



Date: April 10, 2006



From: WHO Collaborating Center for
Research, Training and Eradication of Dracunculiasis

Subject: GUINEA WORM WRAP-UP #161

To: Addressees

Daily Case Detection; Aggressive Containment!

ELEVENTH MEETING OF PROGRAM MANAGERS CONVENES IN NIAMEY

The Eleventh Meeting of Program Managers of Guinea Worm Eradication Programs convened in Niamey, Niger on March 29-31, 2006. This meeting of representatives of the nine remaining endemic countries occurred nearly twenty years after the delegates from 20 endemic countries met at the First African Regional Conference on Dracunculiasis Eradication in the same building, the *Palais des Congres*, in July 1986. The Niger minister of health, Dr. Ary Ibrahim, opened the meeting by noting the priority that the Government of Niger places on eradicating Guinea Worm disease. This meeting focused on the need to stop transmission quickly in the remaining endemic countries, which was signed by ministers of health from all the remaining endemic countries in May 2004, the participants recommended that

- **Cote d'Ivoire, Burkina Faso, Togo and Nigeria** should interrupt transmission of dracunculiasis by the end of 2006;
- **Ethiopia, Niger and Mali** should stop transmission in 2006 or 2007;
- **Ghana** should stop transmission in 2007 or 2008; and
- **Sudan** should stop transmission by the end of 2009.

The numbers of endemic cases reported in these nine countries annually in recent years are summarized in Figure 3 & 4, and the statistical data reported at this meeting are summarized in Table 3. Among the important highlights of this meeting was the progress reported in investigation of rumors and establishment of "rumor registers", establishment of national committees to oversee pre-certification activities, and establishment of cash rewards for reporting of cases (Table 1). An example of a rumor investigation ledger used in Nigeria is shown in Table 6.

Niger's President Tandja Mamadou received a delegation that included his minister of health and representatives from Niger's Guinea Worm Eradication Program, WHO, UNICEF, Health and Development International, and The Carter Center, on the final day of the meeting. The president allocated additional funds for broadcasting health education messages on radio and television, and the meeting with the president was followed immediately by a radio and television interview of Dr. Donald Hopkins of The Carter Center, who served as spokesman for the group. Whereas the first African conference on dracunculiasis eradication at Niamey twenty years ago was marked by a severe drought that reduced the Niger River to little more than a two meter wide stream at Niamey, participants this year observed a solar eclipse that occurred on the first day of the meeting.

Strong Leadership!

Table 1

Status by Country During 2005 of Numbers of Rumors Investigated and Cases of Dracunculiasis Confirmed, Establishment of a National Pre-Certification Committee, a Cash Reward for Reporting and of a Rumor Registry

| Country | # rumors investigated | # GW cases confirmed | National Pre-certification Committee | Cash Reward | Rumor Registry |
|---------------|-----------------------|----------------------|--------------------------------------|-------------|----------------|
| Sudan | 4 | 0 | | | |
| Ghana | ?? | ?? | | | |
| Mali | 97 | 5 | ?? | + | + |
| Niger | 164 | 28 | ?? | + | + |
| Nigeria | 27 | 1 | 2005 | + | + |
| Togo | 10 | 0 | 2003 | - | + |
| Burkina Faso | 28 | 0 | ?? | - | + |
| Cote d'Ivoire | 7 | 0 | Year? | | + |
| Ethiopia | 76 | 31 | | + | + |
| TOTAL | 413 | 65 | | | |

WHO PREPARES TO CERTIFY MORE COUNTRIES



Dr. Dirk Engels of WHO chaired the 52nd Meeting of the International Coordinating Group for Dracunculiasis Eradication that met immediately after closure of the Program Managers Meeting on March 31st. Participants included representatives of The Carter Center, UNICEF, WHO, Health and Development International, and Vestergaard Frandsen, as well as delegates from Niger and Ethiopian Guinea Worm Eradication Programs. Drs. Engels and Ahmed Tayeh of WHO announced that WHO conducted a pre-certification visit to Mauritania in March 2006, which included visits to 40 villages and eleven health centers in three formerly endemic regions. A similar visit to Benin is scheduled to take place on May 8 – 20, 2006, following a visit to Uganda in November 2005. Official International Certification Teams are also scheduled to visit Chad, Central African Republic (CAR), Cameroon, Liberia, Sierra Leone and Guinea-Conakry over the next several months. Current plans are for the International Commission for the Certification of Dracunculiasis Eradication to consider the certification of Cameroon, CAR, Chad, Guinea-Conakry, Liberia and Sierra Leone at its sixth meeting in Geneva on March 5-7, 2007, with Benin, Kenya and Mauritania to be considered in early 2008.

