

2025 Annual Highlights



Message from
Dr. Yao Sodahlon, Director

Five Billionth Treatment

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A program at





Message from Dr. Yao Sodahlon, Director



Dr. Yao Sodahlon. (Photo by Alexis Voelin)

We are encouraged by the swift and coordinated response by the NTD community to stay on course.

In 2025, the Mectizan Donation Program and Merck & Co., Inc.* celebrated a major milestone: “Five Billion Mectizan Treatments Donated...and Counting” since 1987. Merck stands by its commitment to donate Mectizan “as much as needed, for as long as needed.”

Celebratory events were held throughout 2025 to mark this achievement. The first was in Haarlem, the Netherlands, on World NTD Day, where we celebrated with MSD staff at the Mectizan manufacturing facility. The event was broadcast via internet to MSD worldwide.

Coincidentally, on that same day, Niger became the first country in Africa to be verified by the World Health Organization (WHO) for eliminating the transmission of river blindness—also a major milestone. When Merck donated Mectizan to control river blindness and alleviate the suffering from the disease, eliminating river blindness was not thought possible. Niger’s achievement and the progress being made in other countries demonstrate that elimination is indeed possible with sustained high treatment coverage. We congratulate Niger for its remarkable accomplishment!

In April, we continued the celebration in Togo, where the symbolic five billionth treatment was administered in a river blindness-endemic community. In May, we celebrated with partners during the 78th World Health Assembly in Geneva, and in November we celebrated with our partners in the Americas during the 35th Inter-American Conference on Onchocerciasis (IACO) in Bogotá, Colombia. In Bogotá we took the opportunity to honor Dr. Frank Richards with the Merck Mectizan Award, and an Award of Distinction was presented to the Pan American Health Organization.

The celebrations culminated with Merck’s announcement of the extension of its commitment to donate up to an additional 100 million Mectizan treatments annually through 2030. This donation supports co-administration of “triple therapy,” with ivermectin, diethylcarbamazine, and albendazole to accelerate the elimination of lymphatic filariasis (LF) in countries where river blindness is not endemic.

WHO Director-General Tedros Adhanom Ghebreyesus responded to the announcement with deep appreciation for Merck’s continued support, emphasizing that in-kind contributions and public-private partnerships are increasingly vital in the face of declining global health resources.

*Merck & Co., Inc. is known as MSD outside the United States and Canada.

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As we reach the midpoint of the WHO NTD Road Map 2021-2030, we reflect on the progress and challenges, particularly in 2025.

Cuts to USAID funding in 2025 affected critical support across 32 partner countries. We are encouraged by the swift and coordinated response by the NTD community to identify and implement mitigation measures to sustain progress and stay on course.

At the global level:

- Among various mitigation efforts, the Mectizan Donation Program made strategic adjustments to supply planning to prevent the accumulation of tablets at high risk of expiration, particularly in countries where sudden funding cuts could disrupt mass drug administration (MDA) activities;
- The Reaching the Last Mile Fund (RLMF) rapidly revised its 2025 budget allocation to support priority interventions in affected African countries; and
- The Task Force for Global Health convened a high-level NTD stakeholders' meeting in Bellagio, Italy, to mitigate the funding shortfall which threatens decades of progress. Stakeholders developed strategies to shape a sustainable future for country-led NTD programs.

At the country level, the Tanzanian ministry of health integrated other health interventions into MDA campaigns. Tanzania's NTD Program Manager presented these innovative strategies during the 73rd Mectizan Expert Committee/Albendazole Coordination (MEC/AC) meeting in May 2025.

Other countries implemented similar approaches, effectively turning this funding challenge into an opportunity for programmatic integration and improved efficiency.

As we reach the midpoint of the WHO NTD Road Map 2021-2030, we reflect on the progress and challenges, particularly in 2025. Despite the obstacles, I remain deeply encouraged by the resilience, dedication, and unwavering commitment of our partners.

Together, we are on track to achieve the NTD Road Map targets. With continued collaboration and determination, we will eliminate river blindness and LF, paving the way for a healthier and more equitable future for generations to come.

Finally, I would like to take this opportunity to express our sincere appreciation to the five MEC/AC members whose terms concluded in 2025: Prof. Alison Krentel, Dr. Tom Nutman, Prof. B.E.B. Nwoke, Dr. Sébastien Pion, and Dr. Kapa Ramaiah. We are deeply grateful for the invaluable guidance and dedication they demonstrated throughout their tenure.

Dr. Yao Sodahlon, Director
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Celebrating a Historic Milestone: 5 Billion Treatments...and Counting

The Mectizan Donation Program reached a tremendous milestone in 2025: five billion Mectizan treatments donated since 1988 to eliminate river blindness and lymphatic filariasis. We celebrated this milestone throughout the year with partners across the globe.



Merck's Ms. Marilyn Mainardi administers the ceremonial five billionth Mectizan treatment to Mrs. Amavi Amouzou in Kouvé Gboli, Togo. (Photo courtesy of Cloud9Media)

More!



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“Five Billion Mectizan Treatments...and Counting”: Merck remains steadfast in its 1987 commitment to donate Mectizan until river blindness and lymphatic filariasis are eliminated.



Top: Celebrating in Colombia with partners in the Americas including MSD, PAHO, OEPA, and The Carter Center. (Photo by José Augusto Gonzáles Garzón)

Bottom: At the special event at MSD Haarlem, partners flashed “five” for 5 billion treatments in a celebratory group photo. (Photo by Michel Campfens)

In 1987, Merck announced the historic donation of Mectizan—“as much as needed, for as long as needed”—for the treatment of river blindness worldwide. This commitment was the first donation of its kind, a safe and effective medicine that could be distributed on a massive scale to everyone in need.

In 1998, Merck partnered with GSK to expand the donation of Mectizan to eliminate LF with Mectizan and albendazole, donated by GSK, in countries where it is co-endemic with river blindness. The commitment was further expanded from 2017-2025 and again from 2025-2030 with a limited donation of 100 million treatments for triple therapy with Mectizan, diethylcarbamazine, and albendazole to accelerate the elimination of LF in countries where river blindness is not endemic.

Following the announcement in 1987, the scale-up of distribution was extraordinary. From a modest beginning of 170,000 Mectizan treatments donated in 1988, the number steadily increased to reach an all-time high of 385 million treatments in 2023. This scale-up reflects sustained commitment by partners and strengthened delivery systems by countries. This growth reached a historic milestone in 2025 with a cumulative five billion treatments donated, underscoring Merck’s profound and lasting commitment to donate Mectizan until both diseases are eliminated.

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MDP and Merck celebrated this milestone with many global partners throughout the year:

**HAARLEM, THE NETHERLANDS:
Celebrating with MSD**

On January 31, on World NTD Day, the year-long celebration began at the MSD facility in the Netherlands where Mectizan is manufactured. The event, which was live-streamed to MSD employees worldwide, included a panel discussion featuring experts from MSD, WHO, and the Uganda Ministry of Health.

