



More than half of the cases in 2007 (53%) were reported from Eastern Equatoria State, which achieved a 94% reporting rate and 55% case containment, and where three counties (East, North and South Kapoeta) alone reported 3,115 (53%) cases. Jonglei State reported 1,025 (17%) cases, Warrap State 929 (15%) cases, and Lakes State 414 (7%) cases.

Program indicators for interventions in 2006 and 2007 are shown in Table 1. A total of 503,941 cloth filters and 1,123,832 pipe filters were distributed in 2007. 33% of endemic villages have established geographic coordinates. The SSGWEP Task Force, which was established in 2006, met quarterly throughout 2007. Bishop Emeritus Paride Taban was designated as Eminent Person for the SSGWEP. He will emphasize advocacy for the program, beginning in three Kapoeta Counties. Magwe County, which borders Uganda and had been inaccessible to the program because of insecurity, is now accessible. In 2008, the program aims to contain at least 80% of cases and achieve 100% reporting rate.

*“You get what you supervise.” (Steven Becknell)*

Table 1

**SOUTHERN SUDAN GUINEA WORM ERADICATION PROGRAM**

Parameters	2006	2007	Program indicators	2006*	2007
Endemic Villages	3137	1881	Reporting Rate	63%	75%
Villages Under Surveillance	19152	15190	Containment Rate	49%	49%
Cases of Guinea Worm Disease	20582	6060	Trained Village Volunteer	82%	93%
Volunteer Village Workers	10745	18169	1+ Health Education Session	71%	92%
Volunteer Area Supervisors	896	2152	Full H/H cloth Filter Coverage	47%	72%
Field Officers	87	136	Full Pipe Filter Coverage	22%	41%
State Guinea Worm Coordinators	6	6	Abate	6%	15%
Technical Advisors**	16	26	1+ Safe Water	16%	17%

