



Date: November 15, 1999

From:



WHO Collaborating Center for  
Research, Training and Eradication of Dracunculiasis

Subject:

GUINEA WORM WRAP-UP # 96

To: Addressees

## **Detect Every Case, Contain Every Worm!**

### **CARTER CENTER TO CONFER AWARDS FOR FIRST YEAR WITH ZERO CASES**

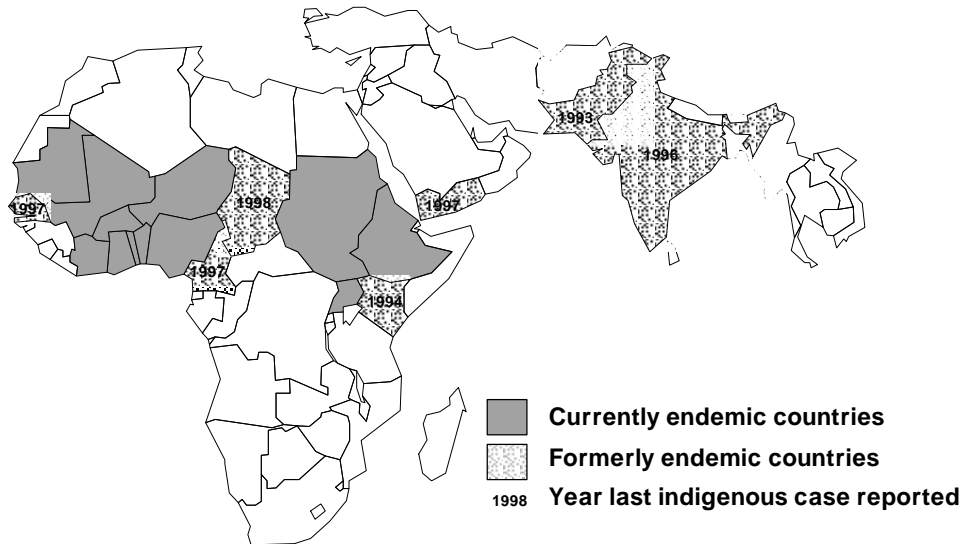
The Carter Center has announced that it will award specially-designed plaques to the governments of formerly endemic countries to mark the first year with zero indigenous cases of dracunculiasis in each country since the global eradication campaign began in 1980. The first seven awards will be made early in 2000, to the governments of Pakistan, Kenya, India, Senegal, Yemen, Cameroon and Chad. Subsequent awards will be made as the remaining countries report no cases for one year. Similar companion certificates will also be awarded at the same time to key leaders of the Guinea Worm Eradication Program in each country. These awards to commemorate the respective national victories over Guinea worm disease were commissioned with the backing of Mr. John Moores, a member of The Carter Center's Board of Trustees and an ardent supporter of the eradication program. The plaques were designed by artist Kim Griffin of Panama City, Florida. A mock-up of the handsome plaques, which are made of wood, enamel and acrylic, is shown on this page. A larger, related distinctive work of art, also designed by Ms. Griffin, will be inscribed with the names of each country in the order in which they interrupted transmission of dracunculiasis, and displayed prominently at The Carter Center. Figure 1 is a map showing the current status of the eradication campaign.



### **CHAD REPORTS NO CASES FOR ONE YEAR!!**

As intimated above, Chad last month became the seventh recently-endemic country to interrupt indigenous transmission of dracunculiasis. The last known indigenous case in Chad occurred in September 1998. Chad's program began during a period of insecurity late in 1993 with the strong support of Global 2000 and U.S. Peace Corps, and was later assisted significantly by UNICEF which provided safe water to several endemic villages. In a unique approach, Chad's initial case searchers began interventions immediately in each village where they detected recent cases, with health education, cloth filters, and training of village volunteers. Congratulations to Dr. Gagde Hinn-Dandje and his colleagues! Chad has reported one case of dracunculiasis in a 31 year old man who was infected in Borno State of Nigeria last year, and had seven worms to emerge in a previously non-endemic location in Chad near N'Djamena in July, August and September 1999. This case was detected in September, and was cross-notified.

