



ASTMH Committee on Global Health (ACGH)

Official Subgroup of the American Society of Tropical Medicine & Hygiene

ACGH Newsletter

October 2026 | Volume 13, Issue 1

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It's time to get ready for
the
ASTMH Annual Meeting...



ASTMH Annual Meeting

TropMed26

November 18-22, 2026

Gaylord National Harbor, MD, USA
(adjacent to Washington, DC)



Advancing
Science for
Tropical
Medicine
and Health

Register for the ASTMH Annual Meeting and book your hotel: <https://www.astmh.org/annual-meeting>.

ACGH Main Events at the Annual Meeting 2026

Date	ACGH Main Events	Time	Venue
1. Day 1: Wednesday, November 18th	ACGH Council Meeting- All are welcome!	3:30–5:30 PM	Chesapeake 7
2. Day 2: Thursday, November 19th	Symposium 4: The Impact of Humanitarian and Development Assistance Defunding: Millions of Lives at Stake	8:00–9:45 AM	Potomac C, Ballroom Level
3.	ACGH Job Hunting Practice For Global Health Careers: How & Where To Look For Jobs	11:15 AM – 12:45 PM	National Harbor 8
4.	Lightning Presentations & Networking	5:00 - 6:45 PM	National Harbor 8
5. Day 3: Friday, November 20th	ACGH Symposium I: Navigating an Interconnected World: Current Priorities and Latest Developments in Emerging Infectious Disease Surveillance	1:45 – 3:30 PM	Maryland C, Ballroom Level
6.	ACGH Symposium II: Intelligent (Global Health) Diplomacy for Health Protection: How Artificial and Human Intelligence Are Partnering to Revolutionize Global Health Security	4:00 - 6:00 PM	Maryland C, Ballroom Level
7.	ACGH Annual Business Meeting & Reception- All are welcome!	5:20 – 6:00 PM	Maryland C, Ballroom Level
8. Days 1 - 5	ACGH Booth in the Exhibition Hall	When Exhibition Hall open - see program schedule	Prince George's Exhibition Hall B

**ACGH Symposium I:
Navigating an Interconnected World: Current Priorities and Latest Developments
in Emerging Infectious Disease Surveillance
Friday, November 20th, 1:45 – 3:30 PM, Maryland C, Ballroom Level**

Co-Leaders:

Hunter Jackson Smith, MD, MPH, MBE, FACPM, Tripler Army Medical Center, Honolulu, HI, USA

Hoseah Akala, PhD, FASTMH, Walter Reed Army Institute of Research-Africa & Kenya Medical Research Institute, Kisumu, Kenya

Speakers:

- Brett Swierczewski, PhD, Global Emerging Infections Surveillance Program, Silver Spring, MD, USA

- Ben Espinosa, PhD, Naval Medical Research Unit EURAFCENT, Cairo, Egypt

- Irina Etobayeva, PhD, MS, Naval Medical Research Unit INDO PACIFIC, Kuala Lumpur, Malaysia

- Yeny Tinoco, DVM, PhD, Naval Medical Research Unit SOUTH, Lima, Peru

- Magda Metreveli, MD, PhD, Walter Reed Army Institute of Research-Europe-Middle East, Tbilisi, Georgia

- Brian Vesely, PhD, MPH, Armed Forces Research Institute of Medical Sciences, Bangkok, Thailand

- Elizabeth Odundo, MS, Walter Reed Army Institute of Research-Africa & Kenya Medical Research Institute, Kericho, Kenya

Description:

This symposium will consist of an overview of the U.S. Global Emerging Infections Surveillance (GEIS) program, current trends in emerging infectious disease surveillance across different WHO regions, and examples highlighting the value of maintaining a technologically advanced and interconnected disease surveillance network. Within this session, GEIS partner laboratory investigators from across the globe will describe their surveillance activities within the fields of respiratory infections, antimicrobial resistant infections, enteric infections, and febrile and vector borne infections.

ACGH Symposium II: Intelligent (Global Health) Diplomacy for Health Protection: How Artificial and Human Intelligence Are Partnering to Revolutionize Global Health Security **Friday, November 20th, 4:00–6:00 PM, Maryland C, Ballroom Level**

Artificial intelligence (AI) tools are increasingly being applied to core global health security (GHS) functions, including epidemic intelligence, risk modeling, genomic analysis and biomedical discovery. For instance, AI-enabled systems are now incorporated into several national, multilateral, and global infectious disease surveillance platforms, and machine learning approaches are being applied to help accelerate vaccine and therapeutic development. But while these applications hold significant promise, their real-world impact depends on implementation, governance and context. Further, the disruptive nature of AI adoption in global health may itself be conceptualized as a cosmopolitan moment.

Cosmopolitan moments are periods in which geopolitical conditions expose deficiencies in our current governance systems and, therefore, create opportunities for new forms of cooperation, norm-setting, and institutional adaptation. AI occupies a dual position within such moments: as a geopolitical instrument that may facilitate cooperative governance or reinforce asymmetries, and as technical infrastructure capable of shaping how threats are detected, interpreted and communicated during crises.

