



**Memorandum** 

Date: February 14, 2001

From:



WHO Collaborating Center for Research, Training and Eradication of Dracunculiasis

Subject: GUINEA WORM WRAP-UP # 110

To: Addressees

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

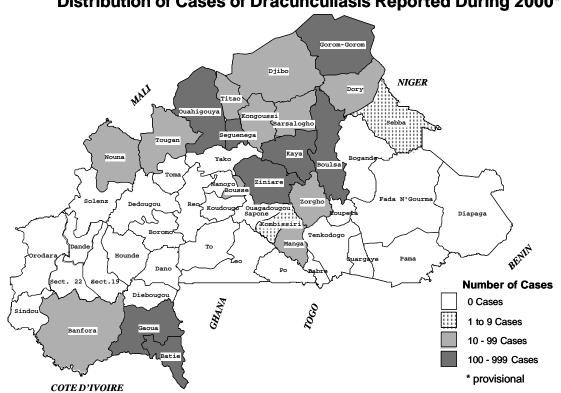
### **BURKINA FASO: PREPARING FOR 2001**

Under the leadership of <u>Dr. Dieudonne Sankara</u>, Burkina Faso's Guinea Worm Eradication Program has begun preparing for this year's peak transmission season, which in this country begins in April/May and runs through September. A national conference was held on January 16<sup>th</sup>-18<sup>th</sup> to review the Plan of Action for 2001 that was shared with external partners in December. The meeting, which was convened at Ouahigouya in the second-highest endemic district, was well attended by Guinea worm supervisors, *agents renforts*, and district medical directors, as well as by other representatives of the Ministry of Public Health, WHO, The Carter Center/Global 2000, and Peace Corps.

Figure 1

Burkina Faso Guinea Worm Eradication Program

Distribution of Cases of Dracunculiasis Reported During 2000\*



Burkina Faso reported (provisionally) 1938 cases of dracunculiasis in 2000, which is a modest reduction of 11% in reported cases from the 2,184 reported in 1999. It is now the fourth highest endemic country remaining, after Sudan, Nigeria, and Ghana (see Guinea Worm Race 2000). 68% of the cases in 2000 were reported to have been contained. The geographic distribution of cases in 2000 is illustrated in Figure 1. Most of the remaining cases are concentrated in the north-central part of the country, with a smaller but significant focus in the southwest, bordering northeast Côte d'Ivoire and northwest Ghana. Burkina Faso ranks second in the number of cases exported to other countries in 2000 (18). Provisional reports are that 295 villages reported one or more cases of dracunculiasis in Burkina Faso during 2000. However, 108 (37%) of the 295 villages reported only 1 case. As of September 2000, 70% of endemic villages were reported to have cloth filters in all households, 63% had at least one source of safe drinking water, and Abate was being used in 19% of the endemic villages.

UNICEF has indicated its intention to provide some support for the program in 2001, including two 4-wheel drive vehicles and rehabilitation of wells in endemic villages. More than 20 U.S. Peace Corps Volunteers are posted in some of the most endemic areas, including the highest-endemic district (Kaya), and plan to assist by implementing "Worm Weeks" of intensive community mobilization and health education immediately prior to the peak transmission season. The Carter Center/Global 2000 has provided two short-term consultants, has purchased 20,000 square meters of nylon filter material and 50 additional bicycles to complement 250 bicycles being provided by UNICEF, and will provide other support to the national secretariat of the program. The program already has sufficient Abate on hand for this year.

## BASF DONATES 12,000 LITERS OF ABATE FOR 2001

BASF, A.G. has informed The Carter Center that it will donate 12,000 liters of Abate (temephos) for the Guinea Worm Eradication Program in 2001. The German-based BASF, which is a global chemical and agricultural company, purchased the Cyanamid Division from American Home Products (AHP) last year and will continue AHP's long tradition of supporting the program. The value of this new donation, which will be shipped to Ghana, Nigeria, and Kenya (for southern Sudan), is approximately \$250,000. As the remaining endemic countries get closer and closer to breaking all transmission from the final cases of dracunculiasis, vector control, using Abate, is an increasingly critical component of the campaign. We are delighted to welcome BASF as a valued new partner in the "Grand Coalition" against Guinea worm disease, and are very grateful for their generosity, especially at this final stage of the eradication campaign. Thank you BASF!!

## IN BRIEF:

<u>Côte d'Ivoire</u> Reports 35 cases for January 2001, only 15 (43%) of which were contained.

Ghana In December 2000, the 31<sup>st</sup> December Women's Movement drama group and the Christian Mothers drama group performed Guinea worm dramas during community durbars at Kranya Akura and Abease, respectively, in Atebubu District of Brong Ahafo Region. The purpose of the durbars was to increase awareness of strategies for eradicating dracunculiasis.

#### Number of cases contained and number reported by month during 2000\*

#### (Countries arranged in descending order of cases in 1999)

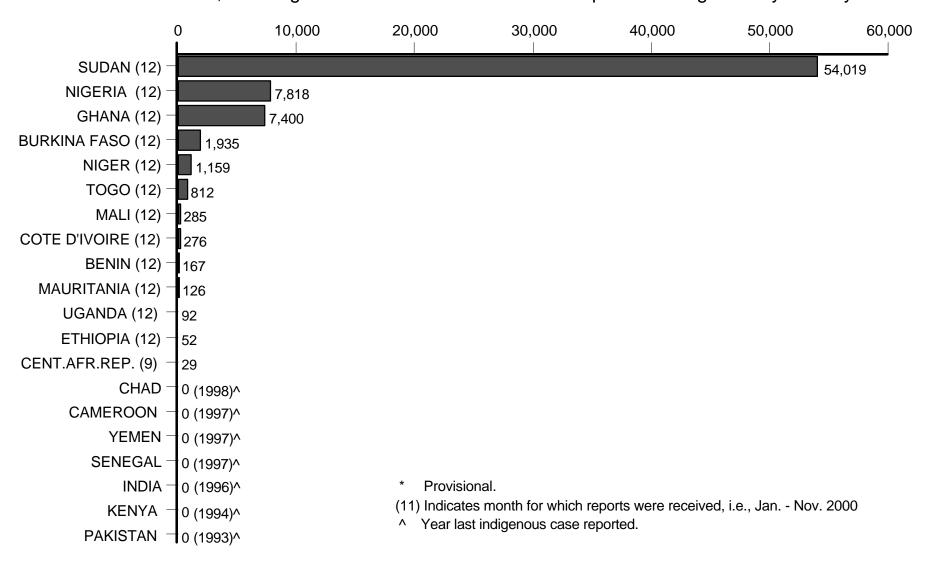
COUNTRY					NUMBE	R OF CASES CO	NTAINED / NUMBI	ER OF CASES RE	EPORTED					
		l							T		T	T		%
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	CONT.
	511	602	512	563	1951	3299	3411	3972	3699	2801	847	561	22729	
SUDAN	1261	1029	896	1309	6061	8572	7418	8826	9926	5550	1885	1286	54019	42
	709	451	651	368	346	324	337	321	274	228	202	365	4576	
NIGERIA	1265	993	1137	755	630	449	512	493	365	283	284	652	7818	59
	1737	1214	706	450	485	201	94	30	19	125	296	539	5896	
GHANA	1896	1523	1091	661	596	237	111	68	62	128	373	655	7401	80
	8	5 /	33	103	220	249	193	186	99	95	128	6	1325	
BURKINA FASO	24	9	67	190	326	339	269	275	147	125	148	19	1938	68
	1 /	2 /	• /	2	23	67	116	187	148	108	40	28	722	
NIGER	1	2	0	3	<sup>'</sup> 39	106	177	363	223	146	63	43	1166	62
	63	39	36	16	50	45	46	20	31	52	101	96	595	
TOGO	90	51	53	35	73	55	69	28	47	74	116	137	828	72
	41	20	10	8	0	3	3	0 /	7	14	23	21	150	
BENIN	53	29	17	9	, 0	4	3	, o	7	14	26	25	187	80
	25	63	15	5	6	16	12	23	8	6	5	0	184	
COTE D'IVOIRE	26	69	42	32	17	45	12	26	8	6	6	1	290	63
	5	0	0	5	5	6	14	19	32	50	23	14	173	
MALI	5	1	,	5	13	11	28	29	76	66	29	30	293	59
	4	2	3	11	14	10	12	8	4	4	0	0	72	
UGANDA	4	2	4	11	16	10	24	15	4	5	0	2	97	74
	0	0	0	0	1	4	3	27	21	14	4	3	77	
MAURITANIA	, 0	, 0	, 0	,	1	5	8	44	40	21	4	, 3	126	61
	0	0	2	26	11	4	9	1	1	2	1	0	57	
ETHIOPIA	, 0	, 0	2	26	12	4	9	2	, , , , , , , , , , , , , , , , , , ,	2	1	0	59	97
21110121	0	0	0	0	0	0	0	0	0				0	- 0.
C.A.R.	13	6	1	0	1	8	4	0	/ 0	/	/	/	33	0
	0	0	0	0	0	0	0	1	0	2			3	
CAMEROON	, 0	, 0	, 0	,	,	, 0	, 0	, 1	, 0	/ 2	/	/	3	100
C. IIIIII	0	0	0	0	0	0	0	0					0	100
CHAD	0	0	0	,	0	0	,	0	/	/	/	/	<sup>/</sup> 0	0
CHAD	3104	2398	1968	1557	3112	4228	4250	4795	4343	3501	1670	1633	36559	<b>⊢</b> •
TOTAL*	4638	3714	3310	3036	7785	9845	8644	10170	10906	6422	2935	2853	74258	49
TOTAL														49
% CONTAINED	67	65	59	51	40	43	49	47	40	55	57	57	49	
	1	1				1	1	1	1	1	1	1		1