Programs are advised that WHO funding for dracunculiasis activities, including potential funding for surveillance in formerly and non-endemic areas and for pre-certification activities, has been decentralized, so that requests for any such funding from WHO should be directed by ministries of health to the WHO office in country and not to the WHO's Geneva headquarters. GWEPs are advised to discuss such proposals with the intersectoral committees in their country. Preparations for an exhibit on the status of the global Dracunculiasis Eradication Program at this year's World Health Assembly in late May were also discussed at the interagency meeting.

Investigate Rumors Immediately!

SEVEN OF NINE ENDEMIC COUNTRIES REPORT ZERO CASES OF DRACUNCULIASIS DURING MARCH 2006!!

This is the first time since the beginning of the global campaign that the majority of endemic countries i.e., Burkina Faso, Cote d'Ivoire, Ethiopia, Mali, Niger, Nigeria, and Togo simultaneously report zero cases of dracunculiasis for the same month (Table 5). Congratulations to all!!

GHANA: CASES UP 12% IN 2006

TIME REMAINING TO ERADICATE DRACUNCULIASIS FROM GHANA

| 2005 | | 2006 | | | | | | | | | | 2007 | | | |
|------|-----|------|-----|---------------------|-----|-----|-----|-----|------|-----|-----|------|-----|-----|------------------------|
| Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sept | Oct | Nov | Dec | Jan | Feb | Mar |
| | | | | ↑ | | | | | | | | | | | ↑ |
| | | | | DATE NOW | | | | | | | | | | | TARGET DATE |

Ghana has reported a provisional total of 1,598 cases of dracunculiasis in January-March 2006, which is an increase of 12% compared to the 1,429 cases reported during the same period of 2005. Of the 3,981 cases reported in Ghana in 2005, 51% were reported from only four districts, 69% were reported from the top seven districts, and 95% were from only 15 of Ghana's 110 districts. This comes at a time when all three of Ghana's immediate neighbors (Burkina Faso, Cote d'Ivoire, Togo) are on track to possibly stop transmission of dracunculiasis this year, and will become increasingly concerned about the relatively large numbers of cases still occurring in Ghana and putting them at risk of imported cases.

Ghana's program has finally begun to record the status of interventions monthly, data that we shall convey in the *Guinea Worm Wrap-Up* regularly from now on (Table 2). So far, the latter data unfortunately do not yet reflect improvements in case containment rates or in safe water supply to endemic villages. On the contrary, reported rates of case containment have declined from 2004 (66%) to 2005 (60%) to 2006 (61%), and so has the reported percentage of endemic villages with at least one or more sources of safe drinking water (46%, 39%, 35%). This may be a reporting artifact, but if so, the reporting deficiency must be corrected quickly, so that the program knows the true status of these key indicators each month, and can act to improve them where necessary. The Government of Ghana has allocated the equivalent of \$500,000 to its Ministry of Health and Ghana Health Services for the Guinea Worm Eradication Program in 2006, and it is hoped that these funds will be brought to bear in Ghana's GW program effectively. Only eleven months remain to the Golden Jubilee target date of March 6, 2007 for interrupting transmission of Guinea worm disease in Ghana!

Table 2

Ghana GWEP Status of Major Indicators in 2005 and by Month, During 2006

| | 2005 | Jan '06 | Feb '06 |
|---|-------------|------------|------------|
| No. cases | 3981 | 608 | 584 |
| % Cases contained | 60% | 54% | 50% |
| No. Endemic villages | 422 | 422 | 475 |
| % EVs reporting | 100% | 74% | 89% |
| % EVs with 100% h/h filter coverage | 89% | 37% | 79% |
| % EVs with health education activities | 100% | 59% | 89% |
| % EVs with 1+ safe water | 39% | 37% | 34% |
| % EVs treated with ABATE | 56% | 14% | 21% |

ABATE Effectively!