**KOUVÉ GBOLI, TOGO:
Administration of the
5 Billionth Treatment**

On April 2, MDP and Togo’s Ministry of Health and Public Hygiene co-hosted a joyous celebration with the community of Kouvé Gboli. Merck’s Ms. Marilyn Mainardi administered the ceremonial five billionth treatment to community member Mrs. Amavi Amouzou. Community drug distributors demonstrated their critical role with entertaining demonstrations of health education and Mectizan distribution. MDP is grateful to Togo’s NTD Program Manager, Dr. Piham Gnessike, for his tireless work with the communities to organize this highly successful and well-attended event.

**GENEVA, SWITZERLAND:
World Health Assembly Side Event**

On May 20th, MDP and Merck co-hosted an event during the 78th World Health Assembly to bring stakeholders together including ministers of health, World Health Organization officials, NGOs, donors, Merck/MSD, and the Mectizan Expert Committee to reflect on progress toward elimination, the challenges we face, and our commitment to continue working together to end these two debilitating diseases.

**BOGOTÁ, COLOMBIA:
Recognition of Early Successes and
Encouragement for the Last Mile**

On November 19, MDP hosted a celebratory event during the 35th InterAmerican Conference on Onchocerciasis in Colombia, the first country in the world to eliminate river blindness. During the event, Dr. Frank Richards was presented with the Merck Mectizan Award and the Pan American Health Organization (PAHO) was presented with an award of distinction for leadership, guidance, and continued commitment to elimination of river blindness in the Americas.

FILM SERIES

On the occasion of five billion Mectizan treatments, a yearlong video journey tells the story of the people who made it possible, successes along the way, and plans for the future.



In Geneva, our panel was honored to include distinguished guests including the late Honorable Dr. Jenista Joakim Mhagama, Minister of Health, Tanzania. (Photo by Alexis Voelin)

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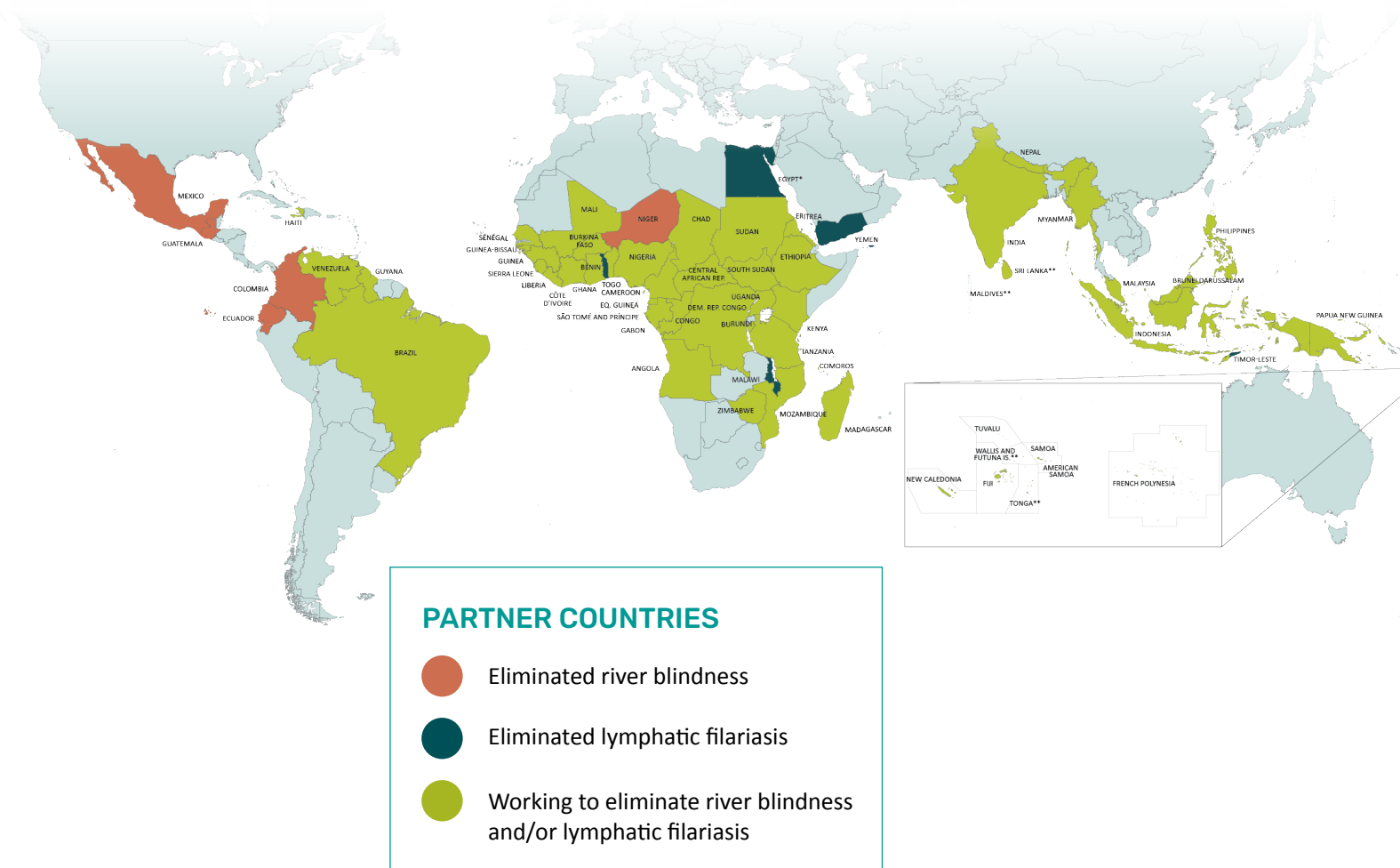
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The Global Reach of the Mectizan Donation Program

Mectizan has been donated since 1987 to eliminate river blindness and lymphatic filariasis. As of 2025, Mectizan has been donated to 64 countries and territories.



* Mectizan was used to clear up hotspots after Egypt was validated to be free of LF.

