Cláudio Tadeu Daniel-Ribeiro - XIX ICTMM opening Ceremony

It's a great pleasure and a real honor, as the President of the IFTM, to welcome you all to this Australian ICTMM. You all know that it is the XIX edition of this Congress, but, very probably, few of you know that the first ICTM occurred in London in 1913, 103 years ago. Probably most of you also don't know that the IFTM - that will be presided by my friend Professor Santiago Mas-Coma, the President Elect - from Wednesday on, is much younger; since it was born in 1988 to promote interaction of between the National Tropical Medicine and related Societies, to help the creation of other Associations where they do not exist, and to guarantee the quality and itinerancy of the ICTMM in the different continents. As the 7th President of the IFTM story, I can say that we have been trying to keep our commitments.

Why is a World Congress on Tropical Medicine still important nowadays? First of all, because each year infectious diseases kill 3,5 million people, most of them poor and young. But also, because - as communication - both travel and migration are becoming common, easy and fast, reflecting both human conquests and defeats in our planet. My single travel to come here from Rio de Janeiro (Brazil) can illustrate that one-person can cross the world with two flights of 13 to 14 hours. Obviously he/she can bring with him/her, pathogens disseminating diseases.

Let's see the example of Zika virus, discovered in Uganda in monkeys in 1947 and in humans in 1952, it caused its first large outbreak in Micronesia in 2007, became the most important health problem in Brazil in 2015, causing microcephaly (and other CNS problems) in more than 2,000 newborns (from 8,000 being investigated) and Guillain-Barre Syndrome in previously healthy individuals. The microcephaly epidemics that started in Brazil in 2015 was declared a public health problem emergency by WHO. Zika virus is transmitted mainly by *Aedes aegypti* in tropical regions, the same mosquito that transmits dengue, chikungunya and yellow fever, but sexual transmission is also possible. It is now invading the USA and Europe. Only in 2015, 55 countries reported Zika and 20 of them reported birth defects in newborns.

According to WHO, from 50 to 100 millions of new Dengue cases, another emerging disease, occur yearly in one hundred countries... In Brazil, Dengue causes presently more than one million cases / year with hundreds of deaths - including that of my father in 2013 - more than deaths due to malaria...

Chikungunya, is another plague of the public health modernity. Discovered in 1950 in Tanzania, it caused more than 2 million cases in Southeastern Asia. It can cause painful chronic arthralgia in young people and, after changing the pattern of prevalent pathologies in tropical and less industrialized countries, it is now spread in over 40 countries!

You all understood that I am talking about - not so new - diseases that appeared decades ago as tropical diseases and we can certainly say that we probably hesitated too much in recognizing them as potential world major health problems fighting them efficiently when they were localized tropical diseases affecting "the others".

Let me also draw your attention to a new emerging disease: the Middle East respiratory syndrome. MERS, a viral respiratory disease caused by a novel

coronavirus, was first identified in Saudi Arabia in 2012. Approximately 36% of reported patients have died. Although the majority of human cases have been attributed to human-to-human infections, camels are likely to be a major reservoir host and an animal source of infection in humans. The virus does not seem to pass easily from person to person unless there is close contact as in hospitals.

But not everything is so bad...

Malaria incidence suffered a 37% decline and deaths were reduced by 60% since 2000. 57 countries have reduced malaria incidence by more then 75% reaching the goals of the millennium in 2015. Despite the 214 million cases still registered in 2014 in the world, the greatest new is that the disease is no longer the major cause of death among children in sub-Saharan Africa. A malaria vaccine is now been tested and planned to be commercialized in a close future, even if it is not fully protective.

There is also a promisor vaccine against schistosomiasis produced in Brazil being tested in Phase 2a Clinical Trial in Africa with the support of WHO. If successful, it is going to be, for the first time, a south-to-south technology transfer that can help to increase the disease burden reduction.

Chagas Disease or American Trypanosomiasis is estimated to still affect 6 to 7 million people worldwide. But these figures were around 24 million in 1984. Since then, there has been an important reduction in the vector transmission with 20 of the 21 countries with transmission in Americas having eliminated it. Up to 30% of infected people develop cardiac alterations for all their lives.

Leshmaniasis is estimated to cause 0.9 to 1,3 million cases and 20 to 30 thousand deaths each year. More than 90% of its visceral form is concentrated in 6 countries (Bangladesh, Brazil, Ethiopia, India, South Sudan and Sudan). A Brazilian researcher drawn recently attention to the surprising information that the number of cases in reality increased in the country in spite of a very marked increase in the national scientific productivity in the last years. This is a warning to all scientists on the responsibility of the utility of the knowledge we are producing...

43 million lives were saved from tuberculosis threat, due to effective diagnosis and treatment since 2000. TB mortality has fallen 47% since 1990. After 40 years of the discovery of rifampicin, the search for new drugs brought us to the present study of 17 molecules with two of them approved by regulatory agencies for use in multi-resistance. But there are still 9.6 million estimated cases, 480,000 cases of MDR-TB and 1.5 million deaths in the world each year.

A dramatic decrease has been achieved in the burden of leprosy; from 5 million patients in 1985 to 175,000 in 2014. A new WHO global strategy aims to increase surveillance of contacts to reduce to zero the number of children diagnosed with leprosy and the diagnosis of severe disabilities by 2020. Some interested Institutions and laboratories are donating (which donates medicines) are advancing with chemoprophylaxis protocols in household contacts of leprosy patients with a dose of rifampicin. In 2000 we reached the elimination goals of global prevalence of less than 1 case / 10,000 persons. More than 16 million people have been treated in the last 20 years. However 121 countries, excepting in Europe, still register cases of leprosy.

I won't have the time of even summarizing the burden of tropical diseases to draw attention to their importance. Thus, I dare not to even evoking data on African trypanosomiasis, filariasis and other important diseases. I do believe that you are all convinced. It is mainly the financing agencies and governments that need to be informed and sensitized to this realities and in this is a challenge for all of us that intend to improve the quality of life and happiness of the planets population.

To finalize, let me welcome, not you to the Congress, because this was the task of our host - Professor Malcolm Jones - and he has already done it warmly and friendly, but to welcome him, Malcolm, as the Organizer of an ICTMM to the group of the former ICTMM organizers.

Malcolm, be welcome to the club!

And you all, enjoy the Congress and the wonderful City of Brisbane!