

Memorandum

Date

August 1, 1997

From



WHO Collaborating Center for Research, Training, and Eradication of Dracunculiasis

Subject

GUINEA WORM WRAP-UP #70

То

Addressees

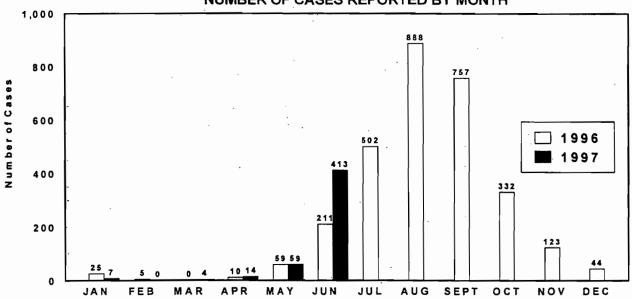
Detect Every Case, Contain Every Worm!

A NEW LESSON FROM NIGER

Throughout 1996, the Guinea Worm Eradication Program of Niger blazed a new trail for highly-endemic countries by reducing the incidence of dracunculiasis nationwide by 79%, from 13,821 cases reported in 1995 to only 2,956 cases reported in 1996. As we highlighted in <u>Guinea Worm Wrap-Up #58</u> (July 1996), the spectacular achievements that were manifest in 1996 reflected the program's effective work in 1995. So far this year, however, Niger has recorded 497 cases in January-June, as compared to 310 cases during the same period of 1996, which is an <u>increase of 60%</u> (<u>Figures 1 and 2, Table 1</u>). The main reason for the disappointing increase in cases in 1997 is no mystery: last year, the Niger program was badly handicapped by inadequate funding, which forced the program to do the best it could with less than 50% of the funding which it needed, and for which it had budgeted. Improved surveillance has likely played only a minor role in these unfortunate results.

Figure 1

NIGER GUINEA WORM ERADICATION PROGRAM
NUMBER OF CASES REPORTED BY MONTH



Even more tragically, however, a similar unnecessary delay in funding has occurred again in the first six months of 1997, for which the program will surely suffer the consequences again next year. The delayed funding in 1997 disrupted supervision and surveillance activities, prevented timely social mobilization of endemic villages, and forced the program to rush to conduct many activities in a short period just before the rains and peak transmission season began, thus over-burdening the field staff, impairing their morale, and reducing the quality of their work. At this stage of the global Guinea Worm Eradication Program, such avoidable delays in deployment of resources are disastrous. So far this year, extended delays in funding have also occurred in Benin, Burkina Faso, Cameroon, Ethiopia, and Togo. All external partners should act now to prevent similar catastrophies in 1998. The penalty for not doing so is one more year of eradication efforts.

Figure 2

PERCENTAGE OF ENDEMIC VILLAGES REPORTING AND PERCENTAGE CHANGE
IN NUMBER OF CASES OF DRACUNCULIASIS DURING 1996 AND 1997*, BY COUNTRY

COUNTRY		VILLAGES: 1997		REPORTED	% REDUCTION	% CHANGE	: 1996 - 1997 0	% INCREASE	100
	NUMBER	% REPORTING	1998	1997					
INDIA (5)	. 3	100	6	0	-100				
MAURITANIA (3)	. 142	NR	16	2	-88				
YEMEN (6)	9	100	50	6	-88				
CHAD (6)	13	100	92	14	-85				
BURKINA FASO (5)	349	30	760	198	-74		·		
MALI (6)	439	78	564	211	-63				
COTE D'IVOIRE (6)	228	91	2223	857	-61				
TOGO (5)	249	NR	682	342	-50				
BENIN (6)	272	55	529	292	-45				
SUDAN(5)	5251	35	32276	22290		-31			
UGANDA (6)	379	. 99	1140	1085		-51			
CAMEROON (6)**	13	100	1	1			٦٥		
SENEGAL (5)	7	100	0	0			o		
NIGERIA (5)	1531	91	5455	5511			11+		
ETHIOPIA (6)	57	100	210	291				39+	
NIGER (6)	416	. 99	310	497				60+	
GHANA (6)	1016	100	3625	6473					9 +
TOTAL	10374	60	47939	38070		-21			-
TOTAL WITHOUT SUDAN	5123	87	15663	15780]1+		

- * Provisional
 (3) Reports for Jan. Mar. 1997
 (5) Reports for Jan. May 1997
- ** Reported one case imported from Nigeria in Jun
- (4) Reports for Jan. Apr. 1997.



INDIA: ONE YEAR WITHOUT A CASE?!

India may have finally slain the dragon worm! Although we do not have confirmation that no cases occurred in India in June or July, it appears that is indeed so. India's last known case occurred in Jodhpur District of Rajasthan State in July 1996. All nine cases reported in India last year were in three villages of the same district. All nine were contained. We hope our congratulations to <u>Dr. Gautam Biswas</u>, his colleagues, and predecessors are not premature. <u>M.I.D. Sharma</u> must be smiling!

