



Date: July 16, 2001

From:



WHO Collaborating Center for
Research, Training and Eradication of Dracunculiasis

Subject:

GUINEA WORM WRAP-UP # 114

To: Addressees

Detect Every Case (within 24 hours), Contain Every Worm (immediately)!

**STATUS OF INTERVENTIONS IN SEVEN KEY DISTRICTS IN THE MOST ENDEMIC COUNTRIES
OUTSIDE OF SUDAN**

Table 1 summarizes the status of interventions in the highest endemic district of each of the seven highest endemic countries outside of Sudan. These seven districts together reported 21% (4,197) of all cases of dracunculiasis outside of Sudan in 2000. They also include 17% of all cases reported outside of Sudan so far in 2001. The percentage of the respective national total of cases that was found in these districts ranged from 16% each in Ohaukwu, Nigeria and Nanumba, Ghana to 62% in Mirriah, Niger in 2000, and from 11% in Ohaukwu, Nigeria to 76% in Tanda, Cote d'Ivoire so far in 2001. These key districts are also major sources of cases exported to non-endemic and less-endemic parts of the same country, as well as a threat to neighboring countries. These should thus be high priority areas for ensuring maximal implementation of village-based interventions and of containment of individual cases. The data on the status of interventions is shown in the right-hand columns of Table 1. One concern is that these data on the status of interventions are not readily available for some of these areas (blank areas on the table), despite their priority status. The data we do have indicates that endemic villages in at least three of the districts have achieved excellent coverage rates for cloth filters. The case containment rate of only 24% in Cote d'Ivoire's Tanda District is a big flaw that needs to be corrected immediately, but may have allowed significant transmission to continue there already this year. The case containment rate of 60% in Nigeria's Ohaukwu Local Government Area also should be improved.

Table 1

Districts Reporting Most Cases of Dracunculiasis in 7 Countries in 2000, Numbers of Cases Reported so far in 2001, and Coverage of Endemic Villages with Key Interventions in 2001*

In January-May 2001, Mirriah, Ohaukwu, and Nanumba have reduced their cases by –88%, -65%, and –52%, respectively, from the same period of 2000. The reduction in Mirriah contributed to Niger’s overall reduction of –90% in cases nationwide in June, which is the first month of Niger’s peak transmission season this year.

SUDAN: TIGHTENING THE RING

Sudan has transported all nine million pipe filters to distribution points throughout the country (see *Guinea Worm Wrap-up #113*). A total of 9.2 million pipe filters were manufactured with the materials that were made available. Some of the Ethiopian, Kenyan and Sudanese workers who were hired to make the pipe filters in Nairobi report that they used their earnings from this temporary employment to begin their own on-going income-generating projects, to pay school fees for their children, or to buy food or clothing. So far this year, 281,255 filters for household use also have been distributed in the areas accessed through Operation Lifeline Sudan, which is the highest number ever distributed before the rainy season in Sudan. In January-May, the northern states of Sudan reported 6 indigenous and 6 imported cases, in 8 villages, as compared to 3 indigenous and 11 imported cases (from southern Sudan) during the same period of 2000. Five (42%) of this year’s 12 cases were contained. Sudan has exported more cases to other countries from its southern states than any other endemic country so far this year (Figure 2): 9 to Ethiopia and 3 to Kenya. Sudan has agreed to host next year’s meeting of national program coordinators in Khartoum in March.

DONATED HEALTH KITS EN ROUTE TO GHANA AND NIGERIA

Three thousand of 6,000 health kits for providing case containment to persons with dracunculiasis are about to be shipped to the national Guinea Worm Eradication Programs of Ghana and Nigeria (1,500 kits for each program). The contents and a plastic bag for each kit were donated to The Carter Center last year by the pharmaceutical firm **Johnson & Johnson**, which is headquartered in New Jersey. The kits were recently assembled by employees from the retail giant **Home Depot** of Atlanta. **Bell Logistics Services** of Atlanta donated the warehousing and logistics.

IN BRIEF:

Ethiopia has reported only 3 indigenous cases in January-June, which includes three of the five months of peak transmission in that country. South Omo has so far reported ZERO cases this year. Dr. Ahmed Tayeh from WHO is scheduled to visit the Ethiopian program beginning July 15.

