

**Welcome to the second issue of the netSPEAR newsletter.**

netSPEAR is an independent project hosted by the KEMRI / Wellcome Trust Collaborative Research Programme in Nairobi, Kenya. netSPEAR is funded by **GAVI** and the **PneumoADIP**. Pneumococcal disease is a leading cause of deaths from meningitis and pneumonia in African children and these are potentially preventable with new vaccines. Whether these vaccines are used in Africa will depend, however, on whether the costs of the vaccines can be justified by the number of cases of disease and deaths prevented. Surveillance data to help address this issue is urgently required from East Africa and netSPEAR, a network that aims to work with all health sectors in the region, is attempting to facilitate the collection of this routine public health information

**Some possible surveillance sites in 3 countries have been visited by netSPEAR and initial assessments carried out.**

A total of 11 hospitals in Kenya, 3 in Uganda and 1 in Tanzania have been visited and initial assessments carried out. Activities included:

- ✓ Establishing the annual number of paediatric admissions in the hospital
- ✓ Establishing the clinical capacity of a site
- ✓ Review of existing sites' laboratory capacity to carry out CSF analysis and perform blood cultures.
- ✓ Estimating the number of CSF and blood cultures done per year
- ✓ To explain the netSPEAR project to the hospital management and seek broad support
- ✓ To discuss with partner sites areas requiring netSPEAR support to improve capacity and performance.

**Training for proposed netSPEAR sites starts.**

Training has started in 'first wave' public hospital sites selected for surveillance. Already a total of five sites have received training. The training approach adopted by netSPEAR is on-site to ensure as many clinical and laboratory staff benefit from the training offered and to allow the particular conditions of a hospital's familiar home ground to be built into the training. The training is being conducted by netSPEAR Project Manager Dr Wamae Maranga with a Consultant Microbiologist, Mr Joe Oundo from the Centre for Microbiological Research at KEMRI, Kenya.

The training is comprehensive and ensures all aspects of good clinical and microbiological practice that permit routine public health surveillance to succeed are covered. Areas include case definition / identification, timely collection, transportation and analysis of

specimens in the laboratory. NetSPEAR SOP's (available on the website) for clinical and laboratory practices are also introduced and discussed with the clinicians, nursing staff and the Laboratory staff. Practical sessions are carried out in hospital's own laboratory environment. A custom-made laboratory based data management computer program is also being introduced and all laboratory staff working in Microbiology are trained on how to use this program. NetSPEAR is providing basic desktop computers for each selected hospital's laboratory.



