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

Memorandum

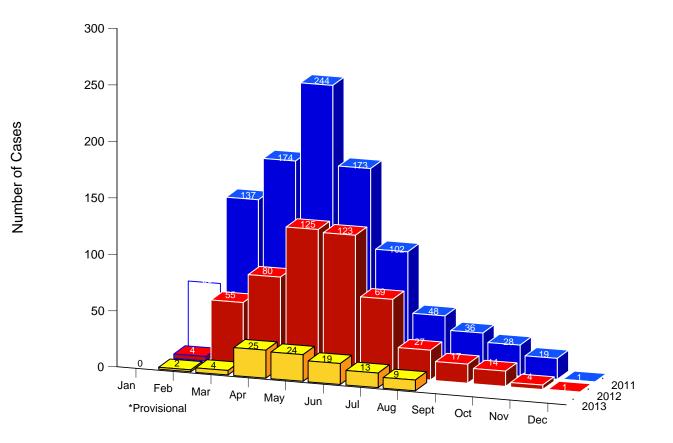
DEPARTMENT OF HEALTH & HUMAN SERVICES



Date:Sept. 23, 2013

From: Figlue Colla2 Tc .0012Aot-Ui

South Sudan Guinea Worm Eradication Program Cases of Dracunculiasis Reported by Month, 2011 - 2013*



Only 5 of the country's 80 counties have retendrindigenous cases and 2 counties reported only imported cases so far this year. Sixty-five (@)5)68% of the 96 cases were contained (Tables 2 and 6). Ninety-four (94) of the 96 cases were mean known endemic areas. Dr. Ernesto Ruiz-<u>Tiben, Mr. Craig Withers and Mr. Adam Weis</u>s of The Carter Center pracipated in the South Sudan Guinea Worm Eradication Program (SSCP)WEnid-year review at Kapoeta on August 29-30. While in Juba, they and undersecryetar health <u>Dr. Makur Matur Kario</u>, mand the SSGWEP director <u>Mr. Samuel Makoy Yibmet with the President of South Sudan, the Honorable Salva Kiir</u>, and separately with the Minest of Health, <u>Dr. Riek Gai Ko</u>k.Table 1 is an update of the 32 cases ported in June and Julg continue the line sting of cases reported for January-May in previous issues.

The circumstances pertaining to one of the Gaiworm patients detected in Kauto West Payam of Kapoeta East County in June 2013 illustrate thoroughness and dedication that are now hallmarks of the SSGWEP. LAL is an 11 year old girl who is the sister of a 9 year old female case and the sister-in-law of a 25 year old female, dasth of whom also were detected in June 2013, and all three of whom were from the same village called Achakar, in Kauto West Payam (district):"LAL was detected in Namertiaba Cattle Camp (CC) in Lorus Etuko Boma (sub-district). She was detected as a suspect in Lokoriwon CC where her family members became cases, but her worm did not emerge until her moving group had arrived to their next destination in Nameritaba CC area. Because all containment measures were put in place early, lla0TJ-34.K,)bimouf all SED in Ling 517 - Coord CC a)-.104 Isha Nirola4 Tc.0185TD.0007 Tc.00006Tc.14015Twf(Tc.0285 Twfan upd surveillance focal points in the pointry will be completed which will include GWD surveillance. The Ministry of Health/Chad GWEP will no wold a stakeholder's meeting on October 11-12 and an annual GWEP review meeting during latest quarter of 2013 toncrease the level of commitment and support from regional and distributhorities in GW fee areas to increase awareness about the disease removards and to improve over all reveillance for and response to alleged cases of GWD.

Ethiopia reported no cases during July-August 2013, afdotal of 6 cases (3 contained) in

Naen	1 = 2 = EVAS NEVAS	(Yeş No o Pe dig	If No Date 6 Abate RX	Naen	1 = 2 = (Yes/ EVAS NEVAS Np	De sp	(Yes	/ Njo	Aci
			NADIDNOT						

56.1 LODUKIO	1	LOTIMOR	KAPOEASAT	24	М	26/05/13	NO	NADIDNOT

	Naen	1 = 2 = EVAS NEVAS	(Yeş Noro Pe dig	lfNo Date 6 Abate RX	Nam	1 = 2 = (Yes/ EVAS NEVAS No	De sp	(Yes	/N)p	Aci
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Naen 1 = 2 = EVAS NEVAS

