



Date: July 21, 2000

From:



WHO Collaborating Center for
Research, Training and Eradication of Dracunculiasis

Subject:

GUINEA WORM WRAP-UP # 103

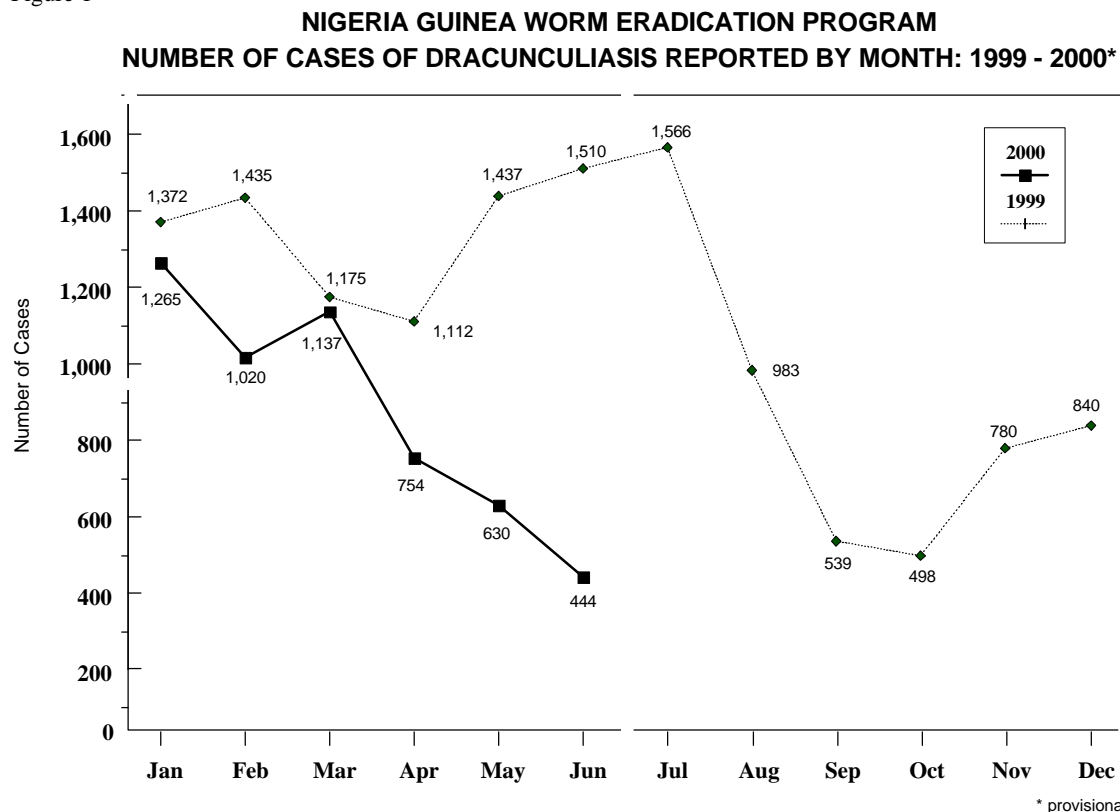
To: Addressees

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

NIGERIA REDUCES CASES BY -71% IN JUNE!!!!

Nigeria's Guinea Worm Eradication Program (NIGEP) has reported a provisional total of 444 cases in June 2000, which is a reduction of more than a thousand cases from the 1,510 cases the program reported in June 1999 (Figure 1). For the first half of 2000, Nigeria has reported 5,250 cases, or -35% fewer than in the same period of 1999 (8,041 cases). So far in 2000, the rates of reduction in the four geographic zones are: -83% (Northeast), -60% (Northwest), -50% (Southwest) and -1% (Southeast). After four years (1995-1998) of relative stagnation, NIGEP is newly energized, and Nigeria's Guinea worms are on the defensive again. Southeast Zone, now lagging in its reduction rate, is expected to also realize sharp overall reductions soon. As is clear from Figure 1, the monthly rates of reduction for the country as a whole are increasing. Only 54% of this year's cases so far have reportedly been contained, but the proportion of endemic villages with 100% of households having a cloth filter has been increased to 71%. Approximately 46% of endemic villages have at least one source of clean drinking water, 28% are using Abate, and essentially all are reportedly receiving health education about dracunculiasis.

