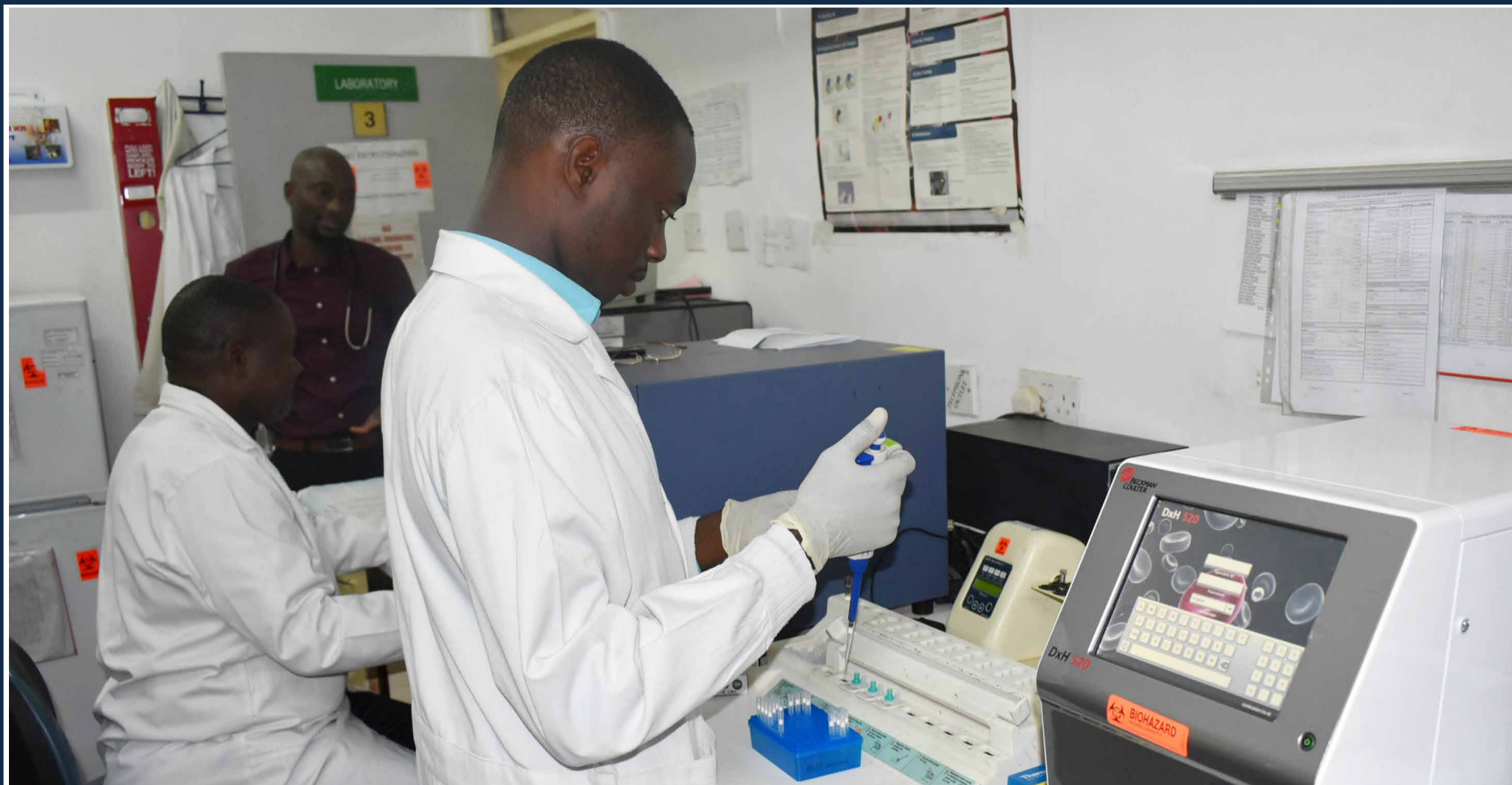


## Gonorrhoea has resisted over 10 drugs since the 1930s.



Staff working in the laboratory at the Charles van der Horst Women and Children's Center, Bwaila Hospital.

