The Role of AMP and the Africhol Consortium in the Fight Against Cholera in Africa

Cholera is an acute diarrheal infection caused by ingestion of food or water contaminated with the bacterium *Vibrio cholerae*. It can kill within hours if left untreated.

Cholera is a major public health problem. Outbreaks continue to occur in developing countries with suboptimal water and sanitation facilities.

An obstacle to the prevention and control of cholera in Africa is limitations in existing surveillance systems. According to estimates of the World Health Organization (WHO), there are 3 to 5 million cholera cases and 100,000 to 120,000 deaths annually, but only 200,000 cases, and around 5,000 deaths, are reported. In 2011, 188,678 cases were reported in Africa.

The Agence de Médecine Préventive (AMP), along with its partners, has committed to improving cholera surveillance, prevention, and outbreak response in Africa through the Africhol project. Established in 2009 with funding from the Bill & Melinda Gates Foundation, the three-year project is based on a consortium involving governments and health organizations worldwide. Africhol aims to determine the burden of cholera in sub-Saharan African through the creation or strengthening of surveillance sites in nine countries: Cameroon, Côte d'Ivoire, Democratic Republic of the Congo (DRC), Guinea, Kenya, Mozambique, Tanzania, Togo, and Uganda.

A standard protocol, developed at the initiative of AMP, ensures that all nine countries use the same procedures for data collection and analysis, and makes it possible to compare surveillance data between countries. These data will serve to inform decisions on optimal interventions for cholera prevention and control. These measures include improved water and sanitation, health education for better hygiene and safe food handling practices, and vaccination. Recently, a new generation of effective and affordable vaccines has opened new possibilities for short- to mid-term cholera control.

The consortium develops and implements the surveillance network. It also serves as a forum for partners to share information on project activities and to develop tools for use in the surveillance sites. Led by AMP, the consortium includes the nine partner countries and members of national and international organizations involved in the control or assessment of cholera in Africa: African Field Epidemiology Network – AFENET; EPIVAC, an AMP-led program to strengthen capacities in vaccinology and health services management; Center for Vaccine Development (CVD) in Mali; Organisation de Coordination pour la lutte contre les Endémies en Afrique Centrale (OCEAC); Southern African Centre for Infectious Disease Surveillance (SACIDS); University of the Mediterranean Aix-Marseille II; U.S. Centers for Disease Control and Prevention (CDC); West African Health Organisation (WAHO).

Participating countries are strongly encouraged to conduct additional cholera research and activities, and to share the results in the context of the consortium. The goal is to create a body of information that can contribute to the strengthening of cholera prevention and control efforts elsewhere in Africa and beyond.

Contact: Martin Mengel, Africhol Project Coordinator (AMP), +33 (0)1 53 86 89 20, mmengel@aamp.org

---