Figure 1



Former U.S. President and Mrs. Jimmy Carter visited Nigeria from July 4 to 7. Among many other activities, they

visited Nigerian President Olusegun Obasanjo, met with former Nigerian head of state General (Dr.) Yakubu Gowon, and with Minister of Health Dr. Tim Menakaya, and inaugurated a new well during a visit to the dracunculiasis-endemic village of Takupara in Niger State's Paikoro Local Government Area. They also attended the summary session of a combined review of all health activities being assisted by The Carter Center in Nigeria (dracunculiasis eradication, onchocerciasis control, lymphatic filariasis elimination, and schistosomiasis control). At the end of their visit, President and Mrs. Carter presented this year's Jimmy and Rosalynn Carter Awards to Northeast Zonal Consultant Mr. Joshua Olorunshola Ologe and three of his associates: Mr. Adamu Sallau Keana (senior zonal assistant for Global 2000), Mr. Aminu Saleh (coordinator for Dukku LGA in Gombe State), and Mr. Abubakar Bala Wamdeu (Borno State Guinea worm coordinator). General Gowon made follow up advocacy visits to Benue (Ado LGA) and Nasarawa States, June 26 –27.

In June, Southeast zone tallied the provision of 2 new borehole wells, 12 new hand dug wells, 1 borehole well repaired, and 2 new rainwater catchment tanks to 11 endemic villages (3 villages in Benue, 1 village in Enugu, and 7 villages in Ebonyi States).

CARTER CENTER HONORS SEVEN FORMERLY ENDEMIC COUNTRIES



Former US President and Mrs. Jimmy Carter hosted a gala ceremony at The Carter Center in Atlanta on July 18th to honor the seven recently endemic countries that have interrupted indigenous transmission of dracunculiasis for at least one year: Cameroon, Chad, India, Kenya, Pakistan, Senegal and Yemen. President Carter welcomed the ambassadors or their representatives of Cameroon, India, Kenya, Pakistan and Senegal. Also attending the ceremony was former Malian head of state General Amadou Toumani Toure, Dr. Y. Seyyid Abdulai (director-general of the OPEC Fund for International Development); the deputy director of CDC, Dr. David Fleming; the director of UNICEF's program division (Dr. Sadiq Rasheed); Mr. Charles Baquet, deputy director of Peace Corps; the Nigerian

Ambassador to the United States; consular officers of Canada, Japan, the Netherlands, and the United Kingdom; Dr. Joel Berman, member of the International Commission for the Certification of Dracunculiasis Eradication; delegates from Sudan and Uganda; and over 200 other guests and supporters of the eradication campaign.

After a brief history of the eradication campaign, and the reading of a synopsis of the eradication program of each of the seven countries by the technical director of Global 2000/The Carter Center's Guinea Worm Eradication Program, Dr. Ernesto Ruiz, President Carter presented each country representative with one of the specially designed Carter Center Awards for Guinea Worm Eradication. A larger, related distinctive work of art, which is inscribed with the names of each endemic country and the year in which they interrupted transmission (so far), was also unveiled at the Ceremony. It will be displayed prominently at The Carter Center. The awards were commissioned and sponsored by Mr. and Mrs. John Moores, and designed by Ms. Kim Griffin. Each country was provided two identical awards, one each for the head of state and for the ministry of health. Matching certificates will also be sent to the respective national program coordinators and senior staff of each Guinea worm-free country. Attendees enjoyed a reception, which featured an extensive exhibit illustrating aspects of the eradication campaign.

