



DEPARTMENT OF HEALTH & HUMAN SERVICES

Date: October 22, 2004



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

Subject: GUINEA WORM WRAP-UP #147

To: Addressees

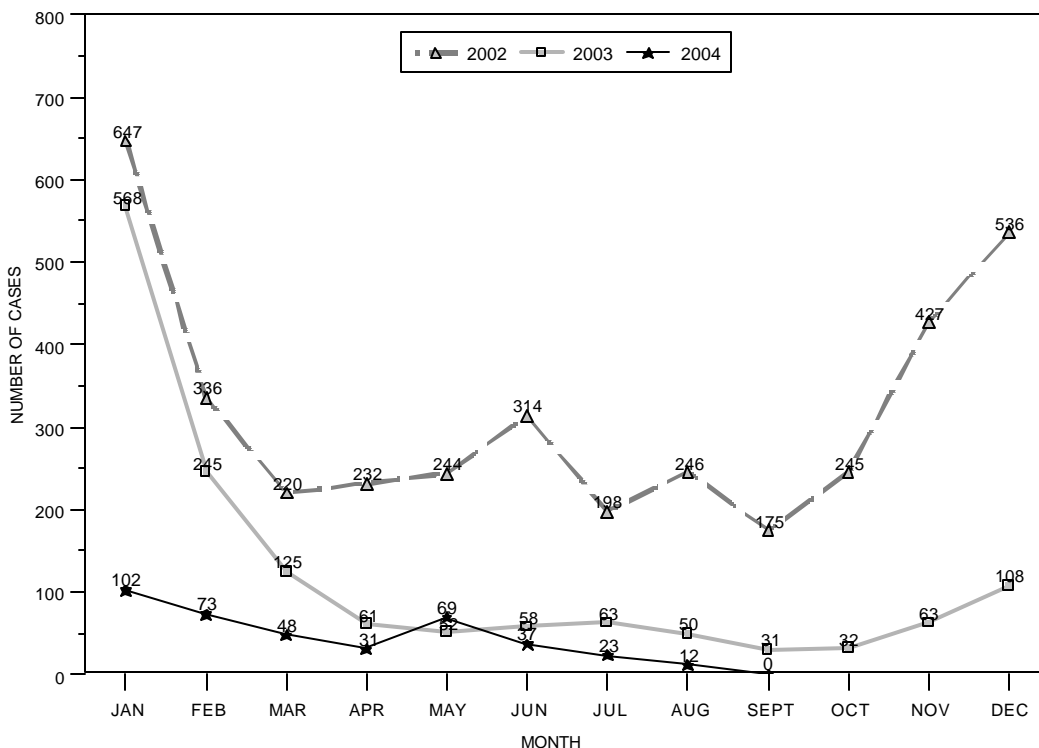
Do Daily Surveillance! Contain Every Case! Stop Guinea Worm Now!

NIGERIA REPORTS ZERO CASES IN SEPTEMBER!!!

For the first time since the Nigerian Guinea Worm Eradication Program (NIGEP) began in 1988, Nigeria has detected zero cases of dracunculiasis (Guinea worm disease) throughout the entire country for a whole month: September 2004. This compares to 31 cases reported by NIGEP in September 2003, and 175 cases in September 2002 (see Figure 1). The news of Nigeria's first zero-case month electrified the annual Review of Carter Center-assisted Health Programs in Nigeria, which was held October 11-13 at the Hill Station Hotel in Jos, Plateau State. Former Nigerian head of state General (Dr.) Yakubu Gowon presided at the Opening Ceremony of the review, with the administrator of Plateau State, Major General Chris M. Ali (retired).

Figure 1

Monthly Distribution of Cases of Dracunculiasis Reported in Nigeria During 2002 – 2004*



* Provisional

The remarkable progress achieved by NIGEP so far in 2004 is summarized in Table 1. Only 395 cases have been reported from 93 villages in January-September 2004. Only 73 of the 93 villages are endemic; the other 20 villages reported only imported cases. 741 of Nigeria's 774 Local Government Areas (LGAs) have reported no cases so far this year, and only 3 cases, all in one village, have been reported from the entire North East Zone of the country in January-September. 84% of Nigeria's cases have been contained in 2004 so far, compared to 74% in 2003 and 66% in 2002. 139 (35%) of this year's cases were contained in case containment centers. Congratulations Nigeria!