This symposium will critically examine how AI is influencing global health security—from AI-enabled biomedical discovery to epidemic intelligence, systems-level preparedness, international governance and negotiation, and community-level implementation. Speakers will assess operational capabilities and limitations, while exploring diplomatic and geopolitical implications, including data sovereignty, equity in access to AI-enabled tools, and the strategic use of health intelligence.

By integrating technical, implementation and global health diplomacy perspectives, this session will provide a grounded analysis of AI not only as a technological innovation, but as a structural force shaping cooperation, competition and governance in global health security.

Speakers

Organizer – Miguel Reina Ortiz, MD, PhD, CPH, FASTMH

Associate Professor, Department of Community and Global Health & Associate Director, DrPH Program in Global Health Leadership, Richard M. Fairbanks School of Public Health, Indiana University, Indianapolis, Indianapolis, Indiana, USA

Dr. Reina Ortiz is a global health scientist whose work centers on global health diplomacy and global health security, with particular emphasis on decision-making science, infectious disease prevention, and preparedness and resilience for emerging threats. His scholarship examines how scientific evidence, governance structures, and policy processes intersect in epidemic and post-disaster contexts to strengthen health security systems.

Co-Organizer – Clive Brown, MBBS, MPH, MSc, DTMH (Lon), FASTMH

Adjunct Professor, DrPH Program, Department of Community Health and Psychiatry, University of the West Indies, Mona, Jamaica; Retired Branch Chief, Division of Global Migration Health, Centers for Disease Control and Prevention, USA

Dr. Brown worked for the Centers for Disease Control and Prevention for over 30 years before retiring as the Chief for the Port Health Protection Branch where he oversaw the 20 International Health Regulation designated Port Health Stations in the United States, implementing CDC's mission to protect the public's health at US borders.

Panelist 1. Maria Elena Bottazzi, PhD, FASTMH

Sr. Associate Dean, National School of Tropical Medicine; Professor, Departments of Pediatrics (Tropical Medicine) and Molecular Virology and Microbiology, Integrative Molecular and Biomedical Sciences Program, and Translational Biology and Molecular Medicine Program, Baylor College of Medicine, Houston, Texas, USA

Dr. Bottazzi is an internationally recognized tropical and emerging infectious disease vaccinologist and global health leader. Dr. Bottazzi co- led the development of a recombinant protein COVID-19 vaccine technology that was advanced without patent restrictions and became Corbevax in India and IndoVac in Indonesia, expanding access in low- and middle-income countries.

Panelist 2. Kamran Khan, MD

Professor of Medicine, Division of Infectious Diseases and the Dalla Lana School of Public Health, University of Toronto, Toronto, Canada

Dr. Khan's research focuses on the globalization of emerging and reemerging infectious diseases and the role of interconnected systems, travel, and mobility in shaping epidemic spread. His work has been informed by frontline clinical experience, including during the 2003 SARS outbreak.

Panelist 3. Andres G. (Willy) Lescano, MD, PhD, MSc

Associate Professor, Universidad Peruana Cayetano Heredia (UPCH), Lima, Peru

Dr. Lescano's work integrates quantitative epidemiologic methods, biostatistics, and health systems research to address emerging infectious threats. His research focuses on the impact of climate variability, land-use change, urbanization, and phenomena such as El Niño on vector-borne and other emerging diseases.

Panelist 4. Charles B. Delahunt, PhD

Affiliate Professor, Department of Electrical and Computer Engineering, University of Washington, Seattle, Washington, USA

Dr. Delahunt's research integrates applied machine learning, algorithm evaluation, and implementation science. His work has included AI systems for automated malaria microscopy, diagnostic image analysis, and decision-support tools tailored to frontline clinical environments.

ANNUAL MEETING EVENTS

Symposium 503: The Impact of Humanitarian and Development Assistance Defunding: Millions of Lives at Stake

Thursday, November 19th, 8:00–9:45 AM

Potomac C, Ballroom Level

Organizer/Chair: Prof. Quique Bassat, ISGlobal / Centro de Investigação em Saúde de Manhiça (CISM)

Co-Chair: Dr. Achama Eluwa, Institute for Global Public Health, University of Manitoba

This symposium examines the human consequences of the unprecedented contraction in international development assistance that began in 2025, including the near-complete dismantling of USAID. Drawing on two landmark Lancet studies that for the first time rigorously quantified the mortality impact of development assistance across more than 130 countries, the session presents evidence that an 83% cut to USAID's budget could result in more than 14 million additional deaths by 2030, including over 4.5 million children. Complementing this evidence, the session draws on real-time surveillance data from Mozambique, examines where defunding will hit child survival hardest, and considers pathways for the global health financing landscape to respond. The session is designed to translate rigorous evidence into actionable knowledge for the tropical medicine and global health community at a moment when the consequences of these policy decisions are becoming visible in the populations we serve.

