



Date: Aug. 18, 2000

From:



WHO Collaborating Center for  
Research, Training and Eradication of Dracunculiasis

Subject:

GUINEA WORM WRAP-UP # 104

To: Addressees

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

**CASES REDUCED BY 24% OUTSIDE OF SUDAN IN FIRST HALF OF 2000**

In January-June 2000, the 12 endemic countries remaining outside of Sudan have reduced their total cases of dracunculiasis so far this year by -24%, from 15,962 to 12,155 (Figure 1). This is the best performance in several years, and it is led by the continued dramatic reductions in cases in Nigeria. [After reducing its cases by -71% in June, Nigeria has reduced its July cases by -68% (Table 1).] This overall reduction is achieved despite a cumulative increase in cases in Ghana of 14% so far, and recent reports from Ghana suggest that that program is also beginning to achieve reductions in cases again. These welcome reductions are the result of last year's hard work. Programs should redouble their efforts to monitor and improve the status of this year's interventions, by using line-listings; by strengthening active surveillance, supervision and motivation of village-based health workers; and by ensuring that all households in endemic villages receive a cloth filter.

Figure 1  
Number of Dracunculiasis Cases Reported Outside of Sudan  
by Month, January 1999 - June 2000

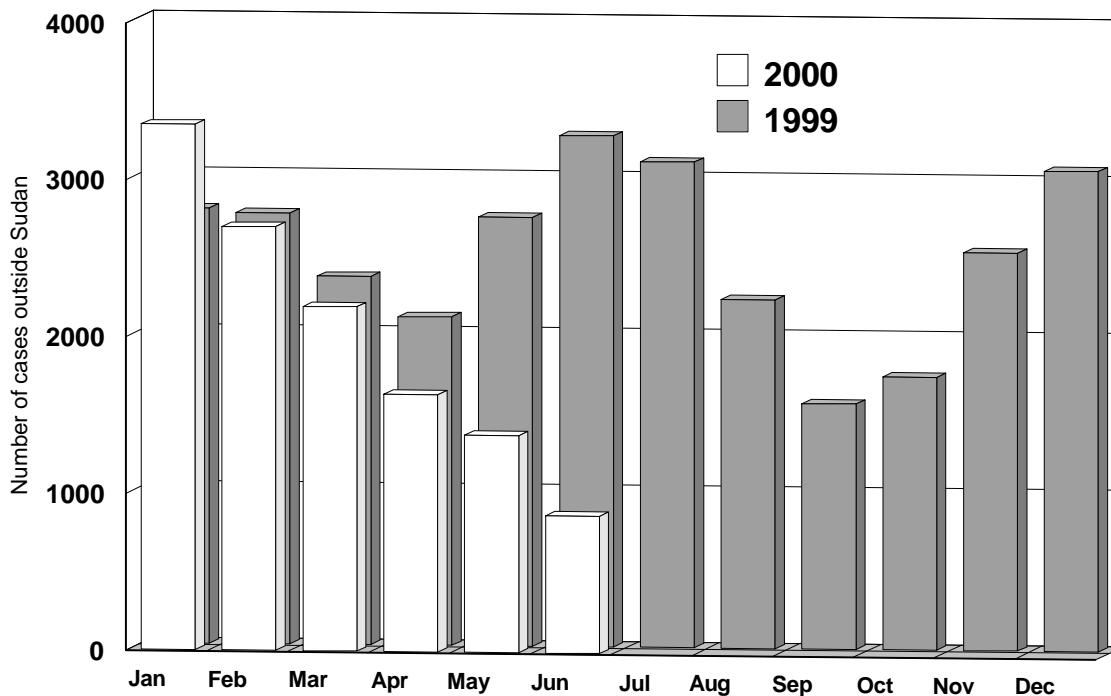


Table 1

**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													CONT.
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
SUDAN	457 / 1200	460 / 878	429 / 757	446 / 1060	1360 / 4927	1811 / 4781	375 / 1528	/	/	/	/	/	5338 / 15131	35
NIGERIA	707 / 1263	455 / 1021	651 / 1137	368 / 754	346 / 630	323 / 444	336 / 497	321 / 493	/	/	/	/	3507 / 6239	56
GHANA	1737 / 1896	1214 / 1523	706 / 902	450 / 661	485 / 596	201 / 237	94 / 125	/	/	/	/	/	4887 / 5940	82
BURKINA FASO	7 / 9	7 / 7	19 / 44	93 / 187	231 / 325	196 / 269	53 / 211	/	/	/	/	/	606 / 1052	58
NIGER	1 / 1	2 / 2	0 / 0	2 / 3	23 / 39	67 / 106	116 / 177	187 / 363	/	/	/	/	398 / 691	58
TOGO	63 / 89	38 / 53	36 / 52	15 / 34	49 / 70	44 / 54	48 / 73	11 / 17	/	/	/	/	304 / 442	69
BENIN	40 / 53	20 / 29	11 / 17	9 / 9	0 / 0	1 / 2	3 / 3	/	/	/	/	/	84 / 113	74
COTE D'IVOIRE	25 / 26	63 / 69	15 / 42	5 / 32	6 / 17	16 / 45	12 / 12	/	/	/	/	/	142 / 243	58
MALI	5 / 5	0 / 0	0 / 0	5 / 5	5 / 13	6 / 11	14 / 28	/	/	/	/	/	35 / 62	56
UGANDA	4 / 4	2 / 2	3 / 4	11 / 11	14 / 16	10 / 10	12 / 24	/	/	/	/	/	56 / 71	79
MAURITANIA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	4 / 5	1 / 7	/	/	/	/	/	6 / 13	46
ETHIOPIA	0 / 0	0 / 0	2 / 2	26 / 26	11 / 12	4 / 4	9 / 9	/	/	/	/	/	52 / 53	98