** Post-validation surveillance interventions

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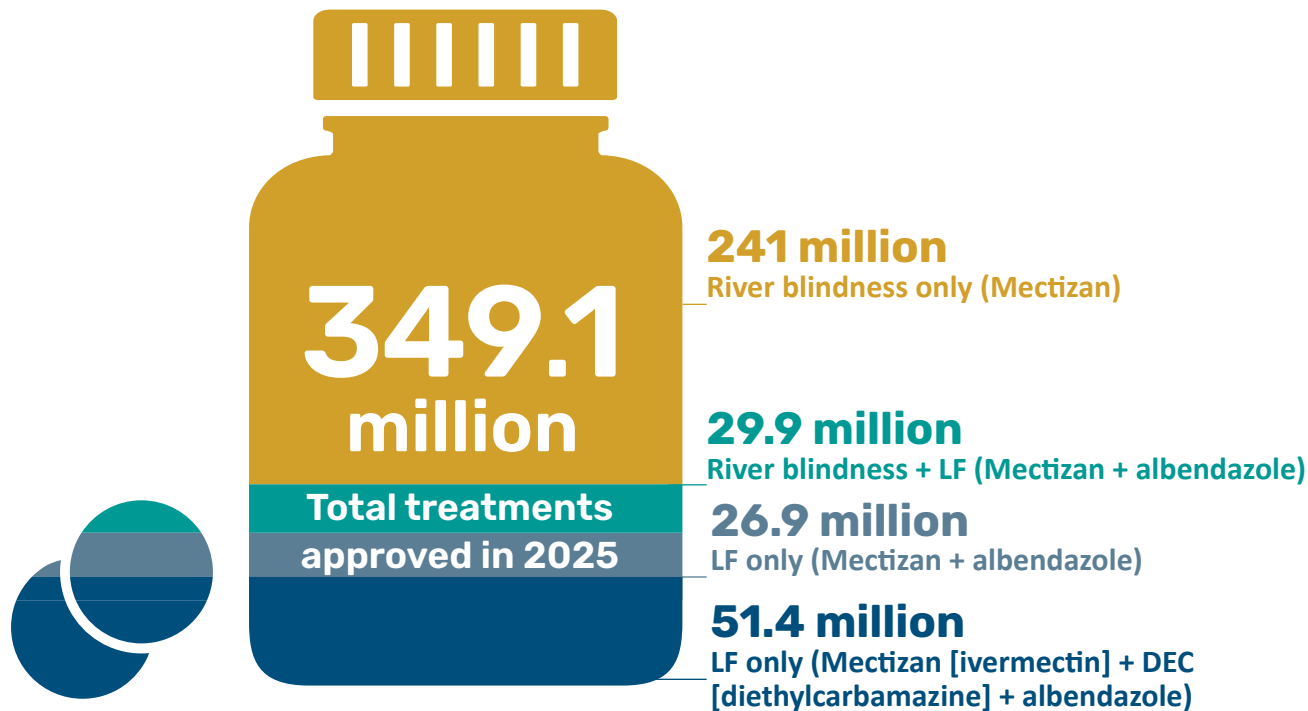
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Mectizan Treatments Approved for River Blindness and Lymphatic Filariasis Elimination

In 2025, the Mectizan Donation Program approved 349.1 million Mectizan treatments for mass drug administration (MDA) to eliminate onchocerciasis (river blindness) and lymphatic filariasis (LF) in 37 countries and territories around the world.

Figure 1: Total treatments approved 2025 (in millions)



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14.7*

billion

Mectizan tablets shipped from 1988 to 2025 * Equivalent of 5.24 billion treatments

6.3**

billion

Mectizan treatments approved from 1988 to 2025

** Treatments approved include treatments remaining in inventory reported in annual applications for Mectizan.



Community drug distributors in Kouvé Gboli, Togo, pose with a “dose pole” used in mass drug administration campaigns. (Photo by Julio Johnson)

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2025 ELIMINATION PROGRESS—OVERVIEW

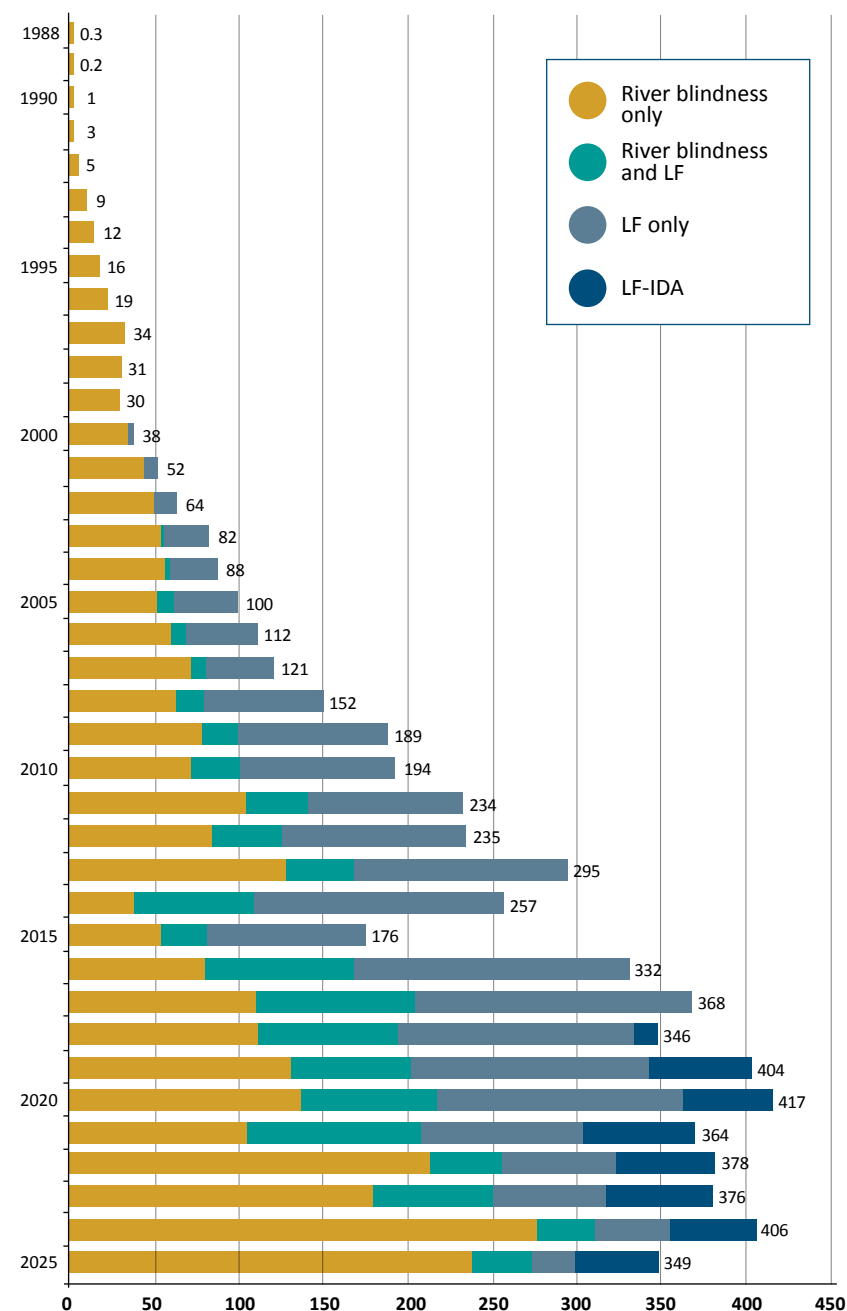
There was a 14% decrease in Mectizan treatments approved for eligible countries in 2025 compared to 2024 (**Figure 2**). Several factors contributed to the decrease. These included funding shortages that forced some countries to suspend their applications (Angola and Mozambique) or to implement a single round of treatment for river blindness instead of the usual two rounds (Ghana, Tanzania, and Togo). It is also worth noting that the applications for Guinea and Nigeria, which were due for approval in the fourth quarter of 2025, were deferred to the first quarter of 2026.

