## **Editorial**

The September 2005 issue of the journal comprises papers on schistosomiasis, fascioliasis, clonorchiasis and opisthorchiasis, either presented at the ninth European Multicolloquium of Parasitology (EMOP) in Valencia, July 2004 or subsequently submitted, in memory of Dr Kenneth E. Mott, formerly Chief of the Schistosomiasis and Intestinal Parasites Unit, Division of Control of Tropical Diseases, World Health Organization (WHO), Geneva, Switzerland until his death in June 1997 at the age of 58. I wish to express my sincere and grateful thanks to Professor Santiago Mas-Coma, Department of Parasitology, University of Valencia and President of the Spanish Society of Parasitology for his initiative in organizing the Mott Symposium during EMOP, which he successfully co-ordinated with Dr David Rollinson, Department of Zoology, The Natural History Museum, London, and also for their contributions to this issue.

I am also grateful to Professor Mas-Coma for summarizing the career of Dr Kenneth Mott, who (quote) 'was born in March 1939 in Indiana, USA and obtained his medical degrees from Purdue University, Cornell Medical College, USA and the Federal University of Bahia, Salvador, Brazil. He was appointed to the Department of Tropical Health at Harvard University, USA, although he spent the early part of the 1970s in Brazil working on the epidemiology of Chaga's disease and schistosomiasis, prior to commencing his career with WHO in 1977. One of his outstanding contributions to the field included the publication of the well known *Atlas of the Global Distribution of Schistosomiasis*, which he co-edited with J.P. Doumenge in 1987 and even today this is an essential reference for those working on the epidemiology of schistosomiasis. Dr Mott evaluated and advocated the widespread use of praziquantel in the



Dr Kenneth E. Mott

treatment of schistosomiasis, whilst simultaneously establishing an epidemiological database to better target endemic areas. He also pioneered the use of computer technologies in remote sensing and geographical information systems long before these became used as standard technologies. By the 1990s, Dr Mott had also launched a worldwide initiative on fascioliasis, firstly commencing on the island of Corsica, then the Andean countries, followed by Iran and Egypt. This initiative led to fascioliasis being recognized as an important public health problem in many countries worldwide. He was also one of the first to push for the implementation of triclabendazole as a drug for the treatment of human fascioliasis, which completely changed the treatment of the disease in underdeveloped areas. However the contributions of Dr Mott were not only confined to the many papers and books he published in the field, but he was also heavily involved in organizing international training courses and served on a number of editorial boards. To conclude, Ken Mott was undoubtedly one of those rare individuals who clearly made a difference to the world and contributed to making it a better place in which to live.'

Professor John Lewis Editor