Prof. Davide Rasella, ISGlobal / Universidade Federal da Bahia

Lead investigator of two landmark Lancet studies quantifying the mortality impact of USAID and OECD development assistance across more than 130 countries, Prof. Rasella will present the epidemiological evidence linking aid to reductions in all-cause and under-five mortality, alongside projections of excess deaths through 2030 under current defunding scenarios.

Dr. Ivalda Macicame, Instituto Nacional de Saúde, Maputo, Mozambique

A frontline researcher at Mozambique's National Health Institute, Dr. Macicame will present real-time mortality surveillance data showing how the contraction of international aid is already affecting the ability to track deaths and detect health system failures in one of the world's most aid-dependent countries.

Prof. Quique Bassat, ISGlobal / Centro de Investigação em Saúde de Manhiça (CISM)

A leading global health researcher and Director General of ISGlobal, Prof. Bassat will examine child mortality projections across high-burden countries under current defunding scenarios, identifying the populations and settings most exposed as donor support recedes.

Prof. James Macinko, UCLA Fielding School of Public Health

A co-author of the landmark Lancet study on USAID's mortality impact, Prof. Macinko will draw on two decades of evidence linking U.S. foreign aid to population health outcomes in low- and middle-income countries, contextualizing the current aid contraction within the longer arc of development assistance and health.

Mr. Raj Kumar, Devex

President and Editor-in-Chief of Devex, the leading media platform covering the global development sector, Raj Kumar will examine the evolving global health financing landscape and the role of the wider development community in responding to the aid contraction and sustaining essential health programs.

~ LIGHTNING PRESENTATIONS & NETWORKING ~

THURSDAY, NOVEMBER 19th, 5-6:45 PM, ROOM NATIONAL HARBOR 8

Please join ACGH members for an early-evening social that brings together members of the subgroup, stimulates opportunities for networking, and gives trainees an opportunity to present their research in 3-minute presentations. These interesting short presentations will generate feedback and interactive discussions in a networking environment.

Light snacks provided with one free drink for the first 50 ACGH members to arrive.



If you are attending the ASTMH Annual Meeting come by the ACGH Booth!

Come by booth #630 in the Exhibition Hall to meet other members from ACGH, learn more about ACGH, drop off a package of candy from your country to share, pick up a treat, and enter our raffle for a prize!

ACGH TRAVEL AWARD WINNERS

Winners won a stipend to travel to the 2026 Annual Meeting in National Harbor, Maryland, USA.
Safe travels to our Travel Award winners en route to the ASTMH Annual Meeting!



Andria Mousa, PhD

Imperial College London

London, Greater London, United Kingdom

She will present “Impact of *Plasmodium falciparum* Resistance-associated Genotypes on Malaria Parasite Clearance and Protection from Infection: A Three-arm Double-blinded, Placebo-controlled, Randomised Trial of Sulfadoxine-pyrimethamine and Sulfadoxine-pyrimethamine Plus Amodiaquine among Asymptomatic Children 3-5 years old in Cameroon”. She will also attend all ACGH events while at the Annual Meeting.

Kadiatou Koita, MD, MS, PhD

University of Sciences, Techniques, and Technologies of Bamako

Bamako, Mali

She will give an oral presentation November 19, 2:45–4:30 PM, Malaria Prevention I: “Feasibility and Acceptability of an Integrated IPTp-SP Delivery Strategy through Seasonal Malaria Chemoprevention in Addition to Antenatal Care in Mali and Burkina Faso”, and will also chair one of the malaria sessions. She will also attend two ACGH symposia and the ACGH job hunting session.



Benedicta Owusu-Arthur, MPH

University of Ghana

Accra, Legon, Ghana

She will present “Effect of Maternal Healthcare Continuum on Neonatal Mortality in Sub-Saharan Africa: A pooled DHS analysis”. She will also give one or more lightning presentations.

Nirjhar Bhattacharyya, PhD

University of Notre Dame

Notre Dame, Indiana, USA

He will present “Multidimensional Bulk Segregant Analysis and Genetic Engineering Reveal the Pleiotropic Contribution of the Autophagy Gene PfATG18 to the Polygenic Landscape of Multidrug Resistance in *Plasmodium falciparum*”.



Jamie Cascante Vega, PhD candidate

New York University

New York City, New York, USA

He will have two presentations including “El Niño Flavours Influence Dengue Haemorrhagic Fever Epidemics in Thailand”, and will also participate in the Lightning Presentations & Networking event.

Evelyn Munayco Pantoja, MPH

Universidad Peruana Cayetano Heredia

Lima, Peru

She will be presenting “Resolution of Clinical Trachoma Signs in Children after Azithromycin Treatment: A Follow-up Study in the Amazon”. Evelyn also won an ACGH Research Award in 2022 for a study on face washing as the main intervention to prevent trachoma. She will participate in the Lightning Presentations & Networking event and attend most of the ACGH-sponsored events.



ACGH RESEARCH SUPPORT AWARD WINNERS

Good luck to our Research Award winners!

