

Cholera Annotated Bibliography

Deepthi R, Sandeep SR, Rajini M, Rajeshwari H, Shetty A. Cholera outbreak in a village in south India- Timely action saved lives. *Journal of Infection and Public Health*. 2013; 6(1): 35-40

This article described a specific outbreak of cholera that was studied and treated in India. The report began by generally detailing the causes of most outbreaks of cholera in India, like water pollution, and then described a specific plan that was implemented that resulted in a 0% mortality rate. In its discussion, the article presented preventative measures and an overall review of what should be taken from the study. Because the article described a study, it provided a copious amount of statistics and data, which may be useful in comparing global cholera data. Unfortunately for my purposes, the article remained very focused on one specific study in India. If I do not pursue cholera in India, this very detailed paper may become impractical to me, but in general, the nature of the paper fit very well into my plan to discuss and compare cholera globally.

MacLachlan A. The Quake that Brought Back Cholera. National Institute of General Medical Sciences [Internet]. 2011 [cited 2013 September 5]; Available from: <http://publications.nigms.nih.gov/insidelifescience/cholera.html>

In this article, MacLachlan demonstrated how a not uncommon occurrence, like an earthquake, can lead to an outbreak of cholera. The earthquake, which contaminated water sources, led to an outbreak in Haiti, a country that had not experienced a cholera outbreak in over a century. MacLachlan described methods for testing for cholera and as well as prevention and treatment options that were available in the area. She ended by pointing towards what she concluded as the best option to combat future outbreaks. Compared to the other articles, this gave more general details pertaining to the disease and did not provide much new information to me. However, the example of the outbreak in Haiti, because it led to an outbreak in Cuba, which in turn has affected the United States, is a useful link that I can include in the literature review to demonstrate how close to home and fairly easily transferable cholera is.

Schaetti C, Ali SM, Chaignat C, Khatib AM, Hutubessy R, Weiss MG. Improving Community Coverage of Oral Cholera Mass Vaccination Campaigns: Lessons Learned in Zanzibar. *PLoS ONE*. 2012; 7(7): 1-4

The focus of this study was to examine the reasons why, when offered a free cholera vaccination, only 50% of Zanzibarians accepted the treatment when 96% of Zanzibarians, when initially surveyed, seemed willing to accept the vaccination. The study found that this vast difference comes primarily from having prior obligations on the day the treatment was offered. Other reasons included a lack of communication pertaining to the campaign, illness on the day of and fear of side effects. With this

information, researchers may go forth and make changes to lessen the difference between those willing to get the vaccine and those who may, in the future, actually become vaccinated. This article was useful to me because it gave another example of the global relevance of cholera, this time in a different country. It also describes treatment and prevention strategies, which I can compare from region to region, but more details about how the vaccine itself worked have been more useful.

Waldman RJ, Mintz ED, Papowitz HE. The Cure for Cholera- Improving Access to Safe Water and Sanitation. *The New England Journal of Medicine*. 2013; 368: 592-594

This article gave an overall account of the epidemic of cholera in the world. It pointed to several improvements that have been made in the last twenty years, but made it clear that cholera is nowhere close to being eradicated. Many significant statistics were included; for example, the article indicated that there are more than 2.5 billion people in the world who do not have access to consistently uncontaminated drinking water. Many reasons for this lack of clean water were provided. This article also gave many useful details and statistics pertaining to the disease, which is useful to me because the focus of my literary review will be to compare different cholera from region to region. Overall, it was useful because it offered a realistic view on the status of cholera globally, particularly in developing countries.

Zuckerman JM, Rombo L, Fisch A. The true burden and risk of cholera: implications for prevention and control. *The Lancet Infectious Diseases*. 2007; 7(8): 521-530

In this article, cholera was described in depth scientifically. Its source as well as its prevalence in the world was the focus of the review. Most notable is one paragraph that described cholera outbreaks as, “often occurring after war, civil unrest and natural disasters.” Later, reasons for the current severity and presence of cholera were explained. Perhaps the most useful one I have read this far, this article gave many details that I had not found before. It offered many charts and graphs that illustrated the authors’ point. Furthermore, the articles’ topic could not have been better geared for my intentions because it discussed cholera globally instead of focusing on a specific region or country like a few other articles. It also took a more scientific approach instead of an informal approach, which I think I will find to be much more of an asset when writing my literary review.