



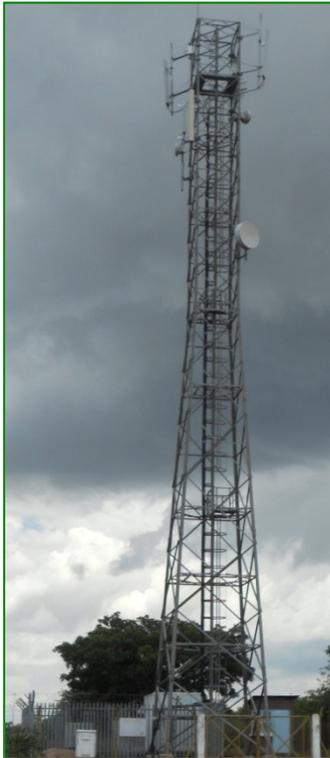
EMBLEM Newsletter

A monthly means to inform and inspire our TEAM

April 2011

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Lines (or Waves) of Communication



Storm Clouds over Vodacom Tower

The mobile phone has revolutionized communication within Africa, including rural areas. It has also greatly facilitated international communication with Africa, and has a critical role in making EMBELM feasible. During the month of March, the EMBLEM study took another leap forward with the institution of weekly conference calls between the PI and his team in the US and the teams in Kenya and Tanzania.

In Tanzania, during a recent conference call, the three investigators were in three different locations (village, town, and city), yet we could all talk easily from our home, office, or hotel locations using our cell phones. Even in Shirati village, nobody had to make a special trip to stand in a certain spot, at an agreed upon time, in order to get network, as there are now three competing cell phone towers in or near the village.

Local youth run small businesses by charging car or truck batteries in towns with electricity, then taking the batteries on bicycles into villages and, for a small fee, charging people's cell phones. Others sell prepaid phone cards in their shops. Cell phone companies advertise their banking services, as credit can be sent from one phone to another. Meanwhile, landlines in rural areas are either obsolete, or were never installed. The

short wave radios are also collecting dust. And people no longer need to travel by road from a rural area to a big city just to make an international phone call! It is this revolution, coupled with committed local investigators and support from NCI, which is making the bold plan of EMBLEM feasible.

Dr. Esther Kawira, Editor

Introducing the EMBLEM Tanzania Team



Dr. Esther Lehman Kawira
PI, EMBLEM Tanzania
Medical Director, SHED Foundation
Asst. Prof. of Family Medicine
Keck School of Medicine



Dr. Nestory A. Masalu
Co-PI, EMBLEM Tanzania Oncologist
Head-Oncology Department
Bugando Medical Centre.
Lecturer - Weil Bugando University.



Josiah Ogada Magatti
EMBLEM Study Coordinator
General Secretary,
SHED Foundation
Past Administrator,
Shirati DDH



Dr Simplicie Alfred Harusha
EMBLEM Study Doctor
Asst. MO/IC,
SENGEREMA DDH
In charge of treating BL



Dr Kahima Jackson Kahima
Pathologist, Head-Department
of Histopathology/Morbid
Anatomy, Director of Laboratory
services BMC, Lecturer-Weil
Bugando University



Herry Owuor Dhudha
EMBLEM Study Data Manager
IT Administrator
SHED Foundation

EMBLEM Uganda Report

Cases: Case enrollment at St. Mary's Hospital Lacor is moving forward. Staff spotted 55 potential cases (18 females and 37 males) and after screening, 26 were eligible and 24 of these were enrolled (7 females and 17 males). The majority of the cases enrolled come from a few districts: Oyam (5), Gulu (4), and Apac (3) districts. Only 2 cases have refused to consent.



EMBLEM Uganda Lab Personnel L-R: David Chemshak, Fredrick Odur, Hadijjah Nabalende and Isaac Otim

Controls: Plans to enroll Pilot Population Controls moved a notch forward with the random selection of households to be canvassed for the pilot population controls. In Amolatar 25 households were selected, plus 36 in Dam Imalo and 31 in Tee Acii. These households will provide a sample size of at least 75 children and at most 90 children per village.

Staffing: We welcome Hadijjah Nabalende, who joined the study on the 4th April 2011.

EMBLEM Kenya, April Update

Two members of the Kenyan team attended the Librarian training in Nairobi on invitation by the National Library of Health (NLH). Dr. Constance Tenge, co-PI EMBLEM Kenya, will present a poster about EMBLEM at the Kenya Pediatric Association conference in Mombasa in April. Meanwhile, Homabay District Hospital has provided dedicated space for EMBLEM work and Moi University Research Sponsored office will provide management and financial support to EMBLEM in Kenya.

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

Reporters: EMBLEM Uganda – Mike Mbaziira; EMBLEM Kenya – Pam Akinyi Were; EMBLEM Tanzania – Josiah Magatti