Date: July 7, 2008

From: WHO Collaborating Center for

Research, Training and Eradication of Dracunculiasis

Subject: GUINEA WORM WRAP-UP #182

To: Addressees

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Fgure 1

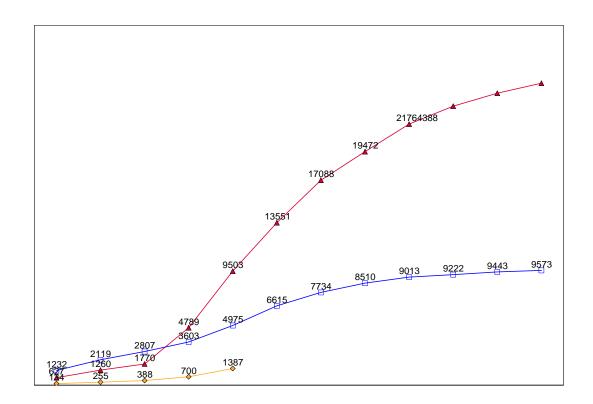


Table 1

No. reporting one or more cases 'cases'* No. reporting cases 'No. reporting only imported cases 'cases' cases' cases '2008 No. reporting in all households^ with filters in all households^ with filters in all households^ with filters in all households^ No. reporting in all households^ No. reportin

Drs. Ernesto Ruiz-Tiben of The Carter Center and Gautam Biswas of the World Health Organization (WHO) conducted a joint supervisory visit to Kapoeta, Juba and Terekeka Counties in the South Sudan Guinea Worm Eradication Program (SSGWEP) on June 1-13. Ms. Junerlyn Agum and Mr. Evans Liyosi of WHO/Geneva also visited the SSGWEP during May 13-June 22 to assist with WHO's assessment of the program and of surveillance capacity in areas free of GWD. The SSGWEP has reported 989 cases in January-May 2008 (vs. 2,136 in January-May 2007), from 373 villages, with a reporting rate of 77% (vs. 70% reporting in 2007). Seven of the ten states, 28 of 58 counties, and 65 of 148 payams under surveillance in South Sudan are endemic, but 93% of cases so far in 2008 were reported from only 38 payams. An updated map showing the locations of villages that reported one or more cases in 2007 and with known geographic coordinates is provided in Figure 2.

The SSGWEP has provided health education to 100% of endemic villages, of which 43% have cloth filters in all households, and 16% have at least one source of safe drinking water, 10% were protected with ABATE® Larvicide, and 32% of cases have reportedly been contained (Table 1). UNICEF has provided 128 borehole wells in South Sudan in January-March 2008, of which 47 are in known Guinea worm-endemic villages, and of which 36 are currently functional. The endemic areas in Kapoeta North, South, & East (E. Equatoria State) and Ayod (Jongoli State) Counties, where these 36 functioning wells are located, reported an estimated 832 (14%) of Sudan's 5,815 cases in 2007. Continuing insecurity in counties of Warrap State has constrained full implementation of interventions against GWD in some of the most endemic areas West of the Nile during 2008, so far.

"The success of the GWEP now depends on decisions made day to day, not on resources." Makoy Samuel Yibi Logora, Director SSGWEP

The **Ghana Guinea Worm Eradication Program** has reported 73 cases of dracunculiasis for May 2008 (vs. 272 cases in May 2007), marking its fourteenth consecutive month of reductions greater than 70%. Transmission has been interrupted in five of Ghana's ten regions (Central, Eastern, Greater Accra, Upper East & Western) already, but indigenous cases have been reported only from Northern and Brong-Ahafo Regions so far this year. Brong-Ahafo Region's first outbreak of the year was detected on June 10 in the village of Agege in Kintampo North District. The outbreak is attributed to contamination of a local water source last year by a teenage girl from a village in Saboba Chereponi District (Northern Region). Interventions began before June 16, ABATE® Larvicide was applied on June 17, and a team from the national secretariat of the program made a follow up visit and investigation on June 20. Another patient who had also drunk from the water source in Agege was discovered in a nearby v

