

Public Health Service
Centers for Disease Control
And Prevention (CDC)

Memorandum

Date: October 3, 2017

From: WHO Collaborating Center for Dracunculiasis Eradication, CDC

Subject: GUINEA WORM WRAP-UP #250

To: Addressees

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Mali has reported no case of Guinea worm disease (GWD) for 21 months (December 2015-August 2017). This suggests that transmission of Guinea worms (GWs) to humans may finally have been interrupted in Mali, but the peak transmission season in Mali is July-October, and transmission of GW infections persist in dogs. Mali currently has 455 villages under active surveillance; GW surveillance also is integrated with immunization and malaria campaigns in Tominian district of Segou Region. Awareness of the cash reward for reporting a case of GWD stood at

of the program to access all areas affected by transhumance (including the Mopti Region) and to fully ascertain the absence of GWD in nomadic camps, in northern Mali.

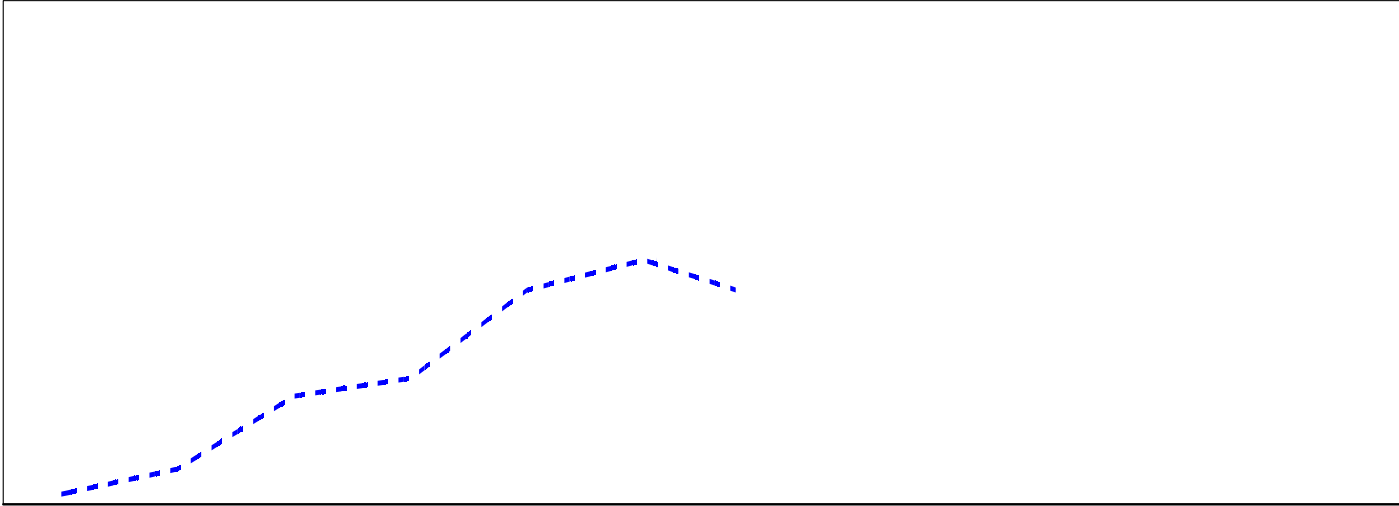
Mali reported one GW-infected dog, its first, in August 2016, of which 8 were contained and Abate applied. In addition, 1 dog and 1 cat have been reported in January-September 2017.