Figure 1 **Dracunculiasis Eradication Campaign  
Status of Eradication Efforts: 1999**



#### **NIGERIA'S RECENT TREND OF REDUCED CASES CONTINUES**

In October the Nigerian program recorded 506 cases, a reduction of 44% from the 907 cases recorded in October 1998! (see figure 2) 66% of this October's cases were contained. This program has recorded overall reductions of 25% in August and 22% in September. The most significant decreases occurred in the North East Zone, where cases were reduced by 23%, during June compared to June 1998 and similarly, by 48% in July, 40% in August, 24% in September, and 66% in October. These consistent reductions, the first in three years, began one year after intensified interventions were initiated, including improving the frequency and quality of supervision of village volunteers.

WHO organized a workshop in Lagos, Nigeria, between 25 and 29 October 1999. It was intended for the national and zonal coordinators, as well as the national and zonal data managers of the Ministry Of Health (MOH). The central and zonal data managers of Global 2000 and other health officers of the Federal MOH also participated. The workshop focused on the guinea worm surveillance system and the data collection and flow. It provided training in the utilization of the HealthMap and data manager softwares developed by WHO and UNICEF. WHO provided the hardware and software to the NIGEP national and zonal offices. Thanks to the collaboration of Global 2000, a data base was created with the Health Map software, that contained the most recent information (up to September 1999 included) provided by the NIGEP. This exercise will serve as a basis for the national and zonal levels. The conditions are now in place to have a regular data entry, data analysis as well as appropriate feedbacks and reports among the managerial levels of the NIGEP.

#### **IN BRIEF**

**Benin** For the first time ever, Savalou Sub-Prefecture of Zou Department has reported zero cases for six months in a row (March-August 1999). This was the most highly endemic sub-prefecture in the country in 1998. The deputy national program coordinator Dr. Raoul Saaizonou and Mr. David Delienne, head of UNICEF's water and sanitation unit in Benin, spent one week in Zou Department in early October visiting 7 priority villages for water supply intervention. The newly-targeted villages were identified in a recent line listing of the remaining endemic villages. The national coordinator of Niger, Mr. Sadi Moussa, and the resident technical advisor, Mr. Salissou Kane visited Ghana's Northern Region in late October to view the functioning of Ghana's reward system. In a separate visit, the national coordinators of Benin and Togo, (Dr. Aristide Paraiso, and Mr. K. Ignace Amegbo, respectively) visited Ghana's Greater Accra Region during October to also learn about the reward system. The second Benin-Togo border meeting will be held in Ogoou, Togo on November 11<sup>th</sup>-12<sup>th</sup>.

#### Côte d'Ivoire



With support from Health and Development International, the Guinea Worm Eradication Program achieved a powerful success by arranging for three sessions of radio transmissions on the *Voix de la Savane* (Voice of the Savannah), a local radio station in the significantly endemic district of Bouna, bordering Ghana's Upper West Region. Each session was recorded in endemic villages by local personalities, who spoke with