Table 3

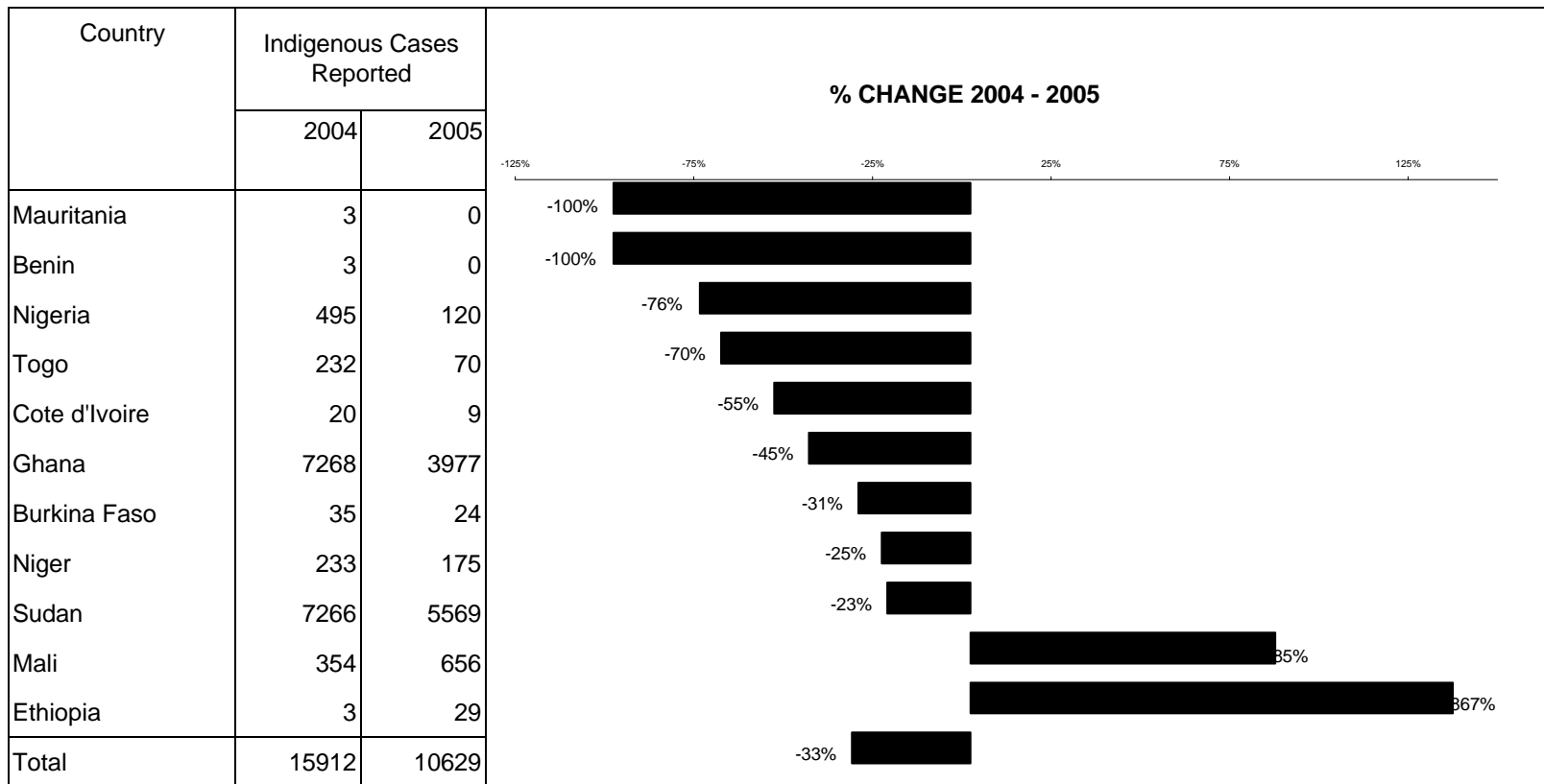
Number of Cases Contained and Number Reported by Month during 2005
(Countries arranged in descending order of cases in 2004)