<sup>\*</sup> PROVISIONAL

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

So far, 3 of the 33 cases reported by Central African Republic as Guinea worm disease were confirmed to be onchoceriasis. One case of dracunculiasis was imported from Sudan in January.

Figure 2 Dracunculiasis Eradication Campaign
Distribution of 74,170 Indigenous Cases of Dracunculiasis Reported During 2000 by Country\*



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

						% CHANGE :	1999 - 2000		F	
COUNTRY	ENDEMIC	VILLAGES	CASES REPORTED		% REDUCTION		% INCREASE			
	REPORTING 1+ CASES	% REPORTING**	1999	2000	400	50	•		50	
	1999 - 2000				<b>-100</b>	-50 	0	1	50 	
ETHIOPIA (12)	38	100	249	52	-79					
UGANDA(12)	130	100	316	92	-71					
BENIN (12)	167	95	473	167	-65					
MAURITANIA (12)	41	100	255	126		-51				
TOGO (12)	212	98	1594	812		-49				
NIGERIA (12)	1393	100	13247	7818		-41				
COTE D'IVOIRE (12)	112	100	467	276		-41				
NIGER (12)	180	100	1912	1159		-39				
MALI (12)	116	82	404	281		-29				
GHANA (11)	1513	99	9011	7400		-18	3			
SUDAN** (12)	4775	37	66097	54019		-18	3			
BURKINA FASO (12)	198	NR	2179	1935		-	11			
CENT. AFRICAN REP. (9)	32	NR	17	29		_				
TOTAL*	8907	57	96221	74170		-23				
TOTAL (without Sudan )*	4132	98	30124	20151		-33				

<sup>\*\* 2,600 (33%)</sup> of 7,898 endemic villages are not accessible to the program

<u>Togo</u> The Guinea Worm Eradication Program held its national review at Kpalime on February 8-10, 2001. Representatives of the six regional health directors (DRS), prefectural health directors (DPS) from endemic districts, and staff from the program participated. The meeting reviewed the status of Guinea worm eradication activities in each region and nationally, discussed the Plans of Action for 2001 for each prefecture and region, and made specific recommendations. External partners who participated in the meeting included Global 2000/The Carter Center, WHO, UNICEF, and the US Peace Corps.

Niger reports zero indigenous cases; only 2 imported cases (from Benin) in January 2001

Nigeria We congratulate Professor A.B.C. Nwosu on his appointment as Federal Minister of Health! For more recent readers, Prof. Nwosu is the former state commissioner for health in the old Anambra State, who initiated the Guinea Worm Eradication Program there in 1986, and thereby helped to get the national Nigerian program off to a solid start. Welcome back to the Guinea worm wars, Prof. Nwosu. We expect that Guinea worm's reign in Nigeria will be ended once and for all under your stewardship. Congratulations are also in order for Dr. Jude Anosike and his colleagues in Ebonyi Local Government Area, who have reduced the reported cases of Guinea worm by –89% in what was the highest endemic LGA in Nigeria only one year ago. BRAVO!! Nigeria has reported 1,017 cases in January 2001, a 20% reduction from the 1,265 cases reported in January 2000. 66% were contained. As of December 2000, 88% of Nigeria's 1,394 endemic villages had all households with cloth filters, Abate was applied in 54%, and 50% had at least one safe source of drinking water.