*Joe Oundo (microbiologist) leading a training session*

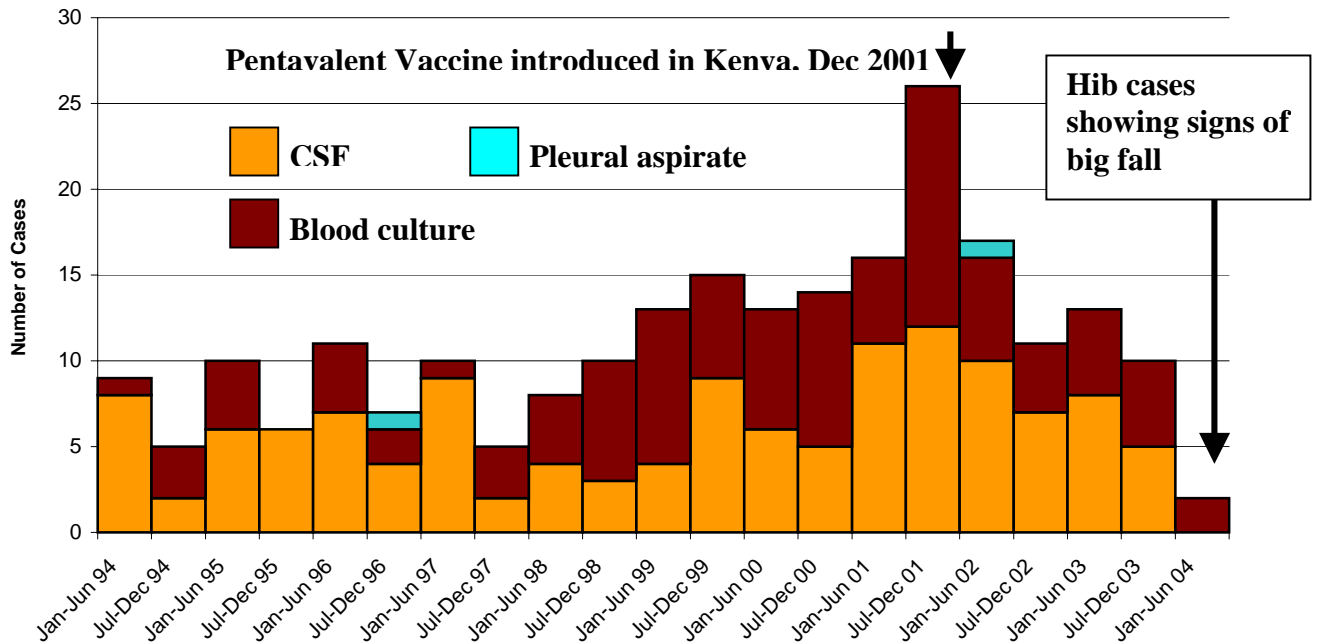
**netSPEAR website is now active!**

The netSPEAR website is now active after development recently undertaken. This is a key tool in ensuring that netSPEAR succeeds in its objective of active dissemination of all relevant information to all stakeholders. You can visit our website at <http://www.netspear.org/>. Please encourage your contacts to visit this site and download this newsletter, the SOPS, slide shows describing netSPEAR and much more.

**netSPEAR steering group meeting!**

The netSPEAR steering group will meet in Nairobi on 7<sup>th</sup> June to review progress and plan for the next 6 months activity.

Laboratory-Confirmed Hib in Children under 5 Years, Kilifi District Hospital, 1994-2004



Surveillance for Hib disease in Kilifi, Kenya showing early signs that the vaccine is having an impact

ISPPD - International Symposium on Pneumococci and Pneumococcal diseases held in Helsinki, Finland from 9<sup>th</sup> – 13<sup>th</sup> May 2004

<http://www.congrex.fi/isppd-4>

Finland played host to scientists, researchers and public health specialists interested in Pneumococci from all over the world. The work of netSPEAR was presented on a poster and as a short oral presentation during the PneumoADIP session together with updates on other networks from Africa and Asia. During the meeting new evidence was presented showing that HIV infected children and infants are particularly vulnerable to pneumococcal diseases. For more information on the hundreds of abstracts please visit the congress website (above). One thing however, was clear; the need to improve surveillance in low-income countries to monitor antibiotic resistance, to examine the case for new pneumococcal vaccines and to monitor the effectiveness of vaccines used in current EPI schedules. In particular there is a need to explore, which factors may contribute to observed vaccine failure.

**GAVI's Pneumococcal ADIP Small Grants Program**

If you have a question that will enhance knowledge about pneumococcal disease in East Africa such as:

- What is the burden of disease of pneumococci in my hospital,
- What is the serotype distribution of invasive isolates, or,

- What is the level of antimicrobial resistance,

Consider an application to the pneumoADIP small grants programme. These grants, which can be for up to US\$25,000, are available for scientists and doctors in developing countries to answer important local questions in the area of pneumococcal disease. To find out more visit <http://www.pneumoadip.org/news> If you would like help in making an application for a small grant netSPEAR would be happy to Assist you.

netSPEAR would like to take this opportunity to thank all our partners and we look forward to working with you!

*Beverly Watila,  
netSPEAR  
administrator,  
produced this  
newsletter.*



Feel free to ask for more information or send your news to:

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