Figure 3

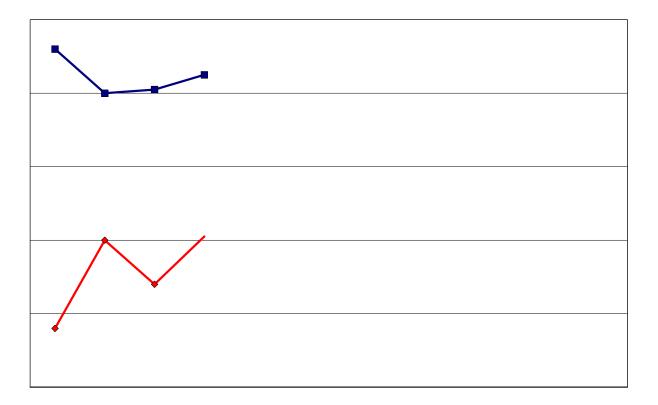


Table 2

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														
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER	TOTAL*	CONT.		
SUDAN	4/32	11 / 32	30 / 82	78 _{/ 245}	190 / 598	/	/	/	/	/	/	/	313 / 989			
GHANA	67	64 / 80	39 / 48	58 68	43 / 73	71	/	/	/	/	/	/	271 / 413	66		
MALI	1 / 1	0 / 0	0 / 0	1 / 1	16 16	59 60	/	/	/	/	/	/	77 / 78	99		
NIGERIA	28 28	8 / 8	1 / 1	0 / 0	0 / 0	0 / 0	/	/	/	/	/	/	37 37	100		
NIGER	0	1 / 1	0 / 0	0 / 0	0 / 0	0	/	/	/	/	/	/	1 / 1	100		
ETHIOPIA	0	0	2 / 2	20 _/ 25	7 / 7	2 / 2	/	/	/	/	/	/	31 / 36	86		
BURKINA FASO	0 / 0	0 / 0	0 / 0	1 / 1	0 / 0	0 / 0	/	/	/	/	/	/	1 / 1	100		
TOTAL*	100 / 134	84 121	72 / 133	158	256 / 694	61 / 133	/	/	/	/	/	/	731 1555	47		
% CONTAINED	75	69	54	46	37	46							47			
% CONT. OUTSIDE SUDAN	94	82	82	84	69	46							74			

^{*} provisional

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

Figure 4
Number of Indigenous Cases Reported During the Specified Period in 2007 and 2008*, and Percent
Change in Cases Reported

Country	Indigenou Repo			9/	6 CHANGE 2007 - 2008		
	2007	2008*	-100%	-50%	0%	50%	100%
Niger (6)	4	0	-100%				
Ghana (6)	2780	413	-85%				
Sudan (5)	2148	989		-54%			
Nigeria (6)	42	37			-12%		
Mali (6)	2	78					3800%
Total	4976	1517		0%			
All countries, excluding Sudan	2828	528	-81%				

^{*} Provisional: excludes cases exported from one country to another (5) Indicates months for which reports were received, i.e., Jan.-May. 2008

MALI: INCREASED GW CASES AND INSECURITY IN KIDAL

The Malian GWEP has reported 18 cases of dracunculiasis, 16 of which occurred in May, in January-May 2008 (Figure 5). One case occurred in Gao District in April; the other 17 cases were reported from Kidal (1 in January, 16 in May). All 18 cases were reportedly contained. This compares to one indigenous case reported during January-May 2007. A provisional total of 60 additional cases have been reported (59 from Kidal and one case from Gao) for June 2008 (Table 2). The status of interventions is shown in Table 1. The program's Action Plan for 2008 will increase the numbers of vehicles, camels, motor cycles, medical students, technical assistants and village volunteers deployed in Gao, Ansongo and Kidal Districts during this year's peak transmission season, beginning now. Mr. Philip Downs of Carter Center headquarters made an oversight visit to Mali on June 18-July 1. Additionally, the program is encouraging all cases detected in Gao and Ansongo to be contained in a hospital or health center.

Figure 5	Mali Guinea Worm Eradication Program Number of Reported Cases of Dracunculiasis: 2007 - 2008*

