



## SIXTY-FOURTH WORLD HEALTH ASSEMBLY

(Draft) A64/63 24 May 2011

Agends item 13 11

	Eradication of dracunculiasis
	The Sixty-fourth World Health Assembly,
	Having considered the report on dracunculiasis;
•	Beauties recolutions WIIIA20.21 and WIIIAA2.20 on elimination of dracunculiasis and
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Almost 100 persons attended the Informal Meeting oim @ Worm Eradication that was held at the Palais des Nations in Geneva on May 18 from 6 to 8 pringuthe WHA, including the ministers of health of Chad, Ghana, Mali, Mauritania, Niger and the Government of Southern Sudan, as well as ministerial representatives of Benin, Burkina Faso, Cameroonte @ Voivire, Nigeria, Togo, Uganda and Yemen. Ethiopia did not attend. The meeting was chaited the WHO's Regional Director for the Eastern Mediterranean Region, Dr. Hussein Abdul R. Geza@ Wher senior representatives included the WHO Assistant Director-General, Dr. Hiro Nakatathe Director, disease and prevention control for the WHO African Region, Dr. Jean-Baptiste Roungothe chairman of the Interational Commission for the Certification of Dracunculiasis Eradication, Dr. A.R. Al-Awa@ T. Pascal Villeneuve fulliCEF; and Mrs Nicole Kruseand Dr. Ernesto Ruiz-Tibeon The Carter Center. Also present were the representatives of Austria, France, United Kingdom, Thailand, CDCO, M, Saudi Fund for Development, DFID and Vestergaard Frandsen. Dr. Donald Hopkons The Carter Center and Dr. Gautam Biswods WHO gave updates on progress towards eradication, and curstantus of certification and pre-certification, respectively. It was noted that the recent outbreachiad as well as persisting cases in Ethiopia and Mali all resulted from failures in surveillanione supposedly Guinea worm-free areas.

The "Geneva Declaration" and Restion WHA57.9: Eradication of Dracunculiasis, of 2004 both called for completing dracunculiasis eradication by 2008 aming zero cases in 2010. Informally, the target for the last case is now 2012. Where are we?

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Figure 2 Chad Guinea Worm Eradication Program
Reported Cases of Dracunculiasis by Date of Guinea Worm Emergence

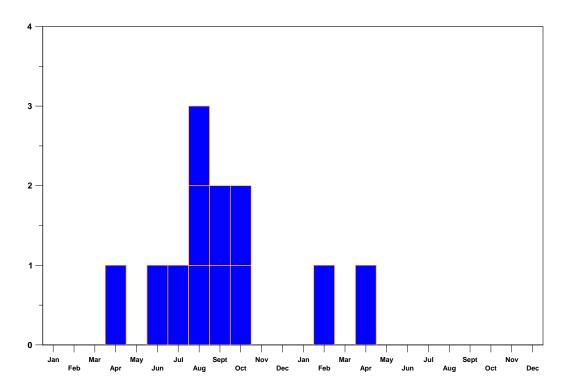
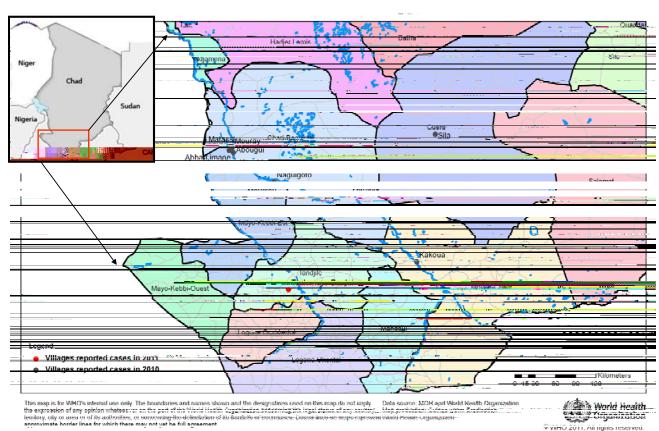


