

# **Identifying non-responsive schistosomiasis and soil-transmitted helminthiasis areas following treatment and determining the causes**

**Dr. Boubacar Diop, Ministry of Health, Senegal**

**Dr. Rubina Imtiaz, STH Coalition**

**Dr. Jahirul Karim, Ministry of Health, Bangladesh**

# Discussion - Three questions

- **What is the definition of a non-responsive area?** Does this vary by species, location, and programmatic goal?
- **How can programs identify persistent hotspot areas?** Which monitoring and sampling approaches could be used?
- **How can programs determine the cause of sub-optimal response to treatment?** What qualitative and quantitative tools are needed to identify the root causes of poor treatment response?

# OR Questions

- **Differentiating re-infection vs non-response**
  - **Biological hotspots vs programmatic hotspots**
- **Definition will vary by species, location, culture, ethnic group, genetics age**
- **Vary by programmatic goal – control vs elimination**

# OR Questions

- **Development and testing of standardized protocols**
  - Who do you test?
  - Which age groups?
  - How often / interval
  - Which diagnostic
- **Context specific - use of microdata**
- **Need to redefine efficacy of drugs**
- **What is evidence base for existing thresholds for MDA**