



PRESS RELEASE

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For immediate release

Snakebite: Call for urgent global action to end death & suffering

Multi-sector panel at 69th World Health Assembly ... improve prevention & treatment of snakebite in world's poorest countries

GENEVA—Top tropical medicine experts, government leaders and medicines policy advocates called today for an immediate and united global response to alleviate the immense death and suffering caused by snakebite envenoming in low- and middle-income countries during a 69th World Health Assembly (WHA) side event sponsored by the Government of Costa Rica.

“With collective action, we now have a significant opportunity to dramatically improve the lives of millions of people around the world who are suffering from snakebite—a malady that is both preventable and treatable,” said Dr Fernando Llorca, Minister of Health of Costa Rica.

Despite the devastating injuries snakebite causes—and the fact that it kills more people than any neglected tropical disease on the World Health Organization’s (WHO) priority list—snakebite remains severely neglected and underfunded by the global health community and many national governments.

Panellists stressed that there is an urgent need for multi-sectoral funding to implement regional and in-country programmes that raise community awareness, availability and uptake of snakebite prevention measures; improve snakebite reporting; train doctors and other healthcare workers; roll out subsidised access to treatment; develop new diagnostics, therapies and control tools; and provide access to rehabilitation support services.

“The suffering and death caused by snakebite envenoming can be broadly controlled with effective multi-component programmes that are ready to be rolled out by the scientific community, civil society and governments,” said Dr Tim Reed, Executive Director of Health Action International, a Netherlands-based civil society organisation that supports the fundamental right of access to medicines. “With proper resources and recognition from the WHO, and support from its Member States, effective treatment could be accessible to everyone.”

The current situation is particularly dire in sub-Saharan Africa where there are no supplies of safe, effective and life-saving antivenoms.

“We’ve seen death, we’ve seen disability, we’ve seen disfigurement, we’ve seen deprivation, we’ve seen destitution from snakebite,” said Dr Abdulrazaq G. Habib, Professor of Infectious and Tropical Diseases from Bayero University in Kano, Nigeria. “In north-eastern Nigeria, the only hospital to treat snakebite is filled to the brim.”

“The ongoing crisis in sub-Saharan Africa is denying hundreds of thousands of people access to antivenom,” said Dr David Williams, Chief Executive Officer of the Global Snakebite Initiative. “The lack of safe, effective and affordable products is costing lives and limbs every day, and victims simply cannot afford to wait any longer for the world to step in and take action.”

People who live in poor, rural communities with failing healthcare systems—particularly agricultural workers, herders and children—disproportionately suffer the greatest burden of snakebite. The majority reside in tropical and sub-tropical regions of the world. Morbidity and mortality is enormous with 5.5 million cases per year, resulting in 2.7 million snakebite envenomings which kill at least 125,000 people and permanently disable 400,000 more.

“It is time for the world to stop ignoring snakebite,” said Professor José Maria Gutiérrez from the University of Costa Rica. “It is a matter of using medicine and science for what it should be used—for the well-being of people.”

The side event panel was composed of representatives from the Government of Costa Rica, Oxford University, University of Costa Rica, Global Snakebite Initiative, WHO, Health Action International and Médecins Sans Frontières.

The event was sponsored by the Government of Costa Rica and co-sponsored by 18 other WHO member states: Afghanistan, Angola, Bangladesh, Benin, Burkina Faso, Cameroon, Chad, Gabon, Guinea, Kenya, Namibia, Nepal, Nigeria, Pakistan, Papua New Guinea, Philippines, Senegal and Uganda. It was supported by Health Action International, the Global Snakebite Initiative and the World Health Organization.

Note for editors:

B-roll of snakebite is available at the following link:

<https://healthactioninternational.box.com/s/ggzshj9n0uf71yya8ijfgjyypoz4lwed>

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