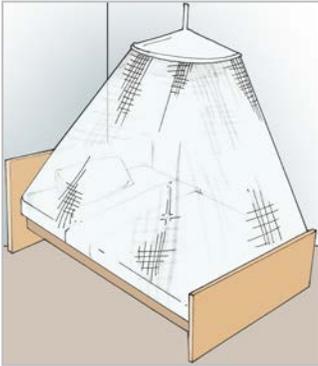


Malaria Prevention: Implications for Burkitt Lymphoma



Malaria Mosquito Net

Malaria, a potential cause of Burkitt Lymphoma, remains one of the most important causes of childhood illness and death in Africa, including in the rural regions where EMBLEM is being conducted. Many countries have adopted, with support from wealthy nations and organizations, vigorous plans to interrupt malaria transmission. These plans include use of internal residual insecticides and long-lasting insecticidal treated nets (LLIN), which place a physical and/or chemical barrier between mosquitoes and children. Now, with EMBLEM collecting detailed data on malaria infection in participants and their use of malaria prevention tools, secondary analyses of these data in controls will shed light on the burden of malaria in East Africa, the dispersion of malaria prevention tools and their impact on malaria risk in rural communities.

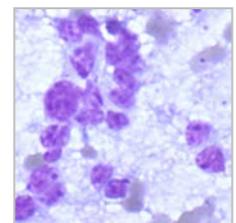
Preliminary analyses from EMBLEM confirm that malaria infection is common: 42% of the controls have a positive rapid diagnostic test. About half of them have active infection based on a positive microscope examination. The controls were asked about sleeping under a mosquito net on two different occasions spaced months apart. More than half (55%) did not sleep under a net on both occasions. About 36% slept under a net on one but not the other occasion, and only 14% slept under a net on both occasions. While the central focus of EMBLEM is to understand the causes of Burkitt Lymphoma, its population-based design and rural recruitment region, may yield valuable data for malaria prevention and could open a window for integrating cancer prevention in malaria prevention programs.

Dr. Esther Kawira, Editor

EMBLEM UGANDA

By the end of June, 361 potential cases (131 females and 230 males) were spotted and screened in Uganda. Of these 192 were eligible and 175 were enrolled (67 females and 108 males).

The collection of fresh frozen BL tumor tissues for the BL Genome Sequencing Project entered its second month of tissue collection (11 cases). The technicians have made substantial progress in making good touch preps and tissue slides.



BL Touch Prep



Dr. Pierro Corti

EMBLEM staff joined St. Mary's Hospital to celebrate the life of Dr. Pierro Corti (at left), who founded the hospital in 1959. Working with the hospital, they joined the fundraising drive and helped provide free cancer treatment for children, including providing on-site free medical checkups, free cancer screening, and a cancer walk from Gulu town to the hospital. EMBLEM Uganda has benefited from the media coverage associated with these activities, which included a grand fundraising event on June 15th which was presided over by Uganda's first lady, Mrs. Janet Museveni.

EMBLEM TANZANIA

By end of June, 254 potential cases (113 females and 141 males) were spotted and screened in Tanzania. Of these 46 were eligible and 44 were enrolled (20 females and 24 males).

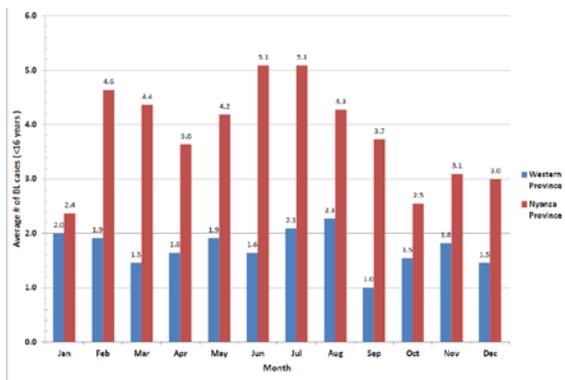
The Community Advisory Board met on June 21st in Mwanza to receive an update on the EMBLEM Study. Strategies to improve case enrollment and plans for control enrollment were discussed. The strategies include refresher sensitization about Burkitt Lymphoma at district and regional hospitals, targeting doctors who are not yet familiar with Burkitt Lymphoma, distributing EMBLEM posters, and making telephone calls. It was also discussed that a Senior Technical Supervisor should be hired to strengthen scientific leadership. Recruitment should be conducted through competitive advertisement in national newspapers and Ministry of Health bulletins and eligible candidates should be interviewed by an independent panel. The EMBLEM vehicle, which was destroyed in a traffic accident, should be replaced to ease transport.



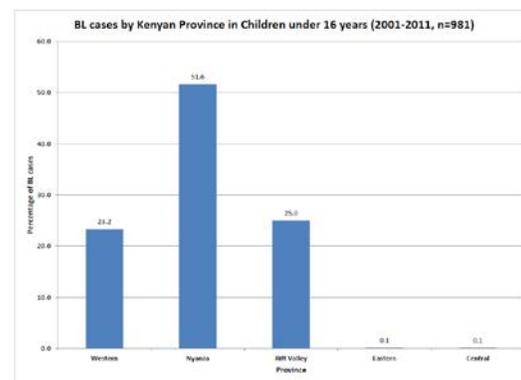
Group photo after a CAB meeting. CAB members seated R-L Father Aloyce, Dr. Makwani, Ms Pamela. Standing L-R, Dr. Masalu-PI, Dr. Changalucha-CAB provisional chairman, Herry, Mafimbo and Hillary-Study staff, Dr. Kahima-BMC pathologist and Capt. Magatti – Study Coordinator

EMBLEM KENYA

By the end of June, 187 potential cases had been spotted and screened. Of these 63 were eligible and 56 were enrolled (15 females and 41 males). A review of historical Burkitt Lymphoma data was completed and it confirmed monthly (lower left graph) and provincial (lower right graph) variations in Burkitt Lymphoma cases. These new data will be used to improve targeting of districts for case spotting and enrollment.



BL Diagnosis by Month and Province



BL Diagnosis by Province

EMBLEM Goals:

Overall across East Africa, 802 (318 females, 484 males) potential cases were spotted. Of these 301 were eligible and 275 have been enrolled (102 females, 173 males). In addition 953 controls have been enrolled in Uganda. The EMBLEM tissue repository has accumulated 13,286 samples, including 217 tissue slides and 127 tissue blocks. Data Quality control activities are on-going.

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

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