Reviewer’s report

Title: Prevention, control, and elimination of neglected diseases in the Americas: Pathways to integrated, inter-programmatic, inter-sectoral action for health and development

Version: 1 Date: 22 June 2006

Reviewer: Juerg Utzinger

Reviewer’s report:

General

I was invited to review a manuscript by Holvec and colleagues, submitted for publication in the open access journal BMC Public Health. Given the length, depth and breadth of the current manuscript, I trust that the authors (as well as the editors) will accept my sincere apologize for a delayed review. In any event, I enjoyed reading the current piece, which, in my opinion, is comprehensive in nature and makes a most valuable addition to the emerging field of the neglected (tropical) diseases. Recently, the scientific community has witnessed several relevant publications that hopefully will raise the profile of the neglected (tropical) diseases, such that much needed resources will become available in the not too distant future for more focussed research and control/elimination efforts. I refer to several articles that have been published over the past two years in high impact factor journals, e.g. (i) Molyneux, 2004, Lancet, 364 (9431), 380-383; (ii) Molyneux et al., 2005, PLoS Med., 2 (11), e336; (iii) Fenwick et al., 2005, Lancet, 365 (9464), 1029-1030; (iv) Hotez et al., 2006, PLoS Med., 3, e102; and (v) Lammie et al., 2006, Trends in Parasitology 2006, in press. Arguably, the above-mentioned articles are somewhat narrowly focussed on drug-based interventions to achieve a rapid impact on morbidity reduction. This approach, of course, should only be viewed as the first step in a more comprehensive and staged approach with the ultimate aim of transmission containment of the neglected (tropical) diseases.

It is clear that strategic inter-programmatic planning and implementation of control measures in an integrated and inter-sectoral fashion will be crucial to make progress in the control/elimination of neglected (tropical) diseases, which in turn is of considerable relevance to attain several of the Millennium Development Goals. In this regard, two of the current authors (Ehrenberg and Ault) have recently shared their vision and provided useful examples on how this could be achieved in the Latin American and Caribbean context; a significant piece published in BMC Public Health. The current contribution is a logical continuation of their thinking and sketches out an agenda on how to move forward with a host of relevant examples.

I offer two main points and invite the authors to consider the series of ‘minor essential revisions’ and ‘discretionary revisions’ detailed below.

(1) As mentioned above, a clear strength of the current manuscript is its depth and breadth. However, the manuscript is rather long, i.e. 41 single-spaced pages. I feel that some sections could be shortened considerably, without losing much of its content. The first section titled ‘Background: Multiple Dimensions of Global Poverty’, for example, could be halved.

(2) I feel that some additional references could be added to underscore some of the points made, which will further aid to put the current piece in context. Specific details are provided blow under my suggested ‘minor essential revisions’.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

None

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

(1) The authors use the terms ‘neglected diseases’ (e.g. title) and ‘neglected communicable diseases’ (e.g. Abstract, Background). In the extent literature, the term ‘neglected tropical diseases’ (NTDs) is more commonly employed and in the near future a new PLoS journal will be launched, e.g. PLoS Neglected Tropical Diseases. Please re-think the terminology used and, in case the authors will adhere to ‘neglected disease’ they should briefly explain why others use ‘neglected disease’
tropical diseases. Page 6, para 4 would be a good place to discuss.

(2) Page 4: To add further specificity, I was wondering whether the bullet points could be summarized in tabular form, and stratification of the relevant information for the sub-region of interest in the current paper, i.e. Latin America and Caribbean. In other words, it would be useful to know how many of the 1.2 billion people worldwide living on less than US$ 1 per day are actually from Latin America and the Caribbean.

(3) Page 5, Neglected Diseases: In their recent publication, Hotez et al. defined 13 NTDs. It might be useful to juxtapose the current list of 8 NDs with the more extensive list put forth by Hotez and colleagues.

(4) Page 7, lines 2-3: A useful reference to underscore the important issue of multiple species parasitic infections with the current geographical focus, the authors are invited to consider bringing on board â€œBrooker et al., 2006, International Journal for Parasitology, in press.

(5) Page 8, para 1 and box: Many of the examples put forth here have been aired before (see Lancet Editorial, 4 December 2004; WHO, 2005, Deworming for Health and Development, WHO/CDS/CPE/PVC/2005.14). I suggest that cross-reference is made to this body of extensive literature and the correct write up is condensed to save space.

(6) Page 9, Rationale for an Integrated Approach, line 2: Replace â€œhuman rightsâ€ as it is mentioned twice. Moreover, give full name of â€œSTIâ€ upon first use.

