Addressing the burden of mycetoma

The Sixty-ninth World Health Assembly,

Having considered the report on mycetoma,¹

Deeply concerned about the impact of mycetoma, especially among children and young adults of working age, and the public health and socioeconomic burdens that the disease places on poor, rural communities;

Aware that early detection and treatment minimize the adverse consequences of mycetoma;

Noting with satisfaction the progress made by some Member States with regard to research into mycetoma and management of cases of the disease;

Concerned that several factors, including late detection of cases of mycetoma and inadequacy of available tools for diagnosis, treatment and prevention of the disease, impede further progress;

Mindful that achievement of the United Nations Millennium Development Goals and the Goals of the 2030 Agenda for Sustainable Development,² particularly those concerning poverty, hunger, health and education, may be hampered by the negative impact of neglected diseases of the poor, including mycetoma,

1. CALLS UPON the international community and all stakeholders including, inter alia, international organizations, bodies of the United Nations system, donors, nongovernmental organizations, foundations and research institutions:

   (1) to cooperate directly with countries in which mycetoma is endemic, upon the request of such countries, in order to strengthen control activities;

   (2) to develop partnerships and foster collaboration with organizations and programmes involved in health system development in order to ensure that effective interventions can reach all those in need;

   (3) to support institutions working on research into mycetoma;

¹ Document A69/35.

2. ENCOURAGES Member States in which mycetoma is, or threatens to become, endemic:

(1) to assess the burden of mycetoma and, where necessary, establish a control programme;

(2) to accelerate efforts for early detection and treatment of mycetoma cases;

(3) to integrate, where feasible, efforts to control mycetoma with other relevant disease-control activities;

(4) within the context of health-system development, to establish and sustain partnerships for control of mycetoma at country and regional levels;

(5) to meet control needs, including in respect of improved access to treatment and rehabilitation services, by mobilizing national resources;

(6) to provide training to relevant health workers on the management of mycetoma;

(7) to intensify research in order to develop new tools to diagnose, treat and prevent mycetoma;

(8) to promote community awareness of disease symptoms in support of early detection and prevention of mycetoma, and to intensify community participation in control efforts;

3. REQUESTS the Director-General:

(1) to include mycetoma among the diseases termed “neglected tropical diseases”;

(2) to continue to offer technical support to institutions working on research into mycetoma, including WHO collaborating centres, in support of improved, evidence-based disease control efforts;

(3) to support Member States in which mycetoma is endemic to strengthen capacities for improving early detection and access to treatment;

(4) to foster technical cooperation among countries as a means of strengthening mycetoma surveillance, control and rehabilitation services;

(5) through the UNICEF/UNDP/World Bank/WHO Special Programme for Research and Training in Tropical Diseases, to support the strengthening of research capacity in order to meet the need for better diagnostics, treatments and preventive tools for mycetoma;

(6) through the Strategic and Technical Advisory Group for Neglected Tropical Diseases, to define a systematic, technically-driven process for evaluation and potential inclusion of additional diseases among the “neglected tropical diseases”;

(7) to report on progress in implementing this resolution to the Seventy-second World Health Assembly.

Eighth plenary meeting, 28 May 2016
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