C.A.R. <sup>^</sup>	0 / 7	0 / 9	0 / 2	0 / 0	0 / 1	0 / 9	0 / 4	/	/	/	/	/	0 / 32	0
CAMEROON **	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	/	/	/	/	1 / 1	
CHAD	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	/	/	0 / 0	
TOTAL*	3046 / 4553	2261 / 3593	1872 / 2959	1430 / 2782	2531 / 6647	2683 / 5977	1073 / 2698	519 / 874	0 / 0	0 / 0	0 / 0	0 / 0	15416 / 30083	51
% CONTAINED	67	63	63	51	38	45	40	59					51	

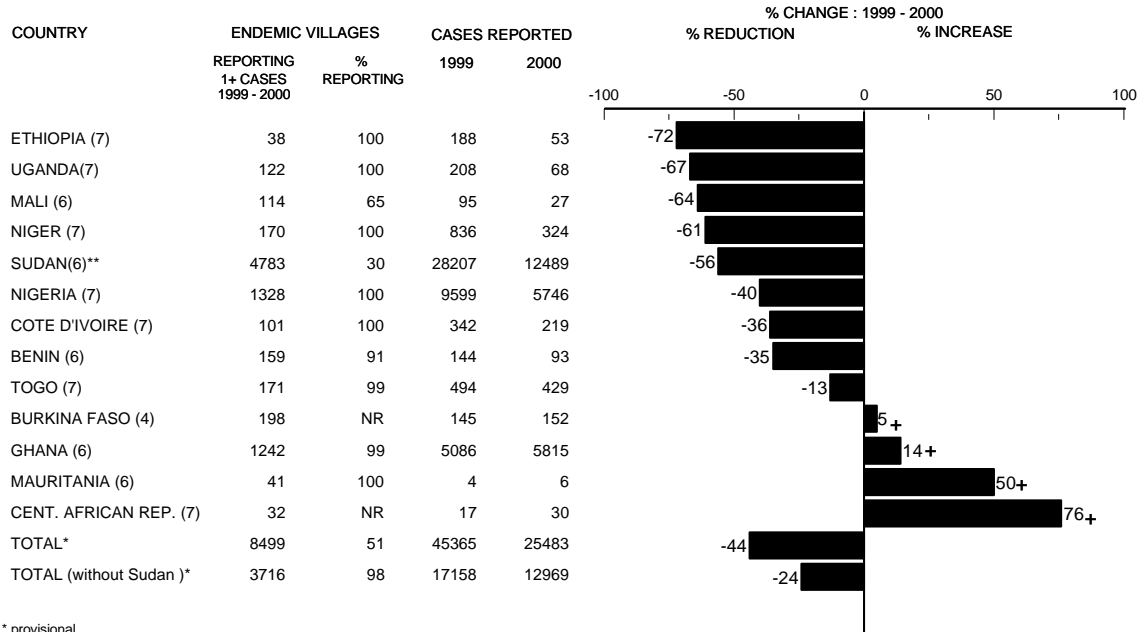
\* Provisional

\*\* Cameroon reported 1 case imported from Nigeria in August.

<sup>^</sup> So far, 3 of the 32 cases reported by Central African Republic as Guinea worm disease were confirmed to be onchocerciasis. Allegedly 2 cases were imported from Democratic Republic of Congo in January

Figure 2

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



\* provisional

\*\* 2,596 (35%) of 7,379 endemic villages are not accessible to the program

**CDC TEAM VISITS CENTRAL AFRICAN REPUBLIC, FINDS A SURPRISE**

A two person team from the Centers for Disease Control and Prevention (CDC), Mr. Aaron Zee and Dr. Marc Weisskopf, visited the Central African Republic from July 8-August 4, 2000, at the invitation of C.A.R.'s minister of health. They were asked to assist in clarifying the status of dracunculiasis in the country, and make recommendations to the national program. The team visited 29 of 32 villages with recent suspect cases near the southeastern borders with Sudan and Democratic Republic of Congo, as well as the Mboki camp for Sudanese refugees. They interviewed a person who had been filmed earlier in the year with an active case of dracunculiasis, and found other evidence to suggest that there probably is indigenous dracunculiasis in C.A.R. They also found widespread confusion between dracunculiasis and onchocerciasis. They obtained worms from just beneath the skin of 3 suspect cases in 3 different areas, all of which were found to be Onchocerca upon microscopic examination at CDC. Suspect cases were more common in men than women, but more than half of emergence sites were at or above the level of the thigh. There is little active surveillance in the suspected endemic areas, and this plus the confusion with onchocerciasis made it impossible to determine at this time the extent to which dracunculiasis may be under-or over reported. The team made several recommendations in preparation for the next apparent peak season for Guinea worm transmission (October-December), including that a team of international consultants should return to the C.A.R. then. Additional support for this mission was provided by The Carter Center and UNICEF.