(Yeş Noro Pe**d)g**

Table 2

				С
State	County	Jan	Feb	Mar
	Kapoeta East	0 / 0	1 / 2	0 / 2
Eastern	Kapoeta North	0 / 0	0 / 0	0 / 0
Equatoria	Kapoeta South	0 / 0	0 / 0	0/0
STAT	TE TOTAL	0 / 0	1 / 2	0 / 2
0.77		0,0		
Jonglei	Pibor	0 / 0	0 / 0	0 / 0
	TE TOTAL	0 / 0	0 / 0	0 / 0
	Tonj North	0 / 0	0 / 0	0 / 0
Warrap	Tonj East	0 / 0	0 / 0	0 / 0
Wanap	Tonj South	0 / 0	0 / 0	0 / 0
	Gogrial East	0 / 0	0 / 0	1 / 2
STAT	TE TOTAL	0 / 0	0 / 0	1 / 2
		1	1	
Northern Bah	r			
Al Ghazal^	Aweil West	/	/	/
STAT	E TOTAL	/	/	/
Western Bahr Al Ghazal				
Al Gliazai	Jur River	0 / 0	0 / 0	0 / 0
STAT	TE TOTAL	0 / 0	0/0	0/ 0
r				
Lakes	Awerial	0 / 0	0 / 0	0 / 0
STAT	TE TOTAL	0 / 0	0 / 0	0 / 0
SOUTH SUD/	AN TOTAL	0 / 0	1 / 2	1 / 4

SOUTH SUDAN TOTAL	0 / 0	1 / 2	1 / 4
% CONTAINED	0%	50%	25%

* Provisional: as of September 10, 2013

^ Under passive surveillance. New indigenous case
Insecurity in area this month, in Boma, Kassingor, Kassing

Table 3

									LINELISTIN	-	RADICATIO N FGWDDURIN		1							
	Villageor	Localityof [Detection							CaseCo	ntained?		HomeVil	lageor Lo	ocality					
Case #	Name	1 _E VAS	2 ₩ EVAS	3₽SV	District	Region	Age	Sex	DateGW Emerged	(Yes,No, or Pending)	lf No,date of Abate Rx		Name	1= EVAS	2= NEVAS	3= PSV	(Yesor No)	Name	(Yesor No)	Actions?
	neBanane		2		Mandelia	ChaBeiaguirmi	3	F	4/2/2013	yes		2	MiskinBeanana		2		No			
2.1 2.2 2.3									8/4/2013 28/4/13 21/5/13				Koutoungolo Centre							
2.4									21/5/13			2			2		No			
3 Gasse	é		2		Masseny	a Ch Ba iguirmi	50	F	9/4/2013	s yes		2	Gassé		2		No			
4 Gourle	ong			3	Guelende	en May ko ebiEst	12	М	5/5/2013	yes		2	Gourlong			3	No			
5 Djarbo	ouChoufou			3	Mandelia	Cha B aguirmi	6	М	16/5/13	no	N/A	2	Djarbo C houfou			3	No			
6 Bogor	moro		2		Bousso	ChaBraguirmi	25	Μ	19/7/13	yes		2	Bogomoro		2		No			
7 Mado	ubouRoute*	1**			Mandelia	CharBaguirmi	8	М	26/7/13	yes		2	MadouboRoute	1**			?		?	
8 Médé	gué		2		Guelende	en May k oebiEst	10	F	24/8/13	yes		2	Ndjemena		2		No			

^ Provisional

1** Localityis part of endemicclusterof

Casenumber 1.1, 1.2... etcdesignates the casenumber and the number of GWsemerging from same case patient.

EVAS endemicvillageunder active surveillance

 $\mathsf{NEVAS}\ \mathsf{non}\ \mathsf{endemicvillage}\ \mathsf{underactive}\ \mathsf{surveillance}\ \mathsf{vert}\ \mathsf{v$

