Schistosomiasis treatment impact survey in selected districts in Ghana 2022-2023





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Presentation outline

- Background
- Objectives
- Results
- Conclusion
- WHO SCH roadmap

SCH Control in Ghana

- The aim of the GHS Schistosomiasis Programme is to control/ eliminate schistosomiasis as a public health problem by 2030
- The main strategy is annual mass drug administration for the school-age and high-risk adults
- Nationwide mapping was carried out in 2008, with surveys conducted in schools across the country

Results-Prevalence of Schistosomiasis – 2008 & 2015

Prevalence	2008	2015
High(>50%)	47	3
Moderate(10-50%)	138	54
Low(0-10%)	31	159

SCH Control in Ghana

- Mapping was used to classify districts as requiring treatment every year, or every two or three years
- Since then, the GHS/NTD Programme has delivered treatments through either school- or community-based deworming campaigns
- In total, nearly <u>20 million treatments</u> have been provided since 2008

SCH Control in Ghana

• Over 15 years, Ghana has successfully delivered control of SCH using PZQ

• As a result, the burden of schistosomiasis in our communities may have reduced

• But by how much?

• What is the prevalence of SCH in the unmapped/ mapped areas

• We urgently need surveys to tell us about the current situation

Goal of survey

• To provide a detailed understanding of the distribution/prevalence of Schistosomiasis and Soil Transmitted Helminths in school aged children (5 to 14 years)

Specific Objectives

- Determine the prevalence of infection for SCH species in 22 districts in Ghana
- Describe *S. haematobium* intensity among school age chn in 22 districts in Ghana (based on quantitative egg counts)
- Determine the prevalence of STH types (Hookworm, Ascaris, Trichuris etc) in 22 districts in Ghana
- To measure the prevalence of macro and micro haematuria in study participants

Methods-Study Design

- Cross-sectional survey among SAC
- Interview with semi-structured questionnaire and lab diagnosis
- Kobo collect was used for data collection

Methods

- Two-stage cluster surveys surveying 15 schools per district and 24 children (5 to 14 years) per school
- Stool and urine collection from selected school chn
- Kato Katz method for STH and intestinal schistosomiasis (*S.mansoni*)
- Urine filtration to examine for urogenital schistosomiasis (*S.haematobium*)

Ethics And data analysis

• Permission from RDHS, DDHS, Headteachers, Parents & children

Data analysis

- Descriptive analysis
- Bivariate and multivariate analysis

Distribution of districts, schools and specimen, SCH treatment impact assessment, 2023

		No. of Sub Districts	Number of Schools	Urine samples	Stool samples
Region	District	NO: OF SUD DISTINCTS	Sampled	collected	collected
EASTERN	AKWAPIM NORTH	6	5 15	361	361
EASTERN	AKYEMANSA	7	' 15	361	361
EASTERN	BIRIM NORTH	5	5 15	360	360
EASTERN	FANTEAKWA NORTH	6	5 15	360	360
EASTERN	FANTEAKWA SOUTH	5	5 15	360	360
EASTERN	KWAEBIBIREM	8	3 15	360	360
EASTERN	KWAHU EAST	g	15	360	360
EASTERN	KWAHU WEST	11	. 15	359	359
EASTERN	NEW JUABEN NORTH	5	5 15	360	360
EASTERN	NEW JUABEN SOUTH	6	5 15	360	360
EASTERN	OKERE	3	3 15	360	360
EASTERN	SUHUM	g	15	360	360
EASTERN	UPPER WEST AKIM	8	3 15	360	360
VOLTA	ADAKLU	5	5 15	360	360
VOLTA	AFADZATO SOUTH	6	5 15	360	360
VOLTA	AGORTIME-ZIOPE	5	5 15	360	360
VOLTA	AKATSI NORTH	5	5 15	360	360
VOLTA	AKATSI SOUTH	5	5 15	360	360
VOLTA	HO WEST	6	5 15	360	360
VOLTA	KETU NORTH	6	5 15	363	363
VOLTA	NORTH DAYI	5	5 15	360	360
VOLTA	SOUTH DAYI	5	5 15	450	450
	Grand Total	136	330	8014	8014