**IN BRIEF:**



Niger. Lions Club Niamey Lantana has donated 200 tubes of antibiotic ointment, 175 packets of 10 units of gauze, and 150 packets of 10 units of bandages for use in case containment kits, to the national Guinea Worm Eradication Program. Staff from the Guinea Worm Eradication Programs of Niger and Nigeria held a cross-border meeting in Maradi, Niger on 26-27 July. Nigeria was represented by GW workers from Kano, Jigawa, and Katsina States, as well as the Local Government Areas (LGAs) bordering Niger, consultants from NW and NE zones, the desk officer from the Yakubu Gowon Center and the Carter Center country representative. Niger was represented by regional coordinators from Dosso,

Tahoua, Maradi, and Zinder, the national coordinator, ministry of health staff and the Global 2000 resident technical advisor. The participants reviewed recommendations from their previous meeting in Sokoto, and identified specific activities to be implemented on both sides of the shared border, including active case searches, intensification of health education, application of Abate, identification of routes used by nomads, and regular meetings between supervisors located at the borders.

Nigeria. General (Dr.) Yakubu Gowon visited Zamfara State on August 8<sup>th</sup>, Kebbi on August 9<sup>th</sup>, and Sokoto on August 10<sup>th</sup>. In Zamfara he met with the chairmen of the endemic LGAs, and inquired of each about the status of Guinea worm disease in their areas and what they were doing about it. The state commissioners for health and water also attended. In a subsequent meeting with the deputy governor, he

was told that the state had recently paid 10 million naira (~US\$100,000) for a new drilling rig, to provide safe water to endemic areas. In Kebbi, he congratulated the deputy governor, state cabinet, and chairmen of 3 endemic LGAs on having provided 29 borehole wells and 44 hand dug wells to cover all endemic villages in the state, since his previous visit. In Sokoto, he met with the state commissioners for health and water, the WATSAN chairman, and chairmen of two of the three endemic LGAs. He promised to return to Zamfara and Sokoto States before the end of this year to review their progress. Nigeria has reported 68% fewer cases in July 2000 (497) than in July 1999 (1,566).



Togo. Seventeen U.S. Peace Corps Volunteers, 9 Togolese district supervisors, staff of the national Guinea Worm Eradication Program, and a consultant provided by Health and Development International and The Carter Center/Global 2000, held Togo's first "Worm Week" of intensive interventions in Ogoou Prefecture on July 24-29. The teams covered 56 endemic localities, conducting health education, door-to-door filter demonstrations, distributing another 1000 filters to bring coverage in the prefecture to 100%, and placing 260 posters (the Togo program's first). Guinea worm messages were carried by Radio Ogoou and Tcheti (in nearby Benin), the theater group "Calabash & Coris" performed in 5 villages, videos featuring GW were shown in several larger villages, and some events were filmed by Togo Television and broadcast on their national evening news program. Participants in some of the week's activities included prefecture medecin-chef Dr. Amatsu Yibor, regional medecin-chef Dr. Morgah, Ogoou Prefet Mr. Ameyo, Ogoou senator (*deputé*) Mr. N'Tare Gaglo, Peace Corps director Reabold and Peace Corps associate director Mr. Tchao Bamaze, and numerous village chiefs. PLAN International has begun work on 15 large diameter wells in Haho District and 7 in East Mono.

#### WHO HELPS CAMEROON PREPARE FOR CERTIFICATION OF ERADICATION

Mr. Pierre Cattand and Mr. Marc Karam from WHO/Geneva visited with Dr. Dama Mana, National Coordinator of the GWEP in Cameroon during 6-9 June to review the requirements for surveillance and documentation during the pre-certification phase. Ten villages of the Extreme Nord Province and relevant health centers were visited. Recommendations about sustaining surveillance and regular reporting were made. Financial support was provided for activities such as meeting of "Delegates provinciaux", preparation of posters, health education and social mobilization, and providing e-mail, fax and telephone line for Dr. Dama.

#### MEETINGS

The annual Program Review for still-endemic francophone countries (Benin, Burkina Faso, Central African Republic, Cote d'Ivoire, Mali, Mauritania, Niger, Togo) will be held in Niamey, Niger on October 23-27, 2000.

#### RECENT PUBLICATIONS

CDC, 2000. Progress Toward Global Dracunculiasis Eradication, June 2000. MMWR, 49: 731-735.

*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>*



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