Memorandum



Date: June 17, 2016

From: WHO Collaborating Center for

Research, Training and Eradication of Dracunculiasis, CDC

Subject: GUINEA WORM WRAP-UP #241

To: Addressees

Detect and Contain Every Guinea Worm Infection Immediately!!!

MINISTERS MEET DURING WORLD HEALTH ASSEMBLY



The Ministers of Health of Ethiopia (<u>Dr. Kesetebirhane Birhane</u>) and Mali (<u>Dr. Marie Madeleine Togo</u>), the Undersecretary of Health of South Sudan (<u>Dr. Makur Matur Kariom</u>), and <u>Dr. Rohin Galaou Nduondo</u>, Director General of the Health Activities of the Ministry of Public Health of Chad participated in the annual



Informal Meeting of Ministers of Health of Guinea Worm-Affected Countries during the World Health Assembly (WHA) in Geneva, on May 25, 2016. The World Health Organization's Regional Director for Africa, <u>Dr. Matshidiso Moeti</u> chaired the meeting, which was also attended by International Commission for the Certification of Dracunculiasis Eradication (ICCDE) Chairman <u>Dr. Abdulrahman Al-Awadi</u> and ICCDE member <u>Dr. Joel Breman</u>. Participants at the meeting also included

representatives of The Carter Center, UNICEF, and the Bill & Melinda Gates Foundation. This WHA meeting also featured a large joint interactive exhibit on the two campaigns to eradicate polio (74 cases in 2015) and Guinea worm disease (22 cases in 2015).

Figure 1

REPORTED CASES OF DRACUNCULIASIS BY COUNTRY
DURING JANUARY - MAY 2015 and 2016*

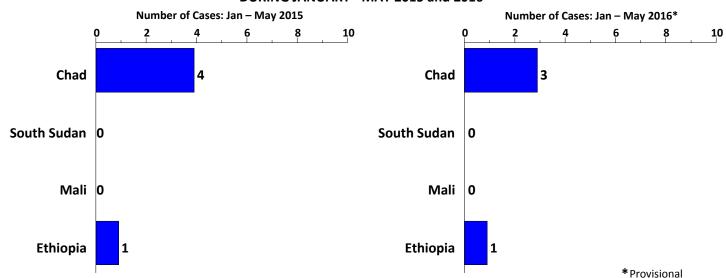


Table 1

Number of Reported Cases of Guinea Worm Disease Contained and Number Reported by Month during 2016*

(Countries arranged in descending order of cases in 2015)

					(Countries a	rranged in desc	enumg order of	cuses in 2015,	,					
COUNTRIES WITH ENDEMIC		NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED												
TRANSMISSION	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
CHAD	0 / 0	1 / 1	0 / 0	1 / 1	1 / 1	1	/	/	/	/	/	/	3 / 3	100%
MALI [§]	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1	1	/	1	1	/	/	0 / 0	0%
SOUTH SUDAN	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1	/	/	/	/	/	/	0 / 0	0%
ETHIOPIA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	1	/	/	1	/	/	/	1 / 1	0%
TOTAL*	0 / 0	1 / 1	0 / 0	1 / 1	2 / 2	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	4 / 4	100%
% CONTAINED	0%	100%	0%	100%	100%								100%	

*Provisional

Cells shaded in black denote months when zero indigenous cases were reported. Numbers indicate how many imported cases were contained and reported that month.

Cells shaded in yellow denote months when a case of GWD did not meet all case containment standards.

§Reports include Kayes, Koulikoro, Segou, Sikasso, and Mopti, Tinbuktu, Gao, and Kidal Regions; reports from Kidal Region are contingent on security conditions during 2016 and times when the GWEP is able to deploy a technical advisor to Kidal Region to oversee the program there.