\* 3,137 Endemic Villages

\*\* Includes Sudanese and expatriate Technical Advisors

Figure 2

**Southern Sudan Guinea Worm Eradication Program**

**Seventeen Endemic Payams Reporting 3,663 (60%) of 6,068 Cases of Dracunculiasis in 2007\***

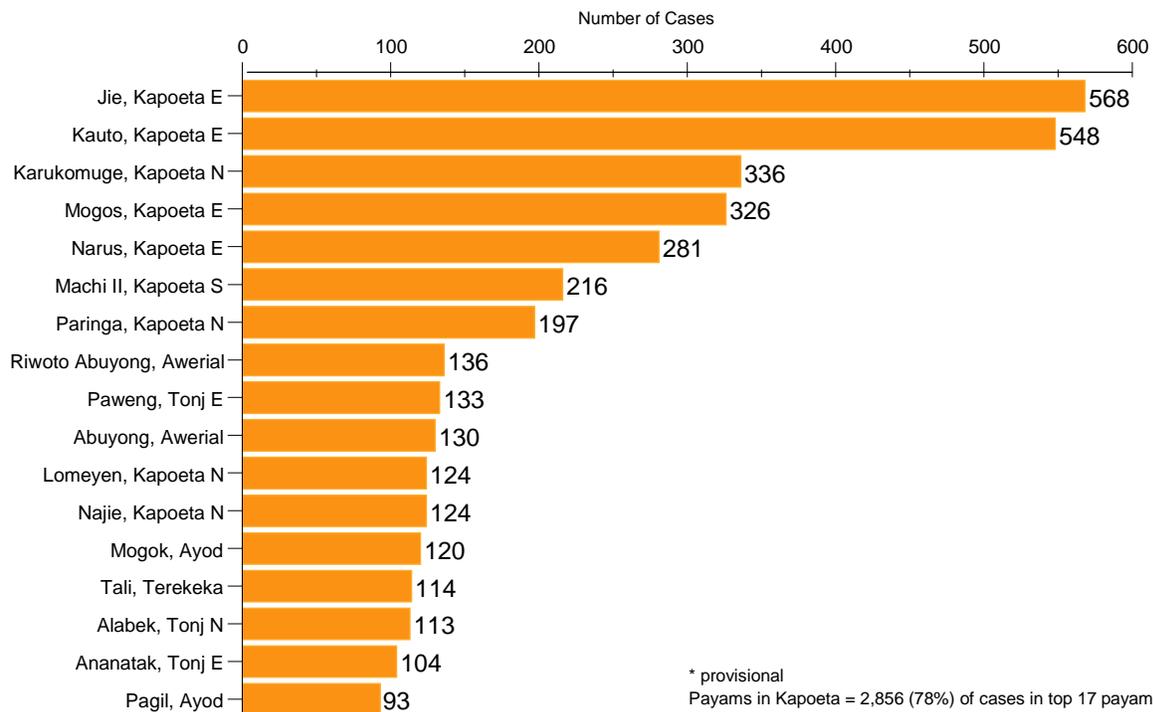


Table 2

Number of Cases Contained and Number Reported by Month during 2007\*  
(Countries arranged in descending order of cases in 2006)

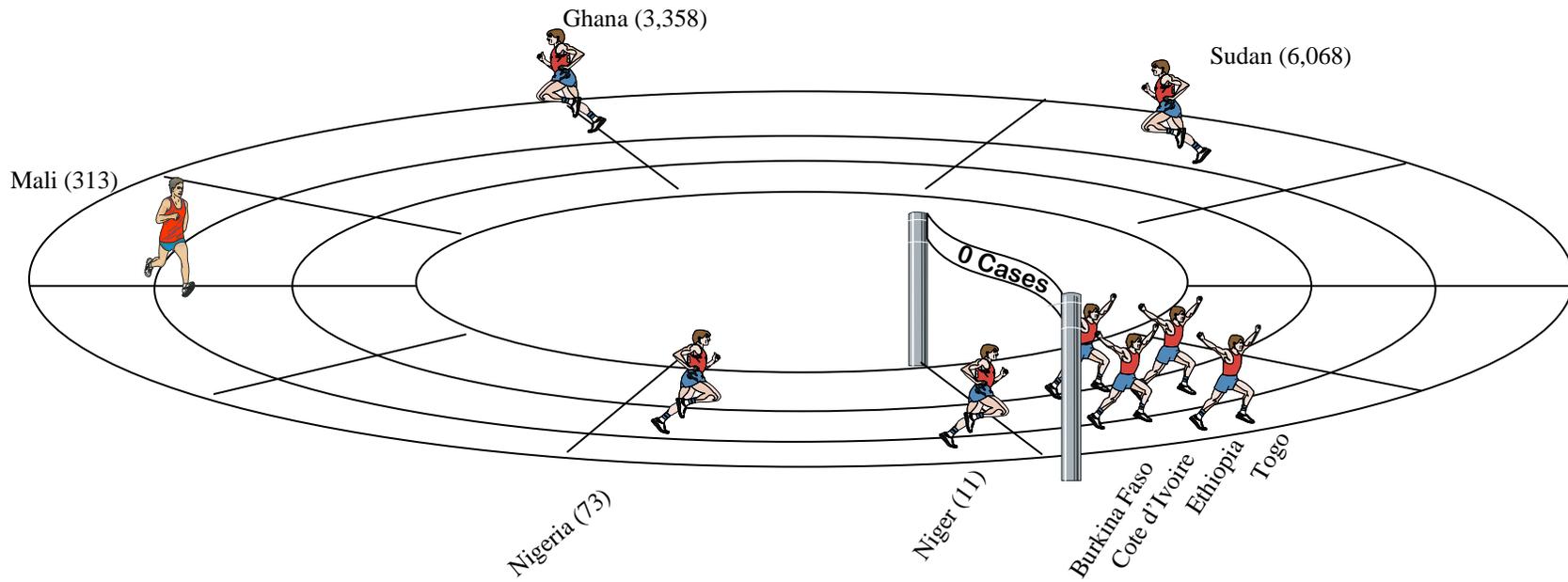
COUNTRIES REPORTING CASES	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED													% CONT.
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
SUDAN	32 / 243	41 / 181	72 / 241	280 / 527	612 / 1126	663 / 1392	439 / 1019	370 / 624	318 / 492	92 / 152	34 / 63	0 / 8	2953 / 6068	49
GHANA	812 / 1005	631 / 732	442 / 478	248 / 293	233 / 272	185 / 241	91 / 110	38 / 41	14 / 19	22 / 29	56 / 68	64 / 70	2836 / 3358	84
MALI	0 / 0	0 / 0	1 / 1	0 / 0	0 / 0	1 / 1	5 / 7	29 / 120	35 / 68	15 / 27	20 / 79	4 / 10	110 / 313	35
NIGER	3 / 3	0 / 0	0 / 0	0 / 0	1 / 1	0 / 0	1 / 1	0 / 0	2 / 3	4 / 4	2 / 2	0 / 0	13 / 14	93
NIGERIA	7 / 32	9 / 9	1 / 1	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 1	6 / 7	21 / 23	44 / 73	60
TOGO	0 / 0	1 / 1	0 / 0	0 / 1	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1 / 2	50
BURKINA FASO	1 / 2	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 1	1 / 3	33
COTE D'IVOIRE	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0
ETHIOPIA	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	3 / 3	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	3 / 3	0
UGANDA	0 / 0	0 / 0	1 / 1	0 / 0	1 / 1	0 / 0	0 / 0	1 / 1	0 / 0	1 / 1	0 / 0	0 / 0	4 / 4	100
TOTAL*	855 / 1285	682 / 923	517 / 722	528 / 821	847 / 1400	852 / 1637	536 / 1137	438 / 786	369 / 582	134 / 214	118 / 219	89 / 112	5965 / 9838	61
% CONTAINED	67	74	72	64	61	52	47	56	63	63	54	79	61	
% CONT. OUTSIDE SUDAN	79	86	93	84	86	77	82	42	57	68	54	86	80	