# IS GONORRHEA RESISTING GENTAMICIN?

Much as gonorrhea is treatable, the tendency of its causing bacteria to resist medication could be cause for worry as in future it would be hard to treat it, Dr. Mitch Matoga told the press recently.

He was addressing members of the media in a recent media partnership initiative meeting held at UNC Project

"We treat between 60 and 80 patients per day for sexually transmitted infections at Bwaila. For sure there are many people out there whom we would have treated but they don't come to the clinic; they get drugs over the counter to treat themselves," he said.

According to Matoga, Gonorrhoea has resisted over 10 drugs since the 1930s and chances are that the infection could resist current drugs as well.

It is in the same vein that a study is underway at Bwaila Hospital STI clinic to assess if gentamycin is still an effective drug in the treatment of gonorrhea

infection in Malawi. Gentamicin is the current standard of care drug for the treatment of gonorrhea in Malawi.

However, just like many other microorganisms, gonorrhea undergoes changes that make it become resistant to antibiotics and eventually became non-effective.

The study is a follow up to a previous survey conducted in 2007, which showed that gentamicin was still effective.

Men over 18 years with a urethra discharge regardless of their HIV status were enrolled into the study, checking for *Neisseria gonorrhoea* and conducting antibiotic sensitivity tests in the microbiology lab. They were also invited for a follow up visit one week later to check if their gonorrhea was cured based on clinical and laboratory assessments. 154 men were enrolled.

According to Matoga, since the introduction of gentamycin in 1993 and together with drugs like doxycycline and

metronidazole, cure rates have remained good despite declining global sensitivity.

The Malawi Demographic Health Survey done in 2015 to 2016 shows that prevalence rate of STI syndromes in males and females was about 1 million and about 15 percent women and 10 percent men aged 15-49 years were registered for STIs.

And a 2018 Demographic health survey shows that about 116, 523 cases of sexually transmitted infections were treated between July and September 2018.

Since the discovery of penicillin in 1928, antibiotics have revolutionised the way sexually transmitted infections like gonorrhea are treated.

Among other factors, resistance of bacteria to antibiotics in the country is blamed on careless prescription of drugs to the public and abuse of antibiotics bought over the counter often without prescription at all.

Dr. Mitch Matoga presenting on *Neisseria gonorrhoea*

3

KCH has a paediatric lab.



4

Two receive funding for more cancer research.



7

Staff, partners get together.



## UNC Project inducts new members into the Community Advisory Board

# SIX YOUTHS IN THE CAB

They came with enthusiasm and zeal to serve in the Community Advisory Board (CAB). Their voluntarism spirit is what will see UNC Project being advised on the way it should handle itself especially in the community in relation to study participants and other stakeholders

Of particular interest on this bright, sunny Friday of September 13, 2019 were 6 youths who also pledged to serve in the

CAB, giving advice particularly in studies involving their fellow youth.

Inducting all the general members into this new CAB, Phaleda Kumwenda nurse in the community department said the youth CAB members were in the age range of 17 to 25 and they would also be having their own scheduled meetings where they could discuss their roles as youths.

“Despite their role as youth CAB, we

shall also be meeting them in the general CAB meetings which consists of all ages,” she said.

She added that the youths would also be in the CAB for a maximum of three years but if they shall not be more than 24 years at the expiry of their term, they could be graduated into the general CAB for another term.

Speaking in a recent general staff meeting, UNC Project Country Director

Innocent Mofolo also said it was mandatory for some studies like the IMPACT 2016 to have a youth CAB.

He said: “In line with that, we have been advised that our CAB should also include adolescents. (This age range falls within WHO’s definition of young people, which refers to individuals between ages of 10 and 24). We have to respond to needs of our time or requirements of our time.”



This is an in-house publication. Its mission is to promote a sense of community by communicating information relevant and vital to the operations and staff of UNC Project Malawi.

In a drive to increase participation and bring variety to the publication, all UNC Project staff are free and encouraged to contribute articles in this publication. Write ups are welcome in the range 400 – 600 words for event stories and a maximum of 1000 words for other more technical issues worth sharing.

Forward your contributions to: [csekeleza@unclilongwe.org](mailto:csekeleza@unclilongwe.org)

Graphic layout:



ABOVE: The youth CAB members.  
 DOWN: Cross section of the general CAB.  
 INSET: Phaleda Kumwenda presenting on the roles and responsibilities of the CAB in research during the induction. Photos: Lawrence Chaduka

# Voila! KCH has a pediatric lab

**K**amuzu Central Hospital Pediatric Laboratory was officially opened in the Ward A of the children's section on November 14th, 2019.

This collaborative project was led by Dr. Elizabeth Fitzgerald, supported by UNC Project Malawi, and funded by the Malawi Children's Initiative. Rob Krysiak, co-director of the UNC Project Malawi laboratories, provided valuable technical and logistical support.

This lab, which will provide analyses including FBC and urine and electrolytes, hepatitis, microscopy, and CSF analysis, will significantly improve the standard of care for pediatric patients at KCH and contribute to improving the education of Malawian medical learners by improving diagnostic capability.

Kamuzu Central Hospital is the main referral center for the central region of the country and admits as many as 25,000 children per year.

Dr. Fitzgerald's work in Malawi is supported in part by the UNC Department of Pediatrics, where she serves as the Director of Pediatric Global Health, by SEED Global Health, and by PACHIMAKE, which is a consortium of institutions committed to improving care at KCH.



Ministry of Health Chief of Health Services Dr. Charles Mwanambo officially opening the laboratory. Photos: Lawrence Chaduka



Staff in the new laboratory.

LEFT: Affording a smile for the job: Dr. Elizabeth Fitzgerald who led the initiative

## Two receive funding for more cancer research



LEFT: Dr. Bongani Kaimila one of the beneficiaries. RIGHT: Dr. Tamiwe Tomoka

**T**wo doctors have received AIDS Malignancy Consortium (AMC) Fellowship awards to conduct more research in their areas of interest. AMC is a National Cancer Institute-supported clinical trials group founded to support innovative trials for AIDS-related cancers.

Both will commence their studies early 2020.

Clinical pathologist Dr. Tamiwe Tomoka will be studying one of the common cancers affecting the lymphatic system in HIV positive people in Malawi – the Diffuse Large B cell lymphoma (DLBCL).

“I will study Diffuse Large B cell lymphoma (DLBCL), a common cancer affecting the lymphatic system in HIV positive people in Malawi. Specifically, I will investigate cell of origin (COO) subtypes, BCL2/MYC co-expression in DLBCL in Malawian adult patients and examine prognostic associations with overall survival and differences by HIV status,” said one Tomoka.

On the other hand, another cancer

specialist Dr. Bongani Kaimila will be studying how TINY (Tiny Isothermal Nucleic acid amplification sYstem), a small portable machine can diagnose Multi Centric Castleman Disease (MCD), a rare disease that affects the lymph nodes and related tissues, in the same way as regular pathology would do.

The AIDS AMC is a National Cancer Institute-supported clinical trials group founded to support innovative trials for AIDS-related cancers. The AMC mission is to investigate new treatment and prevention interventions for malignancies in people living with HIV and to study the pathobiology of these tumors in the context of clinical trials. The AMC fellowship, a highly competitive program was established to encourage and foster the development of clinical investigators in Sub-Saharan Africa to pursue careers in clinical research trials in HIV-associated malignancies within the context of the AMC.



## Maize is the staff of life

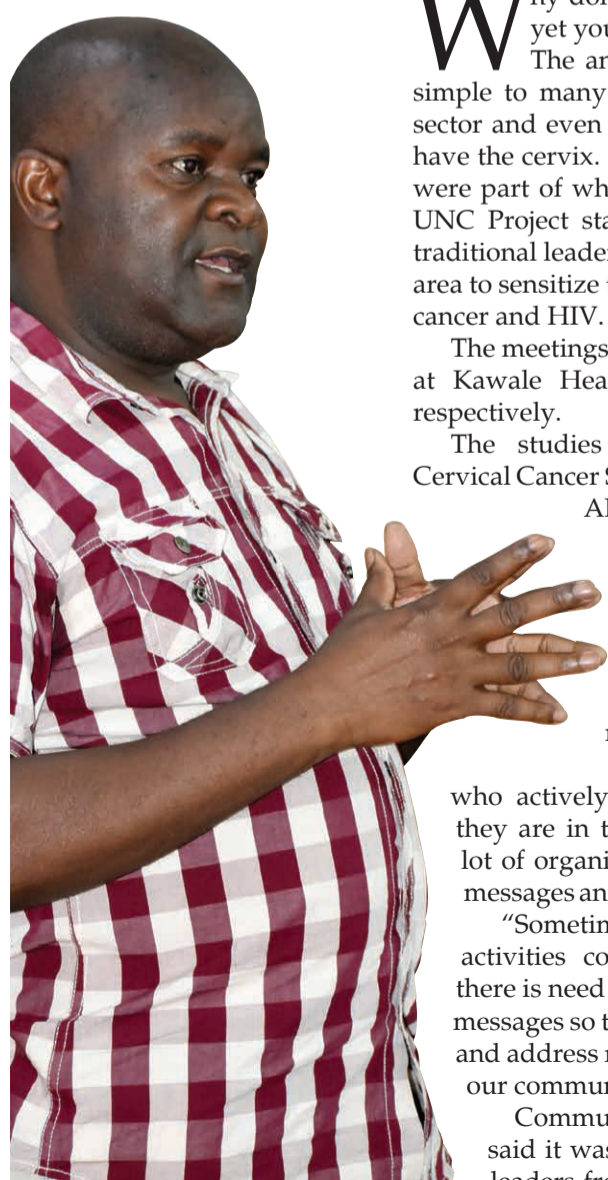
Artist Michael Kapalamula, renowned for painting various murals within UNC Project buildings was recently caught in the thick of things doing artworks for data storage containers at the UNC Project guest house.

He explained that the green maize he was painting on the containers symbolized a healthy life as that is where life hinges on.

"The painting is highlighting maize in the field. Maize is staple food for our country and in the painting it basically stands for nutrition. Without good nutrition, we become sick. Thus before we start taking medicine, let's ensure that we are nutritionally sound," he said.

A staff is support used to prevent someone from succumbing to weakness.

# Community dates traditional leaders to introduce new studies



Introducing the meeting: Community educator Alfred Chitema.  
Photos: Callisto Sekeleza

Why don't men suffer from cervical cancer yet you say they can spread it to women? The answer to the question may appear simple to many working in the medical research sector and even to the general public. Males don't have the cervix. However, this and other questions were part of what the community team and other UNC Project staff faced recently when they met traditional leaders from the UNC Project catchment area to sensitize them on new studies in the areas of cancer and HIV.

The meetings were held on 27 and 29 November at Kawale Health Centre and Bwaila Hospital respectively.

The studies being introduced were: PEER Cervical Cancer Study presented by Wezzie Dunda, AMC099 (Cervical cancer) and 'Tonse Pamodzi'.

Members of the community team, community advisory board, and government officials all participated in handling the questions, helping in clearing mists concerning such research.

One of the traditional leaders who actively put across questions said when they are in the communities they often face a lot of organisations all coming to give various messages and interventions to the communities.

"Sometimes we are overwhelmed with activities coming from various corners and there is need for us to properly comprehend the messages so that we can also inform our subjects and address related issues when they crop up in our communities," he said.

Community educator Alfred Chitema said it was always necessary that traditional leaders from the Project's catchment area be informed of the studies which were being undertaken as this would also help in curbing rumours and misconceptions.



A community leader asking on issues surrounding cervical cancer



Presenting 'Tonse Pamodzi': Chimwemwe Baluwa



Presenting 'PEER' cervical cancer: Wezzie Dunda

# PICTORIAL FOCUS



Here are some highlights of activities which have been happening within UNC Project recently.



UNC Project staff come together before the march to commemorate the World Antibiotic Resistance Awareness Week commenced on 20 November 2019. Photos: Callisto Sekeleza

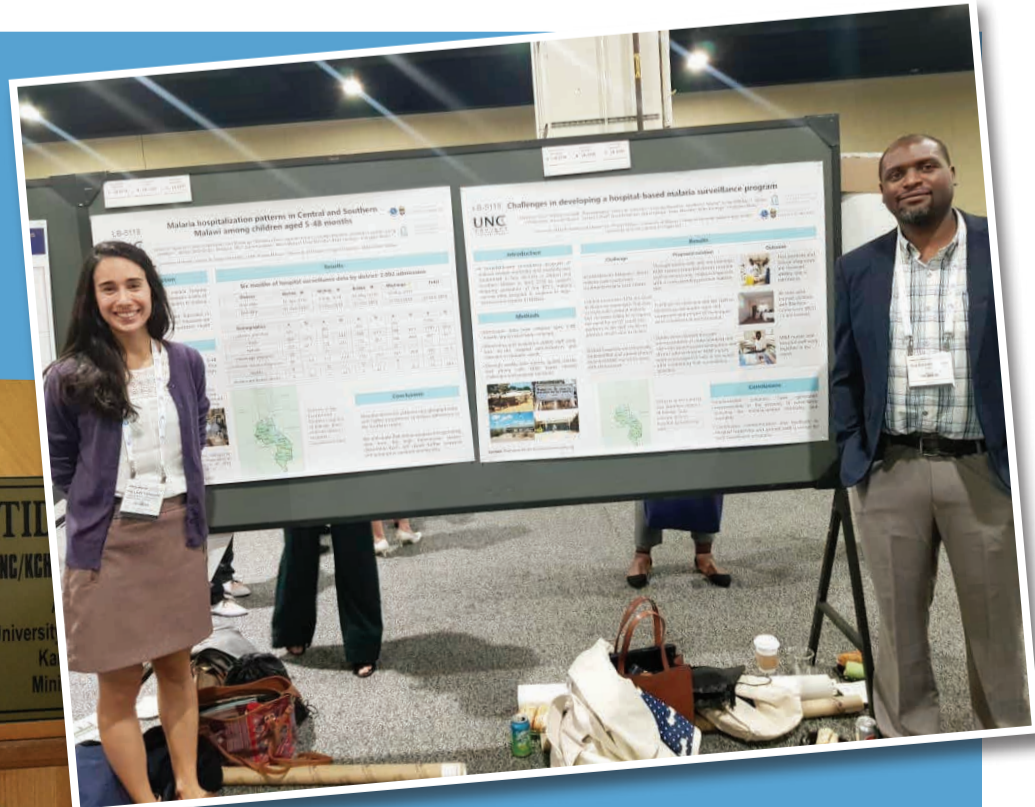
KCH Hospital Director Dr. Jonathan Ngoma and UNC Project Country Director Innocent Mofolo during the antibiotic resistance awareness march.



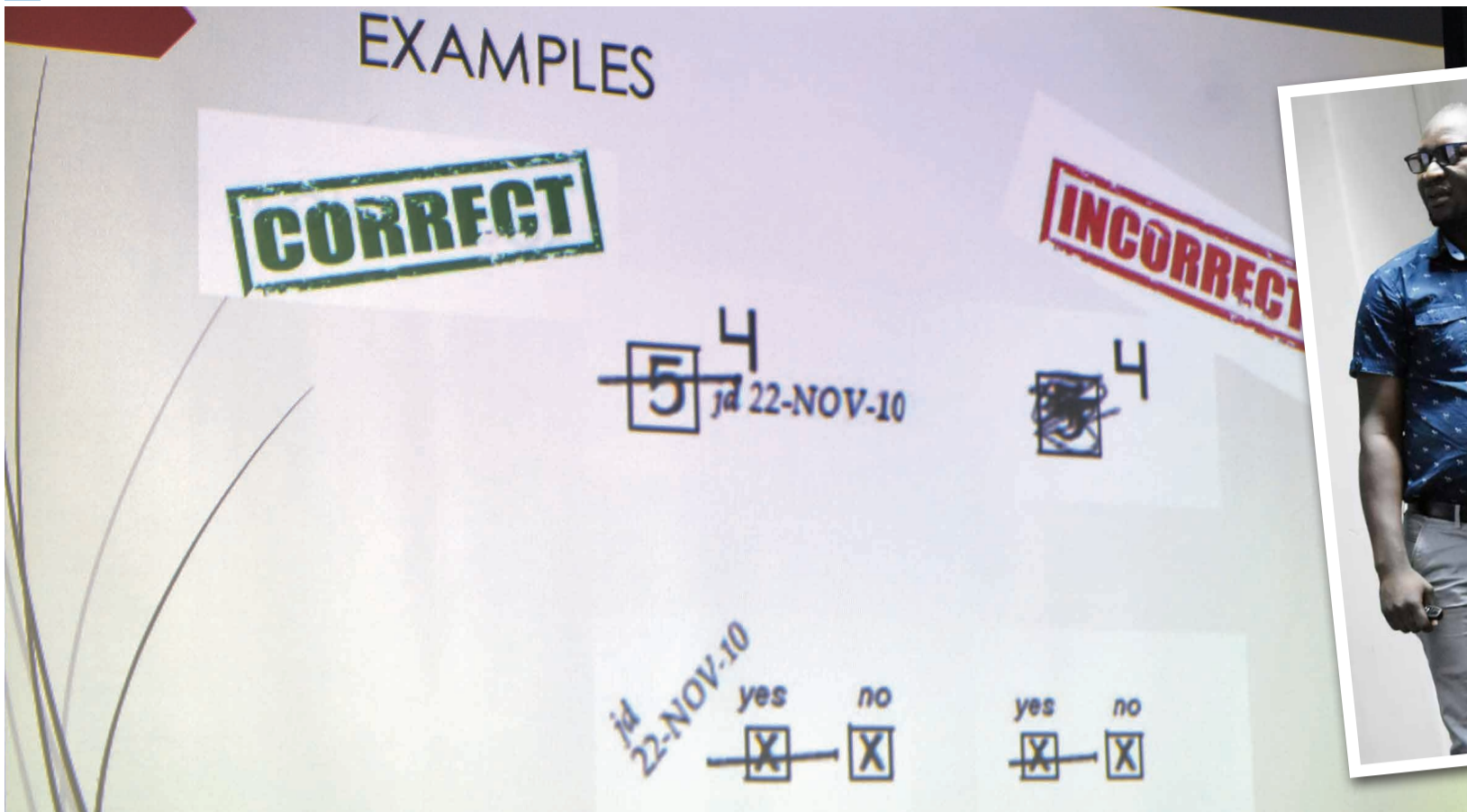
UNC Project staff soon after the 'Think Pink' cancer march on Saturday 27 October 2019.



UNC Pharmacy students Tyler and Amy presenting on anti-microbial resistance during the general staff meeting at Tidzwe on September 18 2019.



Dr. Hillary Topazian and Tisu Mvalo presenting a poster on MVP evaluation at the American Society of Tropical Medicine and Hygiene (ASTMH) annual conference in Washington DC on November 21 2019. Photo courtesy of Dr. Tisu Mvalo



Mathews Mukatipa presenting on Good Clinical Practices. Photos: Callisto Sekeleza

# “Acknowledge mistakes’ in source documentation



Dr Lameck Chinula displaying use of a thermocoagulator in the treatment of cervical cancer.

Mistakes happen. Everyone can make mistakes. However, don't complicate the situation in unthoughtful efforts to conceal the mistake. That's another mistake.

This was a hot discussion during a presentation by Data Officer Mathews Mukatipa on Good Clinical Practice (GCP) during a study specific training which took place on Thursday December 12 2019 for staff involved with the LCC1905 cervical cancer project.

And Clinical Site Research Leader

Dr. Lameck Chinula advised members present that whenever they wanted to effect a correction, they had to think twice.

“It's very easy to find a trail of mistakes. Before you want to correct discuss with the study coordinator. It may be a deviation. The problem is when you want it to look like a right thing while it was wrong,” he said.

In a move to ensure good clinical practice, Chinula encouraged all staff involved in studies to ‘work as a team.’

## Study staff oriented on ‘Tonse Pamodzi’



Facilitators and participants familiarisation training. Photos: Callisto Sekeleza

Staff from Bwaila who will be conducting the Tonse Pamodzi study were on Friday 6 December 2019 taken through the study and how it will be conducted.

According to Dr. Friday Saidi who will be leading the team in Malawi the two-day training was aimed at finalizing the counseling intervention manual as well and orientating staff on the study overview.

Protocol chairs Dr. Ben Chi from the US and Dr. Wilbroad Mutale from Zambia led the orientation. In attendance were also Kellie Freeborn and Mildred Lusaka who are the team leaders for Zambia.

‘Tonse Pamodzi’ literally meaning ‘together as one’ is a pilot study to be conducted at Bwaila Hospital, Malawi and Chipata Level 1 Hospital in Zambia starting from mid January in 2020.

The full title of the pilot study is

‘An integrated strategy to support antiretroviral therapy (ART) and pre-exposure prophylaxis (PrEP) adherence for HIV prevention and breastfeeding women’.

The inclusion criteria for participants in the study are: HIV positive pregnant women initiating ART, and HIV negative pregnant women at high of HIV acquisition initiating on PrEP. All these have to be of age 18 years and above.

# '2019, A REMARKABLE YEAR'

## Staff, partners get together

Country Director Innocent Mofolo has described 2019 as remarkable year in terms of operations of the UNC Project especially in research.

He was speaking on Saturday December 14 2019 during the UNC Project end of year party before staff, UNC students, members of the community advisory board (CAB), members of media partnership initiative and other invited guests.

He said it was important to celebrate contributions of staff and partners as the strength of the Project lied in community sense of purpose.

"2019 was remarkable. It was a year that we have been conducting complicated studies requiring more expertise for instance the HIV and other prevention studies like the HPTN 084 and AMP (Antibody Mediated Prevention) which are complicated to conduct," he said, adding that the studies have got potential to change or contribute to the health system in Malawi and the entire world.

Mofolo also said 2019 saw a change in the reach of operations of the UNC Project.

Said he: "We now have presence in Mulanje, Phalombe, Machinga, Kasungu and Mchinji. I am very grateful of this movement. I thank you for all for your dedication."

He also announced great news for UNC Project for the funding from the Fleming Fund to strengthen microbiology services for 11 labs - 8 human health labs and 3 animal health labs with a focus on anti-microbial resistance.

"This shows that the funders have trust in us," he said.

UNC Project International Director Irving Hoffman thanked all for their contribution in the operations of UNC Project and wished them a happy festive season.

During the gathering management also recognized retiring and long serving members and CAB members of the UNC Project.



Left: Country Director Innocent Mofolo presenting his end of year speech.

Right: Merry-making during the 2019 end of year party. Photos: Lawrence Chaduka



Caregivers presenting festive season gifts to pre-school kids at Dzama. Photo: Callisto Sekeleza





UNC PROJECT PEOPLE

# UNC PROJECT HONOURS FOUR



**MICHAEL MWACHANDE CHIZOMBE**

He joined the UNC Project in March 1999. He has previously worked with Irving Hoffman prior to the establishment of UNC Project. He works as stores officer.

“For one to stay longer in one place they have to be dedicated to their work. They also have to understand what their employers want, coupled with discipline,” he once said some years ago

He was working at Queen Elizabeth Central Hospital as hospital attendant since 1989. He knew UNC International Director between 1993 and 1994 who was also conducting some studies at the hospital.