Table 1

NUMBER OF CASES CONTAINED AND NUMBER REPORTED BY MONTH DURING 1997* (COUNTRIES ARRANGED IN DESCENDING ORDER OF CASES IN 1996)

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	VILLAGES						NUMBER OF	NUMBER OF CAME CONTAINED / NUMBER OF CAMES REPORTED	AINES / RUSE	HISK OF CAME	S KEPOK IED					% CONT.
	1/1/97	9661 NI		`	MARCII	APRII.	MAY	JUNE	V.I.Y	AUGUST	SEPTEMBE	OCTOBER	NOVEMBER DECEMBER	DECEMBER	TOTAL.	
	5114	118578		776	. 5089 / 7762		1514	,	,		,	`	,	. ,	11361	15
	1353	12282	983	1294 / 1332	1878 1920	106 / 767	700 / 1110	_	7.	,		`	_	,	4922	89
	509	1877	1498 / 1685	1182	904 / 1226	606 / 606	583	272	`	,	,	-	,	_	5119	97
HIRKINA FASO	7.00		-	۰,	0	¥9 / 57	1 , 85	_	_	,	,	_		1.	63 / 198	32
	416		3,7	0,0	2,4	5 / 14	33 / 89	216 / 413	`	, ,	`	_	,	`	. 259 / 497	. 52
COTE D'IVOIRE	216	2794	951 / 811	146	1060	171 , 001	134	59 , CO	`.	,	. ,	`	. ,		746 , 857	1.8
	430	2402	17 SE	11,11	* / *	* ×	23 / 30	. 101	,	,	,	_	1	_	146 / 211	
	249	1626		39,	£7 /			`	,	,		`	1	1.	39 / 342	11
HUANDA	726	1455	•	1,6	27 / 36			160		,	,	_	,		599 , 1085	55
	32.5	1427	98 / 112	38 / 39	61 / 51			11,11	,	. *	,	_	_	_	270 / 292	25
MAURITANIA	143	362	1,1	0,0	, '' ₁	' '	,	/ .	,	,	,	\	1	1	2,2	100
ETHOPIA	15	37.1	4 / 5	2,2	٠, ٢	40 / 43	76 , 1016	110	,	, .	1.	\	1.	,	239 / 291	28
	11	127	2 / 2	2,2	9/9	۲, ا	. ',	2,2	,	1	,	`	,	,	14 / 14	100
	7	છ	0,0	0,0	1,1	1,1	2 / 4	0,0	,		'	,		'	4 / 6	19
SENEGAL.	7	19	0,0	0,0	0,0	0,0	0,0		,	1.	,	_	,	,	0,0	
CAMEROON**	61	11	0,0	0,0	0,0	0,0	0,0	1,1	,	,	,	,	,	,	1,1	100
	e	5	0′0	c	0,0			,	,	,	,	`	,	_	0,0	. ,
	198	152X05	473 / 6K79	3527	7043	3908 / 8129	5	912	0,0	u u	0,0	0,0	0,0	0,0	23784 / 38070	62
W().) %	* CONTAINED		69	78	9	48	83	*						•	79	
				-				 -								

PROVISIONAL

[.] Reported one case imported from Nigeria in June

IN BRIEF:

<u>Burkina Faso</u> has reportedly <u>exported three cases of dracunculiasis to Mali</u> so far this year: two cases to Gao Region in January, and one case to Mopti Region in June. All three cases were contained.

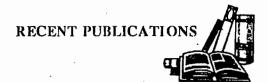
Ethiopia's Dracunculiasis Eradication Program held a Regional Review Meeting in Gambella on June 27. The meeting was chaired by the national program coordinator, <u>Dr. Desta Alamerew</u>. The program plans to hold a "Regional Guinea Worm Day" in Gambella in November or December. 1997 funding for this program has been delayed, as were supplies of Abate and filter material.

Benin. Dr. Alhousseini Maiga of WHO arrived in Benin for a consultation to that country's program in late July. He will also assist the Togo GWEP immediately after Benin.

Nigeria. Dr. Jason Weisfeld, a consultant for Global 2000/The Carter Center, provided technical assistance to Mr. Ben Nwobi, Zonal Facilitator, and his colleagues in Nigeria's Northeast Zone during July.

HOPKINS ELECTED TO ACADEMY OF SCIENCES

In April 1997, <u>Dr. Donald R. Hopkins</u>, Associate Executive Director of Health Programs at The Carter Center, was elected to the American Academy of Arts and Sciences. Congratulations Don!!



World Health Organization, 1997. International Commission for the Certification of Dracunculiasais Eradication. Second Meeting: Report and Recommendations. WHO/FIL/(DRA)/97.192, 13pp.

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 Trenton K. Ruebush, MD, 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.



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