| COUNTRIES REPORTING CASES | NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED | | | | | | | | | | | | | % |
|------------------------------|--|-----------|-----------|-----------|------------|------------|-----------|-----------|-----------|-----------|-----------|-----------|--------------|-----|
| | JANUARY | FEBRUARY | MARCH | APRIL | MAY | JUNE | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | TOTAL* | |
| GHANA | 363 / 553 | 345 / 483 | 281 / 395 | 261 / 397 | 337 / 458 | 274 / 383 | 105 / 162 | 37 / 60 | 30 / 56 | 83 / 224 | 146 / 355 | 143 / 455 | 2405 / 3981 | 60 |
| SUDAN | 0 / 66 | 2 / 102 | 4 / 169 | 21 / 146 | 12 / 1606 | 47 / 1442 | 36 / 542 | 45 / 499 | 27 / 324 | 4 / 410 | 0 / 262 | 0 / 1 | 198 / 5569 | 4 |
| NIGERIA | 25 / 36 | 13 / 17 | 9 / 13 | 11 / 29 | 7 / 9 | 4 / 6 | 4 / 5 | 1 / 1 | 0 / 0 | 0 / 0 | 2 / 2 | 2 / 2 | 78 / 120 | 65 |
| MALI | 3 / 4 | 1 / 1 | 1 / 1 | 1 / 1 | 22 / 25 | 25 / 25 | 43 / 86 | 98 / 132 | 163 / 203 | 94 / 116 | 47 / 52 | 10 / 13 | 508 / 659 | 77 |
| NIGER | 2 / 2 | 4 / 4 | 1 / 3 | 1 / 2 | 1 / 3 | 3 / 3 | 5 / 7 | 22 / 23 | 19 / 19 | 41 / 43 | 50 / 59 | 14 / 15 | 163 / 183 | 89 |
| TOGO | 11 / 11 | 1 / 4 | 2 / 2 | 3 / 3 | 16 / 19 | 7 / 8 | 5 / 6 | 1 / 4 | 0 / 1 | 1 / 2 | 4 / 4 | 7 / 9 | 58 / 73 | 79 |
| BURKINA FASO | 0 / 0 | 0 / 0 | 0 / 0 | 1 / 1 | 0 / 0 | 3 / 3 | 0 / 5 | 13 / 15 | 0 / 0 | 1 / 1 | 3 / 4 | 0 / 1 | 21 / 30 | 70 |
| COTE D'IVOIRE | 0 / 0 | 0 / 0 | 1 / 1 | 0 / 0 | 0 / 0 | 0 / 3 | 1 / 4 | 1 / 1 | 0 / 0 | 1 / 1 | 0 / 0 | 0 / 0 | 4 / 10 | 40 |
| BENIN | 0 / 0 | 0 / 0 | 1 / 1 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 1 / 1 | 100 |
| ETHIOPIA | 2 / 2 | 0 / 0 | 0 / 0 | 3 / 3 | 7 / 7 | 16 / 20 | 2 / 2 | 2 / 3 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 32 / 37 | 86 |
| MAURITANIA | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 |
| UGANDA | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 4 / 4 | 1 / 1 | 2 / 2 | 2 / 2 | 0 / 0 | 0 / 0 | 0 / 0 | 9 / 9 | 100 |
| KENYA | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 2 / 2 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 2 / 2 | 100 |
| TOTAL* | 406 / 674 | 366 / 611 | 300 / 585 | 302 / 582 | 402 / 2127 | 385 / 1899 | 202 / 820 | 222 / 740 | 241 / 605 | 225 / 797 | 252 / 738 | 176 / 496 | 3479 / 10674 | 33 |
| % CONTAINED | 60 | 60 | 51 | 52 | 19 | 20 | 25 | 30 | 40 | 28 | 34 | 35 | 33 | |

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

Figure 1

Number of Indigenous Cases Reported During 2004 and 2005, and Percent Change in Cases Reported



Overall % change outside Sudan = -41%

Table 4

Dracunculiasis Eradication Campaign: Status of Interventions during 2005

| Country | Number of reported cases (indigenous) in 2005 | Number of reported cases (imported) in 2005* | % of all cases reported that were contained during 2005 | No. of villages/localities where interventions were applied in 2004 and 2005 | % Change in cases where interventions were applied in 2004-2005 | Villages/Localities | | | | | | | |
|---------------|---|--|---|--|---|---------------------------------|-----------------------------------|--------------------------------|----------------------|-----------------------------------|----------------|---|------------------------------|
| | | | | | | No. reporting one or more cases | No. reporting only imported cases | No. reporting indigenous cases | % reporting monthly^ | % with filters in all households^ | % using Abate^ | % with one or more sources of safe water^ | % provided health education^ |
| Sudan | 5,569 | 0 | 4% | 1,085 | -23% | 1,087 | 0 | 1,085 | 51% | 30% | 2% | 27% | 78% |
| Ghana | 3,977 | 4 | 60% | 1,010 | -56% | 734 | 312 | 422 | 100% | 89% | 56% | 39% | 100% |
| Mali | 656 | 3 | 77% | 121 | 15% | 140 | 49 | 91 | 100% | 100% | 69% | 39% | 100% |
| Niger | 175 | 8 | 89% | 45 | -6% | 59 | 29 | 30 | 100% | 100% | 87% | 37% | 100% |
| Nigeria | 120 | 0 | 65% | 106 | -85% | 40 | 7 | 33 | 100% | 100% | 41% | 61% | 100% |
| Togo | 70 | 3 | 79% | 98 | -79% | 26 | 15 | 11 | 100% | 100% | 100% | 58% | 100% |
| Ethiopia | 29 | 8 | 86% | 8 | 867% | 16 | 6 | 10 | 100% | 100% | 100% | 33% | 100% |
| Burkina Faso | 24 | 6 | 70% | 34 | -70% | 12 | 8 | 4 | 100% | 80% | 90% | 80% | 100% |
| Cote d'Ivoire | 9 | 1 | 40% | 8 | -95% | 5 | 3 | 2 | 100% | 100% | 100% | 77% | 100% |
| Total | 10,629 | 33 | 33% | 2,515 | -38% | 2,119 | 429 | 1,688 | 79% | 65% | 36% | 36% | 91% |

* Uganda and Kenya (both non-endemic countries) reported 9 and 2 cases of dracunculiasis, respectively imported from Sudan, and similarly, Benin reported 1 case imported from Ghana

^ The base of the percentage is the number of villages/localities where the program applied interventions during 2004-2005

Table 5

Number of Cases Contained and Number Reported by Month during 2006*
(Countries arranged in descending order of cases in 2005)