He joined UNC Project at Hoffman’s invitation and started out as head clinic aide. In 2006 he was assigned to handle stores where he is up to now.

He likes listening to music and following current affairs.



**ESNATH MSOWOYA MKANDAWIRE**

She joined UNC Project in December 1999 and has also worked for various studies.

“I am a nurse...I don’t want to divert. If I can divert, then maybe I can go into full time palliative care. I have passion for my job,” she once said some years ago.

She worked at Mlale Mission Hospital between 1995 and 1998 and also worked for one year at Khongoni Health Centre at Kasiya before she joined UNC Project.

She advises: It’s good to stay at one workplace for long so that you can develop and learn a lot of things. Even if today you are told that your contract would not be renewed, you can be positive looking at the gains you have made.

For her nursing career was not by mistake; ‘it came from God.’

In her free time she likes watching television, singing, visiting patients-counselling them and giving them comfort.



**YVONNE NONHLANHLA MAKALA**

She started work in September 1999 and has been working as nurse for various studies.

A Malawian of South African origin, she did her nursing studies at St. Josephs’ Nursing School in Chiradzulu. She worked with Dr. Bhojani’s Surgery in Blantyre and World Vision before she joined UNC Project as nurse.

“My secret for long service lies in these pillars: unity, loyalty, obedience and discipline.

“An added secret has also been in my ability not to generalise things. Each employer is unique and has to be considered as such. Both employers and employees have got weaknesses,” she once said some years ago

She thanks UNC Project for being there for her and advises fellow staff to ‘observe more by watching and clinging on’.

She enjoys reading and sight-seeing.



**THOM AFRICA KAUNDA**

He started work in February 1999. He was the first driver of UNC Project.

“For me it’s not good to change jobs anyhow. I believe in staying at one place,” he once said some years ago

He says when UNC project was starting, the first two vehicles to be bought were Toyota Hilux Raiders. These were BL6819 and BL6916.

He recalls: “When we were just starting, there was a lot of work especially in regards to driving to sensitisation meetings and involving map reading. When the studies were just starting, there were also many misconceptions among the communities with others likening us to blood suckers. At times were were nearly beaten up in the villages.

He says he likes hard work and honesty.



Photos: Lawrence Chaduka



Photos: Callisto Sekeleza

## Lennie, beating the riding odds

**Please tell us who you are.**  
I am Lennie Mphande, 27. I am one of the evaluation assistants for the Malaria Vaccine Implementation Programme. I started work around April 2019.

**What does your work involve?**  
We evaluate the malaria vaccine. For instance, if an under five kid dies, we go to the deceased’s family and we speak to them –verbal autopsy- we find out more about the history of the child for instance what the child was suffering from, what kind of vaccines they received, hoping that in the years coming such deaths would be reduced.

**How far do you ride from UNC**

**Project?**  
From here I ride to as far as Mitundu which is a distance of about 35.6 km. We also go beyond Mitundu to Chiunjiza which is about 68 km from Tidziwe.

**Where did you learn riding?**  
I learnt riding here at UNC Project.

**What was your first experience riding a motor bike like?**  
After hearing stories about how tough riding was, it was at first scary. I was afraid but after the first lessons I started enjoying it. I forgot all the stories. I can go even to the maximum recommended acceleration speed.

**Where have you worked before you came to UNC project?**

I have ever worked for the Malawi Electoral Commission where I was doing field data collection and I have experience working with communities especially in the rural areas.

**Any challenges concerning riding?**  
It’s challenging when riding in the sandy roads.

**Have you ever fallen down riding?**  
(Laughter) In my work I have never fallen down. I try as much as possible to avoid falling down.

**What do you like about your job?**  
I like meeting new people, new environments. Chatting with chiefs, working hand in hand with volunteers from the village.

UNC Project People will be a regular feature in each issue of the Tidziwe POST.

Do you know someone with anything interesting or unique at UNC Project?

Please email your suggestions to [csekeleza@unclilongwe.org](mailto:csekeleza@unclilongwe.org) indicating name and department the individual is working in.