PSV-passivesurveillanceareavillage

Table4

ETHIOPIADRACUNCULIASERADICATIONROGRAM LINELISTINCOFCASESDETECTEDURINC2013*

									L		DELECTED	VING2013								
	VILLAGIE	RLOCALIT	ØFDETEC ⁻	TION					_	С	CASECONTAINED		HOM	1EVILLAG	E RLOCAI	JTY	OFINE	ME B OURCE FECTION ITIFIED?		MEBOURCEFINFECTIONSAKNOWNEVA?
CASE.G	W# NAME	1 EVAS	2 NEVAS	3 PSV	KEBELE	WORED	A AG	E SEX	DAT Ø FGW EMERGENCE	Y/N/PENDING	DATEFABATERX	1=INDIGENOUS 2=IMPORTED	NAME	1 EVAS	2 NEVAS	3 PSV	Y/N	NAME	Y/N	ACTIONS?
1.1 1.2 1.3	Ojwom			3	Elia	Itang	60 60 60	M M M	29 Apr 113 15 May 113 16 May 113	No	May 3 AbongomeræPond; May 10 Abongomeræ pond, Agulkidipond.	2	Batpoulo			3	No		NO (Depuyipond aswell aspondsaround Djwom villagewhere the patient was detected have been abated
2.1	Batpoulo			3	Perpengo	Abobo	28	М	May 1/3	Yes		1	Batpoulo			3	No			Guule,Awudeor Depuyiponds.All three bonds/groupof pondshavebeenabated
3.1	Batpoulo			3	Perpengo	Abobo	24	М	1 M7ay f13	Yes		1	Batpoulo			3	No			Guule,Awudeor Depuyiponds.All three conds/groupof pondshavebeenabated
4.1	Batpoulo			3	Perpengo	Abobo	40	М	2Febr2											
	Pugnido Town/PRC Agnuak		2		3	Gog				No		1	Pugnido		2		No		Pendin	g

surveillance

PSVapassivœurveillancevillage PRC⊨ PugnidoRefugeeCamp * provisional

LINE LISTING OF CASES DETECTED DURING 2013*

														Admission Rel	ease		
1.1	17	F	Tamchek	Housewife	Kouakourou	Djenne	Mopti	02-Mai-2013	?	20-May-13	No	No	Non	20/05/2013	-	No	Unknown
1.2								11-Mai-2013	?						-		
1.3								24/06/2013							-		
1.4								24/06/2013							-		
1.5								25/06/2013							-		
1.6								28/06/2013							-		
. .				Animal									. .	- 10 0 11 0			
2.1	30	М	Tamachek	breeder	Iclahane	Kidal	Kidal	10-May-13	10-May-13	30-May-13	No	No	Oui	5/30/13		No	Agabo
2.2								29-May-13									
2.3								30-May-13									
				Animal													
3.1	28	Μ	Arabe	breeder	Etambar	Kidal	Kidal	11-May-13	31-May-13	31-May-13	No	No	Oui	5/31/13		No	Agabo
3.2								31-May-13									Agabo
3.3								31-May-13									
3.4								31-May-13									
3.5								31-May-13									
4.1	20	F	Arabe	Housewife	Etambar	Kidal	Kidal	1-Jun-13	1-Jun-13	1-Jun-13	Yes	No	No	5/31/13		Yes1-JuBYesb	0





IN BRIEF

Sudan reported a case of Guinea worm disease in a 35 year old woman at Kafia Kingi village in El Radom Locality of South Darfur State. These was detected by vaccinators for the polio eradication campaign in June. The patient claimsave contracted her infection about three hours walk from Kafia Kingi village, near theorder with the Republic of South Sudan at a water source reportedly used be opple from many different areas, allegedly including soldiers from the [South] Sudan Peoplesiberation Army (SSPLA). The vorm specimen was confirmed by the WHO Collaborating Centre at CDC, Atlanta *Dasmedinensis*. The actual source of infection is still unknown. Howeer, the woman reported have infected. The area is on the border between Sudan and South Sudan anenditestoced. The investigation of this case is ongoing.

COUNTRIES WITH ENDEMIC					NUMB	ER OF CASES	CONTAINED / N	UMBER OF CAS	SES REPORTE	D				% CONT.
TRANSMISSION														
	0 / ₀	¹ / ₂	¹ / ₄	¹⁸ / ₂₅	19 _/ 24	¹³ / 19	⁸ /13	⁵ / ₉	/	/	/	/	⁶⁵ / ₉₆	68
CHAD	°, ₀	°, °	°/ ₀	³ / ₃	¹ / ₁	0 _/ 1	² / ₂	¹ / ₁	/	/	/	/	7/8	88
MALI	°, ₀	°, ₀	° _{/0}	°, °	⁰ / ₃	1 _{/1}	0,0	°/ ₀	/	/	/	/	¹ / ₄	25
ETHIOPIA	°, ₀	° _{/0}	° _{/0}	⁰ / ₁	³ / ₄	0 _/ 1	⁰ / ₀	° _{/0}	/	/	/	/	³ / ₆	50
TOTAL*	0/0	¹ / ₂	¹ / ₄	²¹ / ₂₉	²³ / ₃₂	¹⁴ / ₂₂	¹⁰ /15	⁶ /10	°/ ₀	⁰ / ₀	0/0	⁰ / ₀	76 _/ 114	67
% CONTAINED		50	25	72	72	64	67	60					67	

Number of Cases Contained and Number Reported by Month during 2013*

(Countries arranged in descending order of cases in 2012)

*Provisional

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

Cells shaded in yellow denote months when transmission of GWD from one or more cases was not contained.