Figure 2

**Nigeria Guinea Worm Eradication Program  
Number of Cases of Dracunculiasis Reported by Month: 1998 - 1999\***

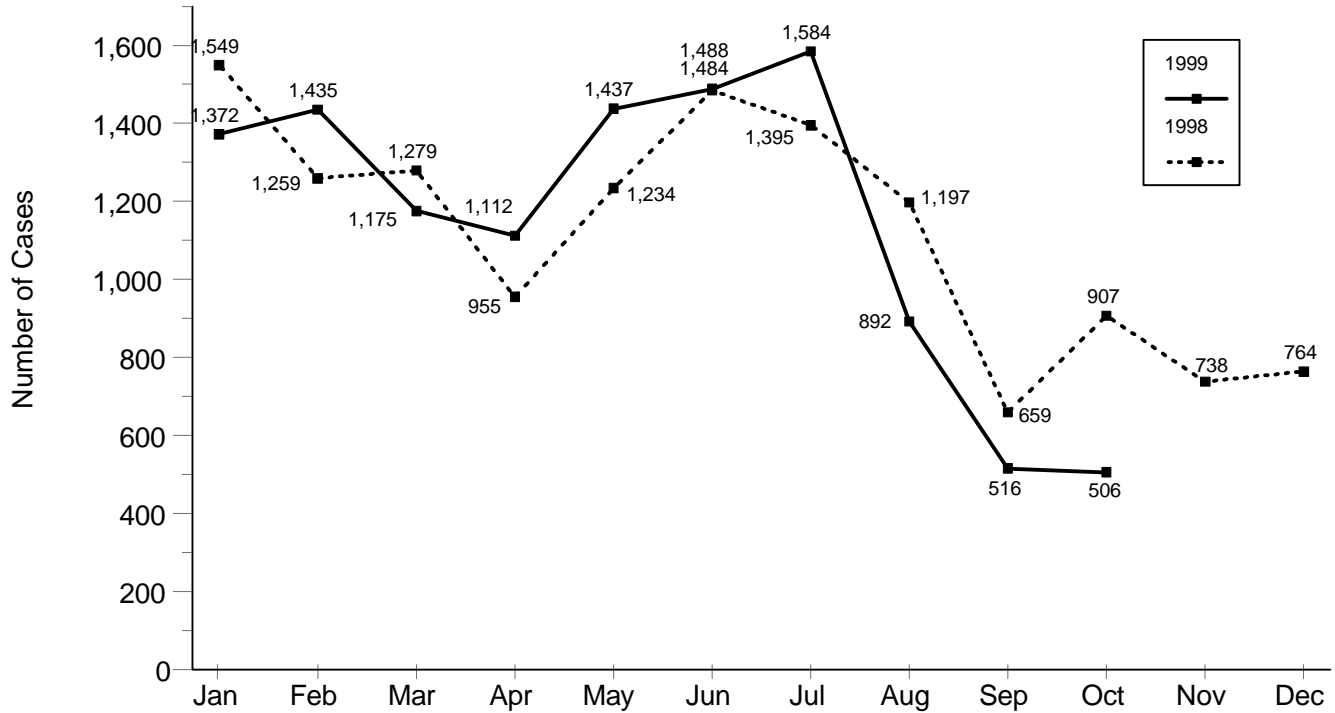


Table 1 **Number of Villages Reporting One or More Cases of Dracunculiasis During 1998 and So Far During 1999\***

Country	Number of Villages reporting 1+ cases		
	1998	1999*	
Sudan	6494	2669	(7)
Nigeria	1177	952	(9)
Ghana	625	636	(9)
Niger	282	175	(9)
Burkina Faso	209	214	(9)
Togo	203	109	(9)
Benin	181	66	(7)
Mali	177	82	(8)
Uganda	160	101	(10)
Cote d'Ivoire	154	84	(9)
Mauritania	57	40	(8)
Ethiopia	41	30	(10)
Chad	1	0	(9)
Cameroon	0	0	(8)
Total	9761	5158	
Total without Sudan	3267	2489	

\* Provisional. (9) denotes number of months for which data was received, i.e., January - September 1999

Table 2

**Number of cases contained and number reported by month during 1999\*  
(Countries arranged in descending order of cases in 1998)**

COUNTRY	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED													CONT.
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	
SUDAN	1365 / 2894	1658 / 3290	1517 / 2946	1629 / 3179	3534 / 6483	4359 / 8935	4527 / 9201	3002 / 6044	1393 / 2468	/	/	/	22984 / 45440	51
NIGERIA	585 / 1372	755 / 1435	945 / 1175	874 / 1112	1148 / 1437	1137 / 1488	780 / 1584	495 / 892	330 / 516	333 / 506	/	/	7382 / 11517	64
GHANA	921 / 1140	616 / 1139	546 / 1000	450 / 771	378 / 650	231 / 412	124 / 214	54 / 83	88 / 131	/	/	/	3408 / 5540	62
NIGER	2 / 2	3 / 3	2 / 2	6 / 6	35 / 45	156 / 300	215 / 480	197 / 486	161 / 331	87 / 152	/	/	864 / 1807	48
BURKINA FASO	1 / 1	3 / 3	63 / 108	18 / 55	84 / 240	211 / 596	222 / 489	116 / 185	43 / 102	/	/	/	761 / 1779	43
TOGO	87 / 102	58 / 85	17 / 31	32 / 34	48 / 71	60 / 73	53 / 101	53 / 122	90 / 130	220 / 326	/	/	718 / 1075	67
COTE D'IVOIRE	40 / 55	28 / 44	38 / 40	28 / 41	33 / 42	62 / 85	36 / 43	20 / 27	17 / 17	8 / 8	/	/	310 / 402	77
UGANDA	3 / 6	7 / 7	7 / 7	20 / 21	66 / 70	99 / 102	36 / 39	31 / 32	13 / 13	9 / 10	/	/	291 / 307	95
BENIN	84 / 89	22 / 27	14 / 15	9 / 10	11 / 12	2 / 3	4 / 4	3 / 3	8 / 9	/	/	/	157 / 172	91
MALI	1 / 2	2 / 2	3 / 3	2 / 2	11 / 14	44 / 72	62 / 89	42 / 70	45 / 55	/	/	/	212 / 309	69
MAURITANIA	0 / 0	0 / 0	0 / 0	2 / 2	0 / 0	2 / 2	12 / 27	31 / 65	/	/	/	/	47 / 96	
ETHIOPIA	0 / 0	0 / 0	5 / 5	14 / 15	38 / 42	68 / 68	56 / 56	40 / 40	10 / 13	1 / 1	/	/	232 / 240	97
CHAD**	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	1 / 1	/	/	/	/	1 / 1	
CAMEROON***	1 / 1	0 / 0	0 / 0	0 / 0	1 / 1	1 / 1	3 / 3	2 / 2	/	/	/	/	8 / 8	100
C.A.R. ****	0 / 1	2 / 3	3 / 5	0 / 0	0 / 1	0 / 0	/	/	/	/	/	/	5 / 10	50
TOTAL*	3090 / 5664	3152 / 6035	3157 / 5332	3084 / 5248	5387 / 9107	6432 / 12137	6127 / 12330	4085 / 8052	2198 / 3785	658 / 1003	0 / 0	0 / 0	37370 / 68693	54
% CONTAINED	55	52	59	59	59	53	50	51	58	66			54	