Between 1987-2025, more than 6.3 billion Mectizan treatments have been approved by the Mectizan Donation Program, and 14.7 billion 3-mg tablets have been shipped by Merck for the elimination of river blindness and lymphatic filariasis (LF) as of 2025.

The addition of two new IDA countries, Brunei Darussalam and Sri Lanka, brings the total of countries and territories served to 64.

Increasing numbers of people no longer need treatment for elimination of river blindness and LF. This is an encouraging indicator of progress toward the elimination of these diseases. For river blindness, 53.4 million no longer need treatment in 14 countries, a 12% increase over 2024. For LF where river blindness is co-endemic, more than 398 million people no longer need treatment in 21 countries—an 18% increase over the previous year.

Figure 2: Number of Treatments Approved 1988–2025 (in millions)



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Niger Eliminates River Blindness

On January 30, 2025, the World Health Organization officially verified that Niger has eliminated the transmission of river blindness.



WHO Director-General Dr. Tedros Adhanom Ghebreyesus (r.) presents a certificate marking Niger's achievement to Médecin Colonel-Major Garba Hakimi, Minister of Public Health, Population and Social Affairs (l.), at the World Health Assembly in May. (Photo: WHO/Pierre Albouy)

Niger is now the first country in Africa to eliminate the transmission of river blindness, an incredible milestone that was reached through vector control and annual mass distribution of Mectizan with sustained high treatment coverage.

This breakthrough was once thought not possible. In 1987, Mectizan was donated to control river blindness. Today, the WHO target is to eliminate transmission worldwide, permanently ending its transmission and protecting future generations from the threat of blindness. Dr. Allison Goldberg, president of the Merck Foundation, said, "We celebrate this important accomplishment with the government and people of Niger, WHO, and the non-governmental organizations and donor community that helped make it possible."

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Merck Renews Donation for LF Elimination in Countries Non-endemic for River Blindness

In November of 2025, Merck announced an extension of its donation of up to 100 million Mectizan treatments annually through 2030, bolstering the global fight against lymphatic filariasis (LF).

This commitment supports the WHO’s “triple therapy” strategy, which co-administers Mectizan (ivermectin, donated by Merck), DEC (diethylcarbamazine), and albendazole (donated by GSK) to interrupt disease transmission.

The renewal follows significant milestones, including Timor-Leste becoming the first country to eliminate LF using this approach in 2024. Merck CEO Robert M. Davis explained: “By extending our commitment, we aim to ensure that national LF elimination programs in endemic countries continue to have reliable access to the treatments needed to protect vulnerable populations and strengthen health systems.”

WHO Director-General Dr. Tedros Adhanom Ghebreyesus praised the public-private partnership, noting that “These partnerships have brought us so far in the fight against LF and are the foundation for eliminating many neglected tropical diseases. Together, we can finish the job.”



In Nepal, community members and health workers pause during a mass drug administration campaign for lymphatic filariasis. (Photo from RTI International/Nabin Baral)

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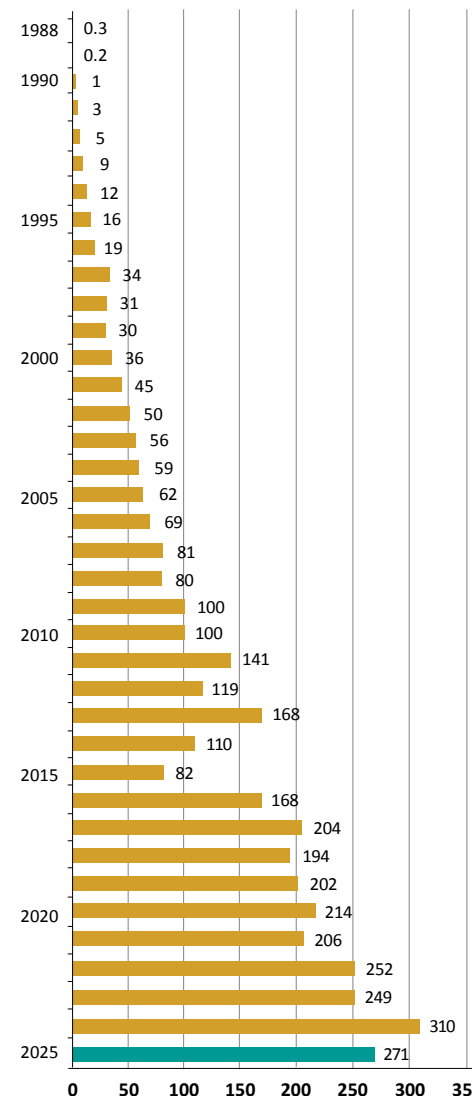
River Blindness Elimination in 2025

In 2025, 270.9 million Mectizan treatments were approved (Figure 3) for the elimination of river blindness in 24 countries (Bénin, Brazil, Burkina Faso, Burundi, Cameroon, Central African Republic, Chad, Congo, Côte d’Ivoire, Democratic Republic of the Congo, Ethiopia, Ghana, Guinea, Guinea-Bissau, Liberia, Malawi, Mali, Nigeria, Sierra Leone, South Sudan, Tanzania, Togo, Uganda, and Venezuela). 241 million of those treatments were approved for communities endemic for river blindness alone and 29.9 million treatments were approved for co-administration with albendazole (donated by GSK) in communities where river blindness and LF are co-endemic in twelve countries: Burkina Faso, Central African Republic, Chad, Congo, Democratic Republic of the Congo (DRC), Ethiopia, Ghana, Guinea-Bissau, Liberia, Nigeria, Sierra Leone, and South Sudan.

Of the 270.9 million total Mectizan treatments approved for river blindness, 30.6 million were for a second round of MDA to accelerate the elimination of river blindness in eight countries: Brazil, Burkina Faso, DRC, Ethiopia, Malawi, South Sudan, Uganda, and Venezuela.



Figure 3: Treatments Approved for River Blindness, 1988–2025 (in millions)



A significant milestone was reached in early 2025, when Niger was verified by WHO for eliminating transmission of river blindness—the first country in Africa to accomplish this goal. Sénégal continues post-treatment surveillance and is approaching the same milestone.



