

# The Opportunity

You have the opportunity to leave a lasting legacy by eliminating a disease from our country within the next five years. The One Disease Crusted Scabies elimination campaign will not only eliminate a serious disease, but also contribute to Closing the Gap in Indigenous health. With a targeted budget of \$18m we will eliminate Crusted Scabies from Australia by 2022.

## The Issue

Once thought to be rare, we now know 1/366\* Indigenous Australians suffer from the neglected and devastating skin disease Crusted Scabies. When left untreated, 50% of people with this disease could die within 5 years\*\*. Crusted Scabies is highly contagious, and all too frequently cases can lead to repeat hospitalisations.

People with Crusted Scabies are also reservoirs of the disease and core transmitters of scabies. Seven in 10 Indigenous children suffer from scabies at least once before their first birthday. Repeat scabies infections have proven links with Rheumatic Fever and Heart Disease and kidney conditions.

Elimination of Crusted Scabies is the critical first step to addressing simple scabies. Scabies is the only category A neglected tropical disease that doesn't have a roadmap for control by the World Health Organisation.

## The People

One Disease is led by those who have eliminated disease before.

### **Professor Frank Bowden**

Frank is an infectious disease and sexual health physician. He is the former Director of the National Committee supervising the elimination of Donovanosis from Australia, and is continuing research into the control of infectious diseases through public health principles.

### **Professor Hugh Taylor**

Hugh's research into the causes and prevention of blindness has led him to working with Fred Hollows, as well as 13 years spent with the John Hopkins University. His current focus is on Indigenous eye health and the elimination of Trachoma.

### **Professor Brian Schmidt**

Brian is the Vice Chancellor of The Australian National University. He formed the High-Z SN search team who won Science Magazine's 'Breakthrough of the Year' in 1998. He has won a Nobel Prize for his ground-breaking research on supernovae and the expansion of the universe.

### **Professor Ngiare Brown**

Ngiare is a senior Aboriginal medical practitioner with qualifications in medicine, public health and primary care, and has studied bioethics, medical law and human rights. She was the first identified Aboriginal medical graduate from NSW, and was one of the first Aboriginal doctors in Australia.

### **Professor Jonathan Carapetis**

As Director of the Telethon Institute for Child Health Research, Jonathan's work has revealed a link between Strep A skin infections and the potentially fatal Rheumatic Heart Disease. In 2008 he received the Northern Territory's Australian of the Year award.

### **Dr Sam Prince**

Sam is the Founder and Chair of One Disease. He is a humanitarian, philanthropist, entrepreneur and medical doctor. He was awarded 'Young Australian of the Year, ACT' in 2012, in recognition for his work at One Disease.

## The Elimination Plan

The success of disease elimination with a singular focus has been proven - internationally with Small Pox and here in Australia with Donovanosis and soon to be Trachoma.

One Disease is the only organisation in the world that has devoted six years to understanding and developing a transformational model with Indigenous Australians that puts Indigenous health in Indigenous hands. The success of our model was published in the Medical Journal of Australia in 2014\*\*\*.

Our four-point plan towards elimination is:

### **1. Educate Community and Sector**

Delivery of education to patients, their families and community and health service providers to improve detection and diagnosis of Crusted Scabies and minimise episodes that require hospitalisation.

### **2. Care Navigation**

Facilitate the central coordination of hospital and community health services to bridge current gaps and ensure continuity of care for this chronic condition.

### **3. Embed Systems for Disease Management**

Establish and embed systems for efficient and efficacious management of the disease within existing cultural frameworks and health service systems.

### **4. Evaluation of Model**

Program evaluation using Normalisation Process Theory, which demonstrates sustainability of model (where One Disease is no longer needed) and learnings are applicable to other Indigenous health issues.

## The Impact

- Elimination of a globally neglected, preventable disease from the Northern Territory by 2019, and the rest of Australia by 2022.
- Improved health for Indigenous Australians through prevention of such conditions as Rheumatic Fever and kidney disease.
- Transformational and sustainable model for Indigenous healthcare that puts Indigenous health in Indigenous hands.
- Cost savings to tax payer and Government - a one off investment of \$18m will save approximately \$50m per annum in ongoing management of Crusted Scabies\*\*\*\*.

## For further information contact

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# ONE DISEASE

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\*Indigenous people in remote communities of the Top End of the Northern Territory, One Disease. \*\* Roberts LJ, Huffam SE, Walton SF, Currie BJ (2005) Crusted scabies: clinical and immunological findings in seventy-eight patients and a review of the literature. Journal of Infection 50: 375-381. PMID: 15907543. \*\*\*Lokuge et al (2014), Crusted scabies in remote Australia, a new way forward: lessons and outcomes from the East Arnhem Scabies Control Program, Medical Journal of Australia. \*\*\*\*The Northern Territory (NT) is currently spending approximately \$17m per annum to manage hospitalisation related to Crusted Scabies. Based on current prevalence of Crusted Scabies in the NT and the remote Indigenous population across the Top End of Australia (NT, QLD, WA) we estimate the annual cost for the management of Crusted Scabies to be in excess of \$50m per annum.