Figure 3 Distribution of Dracunculiasis Cases in 2010 and 2011\*

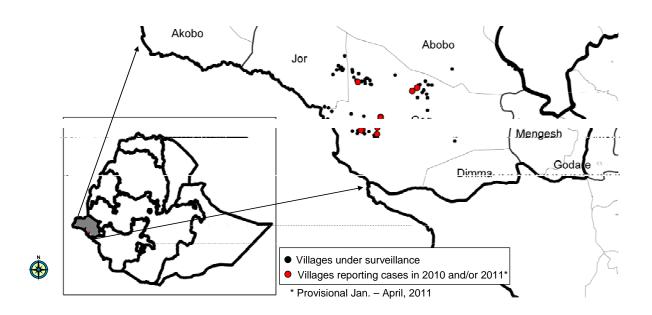


\* provisional

### ETHIOPIA: SECOND INDIGENOUS CASE REPORTED IN 2011

Ethiopia has reported its second indigenous case of dracunculiasis in 2011 (Figure 4). The patient is a 35 year-old woman whose worm began emerging on April 18, one day after she was admitted to a Case Containment Center as a suspect case. This patient lives in the village of Utuyu, Gambella Region, but travels regularly between Utuyu and Abawiri villages and the Pugnido Refugee Center. Ethiopia has reported a total of two indigenous and one imported case in January-April 2011, of which only the two indigenous cases were reportedly contained. The older brother of Ethiopia's first indigenous case in 2011 (see Guinea Worm Wrap-Up #204) has been located and does not have Guinea worm disease. Gog Woreda, where all indigenous cases have occurred in 2010 and so far in 2011 (Figure 5), oversees 160 trained village-based volunteers, 71 chief's and 22 Health Extension Workers to maintain routine household surveillance in all 63 inhabited villages of the district. However, during a visit by Carter Center representative, Dr. Teshome Gebre, to Gambella Region on April 27-29, the head of public health

Figure 5 Ethiopia Dracunculiasis Eradication Program
Villages under Active Surveillance and Villages Reporting
Cases of Dracunculiasis in 2010 and/or2011\*



# S. SUDAN: 14% INCREASE IN CASES, BETTER CASE CONTAINMENT

Southern Sudan's Guinea Worm Eradication Program (SSGWEP) has reported a total of 371 cases in January-April 2011, which is an increase of 18% over the 314 cases reported during the same period of 2010 (Table I). Fully 338 (91%) of the 371 cases were reported from Eastern Equatoria State, which is also the source of 16 cases exported into Jonglei State. As reported in the previous issue, this year's problem in Eastern Equatoria is the result of poor supervision that allowed inadequate coverage of endemic areas and late detection of cases during the first quarter of 2010. However, the SSGWEP has contained 80% of all cases so far this year, compared to 74% of cases in 2010. A larger share (80%) of this year's cases was admitted at a Case Containment Center (CCC) and 67% were contained in one of the his yea Case22 338 r98 724U63

Table 2

Kapoeta East	3 / 4	29 / 39	78 / 96	99 / 111	/	/	/	/	/	/	/	/	209 / 250	84%
Kapoeta North	0 / 0	12 / 14	19 / 27	30 / 35	/	/	/	/	/	/	/	/	61 / 76	80%
Kapoeta South	0 / 0	0 / 0	0 / 1	6 / 11	/	/	/	/	/	/	/	/	6 / 12	50%
Torit	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	0%
	3 / 4	41 / 53	97 / 124	135 / 157	/	/	/	/	/	/	/	/	276 / 338	82%
Tonj North	1 / 1	0 / 0	1 / 1	2 / 2	/	/	/	/	/	/	/	/	4 / 4	100%
Tonj East	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	0%
Tonj South	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	0%
Gogrial East	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	

Table 3

Number of Cases Contained and Number Reported by Month during 2011\* (Countries arranged in descending order of cases in 2010)

NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED														
														%
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER		TOTAL*	CONT.
SUDAN	5/6	47 <sub>/ 59</sub>	105 <sub>/ 136</sub>	140 / 170	/	/	/	/	/	/	/	/	<sup>297</sup> / <sub>371</sub>	80
MALI	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	0
ETHIOPIA^	0 / 0	0 / 0	1 / 2	1 / 1	/	/	/	/	/	/	/	/	<sup>2</sup> / <sub>3</sub>	67
CHAD	0 \ 0	1 / 1	0 / 0	0 / 1	/	/	/	/	/	/	/	/	1,2	50
GHANA	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	0
TOTAL*	<sup>5</sup> / <sub>6</sub>	48 / 60	106 / 138	141 / <sub>172</sub>	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0/0	0 / 0	<sup>300</sup> / <sub>376</sub>	80
% CONTAINED	1	$\mathbf{O}$												
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### Country

	2010	2011*
Ghana (4)	7	0
Ethiopia (4)	9	2
Mali (4)	0	0
Sudan (4)	314	371
Chad (4)	0	2
Total	330	375
All countries, excluding Sudan	16	4

<sup>\*</sup> Provisional. Excludes one case imported into Ethiopia from South Sudan in March.

### **MEETINGS**

The next meeting of the International Commission for the Certification of Dracunculiasis Eradication will be held at WHO headquarters in Geneva on November 29-December 1, 2011. Among the formerly endemic countries, Burkina Faso and Togo are scheduled to be considered for certification.

#### **ERRATA**

In *Guinea Worm Wrap-Up #203*, Table 1, we mistakenly reported the percentage of persons in Burkina Faso with knowledge of the cash reward for reporting of a case as "41%". The national coordinator of Burkina Faso's Guinea Worm Eradication Program, <u>Mme. DONDASSE Louise</u>, informed us that the correct figure is 43%. We regret the error.

#### RECENT PUBLICATIONS

World Health Organization, 2011. Dracunculiasis eradication-global surveillance summary, 2010. Wkly Epidemiol Rec 86:189-198.

Inclusion of information in the Guinea Worm Wrap-Up