Carter Center Award certificates are being provided for:

Pakistan:	Major General M. I. Burney Dr. Abdur Rab Mr. Mohamed Azam	Kenya:	Dr. David Sang
India:	Dr. M.I.D. Sharma (deceased) Dr. C.K. Rao Dr. Ashok Kumar Dr. Gautam Biswas	Senegal:	Dr. Abou Bekr Gaye Mr. Georges N'Diaye
Yemen:	Dr. Abdul-Hakeem Al-Kohlani	Cameroon:	Dr. Amos Sam-Abbenyi Dr. Dama Mana
		Chad:	Dr. Gagde Hinn-Dandje

On July 19, President Carter and Dr. Donald Hopkins, Carter Center associate executive director, participated in an hour-long interactive satellite televised discussion about Guinea worm eradication with invited audiences in Lagos, Nigeria; Abidjan, Cote d'Ivoire; and Niamey, Niger. This program and a videotape of the award ceremony were also broadcast to US Information Services facilities in Conakry, Guinea; Dakar, Senegal; Kampala, Uganda; Lome, Togo; and Monrovia, Liberia.

ETHIOPIA, NIGER AND UGANDA ALSO SMASHED THE WORM IN JUNE!

As seen in table 1, Ethiopia reported only four cases (-96%) in June 2000, its peak month of transmission, as compared to 68 cases in June 1999. All four cases, one of which was imported into South Omo from Sudan, were contained. Niger reported 106 cases in June, which is a reduction of -65% from the 300 cases reported in June 1999. 67 (63%) were contained. Uganda reported only 10 cases in June, two of which were imported into Kitgum District from Sudan. All ten cases were contained. This is a reduction of -92% from the 102 cases reported in June 1999. June is also Uganda's peak month of transmission. The cumulative rates of reduction for these three countries during the first six months of 2000 are -68%, -59%, and -78%, respectively.

IN BRIEF:

Central African Republic: A two person team from CDC arrived in CAR on July 8 for a one month visit, at the invitation of the Minister of Health, Mr. Richard Lakoe, and the national coordinator, Mr. Gregoire Melemoko-Ndiala. The two consultants, Dr. Marc Weisskopf and Mr. Aaron Zee (former Global 2000 resident advisor to the Malian program), are to assist in clarifying the status of dracunculiasis in CAR, and make recommendations to the national program.

Ghana: Ghana has reported only 233 cases of dracunculiasis in June, which is a reduction of -43% from the 412 cases reported in June 1999. This is the fourth consecutive month of reduction. The percentage changes in cases for the first six months of 2000 are +66%, +34%, -10%, -14%, -9%, and -43%, respectively. Guinea worm eradication activities in Brong Ahafo region's Atebubu District continue to improve. A drama group of 10 women has been formed and will perform in 4 zones. Two new zonal coordinators have been deployed, with the support of Global 2000. The first bi-monthly meeting of zonal coordinators was held on June 23. Abate teams have been re-trained and that intervention is being used more aggressively.

Mr. Ahmed Issah, zonal coordinator and Chief of Labun area, stated in the coordinators meeting that he is excited to learn the new Abate technique. When he began as a village volunteer, he said, he was not chief, and Labun was "number one" with Guinea worm. Now, he is a chief and a zonal coordinator and Labun's cases have [been] reduced dramatically. It is nearly Guinea worm-free. He said he knows he can now "finish" Guinea worm with Abate application. He received applause at the meeting. From the report of a consultant to Atebubu District of Ghana's Brong Ahafo Region.

Niger: During June 2-9, just before its peak transmission season, Niger's Zinder Region held its Worm Week 2000, marking its fifth year of using that intervention and social mobilization strategy. Twenty U.S. Peace Corps and Japanese (JOCV) Volunteers were paired with Nigerien counterparts and spent five days in and among Zinder's highest endemic villages and hamlets. The teams visited over 350 hamlets and encampments, and conducted about 2000 health education sessions, educating and mobilizing thousands of hard to reach nomads and hamlet dwellers. In August, Zinder will host the first Worm Week Phase Two, which will occur at the height of the transmission season. This second week will reinforce the earlier mobilization messages.