Prevalence of S Haematobium and Mansonia in 22 districts-2013

Count of child_id		Не	ama		Manso				
Districts	Neg	Pos	Grand Total	Prevalence	Neg	Pos	Grand Total	Prevalence	
ADAKLU	357	3	360	0.8%	360		360	0.0%	
AFADZATO SOUTH	346	14	360	3.9%	360		360	0.0%	
AGORTIME-ZIOPE	360		360	0.0%	359	1	360	0.3%	
AKATSI NORTH	358	2	360	0.6%	359	1	360	0.3%	
AKATSI SOUTH	353	7	360	1.9%	360		360	0.0%	
AKWAPIM NORTH	359	2	361	0.6%	361		361	0.0%	
AKYEMANSA	361		361	0.0%	360	1	361	0.3%	
BIRIM NORTH	349	11	360	3.1%	359	1	360	0.3%	
FANTEAKWA NORTH	315	45	360	12.5%	360		360	0.0%	
FANTEAKWA SOUTH	358	2	360	0.6%	360		360	0.0%	
HO WEST	359	1	360	0.3%	358	2	360	0.6%	
KETU NORTH	320	43	363	11.8%	363		363	0.0%	
KWAEBIBIREM	360		360	0.0%	358	2	360	0.6%	
KWAHU EAST	292	68	360	18.9%	358	2	360	0.6%	
KWAHU WEST	357	2	359	0.6%	359		359	0.0%	
NEW JUABEN NORTH	355	5	360	1.4%	360		360	0.0%	
NEW JUABEN SOUTH	355	5	360	1.4%	360		360	0.0%	
NORTH DAYI	352	8	360	2.2%	359	1	360	0.3%	
OKERE	357	3	360	0.8%	360		360	0.0%	
SOUTH DAYI	435	15	450	3.3%	450		450	0.0%	
SUHUM	346	14	360	3.9%	360		360	0.0%	
UPPER WEST AKIM	343	17	360	4.7%	359	1	360	0.3%	
Grand Total	7747	267	8014	3.3%	8002	12	8014	0.1%	

Distribution of SCH Prevalence:2008, 2015 and 2023

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Distribution SCH prevalence in nine (9) districts in Ghana :2008, 2015 and 2022



District

	Ascaris Hookworm			Trichuris				H.Nana								
District	Neg	Pos	Grand Total	Prevalenc e	Neg	Pos	Grand Total	Prevalence	Neg	Pos	Grand Total	Prevalenc e	Neg	Pos	Grand Total	Prevalence
ADAKLU	36	D	360	0.0%	360		360	0.0%	359) 1	. 360	0.3%	360		360	0.0%
AFADZATO SOUTH	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
AGORTIME-ZIOPE	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
AKATSI NORTH	36	D	360	0.0%	360		360	0.0%	359) 1	. 360	0.3%	360		360	0.0%
AKATSI SOUTH	35	9 1	360	0.3%	360		360	0.0%	359	1	. 360	0.3%	360		360	0.0%
AKWAPIM NORTH	36	1	361	0.0%	361		361	0.0%	361		361	0.0%	361		361	0.0%
AKYEMANSA	36:	1	361	0.0%	361	•	361	0.0%	361		361	0.0%	361		361	0.0%
BIRIM NORTH	35	9 1	360	0.3%	359	1	360	0.3%	360		360	0.0%	360		360	0.0%
FANTEAKWA NORTH	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
FANTEAKWA SOUTH	35	9 1	360	0.3%	360		360	0.0%	358	2	360	0.6%	360		360	0.0%
HO WEST	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
KETU NORTH	362	2 1	363	0.3%	362	. 1	363	0.3%	362	. 1	. 363	0.3%	363		363	0.0%
KWAEBIBIREM	35	9 1	360	0.3%	360		360	0.0%	360		360	0.0%	360		360	0.0%
KWAHU EAST	35	9 1	360	0.3%	359	1	360	0.3%	360		360	0.0%	360		360	0.0%
KWAHU WEST	35	Э	359	0.0%	359		359	0.0%	359		359	0.0%	359		359	0.0%
NEW JUABEN NORTH	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
NEW JUABEN SOUTH	359	9 1	360	0.3%	360		360	0.0%	360		360	0.0%	360		360	0.0%
NORTH DAYI	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
OKERE	36	D	360	0.0%	360		360	0.0%	360		360	0.0%	360		360	0.0%
SOUTH DAYI	449	9 1	450	0.2%	450		450	0.0%	450		450	0.0%	450		450	0.0%
SUHUM	35	9 1	360	0.3%	360		360	0.0%	360		360	0.0%	360		360	0.0%
UPPER WEST AKIM	35	6 4	360	1.1%	360		360	0.0%	360		360	0.0%	360		360	0.0%
Grand Total	800	1 13	8 8014	0.2%	8011	3	8014	0.0%	8008	6	8014	0.1%	8014		8014	0.0%