Table 1

Nigerian Guinea Worm Eradication Program

Impact of Interventions in Villages Where the Program Intervened During January - September 2003 and 2004					Status Summary: September 2004					
Zone	Number of endemic villages in which interventions were applied	Cases		% Change	Number of Villages			Number of cases		% cases contained
		2003	2004		Reporting indigenous cases	Reporting only imported cases	Total reporting cases	Reported	Contained	
		North West	25		59	27	-54%	4	0	
North East	13	36	3	-92%	1	0	1	3	2	67%
North Central	105	534	139	-74%	36	6	42	218	187	86%
South West	41	351	54	-85%	19	7	26	84	66	79%
South East	76	272	51	-81%	13	7	20	63	53	84%
Total	260	1252	274	-78%	73	20	93	395	332	84%

Dr. (Mrs.) Lola Sadiq of the WHO office in Nigeria described plans for WHO assistance to help Nigeria strengthen surveillance for dracunculiasis in the vast areas of the country that are now Guinea worm-free, including involvement of existing state epidemiologists, WHO State surveillance officers, and Local Government Area (LGA) level disease surveillance and notification officers who are already engaged in surveillance of polio, as well as many trained Guinea worm village volunteers in formerly endemic villages. Recommendations from the review are listed on page 7.

This review also included consideration of Carter Center-assisted onchocerciasis control activities in nine states, as well as trachoma control, urinary schistosomiasis control, and lymphatic filariasis elimination (including distribution of impregnated bednets) in two states. Drs. James Maguire and Frank Richards of CDC participated in the review as an extension of the Division of Parasitic Diseases' assistance with research and training for these parasitic disease programs and CDC's proposed assistance in strengthening surveillance of dracunculiasis in non-endemic areas. Other participants included the Nigerian national coordinators for Guinea worm eradication, schistosomiasis control, lymphatic filariasis elimination, onchocerciasis control and trachoma control, as well as representatives from the Yakubu Gowon Center and other NGOs.

NATIONAL ERADICATION PROGRAMS ACCELERATE PROGRESS AGAINST DRACUNCULIASIS

Excluding data for September 2003 and 2004 from Sudan, only 12,043 indigenous cases of dracunculiasis were reported during January – September 2004, a reduction of -47% from the 22,881 indigenous cases reported during the same period in 2003. Moreover, 10 of 12 endemic countries (excluding Sudan and Ghana) have reported only 961 cases so far in 2004, a reduction of -64% from the 2,679 cases reported

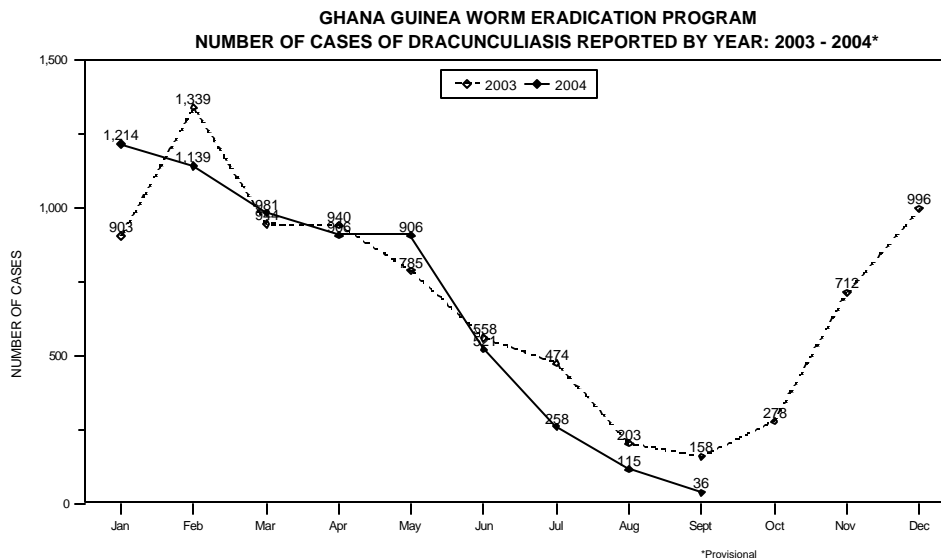
during the same period in 2003 (Figure 3). Another way of visualizing this progress is shown in Figure 4 where the number of zero indigenous case reporting months are denoted by shaded cells for January – September 2002, 2003, and 2004. Whereas in 2002 a total of 15 zero indigenous case months were recorded, there were 27 recorded in 2003, and 41 during 2004, so far!