\* 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

# GUINEA WORM RACE: 2007\*



\*Indigenous Cases only

Figure 4

### Distribution of 9,823 Indigenous Cases of Dracunculiasis Reported during 2007\*

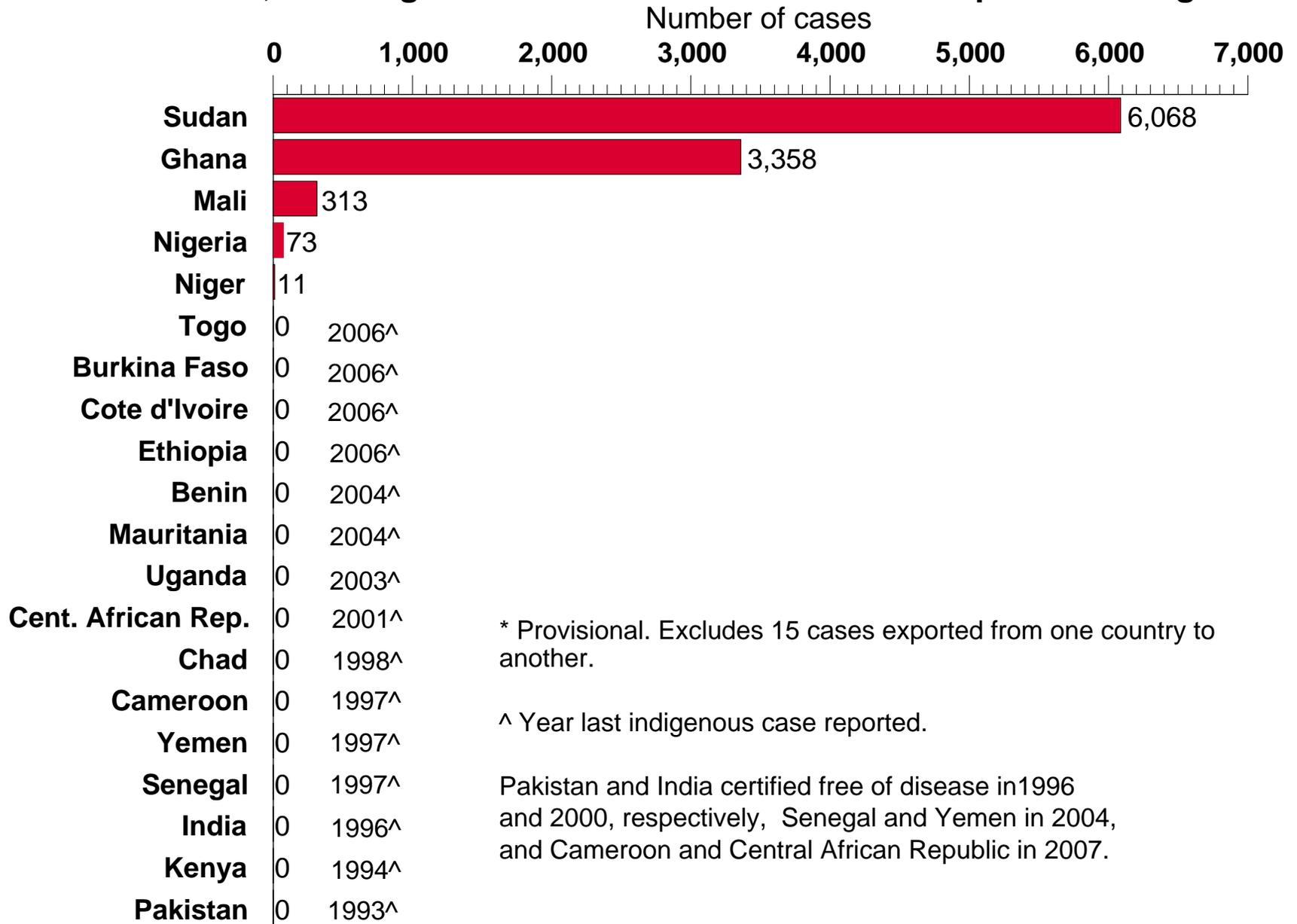
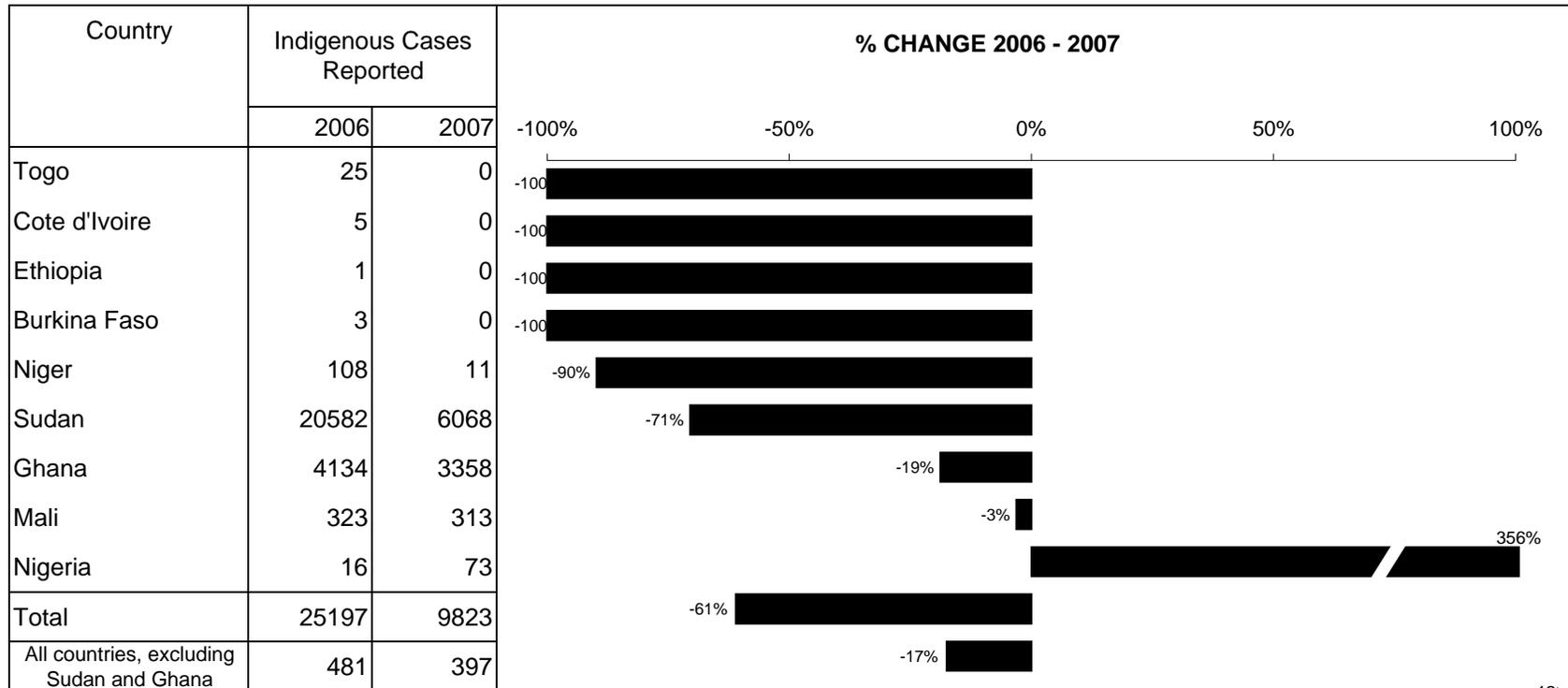