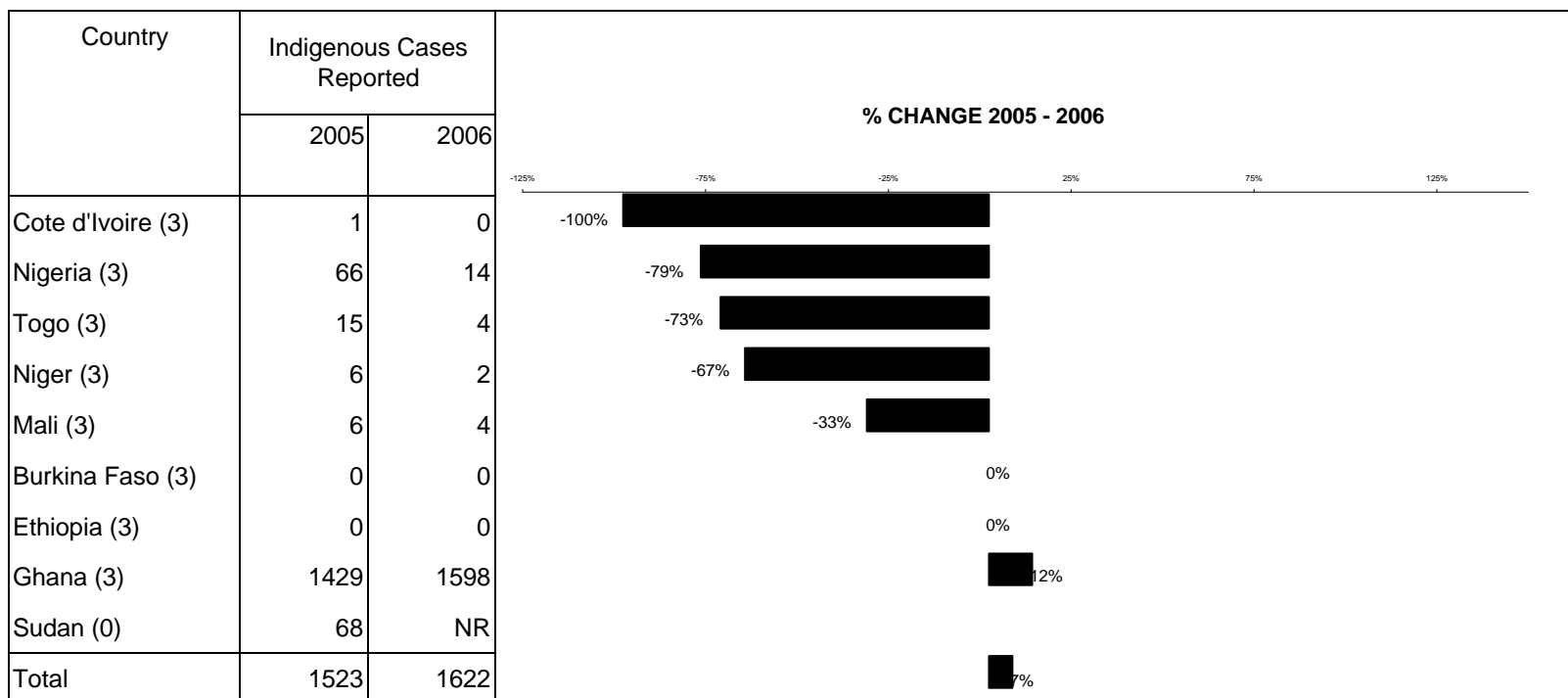
| COUNTRIES REPORTING CASES | NUMBER OF CASES CONTAINED / NUMBER OF CASES REPORTED | | | | | | | | | | | | | % CONT. |
|------------------------------|--|-----------|-----------|-------|-------|-------|-------|--------|-----------|---------|----------|----------|------------|------------|
| | JANUARY | FEBRUARY | MARCH | APRIL | MAY | JUNE | JULY | AUGUST | SEPTEMBER | OCTOBER | NOVEMBER | DECEMBER | TOTAL* | |
| SUDAN | / | / | / | / | / | / | / | / | / | / | / | / | 0 / 0 | |
| GHANA | 396 / 608 | 372 / 584 | 206 / 406 | / | / | / | / | / | / | / | / | / | 974 / 1598 | 61 |
| MALI | 3 / 3 | 1 / 1 | 0 / 1 | / | / | / | / | / | / | / | / | / | 4 / 5 | 80 |
| NIGER | 2 / 2 | 0 / 0 | 0 / 0 | / | / | / | / | / | / | / | / | / | 2 / 2 | 100 |
| NIGERIA | 0 / 0 | 10 / 14 | 0 / 0 | / | / | / | / | / | / | / | / | / | 10 / 14 | 71 |
| TOGO | 1 / 1 | 2 / 3 | 0 / 0 | / | / | / | / | / | / | / | / | / | 3 / 4 | 75 |
| BURKINA FASO | 0 / 0 | 0 / 0 | 0 / 0 | / | / | / | / | / | / | / | / | / | 0 / 0 | |
| COTE D'IVOIRE | 0 / 0 | 0 / 0 | 0 / 0 | / | / | / | / | / | / | / | / | / | 0 / 0 | |
| ETHIOPIA | 1 / 1 | 0 / 0 | 0 / 0 | / | / | / | / | / | / | / | / | / | 1 / 1 | 100 |
| TOTAL* | 403 / 615 | 385 / 602 | 206 / 407 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 0 / 0 | 994 / 1624 | 61 |
| % CONTAINED | 66 | 64 | 51 | | | | | | | | | | 61 | |