In Togo, a team of Community Drug Distributors provides medicines to a family for river blindness elimination along with other health services. (Photo by Julio Johnson)

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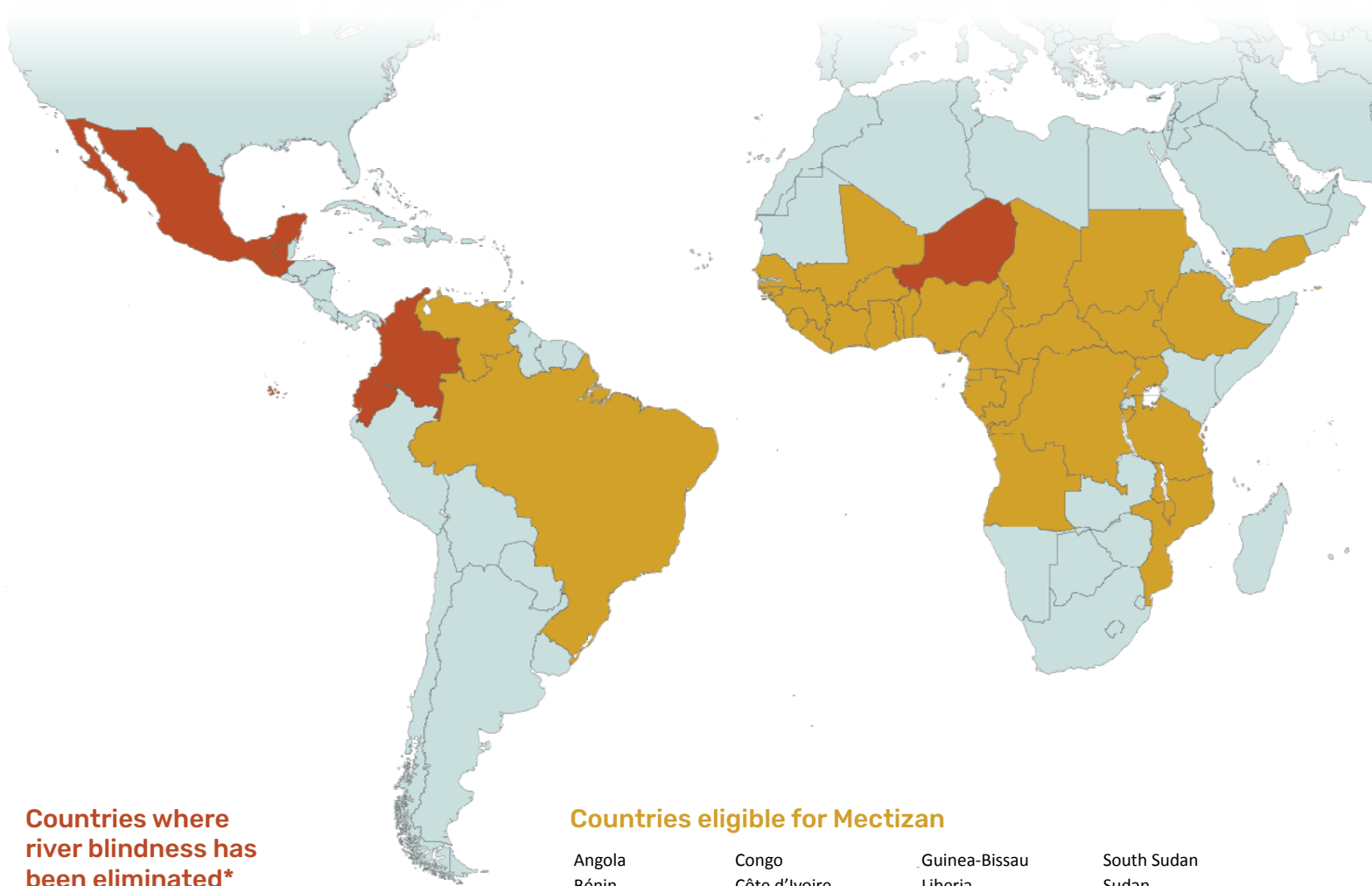
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River Blindness-Endemic Countries



Countries where river blindness has been eliminated*

- Colombia
- Ecuador
- Guatemala
- Mexico
- Niger

Countries eligible for Mectizan

- | | | | |
|--------------------------|----------------------------------|---------------|-------------|
| Angola | Congo | Guinea-Bissau | South Sudan |
| Bénin | Côte d'Ivoire | Liberia | Sudan |
| Brazil | Democratic Republic of the Congo | Malawi | Tanzania |
| Burkina Faso | Equatorial Guinea | Mali | Togo |
| Burundi | Ethiopia | Mozambique | Uganda |
| Cameroon | Gabon | Nigeria | Venezuela |
| Central African Republic | Ghana | Sénégal | Yemen |
| Chad | Guinea | Sierra Leone | |

* Elimination of transmission

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Program Downscaling for River Blindness



A refugee from Cameroon now living in Nigeria, Awok Bernard Ndoma lost his sight to river blindness in 1995. (Photo from RTI International/ Etinosa Yvonne)

More than 53 million people in 14 countries in Africa and the Americas no longer need treatment as transmission is suspected to have been interrupted or eliminated. Of these, 7.3 million people remain under treatment for LF. Post-treatment surveillance for river blindness will begin in these communities when they pass the transmission assessment surveys required to determine when treatment for LF can be stopped.

Table 1 shows the population no longer needing treatment since transmission is suspected to have been either interrupted or eliminated.

Table 1: Mectizan Treatment Stopped for River Blindness (as of December 2025)

Country	Onchocerciasis foci no longer needing treatment	Total onchocerciasis foci/districts	Population in onchocerciasis foci where treatment has stopped	Population in onchocerciasis foci where treatment has stopped but still under treatment for LF
Colombia ¹	1	1	1,515	
Ecuador ¹	1	1	30,015	
Equatorial Guinea	4	4	285,442	
Ethiopia	29	385	2,925,447	131,647
Guatemala ¹	4	4	286,521	
Mali	2	22	1,021,662	0
Mexico ¹	3	3	227,118	
Nigeria ³	122	488	39,852,551	7,154,661
Sénégal	8	8	642,705	
Sudan ¹	2	4	372,682	
Tanzania	5	30	1,329,669	0
Togo	4	38	954,084	
Uganda ^{1,2}	16	17	5,328,664	0
Venezuela	2	3	122,128	
Total	203	1,008	53,380,202	7,286,309

¹ In the Americas, Sudan, and Uganda, the geographical unit is a focus rather than a district.

² Treatment stopped in part of the northern focus: total population = 1,121,520.

³ Treatment resumed in hotspots detected in 3 LGAs in Enugu State (Ezeagu, Nkanu East, Uzo-Uwani) and 6 LGAs in Kaduna State.

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Lymphatic Filariasis Elimination in 2025

In 2025, 108.2 million Mectizan treatments were approved for LF elimination worldwide. Of these, 56.8 million were approved in African countries where Mectizan (donated by Merck) and albendazole (donated by GSK) are co-administered—a significant decrease compared to treatments approved in 2024—and 51.4 million were approved in countries where river blindness is not endemic to implement triple therapy, also known as IDA, with Mectizan (ivermectin), DEC (diethylcarbamazine), and albendazole. By the end of 2025, a total of 3.5 billion Mectizan treatments had been approved for the elimination of LF, either alone or in communities where it is co-endemic with river blindness, since 2000 (Figure 4).

