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