Sudan: At long last, four Sudanese health workers (Government of Sudan) were able to visit two endemic localities (Shat Fama-population about 6,000 and Shat Safiya-population about 800) in the Nuba Mountains area of South Kordofan State for three days in early June. They found two infected persons, one in each area, and reports that other worms had emerged over the past year. Two nurses previously trained in Guinea worm control have returned to the areas and will act as village volunteers. The workers conducted an active case search, held health education sessions for about 800 persons, and distributed 1,200 nylon filters. Sudan's Rural Water Corporation and UNICEF have already drilled 3 new wells in each of the two areas, and rehabilitated another in Shat Fama. There are still a few suspected endemic areas in the Nuba Mountains that are not accessible. Uganda and Ethiopia report 2 and 1 cases, respectively, imported from Sudan in June.

JOHNSON AND JOHNSON DONATES MATERIALS FOR FIRST AID KITS



In June, the New Jersey-based pharmaceutical corporation of Johnson and Johnson informed The Carter Center that it would donate forceps, scissors, Tylenol, gauze bandages, and bags for 6,000 first aid kits, to be used to support containment of Guinea worm cases in the final stages of the West African campaign. These kits, which are expected to be available in September, will be assembled at The Carter Center and shipped for use in Ghana and Nigeria.

Percentage by country of villages with endemic dracunculiasis with 100% of households covered with cloth filters