Figure 4

Number of Dracunculiasis Cases Reported Outside of Sudan

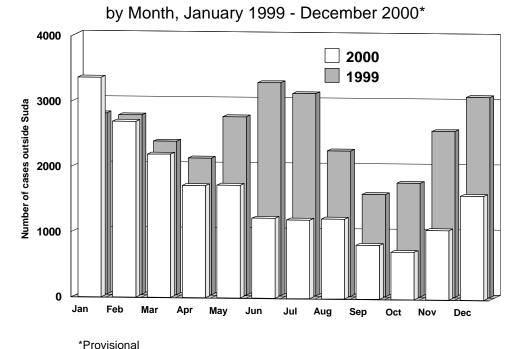
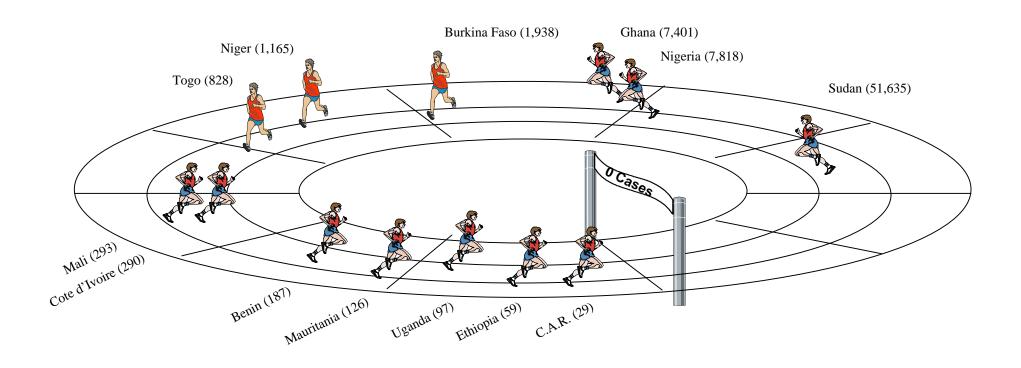


Figure 5

# **GUINEA WORM RACE: 2000\***



\*Provisional, includes imported cases

## **MEETINGS**

The sixth meeting of national programme coordinators of Guinea Worm Eradication Programs will be held in Lomé, Togo on March 26-29, 2001. This meeting is co-sponsored by WHO, The Carter Center, and UNICEF, including funds provided by the Bill and Melinda Gates Foundation. The chairman of the International Commission for the Certification of Dracunculiasis Eradication, <u>Dr. A.R. Al-Awadi</u>, is expected to attend, as well as <u>General Yakubu Gowon</u> of Nigeria.

#### **GUINEA WORM RACE 2000**

Seven of the 13 endemic countries remaining (Benin, Côte d'Ivoire, Mali, Uganda, Mauritania, Ethiopia and Central African Republic) came close to the finish line in 2000 (figure 5). (In 1999, 53 of Mauritania's 255 cases were reported in October-December). All of these countries should be able to detect and contain every case in 2001, even though Côte d'Ivoire has already missed that target in January. Benin raced past Côte d'Ivoire and Mali in 2000. Uganda came in a head of Mauritania. Ghana narrowly stayed ahead of Nigeria in Guinea Worm Race 2000, but there will be a high stakes challenge re-match to see which of those two countries has fewer cases in 2001.

## RECENT PUBLICATIONS

Watts SJ, 2000. Cases of Guinea worm (dracunculiasis) in nineteenth-century Australia. <u>Health & History 2:139-143</u>. [This report is of imported cases.]

Prothero RM. 2000. Health hazards and wetness in tropical Africa. Geography. 85(Part 4):335-344.

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 <a href="http://www.cdc.gov/ncidod/dpd/parasites/guineaworm/default.htm">http://www.cdc.gov/ncidod/dpd/parasites/guineaworm/default.htm</a>



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