Improving Access to Care for Indigenous Peoples Across the Globe

Wornei Silva Miranda Braga
Ministry of Health – Brazil
Tropical Medicine Foundation - Manaus

Anchorage - 2017
2 to 4 million people
More than 1,000 groups

April – 1500 AC
Armed conflicts
Epidemics
Social and Cultural disorganization

817,963 hab
0.44% of the National population

Population growth 3.5%
2 times national ratio
HBsAg carriers

1989 – 1999 Surveillance

2006
400 HBsAg carriers
Matses
HBsAg + 12.2%
Delta + 66%

Matis
HBsAg + 6.0%
Delta + 18%

Marubo
HBsAg + 12.7%
Delta + 46%

Kulina
HBsAg + 11%
Delta + 80%

Korubo
HBsAg + 0%
Delta + 0%

Kanamary
HBsAg + 9.8%
Delta + 30%

Mean age HBsAg + 19 (1 to 87)
Delta + 23 years
HBV GEN F
HDV - III
2009

Periodical Screening of HBsAg carriers for liver diseases
109 Treated (pegulated interferon + Entecavir)
48 or 72 weeks
02 Liver transplant

Surveillance of pregnant HBsAg carriers
As Early as possible vaccination
Point-of-care screening and vaccination program

High prevalence rates of HBV and HDV infection
8 to 10% of total population have chronic hepatitis
Mean age HBsAg+ 19 years
Isolated (susceptible) people coming out from the jungle
Treatment program

Improving Access to Care for Indigenous Peoples Across the Globe

Point-of-care Programs
Screening - HBsAg and anti-HBs rapid tests
Including pregnant women
Prompt vaccination
Susceptible individuals including isolated people
All newborns

Implementation of local infrastructure
Thank You For Your Attention!
wornei.braga@hotmail.com