

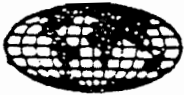
**Memorandum**

Date March 15, 1986

From WHO Collaborating Centre for
Research, Training, and Control of Dracunculiasis

Subject **GUINEAWORM WRAP-UP #11**

To Addressees



INTERNATIONAL ACTIVITIES

AFRICAN REGIONAL CONFERENCE ON DRACUNCULIASIS POSTPONED

The African Regional Conference on Dracunculiasis, which was scheduled to be held February 17-20, 1986 at Niamey, Niger, has been postponed to allow more time for preparation and response from the invited countries.

This conference has been re-scheduled for
1-3 July 1986 at Niamey, Niger.

The principal co-sponsors of the conference, in addition to WHO, are the Carnegie Corporation of New York, the United States Agency for International Development (USAID), and USA for Africa.

This abbreviated issue of Guineaworm Wrap-Up is being sent in order to inform readers of these new dates as quickly as possible.

IMPACT ISSUES FACT SHEET ON DRACUNCULIASIS

IMPACT, the UNDP-associated international initiative against avoidable disablement, issued a two-page "Fact Sheet" on dracunculiasis, which is the ninth in its series, late in 1985. The fact sheet is available in English and in French, and has already been introduced in IMPACT's promotional efforts in Kenya, Guinea, and Mali. Contact: Director Melissa Wells, UNDP Palais des Nations, CH 1211 Geneva 10, Switzerland.

POTENTIAL SOURCE OF FUNDING

Support for studies on dracunculiasis in the social and economic area, such as agricultural impact and water contact studies, is potentially available from the Social and Economic Research Unit, Special Programme for Research and Training in Tropical Diseases, WHO, 1211 Geneva 27, Switzerland. The main considerations for such support, in addition to scientific feasibility, are that the investigators be based in national institutions and come from the country in which they are working. Anybody wishing for further information should write to the Director of the Special Programme.



R E C E N T P U B L I C A T I O N S

Kassambra, M., 1985. The Dogon people fight endemic disease. World Health November: 28-29. [A brief account of efforts to control onchocerciasis, schistosomiasis, dracunculiasis, and malaria on the Dogon plateau of Mali as part of a primary health care program. The author cited the village of Pelou where primary health care workers reduced the prevalence of guinea worm disease by 87% (from 150 victims to 20) in one year by helping the villagers treat their wells and ponds.]

Kobayashi, Akio et al, 1986. Human case of dracunculiasis in Japan. Am. J. Trop. Med. Hyg. 35(1):159-161.

Lores, E.M. et al, 1985. Temephos residues in stagnant ponds after mosquito larvicide applications by helicopter. Bull. Environ. Contam. Toxicol. 33:308-313.

Nóji, E.K., 1985. Aseptic knee effusion associated with calcified guinea worms. Ann. Emerg. Med. 14:1119-1121.

Watts, S., 1986. The crippling worm. Geographical Magazine February: 54-55.

World Health Organization, 1985. Nigeria steps up measures against dracunculiasis. WHO Chronicle 39:182-184.

World Health Organization, 1986. Dracunculiasis: Global surveillance summary - 1985. Wkly. Epidem. Rec. 61:29-32.

New EDITOR: Beginning with Guineaworm Wrap-Up #9, the editor is Virginia G. Sturwold, Ed.D. Readers are encouraged to send newsworthy items to her at: Centers for Disease Control, International Health Program Office, Building 14, B-7, Atlanta, Georgia, 30333, U.S.A.



CDC is the WHO Collaborating Centre for Research, Training, and Control of Dracunculiasis.