



71st WHO World Health Assembly – May 2018
Médecins Sans Frontières (MSF) statement on agenda item 12.1:
Global snakebite burden, Document A71/17

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Worldwide, snakebite envenoming kills an estimated 100,000 people annually. Around three times as many lives are blighted as a result of amputation and other permanent disabilities every year. MSF teams treat several thousand snakebite victims annually and witness the devastating impact of snakebite envenoming on victims, their families and communities.

We welcome the passage a resolution on snakebite at this session of the World Health Assembly. MSF urges the WHO, Member States and donors to take six urgent steps to turn these words into action to reduce suffering, disability and death from this preventable disease.

1. Intensify work to control the quality of antivenoms and allocate adequate, sustainable funding for the WHO Prequalification Programme, which is critical to reducing the use of substandard antivenoms, and ensuring that new, safe and effective antivenoms enter the market.
2. Work swiftly to develop an international financing mechanism that subsidises procurement and supply of antivenoms to make them available free-of-charge for victims, or at a price all can afford. A person's inability to pay for quality snakebite treatment should not have deadly and disabling consequences.
3. Prioritise the promising research and development agenda for snakebite. Coordinated international support is needed to ensure lifesaving treatments and diagnostics emerge from the pipeline.
4. Train healthcare workers in rural areas in endemic countries, incorporate specific courses on snakebite management and prevention in the medical curricula in high burden countries, and increase investment in community awareness and prevention.
5. Implement epidemiological studies to determine the true incidence and distribution of snakebite. We need better data to deliver the right treatments in the right places.
6. Support the resource mobilisation plan of the forthcoming WHO Roadmap. Scaling up effective interventions requires increased funding from donors and Ministries of Health.