Number of Reported Cases of Guinea Worm Disease Contained and Number Reported by Month during 2015

(Countries arranged in descending order of cases in 2014)

COUNTRIES WITH ENDEMIC		NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED												
TRANSMISSION	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
SOUTH SUDAN	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	1 / 2	0 / 1	0 / 0	0 / 0	0 / 1	0 / 0	2 / 5	40%
MALI [§]	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 1	0 / 0	3 / 3	0 / 1	0 / 0	3 / 5	60%
CHAD	0 / 0	0 / 1	0 / 2	0 / 1	0 / 0	0 / 2	0 / 1	0 / 1	0 / 0	0 / 1	0 / 0	0 / 0	0/9	0%
ETHIOPIA	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	0 / 0	0 / 0	1 / 1	0 / 0	1 / 1	0 / 0	0 / 0	3 / 3	100%
TOTAL*	0 / 0	0 / 1	0 / 2	0 / 1	1 / 1	1/3	1/3	1 / 4	0 / 0	4 / 5	0 / 2	0 / 0	8 / 22	36%
% CONTAINED	0%	0%	0%	0%	100%	33%	33%	25%	0%	80%	0%	0%	36%	

Cells shaded in black denote months when zero indigenous cases were reported. Numbers indicate how many imported cases were contained and reported that month. Cells shaded in yellow denote months when transmission of GWD from one or more cases was not contained.

§Reports include Kayes, Koulikoro, Segou, Sikasso, and Mopti, Tinbuktu, Gao, and Kidal Regions; reports from Kidal Region are contingent on security conditions during 2015 and times when the GWEP is able to deploy a technical advisor to Kidal Region to oversee the program there.

CHAD

Chad has named a new national coordinator of its Guinea Worm Eradication Program: <u>Dr. Philip Tchindebet Ouakou</u>, who replaces the former coordinator <u>Dr. Mahamat Tahir Ali</u>. Dr. Ouakou was previously the Ministry of Health's *Delege* for the Tandgile Region. Welcome Dr. Ouakou, and Thank You Dr. Ali!

Chad has reported three confirmed cases of GWD, all contained, so far in 2016 (Table 1 and Figure 1), and 498 infected dogs from 138 villages during January-May 2016. As of May, 87% (526/605) of persons sampled in households in 132 priority villages reported practicing safe disposal of fish guts and 86% of the 160 infected dogs that month were contained.

One especially unfortunate two year old female dog in the village of Nguiriri in Danamadji District of Moyen Chari Region had a record 62 Guinea worms to emerge, 57 (92%) of them contained, in February-May this year! Four other infected dogs have been reported in the same village so far during 2016. Nguiriri village and other villages in Danamaji District were placed under active surveillance in January 2016 because of the high incidence of reports about dogs infected with GWs. There is no evidence on record of human cases of GWD or animal infections in this village during preceding years.

ETHIOPIA

Ethiopia has reported one case (confirmed and contained) from Olane Village in Gog District of Gambella Region and one infected dog from Ablen Village in May.

The Ethiopia Dracunculiasis Eradication Program (EDEP) held a second national press conference on GWD on June 2nd in conjunction with a training meeting on GWD for 45 representatives from 11 Regional Health Bureaus Public Health Emergency Management, Neglected Tropical Diseases, and Immunization Program staff. Five media organizations were also in attendance to cover the press conference and the training meeting.

Although we reported erroneously in the previous issue that the new building for the EDEP secretariat on the premises of the Ethiopia Public Health Institute (EPHI) in Addis Ababa had been inaugurated, the official inauguration was postponed and the editors regret our mistake. The inauguration did take place on June 13th and was attended by close to a hundred participants from EPHI, The Carter Center and other program partners. <u>Dr. Amha Kebede</u>, Director EPHI and <u>Dr. Zerihun Tadesse</u>, Carter Center Country Representative presided during the ceremony to officially inaugurate the building. A message of solidarity from The <u>Honorable World Laureate Dr. Tebebe Yemane Berhan</u> was read at the opening of the formal session.

Dr. Amha's speech, in Amharic, focused on the following points: government's enhanced commitment; demanding nature of the fight against GWD; appreciation to the longstanding and unwavering support from The Carter Center; and the need to emphasize on vigilant surveillance and proper documentation. Towards the end of his opening remark he highlighted four priorities needs for the EDEP.

- 1. Strengthening the program to interrupt the disease transmission and prepare the country for certification;
- 2. Providing national support from EPHI for the campaign to complement the support provided by The Carter Center and other program partners;
- 3. Expanding government's emphasis reporting of GWD and promoting the cash reward from level I and II to level III woredas nationwide; and
- 4. Strengthening precertification activities at national and regional levels.



SOUTH SUDAN

South Sudan has reported three suspect cases in May, one was not a GW, and specimens from two are pending arrival at the laboratory.

