TABLE 1

Disease-specific guidelines for neglected tropical diseases*

Disease	Diagnostic approach for mapping	Threshold for implementation of PCT interventions	Unit of implementation	At-risk population targeted	Drugs	Frequency of intervention†
Lymphatic filariasis (in countries where onchocerciasis is co-endemic)	Antigen detection (ICT) or microfilaria detection (microscopy) in whole blood	Prevalence ≥ 1% in adults in some part of an implementation unit	District or other as defined for ease of operation	≥ 5 years old	IVM and ALB	Once per year (anticipated 4–6 years)
Lymphatic filariasis (in countries where onchocerciasis is not co-endemic)				≥ 2 years old	DEC and ALB	
Onchocerciasis–APOC	Nodule detection using rapid techniques	Presence of palpable nodules ≥ 20% in adult men	Mesoendemic or hyperendemic focus (reflecting river basins)	≥ 5 years old	IVM	Once per year, except in special circumstances
Onchocerciasis–OEPA	Skin snip	Prevalence of infection ≥ 1% in an implementation unit	Endemic focus	≥ 5 years old	IVM	Twice per year (anticipated 10–14 years)
Schistosomiasis	Parasitologic methods 1) detecting eggs in urine or stool (microscopy) 2) detecting blood in urine (hemastix or questionnaires)	High risk: prevalence of infection ≥ 50% in SAC Moderate-risk: prevalence of infection ≥ 10% but < 50% in SAC Low-risk: prevalence of infection < 10% in SAC	District, sub-district, or community	SAC and adults	PZQ	Once per year
				SAC and at-risk adults		Once every two years
				SAC		Twice during primary schooling
Soil-transmitted helminthiasis (ascariasis, trichuriasis, hookworm)	Detecting eggs in stool (microscopy)	High-risk: Prevalence of any STH ≥ 50% in SAC Low-risk: Prevalence of any STH ≥ 20% and < 50% in SAC	District, sub-district or community	SAC, preschool children, women of childbearing age, pregnant women in second and third trimesters, special adult populations	ALB or MBD	Twice per year Once per year
Trachoma (blinding)	Eyelid examination for follicular inflammation (TF)	TF prevalence ≥ 10% in 1–9 year-old children	District	Everyone ≥ 6 months old with azithromycin; Children <6 months with TET	AZT and TET	Once per year (AZT); twice per day for 6 weeks (TET)

* Consistent with established and currently followed World Health Organization recommendations[3]. PCT = preventive chemotherapy; ICT = immunochromatography; IVM = ivermectin; ALB = albendazole; DEC = diethylcarbamazine; SAC = school age children; STH = soil-transmitted helminths; PZQ = praziquantel; MBD = mebendazole; AZT = azithromycin; TET = tetracycline; TF = trachomatous inflammation; APOC = African Programme for Onchocerciasis Control; OEPA = Onchocerciasis Elimination Program in the Americas.

† Duration of intervention varies for each disease.