

## **EMBLEM Newsletter**

A monthly means to inform and inspire our TEAM

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Newly-arrived EMBLEM Tanzania vehicle, ready for anything.

### **FOUR WHEEL DRIVE**

"We have to buy these vehicles because of the bad roads", I explained defensively to a visitor, regarding our robust four-wheel drive vehicles. "We'll know we've arrived when the roads are better and we no longer have to buy them. And," I added as a parting shot, "We'll know we've REALLY arrived when we start to buy them again, for RECREATIONAL PURPOSES"!

There are some paved roads in East Africa. But the EMBLEM Study areas are mostly rural, and off-road. Our patients can come from places reached only by bicycle or foot. And, in order to recruit control patients, we need to reach those same areas.

We need to be prepared for roads with gullies, potholes, mud holes, and rocks. This requires a high undercarriage, and four-wheel drive. We would never seek out roads like this and drive on them FOR FUN!

The money saved by the government by not building roads is spent by vehicle owners, probably several times over, in vehicle repair and maintenance costs. Even the initial cost of vehicles is high, if they are to be rugged enough to withstand the conditions found in most of the country. And, in the case of East Africa, fuel costs are normally more than twice as high as in the US. Therefore, the purchase, running, maintenance, and repair of vehicles here in East Africa is a substantial cost for any research program that involves going into rural communities.

\*\*Dr. Esther Kawira - Editor\*\*

## **EMBLEM Kenya**

Sensitization activities continue in collaboration with the Ministry of Public Health. Posters have been distributed in Asego Division by the indoor residual sprayers (IRS) who have been moving from door to door spraying houses for mosquitoes. The Public Health officer at Homabay District hospital, Mr Fredrick Emali is the point person for the EMBLEM message dissemination within the district team.

Facilities visited this month include Karungu sub District Hospital, Marindi Health Center, Magina Health Center, Rangwe Sub District Hospital, Adiedo Health Center and Got Kojowi, reaching a total of 106 Community Health workers. A CME for 20 staff was conducted in Homabay District Hospital and also to the KEMRI / CDC workers.

The remaining equipment for Homabay EMBLEM site, shipped in March, were cleared and transported to the site. The equipment is in good condition and is functioning well. In spite of frequent power surges, the equipment has not been affected since the emergency power system has been kicking in quickly.

The laboratory technologists at Homabay were trained on how to prepare the STM by the Lab Technologist from Bugando and this was a very interactive session.

#### **EMBLEM Tanzania**

A total of 6 cases (3F, 3M) have been enrolled in Tanzania to date; 3 from Shirati and 3 from Bugando Medical Center. The first EMBLEM Tanzania patient, enrolled in early March, successfully completed her chemotherapy at Shirati and will be followed up to confirm cure over the next year. The cases enrolled subsequently are continuing with the three-month chemotherapy course.

A new vehicle (see editorial) arrived, and will greatly facilitate our upcoming community mobilization and control enrollment activities.

# **EMBLEM Uganda**

Case enrollment continues for Uganda with total enrollment figures at 85 (25 females and 60 males).

The regular Outpatient Department talk shows (see picture right) at the St. Mary's Hospital Lacor continue to increase the awareness about Burkitt Lymphoma among patients who come to receive health care at the Hospital.

Study monitors visited Lacor Hospital Study site on May 30th and 31st and discussed issues arising from data collected with the EMBLEM team.



Mr. A.K. Banya (dark suit) with CAB members in Lacor

#### In Memoriam: Mr. BANYA ANGELO KENERI

On May 26th 2012 Mr. Banya Angelo Keneri (pictured left in a Black suit) passed away at Uganda Heart Institute where he was referred after developing an irregular heartbeat. He died at the age of 82 years, having been born on 11/11/1932 in his home village of Koch Patuda, Gulu District, Northern Uganda

At the time of his death, Mr. A.K. Banya was chairman of the EMBLEM Community Advisory Board (CAB), a body that was established in 2010 to oversee the conduct of EMBLEM study from the community perspective. In his brief tenure with the CAB, he served wholeheartedly and gave all his time for the study.

Mr. Banya was a senior civil servant who had an exemplary career in the Ministry of Finance where he retired as Commissioner of Finance. He then served in a private capacity in various organizations and on boards of institutions, among which was Lacor Hospital. He will be remembered for his selfless service to Lacor Hospital in general and to the EMBLEM Study in particular.

Compiled by: Tobias Kinyera

**EMBLEM Newsletter** is a monthly on-line publication based on contributions of the EMBLEM Study staff. **Editor**- Dr. Esther Kawira, Email address: elkawira@gmail.com