

PRESS RELEASE

First Preschool-Aged Child Receives Arpraziquantel for the Treatment of Schistosomiasis

- Developed by the Pediatric Praziquantel Consortium, arpraziquantel reaches the first preschool-aged child in Uganda
- Arpraziquantel addresses a critical treatment gap for schistosomiasis
- The Consortium's work to develop, register, and provide access to arpraziquantel is an important contribution to the elimination of schistosomiasis as a public health problem

4 March 2025, Utrecht, The Netherlands. The [Pediatric Praziquantel Consortium](#) is proud to announce that the first preschool-aged child has been treated with arpraziquantel, a newly developed pediatric treatment option for schistosomiasis, a condition classified by the World Health Organization (WHO) as one of 21 neglected tropical diseases (NTDs). This milestone marks a significant step forward in addressing one of the world's most prevalent parasitic diseases.

A Solution to a Critical Health Challenge

Schistosomiasis, also known as bilharzia, affects an estimated 250 million people worldwide¹, including approximately 50 million preschool-aged children, mainly in sub-Saharan Africa. The disease can lead to malnutrition, anemia, stunted growth, and cognitive impairment. In extreme cases, it causes chronic organ damage or death. Until now, a child-friendly treatment specifically tailored for preschool-aged children was not available, leaving millions of preschoolers at risk. According to the [WHO guideline](#) for the control and elimination of schistosomiasis, children aged two years and older should be included in preventive chemotherapy for schistosomiasis.

New Treatment

Arpraziquantel, the new pediatric treatment option, is a 150 mg dispersible tablet designed specifically for children aged three months to six years. It is palatable and easily administered to preschool-aged children. It is also stable in hot and humid climates, making it ideal for use in endemic regions.

¹ World Health Organization, 1 February 2023. Schistosomiasis Fact Sheet. <https://www.who.int/news-room/fact-sheets/detail/schistosomiasis>

Arpraziquantel was granted a [positive scientific opinion by the European Medicines Agency \(EMA\)](#) in December 2023 and included in the [WHO's List of Prequalified Medicinal Products](#) in May 2024. Inclusion in the WHO's List of Essential Medicines Products is expected in 2025.

"We are proud to have reached this critical milestone," said Peter Steinmann, public health specialist at the Swiss Tropical and Public Health Institute and co-lead of the Consortium's [ADOPT program](#). "By addressing the medical needs of preschool-aged children, we are aiming to fulfill a significant treatment gap, contributing to the fight against schistosomiasis."

Impact on Public Health

Treating preschool-aged children is essential to lowering the disease burden on individuals and public health systems. Early intervention prevents complications, possibly reducing the need for costly medical care later in life. It also improves educational outcomes and long-term productivity, potentially generating cost savings in affected countries.

"As the first country to introduce arpraziquantel to children under five, Uganda has reached a historic milestone, expanding access to a group that has never previously benefited from treatment," said Prudence Beinamaryo, Program Manager, Bilharzia & Worm Control, Ministry of Health Uganda.

Dr Hilda Kyarisiima, Senior Medical Officer & ADOPT Program Principal Investigator, Ministry of Health Uganda added: *"Lessons from these first treatments in Uganda will inform future scale-up and significantly contribute to achieving the schistosomiasis targets outlined in the WHO NTD Roadmap 2030."*

First Treatment Roll-Out and Next Steps

The first treatment was administered in Uganda as part of the Consortium's ADOPT program, an implementation research study that focuses on the integration of arpraziquantel into existing healthcare platforms. The treatment is being introduced through the country's NTD Mass Drug Administration Platform. The overall aim of the ADOPT study is to prepare for the widespread introduction of arpraziquantel in schistosome-endemic communities. Beyond Uganda, the introduction of arpraziquantel will be extended to other sub-Saharan African countries, starting with Côte d'Ivoire, Kenya, Tanzania, and Senegal.

Global Collaboration and Sustainable Access

The Consortium is working in close collaboration with local ministries of health and global partners to facilitate equitable and sustainable access to arpraziquantel. The treatment will be available on an at-cost basis in sub-Saharan African countries, supporting long-term, sustainable health outcomes. This effort contributes to the elimination of schistosomiasis as a public health problem and thereby also the United Nations' Sustainable Development Goals (SDGs), in particular SDGs 3 (Good Health and Wellbeing) & 17 (Partnerships for the Goals).