GHANA: -78% FEWER CASES IN SEPTEMBER 2004

After continuous increases in cases of dracunculiasis during the first half of the 2004 and most of 2003, Ghana’s Guinea Worm Eradication Program recorded a reduction of -51% in cases in the third quarter of 2004, from 835 cases to 409 cases. This decline was led by a reduction of -78% in September, and included reductions of -46% in July and -43% in August (Figure 2). Ghana’s reported rate of case containment during the third quarter of 2004 remained at a modest 58%. Bear down, Ghana!

While inaugurating a Coastal Belt Water Supply Scheme in Volta Region’s Keta District in September, President John Kufuor expressed regret that Ghana now ranks second highest in Guinea worm disease incidence after Sudan, despite the fact that national coverage for rural water supply had increased from 28% in 1994 to 47% in 2004.

Figure 2



NIGERIA 1, GHANA 0



At the special Program Review for the Guinea Worm Eradication Programs of Sudan, Ghana and Nigeria that was held at The Carter Center in September 2003, Ghana’s Deputy Minister of Health, the Honorable Mr. Dani Baah, challenged Nigeria to see which of those two countries would achieve the most Guinea worm-free months in 2005. (Guinea Worm Wrap Up # 136). The twelve-month period of that challenge has not yet begun, but in this preliminary “test” trimester leading up to the actual competition in 2005, the score as of now is Nigeria 1, Ghana 0.



Table 2

Number of cases contained and number reported by month during 2004*
(Countries arranged in descending order of cases in 2003)