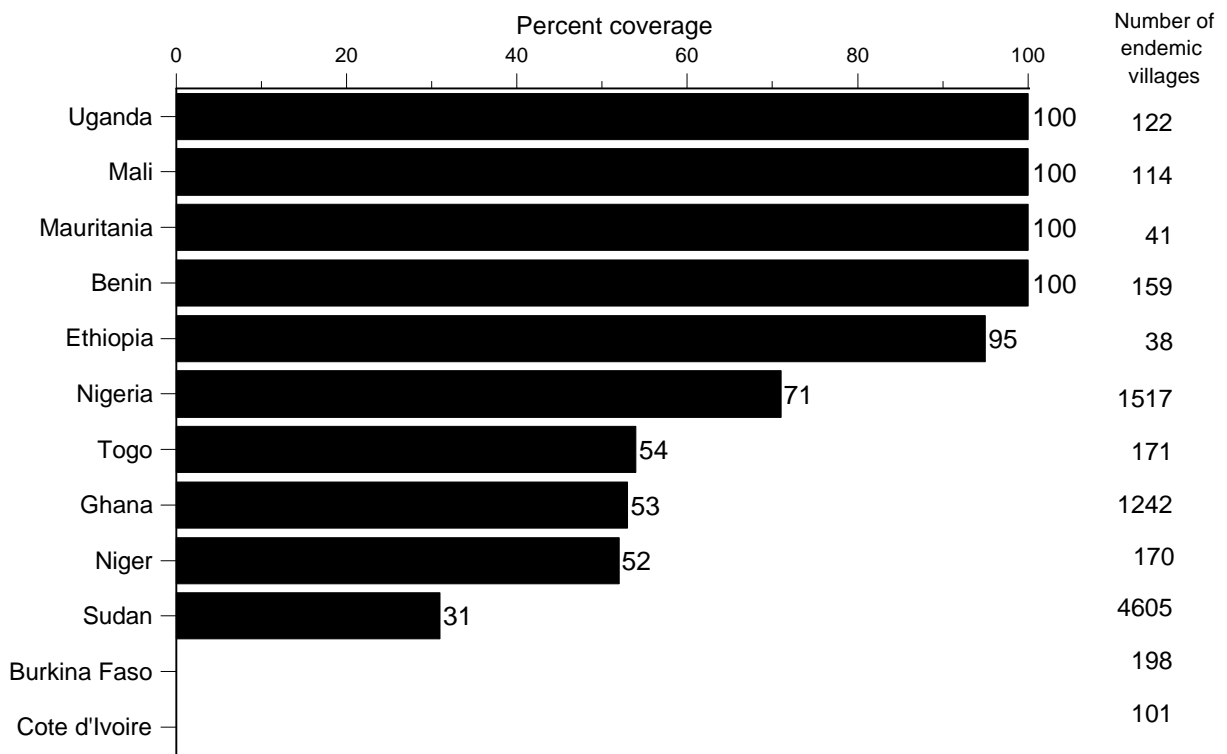


Figure 2

Table 1

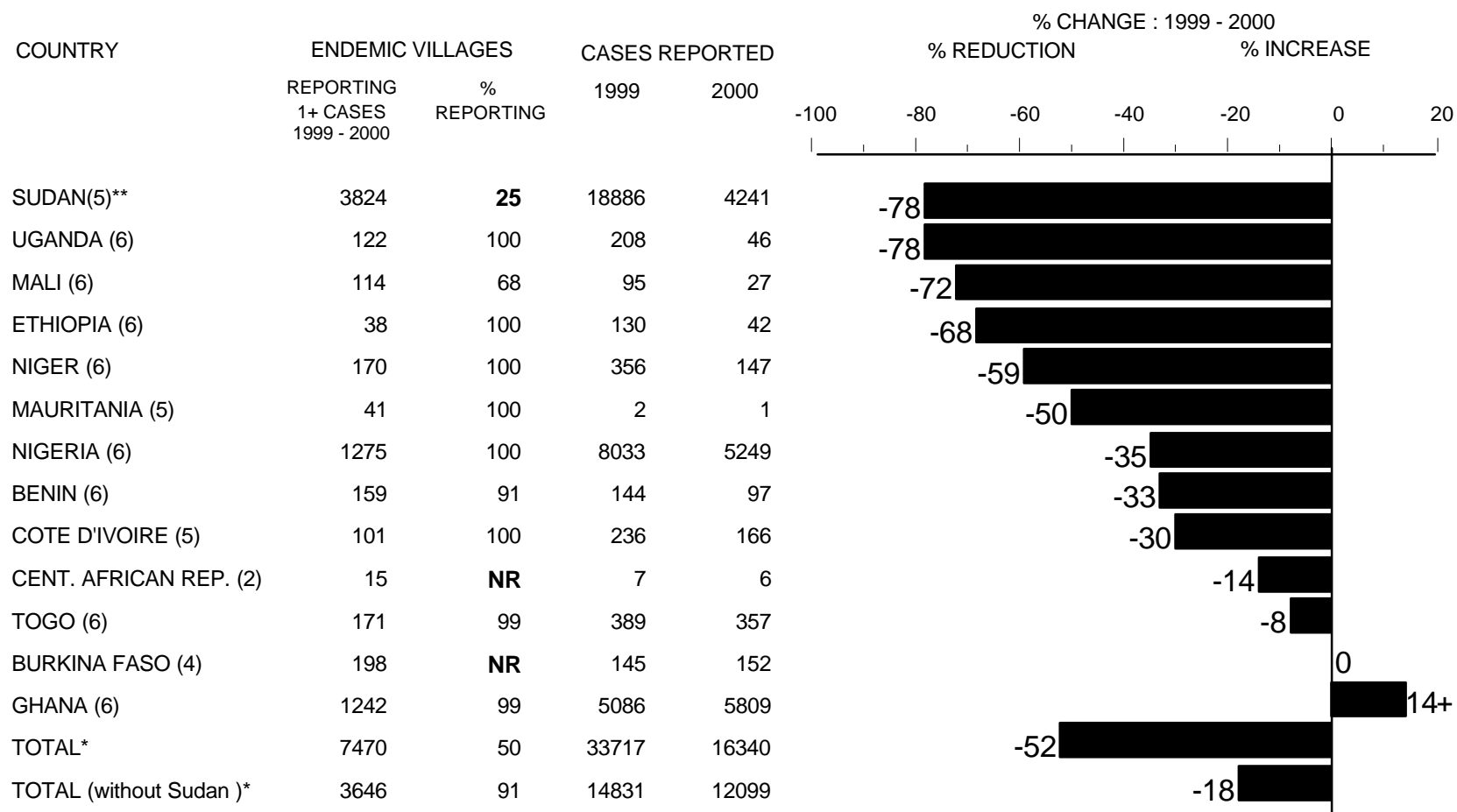
**Number of cases contained and number reported by month during 2000*
(Countries arranged in descending order of cases in 1999)**