\* Provisional

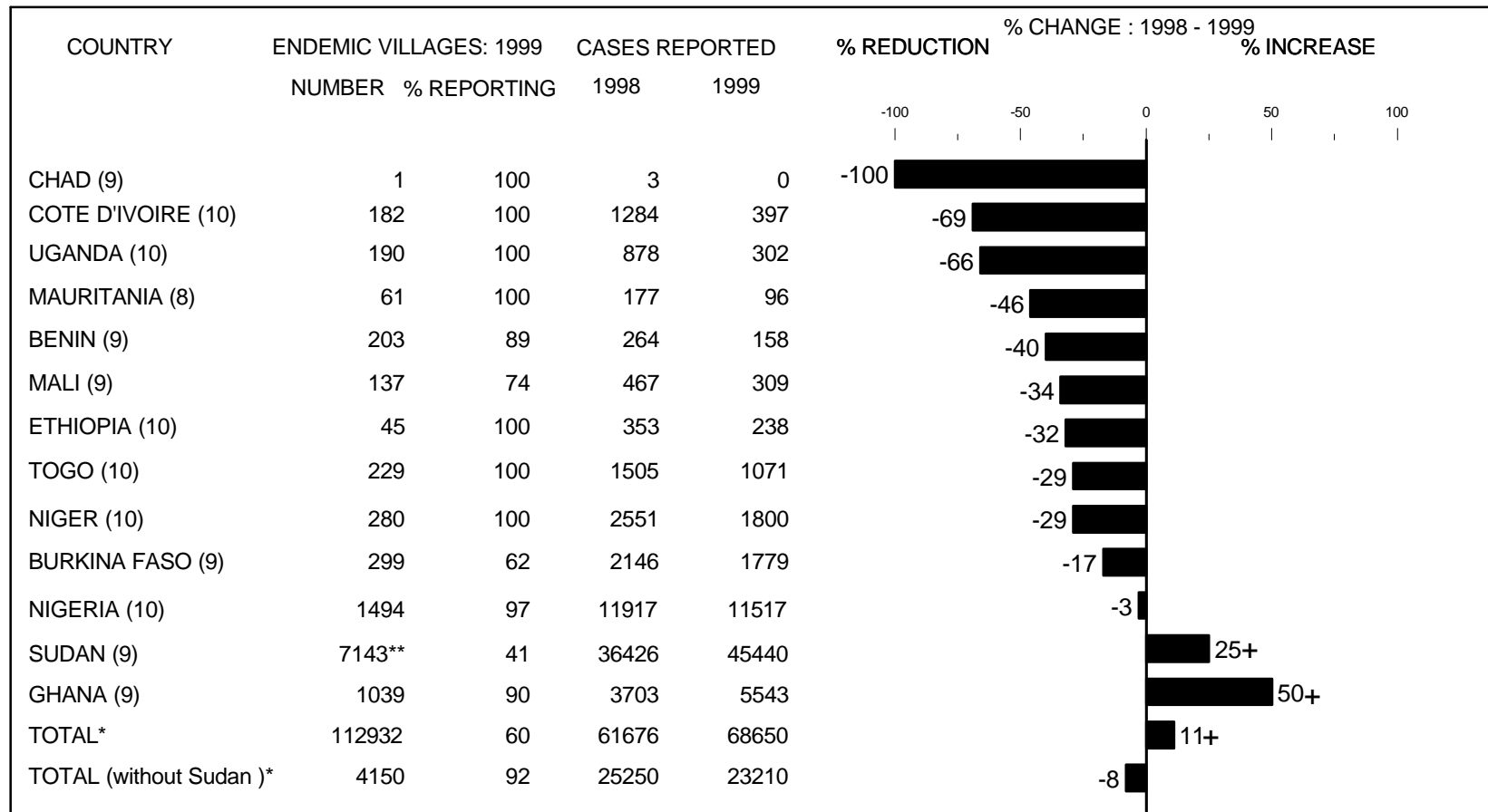
\*\* Reported one case in September imported from Nigeria