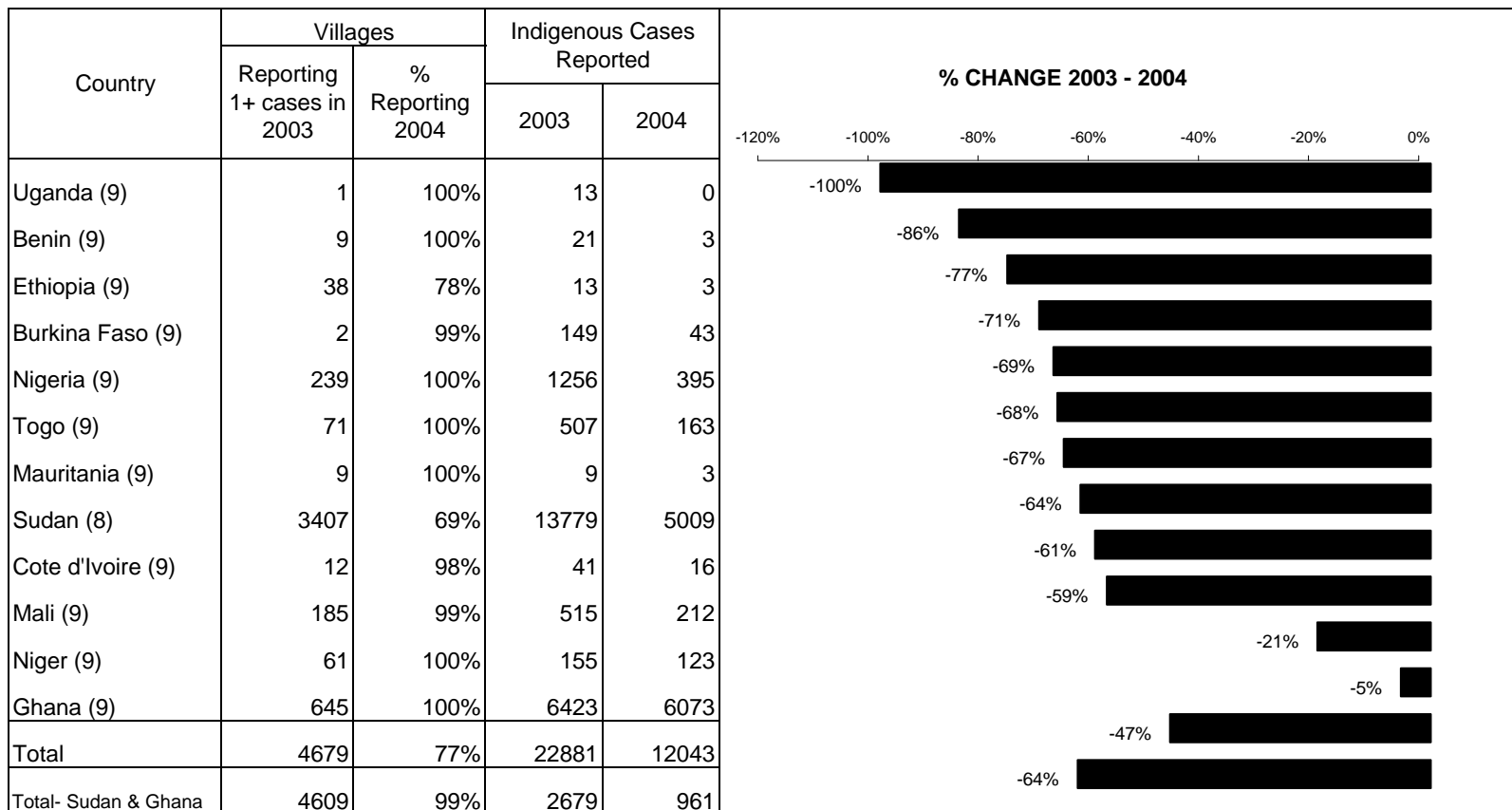
COUNTRIES REPORTING CASES	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED													CONT.	%
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*		
SUDAN	33 / 204	44 / 251	31 / 218	57 / 568	151 / 991	162 / 1253	143 / 1022	56 / 502	/	/	/	/	677 / 5009	14	
GHANA	647 / 1214	668 / 1139	625 / 981	593 / 906	671 / 906	281 / 521	134 / 258	85 / 115	19 / 36	/	/	/	3723 / 6076	61	
NIGERIA	81 / 102	64 / 73	40 / 48	25 / 31	63 / 69	31 / 37	17 / 23	11 / 12	0 / 0	/	/	/	332 / 395	84	
MALI	1 / 1	0 / 1	0 / 1	0 / 0	5 / 5	9 / 12	22 / 27	45 / 62	58 / 106	/	/	/	140 / 215	65	
TOGO	35 / 46	20 / 29	18 / 47	12 / 21	17 / 20	16 / 22	4 / 6	1 / 3	9 / 9	/	/	/	132 / 203	65	
NIGER	1 / 1	2 / 2	1 / 1	3 / 4	4 / 9	13 / 16	28 / 34	21 / 28	30 / 34	/	/	/	103 / 129	80	
BURKINA FASO	1 / 1	1 / 2	0 / 0	2 / 2	5 / 5	2 / 3	7 / 13	8 / 10	10 / 13	/	/	/	36 / 49	73	
COTE D'IVOIRE	1 / 2	5 / 5	0 / 5	1 / 4	0 / 1	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	7 / 17	41	
BENIN	0 / 0	2 / 2	1 / 1	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	/	/	/	3 / 3	100	
ETHIOPIA	0 / 0	1 / 1	0 / 0	2 / 2	6 / 6	3 / 5	2 / 2	0 / 0	0 / 0	/	/	/	14 / 16	88	
UGANDA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	0 / 0	0 / 0	1 / 1	1 / 1	/	/	/	3 / 3	0	
MAURITANIA	1 / 1	0 / 0	0 / 0	0 / 0	0 / 0	2 / 2	0 / 0	0 / 0	0 / 0	/	/	/	3 / 3	100	
TOTAL*	801 / 1572	807 / 1505	716 / 1302	695 / 1538	923 / 2013	519 / 1871	357 / 1385	228 / 733	127 / 199	0 / 0	0 / 0	0 / 0	5173 / 12118	43	
% CONTAINED	51	54	55	45	46	28	26	31	64				43		