(7) Page 8, Box: With regard to the issue of polyparasitism, I believe that cross-reference to Ezeamama et al. (2005, Journal of Infectious Diseases) further underscores their point.

(8) Page 10, para 2, line 2: Insert brackets with the relevant MDG (e.g. â€œMDG #1â€) after â€œEradicate extreme poverty and hungerâ€

(9) Page 10, para 4: This is an interesting paragraph and one might suggest that explicit mention of malaria is also made. The latter said, the authors are invited to check whether cross-reference to Keiser et al., 2005, American Journal of Tropical Medicine and Hygiene is indicated. With regard to schistosomiasis (and malaria), it is important, however, to note that there is a paucity of studies examining the effect of small dams on either disease (see Steinmann et al., 2006, Lancet Infections Diseases).

(10) Page 11, para 5: This is an interesting paragraph and one might suggest that explicit mention of intermittent irrigation as a potential tool for malaria control, cross-reference to Keiser et al., 2002, Journal of the American Mosquito Control Association might be indicated.

(11) Page 12, para 4: The authors are invited to study a recent article by de Castro and colleagues, published in PNAS (14 February 2006).

(12) Page 13, last paragraph: Replace â€œTrichuris trichuraâ€ with Trichuris trichiuraâ€ and â€œintestinal schistosomiasisâ€ with â€œSchistosoma mansoniâ€.

(13) Page 14, para 3: Replace â€œPAHO hoped to also sought to strengthenâ€ with â€œPAHO hoped to also seek to strengthenâ€.

(14) Page 15, para 4: Regarding the interesting issue of intermittent irrigation as a potential tool for malaria control, consider to explicitly mention the concept of the Perfect Storm, which the authors are referred to two recent articles published in highly visible journals, i.e. (i) Schelling et al., BMJ (26 November 2005); and (ii) Zinsstag et al., Lancet (17 December 2005). It might be interesting to learn the authors view on the issue discuss with regard to mobile populations (â€œone healthâ€ concept).

Discretionary Revisions (which the author can choose to ignore)

= Page 3, Abstract, Background, line 3: Delete â€œdisastrousâ€
= Page 4, Unmet Challenges, lines 3 and 4: Insert brackets with the relevant MDG (e.g. â€œMDG #1â€) after â€œEradicate extreme poverty and hungerâ€
= Page 4, bullet point 2: Delete â€œprimaryâ€; replace â€œschool ageâ€ with â€œschool-ageâ€
= Page 5, last paragraph: Replace â€œpoverty-relatedâ€ with â€œpoverty-relatedâ€
= Page 8, Box, 1 bullet point 6: Replace â€œinfectionâ€ with â€œinfectionâ€
= Page 9, Rationale for an Integrated Approach, line 2: Replace â€œperfectâ€ with â€œidealâ€
= Page 9, Rationale for an Integrated Approach, para 1: Consider to explicitly mention the economy of scale (see for example Utzinger & de Savigny in a recent commentary published in PLoS Medicine).
= Page 9, lines 7 from bottom: â€œfactorsâ€ or â€œdeterminantsâ€
= Page 10, para 2, line 3: What exactly is meant under â€œproper assessmentâ€
= Page 10, para 4: Is there a need to use capital letters in â€œInter-sectoral Partnershipsâ€?
= Page 10, para 4, line 4: Insert brackets with the relevant MDG (e.g. â€œNGOsâ€)
= Page 11, para 2 and 3: In par 2, the abbreviation â€œLACâ€ is introduced, but in the subsequent para, the authors again use the full name, i.e. â€œLatin America and the Caribbeanâ€.

= Page 12, para 1: I was wondering whether â€œalcohol abuseâ€ might represent another factor worth mentioning.

= Page 12, para 5, line 3: I suggest that both â€œenvironmentalâ€ and â€œbehaviouralâ€ is put forth.

= Page 13, para 4, line 1: What is the definition used here for â€œlevel of povertyâ€?

= Page 16, para 2: For consistency reasons I suggest that â€œgeohelminthicâ€ is replaced with â€œsoil-transmitted helminthâ€.

= Page 16, Box, final bullet point: Replace â€œdiethylcarbamazine (DEC)â€ with full name followed by abbreviation.

= Page 22, para 3: â€œpercentâ€ or â€œ%â€?

= Page 25, para 2, line 2: I suggest that â€œlower the prevalence of NDsâ€ is replaced with â€œlower the burden due to NDsâ€.

= Page 29, last para: The term â€œneglected diseasesâ€ has been abbreviated before, so there is no need to use the full name again [check throughout].

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests