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Sleeping Sickness Survey in Musoma District, Tanzania

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I. Investigation of the Incidence of Sleeping Sickness in the Human Population

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Abstract

In a survey of sleeping sickness in the Ikoma-Serengeti area, carried out in October and November 1970, about 3,000 people living in the area were examined and none was found infected.

Introduction

Rhodesian sleeping sickness was introduced into the Musoma District mainly in the Ikoma area in the 1920's. It is believed to have been an extension of an epidemic in Maswa, Mwanza District, which lies to the south. The outbreak of Rhodesian sleeping sickness in Maswa probably began in 1919–1921 during a period of famine but early patients were first diagnosed in 1922 (DAVEY 1924). *Glossina swynnertonii* was incriminated as the main vector of the outbreak. The spread of the disease was thought to be due to infected persons and the maintenance of intensive man-fly contact as the game population was quite small and scattered (SWYNNERTON 1923, 1925). Davey and McClean, however, having travelled in the affected area during an investigation of the same outbreak, found ample evidence that game was quite abundant in the area (DAVEY 1924). From 1925 the yearly incidence of sleeping sickness in Ikoma ranged between 12 and 265 (FAIRBAIRN 1948). The endemic situation continued until 1954 when the last 3 cases of sleeping sickness were notified from the area. It is reported that a large number of cases of sleeping sickness was diagnosed during the endemic period

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