Burkina Faso. Projects by the Japan International Cooperation Agency (JICA), UNICEF and ECLA have recently completed drilling or rehabilitating ~50, 15 and 10 wells, respectively, in endemic villages. UNICEF is also funding performance of theater presentations and songs about Guinea worm disease in the highest endemic villages, and received a grant of \$300,000 from the United Nations Foundation to assist the program during the year beginning August 2001. Mr. Harry Godfrey of Global 2000/The Carter Center provided technical assistance (June 4-July 5) in association with Global 2000's resident technical advisor to the Burkinabe program Mr. Raymond Stewart.

Mali. Mr. Brad Barker, Global 2000/The Carter Center's resident technical advisor in Mali since March 1997, has returned to the United States to attend graduate school at Johns Hopkins University. The new resident technical advisor in Mali is Dr. Mamadou Bathily, who formerly worked with the regional Guinea Worm Eradication Program in Kayes since 1993 WELCOME Dr. Bathily! THANKS and BEST WISHES to Brad Barker!

Nigeria & Niger are introducing a reward system for reporting of cases in Dogon Douthi District of Niger's Dosso region, and in Birnin Kebbi Local Government Area of Nigeria's Zamfara State. Both are non-endemic areas that border each other. Nigerian former head of state General (Dr.) Yakubu Gowon

Table 3

**Number of cases contained and number reported by month during 2001*
(Countries arranged in descending order of cases in 2000)**

COUNTRY	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED													TOTAL*	% CONT.
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER			
SUDAN	858 / 2250	1043 / 2002	849 / 1908	895 / 2027	774 / 1836	/	/	/	/	/	/	/	4419 / 10023	44	
NIGERIA	673 / 1042	813 / 1051	423 / 730	170 / 267	208 / 248	214 / 317	/	/	/	/	/	/	2501 / 3655	68	
GHANA	612 / 845	672 / 919	362 / 474	322 / 440	299 / 377	/	/	/	/	/	/	/	2267 / 3055	74	
BURKINA FASO	18 / 20	25 / 29	35 / 37	38 / 61	113 / 185	/	/	/	/	/	/	/	229 / 332	69	
NIGER	1 / 2	2 / 2	0 / 0	1 / 2	9 / 13	7 / 12	/	/	/	/	/	/	20 / 31	65	
TOGO	108 / 119	63 / 91	58 / 66	43 / 48	16 / 20	19 / 37	/	/	/	/	/	/	307 / 381	81	
MALI	3 / 6	0 / 0	0 / 0	0 / 0	1 / 2	1 / 2	/	/	/	/	/	/	5 / 10	50	
COTE D'IVOIRE	18 / 40	18 / 60	11 / 38	5 / 6	2 / 9	/	/	/	/	/	/	/	54 / 153	35	
BENIN	13 / 17	13 / 13	6 / 6	3 / 3	1 / 1	/	/	/	/	/	/	/	36 / 40	90	
MAURITANIA	1 / 1	0 / 0	0 / 1	0 / 0	0 / 1	3 / 3	/	/	/	/	/	/	4 / 6	67	
UGANDA	0 / 0	0 / 0	0 / 0	3 / 3	6 / 19	15 / 16	/	/	/	/	/	/	24 / 38	63	
ETHIOPIA **	0 / 0	0 / 0	0 / 0	1 / 1	2 / 5	6 / 6	/	/	/	/	/	/	9 / 12	75	
C.A.R.	/	/	/	/	/	/	/	/	/	/	/	/	0 / 0		
TOTAL*	2305 / 4342	2649 / 4167	1744 / 3260	1481 / 2858	1431 / 2716	265 / 393	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	9875 / 17736	56	
% CONTAINED	53	64	53	52	53	67							56		

* PROVISIONAL

** 3 / 5 cases in May, and 5 / 6 in June were imported from Sudan.

Shaded cells denote months when zero indigenous cases were reported. Numbers indicate how many imported cases were reported that month.