Zoukifilou Sare Dabou

University of Abomey-Calavi, Benin

Research topic: Arboviruses in Benin

This project will strengthen surveillance of mosquito-borne arboviruses in Benin by detecting and characterizing dengue, Zika, and chikungunya viruses in mosquito populations across four major cities. The study will combine mosquito collection and species identification with molecular testing to better understand virus circulation, vector distribution, and transmission risk, particularly in underserved urban communities. By addressing gaps in entomological and virological surveillance, the project will generate evidence to support earlier detection of outbreaks and more effective vector control strategies. ACGH funding will support fieldwork and the laboratory reagents and consumables needed for virus detection, helping build local research capacity and strengthen preparedness for emerging arboviral threats.



Jahana Shirin

Jawaharlal Institute of Post-graduate Medical Education and Research (JIPMER), India

Research topic: Melioidosis in India

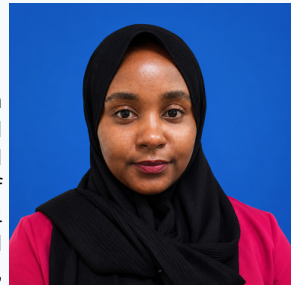
This project will evaluate the diagnostic accuracy of an anti-Hcp-1 immunochromatographic test for detecting melioidosis in approximately 200 patients with suspected infection at JIPMER in Puducherry, India. The study will compare the rapid antibody test with conventional culture and incorporate capsular polysaccharide (CPS) antigen testing into Bayesian latent class analysis to account for limitations of an imperfect reference standard. By assessing an accessible and potentially affordable diagnostic tool, the project aims to improve detection of melioidosis, particularly among patients from rural and resource-limited communities where advanced laboratory testing may be unavailable. The findings could support earlier diagnosis and treatment, improve patient outcomes, and provide evidence to inform melioidosis diagnosis in endemic LMIC settings. Requested funding will support the essential anti-Hcp-1 and CPS diagnostic kits needed to complete the study.

Huda Omary

Muhimbili University of Health and Allied Sciences, Tanzania

Research topic: Non-falciparum malaria in Tanzania

This project will investigate hidden and non-falciparum malaria infections among children under five years old in Bagamoyo, Tanzania, with a focus on infections missed by routine rapid diagnostic tests. Using archived dried blood spot samples from a randomized clinical trial, the study will apply PCR-based molecular methods to detect and characterize *Plasmodium malariae*, *P. ovale*, and submicroscopic infections. Findings will improve understanding of malaria transmission and the limitations of conventional diagnostics in low-transmission settings. The project will strengthen molecular laboratory capacity and generate evidence to improve malaria surveillance, diagnosis, and control strategies in Tanzania and similar settings. The funding will support specialized molecular analyses, travel, laboratory and equipment use, and technical costs needed to complete this component of doctoral training.



Asmith Joseph

University of Georgia, USA

Research topic: Post-TB reproductive health in women in Uganda

This project will investigate the long-term reproductive health consequences of tuberculosis (TB) among women of reproductive age in Kampala, Uganda, where TB and HIV remain major public health challenges. Using a mixed-methods approach, the study will examine fertility, pregnancy outcomes, and reproductive morbidity after TB treatment while exploring women's experiences and gaps in post-TB reproductive care. Working with Makerere University, Kampala Capital City Authority, TB clinics, and community partners, the research will combine clinical data, surveys, interviews, and focus groups to provide a comprehensive understanding of post-TB reproductive health. Findings will help inform integrated, gender-responsive post-TB and reproductive health services and improve long-term care for women in high-burden settings. ACGH funding will support participant engagement, local field operations, data collection, and travel required to implement the study in Kampala.

Savanna Randi

Yale School of Public Health, USA

Research topic: hookworm infection in Ghana

The 2026 project will serve as the final phase of a longitudinal Yale-Ghana partnership investigating hookworm and other soil-transmitted helminth (STH) infections in Beposo, Ghana. Building on data collected from 2022–2025, the study will conduct community-wide screening of children and adults to update estimates of hookworm prevalence and infection intensity following changes to Ghana's mass drug administration (MDA) policies. Researchers will assess treatment effectiveness, household-level risk factors for infection and reinfection, and changes in host antibody responses over time. Together, these data will provide a comprehensive picture of community transmission and the impact of annual albendazole treatment. The project will generate policy-relevant evidence to inform sustainable STH control strategies while strengthening understanding of hookworm transmission and supporting community-engaged global health research.



Nithya Narayanaswamy

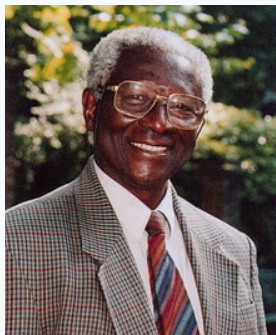
Emory University Rollins School of Public Health, USA

Research topic: Hansen's Disease in Brazil

This award will support a field visit to Minas Gerais, Brazil in 2026, to work on Hansen's disease serosurveillance as a Ferguson RISE Fellow at Emory under Dr. Jessica Fairley. This study is part of a ten-year collaboration between Dr. Fairley and Dr. Lucia Fraga (Universidade Federal de Juiz de Fora, Governador Valadares), with the current serosurveillance phase active since 2021. Our project encompasses clinical, serological, and environmental surveillance in a longitudinal cohort in Minas Gerais, allowing us to assess subclinical *M. leprae* infection before clinical onset. Brazil ranks second globally in Hansen's disease prevalence, and while leading research in the country addresses immunological and subclinical surveillance, behavioral and environmental contributors to the immunological cascade remain underexamined.



