## Andean subregional Chagas disease area and the Andean Initiative of Chagas Disease

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The Andean subregional Chagas disease area and the Andean initiative of Chagas disease consist of the association of Peru, Ecuador, Colombia, and Venezuela with their own and particular characteristics:

- 1. extensive area distributed in a broad latitude;
- 2. important echo-biological diversity;
- 3. biogeographically variables due to diverse altitude and latitude;
- 4. different epidemiological situations of Chagas endemic disease;
  - 5. socioeconomic-cultural diversity;
  - 6. ethnic diversity;
- 7. different structures and characteristics of peri and intradomiciliary areas;
- 8. different vectors implied in the transmission of *Trypanosoma cruzi*;
- 9. various degrees of development and continuity of the control/surveillance of Chagas disease.

The initiative, created in 1997, has gotten around discontinuity periods but has served as a support of development of the prevention, control, surveillance, and care of Chagas disease, that the member countries have fulfilled.

The proposed control against the vector of Chagas disease has been based on a proposal that countries developed in the Initiative, centered in actions that prioritize the concept of "risk".

Some species of triatomines of the subregion, pointed out as vectors of the greatest epidemiological importance, are prone of "elimination", such as:

Rhodnius prolixus: Colombia and Venezuela

 $\it Triatoma\ dimidiata\ and\ Rhodnius\ ecuadoriensis:$  Ecuador.

Rhodnius ecuadoriensis and Triatoma infestans: Peru.

This may be possible to their condition of species closely associated to anthropic constructions.

Other species of vector importance, given their "indigenous" condition with presence in nature, only makes it possible to assume a control of its household presence.

Wild populations of *R. prolixus*, *R. ecuadoriensis*, and *T. dimidiata* correspond to studies in specific areas and should be subject to entomological surveillance.

With regard to medical care – with diagnosis, management, and treatment of the infected/Chagas disease –, it

should be worked a great deal so that national health systems fortify theirs capabilities, departing as an example of a better quantification of their prevalences, morbidity, and mortality, and of a clear development of the aspects of treatment with regard to indication, opportunity, access, and availability.

The objectives of the Andean Initiative of Chagas Disease are the control of the vector-borne transmission of Chagas disease and the control of the transfusion transmission of Chagas disease.

It seems to be a subject to consider in the future the outlining of more specific objectives in order.

The Andean Initiative of Chagas disease and/or some of its members have counted up to date with technical cooperation of major interest, such as: CDIA/EC; ECLAT; CIDA (Canada); TDR/WHO; and the Technical Secretariat of PAHO.

A characteristic of significance in the four member countries is their double membership to endemic opportunities geo-epidemiologist of Chagas disease: Andean and Amazon.

There exists potential for groups and institutions of importance in the area of research, that are capable of formulating contributions to the prevention, control, surveillance, and care of Chagas disease, as effectively have carried them out.

This subregional space is acquiescent of a greater development of actions on Chagas disease and of technical and horizontal international cooperation among member countries, better organized and coordinated, in order to strengthen the control measures.

The technical cooperation possibilities are timely and relevant appropriate as they may possible the following: (1) training applied to the control and care; (2) technological transfer of validated schemes of prevention, control, and surveillance; (3) practical research and applied in field for the purpose of control; (4) the development of mass communication, in favor of installing in better form to Chagas disease, among the subjects of the health agenda of the countries; (5) the utilization of the Webs portal suitable for: (a) dissemination of regular meeting reports; (b) dissemination of reports on workshops and technical forums; (c) dissemination of work manuals in control and attention; (d) rendering operational courses virtual in control and attention; (6) promote horizontal technical cooperation among services and institutes of the member countries; (7) increase international evaluation systems of land, through visits of commissions of independent specialists; (8) the development of tests of quality control in diagnosis among the countries and centers of excellence; (9) standardize criteria for the treatment and follow-up of the infected patient.

The Andean Initiative of Chagas Disease it is a subregional project in construction if compared with the history and development of other endemic subregions projects, but it constitutes, without no doubt, a suitable tool through which the member countries mark and validate its advances in a space of integrating international cooperation.

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