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

Memorandum

Date: January 30, 2023

From: WHO Collaborating Center for Dracunculiasis Eradication, CDC

Subject: GUINEA WORM WRAP-UP #295

To: Addressees

With public sentiment, nothing can fail; without it, nothing can succeed.

Abraham Lincoln

PUBLIC GW ERADICATION ADVOCACY BY MINISTERS OF HEALTH, 2019-2022

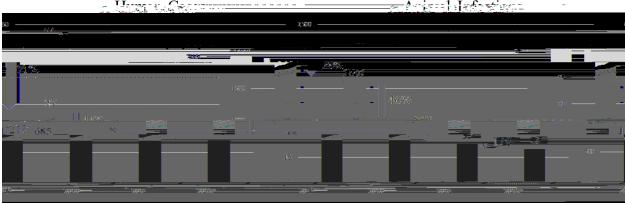


Public support of national Guinea Worm Eradication Programs by ministers of health motivates their Guinea worm team and partners, incentivizes other ministry of health and government officials, and encourages people at risk to work with the program and report Guinea worm infections. The Covid-19 pandemic severely constrained public activities in 2020-2022, but that is

expected to be much less in 2023. Strong public advocacy by ministers of health in the remaining endemic countries is very important and helpful at this final challenging stage of the campaign. At the March 2022 Abu Dhabi Guinea Worm Summit's conclusion, the ministers, representatives, and partners each declared their intent to ensure "Bold involvement of political leaders, including heads of state, to lead community-targeted advocacy visits at least annually". The list above shows that most programs benefited from some ministerial public advocacy in recent years despite Covid-19. To reduce Guinea worm faster (Figure 1), more public advocacy, especially ministerial visits to endemic villages and program reviews, is needed in 2023. We shall emphasize such events this year in the *Guinea Worm Wrap-Up*.

Figure 1

Global Guinea Worm Infections, 2019-2022*



*Provisional

Table 1 Guinea worn	n infections	s, 2022 (provisional)
	<u>lumans</u>	Animals
Chad	6	606
Mali	0	41
Cameroon	0	27*
Angola	0	7
South Sudan	5	1
Ethiopia	1	3
Central African Rep	. 1*	0
TOTAL	13	685
*Apparently imported fr	om Chad	

AND HUMANS

Chad's Guinea Worm Eradication Program (CGWEP) has reduced the number of reported Guinea worm infections in dogs dramatically from a high of 1,935 infections in 2019 to a provisional total of 521 infections in 2022 (Figure 2). Chad reduced its number of reported infected dogs by 32%, from 767 to 521 between 2021 and 2022, and the number of reported human cases by 25%, from 8 to 6.

Evidence increasingly supports the hypothesis that the dog infections and few human cases in Chad are mainly transmitted by eating raw or poorly cooked fish, except for a common source water borne outbreak at Bogam in 2019, and that the numerous dog infections are driving continued infections of humans. The peak in reported dog infections occurred in 2019 after the program gradually extended active surveillance to all endemic areas following discovery of infections in dogs in 2012. Intensified vector control and proactive tethering have helped reduce Chad's dog infections by 73% between 2019 (1,935) and 2022 (521) (Figure 2). Guinea worm cases in humans, however, have remained steady during the past decade, averaging 13.4 cases annually in 2013-2017 (range: 9-16) vs. 13.8 cases annually in 2018-2022 (range: 6-26 provisionally; excluding 22 cases in the Bogam outbreak).

The reasons for the discordance in reduction of human and dog infections in Chad are not clear. Cases persist in humans despite the CGWEP urging people in endemic areas to prevent *exposure* to Guinea worm infection by cooking fish and other aquatic animals thoroughly and by filtering unsafe drinking water, while proactive tethering of dogs and vector control with Abate reduce *contamination* of water sources for humans as well as dogs. The 69 human cases in Chad in 2018-2022 were mostly male (65%); adult or near-adult (67% 15 years old or more; 25% 5-14 years old; 8% 0-4 years old); and included a normal spectrum of occupations (farming, fishing, hunting, housewife, student); but they were scattered in fifty different villages and reflected Chad's extreme cultural diversity by comprising thirty-five different ethnic groups.

Region on December 6-10, 2022, accompanied by Mr. Sadi Moussa and Ms. Ariane Ngo Bea Hob. They visited Amtiman and Aboudeia districts and made similar recommendations as those cited above, as well as urging increased involvement of traditional authorities in the Guinea worm

ETHIOPIA: RECORD LOW INFECTIONS STATE MINISTER, GAMBELLA REGIONAL VICE-PRESIDENT OPEN PROGRAM REVIEW

The Ethiopian Dracunculiasis Eradication Program (EDEP) convened its 27th Annual Review Meeting in Gambella on January 24

began trapping and inspecting baboons for study in 2018. Construction of a borehole well at Duli Farm, which was the site of a water-borne common-source outbreak of cases in humans in April 2020, has been delayed because of heavy rains and flooding.

CENTRAL AFRICAN REPUBLIC

The Central African Republic has reported one confirmed case of Guinea worm disease in Gordil village of Vakaga district, about 113 km from the border with Chad's Haraze district. The patient, a 45-year-old female farmer of Goula ethnicity, was detected and admitted to Birao district hospital after her worm emerged: July 25, 2022.

DEFINITION OF A PRESUMED SOURCE OF GUINEA WORM INFECTION

A presumed source/

RECENT PUBLICATIONS

World Health Organization, 2023. Monthly report on dracunculiasis cases, January-November 2022. Wkly Epidemiol Rec 98(4):50-51.
Note to contributors: Submit your contributions via email to Dr. Sharon Roy (gwwrapup@cdc.gov) or to Adam Weiss
(adam.weiss@cartercenter.org), by the end of the month for publication in the following month's issue. Contributors to this issue were: the national Guinea Worm Eradication Programs, Dr. Donald Hopkins and Adam Weiss of The Carter Center, Dr. Sharon Roy of CDC, and Dr. Dieudonné Sankara of WHO.
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Back issues are also available on the Carter Center web site in English, French, and Portuguese and are located at http://www.cartercenter.org/news/publications/health/guinea_worm_wrapup_english.html .

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