



TRACHOMA CONTROL PROGRAM

What is trachoma?

Trachoma is a bacterial infection of the eye. Repeated infection leads to scarring and inward turning of the eyelid—a very painful condition called trichiasis—eventually causing blindness if left untreated.

How do you get trachoma?

Trachoma is caused by the bacteria *Chlamydia trachomatis* and is easily spread from person to person through hands, clothes, and flies' feet that land near the eyes. Children bear the highest burden of trachoma infections. Women are almost twice as likely as men to develop trichiasis because of their role as the traditional caregivers for children, who may unknowingly pass their infection on to their mothers.

How widespread is the problem?

Trachoma is found in the poorest and most isolated communities in over 50 countries, most in Africa and the Middle East, although a few countries in the Americas and Asia also are affected.

- Approximately 232 million people are at risk for trachoma.
- Although trachoma is easily preventable, more than 2 million of the world's poorest people are blind today because they did not have access to eyelid surgery or prevention strategies. More than 4 million more are at immediate risk of blindness due to repeated infections.
- The economic impact of lost productivity due to blinding trachoma has

been estimated to be between US\$3 billion and US\$6 billion each year.

How is the disease treated and prevented?

The World Health Organization endorses a combination of interventions to control trachoma, known by the acronym SAFE: Surgery, Antibiotics, Facial cleanliness, and Environmental improvement.

Blindness from trachoma is irreversible, however, eyelid surgery is possible to correct the advanced stage of trachoma, trichiasis, to remove pain from the disease and prevent blindness from occurring.

What is the Carter Center's role in trachoma control?

The Carter Center provides technical and financial support to the ministries of health of Ethiopia, Mali, Niger, Sudan, South Sudan, and Uganda to implement the SAFE strategy. The Center partners with the Lions Clubs International Foundation, the Conrad N. Hilton Foundation, the Noor Dubai Foundation, the OPEC Fund for International Development, the Queen Elizabeth Diamond Jubilee Trust, Sightsavers, the International Trachoma Initiative, Pfizer Inc, and other donors.

Kelly Callahan



In the Amhara region of Ethiopia, a boy washes his face to prevent trachoma infection.

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The Carter Center reported the following program achievements in 2014:

- The Carter Center supports approximately one-fourth of the total global output of 20-minute, sight-saving eyelid surgeries, which are performed in local communities by trained health workers.
- Approximately 120 million doses of Zithromax® (donated by Pfizer Inc) have been distributed in Carter Center-supported areas.
- Over 12,300 villages are currently benefiting from ongoing health education.
- As the lead organization worldwide focusing on the environmental facet of trachoma control, the Center has

assisted in the construction of over 3.1 million household latrines since 2002 to help control the breeding of the eye-seeking flies that help spread trachoma.

- In 2011, with technical and financial assistance from The Carter Center, Ghana became the first sub-Saharan African country to reach the World Health Organization thresholds for elimination of blinding trachoma as a public health problem.
- In 2014, with assistance from The Carter Center in Nigeria, the two states of Plateau and Nasarawa reached the World Health Organization thresholds for elimination of blinding trachoma.

- The elimination of blinding trachoma is considered a “best buy” in public health, given the simple, cost-effective tools available to relieve suffering and improve overall quality of life. The Trachoma Control Program also has auxiliary benefits to public health such as improved sanitation and personal hygiene. In addition, The Carter Center, the University of California at San Francisco, and the Ethiopia Ministry of Health have published research in the Journal of the American Medical Association that demonstrates that antibiotic distribution to treat children’s active trachoma infections may reduce child mortality, since the antibiotics can help resolve common childhood killers like diarrheal diseases.