

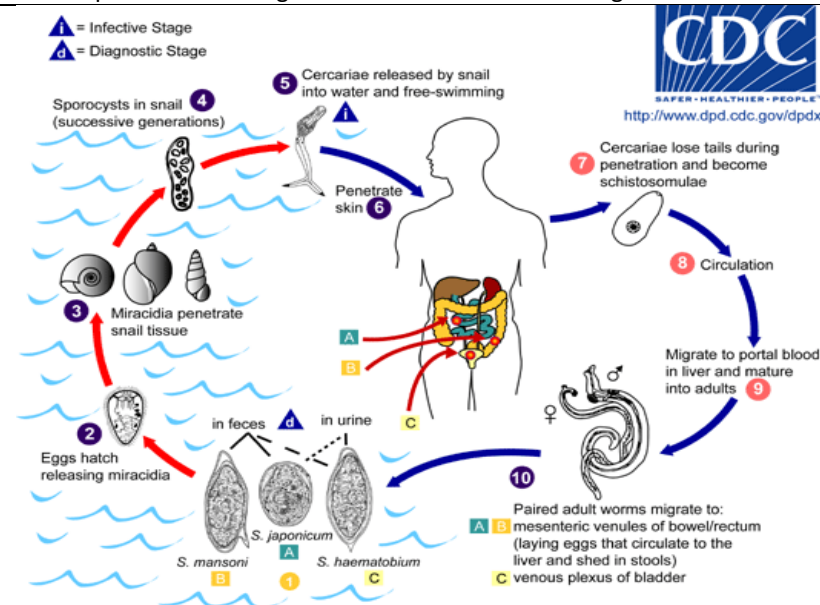
WORM of the WEEK

Schistosomiasis

Schistosoma mansoni, *S. haematobium*, *S. japonicum*, *S. mekongi*, *S. intercalatum*

What is it?

- A chronic, parasitic disease caused by blood flukes (trematode worms) of the genus *Schistosoma*, via 5 main species.
- Over 207 million infected worldwide, with 85% in Africa;
- 700 million estimated at risk in 74 endemic countries;
- Mostly in poor communities without access to safe water;
- Acquired via drinking contaminated water or through the skin.



Symptoms of Infection

- Caused by body's reaction to the worms, NOT by worms;
- Abdominal pain, diarrhoea, blood in the urine/stool;
- Rash or itchy skin can occur within days of infection;
- Fever, chills, cough, muscle aches within 1-2 months;
- Enlarged liver/spleen;

Populations/Countries Affected



Diagnosis

- Egg presence in stool or urine.
- Blood testing for certain species are available but requires waiting of 6-8 weeks after the last exposure.

Treatment

- **Praziquantel** is the drug of choice for all species.
- **Oxamniquine** has been found to work for *S. mansoni* in areas where Praziquantel is less effective.

Prevention & Control

- Based on preventive treatment, snail control, improved sanitation and health education;
- WHO strategy focuses on reducing disease via periodic, targeted drug treatments – which involves regular treatment of all people in at-risk groups;
- Targeting school-aged children, at-risk adults, and/or entire communities in endemic areas – depending on prevalence.