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For the media

For more information and interview requests, please contact Daniela Bonora, Project Communications Manager at Lygature, via daniela.bonora@lygature.org or info@pediatricpraziquantelconsortium.org or +31 6 48 40 13 04

Notes to Editors

1. About Schistosomiasis

Schistosomiasis (also known as bilharzia) is one of the most prevalent parasitic diseases worldwide and a very important one in terms of public health burden and economic impact. It is a poverty-related disease that is widespread in tropical and subtropical regions where large sections of the population have no access to clean water. Flatworms transmit the disease and people become infected with the parasite through contact with freshwater, for example, while working, swimming, fishing, or washing their clothes. The minuscule larvae penetrate human skin, enter the blood vessels, and attack internal organs. The infection rate is particularly high among children. Schistosomiasis is a condition that is classified by the World Health Organization (WHO) as one of 21 neglected tropical diseases (NTDs). It is estimated that over [250 million people are affected](#) by the disease, including an estimated 50 million preschool-aged children, mainly in sub-Saharan Africa.

2. About the Pediatric Praziquantel Consortium

The Pediatric Praziquantel Consortium is an international public-private partnership that aims to reduce the global disease burden of schistosomiasis and improve child health by addressing the medical needs of infected preschool-aged children. Its mission has been to develop, register, and provide access to a suitable pediatric drug for treating schistosomiasis in children 3 months to 6 years of age.

The Consortium is financially supported by Merck KGaA, Darmstadt, Germany; in-kind contributions from the Consortium's partners; and grants from the Bill and Melinda Gates Foundation (2012), the Global Health Innovative Technology Fund (GHIT) (2014, 2015, 2016, 2019 & 2020), and the European & Developing Countries Clinical Trials Partnership (EDCTP), under its second program supported by the European Union (2018 & 2021).

For more information, and to see an overview of all Consortium partners, visit the Consortium website: www.pediatricpraziquantelconsortium.org

3. About Arpraziquantel

The current standard of care treatment for schistosomiasis is praziquantel, [listed on WHO's list of essential medicines](#), and suitable for school-aged children and adults. Extending the range of options for the treatment of schistosomiasis, arpraziquantel is tailored for preschool-aged children against *Schistosoma mansoni* and *Schistosoma haematobium*. Tested in [clinical development](#), under the responsibility of Merck KGaA, Darmstadt, Germany, arpraziquantel contains the pharmacologically active enantiomer of praziquantel. It is a 150mg dispersible tablet. The prototype of its pediatric formulation was developed by Astellas in Japan and further optimized by Merck KGaA, Darmstadt, Germany. The manufacturing process served to produce clinical trial supplies from Merck KGaA, Darmstadt, Germany and Farmanguinhos in Brazil. Future manufacturing is planned to be done by Farmanguinhos and Universal Corporation Ltd., in Kenya, which is preparing for extensive local production capacities in and for Africa.

In developing arpraziquantel, the Pediatric Praziquantel Consortium established a pediatric drug development program, divided into four major steps: preclinical development, clinical development, registration, and access. All details can be found on the [Consortium website](#).

4. Consortium Partners

- **Merck KGaA, Darmstadt** (Germany)
- **Astellas Pharma Inc.** (Japan)
- **Swiss Tropical and Public Health Institute** (Switzerland)
- **Lygature** (The Netherlands)
- **Farmanguinhos** (Brazil)
- **Unlimit Health** (United Kingdom)
- **Kenya Medical Research Institute** (Kenya)
- **Université Félix Houphouët-Boigny** (Côte d'Ivoire)
- **Klinikum rechts der Isar der Technischen Universität München** (Germany)
- **Ministry of Health Côte d'Ivoire** (Côte d'Ivoire)
- **African Institute for Health and Development** (Kenya)

Other collaborators that contribute to the mission of the Pediatric Praziquantel Consortium:

- **Makerere University School of Public Health** (Uganda)
- **Ministry of Health Kenya, Division of Vector Borne and NTDs** (Kenya)
- **Ministry of Health Uganda, Vector Borne and NTDs Control Division** (Uganda)