\*\*\* All 8 cases reported during January - August 1999 were imported from Nigeria.

\*\*\*\* Central African Republic reported 10 alleged (unconfirmed) cases of dracunculiasis for the period January - June, 1999. These cases are not included in the totals.

Figure 3

### Percentage of Endemic Villages Reporting and Percentage Change in Number of Indigenous Cases of Dracunculiasis During 1998 and 1999 \*, by Country



\* Provisional. Totals do not include imported cases.

\*\* Includes 2,026 known endemic villages that are not accessible to the program because of insecurity.

(9) Denotes number of months for which reports were received, e.g., Jan. - Sept., 1999

members of the public on the disease's life cycle, modes of transmission and ways to avoid it. Each session was then broadcast three times a week, three times in a row, in three local languages. Afterward, it was reported that "Everyone in Bouna is talking about the broadcasts, especially the villagers from endemic villages!!" Global 2000 recently provided another 2,500 square yards of filter material for this program.

Ghana's program has produced preliminary line listings of endemic communities in each of the three main remaining endemic regions: Brong-Ahofo, Northern and Volta. An example of the provisional listing for Northern Region is given in Table 3. Four external consultants provided by Global 2000 are currently helping to strengthen supervision of village-based health workers in the highest endemic districts of Volta (1), Brong Ahafo (1), and Northern (2) Regions.

Mali General Amadou Toumani Touré, President of Mali's InterSectorial Group for Guinea Worm Eradication traveled to the village of Tenne in the Mopti region of Mali to celebrate Mali's National Guinea Worm Day. The Day's celebration included songs, a theatrical sketch, and traditional Dogon dancing. Awards were given to ten villages throughout the region that had succeeded in reducing cases from hundreds at the beginning of the Program to zero cases today. General Touré addressed the crowd to congratulate them on their success, to thank the health workers and partners for their efforts and remind everyone that while the number of cases in Mali has been reduced considerably much remains to be done to ensure that Guinea worm is finally vanquished from Mali and from the world. General Touré was accompanied by the area's Representative to the National Assembly as well as representatives from the region, the Ministries of Health, Rural Development and Water, WHO, UNICEF, UNDP and Global 2000.

Niger Mr. Kurt Ebert, the chief of mission of the Danish Cooperation Mission to Niger, and the chief of projects of the mission, Mrs. Latifa Moussa, visited endemic areas in Tera District on October 25<sup>th</sup>-27<sup>th</sup>. They were accompanied by the national program coordinator, Mr. Sadi Moussa, and the Global 2000 resident technical advisor, Mr. M. Salissou Kane.

Sudan 16,000 T-shirts, each containing a message about Guinea worm and about polio, will be distributed in southern Sudan as a part of next year's National Immunization Days in support of the Polio Eradication Program.

## MEETINGS



The WHO's Regional Office for Africa announces that the next meeting of the Program Managers of Guinea Worm Eradication Programs will be held in Ougadougou, Burkina Faso, March 6-9, 2000.