Figure 1

Percentage of Endemic Villages Reporting and Percentage Change in Number of Indigenous Cases of Dracunculiasis During 2000 and 2001*, by Country



* provisional

** 2,600 (33%) of 7,898 endemic villages are not accessible to the program

Figure 2

ADDRESS LIST: DRACUNCULIASIS ERADICATION NATIONAL PROGRAM MANAGERS IN AFRICA

Benin

Dr. Aristide C. Paraiso
Ministere de la Sante Publique, Cotonou
Tel. (229) 33-21-41, Fax. (229) 33-21-41
Email. pevg_bj@leland.bj

Burkina Faso

Dr. Dieudonne Sankara, PNEVG, Ouagadougou
Tel. (226) 30-27-90, Fax. (226) 30-27-90
Email. pevg_bf@cenatrin.bf

Cameroon

Dr. Dama Mana
Ministere de la Sante Publique, Ouagadougou
Delegation Provinciale de la Sante Publique-
Mora, Extreme Nord
Tel. (237) 29-32-36, Fax. (237) 29-28-04/28-09

Central African Republic

Dr. J. Ndoyo
Ministre de la Sante Publique et de la Poptation, Bangui
M. Gregoire Melemoko Ndiala, PNEVG
Tel. (236) 61-59-61, Fax. (236) 61-70-99/61-17-09
Email. pnevg-cf@internet.cf

Chad

Dr. Gagde, Hinn-Dandje
Ministere de la Sante Publique, N'Djamena
Tel. (235) 51-52-37, Fax. (235) 51-44-65
Email. pneve@intnet.td

Cote d'Ivoire

Dr. Henri Boualou
Direction de la Sante Publique, Abidjan
Tel. (225) 06-54-73/93-17-24, Fax. (225) 22-50-63
Email. pnevgci@africaonline.co.ci

Ethiopia

Mr. Gezahegn Tesfaye
MOH, Addis Ababa
Tel/Fax. (251) 1-510-8977
Email. global2000@telecom.net.et

Ghana

Dr. Andrew Seidu Korkor
Ministry of Health
PO Box 99, Tamale
Tel. (233) 71-22-53/22-89, Fax. (233) 71-22-777
Email. phd_nr@africaonline.com.gh
Askorkor@excite.com
Askorkor@hotmail.com

Kenya

Dr. David Sang
MOH, Nairobi
Tel. (254) 2-725-601, Fax. (254) 2-720-050
Email. mufhs@net2000ke.com, attn: Dr. D. Sang

Mali

Dr. Issa Degoga
Ministere de la Sante Publique, Bamako
Tel. (223) 22-37-87, Fax. (223) 23-17-21
Email. pevg_ml@datatech.toolnet.org

Mauritania

Dr. Abderhamane G. Kharchi
Ministere de la Sante Publique, Nouakchott
Tel. (222) 25-15-05/25-93-02, Fax. (222) 29-33-43
Email. pevg_mr@toptechnology.mr

Niger

Mr. Sadi Moussa
Ministere de la Sante Publique, Niamey
Tel. (227) 73-54-59/73-28-57, Fax. (227) 73-28-87
Email. g2000@intnet.nc

Nigeria

Dr. K. A. Ojodu
Federal Ministry of Health
New Federal Secretariat
Shehu Shagari Way
Maitama, Abuja
Tel./Fax. (234) 12-694-097

Senegal

Mr. Georges N'Diaye
PNEVG, Dakar
Tel. (221) 824-74-34, Fax. (221) 824-35-32
Email. abecr@telecomplus.sn
pevgnsn@telecomplus.sn

Sudan

Dr. Nabil Aziz
MOH, Khartoum
Tel./Fax. (249) 11-785-536, Fax. (873) 161-04-41, (c/o
UNDP)
Email: global@sudanet.net

