Soil-transmitted helminthiasis is no longer a public health problem in Burkina Faso

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1. Introduction

- Burkina Faso: Country in West Africa (area: 274 200 km²)
- Population: 20,505,155 (As of the 5th general census of population and housing, 2019)
- Health districts (HDs): 70
- Neglected Tropical Disease (NTD) Status: Five preventive chemotherapy NTDs endemic following baseline mapping. Also endemic with 12 other NTDs.
- The NTD control and elimination program is led by the National NTD Program (NTDP).
- Since 2019, the NTDP and its partners have achieved an important goal related to soil transmitted helminths (STH).
2. STH Baseline mapping

- Soil Transmitted Helminth – Schistosomiasis (STH-SCH) baseline mapping was conducted between 2004-2005.

- Results: All HDs were co-endemic for SCH and STH

- STH prevalence in the 86 sites surveyed ranged from 1.8% to 75%.

- STH average prevalence among school age children (SAC) ranging from 1.8 - 48.7% in 48 out of 70 HDs

- Of the 48 endemic HDs, 15 HDs had STH prevalence >20%
### 3. Mass Drug Administration for STH

#### Mass Drug Administration (MDA)

- Through LF MDA and/or SCH MDA, endemic HDs received between 7 – 24 rounds of treatment since baseline mapping

<table>
<thead>
<tr>
<th>Population groups</th>
<th>Treatment drugs</th>
<th>Treatment frequency</th>
<th>Period</th>
<th>MDA platform</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-school age children (12-59 months)</td>
<td>Mebendazole</td>
<td>Twice</td>
<td>Since 2007</td>
<td>Vitamin A supplementation</td>
<td>Door-to-door distribution during Child Health days that include vitamin A supplementation</td>
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<tr>
<td>School age children (5-14 years)</td>
<td>Albendazole</td>
<td>Once every two years</td>
<td>2004-2006</td>
<td>Schistosomiasis MDA (School and community-based)</td>
<td>Albendazole treatment with praziquantel stopped after integration with LF MDA</td>
</tr>
<tr>
<td>Total LF eligible population (≥ 5 years old)</td>
<td>Albendazole + ivermectin</td>
<td>Once a year (twice a year in 4 districts in Sud-Ouest region)</td>
<td>Since 2001</td>
<td>LF MDA (community-based)</td>
<td>Geographical coverage was gradually scaled up to 100% in 2005, and then has been scaled down since 2012</td>
</tr>
</tbody>
</table>
4. Impact Assessment survey of MDA

- Sentinel sites and LF/TAS-STH (2016-2019):
  - SCH- STH surveys were carried out in 26 sentinel and 51 spot check sites in 50 HDs: 1 site per HD in 31 HDs; 2 sites per HD in 13 HDs; 3 sites per HD in 2 HDs; and 4 sites per HD in 2 HDs.
  - A total of 11,065 children aged 5-15 years old were evaluated.
  - TAS- STH integrated surveys were conducted in 20 LF evaluation units (EUs) in 48 HDs with an average of 30 clusters per EU. A total of 6,927 children aged 6-7 years old evaluated in 650 sites.
- Test: 1 Kato-Katz slide per child.
- Targets reached: In total, 66 HDs were assessed by either SCH- STH or TAS- STH surveys.
5. Surveys results (1/2)

- STH prevalence findings during 2016-2019 integrated SCH-STH sentinel site surveys ranged from 0.00-4.49% (median prevalence 0.00%)
- No moderate or heavy intensity infection was found in any HD
- 1 HD (Nanoro) in Centre-Ouest region and 2 HDs (Daffra and Dande) in Hauts-Bassins had the following prevalence: 4.49%; 3.77%; and 2.68%
- 41 HDs: prevalence=0%
5. Surveys results (2/2)

- Assessment through TAS-STH surveys (2016-2019):
  - 12 HDs with prevalence <2%
  - 30 HDs were classified as having a prevalence between 2% and 10%
6. Conclusion

• These results in SACs showed that multiple years of deworming may have successfully eliminated STH as a public health problem in Burkina Faso, however, further surveys involving multi-age groups with spatially regulated design may be needed to ascertain this.

• In view of these results, STH MDA is no longer needed.

• Deworming will continue to be implemented through child health days (children aged 12 to 59 months), to maintain the progress made in controlling STH in Burkina Faso. It should be noted this does not cover all SAC at risk of STH.

• Case treatment will continue in health facilities.
THANK YOU
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