 **Application approvals for LF elimination in river blindness-endemic countries under treatment with Mectizan and albendazole**

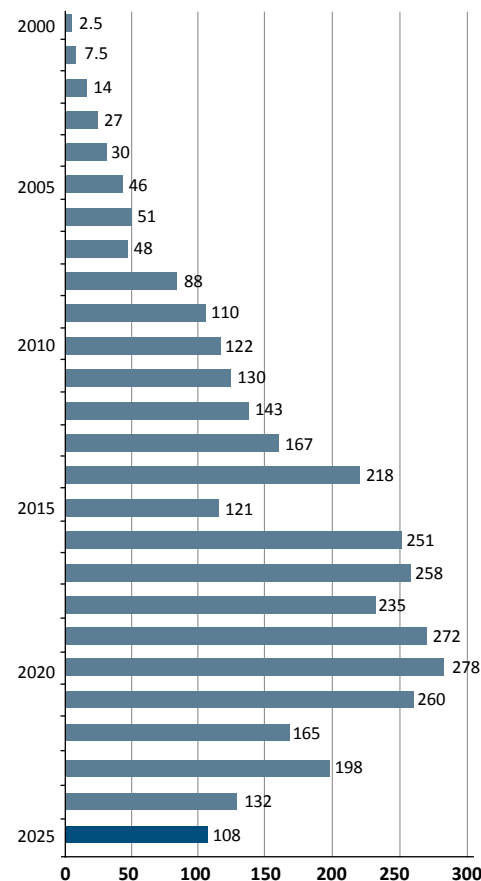
In Africa where Mectizan and albendazole are co-administered for LF elimination, the 56.8 million treatments approved in 14 countries included 29.9 million Mectizan treatments for distribution in communities where LF and river blindness are co-endemic and 26.9 million treatments for distribution in communities endemic for LF only. The lower number of treatments approved in 2025 compared with 2024 reflects not only major program downscaling but also the temporary suspension of donation approvals for 234 implementation units in six countries (64 million treatments) while awaiting the results of planned stop-treatment surveys (first transmission assessment survey - TAS1).

 **Application approvals for the implementation of IDA (ivermectin, DEC, and albendazole) for LF elimination in countries where river blindness is not co-endemic**

In 2025, Merck renewed its commitment to donate up to 100 million Mectizan treatments annually for another five years for the implementation of triple therapy to accelerate LF elimination in countries where river blindness is not endemic. This donation is in addition to the unlimited donation of Mectizan for the global elimination of river blindness, and for the elimination of LF in African countries and Yemen co-endemic for river blindness.

A total of 51.4 million treatments were approved in 2025 for IDA in 11 countries and territories: Brunei Darussalam, French Polynesia, India, Indonesia, Madagascar, Malaysia, Papua New Guinea, the Philippines, Sri Lanka, Wallis and Futuna, and Zimbabwe. Brunei Darussalam initiated IDA after detecting LF transmission in one district during TAS2. Sri Lanka joined Maldives, Tonga, and Wallis and Futuna in implementing IDA to address LF infections detected during post-validation surveillance. There are now 27 countries and territories that have adopted the IDA strategy to eliminate LF.

Figure 4: Treatments Approved for Lymphatic Filariasis, 2000–2025 (in millions)



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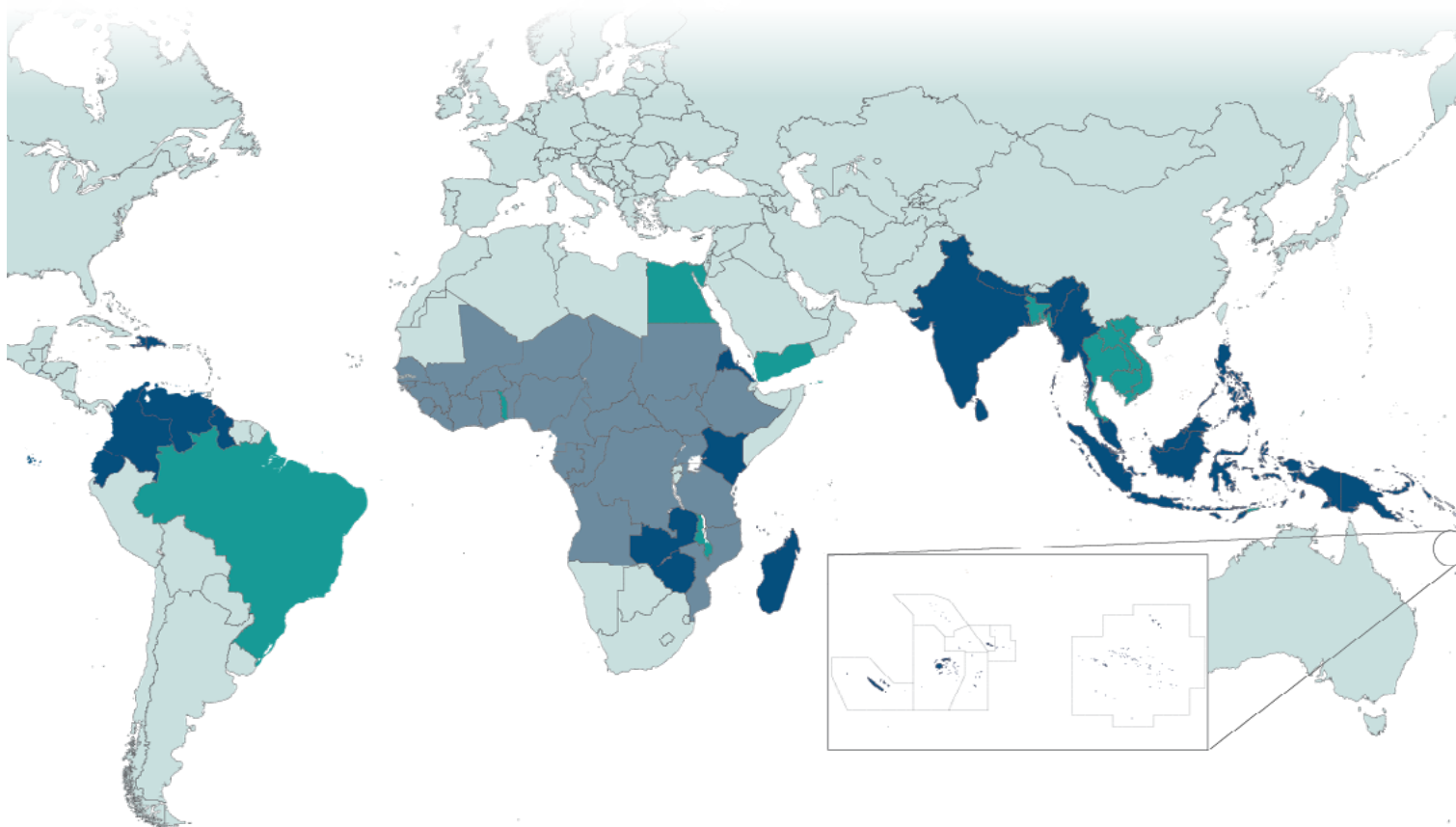
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Lymphatic Filariasis-Endemic Countries