Announcing the ASTMH Committee on Global Health (ACGH) Inaugural Adetokunbo Lucas Memorial Distinguished Achievement in Global Health Award



About Dr. Adetokunbo Lucas

The ACGH Adetokunbo Lucas Memorial Distinguished Achievement in Global Health Award will honor a pioneering global health leader whose career exemplified impactful mentorship, innovation and partnership, or researchers for their contributions to the field of global health. Named after the late Professor Adetokunbo Oluwole Lucas, MD (1931-2020), an ASTMH Distinguished International Fellow (1987) and longtime ASTMH Member (1965-2020), Professor Adetokunbo Lucas was a pioneering global health leader whose career exemplified impactful mentorship, innovation, and partnership. Key accomplishments include:

- **Leadership:** Served as the pioneering Director of the United Nations Development Programme (UNDP)/ World Bank/ World Health Organization (WHO) Special Programme for Research and Training in Tropical Diseases (TDR) and was the first Nigerian Head of Preventive Medicine at the University of Ibadan.
- **Scientific & Policy Impact:** Under his TDR leadership, developed new therapies for malaria, river blindness (initiating a public-private partnership against onchocerciasis with Merck), elephantiasis, and other diseases. Also launched the landmark Prevention of Maternal Mortality Program across Africa.
- **Global Advisory Roles:** Professor at Harvard University; first chair of Carnegie Corporation's program on health workforce strengthening; advisor to the Gates Foundation and The Carter Center.
- **Character & Legacy:** Remembered for a continuously inquisitive mind, wise counsel, infectious humor, and deep commitment to mentorship. He is recognized as one of the 12 greatest disease fighters since 1950.
- The key qualities honored in this award are pioneering program leadership, fostering partnerships, impactful global health contributions, lifelong mentorship, and sustained ASTMH engagement.

About the Award

This award specifically honors the application of science through partnership and mentorship, and broadens the Society's recognition portfolio, ensuring that those who operationalize tropical medicine in the field are celebrated alongside those who make discoveries in the lab.

Open to any researcher, practitioner, or policymaker more than 15 years from their terminal degree, it is not intended solely as a lifetime achievement award but rather recognizes a body of work—or a specific, transformative contribution—that has had a measurable impact on global health outcomes. Nominees may be from any country; ASTMH membership is a requirement. Preference may be given to candidates whose work demonstrates:

- a commitment to equitable partnerships (North-South or South-South); or
- a focus on implementation science that bridges the "last mile" in disease control; or
- a legacy of training the next generation of global health leaders in LMICs.

The award criteria are for the overall contributions to the advancement of global health as manifested through the following categories:

- Research & Implementation;
- Training & Mentorship of graduate students, post-doctoral researchers and in-country trainees, and commitment to building local capacity and fostering independent LMIC investigators;
- Partnership & Equity, especially from underrepresented groups or those working with neglected populations/diseases;
- Professional Service to ACGH, ASTMH, or similar professional bodies; service on global health advisory panels; contributions to journal editing or grant review in the global health space.

This award carries a commemorative plaque and an honorarium of \$1,000 USD. The awardee may use the funds for any Annual Meeting purpose, including travel and/or registration expenses to attend the meeting. The awardee will be acknowledged during the ASTMH Annual Meeting opening Awards Ceremony, and the physical award will be presented during the ACGH Business Meeting at the Annual Meeting. The awardee will be invited to deliver a presentation during that session, sharing insights from their work with the global health community.

The inaugural winner will be announced at the ASTMH Annual Meeting in November.

Welcome the new ACGH Incoming President, Dr. Eluwa!

Achama Eluwa MD, MSc

Dr. Achama Eluwa is a public health physician at the University of Manitoba's Institute for Global Public Health, where she provides technical leadership for public health programmes across multiple countries. At WHO AFRO she helped establish the Precision Public Health Unit and led its regional analysis of neglected tropical disease burden, and with the World Bank she worked on redesigning maternal and newborn health service delivery.

In Nigeria, she has advised the Federal and State Ministries of Health on quality improvement and disease policy, and led a component of the Nigeria Healthcare Quality Initiative, the country's first national clinical governance platform, in partnership with the Institute for Healthcare Improvement. Quality improvement initiatives she led across hospitals in

northern Nigeria cut maternal and neonatal case fatality by 41% and 37%. She sits on the Federal Ministry of Health and Social Welfare's National Core Technical Group for reproductive, maternal, newborn and child health.

Dr. Eluwa is the incoming President of the ASTMH Committee on Global Health (ACGH) and serves on the Society's Scientific Program Committee. She lectures on maternal and neonatal health systems for the MSc in Global Women's Health at the University of Oxford, and contributed to the BMJ Quality of Care series. In 2019 she was nominated for The Future Awards Africa Prize for Public Service.