* PROVISIONAL

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

Figure 3

Number of Villages/Localities Reporting Cases of Dracunculiasis in 2003, Percentage of Endemic Villages Reporting in 2004*, Number of Indigenous Cases Reported During the Specified Period in 2003 and 2004*, and Percent Change in Cases Reported



(9) Indicates month for which reports were received, e.g., Jan. - Sept. 2004

* Provisional

COUNTRIES REPORTING CASES	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED: JANUARY - SEPTEMBER 2002								
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
SUDAN	677 / 1151	576 / 1115	607 / 1138	854 / 1612	2730 / 5426	3110 / 6429	3510 / 6748	2480 / 6442	3249 / 4935
NIGERIA	350 / 647	195 / 336	148 / 220	152 / 232	205 / 244	222 / 314	143 / 198	125 / 246	107 / 175
GHANA	532 / 741	385 / 674	315 / 429	285 / 372	304 / 492	277 / 407	171 / 234	120 / 142	105 / 131
TOGO	148 / 193	65 / 100	20 / 40	12 / 26	44 / 100	54 / 83	71 / 235	44 / 81	52 / 72
BURKINA FASO	6 / 10	27 / 31	20 / 22	22 / 32	66 / 83	56 / 85	44 / 48	33 / 50	58 / 67
MALI	4 / 5	4 / 5	4 / 6	0 / 0	2 / 6	5 / 9	23 / 43	78 / 178	178 / 302
NIGER	6 / 6	0 / 0	0 / 0	0 / 0	4 / 4	5 / 5	25 / 40	19 / 30	23 / 30
COTE D'IVOIRE	91 / 91	52 / 52	23 / 24	10 / 11	1 / 3	2 / 5	0 / 2	2 / 3	2 / 2
BENIN	28 / 28	8 / 11	7 / 8	5 / 5	1 / 1	4 / 4	2 / 2	7 / 7	15 / 19
MAURITANIA	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	2 / 3	5 / 5	7 / 12	5 / 14
UGANDA	0 / 0	0 / 0	1 / 1	0 / 1	3 / 3	1 / 4	3 / 4	3 / 3	5 / 5
ETHIOPIA	0 / 0	0 / 0	2 / 3	1 / 6	11 / 11	6 / 7	5 / 5	6 / 6	6 / 6
TOTAL	1842 / 2872	1312 / 2324	1147 / 1891	1341 / 2297	3371 / 6373	3744 / 7355	4002 / 7564	2924 / 7200	3805 / 5758