* provisional

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

Figure 2

Number of Indigenous Cases Reported During the Specified Period in 2005 and 2006*, and Percent Change in Cases Reported



(3)Indicates months for which reports were received, i.e., Jan. - Mar. 2006

* Provisional

Table 6

Nigeria Guinea Worm Eradication Program
Investigation of Rumors of Cases of Guinea Worm Disease

| Country: NIGERIA | | | | | Month/Year: MARCH 2006 | | | | | | |
|------------------|--------------------------|--------|---------------|------------------|------------------------|---------------------------|---------------------------|---------------------------------|------------------------------------|------------------------|---|
| S/N | Place of origin of Rumor | | | | Date | | | Outcomes | | | |
| | Zone | State | LGA | Village | Rumor report received | Rumor investigation begun | Rumor investigation ended | Case of GWD confirmed: (yes/no) | If GWD, was transmission contained | If not contained, why? | If not GWD, indicate conditions ailing patient which led to |
| 1 | NC | Benue | Obi | Objago | 6-Mar-06 | 6-Mar-06 | 13-Mar-06 | No | N/A | N/A | boil |
| 2 | NC | Benue | Obi | Igwe II | 6-Mar-06 | 6-Mar-06 | 13-Mar-06 | No | N/A | N/A | Swelling |
| 3 | NC | Benue | Oju | Eka | 6-Mar-06 | 7-Mar-06 | 18-Mar-06 | No | N/A | N/A | Infected ulcer |
| 4 | NC | Benue | Oju | Ameka | 6-Mar-06 | 8-Mar-06 | 18-Mar-06 | No | N/A | N/A | Single boil |
| 5 | NC | Benue | Oju | Okonche | 12-Mar-06 | 13-Mar-06 | 13-Mar-06 | No | N/A | N/A | Scare |
| 6 | NC | Benue | Oju | Oye Ibele | 12-Mar-06 | 13-Mar-06 | 13-Mar-06 | No | N/A | N/A | boil |
| 7 | NC | Benue | Obi | Igwe II | 16-Mar-06 | 16-Mar-06 | 20-Mar-06 | No | N/A | N/A | Ulcer |
| 8 | NE | Borno | Bama | Bama Town | 4-Mar-06 | 4-Mar-06 | 4-Mar-06 | No | N/A | N/A | Internal pains |
| 9 | NE | Borno | Kaga | Ngamdu | 10-Mar-06 | 10-Mar-06 | 16-Mar-06 | No | N/A | N/A | Calsified worm |
| 10 | NE | Borno | Abadam | M/Faturi | 20-Mar-06 | 20-Mar-06 | 22-Mar-06 | No | N/A | N/A | Falsehood |
| 11 | SE | Ebonyi | Ebonyi | Okwerike Ishieke | 15-Mar-06 | 15-Mar-06 | 15-Mar-06 | No | N/A | N/A | wonud |
| 12 | SW | OYO | IBARAPA NORTH | GAATEMIDIRE | 6-Mar-06 | 6-Mar-06 | 6-Mar-06 | No | N/A | N/A | wonud |
| 13 | SW | OYO | IBARAPA NORTH | A.U.D | 10-Mar-06 | 10-Mar-06 | 10-Mar-06 | No | N/A | N/A | wonud |
| 14 | SW | OYO | IBARAPA NORTH | OMINIGBO | 15-Mar-06 | 15-Mar-06 | 15-Mar-06 | No | N/A | N/A | wonud |
| 15 | SW | OYO | IBARAPA NORTH | OKE-OLAI | 16-Mar-06 | 16-Mar-06 | 16-Mar-06 | No | N/A | N/A | Swelling |
| 16 | SW | OYO | IDDO LGA | AKUFO | 30-Mar-06 | 30-Mar-06 | 30-Mar-06 | No | N/A | N/A | Swelling |

MASSIVE PUBLIC “APPLAUSE” FOR BENIN AND UGANDA

During one of the mailings to supporters of The Carter Center late last year, the director of that activity highlighted Benin and Uganda as two countries that recently broke transmission of Guinea worm disease. She also mentioned that the heads of state of those two countries might like to receive some congratulations and encouragement to remain vigilant until the disease is eradicated everywhere. The response was overwhelming: at last count in January 2006, The Carter Center had received 10,450 letters for the president of Benin, and 10,300 letters for the President of Uganda! The boxes of letters, which weigh 42 pounds (about 20 kilos) each, will be mailed to the respective presidents this month.

