



EMBLEM Newsletter

A monthly means to inform and inspire our TEAM

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Progress After Nineteen Months

It has been 19 months since the EMBLEM Newsletter was launched, and 17 months since my guest editorial. Since that time, the EMBLEM Team has made much progress to meet its main goal - to conduct a case control study that will help us identify the factors that predispose children to Burkitt lymphoma (BL) in East Africa. The main challenges have included introducing study activities at 6 hospitals with capacity to diagnose and treat BL in three regions in three countries (Uganda, Kenya, and Tanzania). Within these regions, population-based controls are expected to be enrolled from villages from which the cases derive. The challenges of EMBLEM were numerous from the outset, mostly influenced by the deep rural location of the study sites. They included unreliable or lack of necessary infrastructure, such as paved roads, electricity, or telecommunication.



I am pleased that 19 months after study activities were launched at St. Mary's Hospital, Lacor, in Uganda, activities have been introduced at 5 of 6 sites, where case spotting, screening, and enrollment is ongoing. Control enrollment has also been launched at the 2 sites in Uganda and is expected to start in the fall in Tanzania. During this period, approximately 100 BL children and 400 controls (Uganda only) have been enrolled, 700 forms have been completed, and 6000 vials of samples have been processed and frozen. In April, the team successfully shipped 60 BL tumor tissues and 1800 cryovials to the U.S. (see pictures at left). These initial samples will be tested to confirm

quality and to start the exciting journey of scientific discovery. I am encouraged by this progress, and I congratulate the entire EMBLEM Team for the work thus far.



Janet with biospecimen shipment

Much remains to be done. The first months were slow, to ensure work could be performed to consistent quality. Now it is time to redouble effort to increase case enrollment and introduce control components at all



Janet on the left and Jeanne at Westat Offices

sites. With data and samples accumulating,

the EMBLEM Team needs to start planning for initial scientific analyses. EMBLEM offers many opportunities for collaboration, translation, and capacity building. To this end, I am pleased by the collaboration that is developing

between EMBLEM and the Office of Cancer Genomics to study the genome of BL, and with the Center for Global Health at NCI to boost capacity for research in the regions where EMBLEM is being conducted.

The work by EMBLEM has benefited from the rich and dedicated efforts of Support Services contractors of the National Cancer Institute (NCI). In October 2011, Westat joined the EMBLEM Team, replacing Research Triangle International (RTI). I thank the staff at RTI for their excellent services and I welcome Jeanne Rosenthal and Janet Lawler-Heavner of Westat to the EMBLEM Team - I wish them every success on this exciting journey.

Allan Hildesheim, Ph.D., Chief Infections & immunoepidemiology Branch - Guest Editor

EMBLEM KENYA

Of the 58 total cases spotted, 11 cases were BL and 5 were eligible and enrolled in the study. Like the wildebeest's spectacular crossing of the Mara River, when many cross the river in a short period of time, but only a few fall prey to the hungry crocodiles that live there, the EMBLEM study will spot many cases, but only a few will be confirmed BL.

Community mobilization is ongoing. Continuing medical education (CME) was conducted in Karungu, Macalder division with 67 health care providers in attendance. Also, the EMBLEM investigators paid a courtesy call to Dr. Kayla, Director, KEMRI/CDC program with a goal to establish collaborative activities with regard to case spotting, specimen storage and, eventually, specimen shipment.

The laboratory at Homa Bay received two tables for the QBC hematology analyzer machine and the centrifuge. Burglar proof doors and windows have also been fixed on the laboratory toilet to enhance safety of the Laboratory equipment.

EMBLEM UGANDA

Case enrollment at Lacor Hospital study site continues with current enrollment figures at 79 (24 females and 55 males).

EMBLEM was officially launched in Kuluva on June 13th. Dr. Martin Ogwang, Co-PI of Emblem, Uganda, headed the proceedings. The launch was followed by community mobilization activities throughout the West Nile region that involved most of the community leaders. Case and control enrollment is underway in Kuluva Hospital and West Nile region as a whole. In addition, Kuluva Hospital staff and community representatives underwent training on various Emblem activities on June 22nd and 23rd.



Dr. Martin officially launching EMBLEM activities in Kuluva Hospital.

EMBLEM TANZANIA

A total of 6 cases (3 male, 3 female) have been enrolled in Tanzania. At Bugando Medical Center, Dr. Heronima Joas has been recruited to work with the EMBLEM team as study doctor, assisting co-PI Dr. Masalu. The replacement QBC machine has arrived and is being tested, after which it will be taken to the Shirati EMBLEM Unit. Extra EMBLEM study forms were returned to AFENET in Kampala.

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

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