

For MSF on snake bite see http://www.msf.org/article/ global-health-communityslithers-away-snakebite-crisisantivenom-runs-out

For **snake bite data** see http:// www.lstmed.ac.uk/research/ centres-and-units/the-alistairreid-venom-research-unit Snake bite—the neglected tropical disease

Last week, Médecins Sans Frontières drew attention to the fact that by mid-2016 sub-Saharan Africa will run out of one of the most effective treatments for snake bite, Fav-Afrique. Sanofi Pasteur stopped manufacturing the antivenom last year, and stockpiles will expire in June, 2016. Fav-Afrique is the only antivenom proven to be safe and effective to treat envenoming by all the different types of snake in sub-Saharan Africa, where an estimated 30 000 people die from snake bite and 8000 end up with amputations every year. No replacement product is likely to be available for at least 2 years.

Globally, about 5 million people are estimated to be bitten by snakes every year, causing about 125000 to die and 400000 to be permanently disabled or disfigured. Snake bite has a mortality rate equivalent to one fifth of deaths due to malaria worldwide, and half of that due to HIV/AIDS in India. Yet snake bite is largely invisible to WHO, other international and national health agencies, many African governments, and to the big donors, and has been marginalised even within the neglected tropical diseases community. With its triad of high mortality, high disability, and substantial psychological morbidity, snake bite warrants high priority research. Robust data are needed to persuade donors and governments to subsidise antivenom development and distribution. It costs US\$280–560 to treat one patient with Fav-Afrique (each vial is \$140 and two to four are needed per bite). Cheap, safe, effective, and non-cold chain-dependent antivenoms are desperately needed. Other products by South African, Costa Rican, Mexican, and Indian producers need to be used in combination to neutralise different species' venoms, and need further research.

Snake bite largely affects those aged 10–30 years old living in the poorest, most rural areas of the world, where health-care facilities are few and far between. Identifying key actions to reduce the public health neglect of snake bite victims is the aim of the 2-day meeting next week funded by the Wellcome Trust. Urgent implementation of the actions will be needed, which can only happen with the aid of major donors. **The Lancet** 

## Women are the key to sustainable development



See Comment page 1111 See Special Report page 1121 See The Lancet Commissions page 1165

For the **World Bank report** see http://wbl.worldbank.org/~/ media/WBG/WBL/Documents/ Reports/2016/Women-Businessand-the-Law-2016.pdf

On Sept 25-27, UN member states will meet at the UN General Assembly in New York to adopt a new roadmap-17 Sustainable Development Goals (SDGs)for progress to 2030. Goal 3 is dedicated to health and consists of nine main targets, including reductions in maternal and child mortality, substance misuse, and road traffic accidents. However, many other goals-eq, water and sanitation, poverty reduction, and climate changeare also health related. How can this ambitious agenda be achieved? A Lancet Commission published in today's issue has an answer: ensure women are healthy and have equity in all aspects of life. The Lancet Commission on Women and Health outlines the complex role of women in society, as agents of change affecting the world around them, as producers and reproducers, and as consumers and providers of health care. Good health across the life course and gender equality can be achieved when women are valued, enabled, and empowered societally, environmentally, and economically, argue the authors.

Worldwide, however, women are prevented from achieving their full potential. A new report by the World

Bank shows the numerous legal barriers that women face that hinder their productivity. Women face job restrictions in 100 of 173 countries monitored. For example, in 29 nations they are prohibited from working at night. Only half of the countries had paternity leave, limiting men's ability to share child care responsibilities. Such laws are detrimental to women, their children, and the societies (and economies) in which they live.

In addition to their productivity, women's ability to have choice and control over their reproductivity is crucial for healthy development. High fertility contributes to population growth and pressures on the environment and it can limit women's opportunities to realise their economic potential. Although the SDGs include sexual and reproductive health, as Ann Starrs explains in today's issue, they take a narrow view. A new *Lancet*–Guttmacher Institute Commission on sexual and reproductive health and rights in the post-2015 world will go beyond the SDGs and aims to provide a progressive, evidence-based vision of how to move forward in this critical dimension of sustainable development. **■** *The Lancet*