Figure 5

Number of Indigenous Cases Reported During the Specified Period in 2006 and 2007\*, and Percent Change in Cases Reported



Overall % change outside of Sudan = -19%

\* Provisional

Table 3

Number of Cases Contained and Number Reported by Month during 2008\*  
(Countries arranged in descending order of cases in 2007)

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	/	/	/	/	/	/	/	/	/	/	/	/	0 / 0	
GHANA	60 / 73	/	/	/	/	/	/	/	/	/	/	/	60 / 73	82
MALI	1 / 1	/	/	/	/	/	/	/	/	/	/	/	1 / 1	100
NIGERIA	28 / 28	/	/	/	/	/	/	/	/	/	/	/	28 / 28	100
NIGER	0 / 0	1 / 1	/	/	/	/	/	/	/	/	/	/	1 / 1	100
TOTAL*	89 / 102	1 / 1	/	/	/	/	/	/	/	/	/	/	90 / 103	87
% CONTAINED	87	100											87	
% CONT. OUTSIDE SUDAN	87	100											87	

\* provisional

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

For other imported Cases see table of imported cases by month and by country



Meanwhile, one year after the disastrous outbreak centered in Savelugu District of the Northern Region, Ghana's Guinea Worm Eradication Program (GGWEP), which reported 34% (3,358) of all cases in 2007, reported only 73 cases (82% contained) in January 2008 – a dramatic reduction of -93% from the 1,005 cases reported at the peak of last year's transmission season (Figure 1 and Tables 1 and 3). January was the tenth consecutive month of reductions in cases, compared to the year before. 27 of this January's 73 cases were reported from Savelugu District. The status of key program indicators in the 386 endemic villages in which the GWEP intervened during 2006-2007 are: 100% EV with health education, 70% cloth filters in all households, 30% with coverage of the eligible population with pipe filters, 65% protected with ABATE® Larvicide, 47% with one or more safe sources of water supply. During the ministry of health semi-annual Press Briefing in Accra on February 15, chaired by Dr. Elias Sory, Director-General of Ghana Health Services, Dr. Andrew Seidu Korkor, national GWEP coordinator, attributed the country's reductions in cases of Guinea worm disease (GWD) to a number of interventions adopted jointly by the Government of Ghana and its partners, including the provision of containment centers at strategic locations to treat residents affected by the disease and intensified educational programs in the affected communities. Deputy Minister of Health Mrs. Gladys Ashitey also praised the drastic reductions in cases during the last three consecutive months, noted that the outbreak in Savelugu in 2007 was due to a breakdown of the Tamale water supply system (which also supplies water to Savelugu Town), called for actions taken by her ministry to be sustained to ensure eradication of GWD as soon as possible, re-assured the audience about the Government of Ghana's commitment to the eradication of Guinea worm since it is a national priority, and thanked partner organizations for their immense contribution to this effort. During this Press Briefing Mrs. Margaret Mwanakatwe, Managing Director of Barclays Bank, gave a check donation of 68,941 Ghana Cedis (about US \$66,872) to help the eradication effort.

Google.org became the latest partner to join the Guinea worm eradication campaign in Ghana, by making a grant of \$1.45 million to The Carter Center to help support the Center's assistance to Ghana's Guinea Worm Eradication Program in calendar year 2008. The Carter Center will match this amount 1:1 for the same purpose.

## **WHO'S EXECUTIVE BOARD DISCUSSES GW ERADICATION; NEW ICCDE MEETING DATES SET**



ON January 21, the Executive Board of the World Health Organization (WHO) reviewed and discussed the Report by the WHO Secretariat entitled "Eradication of Dracunculiasis" (EB 122/7). The new minister of health of Mali, Mr. Oumar Ibrahima Toure, a member of the Executive Board, spoke on behalf of the African group. He congratulated WHO for the good report, summarized the recent achievements and challenges of the eradication program, and proposed annual reporting to the World Health Assembly on the status of the program (as is being done for polio eradication). In their comments, delegates from Austria (which announced its contribution of 500,000 Euros (US \$ 740,950) to WHO in 2007 for the campaign), Djibouti, Japan, Malawi and the United States all endorsed the progress described in the report. At the end of the session WHO director-general

Dr. Margaret Chan emphasized WHO's commitment to eradicating both polio and Guinea worm disease, and promised to redouble efforts to help mobilize the remaining external resources that are required.

WHO will convene the next meeting of the International Commission for the Certification of Dracunculiasis Eradication (ICCDE) at its headquarters in Geneva, Switzerland on October 7-9, 2008.

## IN BRIEF

Niger has reported no indigenous cases since November 2007, and no uncontained cases since September 2007 (Figure 6). The program is intensifying surveillance and sensitizing local officials to be alert for Guinea worm disease along all known routes used by Malians and/or Nigeriens traveling into Niger from Mali. The program held its National Program Review Meeting in Tillaberi on 29-31 January.

At a ceremony on February 14, 2008, Niger's Minister of Public Health invested the National Committee for Certification of Dracunculiasis Eradication. Present at the ceremony were representatives from UNICEF, WHO, JICA, The Carter Center, and Niger's National Director of Health Schools.

Figure 6

**Niger GWEP: GW Cases in 2007**

District	J	F	M	A	M	J	J	A	S	O	N	D
Tillaberi	<u>Timana</u> 17/1/07 Contained Endemic F/45/B				<u>Timana</u> 1/5/07 Contained Endemic F/9/B		<u>Tegazaratine</u> 28/7/07 Contained Endemic F/15/B		<u>Tegazaratine</u> 8/9/07 Contained Endemic F/41/B	<u>Intakaret</u> 10/10/07 Contained Endemic F/15/B		
									<u>Tegazaratine</u> 20/9/07 Contained Endemic F/8/B	<u>Tifret</u> 30/10/07 Contained Endemic F/21/B		
									<u>Tindikitane</u> 5/9/07 <b>Not Contained</b> Imported: Tegazaratine, Tifrat, Timana M/19/P			
									<u>Tindarene</u> 8/9/07 Contained Imported: Mali F/5/B			
Tera		<u>Yogare</u> 13/1/07 Contained Endemic F/20/S									<u>Timbinga</u> 29/10/07 Contained Imported: Mali M/15/B	<u>Timbinga</u> 25/11/07 Contained Imported: Mali F/16/B
		<u>Yogare</u> 20/1/07 Contained Endemic F/22/S										
Ouallam											<u>Namari-Bargou</u> 16/11/07 Contained Endemic M/21/B	

N.B: Sex/Age/Ethnic Group  
11F:3M; 9 Tillaberi District, 4 Tera District, 1 Ouallam District; 11 "Bellah", 2 Sonrai, 1 Peulh  
B = "Bellah", S = Sonrai, P = Peulh / (Fulani)