MALI

Mali has reported no cases of GWD in January- May 2016.

MALI-BURKINA FASO CROSS-BORDER MEETING

Sixteen delegates from Burkina Faso and 24 from Mali met in Tominian District, Segou Region, Mali on June 9, 2016 to discuss surveillance for cases of GWD and social mobilization efforts in districts adjacent to the border between the two countries.

2ND REVIEW MEETING OF POST-CERTIFIED COUNTRIES HELD IN TOGO

The World Health Organization organized a review meeting of post certified countries in Lomé, from 1 to 3 June 2016 to assess the status of surveillance for cases of GWD and advocate for its continuation until global eradication is achieved. This is the 2nd review meeting of post-certified countries; the first was held in June 2010.

Post certified countries have been urged to continue to sustain surveillance, until global eradication, including the immediate reporting of confirmed or highly suspected cases; maintaining rumor investigation registry; publicizing the cash reward for confirmed cases, and submitting quarterly reports on the status of GWD surveillance indicators to WHO.

Post certification activities conducted by countries in 2014-2015 and 2016 were reviewed; constraints faced by the programs and opportunities for strengthening surveillance were identified. 2016 – 2017 plan of actions have been reviewed in line with current priorities, challenges and opportunities. Specific recommendations for strengthening the post-certification dracunculiasis surveillance activities were made, particularly regarding areas of high risk such as the areas of Central African Republic and Cameroon bordering endemic areas in Chad.

Representatives of eleven countries attended the meeting (Benin, Burkina Faso, Cameroon, Central African Republic, Cote d'Ivoire, Ghana, Mauritania, Niger, Nigeria, Uganda and Togo). The Honorable Minister of Health of Togo chaired the opening ceremony in presence of the Head of WHO Country office. The meeting was also attended by <u>Dr Dieudonné P. Sankara</u>, and <u>Ms Junerlyn Agua</u> from WHO Headquarters, <u>Dr Andrew Seidu Korkor</u> and <u>Ms Yetema Noemie NIKIEMA/NIDJERGOU</u>, from AFRO/IST/WA and staff from WHO country offices.

DR. DEAN SIENKO NAMED VICE PRESIDENT OF HEALTH PROGRAMS AT THE CARTER CENTER

THE CARTER CENTER



Dean G. Sienko, M.D., M.S., was appointed vice president for health programs at The Carter Center, effective June 6, 2016. Dr. Sienko was associate dean for prevention and public health at Michigan State University College of Human Medicine. At The Carter Center, he will provide leadership for programs working to prevent or eliminate six tropical diseases in 18 nations, as well as efforts to improve mental health care in

the United States and abroad. He succeeds <u>Dr. Donald Hopkins</u>, who joined the Center in 1987, and who remains as special advisor for Guinea worm eradication.

Dr. Sienko earned a bachelor's degree from the University of Wisconsin-Milwaukee, a master's degree in strategic studies from the U.S. Army War College, a master's degree in clinical research design and statistical analysis from the University Of Michigan School Of Public Health, and a doctorate in medicine from the University of Wisconsin. Dr. Sienko was also an Epidemic Intelligence Officer with the Centers for Disease Control and Prevention.

Welcome Dr. Sienko!!

RECENT PUBLICATIONS

World Health Organization, 2016. Monthly report on dracunculiasis cases, January-March 2016. Wkly Epidemiol Rec. 91(18), 247-248.

Kim, S. M.. 2016. Dracunculiasis in oral and maxillofacial surgery. <u>Journal of the Korean Association of Oral and Maxillofacial Surgeons</u>, 42(2), 67-76.

Inclusion of information in the Guinea Worm Wrap-Up does not constitute "publication" of that information.

In memory of BOB KAISER

Note to contributors:

Submit your contributions via email to Dr. Sharon Roy (gwwrapup@cdc.gov) or to Dr. Ernesto Ruiz-Tiben (ert@cartercenter.org), by the end of the month for publication in the following month's issue. Contributors to this issue were: the national Guinea Worm Eradication Programs, Drs. Donald R. Hopkins and Ernesto Ruiz-Tiben of The Carter Center, Dr. Sharon Roy of CDC, Dr. Dieudonné Sankara of WHO, and Dr. Mark Eberhard.

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