WHO is pleased to announce that the fourth meeting of the International Commission for the Certification of Dracunculiasis Eradication (ICCDE) will be held in WHO Headquarters, Geneva, from 15 to 17 February 2000. At its previous meetings, and after careful examination, the Commission has already certified 109 countries and territories as free of dracunculiasis transmission. To date a total of 40 more countries and territories have provided the necessary documentation to be considered at the next meeting. Some countries, however, had first to submit detailed reports on their situation as regards dracunculiasis transmission. This was the case for Turkmenistan, Uzbekistan, Saudi Arabia, Libya and Morocco. Furthermore, an International Certification Team (ICT) visited the previously endemic areas of Libya. Another ICT is currently evaluating the situation in India. WHO staff also toured Senegal and Yemen to evaluate the progress achieved by their respective national eradication programme, and the reliability of the national surveillance system.

## RECENT PUBLICATIONS

Taylor\_Robinson, S, 1999. To South Sudan with Operation Lifeline Sudan and UNICEF. Journal of the Royal College of Physicians of London. 33(3): 276-27

Table 3

Ghana Guinea Worm Eradication Programme:

**List of Endemic Communities in Descending Order of Cases**

Region: Northern

Date:

Name of G W Coordinator:

	Village	Zone	District	cases: 1999 Jan. - July	Population	# of HH	# of HH with filters	Monthly Abate Treatment	Situation* Safe Water	Comments e.g. Case Containment rate etc.
1	Diare	Diare	Savelugu / Nanton	168	9514				2+	
2	Wapuli	Wapuli	Saboba / Cheriponi	159	1173	201			1+	
3	Savelugu	Savelugu	Savelugu / Nanton	151	27478					
4	Tamale Township	Tamale Central	Tamale	106	234391					
5	Kukuo	Bimbilla	Nanumba	105	1152					
6	Zabzugu	Zabzugu	Zabzugu / Tatale	67	7126	1567				
7	Gbandi	Kukpaligu	Zabzugu / Tatale	64	1023	158				
8	Yankazia	Wapuli	Saboba / Cheriponi	54	975	135				
9	Tibali	Pong-Tamale	Savelugu / Nanton	48	590					
10	Nbondo	Chamba	Nanumba	48	426				1+	
11	Kukan	Kukpaligu	Zabzugu / Tatale	46	702	59				
12	Zoggu	Savelugu	Savelugu / Nanton	45	2519					
13	Finaayili	Nakpali	Zabzugu / Tatale	45	225	20			1+	
14	Jahanjori-Kukuo	Savelugu	Savelugu / Nanton	43	960					
15	Sakpaluwa	Kpalbe	East Gonja	42	430					
16	Watugu	Wantugu	Tolon / Kumbungu	41	2570					
17	Naido	Wulensi	Nanumba	38	250					
18	Tampion	Nanton	Savelugu / Nanton	34	2541				3+	
19	Basare jura	Kpandai	East Gonja	33						
20	Laribanga	Nakpali	Zabzugu / Tatale	31	331	44				

**\*Key:**

1+ = 1 working handdug well or borehole

1- = 1 handdug well of borehole, not working

0 = no handdug well or borehole

Table 4

**Dracunculiasis Eradication Campaign**  
**Reported Importations of Cases of Dracunculiasis: 1999**

From	To	Cases			
		Month	Number	Contained	Notified*
Benin	Togo	January	1	?	1
		February	1	1	1
Burkina Faso	Niger	May	3	?	3
	Cote d'Ivoire	June	1	0	?
	Ghana	June	3	3	?
Ghana	Togo	January	2	2	?
	Cote d'Ivoire	January	1	0	1
		February	1	0	1
Niger	Cote d'Ivoire	August	2	0	2
Nigeria	Cameroon	January	1	1	1
		May	1	1	1
		June	1	1	1
		July	3	3	3
		August	2	2	2
	Chad	September	1	1	1
	Sudan	Uganda	January	1	1
April			1	1	1
June			1	1	1
August			2	?	?
Kenya		August	1	?	1
Togo		Benin	January	1	0
	February		1	0	1
	May		10	3	10
	July		1	0	1
	August		1	0	1
	September		1	1	1
	<b>Total</b>				<b>45</b>

\* Notified to country of origin through WHO.

*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 is also available on the web at [http://www.cdc.gov/ncidod/dpd/list\\_drc.htm](http://www.cdc.gov/ncidod/dpd/list_drc.htm).



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