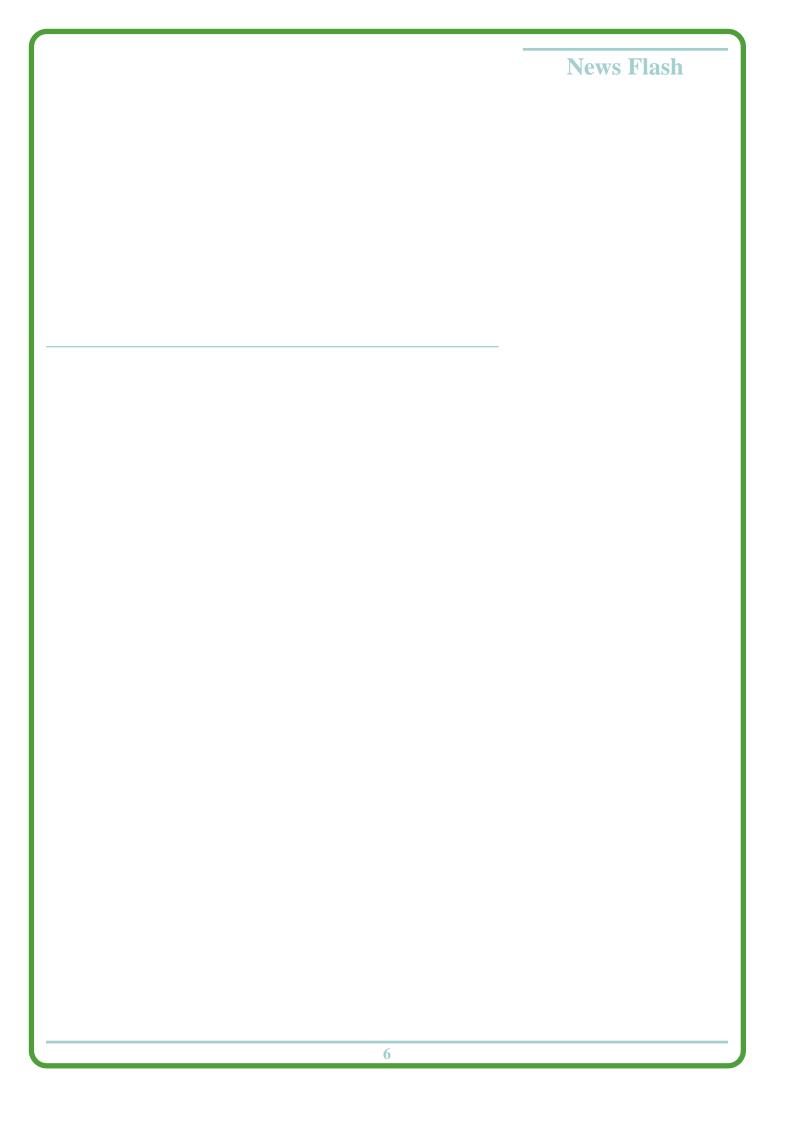


to achieve. In the short term, at least, the pull out will likely jeopardize the districts' ability to create strong CDTI systems as they cannot be selfreliant enough overnight.

APOC's February assembly has, no doubt, brought a significant perspective to the current writer's work in the campaign against onchocerciasis. One great idea, however, is that such extraordinary workshops could be held, on a rotational basis, in different African countries to benefit larger numbers of officers, high and low, pitted against river blindness. This is Answer: Yes, but they constitute a

Christopher Ruzaza (DOC, Kisoro) addressing the religious sect ('Barokore')



## **Treatment Updates (Jan-Mar 2004)**

Name of District	Total Popn	Popn treated during current month	Popn treated cumulative for 2003	Ultimate Tx Goal (UTG) for 2003	Total Popn TX % for 2003	Popn TX % of UTG 2003	No. of Villages treated during the current month	Active villages cumulative for 2003	Active villages UTG for 2003	Active villages % for UTG for 2003
Apac	15,672			12.818			monun		9	
Gulu	204.879			150.660					187	
	- ,			,						
Kabale	17,475			15,235					48	
Kanungu	46,448			38,873					105	
Kasese	95,717			79,637					131	
Kisoro	21,315	1,890	15,062	17,861	70.7	84.3	32	32	32	100
Mbale	179,749		,	140,091					580	

The Carter Center Global 2000 River Blindness Program, Uganda P. O. Box 12027, Kampala. Plot 15 Bombo Road Vector Control Building Ministry of Health Tel: 256-41-251025/345183 Fax: 256-41-349139 Email: rvbprg@starcom.co.ug

TO: