



Date:

In addition to the need to focus on improving interventions in endemic villages reporting five or more cases, two other major priorities are apparent from the reports at this year's meeting: the need to improve surveillance for dracunculiasis in formerly endemic areas (6 of Ghana's 10 regions and 6 of Mali's 8 regions are essentially dracunculiasis-free already, for example) and the need to improve cross-notification of internationally exported cases (use e-mail!).

SUDAN accounted for 76% of all cases reported worldwide in 2002. Despite the civil war; the program and its partners on both sides accessed more endemic villages than ever (6,365) in 2002, improved its reporting rate from 66% of accessible villages in 2001 to 70%, distributed more cloth filters for household use (974,543; with full coverage in 64% of endemic villages), and held more health education sessions (112,588; 92% coverage) in endemic villages than ever before during 2002. Of the 90 cases reported in the northern states of Sudan, 30 were imported from the southern states, which also exported a total of 58 cases to neighboring countries during 2002 (Table 3). 69 of the cases in the northern states were reportedly contained, including 22 in case containment centers. Surveys are underway or recently completed in the Nuba Mountains, Upper Nile State and Blue Nile State, parts of which were previously inaccessible to the program because of the war.

GHANA has completed a rapid investigation of the outbreak in Nkwanta District of Volta Region, where 532 cases were confirmed in 80 communities for January-March 2003. Most (422) of the cases occurred in the two northern-most (Damako and Kpassa) of the district's five sub-districts. Aggressive actions being taken in Nkwanta in follow up include a US Peace Corps-assisted "Worm Week" held March 22-28 in which 27 volunteers worked in 13 of the highest endemic communities (with 71% of the cases), using flip charts, posters and comic books to deliver health education messages to 44,816 persons, and distributing 5,602 filters. Over 3,000 persons saw health education videos in local languages in six of the villages. Among the highest endemic districts in the Northern Region, Tamale District improved its coverage for filters, Abate, health education and water supply during 2002, while 63 (94%) of the 67 patients admitted to its case containment center in February 2003 were admitted in the pre-emergent stage or within 24 hours of emergence of their worms. In West Gonja, reported rates of case containment improved from 34% in 2001 to 70% in 2002. In Zabzugu-Tatale, filter coverage rose from 85% to 90% while Nanumba increased the proportion of endemic villages with at least one safe source of drinking water from 25% to 50%.

NIGERIA now has 19 of its 36 states and the Federal Capital Territory dracunculiasis-free, and only 82 of the country's 774 Local Government Areas (LGA) reported cases in 2002 (Yobe and Kano States became Guinea worm-free in 2002). Only 20 (24%) of these 82 LGAs reported 2,678 (70%) of the 3,825 cases reported during 2002. The proportion of endemic villages with filters in all households increased from 88% in 2001 to 98% in 2002, while the percentage of endemic villages with at least one source of safe drinking water rose from 49% to 60%. General Yakubu Gowon made advocacy visits to ten endemic states between February 2002 and February 2003. In February - March 2003 Global 2000 funded the repair of water sources in the country's highest endemic village (156 cases reported in 2002: Ado Awaye in Iseyin LGA, Oyo State), at a cost of about \$1,300. This included restoration of water to the Primary Health Care hospital that is also serving as the case containment center in the community since December 2002. One of the repaired boreholes had been dormant for 20 years. Of the 370 cases reported in Nigeria in February and March 2003, 156 (42%) were contained in a case containment center. "Worm Weeks" were conducted in Ado and Obi LGAs of Benue State and in Iyesin and Ibarapa North LGAs of Oyo State for the first time in January 2003, and in Ezza North LGA, Ebonyi State for the first time in March 2003. *Nigeria passed Ghana in Guinea Worm Race 2002.*

TOGO

Table 2

Number of cases contained and number reported by month during 2002*
(Countries arranged in descending order of cases in 2001)

NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED

%

JANUARY FEBRUARY MARCH APRIL MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER DECEMBER

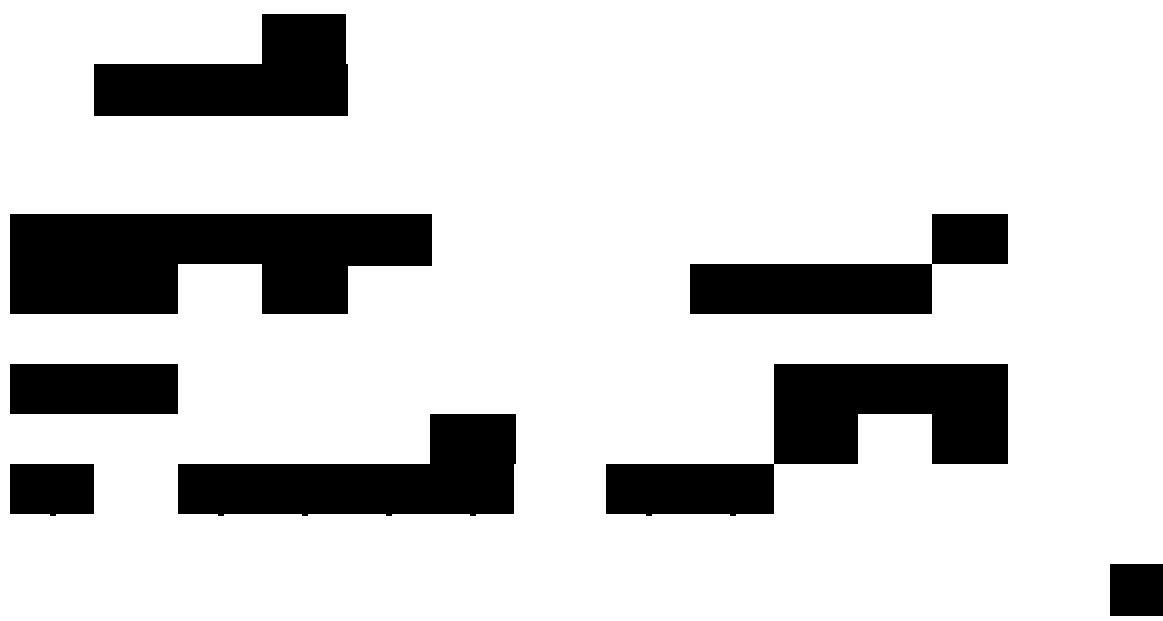


Figure 1

Uganda	19	100%	51	6
Mauritania	18	98%	94	42
Burkina Faso	133	59%	1021	580
Niger	77	100%	405	233
Nigeria	557	99%	5355	3820
Sudan	4233	70%	49471	41493
Cote d'Ivoire	25	86%	226	192
Benin	31	100%	156	157
Togo	228	100%	1344	1479
Ghana	739	95%	4738	5606
Mali	183	79%	708	857
Ethiopia	12	100%	10	24
Cent Afr Rep	NR	NR		NR
Total	6255	77%	63579	54489
Total (- Sudan)	2022	93%	14108	12996

* Provisional

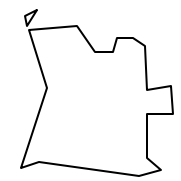
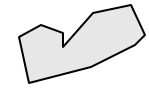
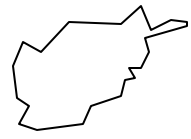
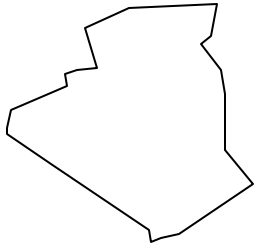


Figure 3

Distribution of Indigenous Cases of Dracunculiasis Reported During 2001 and 2002

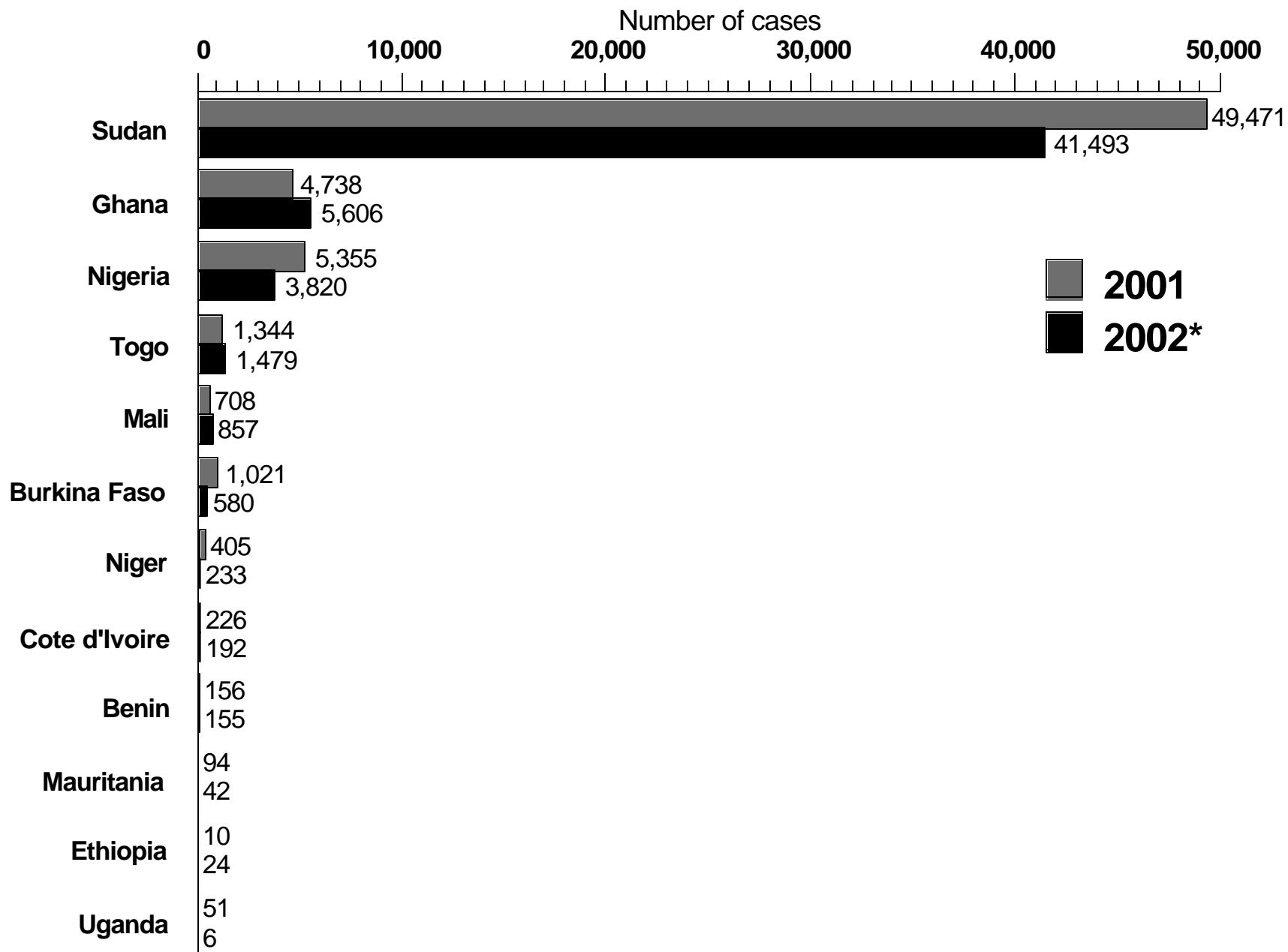


Table 4

Number of cases contained and number reported by month during 2003*
 (Countries arranged in descending order of cases in 2002)

	NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED												TOTAL*	CONT.	%
	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER	DECEMBER			
SUDAN	620 / 1082	258 / 487	262 / 497	/	/	/	/	/	/	/	/	/	1140 / 2066	55	
GHANA	469 / 870	741 / 1330	/	/	/	/	/	/	/	/	/	/	1210 / 2200	55	
NIGERIA	389 / 568	179 / 245	103 / 125	/	/	/	/	/	/	/	/	/	671 / 938	72	
TOGO	109 / 147	40 / 46	22 / 30	/	/	/	/	/	/	/	/	/	171 / 223	77	
MALI	3 / 3	4 / 4	5 / 5	/	/	/	/	/	/	/	/	/	12 / 12	100	

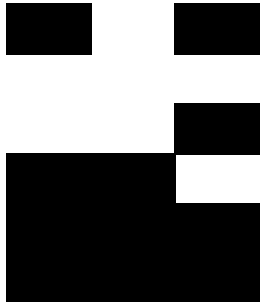
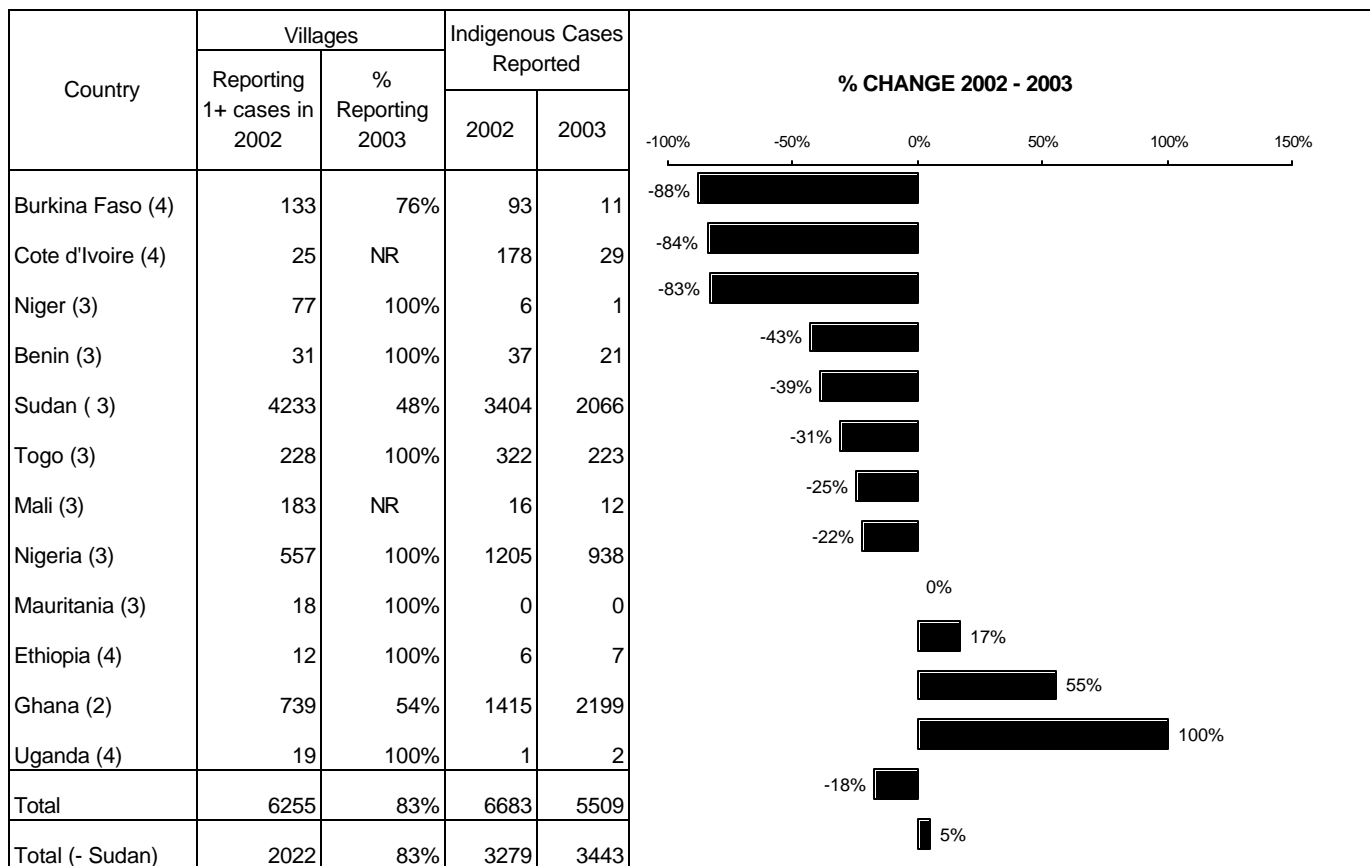


Figure 4

Number of Villages/Localities Reporting Cases of Dracunculiasis in 2002, Percentage of Endemic Villages Reporting in 2003*, Number of Indigenous Cases Reporting During the Specified Period in 2002 and 2003*, and Percent Change in Cases Reported



(3) Indicates month for which reports were received, i.e., Jan. - Mar. 2003

* Provisional

COTE D'IVOIRE reported 198 cases in 2002, including 6 imported cases. 170 of the cases occurred in only four contiguous villages in Tanda District, on the government-held side. Only one of the villages known to have had a case in 2002 is located in rebel-held territory. All of the villages reporting cases in Tanda District reportedly have full filter coverage, used Abate, and had at least one safe source of drinking water. Only 24 cases were reported in January-February 2003, compared to 143 cases reported during the same two months of 2002.

BENIN reportedly contained 94% of the 181 cases it reported (including 24 imported cases) in 2002, but it realized no reduction from the 157 indigenous cases it reported in 2001, despite a claimed containment rate of 95% in 2001. It has achieved a reduction of -43% in indigenous cases and contained all of them during the first quarter of 2003. A total of 128 (71%) of all Benin's cases in 2002 were contained in a hospital or containment center. 62% of the patients so contained were admitted before or within 48 hours of emergence of the worm, including 34% before or within 24 hours. 88% of all cases were in one district (Savalou), and 73% were in only five villages.

MAURITANIA reported 42 indigenous cases in 2002, which was a reduction of -55% from the 94 cases reported in 2001. Of the 18 localities that reported cases, 12 reported only one case each, and 2 reported only two cases each. Ten of the one-case villages and one of the two-case villages were "new", presumably as a result of importations

