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Ethiopian dracunculiasis eradication, the end game challenges, 2015

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Background: Since a global campaign to eradicate dracunculiasis (Guinea worm disease) was begun in 1986, the number of cases has decreased from 3.5 million to 15 in 2015. The revised 2009 target date for eradication has passed. The disease transmission is currently limited to only South Sudan, Mali, Chad, and Ethiopia. Ethiopia started the campaign in 1994 and has decreased cases from 1252 to 2 in 2015. We analyzed surveillance data to better understand epidemiology of the disease and determine what sustaining transmission in Ethiopia.

Methods & Materials: Descriptive analysis of Guinea worm (GW) surveillance data from health facilities to Ministry of Health. A GW patient is defined as an individual exhibiting a history of a skin lesion with emergence of worm. Case containment is defined as prevention of transmission from individual patient. Data from 1994-2015 were analyzed using Microsoft Excel.

Results: Of the 3536 cases (196 per year), 2.7% were imported from South Sudan. Equal number of males and females were affected in 1996 and 2002, when 60% of 225 patients in 1996 and 82% of 39 patients in 2002 were 15-45 years old. There is year-round transmission of GW with incidence peaked from April to July (when 2499 of 3536 cases were reported). The incidence rate declined from 2.34 /100,000 in 1994 to 0.01/100,000 in 2015. The trend of number of villages reporting cases paralleled that decline. In 2008, after 20 months of zero reports, 41 cases were rediscovered. In 2010, 2011, 2012, 2013, 2014 and 2015 the case containment rates were 90%, 100%, 50%, 57%, 67% and 100% respectively. Since 2013, Ethiopia has started to detect Dracunculus *medinensis* infection in animals (17 dogs and 3 baboons) in same villages where human cases have occurred.

Conclusion: Although the number of cases and transmission has decreased significantly, the struggle to eliminate the disease remains a challenge, possibly because of inadequate case containment or undetected cases. This unusual epidemiologic pattern of GW is unlike that seen previously in Ethiopia. Heighten surveillance to detect and contain all cases to stop transmission, and study to characterize the peculiar epidemiology of the GW.

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Factors associated with Ano-genital warts occurrence among Human Immunodeficiency Virus (HIV) infected patients in Gauteng, South Africa

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Background: The study highlighted factors associated with the occurrence of ano-genital warts (AGWs) among HIV infected individuals in South Africa (SA). Human Papilloma Virus (HPV) infection occurs more frequently among HIV infected individuals because of their compromised immuno-status.

Methods & Materials: We conducted a secondary analysis of routine clinical data from Ward 21 clinic in Hillbrow, Johannesburg. Ward 21 is one of the largest non-hospital ART initiation sites in the world and sees over 4000 patients monthly. Participants were patients =16 years who attended the ART clinic between 2009 and 2011. Bivariate analysis was done using Chi-Squared test. Logistic regression was conducted to assess factors associated with AGWs. Analysis was stratified by gender since it showed to be an effect modifier and we assessed the following factors: sexually transmitted infections (STIs) (syphilis, herpes simplex virus type 2 and scabies), age, first CD4, employment-status and ART-status.

Results: AGWS prevalence was 4% and 3% among females and males respectively. The adjusted-odds of having AGWs among females above 25 years but below 55 ranged from 1.6 -18.3. A CD4 count of < 200 cells/ml^3 was associated with AGWs (OR: 1.32; 95% CI: 1.02 - 1.72) amongst females. Among males the adjusted-odds of having AGWs if a patient was not on ART was 1.53 ;(95% CI: 1.01 - 2.31).

Conclusion: AGWs were prevalent among younger age-groups indicating young people especially females are still getting exposed to HIV and STIs in their teenage years. More need to be done to reduce STIs in order to fulfil the SA government's strategic objective of reducing STIs.

Age was strongly associated with AGWs among females. Recurrent AGWs have been found to be associated with older age however we could not establish if these were recurrent. ART-status was strongly associated with AGWs among males. This confirms that though the role out of ART in SA has increased in coverage a meaningful impact on AGWs is yet to be seen.

Going forward, conducting primary research will allow for collection of information on other relevant covariates. It would also be ideal to use an STI clinic database.

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