COUNTRIES REPORTING CASES	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED: JANUARY - SEPTEMBER 2003								
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
SUDAN	261 / 1170	122 / 702	271 / 871	256 / 1225	264 / 2284	241 / 2557	297 / 2586	282 / 2384	306 / 1787
GHANA	485 / 903	769 / 1339	555 / 944	622 / 940	524 / 785	374 / 558	288 / 474	126 / 203	86 / 158
NIGERIA	389 / 568	179 / 243	106 / 128	53 / 60	30 / 52	49 / 58	49 / 68	34 / 48	22 / 31
TOGO	110 / 149	28 / 44	21 / 29	38 / 44	73 / 87	53 / 72	53 / 63	14 / 22	18 / 27
MALI	3 / 3	4 / 4	5 / 5	2 / 3	3 / 3	8 / 8	42 / 84	92 / 160	122 / 250
BURKINA FASO	6 / 6	1 / 2	0 / 1	3 / 5	14 / 16	27 / 62	24 / 34	12 / 19	12 / 21
NIGER	0 / 0	1 / 1	0 / 0	2 / 2	0 / 0	6 / 6	27 / 37	30 / 47	33 / 71
COTE D'IVOIRE	7 / 21	5 / 8	1 / 2	1 / 4	3 / 4	1 / 1	1 / 1	0 / 0	0 / 0
BENIN	21 / 21	1 / 1	1 / 1	0 / 0	0 / 0	0 / 0	2 / 2	0 / 0	0 / 0
ETHIOPIA	0 / 0	0 / 0	3 / 3	7 / 7	7 / 7	5 / 5	1 / 1	1 / 1	4 / 4
MAURITANIA	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	2 / 3	1 / 1	3 / 4
UGANDA	0 / 0	0 / 0	0 / 0	3 / 3	9 / 11	4 / 6	1 / 2	0 / 2	0 / 0
TOTAL	1282 / 2841	1110 / 2344	963 / 1984	987 / 2293	927 / 3249	769 / 3334	787 / 3355	592 / 2887	606 / 2353

COUNTRIES REPORTING CASES	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED: JANUARY - SEPTEMBER 2004								
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER
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GHANA	647 / 1214	668 / 1139	625 / 981	593 / 906	671 / 906	281 / 521	134 / 258	85 / 115	19 / 36
NIGERIA	81 / 102	64 / 73	40 / 48	25 / 31	63 / 69	31 / 37	17 / 23	11 / 12	0 / 0
MALI	1 / 1	0 / 1	0 / 1	0 / 0	5 / 5	9 / 12	22 / 27	45 / 62	58 / 106
TOGO	35 / 46	20 / 29	18 / 47	12 / 21	17 / 20	16 / 22	4 / 6	1 / 3	9 / 9
NIGER	1 / 1	2 / 2	1 / 1	3 / 4	4 / 9	13 / 16	28 / 34	21 / 28	30 / 34
BURKINA FASO	1 / 1	1 / 2	0 / 0	2 / 2	5 / 5	2 / 3	7 / 13	8 / 10	10 / 13
COTE D'IVOIRE	1 / 2	5 / 5	0 / 5	1 / 4	0 / 1	0 / 0	0 / 0	0 / 0	0 / 0
BENIN	0 / 0	2 / 2	1 / 1	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0
ETHIOPIA	0 / 0	1 / 1	0 / 0	2 / 2	6 / 6	3 / 5	2 / 2	0 / 0	0 / 0
UGANDA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	0 / 0	0 / 0	1 / 1	1 / 1
MAURITANIA	1 / 1	0 / 0	0 / 0	0 / 0	0 / 0	2 / 2	0 / 0	0 / 0	0 / 0
TOTAL*	801 / 1572	807 / 1505	716 / 1302	695 / 1538	923 / 2013	519 / 1871	357 / 1385	228 / 733	127 / 199

* provisional

Shaded cells denote months when zero indigenous cases were reported. Numbers indicate how many imported cases were reported and contained that month. 6

LEGAL DISAGREEMENT DELAYS WATER INTERVENTIONS FOR MALI, NIGER AND TOGO



The World Bank

Funding for “rapid assistance to provision of safe water supplies in targeted endemic villages of Togo, Mali and Niger by the end of 2005” has not been transferred from The World Bank to UNICEF as of October 22, 2004. The \$845,000 grant to UNICEF from the Contingency Fund of the Bill and Melinda Gates Foundation award for Guinea worm eradication was approved on July 15, 2004 (see [Guinea Worm Wrap-Up # 144](#)), when the “Gates Guinea Worm Committee” (representatives of The Carter Center, UNICEF, World Bank, and World Health Organization) was assured that signing the necessary agreement between the two United Nations agencies was “imminent”. The agreement had not been signed because of disagreements between legal staff of the World Bank and UNICEF. As a result, the funds have not been transferred from the World Bank to UNICEF, and UNICEF has not sent funding to the three countries that were targeted for this special urgent intervention. The original agreement in principle on this project was taken in May 2002 (see [Guinea Worm Wrap-Up #131](#)). The project was delayed and ultimately modified because of the extended negotiations between UNICEF and the World Bank between May 2002 and July 2004.