Countries where LF has been eliminated*

- Bangladesh
- Brazil
- Cambodia
- Cook Islands
- Egypt
- Kiribati
- Lao PDR
- Malawi
- Maldives
- Marshall Islands
- Niue
- Palau
- Thailand
- Timor-Leste
- Togo
- Tonga
- Vanuatu
- Vietnam
- Wallis and Futuna
- Yemen

Countries eligible for Mectizan and albendazole

- Angola
- Bénin
- Burkina Faso
- Cameroon
- Central African Republic
- Chad
- Congo
- Côte d'Ivoire
- Democratic Republic of the Congo
- Equatorial Guinea
- Ethiopia
- Gabon
- Ghana
- Guinea
- Guinea-Bissau
- Liberia
- Mali
- Mozambique
- Niger
- Nigeria
- Sénégal
- Sierra Leone
- South Sudan
- Sudan
- Tanzania
- Uganda

Countries & territories eligible for Mectizan, DEC, and albendazole (IDA)*

- American Samoa*
- Brunei Darussalam*
- Comoros*
- Dominican Republic*
- Eritrea*
- Federated States of Micronesia*
- Fiji*
- French Polynesia*
- Guyana*
- Haiti*
- India*
- Indonesia*
- Kenya*
- Madagascar*
- Malaysia*
- Myanmar*
- Nepal*
- New Caledonia*
- Papua New Guinea*
- Philippines*
- Samoa*
- São Tomé and Príncipe*
- Sri Lanka*
- Tuvalu*
- Zambia*
- Zimbabwe*

* Elimination as a public health problem

* Countries in italics have been approved for Mectizan

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Program Downscaling for LF Elimination in Countries Where River Blindness Is Endemic

The number of people who no longer need treatment with Mectizan and albendazole for LF elimination increased from 337.8 million in 2024 to 398.5 million in 21 countries (**Table 2**)—an 18% increase in one year. Among those, approximately 141.5 million will continue to receive Mectizan for river blindness.

Guinea, Sénégal, and Sierra Leone have now joined Bénin, Cameroon, Côte d’Ivoire, Mali, Niger, and Uganda in the five-year post-treatment surveillance phase to ensure that LF has been eliminated as a public health problem.

Table 2: Mectizan + Albendazole Treatment Stopped for Lymphatic Filariasis

Country	LF districts no longer needing treatment	Total LF districts	Population in LF districts no longer needing treatment	Population still receiving treatment for onchocerciasis in districts where LF treatment is stopped
Bénin**	50	50	7,302,484	4,168,154
Burkina Faso	67	70	24,351,994	303,731
Cameroon**	146	146	20,165,330	12,705,038
Côte d’Ivoire**	99	99	28,399,914	23,562,515
DRC	97	245	22,087,547	11,657,363
Ethiopia	66	120	4,051,965	2,275,095
Ghana	117	120	17,167,013	3,616,175
Guinea**	24	24	9,603,852	9,603,852
Guinea-Bissau	33	79	644,046	644,046
Liberia	8	13	2,778,465	2,778,465
Malawi*	28	28	21,028,310	3,415,046
Mali**	75	75	25,771,044	7,765,293
Mozambique	62	114	13,670,451	1,215,266
Niger** ***	55	55	22,771,360	0
Nigeria	348	583	93,429,983	41,176,150
Sénégal**	51	51	11,221,610	0
Sierra Leone**	16	16	10,544,452	8,166,437
Tanzania	123	131	41,576,899	6,162,777
Togo*	9	9	1,812,695	1,639,778
Uganda**	69	69	19,955,050	586,160
Yemen*	11	11	136,901	83,432
Total	1,554	2,108	398,471,367	141,524,773



Degnon’s damaged legs and feet make it difficult to continue his work as a carpenter in rural Togo. (Photo by Julio Johnson)

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* Validated by WHO as having achieved elimination as a public health problem.

** All endemic districts are under post-treatment surveillance (PTS).

*** MDA in post-treatment surveillance hotspot villages.



Dr. Frank Richards Presented with 2025 Merck Mectizan Award

Dr. Frank O. Richards Jr. was the recipient of the 2025 Merck Mectizan Award, honored for 30+ years of leadership in the elimination of river blindness and lymphatic filariasis.

Dr. Richards oversaw early efforts in the Americas that led to the first four countries in the world verified as having eliminated the transmission of river blindness.

Throughout his career, he fearlessly challenged the belief that river blindness elimination was not feasible in Africa. His strategic guidance helped five African nations achieve subnational elimination of river blindness, ultimately culminating in Niger being verified this year as the first country on the continent to eliminate river blindness. His vision fundamentally shifted the global health landscape, proving that elimination is achievable through dedication and strategic public health partnerships.



Dr. Richards accepts the Merck Mectizan Award. (Photo by José Augusto Gonzáles Garzón)