Forecasting!

IN BRIEF:

Burkina Faso had 8 uncontained cases in 6 villages in 2005. Zero cases reported during January, February and March 2006.

Cote d’Ivoire. The minister of health visited the endemic village of Arrah during the national Guinea Worm Day celebration in March 2006. He was accompanied by the resident representatives of UNICEF and WHO. Zero cases reported during the last 7 consecutive months!

Nigeria has reported no uncontained cases between August 2005 and January 2006. The four officially uncontained cases that occurred in one village in February 2006 were in fact surrounded by several interventions, including ABATE® larviciding. Nigerian health authorities, however, are not prepared to maintain adequate surveillance for dracunculiasis in the vast areas of the country that are now free of the disease, although the reward for reporting of a case is widely publicized. Nigeria reported zero cases of GWD during March 2006, the fourth time since August 2005 that zero cases have been reported nationwide.

Sudan reported a total of four imported cases in the northern states during 2005.

The governments of Cote d’Ivoire, Ethiopia, Mali and Niger have allocated the equivalents of \$188,000; \$3,496; \$16,000; and \$53,000 respectively, for their national Guinea Worm Eradication Programs, according to data presented at the Program Managers meeting in Niamey.

Diversified IEC!

STATUS OF GATES / UNICEF WATER SUPPLY PROJECTS

Mali. 11 of 14 wells completed, covering 138 of the 649 cases reported in Mali in 2005. Drilling teams are in the field for the remaining wells.

Niger. 7 of 12 wells completed, covering 31 of 183 cases reported in Niger in 2005.

Togo. 14 of 14 new wells successfully drilled, but not yet fitted with hand pumps. Scheduled to be fitted with hand pumps by mid-April 2006. When completed, these wells will cover 28 of the 70 cases reported in Togo in 2005.

