The Intravenous Drug Users Project, conducted in Mandalay and Lashio since 2003, expects to educate 5000 drug users and their partners and families by 2006.

In 2004 Care Myanmar started the one-year Uniform Project to provide HIV/AIDS education to police officers in the towns of Yamethin, Muse, Tachileik, Wethikan, Zibingyi and Taunglayton.

The organisation conducts its projects in collaboration with the Central Committee for Drug Abuse Control, the Occupational Health Division of Department of Health, the Social Welfare Department and officials at various industrial zones.

World Vision, a US-based nongovernmental organisation, began conducting community-based TB control activities in Yangon and Mandalay in 2002, in collaboration with the National Tuberculosis Program.

The organisation's efforts are aimed at raising public awareness about the disease and ensuring that patients get regular drug treatment, focusing on Hlaing Tharyar and South Dagon townships in Yangon, and Pyigyitagon, Chanmyatharzi and Aungmyethazan townships in Mandalay.

World Vision provides referrals of people with symptoms of TB to health centres in Kyainglong in Shan State, Patheingyi in Ayeyarwaddy Division, and Pha-an in Kayah State.

In collaboration with township health departments it provided TB education to 4,930 people from July 2004 to March 2005.

"Educating school children, teachers and affected families is one of the best ways to prevent transmission and the further spread of TB in communities," said Dr Aye Aye Myint, the health coordinator of World Vision Myanmar.

During the same period the organisation gave TB tests to 50,618 children and 3650 family contacts, of which 5256 and 1021 respectively were referred to health centres.

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