

Albendazole cuts enteric parasite prevalence in refugees

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(HealthDay) -- The administration of a single 600-mg dose of albendazole to United States-bound refugees prior to departure from Africa and Southeast Asia reduces the prevalence of intestinal nematodes, according to a study published in the April 19 issue of the *New England Journal of Medicine*.

Stephen J. Swanson, M.D., of the Epidemic Intelligence Service in Atlanta, and colleagues conducted a [retrospective cohort study](#) of 26,956 refugees from Africa and Southeast Asia. The refugees underwent stool specimen screening for intestinal parasites. The prevalence of intestinal nematodes, schistosoma species, giardia, and entamoeba was compared among refugees who migrated before and after the U.S. Centers for Disease Control and Prevention's recommendation of presumptive

predeparture albendazole treatment.

A total of 22,586 refugees received albendazole and 4,370 did not. The researchers found that 20.8 percent of untreated refugees versus 4.7 percent of treated refugees carried one or more stool nematodes. The most common parasite in untreated refugees was [hookworm](#), and in treated refugees was trichuris. In an age-, sex-, and region-adjusted analysis, compared with untreated refugees, albendazole-treated refugees were significantly less likely to have any nematodes, ascaris, hookworm, or trichuris, but were no less likely to have giardia or entamoeba. No albendazole-related [serious adverse events](#) were reported.

"These data provide evidence that implementation of an overseas protocol for presumptive single-dose albendazole therapy in refugees was associated with substantial decreases in infections with multiple intestinal parasites," the authors write. "Targeting these diseases among refugees has yielded reductions in parasite burdens and may improve the health of this population."

More information: [Full Text \(subscription or payment may be required\)](#)

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