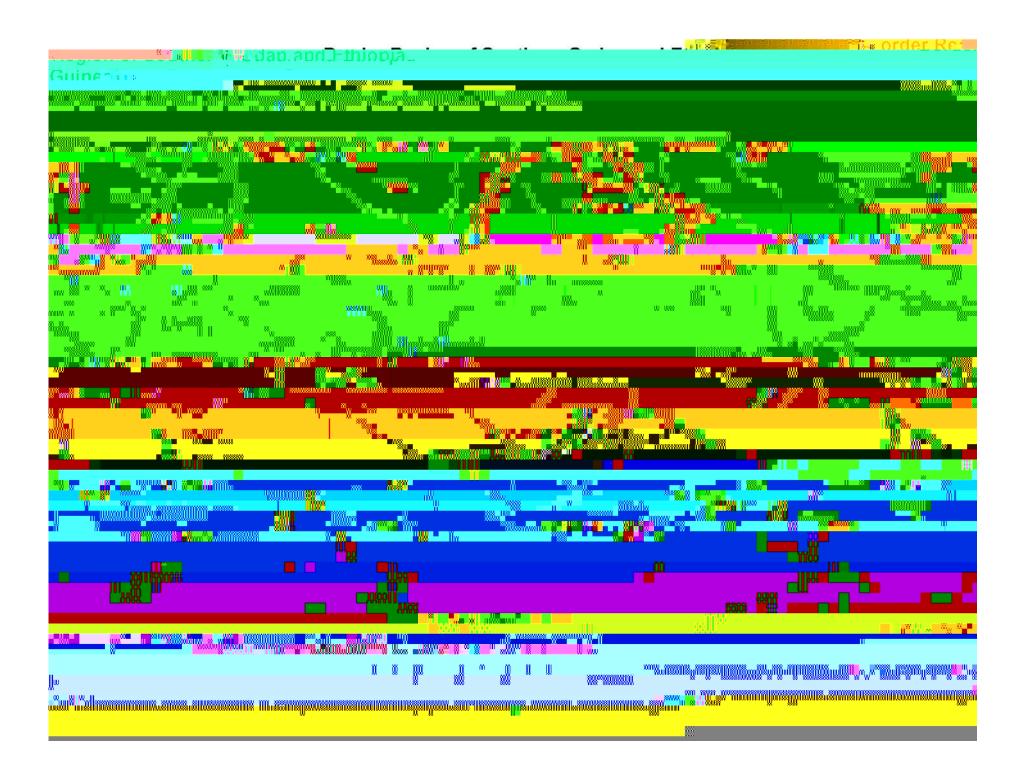


Table 3 **Dracunculiasis Eradication Campaign** Reported Importations and Exportations of Cases of Dracunculiasis: 2008*

From	То		Month and number of cases imported														Nun	Number of caes										
FIOIII	10	Jan.		Feb.		Mar.	Α	pr.	May	′	June		July		Aug.	;	Sept		Oct.		Nov.		Dec.		Total		exported	
Ghana	Burkina Faso							1																	1		1	
Oriana	Togo																								0		'	
		•																								_		
Sudan	Ethiopia**							1																	1		1	ľ
Oddan	Uganda																								0			
_	•	•																								•		
Mali	Niger			1																					1		1	
•	•	-																										,
	Total	0		1	1	0	:	2	0		0		0		0		0	1	0	1	0	1	0	1	3	1		



^{*} Provisional

** Ethiopia alleges that 36 cases of GWD were imported from Southern Sudan into Gambella Region: 2 cases in March, 25 in April, 7 in May, and 2 in June.

The origin of these cases is unresolved, but being investigated.

Benin. A WHO appointed International Certification Team (ICT) composed of three international consultants and three national independent consultants, and supported by national and local facilitators conducted an assessment during April 14-30, 2008 of Benin's claim that it had stopped transmission of dracunculiasis (Guinea worm disease) nation wide. The aim of the mission was to review Benin's National Report of its Guinea worm eradication campaign and to verify and validate the information provided in the National Report. The team conducted surveys during 10 days in 87 localities; 25 health centres; 25 districts to validate the information and assess the quality of the surveillance system. The ICT concluded that Benin met the criteria for certification and has forwarded its report and recommendations to the International Commission for Certification of Dracunculiasis Eradication (ICCDE). The ICCDE is expected to review and approve the ICT's report during its next meeting in March 2009 and if so, to recommend to the Director General of WHO to declare Benin free of Guinea worm disease (GWD).

Ethiopia. During 20 consecutive months (July 2006-March 2008) the Ethiopian Dracunculiasis Eradication Program (EDEP) reported zero cases of GWD and claimed having stopped transmission in all remaining endemic areas. To validate that claim, WHO supported an external evaluation team which visited Ethiopia during May 6-19, 2008. The evaluation team which included an international consultant, international and national staff from WHO, national consultants, and national facilitators, conducted a survey in each of the two formerly endemic regions: South Omo and Gambella. The extent of the assessment in Gambella Region was constrained because of time, accessibility and security. The evaluation team concluded that whereas there is no evidence of indigenous transmission of dracunculiasis in South Omo, (SNNPR) it could not be conclusively ascertained in the Gambella Region, where some 28 cases were detected (all allegedly imported from Southern Sudan). The actual origin of these cases of GWD could not be unequivocally established. However, the evaluation team recommended the immediate implementation of interventions aimed at stopping transmission of GWD and the need for an active case search in the area.

Cote d'Ivoire. Cote d'Ivoire has reported zero cases of GWD since September 2006. To validate and confirm that status, Côte d'Ivoire, WHO conducted an external evaluation during May 12-29, 2008. The aim of the evaluation was to confirm interruption of local transmission of the disease and to formulate recommendations to ensure adequate implementation of pre-certification activities. The evaluation team was composed of four international consultants and four national independent consultants supported by national and local facilitators. The

Number of uncontained cases of dracunculiasis outside of Sudan so far in 2008: 71 in Ghana; 6 in Ethiopia; 1 in Mali, and zero in Nigeria and Niger.

DEFINITION OF CASE CONTAINMENT

A case of Guinea worm disease is contained if <u>all</u> of the following conditions are met:

1. The patient is detected before or within 24 hours