Figure 3 Number of Cases of Dracunculiasis Reported: 2000 - 2005

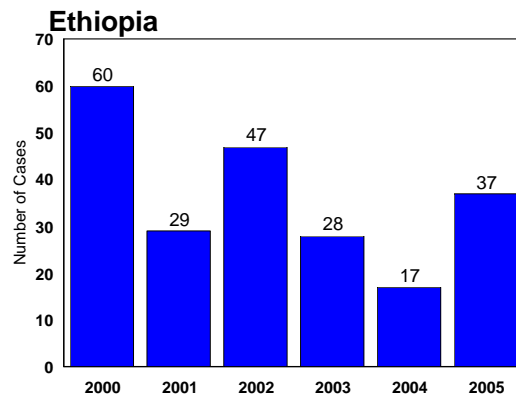
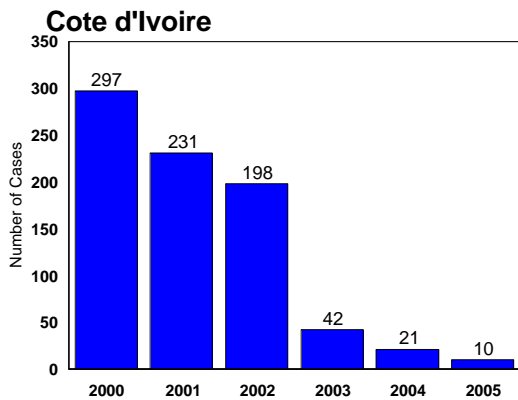
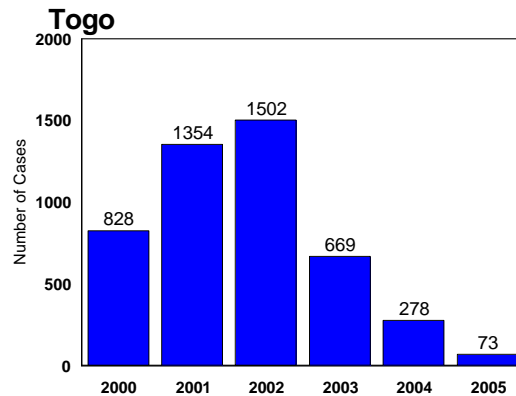
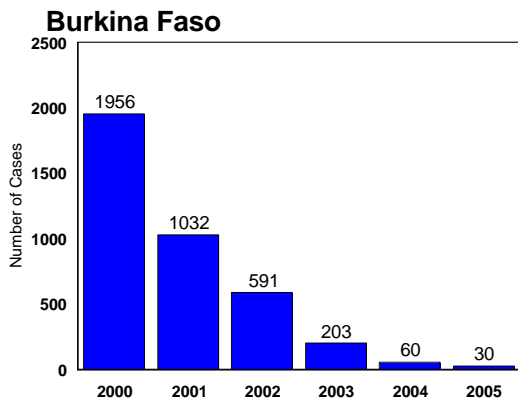
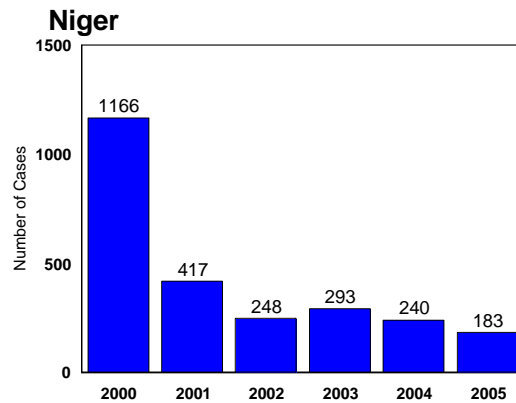
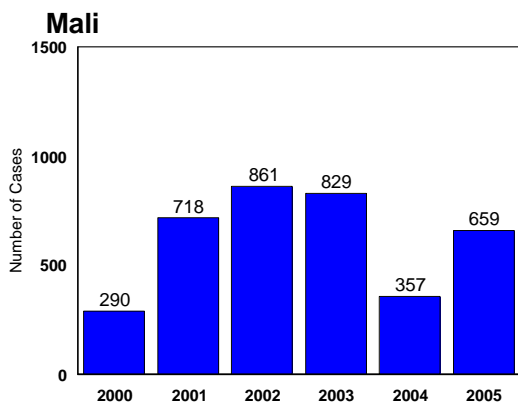
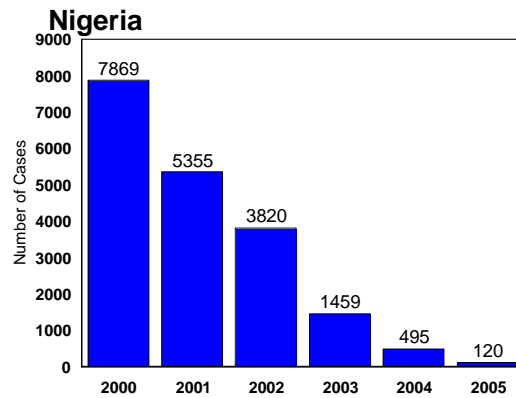
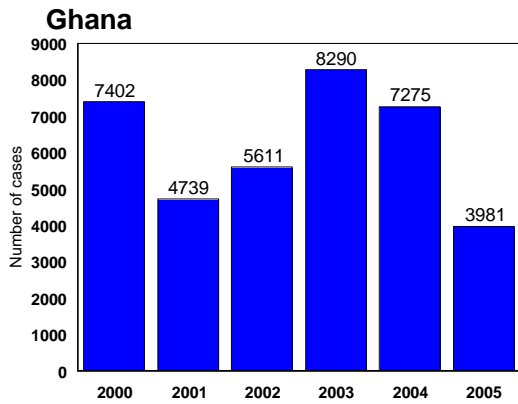
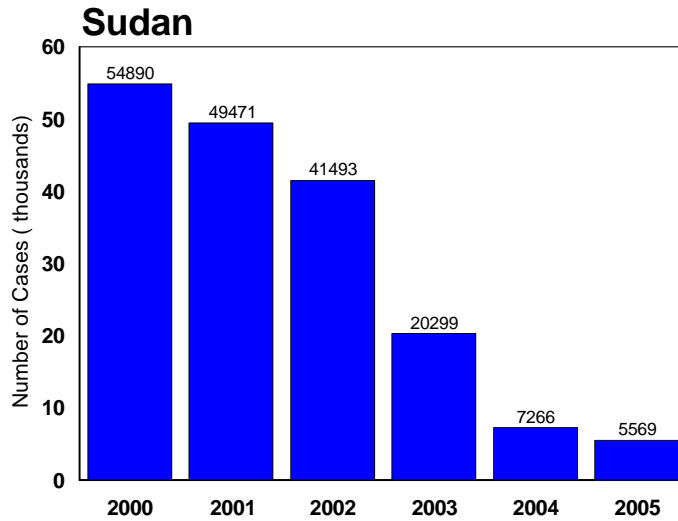


Figure 4

Number of Cases of Dracunculiasis Reported: 2000 - 2005



2006 FRANCOPHONE PROGRAM REVIEW

This year's Program Review for the remaining endemic francophone countries will be held at The Carter Center on November 14 -15, 2006.

*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. Sharon Roy, 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: 770-488-7761. The GW Wrap-Up web location is <http://www.cdc.gov/ncidod/dpd/parasites/guineaworm/default.htm>.



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