Beginning in April 2012 reports include only Kayes, Kouliokoro, Segou, Sikasso, Mopti Regions; the GWEP is not currendinal pertatmbuktu, Kidal, and Gao Regions.

COUNTRIES WITH ENDEMIC					NUMBI	ER OF CASES	CONTAINED / N	JMBER OF CA	SES REPORTED)				% CONT.
TRANSMISSION	JANUARY	FEBRUARY	MARCH	APRIL	MAY	JUNE	JULY	AUGUST	SEPTEMBER	OCTOBER	NOVEMBER		R TOTAL*	
SOUTH SUDAN	² /2	³ / ₄	³⁷ / ₅₅	⁵⁰ /80	⁷⁹ / 125	⁸⁴ /123	45 _/ 69	¹⁴ / ₂₇	¹⁰ / ₁₇	⁹ / ₁₄	² / ₄	¹ / ₁	³³⁶ / ₅₂₁	64
MALI^						¹ / ₁	⁰ / ₃		³ / ₃				⁴ / ₇	57
CHAD						⁰ / ₂	⁰ /1	² / ₄	¹ / ₂	¹ / ₁			⁴ / ₁₀	40
ETHIOPIA				⁰ /1	¹ /1			¹ / ₁				⁰ / ₁	² / ₄	50
TOTAL*	² / ₂	³ / ₄	³⁷ / ₅₅	⁵⁰ /81	⁸⁰ / 126	⁸⁵ /126	45 _/ 73	17 _{/32}	¹⁴ / ₂₂	¹⁰ /15	² / ₄	1 _{/2}	³⁴⁶ / ₅₄₂	64
% CONTAINED	100	75	67	62	63	67	62	53	64	67	50	50	64	#DIV/0!

Number of Cases Contained and Number Reported by Month during 2012* (Countries arranged in descending order of cases in 2011)

*Provisional

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

Beginning in April 2012 reports include only Kayes, Kouliokoro, Segou, Sikasso, Mopti Regions; the GWEP is not currently adperatmbuktu, Kidal, and Gao Regions.

^ Three Malian residents, confirmed as cases of GWD in Niger during September 2012 (shown in italics), are included ina Mail the option of these cases

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compound in Lienthom for observation whilst was on medication, and she agreed. There was no possibility to take AMN to the SSGWEP casetainment center, as it is in Dhok Pan Magot village, and the grandmother believes there is raccagainst her and her family in that village. AMN stayed happily on our compound, but on 22 June 2013 his grandmother returned saying that she wished to take the biogymediately for an ioision of the swelling, because she had had a dream. We again persuaded her to wait ant lifetshim complete the course of antibiotic. After some time, she relented and said sbelow return on Monday, 24 Ju

RECENT PUBLICATIONS

Sessou, A. "Le Tchad S'est Dote Dun Plan S'action De Surveillance Activeriler D'Afrique. Dec. & Jan. 2013.

Siddall M, 2013. An extinction to celebrate. The New Yor (Belog, July 29).

World Health Organization, 2013. Monthly report dracunculiasis cases, January-June 2013. Wkly Epidemiol Re@8:365-380.

World Health Organization, 2013. Monthly reporn dracunculiasis cases, January-May 2013. Wkly Epidemiol Rec88:321-336

PATRICK O'MARA, GUINEA WORM WARRIOR (1930 - 2013)

We report with great sadness and regret the non-strick (Pat) O'Mara of Atlanta on Saturday September 14, 2013 in Ft. Myers, FlorAdteer his retirement from the US Air Force, Pat began work at the Centers for Disease Cloantrod Prevention as Public Health Advisor with the CDC's Venereal Disease Croont Program in 1960, and served there for 28 years in various capacities in the control and prevention of comroadole diseases. After his retirement from CDC, Pat's commitment to public health led httomwork with South Floida's immigrant health