

## BACKUP COLLABORATION IN RESEARCH LOGISTICS



EMBLEM PI visits the UVRI/CDC field research lab in Arua in 2009

In September 2009, during the pre-planning phase of EMBLEM, we were pleased to learn that the Uganda Virus Research Institute (UVRI) collaboration with the Centers for Disease Control (CDC) had established a field lab with an ultra-low freezer in Arua, near Kuluva. We introduced EMBLEM to them and requested mutual collaboration between EMBLEM and UVRI/CDC field staff. In October 2012, the EMBLEM study ultra-low freezer at Kuluva broke down and the UVRI/CDC lab came to our aid to prevent loss of valuable research samples. The samples were retrieved and safely returned to Kuluva one month later when the Kuluva ultra-low freezer had been repaired.

Three months later, the UVRI/CDC freezer broke down and EMBLEM was pleased to help prevent the loss of their valuable research samples. The UVRI/CDC samples were retrieved in April 2014 when normal service was restored at the UVRI/CDC lab in Arua. In his appreciation to EMBLEM, Prof. Brook Yockey, a microbiologist with CDC Division of Vector Borne Diseases in Colorado, recognized this reciprocal relationship and “promised to return the favor”. This experience taught our staff the importance of establishing connections with other research groups in the region and then using those connections to protect the integrity of invaluable research samples.

*Dr. Esther Kawira - Editor*



UVRI/CDC samples stored by EMBLEM for more than one year being retrieved at Kuluva in April 2014

## EMBLEM UGANDA

A total of 523 (334 males, 189 females) potential cases have been spotted. Of these, 293 were eligible and 272 (172 males, 100 females) were enrolled.

A clinicians’ training was held in April for participants drawn from 8 districts of West Nile, including 24 clinicians from lower level health units and district hospitals where BL cases first present. Some districts, such as Moyo, Adjuman, Zombo and Nebbi, have not spotted cases. The training hoped to increase their awareness of case presentation and knowledge of where to refer cases for diagnosis and treatment in northern Uganda.



Dr. Martin Ogwang led the clinician training in West Nile

## EMBLEM KENYA

A total of 407 (267 males, 140 females) potential cases have been spotted. Of these, 181 were eligible and 147 (105 males, 42 females) were enrolled.

EMBLEM staff participated in a live television talk show at a local station in Eldoret (Sauti Ya Rehema or SAYARE TV) to increase awareness about BL and to increase case spotting and referral of cases for diagnosis and treatment. The team continues to focus on preparations for the control enrollment. Training will be conducted in July in two villages - one in Nyanza Province and the other in Western Province.

## EMBLEM TANZANIA

A total of 372 (204 males, and 168 females) potential cases have been spotted. Of these 81 were eligible and 76 (45 males, 31 females) were enrolled.

EMBLEM staff made several presentations at both Bugando and other health centers (e.g., Ukerewe) in the study area to increase awareness about BL. They also instituted regular telephone calls to the surrounding hospitals to



A BL awareness talk at Bugando Medical Centre



Akwilina Pangan

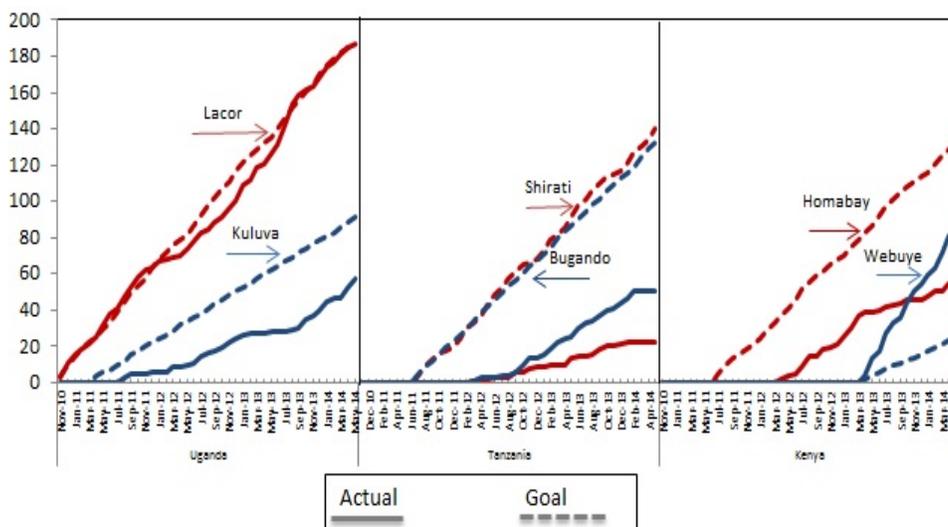


Hillary Ally

give them feedback about their cases and to ask about new cases seen during the week.

EMBLEM welcomes Hillary Ally and Akwilina Pangan to their medical laboratory technologist team at Bugando Medical Center. Both are expected to strengthen the team's capacity to spot, screen and facilitate the diagnosis and recruitment of BL cases.

## EMBLEM GOALS



EMBLEM has been tracking cumulative case enrollment versus historical patterns (graph below). Comparisons show that in Kenya in Webuye area, accrual is higher than the historical average suggesting that cases were previously missed. In Tanzania, accrual is lower than the historical average, suggesting cases are currently being missed. In Uganda, accrual is similar to the historical average suggesting most cases in the area are being enrolled. These comparisons show that case spotting has been

instituted in all sites, but referral to EMBLEM sites is variable. They help us to make decisions about how to strengthen our teams. In Tanzania, the team has been strengthened by adding new well-motivated staff.

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