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TABLE 1. RESULTS OF POPULATION-BASED EPIDEMIOLOGICAL STUDIES FOR S. MANSONI
INFECTION FROM DIFFERENT COUNTRIES

Country	Population examined	Age group with peak prevalence-years (%)	Age group with highest infection intensity-years (mean epg)	Male/female prevalence rate	Reference
Brazil	417	20-24 (100)	10-14 (301)	0.9	Lehman et al., 1976 (232)
Brazil	777	15-19	15-19	1.1	Guimaraes et al., 1985 (182)
Egypt	8 712	11-15	11-15	-	El Alamy et al., 1977 (131)
Egypt	537	10-19 (87)	10-19 (581)	1.1	Abdel-Wahab et al., 1980 (10)
Ethiopia	343	10-14 (57)	10-14 (213)	1.5	Hiatt et al., 1976 (190)
Ethiopia	796	11-15 (70)	Male: 11-15 (180) Female: 6-10 (135)	1.7	Lemma et al., 1979 (234)
Kenya	416	10-19 (98)	Male: 20-24 (1 019) Female: 10-14 (1 026)	1.1	Arap Siongok et al., 1976 (34)
Kenya	1 393	60- (72)	0-4 (344)	1.2	Smith et al., 1979 (345)
Puerto Rico	907	15-19	20-29	1.4	Hiatt et al., 1980 (191)
Sudan	1 747	10-19	10-19	-	Omer et al., 1976 (282)
Uganda	705	20-29 (42)	20-29	1.1	Bukenya et al., 1986 (74)
Zaire	547	11-25 (100)	11-18	-	Gryseels et al., 1987 (179)

TABLE 2. RELATIONSHIP BETWEEN S. MANSONI INFECTION AND CLINICAL FINDINGS

Country	No. examined	Age (years)	Prevalence (%)	Correlation with infection or stool eggs per gram					Reference
				Abdominal pain	Diarrhoea	Blood in stool	Hepatomegaly	Splenomegaly	
Brazil	417	All	74	No	No	Yes ^a	Yes	Children: yes Adults: no	Lehmen et al., 1976 (232)
Egypt	537	All	74	No	No	Yes	Yes ^b	No	Abdel-Wahab et al., 1980 (10)
Ethiopia	336	7-16	88	No	No	No	No	No	Hiatt et al., 1977 (192)
Kenya	416	All	82	Yes	No	Yes	Yes	Yes	Arap Siongok et al., 1976 (34)
Kenya	374	All	47	Yes	No	Yes	No	No	Smith et al., 1979 (345)
Liberia	184	6+	33	No	No	No	No	Yes	Holzer et al., 1983 (196)
Saudi Arabia	254	17-24	66	Yes	No	Yes	No	No	Gremillion et al., 1978 (175)
Sudan	1 747	All	48	No	Yes	Yes	No	No	Omer et al., 1976 (282)
Zaire	549	All	96	Yes	Yes	Yes	Yes	Yes	Gryseels et al., 1987 (179)
Zambia	703	5+	69		Yes	Yes	Yes	No	Sukwa et al., 1986 (356)

Note: ^a By occult blood test.

^b But only in subjects aged <20 years.

TABLE 3. LOCATION OF COLONIC POLYPOSIS IN SCHISTOSOMIASIS
DUE TO INFECTION WITH S. MANSONI

Investigator	No. of cases studied	Rectum	Sigmoid colon	Descending colon	Transverse colon	Ascending colon
Bessa et al. (59)	20	14	19	8	3	
El-Masry et al. (139)	108	108	108	70	23	2

TABLE 4. SYMPTOMS OF COLONIC POLYPOSIS IN SCHISTOSOMIASIS
DUE TO INFECTION WITH S. MANSONI

Investigator	No. of cases studied	Mean age in years (range)	Bloody diarrhoea	Abdominal pain	Tenesmus	Abdominal mass
Bessa et al. (59)	20		20	13	13	13
Bessa et al. (60)	40	24 (17-45)	36	40	36	30
El-Masry et al. (139)	108	28 (10-59)	108			15

TABLE 5. COMPARISON OF PREVALENCES OF HEPATITIS B VIRUS ANTIGENAEMIA BETWEEN PERSONS WITH AND WITHOUT S. MANSONI INFECTION

Country	With <u>S. mansoni</u> infection				Without <u>S. mansoni</u> infection				Statistically significant	Reference	
	Subjects	No. examined	No. (+)	%	Subjects	No. examined	No. (+)	%			
Brazil	Hospital patients	103 ^a 66 ^b	8	7.8	Blood donors	600	8	1.3	Yes No	241	
Egypt	Hospital patients	167 ^c	22	13.2	Hospital patients	54	8	14.8	No	35	
Egypt	Hospital patients	296	33	11.2	Blood donors	97	2	2.1	Yes	142	
"	Egypt	Villagers	148	4	2.7	Villagers	150	5	3.3	No	202
"	Egypt	Hospital patients	916 ^c	67	7.3	Hospital patients	97	2	2.1	Yes	404
"	Kuwait	Hospital patients	26 ^a	13	50.0	Blood donors	97	4	4.1	Yes	18
Malawi	Hospital patients	49	7	14.3	Blood donors Students	96	3	3.1	Yes	265	
Sudan	Hospital patients	20 ^a	6	30.0	Medical staff	41	6	14.8	Yes	107	

Note: ^a Hepatosplenic schistosomiasis.
^b Intestinal schistosomiasis.
^c With S. mansoni and/or S. haematobium infections.