COUNTRY	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED													%
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
SUDAN	400 / 1084	280 / 629	203 / 466	359 / 756	396 / 1306	/	/	/	/	/	/	/	1638 / 4241	39
NIGERIA	707 / 1263	455 / 1021	651 / 1137	368 / 754	346 / 630	323 / 444	/	/	/	/	/	/	2850 / 5249	54
GHANA	1737 / 1896	1214 / 1523	706 / 902	450 / 661	485 / 594	150 / 233	/	/	/	/	/	/	4742 / 5809	82
BURKINA FASO	6 / 8	3 / 3	15 / 44	45 / 97	/	/	/	/	/	/	/	/	69 / 152	45
NIGER	1 / 1	2 / 2	0 / 0	2 / 3	23 / 39	67 / 106	/	/	/	/	/	/	95 / 151	63
TOGO	63 / 89	40 / 54	39 / 56	18 / 38	53 / 68	34 / 52	/	/	/	/	/	/	247 / 357	69
BENIN	40 / 53	20 / 29	11 / 17	9 / 9	0 / 0	1 / 2	/	/	/	/	/	/	81 / 110	74
COTE D'IVOIRE	21 / 25	55 / 60	6 / 33	8 / 38	6 / 11	/	/	/	/	/	/	/	96 / 167	57
MALI	5 / 5	0 / 0	0 / 0	5 / 5	5 / 13	3 / 4	/	/	/	/	/	/	18 / 27	67
UGANDA	3 / 4	2 / 2	4 / 4	11 / 11	15 / 17	10 / 10	/	/	/	/	/	/	45 / 48	94
MAURITANIA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	/	/	/	/	/	/	/	1 / 1	100
ETHIOPIA	0 / 0	0 / 0	2 / 2	26 / 26	11 / 12	4 / 4	/	/	/	/	/	/	43 / 44	98
C.A.R.	/	/	/	/	/	/	/	/	/	/	/	/	0 / 6	0
CHAD	0 /	0 /	0 /	0 /	/	/	/	/	/	/	/	/	0 /	
CAMEROON	0 /	0 /	0 /	0 /	/	/	/	/	/	/	/	/	0 /	
TOTAL*	2983 / 4432	2071 / 3325	1637 / 2661	1301 / 2398	1341 / 2691	592 / 855	0 /	0 /	0 /	0 /	0 /	0 /	9925 / 16362	61
% CONTAINED	67	62	62	54	50	69							61	

* Provisional

Figure 3

Percentage of Endemic Villages Reporting and Percentage Change in Number of Indigenous Cases of Dracunculiasis During 1999 and 2000*, by Country



