

Trachoma Control Program

THE
CARTER CENTER



The Carter Center works with ministries of health in five African countries to eliminate blinding trachoma, the world's leading cause of infectious blindness.

ABOUT THE CARTER CENTER

A nongovernmental organization, The Carter Center has helped to improve life for people in more than 80 countries by resolving conflicts, advancing human rights, preventing diseases, and improving mental health care.



Outside a health clinic in southern Niger, Tidjani Safia assists Rakia Ado, age 20, after she received surgery on her eyelids due to advanced trachoma. The simple procedure can save a person's sight.

WHAT IS TRACHOMA?



Trachoma is a bacterial eye infection found in marginalized, isolated communities lacking clean water and adequate sanitation. It spreads from person to person via flies, hands, and shared cloths. Repeated **infections lead to scarring** of the eyelid that causes the eyelashes to turn inward and scratch the cornea—a painful condition called trachomatous trichiasis, or TT—which eventually causes blindness if left untreated.

Globally, **136.2 million people** in 44 countries are at risk for trachoma, and **2 million** are at immediate risk for blindness from TT if not treated.

OUR STRATEGY

To control trachoma, The Carter Center and its partners implement the four-pronged strategy endorsed by the World Health Organization, known by its acronym SAFE, which stands for surgery, antibiotics, facial cleanliness, and environmental improvement.



Surgery is used to reverse the in-turned eyelashes of individuals with TT. It is a fairly simple procedure that can be offered in the community or at health centers. Eyelid surgery corrects TT and may greatly improve visual acuity, especially in less severe cases.



The **antibiotic** Zithromax,[®] donated to The Carter Center by Pfizer Inc, treats active trachoma and reduces the reservoir of infection in communities. The World Health Organization recommends that all individuals in communities where the prevalence of active trachoma meets or exceeds 5% of children ages 1 to 9 receive mass drug treatment with antibiotics.



Facial cleanliness helps control trachoma. Discharge from the eyes and nose attracts eye-seeking flies that can bring the infection or carry it to other people. Rubbing eyes with a cloth, bed sheets, or a mother's shawl can contribute to the transmission of trachoma. The Carter Center promotes face washing in the communities where it works.



Environmental improvements in communities are necessary for long-term protection from trachoma. The disease persists where people live in poverty with crowded living conditions and where there is insufficient water, sanitation, and waste infrastructure. The Carter Center promotes latrine construction and use to reduce opportunities for flies to breed.

WHERE WE WORK



Trachoma exists in 44 countries in Africa, the Middle East, the Americas, and Asia. Ethiopia—one of the countries where The Carter Center works—has the highest known burden of active trachoma infection in the world.

Current Countries: Ethiopia, Mali, Niger, South Sudan, Sudan

Previous Countries: Ghana, Nigeria, Uganda, Yemen

RESULTS AND IMPACT

Since 1999, The Carter Center has assisted with:

860,000+
eye surgeries

220+ million
antibiotic treatments

the construction of
3.6+ million latrines

the training of
398,000 people
to deliver health education

health education in
99,000+ communities



In Ethiopia, a schoolgirl demonstrates face washing, one of the four key components of trachoma prevention.

GHANA

Ghana in 2018 became the first sub-Saharan African country to be validated by the World Health Organization for eliminating trachoma as a public health problem.

NIGERIA

Two states in Nigeria—Plateau and Nasarawa—also eliminated trachoma as a public health problem in 2018. The Carter Center worked with both states' health ministries from 2000 through 2015.

The Carter Center is a leader in the elimination and eradication of neglected tropical diseases.