



GLOBAL TASK FORCE ON
CHOLERA CONTROL

GTGCC SECRETARIAT UPDATE

Case Management WG
5 November 2018

MOVING FORWARD

SUPPORT TO COUNTRIES in the development and implementation of cholera elimination plans

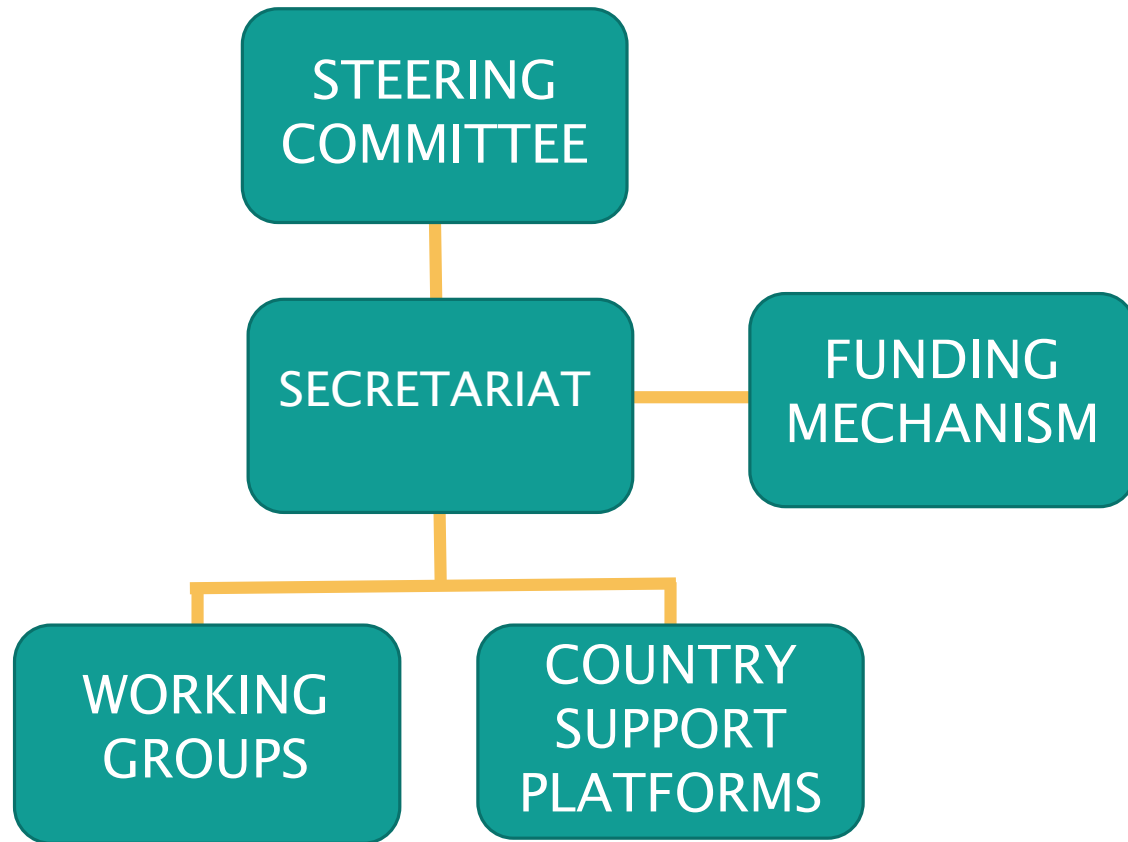


GTFCC TECHNICAL REVIEW COMMITTEE

Mandate : to review countries plan and provide feedback to the country with three main objectives:

- ensure the plans are aligned with the strategic axis of the Ending Cholera Roadmap – multisectoral interventions targeting cholera hotspots
- Review OCV requests and validation of plans/reports to trigger shipments
- ensure costing for the implementation of the plan is adequate.

STRUCTURE OF THE GTFCC



- Address the results of the review of the GTFCC conducted in 2017
- Provide a small, flexible, and nimble mechanism
- Strengthen collaborations with GTFCC partner institutions

GTFCC RESEARCH AGENDA PROBLEM STATEMENT

The goal of the GTFCC research agenda is to support the implementation of the Ending Cholera Roadmap in countries through evidenced based interventions to control or eliminate cholera. More specifically, research will help target and improve multisectoral, integrated interventions, optimizing resources to be cost-effective, to sustain gains and to provide value for money.

PRE-IMPLEMENTATION	IMPLEMENTATION	POST IMPLEMENTATION / M&E
<p>BURDEN OF DISEASE AND IDENTIFICATION OF HOTSPOTS:</p> <ul style="list-style-type: none"> • Description of existing hotspots to inform the definition of hotspots: <ul style="list-style-type: none"> ▪ Quantification: laboratory confirmation, sero-surveys ▪ Characterization: changing incidence and timing, WASH conditions, transmission (in and out) • Accessible laboratory confirmation methods in hotspots • Develop and pilot an assessment tool – hotspot vs at risk (using a tier approach), including lab capacity • Improve estimates of mortality and where it occurs <p>TRANSMISSION DYNAMICS:</p> <ul style="list-style-type: none"> • Macro level analysis: molecular data (e.g., basic lab confirmation data and more advanced data from whole genome sequencing),, epidemiological data • Community/household level : environmental vs human to human transmission, Social science • Disease modelling for short term outbreak forecast 	<p>OPTIMIZATION (INNOVATION) OF INTERVENTIONS AT THE COMMUNITY LEVEL:</p> <ul style="list-style-type: none"> • RDTs • Use of antibiotic (targeted prophylaxis) • WASH package (short, medium and long-term) • Delivery strategies for OCV including new cholera vaccines, use in “controlled temperature chain” (CTC) <p>BEHAVIOUR CHANGE</p> <p>OPERATIONAL RESEARCH ON OCV : co-administration with other vaccines, simplification of delivery</p> <p>SYNERGIES OF INTERVENTIONS: OCV and WASH</p> <p>CHOLERA AND Severe Acute Malnutrition (SAM)</p>	<p>EFFECTIVENESS OF INTERVENTIONS</p> <p>CHANGE IN ATTITUDE: Lessons learnt to be documented</p>
<ul style="list-style-type: none"> • SOCIAL SCIENCES <ul style="list-style-type: none"> Country engagement: policy drivers, determinants and barriers Documenting success stories through case studies – to be linked to advocacy efforts • IMPACT: Level of WASH coverage to stop transmission, OCV duration of protection, outcomes and process for continuous improvement, role 		

RESEARCH PRIORITIES – QUICK WINS

Country engagement: policy drivers, determinants and barriers

Documentation of success stories – case studies in Senegal and other countries

Treatment of cholera in patients with SAM

Definition of hotspots: characterization of hotspots, sero-survey, assessment tool for identification of hotspots

Defining WASH package for cholera

Developing a short term prediction outbreak model

OCV use in CTC

Impact of reactive OCV campaigns