ACGH Secretary-Treasurer continues the 2nd year of his elected term

Hunter Jackson Smith, MD, MPH, MBE, FACPM

Hunter Jackson Smith is a Major in the U.S. Army Medical Corps and the Program Director of the Transitional Year Residency Program at Tripler Army Medical Center in Honolulu, HI. In this capacity, he also serves as a preventive medicine physician in the Department of Public Health where he is the Chief of Infection Prevention and Control. He was previously the Lead for Antimicrobial Resistant Infections at the Global Emerging Infections Surveillance Program from 2022-2026 where he led an annual surveillance portfolio of \$15 million across 30 countries. Prior to this he was the Chief of Preventive Medicine at the U.S. Army Medical Research Directorate-Africa in Kisumu, Kenya conducting research and surveillance on emerging infectious diseases in the region.

Dr. Smith is an Assistant Professor for the Uniformed Services University in the Department of Preventive Medicine and Biostatistics where he teaches preventive medicine, epidemiology, and emerging infectious disease topics. He is an Adjunct Assistant Professor at the Johns Hopkins Berman Institute of Bioethics and teaches bioethics across a variety of topics. Major Smith practices travel medicine at Tripler Army Medical Center where he supervises resident physicians.

Major Smith was elected to the Board of Regents for the American College of Preventive Medicine where he co-led the Prevention First campaign. He currently serves on the Editorial Boards of the Journal of Law, Medicine, and Ethics and American Journal of Preventive Medicine (AJPM) Focus, and he was previously on the Board of Governors for the AJPM. Dr. Smith also serves on several national task forces, including the U.S. National Action Plan for Combating Antibiotic-Resistant Bacteria (CARB), the Transatlantic Taskforce on Antimicrobial Resistance (TATFAR), and the VA/DoD Evidence-Based Practice Working Group.

Dr. Smith has over 40 peer-reviewed publications. His bioethics research interests include military medicine, emerging infectious diseases, and social determinants of health. His medical research interests include tropical medicine, antimicrobial resistance, and cardiovascular disease epidemiology.

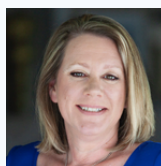
ACGH election results are in!

Congratulations
to our
newest

Executive Committee Members!



New President-elect: Elizabeth Collins, MD, MPH, DTM



New Councilor: Meredith Gaffney, DHSc, MPH



New Councilor: Robert Adamu Shey, PhD

ACGH Regional Representative Attends the 9th World One Health Congress



Dr. Muhammad Asaduzzaman, Regional Representative of ACGH in Europe, attended the 9th World One Health Congress (WOHC2026) in Lisbon, Portugal, September 4-7, 2026, primarily as a delegate of the COST (European Cooperation in Science and Technology) organization. WOHC2026 is the flagship biennial event of the global One Health community, held under the patronage of the Quadripartite collaboration on One Health: the World Health Organization (WHO), Food and Agriculture Organization (FAO), United Nations Environment Program (UNEP), and the World Organisation for Animal Health (WOAH). The four-day program combined plenaries, parallel scientific sessions and science-policy interface sessions, thematic workshops, poster sessions and side events, covering climate change, biodiversity, antimicrobial resistance (AMR), food systems, biosecurity and One Health governance and education. He attended sessions covering AMR, biodiversity, wildlife and pathogen interfaces, and thematic workshops, and also presented his work on AMR and food safety.



ADVOCACY ACTION

Global health advocacy opportunities in October and November 2026

Simmering advocacy topics this autumn center on major leadership transitions, key international summits, and critical policy changes under restructured foreign aid frameworks:

Major Events & Campaigns

- **World Mental Health Day:** Observed globally on October 10 to raise awareness and advocate for mental health resources.
- **World Health Summit 2026:** October 11-13 in Berlin and online, bringing global leaders together to focus on equitable, resilient health systems and health innovations.
- **International Lead Poisoning Prevention Week:** Running from October 20-26, focused on global regulatory and community advocacy.
- **World Diabetes Day:** Observed on November 14 to advocate for improved diabetes care, education, and prevention.

Institutional Leadership & Transitions

- **Global Fund Executive Director Selection:** The Global Fund Board meets from October 28-30, 2026, to appoint its next executive director from five finalists, succeeding Peter Sands.
- **WHO Leadership Race:** The WHO is rolling out prospective candidates to succeed Director-General Tedros Adhanom Ghebreyesus, with a candidate forum scheduled to begin on November 18, 2026.

Policy & Funding Shifts

- **Bilateral Aid & Co-Investment Tracking:** Organizations like Think Global Health are actively monitoring the shift toward transactional bilateral agreements and co-financing expectations under the America First Global Health Strategy. Advocates are mobilizing around how these transition periods affect domestic health budgets and local NGO partnerships.

