

EMBLEM Newsletter

A monthly means to inform and inspire our TEAM February 2013 Vol. 4, No. 2

Yes, We Have No Bananas



Decorative Banana Blooming

There are many varieties of bananas in East Africa, such as sweet bananas, the smaller sweeter "finger" bananas, and the larger starchier "plantains". But also in the banana repertoire is a decorative banana that puts out a unique and hardy flower that looks like a stylistic representation of a hank of bananas. This is purely a feast for the eyes, though it does nothing for the stomach. Therefore, since most people concentrate on their food supply, the decorative banana is not much cultivated and these blooms, one per stalk (like banana hanks), appear rarely. Many people have not seen these blooms, or do not recognize them as a variety of banana.

Burkitt Lymphoma (BL) has a unique appearance to doctors experienced in its diagnosis. But it is rare, compared to the common illnesses that people know on a daily basis. That is why "spotters" – persons trained to spot BL patients and refer them early to EMBLEM sites - can mistake common illnesses for BL, or can miss them altogether. Missing cases delays diagnosis.

The EMBLEM Study has instituted community sensitization strategies to improve the sensitivity of spotting of cases and to encourage early referral of this rare, deadly, but highly treatable cancer.

Dr. Esther Kawira - Editor

EMBLEM KENYA

EMBLEM Kenya has enrolled 24 cases (19 males, 5 females) since July 2012. This represents 6% of their case enrollment goal.

During the last month, study monitors (Prof. Moses Joloba and Mr. Samuel Kirimunda) from Makerere University, Kampala, evaluated work in Kenya. EMBLEM uses the same team of monitors for all of its sites to ensure harmony of compliance with standard operating procedures. The monitors have recommended that field laboratories be enrolled in a quality assurance program to increase the rigor of quality monitoring.

EMBLEM Kenya hired Mr. Isaiah Ouro Genga as a Senior Technical Supervisor to strengthen the technical and management team in preparation for scaling-up of field activities. Mr Genga brings rich experience from his work at the Kenya Medical Research Institute (KEMRI), where he retired as Chief Laboratory Technologist in 2008. EMBLEM Kenya lost a dedicated member, Mr. Barrack Olero Tako, Senior Laboratory Technologist at Homabay District Hospital, who perished in a road accident, along with two of his children.

EMBLEM TANZANIA

EMBLEM Tanzania has enrolled a total of 28 cases (15 males, 13 females) since July 2012. This represents 5.6% of their enrollment goal.

Following a report by the EMBLEM study monitor, the EMBLEM Tanzania Team will hire a Senior Technical Advisor to implement sound strategies to sensitize the community about case spotting, increase early case referral, and improve case-capture of referred cases. The Senior Technical Advisor will also implement a rigorous quality control plan and improve coordination between investigators and stakeholder institutions.

The circuit boards in the EMBLEM freezers in Tanzania have been malfunctioning, which prevents them from switching to CO2 back-up systems (BUS) during power outages. In cases of electrical failure, the CO2 BUS is the tertiary back-up system after the electrical generator. EMBLEM continues to work with THERMO FISHER to resolve this issue.

EMBLEM UGANDA

Case enrollment in Uganda stands at 135 enrolled (88 males, 47 females). This represents 20% of their case enrollment goal. In addition, they have enrolled 770 controls.

EMBLEM staff completed review of the SOPs to collect fresh frozen tumor tissue. Frozen tissues will supplement the formalin-fixed paraffin wax embedded tissue that will continue to be collected. To ensure a concerted effort from all involved, a meeting was held with various departments at Lacor Hospital to set the stage for the first actual test for fresh frozen tissue trials.

EMBLEM Uganda has completed control enrollment in Jungi, Koboko District, the 8th village to be enrolled out of the 12 randomly selected villages. It is a dry village. Enrollment was conducted January 21st through the 29th. The District Health Officer (DHO) of Koboko district, Dr. Alfred Driwale, visited the EMBLEM team while in they were in the field. His presence motivated the community to participate in control enrollment.



Test run for frozen tissue technique



Dr. Driwale, DHO, Koboko District, addressing the community

EMBLEM Study Goals

1250 -1000 -750 -500 -250 -

1500

In this issue we introduce a thermometer to track EMBLEM Study case enrollment goals. At a glance, the temperature can be seen to have risen by about 12.2%. The thermometer will become a monthly feature of the EMBLEM Newsletter to help track our progress in the field. Because the community appreciates the early detection and timely treatment, in the future we will add a thermometer to show them how many of the children we spot, diagnose and assist with treatment are surviving for 3 months, 6 months, and 12 months.

EMBLEM Newsletter is a monthly on-line publication based on contributions of the EMBLEM Study staff.

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