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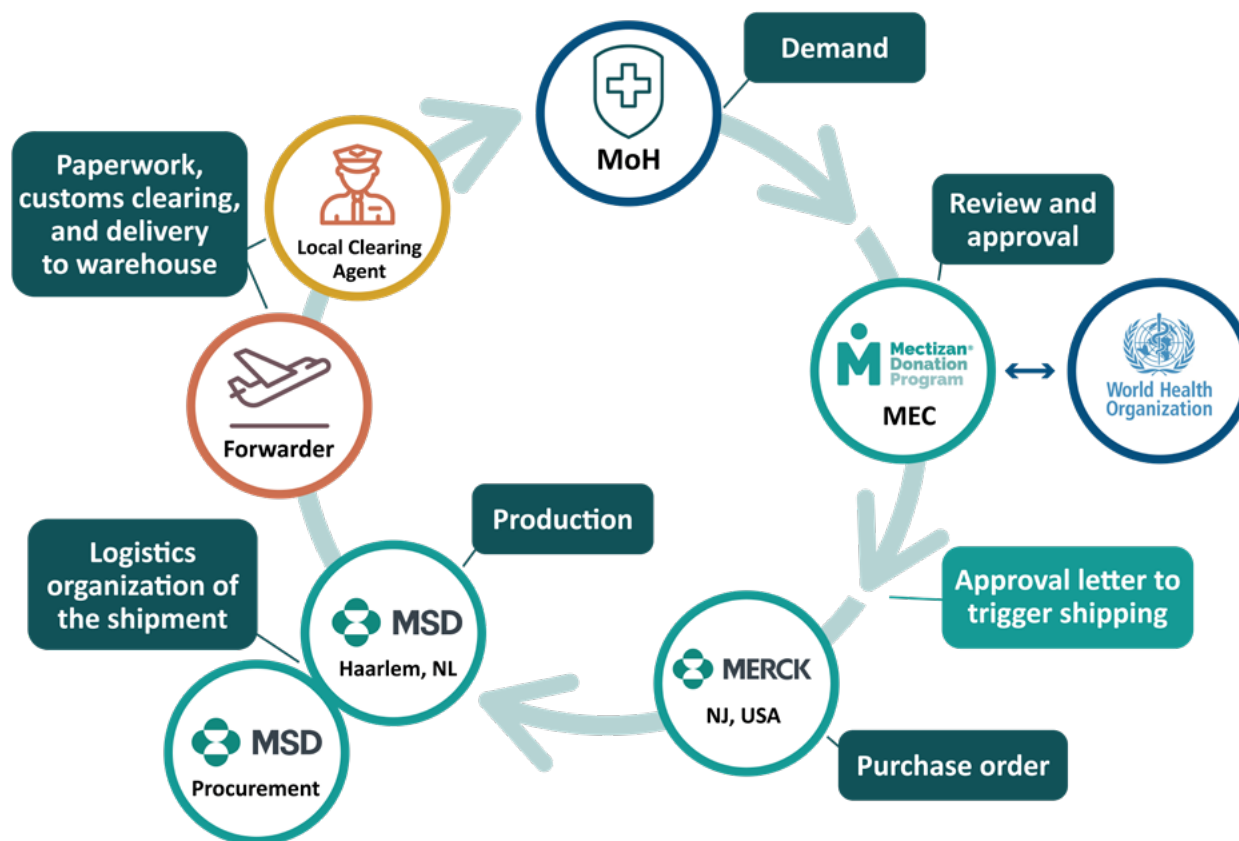
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Streamlining the Mectizan Supply Chain



In 2025 Merck (known as MSD outside the USA and Canada) moved Mectizan shipping operations from Fareva Mirabel in Riom, France, to the MSD site in Haarlem, the Netherlands, where Mectizan is manufactured. This change will streamline the supply process while continuing to ensure that Mectizan is supplied in a timely manner to partner countries. MDP is grateful to the dedicated team at Fareva Mirabel who have managed shipping operations since the program's inception and who continued their excellent work even after MSD's production operations were taken over by Fareva Pharmaceutical Group in 2021.

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Activities of the Mectizan Expert Committee

The Mectizan Expert Committee/Albendazole Coordination (MEC/AC) is the independent technical body of experts providing oversight for the donation of Mectizan for river blindness elimination and the coordination of the co-distribution of Mectizan and albendazole (donated by GSK) for LF elimination.



Spring meeting participants in Geneva. The MEC/AC members are: Chair, Prof. Gilbert Burnham (USA); LF expert Prof. Yaya Coulibaly (Mali); parasitologist and LF expert Prof. Monique Ameyo Dorkenoo-Agbeko (Togo); LF expert Dr. Kapa Ramaiah (India); behavioral health scientist Dr. Alison Krentel (Canada); parasitologist Dr. Tom Nutman (USA); entomologist, parasitologist, and onchocerciasis expert Prof. B.E.B. Nwoke (Nigeria); and parasitologist and LF and onchocerciasis expert Dr. Sébastien Pion (France).

The MEC/AC meets twice yearly for progress updates from MDP and WHO headquarters and regional offices, with additional reports on emerging topics by invited speakers and partners.

The 73rd meeting of the MEC/AC was held April 20-21, 2025, in Geneva, Switzerland. The MEC and guests discussed the impact of recent US Government funding cuts on the supply of Mectizan and the implementation of the country-level programs. Tanzania's PC-NTDs Program Manager provided a report on the country's work to identify domestic alternative solutions to mitigate the impact of funding cuts.

The 74th MEC/AC was convened virtually on November 4-5, 2025. Key discussions included reports on countries impacted by US Government funding cuts, the challenges presented by *Loa loa* infection, supply chain difficulties, progress in moxidectin development, and implications of the WHO restructuring of NTD programs.

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Looking to the Future

MDP is committed to providing Mectizan for river blindness and lymphatic filariasis elimination in our partner countries. This year, Niger’s historic achievement of river blindness elimination and Merck’s renewal of the expanded donation for “triple therapy” against LF provided momentum for efforts to overcome obstacles on the way to achieving the goals of the WHO 2021-2030 NTD Road Map.



Road Map Milestones

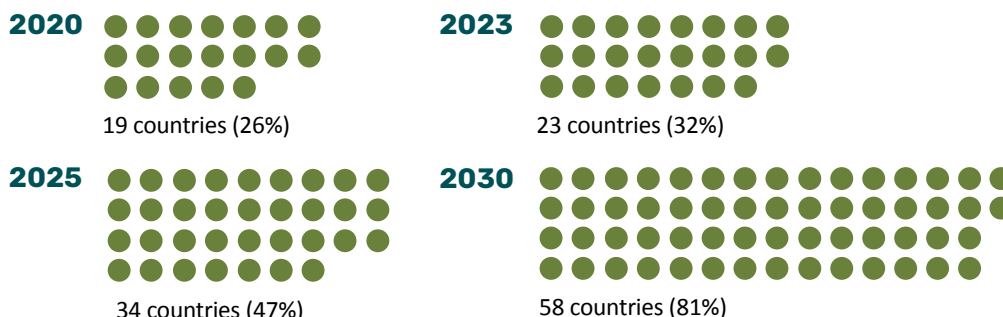
The World Health Organization publication *Ending the neglect to attain the Sustainable Development Goals: a road map for neglected tropical diseases 2021–2030* provides these targets for the elimination of river blindness and lymphatic filariasis.



ONCHO GOALS: The 2021-2030 WHO NTD Road Map targets for verification of elimination of river blindness transmission:



LF GOALS: The 2021-2030 WHO NTD Road Map targets for validation of elimination of LF as a public health problem:



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A program at



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The Mectizan Donation Program is an international program to eliminate river blindness and lymphatic filariasis, primarily funded by Merck & Co., Inc., Rahway, N.J., U.S.A.,* with support from GSK.

Through the Mectizan Donation Program, Merck & Co., Inc. donates Mectizan® for the elimination of the transmission of river blindness and for the elimination of lymphatic filariasis (LF) as a public health problem. For the elimination of LF where river blindness is co-endemic in Africa and Yemen, Mectizan is co-administered with albendazole, donated by GSK. In countries eligible for “triple therapy,” Mectizan and albendazole are co-administered with diethylcarbamazine (DEC) to accelerate LF elimination in some communities.

The Mectizan Donation Program is a program at The Task Force for Global Health.

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*Merck & Co., Inc. is known as MSD outside the USA and Canada.

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