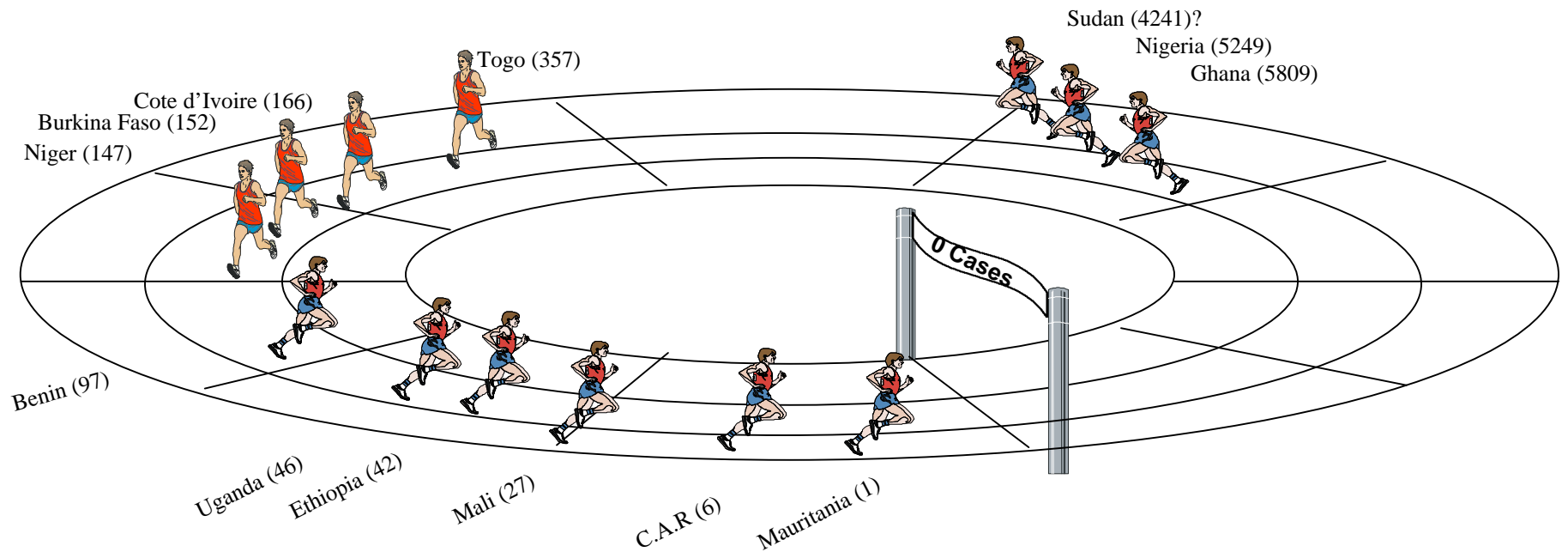
* provisional

** 2,000 (28%) of 7,290 endemic villages are not accessible to the program

Figure 4

GUINEA WORM RACE

January – June 2000*



*Provisional, excludes imported cases

DEFINITION OF CASE CONTAINMENT

A case of Guinea worm disease is contained if all of the following conditions are met:

1. The patient is detected before or within 24 hours of worm emergence; and
2. The patient has not entered any water source since the worm emerged; and
3. The village volunteer has properly managed the case, by cleaning and bandaging until the worm is fully removed, and by giving health education to discourage the patient from contaminating any water source (if two or more emerging worms are present, the case is not contained until the last worm is pulled out); and
4. The case is verified by a supervisor within 7 days of worm emergence (to confirm that the case is Guinea worm, and that it has been properly contained).

MEETINGS

Niger, Nigeria and Benin will hold a cross-border meeting in Maradi, Niger, on July 26-27, 2000.

The Program Review for Sudan's Guinea Worm Eradication Program will be held in Nairobi, Kenya on September 25-26, 2000. It will be followed by reviews of the Ethiopian and Ugandan programs on September 27, also in Nairobi.

The Ghana Guinea Worm Eradication Program is planning a technical review of the program during September 18-20, 2000 in Tamale, capital of the Northern Region of Ghana.

RECENT PUBLICATIONS

Grossl NA., 2000. Sir Jimmy and the worm slayers. The Pharos 63 (2):8-11

WHO, 2000. International Commission for the Certification of Dracunculiasis Eradication. Fourth Meeting 15-17 February 2000. Report and Recommendations. WHO/CDS/CPE/CEE/2000.6

"The Commission supports conduct of several WHO elimination and eradication programmes and the development of community-based integrated health services. However, eradication of GW and certification will require intensification of field activities and resources. These activities should not be diluted by integration into other control or eradication activities unless the GW actions are strengthened." One of the 12 recommendations in this report.

*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 is also available on the web at http://www.cdc.gov/ncidod/dpd/list_drc.htm.



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