SUMMARY: ACGH September Webinar

Bridging Science and Practice: ACGH-APMEN Webinar Tackles the Future of Malaria Diagnostics

What happens when the tools we rely on to detect malaria start to miss the parasite? That was the central question behind a landmark APMEN TechTalks webinar, co-hosted by the Asia Pacific Malaria Elimination Network (APMEN) Surveillance and Response Working Group and the ASTMH Committee on Global Health (ACGH). The session drew 930 registrations from 93 countries—with 426 attendees from 73 countries—underscoring the global urgency of the topic.

The Stakes: When RDTs Fail

As countries push toward malaria elimination, accurate diagnosis becomes both more critical and more fragile. The webinar zeroed in on a growing threat: pfhrp2/pfhrp3 gene deletions in *Plasmodium falciparum*. These deletions allow parasites to evade detection by the most widely used rapid diagnostic tests (RDTs), which rely on the histine-rich protein (HRP)2 protein. The result? False negatives that can silently undermine surveillance, delay treatment, and fuel transmission.

Dr. Daniel Salihu, President of the ASTMH Committee on Global Health, opened the session with a call for vigilance, adaptability, and collaboration—emphasizing that this is not just a laboratory concern but a threat to communities and national malaria programs.

**Three Perspectives, One Challenge**

Prof. Michelle Gatton (Queensland University of Technology) explained how pfhrp2/pfhrp3 deletions create selection pressure favoring these parasites when HRP2-based RDTs remain in use. Her modeling showed that switching to alternative diagnostics—such as *Plasmodium falciparum* lactate dehydrogenase (PFLDH)hy8-based RDTs—can reduce that pressure. Eritrea's experience proved the point: after moving away from HRP2-based RDTs, the prevalence of deleted parasites dropped markedly. Critically, she stressed that the decision to switch should be based on the proportion of false-negative clinical cases, not the overall prevalence of deletions, with WHO recommending a 5% threshold for revising strategy.

Dr. Aung Pyae Phy (Shoklo Malaria Research Unit, Thailand) brought field realities into sharp focus. Investigations along the Thailand-Myanmar border found that Abbott Bioline RDTs detected only 45% of microscopy-confirmed *P. falciparum* and 74% of *P. vivax* infections in febrile clinic patients—despite passing formal laboratory quality control.

The culprit? A combination of product underperformance and a second threat: high frequency of pfhrp2 deletion in the region. His conclusion was sobering: standard quality control is not enough. Continuous field verification and molecular surveillance are essential.

Dr. Christian Koepfli (University of Notre Dame) offered a forward-looking vision. His work in Ethiopia showed that RDTs with combined HRP2 and LDH lines achieved over 95% sensitivity for infections above 20 parasites/μL and 98% specificity. Separate lines can flag suspected deletions but complicate interpretation; combined lines are simpler but cannot directly indicate deletion. He also introduced AI-supported automated microscopy, which matched highly sensitive RDTs for *P. falciparum* and outperformed them for *P. vivax*—a promising tool for reference laboratories.

As Jane Cunningham of WHO reminded participants, the threshold for changing RDT strategy is >5% of false-negative HRP2 RDTs due to deletions—not simply the prevalence of deletions. Periodic surveillance remains essential.

A Global Conversation

The webinar's reach was truly global: 52.5% of registrants came from Africa, 14.1% from South Asia, and 7.7% from the Greater Mekong Subregion. Attendees represented government agencies, academic institutions, research organizations, and NGOs. The post-webinar survey showed overwhelming satisfaction—100% of respondents said they intend to attend future APMEN webinars.

In his closing remarks, Professor Richard Maude (Mahidol-Oxford Tropical Medicine Research Unit) thanked the speakers and participants. Dr. Salihu reflected that the lessons learned apply not only to Asia Pacific but also to Africa, Latin America, and the Caribbean—and that our understanding of HRP2/3 deletions continues to evolve.

The Road Ahead

The webinar made this clear: diagnostics are not static. As malaria programs adapt to a changing parasite landscape, they must combine quality-assured products with field verification, molecular surveillance, and timely policy decisions. The ASTMH-APMEN partnership stands as a vital platform for this exchange—bridging research, policy, and practice to protect the gains made against malaria.

Missed the webinar? The recording is available on [ACGH Linked In Page](#).

Stay tuned for future ACGH TechTalks and ACGH events.



Quantitative total serum IgG4 reporting in human paragonimiasis: a scoping review

Hidenori Takahashi, Takumi Yasuda, Yugo Satake, Hiroki Nagamatsu, Ryutaro Hirose, Mio Toyama-Kosaka, Shinichiro Ota, Miwa Morikawa, Mio Kokubo-Tanaka and Masaharu Shinkai

RESEARCH SUMMARY

This scoping review examined published cases of human paragonimiasis with quantitative serum IgG4 measurements, focusing on the clinical context of IgG4 testing and the diagnostic overlap with IgG4-related disease. Among 610 reports comprising 886 cases, quantitative serum IgG4 values were reported in only 10 reports and 12 cases. Although serum IgG4 elevation and IgG4-positive plasma cell infiltration were reported in several cases, none could be mapped as probable or definite IgG4-related disease based on the published information. The idea for the review grew from the author's ASTMH 2025 poster presentation of a case of pulmonary paragonimiasis mimicking IgG4-related disease. Discussions with colleagues at the poster session prompted a broader examination of how IgG4 findings had been reported and interpreted in the clinical context of paragonimiasis, ultimately leading to this review. Read the main article [here](#).