GUINEA WORM RECOMMENDATIONS FROM NIGERIAN PROGRAM REVIEW

1. NIGEP should request the Federal, State and Local Government Areas (LGAs) to provide financial support for provision, rehabilitation or repair of sources of drinking water in the 93 currently endemic villages in 64 LGAs.
2. NIGEP is again urged to establish a National Certification Commission as soon as possible.
3. All levels of Federal, State and LGAs should consider absorbing former Carter Center field staff to support integrated disease surveillance activities in formerly endemic areas.
4. Given the goal of stopping all transmission of Guinea worm disease by December 2005, NIGEP should advocate with Federal, State and LGAs for sustained support of Village Based Health Workers.
5. NIGEP Southwest and North Central Zones should collaborate closely regarding the detection and containment of cases of Guinea worm disease among itinerant farm workers of either Zone.
6. NIGEP is urged to consider establishing additional Case Containment Centres where and as appropriate.
7. NIGEP should continue to strive to detect all cases of Guinea worm disease within 24 hours of the emergence of the Guinea worm.

MRS. MADUKA WINS 2004 JIMMY AND ROSALYNN CARTER AWARD

Mrs. Chinyere Maduka, The Carter Center's zonal consultant for the South East zone of Nigeria's Guinea Worm Eradication Program, was presented with this year's Jimmy and Rosalynn Carter Award for Guinea Worm Eradication. Dr. Donald Hopkins of The Carter Center presented the award in recognition of Mrs. Maduka's "exemplary service", dedication and accomplishments in guiding eradication activities in the South East Zone, during the Opening Ceremony of the Program Review in Jos. Mrs. Maduka was among the former employees of the River Blindness Foundation who joined The Carter Center team in Nigeria in 1996. She has led the battle against dracunculiasis in her zone since 1999, when Nigeria's South East Zone reported 4,772 cases of the disease from 622 endemic villages. She has also led the Carter Center's assistance to Anambra, Ebonyi and Enugu States for controlling onchocerciasis since 1996.

IN BRIEF:

Ethiopia. The national coordinator, Mr. Gzahegn Tesfaye, and the new senior EDEP supervisor, Mr. Awoke Misganaw, paid a working visit to Gambella on 15 – 21 September. The security situation in Gambella Region has improved greatly and only Akobo woreda of the 7 restructured woredas remains inaccessible. Gambella Region provided new reports of two indigenous cases and one imported case (from Sudan) in May 2004, and another indigenous case in June 2004. The three cases in May were reportedly contained, but the case in June was not contained. Mr. Adam Thomas, WHO Technical Officer, the national coordinator and the senior supervisor visited the EDEP in Kuraz Woreda, South Omo Region during September 29 – October 7. They confirmed that 12 cases of GWD (all from East Equatoria State, Sudan) were imported during January – September 2004 and that 11 of those were contained.

Togo. Togo held Worm Weeks in Ogou District on 13 – 15 July and in Keran District on 6 – 10 September. Approximately 900 and 1,900 persons were reached during the respective intensive health education sessions. These were Togo's third and fourth Worm Weeks in 2004, all in collaboration with US Peace Corps Volunteers. The first two Worm Weeks of 2004 were held in Sotouboua (13 – 17 April) and Haho (22-25 June) Districts.

RECENT PUBLICATIONS

Chastel C, 2004. When the Egyptian mummies are speaking about the infections that have made them ill. (French) Histoire des Sciences Medicales. 38(2):147-55.

*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. James H. Maguire, 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: 770-488-7761. The GW Wrap-Up web location is <http://www.cdc.gov/ncidod/dpd/parasites/guineaworm/default.htm>



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