Mali reported one contained case of GWD during January 2008 from the locality of Tadjimart, Tessalit District, Kidal Region during a visit by Dr. Gabriel Guindo, national GWEP coordinator and Mr. Jim Ting, Carter Center Resident Technical Advisor. Tadjimart was the site of an outbreak of GWD that was first reported to local health authorities during June 2007 by staff from the NGO Doctors of the World during one of their visits to this area (*Guinea Worm Wrap-Up #175*). However, local authorities did not report the outbreak to the national GWEP secretariat until August 2007, after which GWEP staff from Gao Region visited the area and documented 86 cases (none contained). Shortly thereafter, rebel Tuaregs created insecurity in the Kidal Region such that the whole area became insecure and off-limits to GWEP staff during the rest of 2007. The cause of the outbreak is said to have been a koranic student from Tinadjarof locality in Gao District, Gao Region, who walked into Tadjimart during 2006 (about 400 kilometers North of Gao) while on his way to Algeria. While in Tadjimart he is known to have had a Guinea worm emerge and to have repeatedly contaminated sources of drinking water while trying to manually extract the Guinea worm. Tadjimart is a community consisting of many small camps (3-5 tents) and its residents are almost all “white Tamachek Tuaregs”. Consistent with the absence of endemic transmission of GWD in Kidal Region since the inception of the Malian GWEP in 1991, residents confirmed that this outbreak was their first experience ever with GWD. A plan of action to prevent further transmission from any cases of GWD during 2008 was discussed and agreed with regional and local authorities, including training of additional village volunteers and zonal health agents, designation of a Malian Technical Advisor (a medical officer), the provision of camels, application of ABATE®Larvicide and the provision of cloth and pipe filters to residents.

Nigeria has reported 28 cases of dracunculiasis, all contained (25 of them contained in a Case Containment Center). This is a reduction of -13% from the 32 cases reported in January 2007, when the current outbreak in Enugu State was first discovered. The 28 cases were reported from 4 villages: Ezza Nkwubor (24) in Enugu East LGA, Enugu State; Owachi-Ubahu (2) in Nkanu East LGA, Enugu State; and one each from Abakaliki and Ekerigwe in Ebonyi LGA of Ebonyi State. All but one of the cases are linked directly to Ezza Nkwubor village, which is the focus of the outbreak. The program conducted a Worm Week in Enugu East LGA, which included a search of many different social gatherings in the area and health education sessions. Leaders of the affected Ezza community agreed to include Guinea worm activities in the annual Ezza Day Celebration that was held on January 1, 2008 in Ezza Nkwubor.

## **MEETING**

The Eighth African Regional Conference on Dracunculiasis Eradication will be held at the Sheraton Hotel in Abuja, Nigeria on April 2-4, 2008. The Carter Center will host its third Carter Center Awards Ceremony on the first day of the conference, to recognize Burkina Faso, Cote d’Ivoire, Ethiopia and Togo for having achieved twelve or more consecutive months with no indigenous cases.

## HOPKINS WINS 2007 FRIES PRIZE



Dr. Donald R. Hopkins was awarded the 2007 Fries Prize for Improving Health at a gala ceremony in Washington, D.C. on November 28, 2007 during the annual National Prevention & Health Promotion Summit, which is sponsored by the U.S. Department of Health and Human Services and the Centers for Disease Control and Prevention (CDC). The award, which was presented by Mr. Kenneth Fries on behalf of the James F. and Sara T. Fries Foundation, is made annually, and is intended to recognize an individual who has done the most to improve health, as judged by an expert Selection Jury. Dr. Hopkins is the 16<sup>th</sup> recipient of the award, and was cited “for his sustained leadership in the global campaign to eradicate Guinea worm disease (dracunculiasis)”. Dr. Hopkins was introduced at the ceremony by Dr. Ernesto Ruiz-Tiben, director of The Carter Center’s Guinea worm eradication program, and gave a lecture on the status of the eradication campaign.

*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 the WHO Collaborating Center for Research, Training, and Eradication of Dracunculiasis, NCZVED, 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.