	Overall	China	Japan	Korea	USA	Thailand	France	India	Other
Reports, n	610	216	211	91	27	12	9	8	36
Primary site, pleuropulmonary/other (reports), n	398/212	123/93	164 / 47	41/50	22/5	9/3	6/3	7/1	26/10
Species specified, n	278	22	171	50	18	5	2	1	9
Reported species	-	Pw; Pskr; Phet	Pw; Pmiy; Phet	Pw	Pw; Pk; Pmex	Phet; Pphet; Pw	Pw	Pw	Pw; Put; Pmex
Quantitative serum IgG4 reported, n	10	2	6	0	0	1	1	0	0

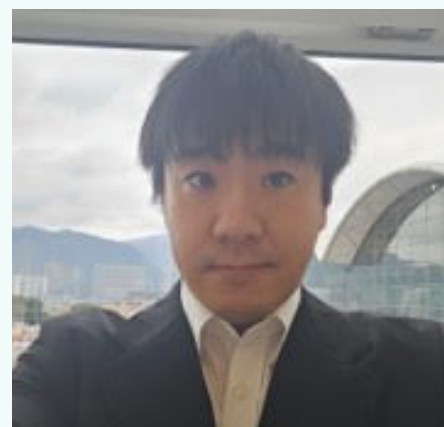
Country was defined by first-author affiliation.

Abbreviations: Pw, *Paragonimus westermani*; Pmiy, *Paragonimus miyazakii*; Pskr, *Paragonimus skrjabini*; Pk, *Paragonimus kellicotti*; Pmex, *Paragonimus mexicanus*; Put, *Paragonimus uterobilateralis*; Phet, *Paragonimus heterotremus*; Pphet, *Paragonimus pseudoheterotremus*.

When Diagnostics Outpace Decisions: Turning Evidence into Action in Tropical Infectious Diseases

By Hidenori Takahashi MD, PhD

Advances in diagnostic technologies are expanding our ability to identify infectious diseases, but better detection does not always lead to better clinical or public health decisions. Diagnostic mimicry, overlapping clinical presentations, and recognition of infections outside their traditionally expected geographic ranges can complicate interpretation and response. Bridging this gap requires not only better tests, but also locally generated evidence, regional surveillance, and effective exchange of knowledge across health systems. These considerations highlight the value of strengthening locally led research and creating pathways that allow emerging evidence to inform clinical guidance and public health action, particularly in settings where diagnostic and implementation resources are limited. [Read the full article.](#)



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Post a link to your research paper, a pdf, and a photo on the ACGH Forum page.

Announcements



WANTED: Newsletter Editors

Communications, Advocacy, & Policy (CAP) Subcommittee

Join the Communications, Advocacy, & Policy (CAP) Subcommittee! We welcome anyone with [newsletter creation](#) experience, anyone with excellent English grammar skills, anyone with Canva or Publisher software experience, and anyone who feels creative and committed to producing a beautiful newsletter for ACGH members. A small stipend or travel award to the Annual Meeting may be considered for an editor who meets all newsletter deadlines for the year.

Also, anyone interested in organizing the [ACGH Booth](#) at the 2026 and 2027 Annual Meeting would be a great addition.

All [advocacy and policy](#) buffs are also encouraged to join.

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Join the newly created Development (Fundraising) Subcommittee! We welcome anyone with any fundraising experience or anyone who feels creative and industrious and wants to help ACGH maximize its projects and impact. Increasing the budget for ACGH may allow this group to grant more Travel Awards, bigger Research Awards, fund a paid internship, or start other new programs. Thank you for volunteering by adding your name to the list [here](#).

Now is the time to sign up for all ACGH Subcommittees!

Put your talents to use, add an impressive volunteer activity to your CV, gain some skills, and gather some experience before running for an ACGH Executive Committee position. All subcommittees are accepting new members, or renewal of current members, for 1- or 3-year terms that begin November 2026, after the Annual Meeting. Most subcommittees meet 1 hour per month, will expect 1 hour of preparation and 1 hour of follow-up, hold an extra meeting before or during the ASTMH Annual Meeting, and require 75% attendance at meetings. We want to encourage you to be a leader of a subcommittee that you are passionate about, and emphasize leadership development. Only dedicated members who are committed to participating should [sign up](#) here to serve on one subcommittee (two maximum).

ACGH Communications, Advocacy & Policy (CAP) Subcommittee Newsletter Team

Jolly Thomas, MBBS candidate - Newsletter Editor
Obinna Chukwuzoba, PhD Candidate - Newsletter Co-Editor
Elizabeth Collins, MD, MPH, DTM - Sr. Newsletter Editor
Hidenori Takahashi, PhD - Regional Representative, Western Pacific
Maggie Silio, MD - ACGH Executive Committee Liaison
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