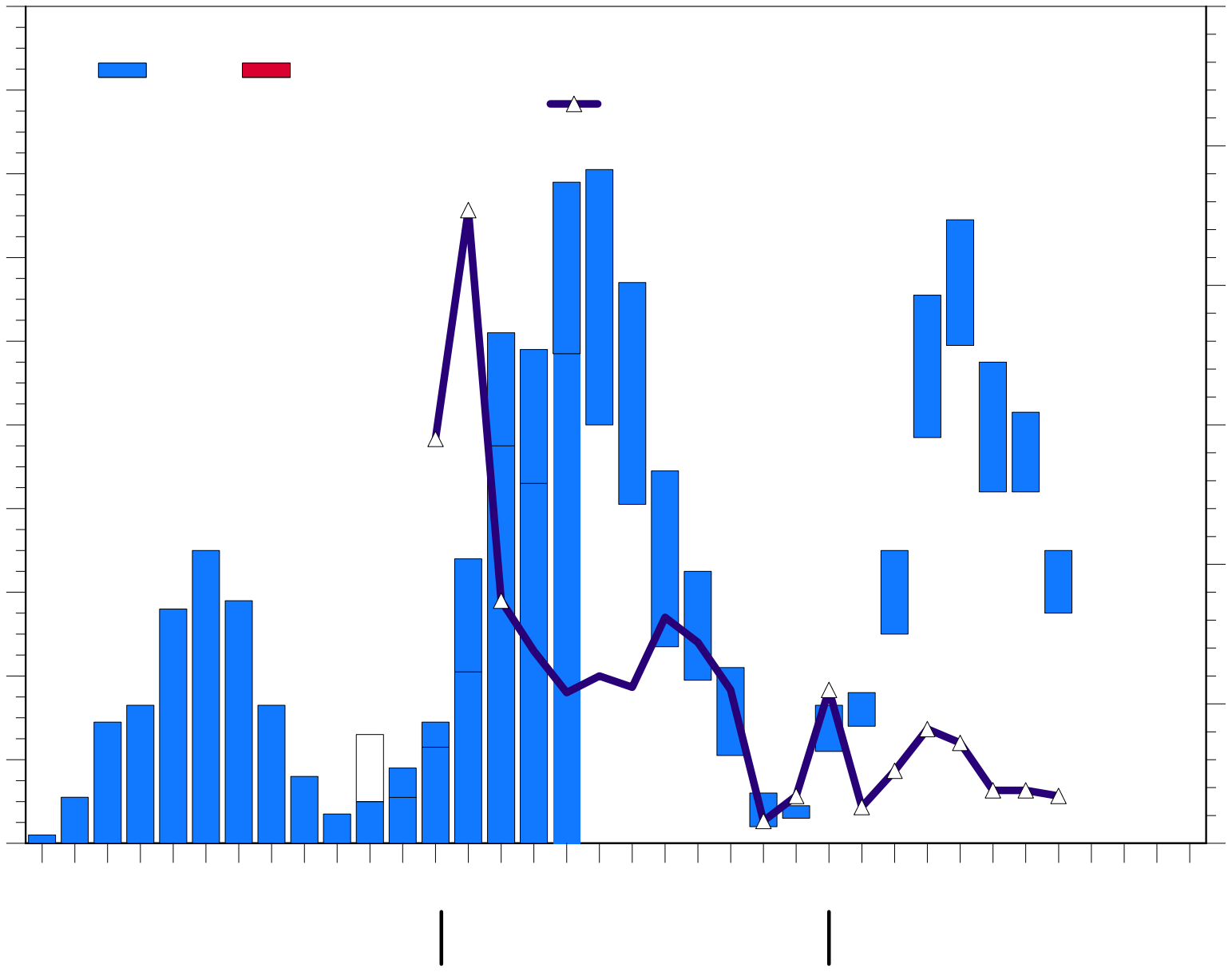
88 water sources with Abate in January-July 2017. The GWEP introduced a cash reward equivalent to US\$20 for reporting and containing an infected dog in March 2016. Spot checks of awareness of the reward for reporting infected dogs found 79% awareness among 4709 persons queried in 2016 and 74% of 840 persons queried in January-July 2017. Until recently all infected dogs and infections in humans over the past few years were detected in Tominian district of Segou Region, although most infected dogs had been imported by Bobo villagers from adjacent districts of Segou and Mopti Regions. In August an infected dog was detected in Mopti Region for the first time, where most dog owners are fishermen of the Bozo ethnic group.

Carter Center Country Representative Mr. Sadi Moussa made a supervisory visit to Segou and Mopti Regions on August 24-28. In Segou he made a courtesy visit to regional health director Dr. Gabriel Guindo, who himself had visited Tominian district twice recently. Mr. Moussa also visited Koula, Fangasso and Ouan health areas in Tominian district before continuing to Mopti Region, where he visited Tacko village and the health center at Konio in Djenne district of Mopti Region.

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Chad's Guinea Worm Eradication Program has reported 708 infected dogs (78% contained) and 12 domestic cats (4 contained) in January-August 2017, which is a reduction of 19% from the 879 infected dogs reported during the same period of 2016 (Figure 1). Chad has 1,862 villages under active surveillance (VAS). A total of 1,991 rumors were reported in January- August, of which 1,902 (96%) were investigated within 24 hours. According to surveys by the program, 81% of 1,199 households sampled in VAS in January- August 2017 were burying fish entrails and 80% of 109 persons queried were aware of the cash reward for reporting an infected person. The impact of existing interventions (mainly dog tethering, burying fish guts) on dog infections in 907 Level 1 VAS during January-August 2016 and 2017 30% fewer infected dogs and 44% fewer Guinea worms emerging from dogs in January-August this year compared to the same period of 2016. In the 88 Level 1 VAS with existing interventions plus monthly treatment of dogs with Advocate[®] anthelmintic since October 2016, the number of infected dogs was reduced by 45% and the number of Guinea worms emerging was reduced by 62% in January-August 2017 compared to the same period of 2016. The increased rate of containment of dogs in January-August 2017 (78%) vs. January-August 2016 (67%) also allowed fewer uncontained dogs so far than Janqugu far





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Table 3

Patient

Name

Table 5

Animal Type	Animal #	Woreda	Kebe	Village of detection
[Redacted content]				

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South Sudan completed nine consecutive months with no cases of Guinea worm disease at the end of August 2017. The South Sudan Guinea Worm Eradication Program (SSGWEP) plans to launch its enhanced Guinea worm communication campaign at the end of October. The theme of the campaign is: “It pays to report Guinea worm-Find it, report it, get paid”. Three expatriate technical advisors have returned in-country to assist national staff of the SSGWEP in the formerly GW-endemic counties of Jur River and Tonj East, both of which are at Level 1 surveillance and located west of the Nile, and in the formerly GW-endemic Kapoeta North, South and East counties of Kapoeta State, located east of the Nile, which are now at risk Level 3 but with Level 1 surveillance structure still in place.

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The continued civil unrest in South Sudan and the movement of populations that have ensued, triggered a significant flux of refugees from South Sudan to neighboring countries, i.e., to the Democratic Republic of Congo (DRC), Ethiopia, Kenya, and Sudan. This called for intensified coordination and collaboration among these countries to intensify surveillance for prompt detection of cases of GWD along their borders and among refugees from South Sudan, where GWDoSudaé a3. i32 amon

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 (gwrapup@cdc.gov) or to Dr. Ernesto Ruiz-Tiben (eruizti@emory.edu), by the end of the month for publication in the following month's issue. C