Association between participants and school characteristic and S. Heamatobium status

	S. He	amatobiun	n	Binary Logistic Regression mode		
	Negative	Positive	p-value			
	n (%)	n (%)		aOR (95% CI)	p-value	
Sex			0.049		0.121	
Male	3907 (96.3)	151 (3.7)		1.00		
Female	3840 (97.1)	116 (2.9)		0.82 (0.64 - 1.05)		
Age			<0.001		<0.001	
5-9	2742 (98.4)	45 (1.6)		1.00		
10-14	4880 (95.9)	207 (4.1)		2.53 (1.82 - 3.52)		
>14	125 (89.3)	15 (10.7)		7.62 (3.38 - 17.19)		
Region			0.023		0.332	
EASTERN	4507 (96.3)	174 (3.7)		1.00		
VOLTA	3240 (97.2)	93 (2.8)		0.72 (0.38 - 1.39)		

Distribution of S. haematobium Intensity-SCH treatment impact Survey

Row Labels	Light	% Light	Heavy	% Heavy
EASTERN	75	43.10%	99	56.9%
AKWAPIM NORTH	2	. 100.00%		0.0%
AKYEMANSA				
BIRIM NORTH	6	54.55%	5	45.5%
FANTEAKWA NORTH	22	48.89%	23	51.1%
FANTEAKWA SOUTH	2	. 100.00%		0.0%
KWAEBIBIREM				
KWAHU EAST	21	. 30.88%	47	69.1%
KWAHU WEST	2	. 100.00%		0.0%
NEW JUABEN NORTH	4	80.00%	1	20.0%
NEW JUABEN SOUTH	3	60.00%	2	40.0%
OKERE	3	100.00%		0.0%
SUHUM	5	35.71%	9	64.3%
UPPER WEST AKIM	5	29.41%	12	70.6%
VOLTA	52	. 55.91%	41	44.1%
AFADZATO SOUTH	7	50.00%	7	50.0%
AGORTIME-ZIOPE				
AKATSI NORTH	2	. 100.00%		0.0%
AKATSI SOUTH	5	71.43%	2	28.6%
HOWEST		0.00%	1	100.0%
KETU NORTH	24	55.81%	19	44.2%
NORTH DAYI	5	62.50%	3	37.5%
SOUTH DAYI	8	53.33%	7	46.7%
Grand Total	127	47.57%	140	52.4%



- Drastic decline of SCH/STH prevalence
- Resurgence in some districts
- More than half of the respondents were of heavy intensity of infection

Way forward

- Implementation of WHO's new recommendations for treatment of SCH
- Research into the resurgence of SCH in some districts

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Ghana Education Service

Thank you