Togo

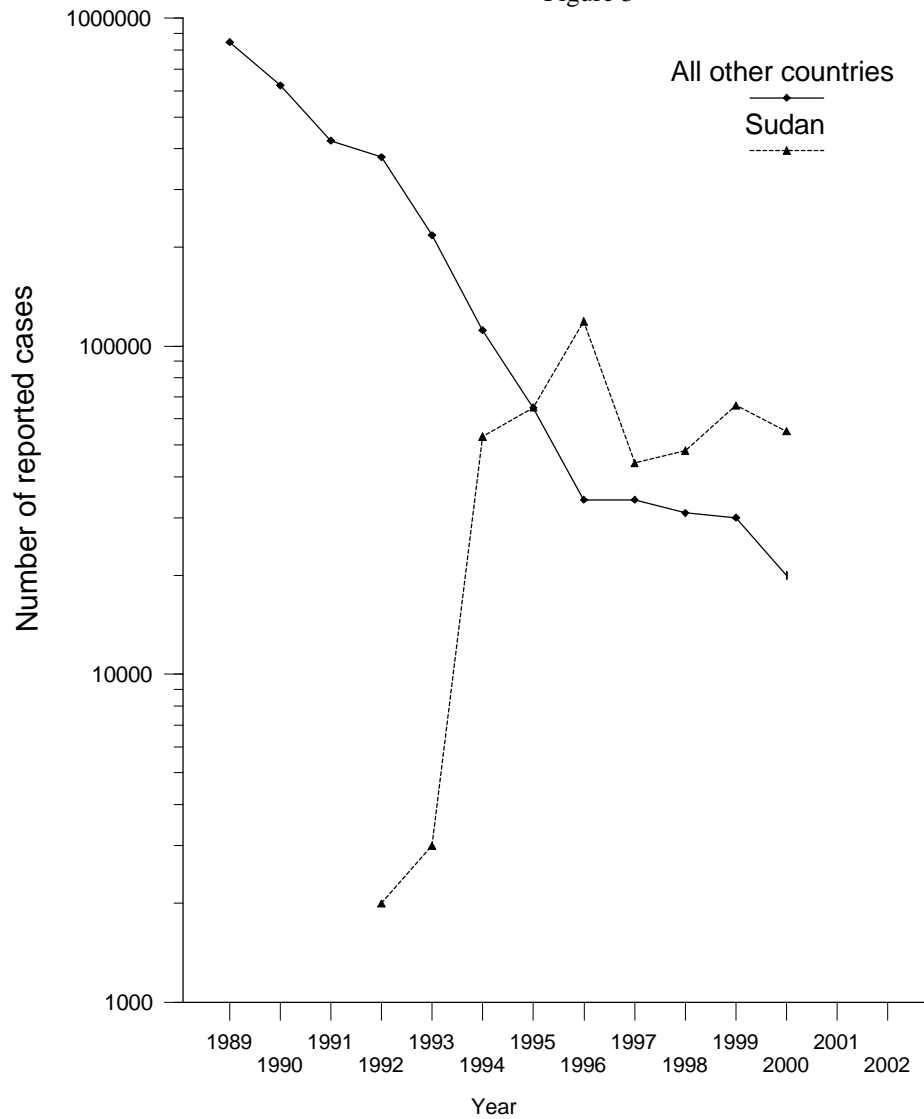
Mr. Ignace K. Amegbo
Institut Nat. d'Hygiene, c/o UNICEF, Lome
Tel. (228) 21-44-20, Fax. (228) 21-57-92
Private Tel. (228) 25-99-28
Email. pevg_tg@bibway.com

Uganda

Dr. John B. Rwakimari
MOH, Entebbe
Tel. (256) 41-231-564/42-207-19, Fax. (256) 42-206-08
Email. ugwep@swiftunganda.com

Number of Reported Cases of Dracunculiasis by year, 1989 - 2000

Figure 3



*Inclusion of information in the Guinea Worm Wrap-Up does not constitute "publication" of that information.
In memory of BOB KAISER.*

For information about the GW Wrap-Up, contact Dr. Daniel Colley, Acting Director, WHO Collaborating Center for Research, Training, and Eradication of Dracunculiasis, NCID, Centers for Disease Control and Prevention, F-22, 4770 Buford Highway, NE, Atlanta, GA 30341-3724, U.S.A. FAX: (770) 488-4532. The GW Wrap-Up web location has changed to <http://www.cdc.gov/ncidod/dpd/parasites/guineaworm/default.htm>



CDC is the WHO Collaborating Center for Research, Training, and Eradication of Dracunculiasis.