



Western Visayas

School-Based Intestinal Helminth Control Project of: DepED - DOH - UPM - J&J



Johnson Johnson

Johnson Johnson (Philippines), Inc. War on Worms in Western Visayas

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Soil Transmitted Helminthiasis (STH) or intestinal worm infection is a leading public health problem in the Philippines. Its symptoms include diarrhea, tiredness, abdominal swelling and pain. A nationwide study of revealed that around 7 out of 10 pre-school children in the Philippines are infected with intestinal worms. Heavily infected children may pass out around 10 million worm eggs per day in their feces. If untreated, its effects may include impaired cognitive development, reduced work capacity, poor concentration, and increased school absenteeism. In severe cases, STH complications may be fatal.

Last February 2007 J&J in partnership with the Task Force for Child Survival and Devel opment embarked on a Global Mebendazole Donation Program where the Philippines was chosen among the beneficiaries. The country received 600,000 doses of Mebendazole 500mg tablets per year for two years, which could benefit around 300,000 children. The provinces of Aklan, Antique and Capiz and the City of Roxas were selected as the beneficiaries based on the burden of infection (average 73%), nutritional status (underweight, 35-47% and stunted, 36-41%), need for deworming drugs, and adequacy of drugs for the number of public elementary school children in these areas. The project is a collaborative effort between J&J, the University of the Philippines in Manila, the Department of Health, the Department of Education, and the Local Government Units. It aims to do a baseline survey followed by the conduct of school-based mass drug administration (MDA) for all public school children twice a year for 2 years with monitoring surveys in the middle and at the end of this period. This is accompanied by advocacy meetings to encourage the local governments to commit to provide drugs for the sustenance of the program beyond 2 years and address the sanitary concerns that are associated with STH. In 2 years, the program hopes to reduce cumulative prevalence of STH by 50%, reduce prevalence of heavy infection to near 0% as well as reduce malnutrition rate, reduce absenteeism, and improve academic performance of the public school children.

Currently, the program has already conducted the baseline survey which revealed an average STH prevalence of 71% with around 41% having heavy intensity infections in the covered areas. The first 2 MDAs have been conducted with an average of 73% and 82% coverage, respectively. This is to be followed by the monitoring survey, 2 more MDAs and the end of program monitoring survey.

With continuing advocacy, the program hopes to be self-sustaining after 2 years with the political commitment of the local government to provide resources for its continuation. If successful, this program would be the first model that would provide both evidence of effectiveness and feasibility of execution of an integrated STH control program in the regional level.

